

# PREVENTING SON PREFERENCE AND UNDERVALUING OF GIRLS IN EASTERN EUROPE AND CENTRAL ASIA



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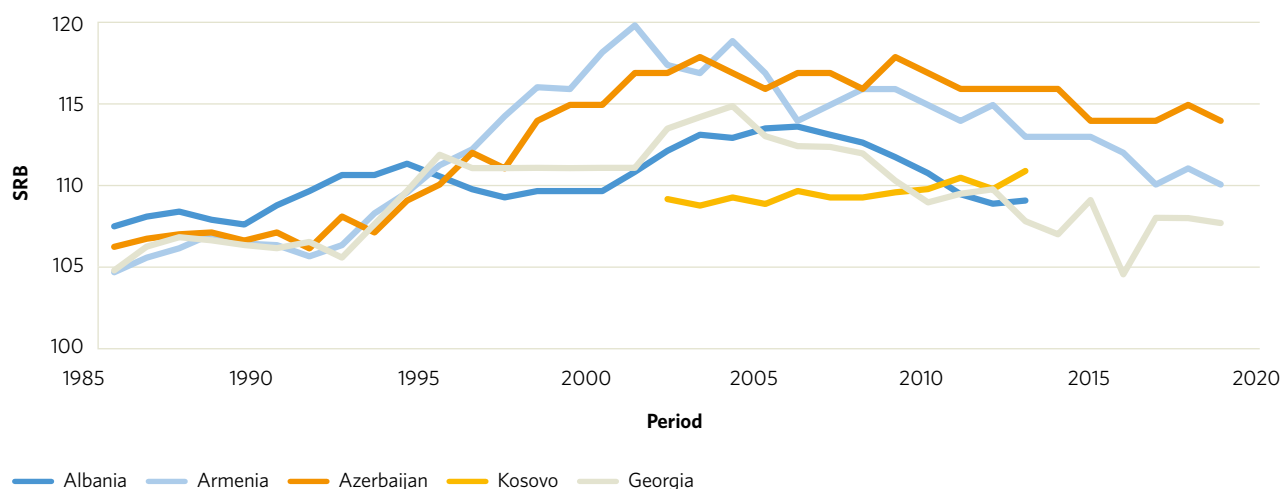
# FOREWORD

Gender-biased sex selection has emerged since the early 1990s as a widespread practice in parts of the Eastern Europe and Central Asia (EECA) region and now constitutes a significant challenge to the countries affected. The preference of many parents for sons, combined with the use of modern reproductive technologies and declining fertility, has skewed the normal ratio between male and female births in several countries, mostly in the South Caucasus and parts of South-Eastern Europe. As a result, an estimated 171,000 girls are already “missing” in the region, and there has been a growing surplus of men. Research conducted in the region suggests that gender-biased sex selection occurs in a diverse range of countries that have three elements in common: a strong preference for male offspring, declining fertility rates and access to modern ultrasound technologies. The practice has far-reaching negative consequences, as it endangers the health and rights of women and girls, perpetuates a culture of gender inequality and jeopardizes sustainable social development and stability.

For more than 20 years, UNFPA has advocated to address the issues of son preference and gender-biased sex selection. In the first global effort of its kind, UNFPA partnered with the European Union in 2017 to launch the “Global Programme to Prevent Son Preference and Gender-biased Sex Selection” project in Asia (Bangladesh, Nepal and Viet Nam) and the Caucasus (Armenia, Azerbaijan and Georgia). The Global Programme has brought together governments and local partners to collect data about sex ratios in Asia and the Caucasus, bring these issues to local, national and international policy agendas, and co-develop human-rights-based and gender-equality-focused interventions.

The European Union, represented by the European Commission, reconfirmed its long-standing commitment to the ICPD Programme of Action, including achieving zero sexual and gender-based violence and harmful practices against women and girls. The EU’s efforts to eliminate all forms of violence and harmful practices against women and girls are highlighted by numerous European Parliament reports and resolutions, as well as included in key policy documents such as the European Consensus on Development (2017), the EU Action Plan on Human Rights and Democracy (2020–2024), and the Gender Action Plan II “Gender Equality and Women’s Empowerment: Transforming the Lives of Girls and Women through EU External Relations 2016–2020”.

**Figure 1. Sex ratio at birth, selected countries and territories, 1985-2019**



Smoothed annual data from the civil registration system

# THE EMERGENCE OF A SKEWED SEX RATIO AT BIRTH IN THE REGION

Since the 1980s, available statistics indicate that the sex ratio at birth (the number of male births per 100 female births) imbalances have been increasing in a number of countries above its standard biological level of 105 male births per 100 female births (UNFPA, 2012). This phenomenon was first observed in Asian countries such as China, India, South Korea and Viet Nam, with sex ratio at birth (SRB) levels exceeding 110. Within the last decades, however, evidence pointing to abnormally high sex ratio at birth imbalances has also emerged in several countries and territories of South-Eastern Europe and the South Caucasus (Guilmoto & Duthé, 2013). Figure 1 depicts the trends in sex ratio at birth from 1985–2013 in Albania, Armenia, Azerbaijan and Kosovo<sup>1</sup>, and shows current estimates of sex ratio at birth in selected countries and territories in the EECA and Asia-Pacific regions.

In the South Caucasus, the sex ratio at birth was close to normal levels during the socialist period; it was only after the dissolution of the Soviet Union in 1991 that levels of birth masculinity started to increase. The rise in Armenia, Azerbaijan and Georgia occurred almost simultaneously and ran parallel for several years, with the SRB reaching 115 in less than a decade in Armenia and Azerbaijan, though plateauing at a slightly lower level in Georgia. At present, Azerbaijan has now reached levels comparable to China, Viet Nam and India. The Western Balkans region constitutes a second SRB hotspot, including Albania, North Macedonia and Montenegro, as well as Kosovo. In contrast, the rise in birth masculinity in South-Eastern Europe occurred later in the 1990s and never reached high levels above 115, though it remains skewed today at a level close to 110. There is currently no research or statistical evidence of a similar phenomenon in other countries of Eastern and Central Europe (Michael et al., 2013). While there are clear son preferences in Central Asia, gender-biased sex selection does not appear to be present. However, given strong traditional son preferences and declining fertility, it is possible that gender-biased sex selection may arise in Central Asia in the future.

The dissolution of the Soviet Union was accompanied by economic and political turmoil that contributed to

**Table 1. Sex ratio at birth, selected countries and territories in Asia Pacific and Eastern Europe**

Sex ratio at birth = male births per 100 female births. Based on data from birth registration (Azerbaijan, Armenia, Montenegro, The former Yugoslav Republic of North Macedonia (Northwest), Kosovo, Georgia, Albania), United Nations World Population Data (Bangladesh, Nepal, India and South Korea), census (Viet Nam), Demographic and Health Survey (Nepal) and National Bureau of Statistics (China).

| Country/territory                  | Sex ratio at birth | Period    |
|------------------------------------|--------------------|-----------|
| <b>Azerbaijan</b>                  | 114                | 2019      |
| China                              | 111.9              | 2017      |
| Vietnam                            | 111.5              | 2017      |
| <b>Armenia</b>                     | 110                | 2019      |
| <b>Montenegro</b>                  | 110.2              | 2005-12   |
| <b>Republic of North Macedonia</b> | 110                | 2018      |
| India                              | 109.9              | 2015-2020 |
| <b>Kosovo (UNSCR 1244)</b>         | 109.7              | 2002-14   |
| <b>Georgia</b>                     | 107.6              | 2019      |
| <b>Albania</b>                     | 108                | 2018      |
| <b>Nepal</b>                       | 110                | 2011-2015 |
| South Korea                        | 105.5              | 2015-2020 |
| Bangladesh                         | 104.8              | 2014      |

the perpetuation of son preference (Guilmoto et al., 2017). In Georgia, for example, fertility declined rapidly after independence, from 2.5 to 1.6 children per woman between 1991 and 1993. In parallel, the sex ratio at birth began increasing during the first quarter of 1992 (Guilmoto et al., 2017). It is hypothesized that economic instability and insecurity at the time of independence may have influenced families to believe that having a son was an essential survival mechanism (Guilmoto et al., 2017). Georgia's sex ratio at birth imbalance peaked in 2004 at 114.5 boys born for every 100 girls, but has decreased since and is now lower than in other

<sup>1</sup> All references to Kosovo shall be understood to be within the context of UN Security Council resolution 1244 (1999).

Eastern European countries experiencing gender-biased sex selection (National Statistics Office of Georgia, 2019). Today, traditional family systems prevail in Georgia and more than 43 per cent of the population live in “complex households” (households with at least three generations, typically with the husband’s parents residing with the family) (UNFPA, 2017). Georgian families tend to adjust their fertility behaviours based on already-born children. In this context, the overall SRB is around 107.6 (National Statistics Office of Georgia, 2019), but increases to above 170 among third births to families without a son (UNFPA, 2017). Elevated levels of SRB in Georgia are more often found among ethnic minorities, particularly the Azerbaijanis (SRB 126) and Armenians (SRB 117), compared to ethnic Georgians (SRB 107) (UNFPA, 2017). Elevated SRB is also associated with households engaged in agriculture and with lower socioeconomic and education status (UNFPA, 2017). Trend data suggest a rapid rise in SRB after 1991, followed by levelling-off around 2000, and a sustained decline from around 2005 to the natural level in 2016 (UNFPA, 2017). Some regional variations within Georgia still exist, as urban areas are associated with driving the declining SRB, with regions in the south-east still skewed (UNFPA, 2017).

In Azerbaijan, the sex ratio at birth was within the biological norm until 1990 when it increased to 107 boys per 100 girls, and peaked at 118 in 2003 before declining to 114 in 2015–2018 (UNFPA, 2020). Deeply rooted son preferences in Azerbaijan are tied to social factors making sons more socially and economically valued compared to daughters. For example, males have greater workforce participation, thus increasing their contributions to family income, and in the absence of effective social security schemes, ageing parents depend on support from sons. Women are often considered “birds of passage” in Azerbaijani culture, as they move from their biological family to their husband’s family at marriage. Cultural practices likewise dictate that sons carry out certain cultural and religious rituals, as well as maintain the family surname.

Armenia saw similar patterns in sex ratio at birth, with biologically normal rates until the early 1990s followed by an increase up to 120 boys per 100 girls in the early 2000s, before decreasing to 114 in the early 2010s and 110 in 2019 (UNFPA, 2020). These fluctuating trends coincided with sharp decreases in fertility rates, down from 2.6 to 1.6 children per woman between the early 1990s and 2018. In Armenia, son preferences are similarly strong due to the perceived social, cultural and economic benefits, such as continuity of family lineage, property inheritance and support for ageing parents. Moreover, sons are considered to be the “defenders of the homeland” as they personify “authority and strength” (UNFPA, 2018).

Son preference is present in all regions of Armenia, particularly for the first child, although there are some regional variations, with higher rates present in the Vayots Dzor, Ararat, Shirak and Lori regions, and lower rates in the Yerevan and Syunik regions.

In Albania, wide-scale unemployment following the collapse of Communism in the early 1990s affected women first and contributed to reinstating traditional cultural norms around gender (Guilmoto et al., 2017). Mass migration to other European countries to find work, mainly by men, may have further reinforced the demand for sons (Guilmoto et al., 2017). Furthermore, abortion was legalized, which led to an increase in the number of abortions from close to zero to about 200 per 1,000 live births in 2002 (Guilmoto et al., 2017).

Kosovo experienced intensified political unrest and economic instability during the 1980s and 1990s in the lead-up to the Kosovo War. During this time, fertility rates began dropping from about four children per woman in the 1980s, to three children in the early 1990s during the political crisis, to two children in 2005 (Guilmoto, 2016). Patriarchal kinship systems in Kosovo are primarily related to the role of sons in supporting elderly family members and perpetuating the family line (Guilmoto, 2016). Married sons often co-reside with their parents, as family support is critical in the absence of effective social protection mechanisms. Moreover, women in Kosovo have relatively easy access to abortion, ultrasound and in-vitro fertilization (IVF) facilities. These conditions suggest that gender biases have influenced reproductive decisions in Kosovo, and current SRB is around 110 males per females (Guilmoto, 2016).

Other countries in the EECA region, such as North Macedonia and Montenegro, appear to be impacted by imbalanced sex ratios at birth, and may follow similar patterns as Albania, as all three countries are home to sizeable populations of ethnic Albanians (Guilmoto, 2015). Increased sex ratios at birth began around 1995 and may be in part attributed to the timing of the legalization of abortion in 1995 (Guilmoto, 2015). Limited research has been conducted to understand the causes and consequences in Montenegro and North Macedonia, but strong traditional son preferences have been documented. Moreover, in Montenegro, a relatively small number of annual births (7,223 live births in 2019) (MONSAT, 2019) makes the assessment of SRB difficult to statistically assess. There is a ban on genetic testing to determine fetal sex, however, testing appears to be available within Montenegro or nearby in Belgrade, Serbia. A campaign (#Neželjena [#Unwanted]) in Montenegro in 2017 was led by the Women’s Rights Centre to highlight the issue of gender-biased sex selection.



In addition to statistical evidence, field studies have also provided qualitative evidence of the intensity of sex bias in the region and described a complex picture of the root causes behind the rise in birth masculinity. Though family traditions favouring sons over daughters, shrinking family sizes and the emergence of health-care services offering modern ultrasound technologies are shared factors, SRB levels appear skewed only in two geographical clusters, made up of countries with little in common in terms of economic and geographical environment, political change, ethnic composition or religious traditions. Female infanticide or distinct excess female mortality are also absent. Son preference and gender inequality are therefore the main drivers of gender-biased sex selection and rising SRB levels. However, two additional preconditions exist for gender-biased sex selection:

### 1. The emergence of modern reproductive

**technologies.** This includes modern methods of contraception, which can be used to prevent the birth of additional children (irrespective of sex) and is evidenced by the number of families with a boy as the last child (Bongaarts, 2013). Furthermore, ultrasound imaging is increasingly available since the 1970s, and allows sex determination of a fetus. Couples with strong son preferences may use this information to make decisions about continuing or aborting a pregnancy. Improved access to abortion after the first trimester (when ultrasound can determine fetal sex) may also contribute to the rising SRB, as seen in Kosovo and Albania.

**2. Trends towards smaller families.** Global and regional trends show that family sizes are shrinking, and where family sizes are smaller, the chance of not having a son is greater. This can influence SRB, particularly for higher-order births (for example, as seen in Georgia), as couples may try to avoid the birth of a girl.

While there are distinguishable variations across countries in the region, socioeconomic quintiles and ethnic groups, society as a whole has proved vulnerable to prenatal sex selection.

Recent estimates suggest that there were 8000 missing female births due to prenatal sex selection in Armenia, Azerbaijan, Georgia, Albania and Montenegro from 2013–2017 alone (UNFPA, 2020). As fertility rates are on the decline in a number of other countries with patriarchal societies, and new reproductive technologies may soon allow for earlier or easier prenatal discrimination in the region, rapid action is needed to monitor sex ratios at birth and promote gender equality.

### VOICES FROM ALBANIA

**'There is a big desire for having sons, more than for girls. There is joy when sons are born. Sons are always beautiful [...]. When sons are born, even the house pillars are happy, when daughters are born, the pillars cry.'**

Participant, focus group discussion

**'Before 1990, I had two daughters and I didn't want to have another child as I was afraid to have another girl. At that time, you did not have the possibility to know the sex of the baby [in advance]. In 1993, when ultrasound was available in Tirana, I started a pregnancy and I was expecting a girl, so I had an abortion when I was three and a half months pregnant.'**

Rural woman (UNFPA-World Vision 2012)

### VOICES FROM AZERBAIJAN

**'The imbalance in sex ratio at birth recorded in the past couple [of years] is still conspicuous. Hence, the concerted efforts undertaken to date, including the development of the relevant policy framework to address this problem, are of great importance.'** –Sahil Babayev, Minister of Labour and Social Protection of the Population, Republic of Azerbaijan

Sahil Babayev, Minister of Labour and Social Protection of the Population, Republic of Azerbaijan (UNFPA, 2018)

### VOICES FROM ARMENIA

**'The fact that families prefer to have boys is a chronic problem that cannot be resolved immediately. We need to do long-term work on it.'**

Gayane Avagyan, Head of the Ministry of Health Maternal and Reproductive Health Division (UNFPA 2018)

### VOICES FROM KOSOVO

**'The mentality is such that we are happy when we have boys in the family. Boys are the right wing of the house considering that after a while, the girl will go to another house.'**

NGO, urban, Prishtina (Guilmoto 2016)

# EFFECTS OF SEX SELECTION AND BARRIERS TO ADDRESSING THE PROBLEM

Sex selection has negative implications for women's lives and health, and for society as a whole. Women face intense pressure from family members and entrenched social norms to give birth to male children, often becoming subject to gender-based violence, specifically psychological violence, if they do not. Women pregnant with girls may be forced to undergo repeated consecutive abortions, with debilitating effects on their mental and physical health. The prevalence of sex selection practices within a society creates an environment in which gender bias directly influences reproductive decisions and outcomes, reinforcing a culture of low value placed on girls, in which female births are actively avoided. Sex imbalances at birth will also translate two decades on into a surplus of men, a demographic imbalance likely to affect their marriage prospects and one with the potential to increase international migration, human trafficking, crime, gender-based violence and political unrest in severely affected regions (WHO, 2011).

For example, a notable consequence of strong son preference is the immense pressure on women to produce sons, and in contexts with declining family size, restrictive reproductive health and rights policies and unregulated health services, this pressure can have debilitating mental and physical health impacts for women (WHO, 2011). Likewise, in settings with restricted access to abortion, women may seek clandestine abortions from unregulated providers, leading to elevated health risks (Sen, 2009). Furthermore, the overrepresentation of men in some populations resulting from skewed sex ratios at birth may impact partnership, marriage and family formation in the future (WHO, 2011).

The EECA region appears especially vulnerable to such outcomes for several reasons. Traditionally patrilineal families have proved to be one of society's most solid institutions during a period characterized by rapid state withdrawal and rising inequalities in income, health and living standards. This has led to what has been described as a revival of patriarchy (Kaser, 2008). Despite advances dating from the socialist period, women in the EECA region are still far from achieving equal economic and political participation. The social and economic situation is further compounded by a demographic context characterized by low fertility and

high international outmigration. Abortion, which has long served as a standard family planning method, is now also used as a way to avoid female births (Kaser, 2008). More recently, the emergence in the region of medical abortion pills and of assisted reproduction technologies may offer new ways for couples to practice sex selection, further fuelling discriminatory behaviour.

An additional challenge relates to the long delay in identifying and acknowledging the rise in birth masculinity in the EECA region, a delay attributable to the lack of adequate statistics due to social and political disturbances, and of in-depth field studies on gender bias. The focus of population policies tends to be placed instead on the issue of population decline, with prenatal sex selection seen as a minor problem reflecting private family decisions rather than wider social implications. Even when aware of the extent of prenatal gender bias, governments have often been hesitant to devise specific interventions. In addition, policy experience in Asian countries such as China and India shows that there is no "silver bullet" to reduce elevated SRB levels and redress gender discrimination.



● Azerbaijan, 2017

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# SIGNS OF POSITIVE CHANGE

Despite the presence of skewed SRBs in the region, there are reasons for optimism including the recent gains in awareness and progress in mobilizing around the issue of gender-biased sex selection. Sex imbalances at birth in the EECA region have received increased attention following a 2011 resolution on the issue adopted by the Parliamentary Assembly of the Council of Europe, along with efforts by UNFPA and other international agencies to assist in data analysis and policy dialogue, creating new opportunities for in-depth studies, knowledge-sharing, evidence-based interventions and technical assistance (UNFPA-World Vision, 2012).


These developments have in turn resulted in rapidly improving knowledge about the issue in the EECA region and the initiation of a broader policy dialogue, with media, policymakers, religious institutions and NGOs all engaging in public debate on gender preference and prenatal sex selection. In partnership with or supported by UNFPA, the governments of Albania, Armenia, Azerbaijan and Georgia have already supported primary research on the issue, and advocacy activities and further policy initiatives have followed. The policy experiences from Asian countries provide important lessons that, if heeded, will allow national governments in EECA to develop innovative approaches better suited to their specific social and demographic situation, perhaps even incorporating the fight against gender bias into a larger population policy aimed at supporting non-discriminatory reproductive freedom.

EECA countries are already part of an international mobilization to protect women's rights. The ICPD Programme of Action adopted by 179 countries in 1994 aims in particular at "[eliminating] all forms of discrimination against the girl child and the root causes of son preference, which results in harmful and unethical practices regarding female infanticide and prenatal sex selection". In addition, several European countries signed the 1997 Oviedo Convention prohibiting sex selection except for medical reasons.

As a result of UNFPA advocacy efforts the government of Azerbaijan has endorsed a National Action Plan (NAP) on prevention of and response to gender-biased sex selection for 2020-2025. The efforts undertaken in Armenia during recent years led to the adoption of the state programme and action plan to prevent gender-biased sex selection in Armenia for 2020-2023. These crucial achievements in the framework of the Global Programme were considered by all parties as a call to yet another round of strategic interventions geared towards effective and efficient implementation of the measures enshrined in the NAPs and programmes to address the phenomenon of son preference and promote the value of the girl child in the country.

SRB has been decreasing in Armenia and Georgia since 2000 and Albania since 2005, meaning that there is room for optimism that SRB imbalances can decrease. Evaluating the reasons behind falling trends in the EECA region, as well as in other contexts with falling rates such as South Korea, may provide useful shared learnings across the EECA region.



 Azerbaijan, 2017

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● A Girl is Born

©Georgia, 2017 – Dina Oganova/MenCare Georgia

**SUCCESS STORY: GEORGIA**

Georgia is the only country in the EECA region that experienced high SRB imbalances during the 1990s, followed by a plateau around 2000, and decline back to normal biological levels in 2016. A new study published in 2019 revealed that the drivers for this decline centre around a combination of social factors: improved economic conditions, increasing fertility, reduced poverty and higher female employment and male education, alongside changes to sociocultural and gendered value systems (UNFPA-ISET-PI, 2019).

For example, this study showed that for each 1% increase in female employment rates (outside agriculture), the SRB imbalance reduces by 0.25% (UNFPA-ISET-PI, 2019). The study also found that higher male educational attainment has a significant negative correlation with SRB imbalances, as it may enhance more gender-equal roles and involvement of women in decision-making processes, including fertility choices. Likewise, the introduction and consolidation of social security, pension and other social policies since 2005 – coupled with an improved economic situation – may have relieved traditional pressures of the patrilineal family as a socioeconomic network of intergenerational support against social and financial uncertainty.

Moreover, fertility increased starting around 2003 and has persisted to today, suggesting that couples may now more often be reaching gendered reproductive objectives by having additional children, rather than through prenatal sex selection. During the same period, women have seen gradual improvements in equality, perhaps driven by changing values and social norms from outside influences.

Despite this progress, many Georgian families still make their reproductive decisions based on the sex of existing children. This has translated to a close-to-normal sex ratio at birth for the first two births, but increasing imbalances for higher-order births. At a national level, evidence shows that in recent years “stated son preference” has decreased, and attitudes towards gender-biased sex selection in Georgia are now considered negative (CRRRC, 2019). However, regional variations exist, and regions such as Kakheti, Kvemo Kartli and Samtskhe-Javakheti, which have sizeable ethnic minority populations, have seen slower normative shifts.

Further exploration of data related to Georgia’s unique social dynamics and comparisons to other countries in the region where SRB decline has been slower (Armenia and Azerbaijan) may help to further unpack the factors accounting for Georgia’s unique trends of SRB. (UNFPA, 2017)



# POLICY OPTIONS FOR ADDRESSING THE ISSUE

## PROMOTING GENDER EQUALITY



Countries and territories in the EECA region have implemented national policies, programmes and strategies to improve gender equality and empower women following the adoption of the ICPD Programme of Action and the Convention on the Elimination of all Forms of Discrimination Against Women (CEDAW). Where equal rights have not translated into equal opportunities for women, existing gender-equity laws must be revised and effectively implemented to bridge the gap between law and practice. Azerbaijan has enacted a major law “On the Guarantees of Gender (Men and Women) Equality” (2006) with a focus on preventing gender-based discrimination and its negative consequences. Governments lead by example when they show senior-level commitment to gender equality and promote women’s access to leadership positions. Equal wages and access to inheritance of family property, improved pension and social security schemes will meanwhile strengthen women’s financial independence and social status..

## LEGAL MEASURES



Legal bans on sex-selective abortions, sex determination and its advertisement, as well as regulation on late abortions are obvious policy options for targeting prenatal discriminatory behaviour and several countries have introduced such prohibitions. Bans also send a clear signal of governments’ official position towards sex selection and provide a basis for inter-ministry cooperation around issues of gender discrimination. However, the experience of Asian countries shows that such bans are difficult to implement, fraught as they are by high administrative expenses, deficient targeting and the risk of infringing on reproductive rights. In addition, further technological advances, such as fetal blood testing for the identification of an embryo’s sex or assisted reproductive technology, may render such policies obsolete in the near future.



● Georgia, 2016

©Demetre Datiashvili/MenCare Georgia



● ©Georgia, 2017 - Mari Nakani/MenCare Georgia

## MONITORING TRENDS IN SEX SELECTION



Since the adoption of the Council of Europe resolution in 2011, governments also have a clear mandate to monitor closely the trends in prenatal sex selection, most notably with support from statistical bureaus, professional associations and civil society organizations. Ensuring the availability and accessibility of reliable data on son preference and gender-biased sex selection that can be disaggregated at a regional level is crucial. In EECA countries or territories with limited or unreliable historical data, such as Kosovo, investments may need to be made to support official institutions to strengthen capacity.

## ADVOCACY ACTIONS



Awareness-raising campaigns and communication aimed at behavioural change are crucial instruments for addressing sex selection and altering traditional mindsets. They should be led by high-level government representatives, elected members of national assemblies and other public figures and influencers. Campaigns may also target specific groups such as youth, newly married couples, community leaders and, most importantly, the medical community. Organizing human capacity programmes with medical professionals and adapting medical curricula play a critical role in promoting the ethical use of reproductive technologies. Such activities, however, should be reinforced by parallel efforts to change the legal and political climate to demonstrate concrete efforts in all sectors of society to bridge the gender gap.

## ENGAGING WITH FAITH-BASED ORGANIZATIONS



Faith-based organizations are strategically placed to influence family, fertility and health in the face of population and development challenges. In Armenia, for example, UNFPA collaborated with faith-based organizations to develop practical guides and training programmes for priests on gender-biased sex selection.

In Azerbaijan, UNFPA's strategy on partnership with faith-based organizations aimed to reach the most marginalized groups of population who are more prone to practise sex-selective abortions due to patriarchal views and their socioeconomic situation.

## WELFARE PROGRAMMES



According to a recent study, improved welfare programmes targeting the girl child have been introduced in Albania, Georgia, Kazakhstan, Moldova, Romania, Russia, Serbia, Tajikistan and Turkmenistan, as well as Kosovo (Hacettepe University Institute of Population Studies, 2014). Such programmes may help reduce the intensity of gender bias by providing financial assistance to families with girls to counterweigh their perceived economic burden through direct subsidies or financial incentives (Sekher, 2010). Although they often have positive multiplier effects in terms of schooling and health (ICRW, 2014), such conditional programmes are expensive and difficult to implement.



# POLICY RECOMMENDATIONS

Addressing prenatal gender discrimination always requires coordinated efforts by multiple governmental and nongovernmental stakeholders, and the regional character of recent sex imbalances additionally calls for an increased international policy dialogue around gender-biased sex selection.

The following recommendations can be given:

- **Engage in targeted advocacy, sensitization and awareness-raising campaigns** led by national figures and implemented through ministries to change social norms, promote gender equity in families and society, and raise the status of women and girls.
- **Target men and boys to develop and participate in gender-transformative campaigns** on masculinity, fatherhood, healthy relationships, and sexual and reproductive health and rights.
- **Use integrated and transformative perspectives to design, implement and evaluate the life cycle of proposed interventions**, including gender analyses and human-rights-based approaches..
- **Conduct further research on the underlying causes of gender bias** and on the potential consequences of current sex imbalances in the EECA region, accompanied by more systematic monitoring of SRB trends in all countries of Eastern Europe and Central Asia through national statistical offices.
- **Monitor and evaluate programmes** by establishing a system to assess the effects of measures adopted and introduce additional measures if necessary. Include indicators relevant to the issue such as sex ratio at birth, induced abortion rate, number of late-term abortions, rates of contraceptive use, women's rate of participation in the labour force, size of population covered by gender education programmes, percentage of population covered by health insurance schemes, and other related indicators (UNFPA, 2018).
- **Conduct gender assessment of social policies and laws** that may impact son preference and undervaluing of girls and women.
- **Initiate advocacy for state-supported childcare and family care** that supports women's economic empowerment, including through legal amendments to ensure paid, flexible and non-transferable parental leave policies for men (UNFPA, 2018).
- **Work with health-care providers to develop new guidelines on the ethical use of relevant technologies** to suppress deliberate gender discrimination, and to revise or strengthen the existing legal frameworks on the misuse of reproductive technologies.
- **Review gender equity laws to prevent direct or indirect discrimination** against daughters, married wives, divorcees and widows in property rights, access to education and employment, health and social insurance, pension benefits and inheritance.



● Young woman wears T-shirt announcing she is expecting a girl at the Republican Maternity Ward

©Armenia, 2017 - Jody Hilton/UNFPA Armenia

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