



ISSN: 2278 – 0211 (Online)

Ethical Perspective Of Ultrasonography For Sex Determination: Lead To Abortion

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Abstract

Sex selective abortion is the terminating of pregnancy that is based on the predicted sex of the baby by ultrasound. The abortion of the fetus is more common where the cultural norms, values male child over female. Especially this practice is more common in Pakistan and other developing countries like china and India. According to Population Service International (PSI) more than 90% of ultrasound during pregnancy is performed for sex determination. In Pakistan many health professionals are practicing illegal in the community. These people not only practicing illegally but they misuse the technology also. According to Ravitsky (2011) excessive ultrasound imaging can harm the fetus, so the health professional should focus on the 'Primum non nocere' (first do not harm). Mostly in the early stages of pregnancy the female does ultrasound not for the sake of medical diagnosis but to know about "Pink and Blue". From an ethical point of view this 'pink and blue, phenomenon of sex determination is intriguing. This practice is more common in rural areas. This issue lead to violate the principle of ethics that is 'justice' and 'the right to life'. In the above scenario the pregnant women were giving preference to a male fetus on the female fetus that's why she was going to abort it, and this is the most common practice in the rural community of Pakistan. Abortion itself is debatable but in this article, my focus will be rested on ultrasound use for sex determination. Abortion cannot solve social problems such as poor housing, financial status or others which lead women to terminate their pregnancy.

1.Scenario

One day in the emergency department a female came and told me that she is pregnant and wanted to see a lady doctor. At that time female medical officer (MO) was not available. I asked her if any matter that I can help, she answered that she wanted to discuss with the female Doctor. After some time when the female doctor came, I referred her to the doctor. After a while the doctor requested me and told me to send her to the gynae department for consultant visit. When I asked her the reason for the purpose of documentation, she answered that the patient ultrasound showed the female fetus and patient want to abort it.

After reflecting on scenario some question aroused that, should ultrasound be done for the purpose to identify the sex of the fetus? Does the terminating of female fetus and continuing of male, ethically and morally correct? Should ultrasound prohibited for identification of sex? Is it justice with the female fetus? Is it ethically right? Most of the health professional encounters such issues in their daily life. This is the most significant health issue face by nurses, LHVs and LHWs during practice in the community.

2.My Position

Looking at the situation in the context of ethics, its pros and cons, I must say that the ultrasound should be not used for the determination of the sex. Although there are some legal legislation and restriction on the use of technology for such practice but still there is some limitation that it is not properly followed. Here the principle of utilitarian can applied for the maximum good of the society. The health professional should be licensed for such practice and they should actively follow the principles of ethics. The female has the equal right to live and to be born as a male. Such misconceptions and social norms should be updated and corrected by the society of their own, through eliminating underlying social and economic determinants. Community health nurses have the key role in creating such awareness by changing the mental level and behaviour of the people, although behavioural change takes long time but at the end it will give us some good results. By doing so the principle of justice and respect for life will not be violated and the people will start using the ultrasound for the medical purpose only.

3.Argument/Counter Arguments

Reflecting on the mention scenario and taking the matter this way is interesting, particularly in societies like ours, where the law of abortion neither totally prohibitive nor totally permissive. It is widely recognized that abortion is permitted in demand, but permitted

under certain circumstances. But what moral principles will explain that it could be performed in certain condition and not in others. It is much more difficult to answer.

The first point that I would like to mention, that many people have different arguments about the intranatal ultrasound for sex determination and abortion. In the scenario the female was having no medical problem to continue her pregnancy. She came to the hospital to abort her female fetus that was 'injustice' with the fetus. I completely oppose such abortion and the fetus sex detection by ultrasound that lead to sex ratio imbalance and injustice with the fetus. According to Safdar, Sharif, Hussain, & Arsheed (2007), factors affecting son preferences are socio economic setup of the society, literacy, lesser opportunities for women jobs, culture beliefs, culture restrictions on women, male's dominance, their validity as earning head of the families and their shared relationship with the family more than daughters as female have to leave their parents soon after their marriage. It's also been argued that it is not always correct that the ultrasound is performed for the sex determination, but it depends on the context and purpose for which it is done. According to WHO (2007), in any area where the underlying cause of son preferences does not exist, the availability of the technique to determine sex does not necessarily lead to use for sex detection.

Secondly most of the time ultrasound is done because of the societal son preferences norms that are completely the misuse of technology. Similarly the female fetus has an equal 'right for life' as male. Very rarely intranatal ultrasound is done by the parents who think their children might have some sex-linked disease to identify and treat. But this technology has ignited an ethical debate. Ravitsky (2011) stated that "Many fear that it will be used for a reason that has nothing to do with medical outcomes. They fear parents will use it for sex selection, aborting healthy fetuses that are of an unwanted sex". There are other school of thoughts that pressure on women from family members and husband to produce a male child, lead to unethical practice. On the other hand technology is misused because the women use different means to identify their fetus sex in the early stages and act accordingly. WHO (2011) stated that "One noticeable consequences of the continued disproportionate importance given to boys is the huge pressure put upon women to produce sons".

The third point is that the unregistered health professional working in the community only for the sake of money and violating the principle of ethics. This act can actually prevented by the principle of 'nonmaleficence' (preventing intentional harm). Ganatra (2008) stated that "Women sometimes use public clinics to have an abortion after having had a sex detection scan at a private hospital". In countries such as India and China son preferences are well documented. In most of the rural area in Pakistan the ultrasound sophisticated machine is used privately and illegally to detect sex detection. On the other hand in Pakistan there is no proper check and balance from the government side to ban on unregistered health professional and clinics that leads to such issues. However, it led to an unethical practice and violates the principle of ethics aforementioned. Currently in 14 to 16th week of pregnancy the ultrasound practice is widely used and under some circumstances the women are forced by the family and society to get an abortion because the fetus carry female (CESCR, 2005).

As this technology was invented with the hope of positive medical outcome, but in many countries it is used for nonmedical purposes and in different ways that harm women rather than empower them. According to Loblay (2009) in India the wide use of sex determination ultrasound resulted in legislative measure to prevent its misuse for the said purpose.

4. Consequences Of Acting On My Position

The only consequence that the women can face by using ultrasound for the medical purpose and not for the sex determination is that she will give birth to a female baby, which is not an unethical practice. If the ultrasound is done only for the medical diagnosis and not for the sex determination, then there is no harm to anyone. Let's ask a question from the society if the woman's fetus is the female and normal, or it is a male but abnormal, whom she will prefer to give birth? Ask this question from yourself as well. It's basically not the ultrasound that effect on the women's health but actually the social norms. On the other hand my position can affect on the women in such way that if the health professional follow the principle of ethics and not performing sex-determination ultrasonography and abortion likewise in scenario than the women will use other means (Clandestine procedures) to abort and will affect their health (Jeffrey, 1997). And if she gives to a birth to the female and the family do not want female baby than she will be in dilemma that what to do with female baby that will lead again to some unethical practice.

5. Implementation Of My Position

To change such practice of the people, first we have to identify the root cause and that are the social norms of the society (Son preference). The intervention aforementioned in the section of my position should be implemented. It can be done by mass media, government, nongovernmental organization and community health nurses. By addressing social and other networks (young men and women) and planning such activities to change mindset towards girls and increase the value and recognition of women in society. Providing role model to the society, that women can perform as good as men could be helpful. The ultrasound should be completely banned for sex detection purposes (Utilitarian). According to Sinha (2012), the ultrasound is completely banned in India for sex detection purposes and any health professional using ultrasound, will be registered with the health authority. A variety of methods should be used to educate the rural areas like community leaders, religious leaders about the rights of women and mass media along with the health education to create awareness in the community (Sen, 2009). Research is needed to provide evidence that which policies and intervention provide the best results.

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