

American University of Armenia

Department of Political Science and International Affairs

Thesis Paper: Sex-selective Abortions in Armenia

By

Mariam Hayruni

Yerevan, 2013

SIGNATURE PAGE

Faculty Advisor

Date

Dean

Date

American University of Armenia

May 2013

Acknowledgement

I would like to thank, first and foremost, my master's essay supervisor Dr. Yevgenya Paturyan for her tremendous contribution to this project. Her guidance, support and encouragement helped me throughout the whole project.

I owe my deepest gratitude to the entire faculty of the School of Political Science and International Affairs, who have devoted their time, knowledge and professional skills in the development of future graduate students in the field of Political Science.

Contents

List of Abbreviations	5
Abstract	6
Introduction.....	7
Methodology	11
Literature Review.....	13
A Brief Description of Sex-selective Abortion: Regulating Laws and Policies	13
Evidence of Sex-selective Abortion.....	14
Reasons behind Son Preference	15
Consequences of Sex Selection and Probable Policy Implications.....	17
Problem of Sex Selective Abortions in the South Caucasus	18
Chapter 1	20
Legislative Framework.....	20
Current Situation and the RA Government Actions.....	23
Public Awareness	26
Chapter 2.....	28
Sex Imbalances in Armenia.....	28
Desired Number of Children	32
Birth Order	36
Chapter 3.....	40
Perceptions of Sex Selective Abortions and Gender Discrimination.....	40
Why Boys? Deep Rooted Cultural Preference	42
Role of Economic Factors	45
Conclusion	48
Recommendations.....	51
Bibliography	52

List of Abbreviations

CRRC: Caucasus Research Resource Center

DHS: Demographic Health Survey

NSS: National Statistical Service

PACE: Parliamentary Assembly of the Council of Europe

RA: the Republic of Armenia

UNFPA: United Nations Population Fund in Armenia

Abstract

This paper examines sex-selective abortions in Armenia. Sex-selection is observed in Armenia since 1990s. There are a number of factors that contribute to increase of the rates of sex-selective abortions, namely the interconnectedness of desired number, gender of children and birth order. The research design is mixed: both primary and secondary data are used. The primary data is acquired by means of the interviews with doctors and experts. It is proved that the birth order, number of desired children and fertility rate influence sex-selective abortions. Reasons behind sex-selection in Armenia are mainly of socio-cultural and economic origin.

Introduction

Abortion is an intentional termination of pregnancy. Once abortions were means to regulate child birth and make family planning worldwide. In many developing countries it still remains as a means of family planning, though nowadays there are more moderate means for family planning. Abortion is not legal in all the countries. However, it is allowed worldwide, when there is a danger for physical or mental health of the woman.

In the Republic of Armenia abortion is legal until 12 weeks of pregnancy. After 12 weeks of pregnancy abortion is allowed only in certain cases mentioned by the law. However, the abortion policy is not implemented strictly by the law and often there is lack of control in the hospitals and medical centers.

Sex-selective abortion refers to those intentional terminations of pregnancies, which are done based on the gender of the child. The term sex-selection refers mostly to those cases, when female fetuses are removed. The phenomenon of sex-selection is widely spread in many Asian countries. In China, India and Japan the rates of sex-selection are tremendously high. Consequences of sex-selection may be high rates of human trafficking, raise in criminality, aggression and others.

According to the theory fertility rate, birth order and desired number of children are highly connected with sex-selection. Decrease in any of the mentioned factors may bring to the increase of sex-selective abortions. Fertility rate decrease means that the desired number of children families want to have also decreases. In societies with high boy preference like the Armenian the decrease of desired number of children may bring to sex-selection, as parents would try to have their preferred gender of children within the small family size.

It may be argued that gender preference may bring to fertility rate increase, as families would have many children until they would get their desired gender of the child. This theory may be true if there would be no certain desired number of children per families. Let us take an example of parents who want to have maximum of three children and one or two of them obligatory should be of male sex. If such couple would not achieve their aim during the first pregnancy, sex-selective abortion rates would go higher by each next pregnancy. Also the reverse theory may be logical: if the couple achieves the aim of having their preferred gender of children during the first pregnancies, the probability that they would stop childbearing would go higher.

The reasons behind sex-selection are found in specificities of Asian cultures as well as in social and economic factors. Though every country has its specific causes for sex-selection, there are several general notions that may be applied to most of the Asian countries, where the phenomenon of sex-selection is evident. For example in China it is believed to be a consequence of one child policy, while in India it is mostly because of economic bad conditions and dowry system.

It is believed that men have more value than women for the family, because men have privileges in employment, they are in economically more favorable conditions than women. Besides, males continue the family lineage and support their parents, when they are old. Meanwhile daughters are expected to join the family of their husband's and for the rest of their lives support and take care of the new family.

The breadwinners of many families are males; though, women also work, they do not get as much salaries as men do. Many employed women get minimum salary, which is not

enough even for sustaining themselves. However, it cannot be claimed unilaterally that gender discrimination is done only by males. In many cases women themselves consider that men are superior and should have priorities over women especially when there is an issue of employment.

All in all abortions and especially sex-selective abortions are referred to be as condemned activities. As any other, issue, sex-selection also is not accepted unilaterally by the public and in scientific circles. Some claim that sex-selection is because of gender discrimination and bias, however, others project that boy preference is just a matter of choice. As in any other things people should have freedom of choice also in choosing what gender of the child they want to have.

This paper will discuss sex-selective abortions in Armenia paying particular attention to the connection among fertility rate, birth order and desired number of children as well as it will explore probable reasons behind sex-selective abortions in Armenia. The paper has two hypothesis:

H1: Desired numbers of children families want to have makes sex-selective abortion rates higher.

H2: Prenatal sex discrimination occurs because of socio-economic and cultural factors.

The first chapter will describe the legislative framework on abortion in the Republic of Armenia, as well as it will discuss public and government awareness about the issue. The second chapter will be devoted to the first hypothesis. It will discuss three interconnected phenomenon that may cause the increase of sex-selection: birth order, fertility rate and desired number of children. The last chapter will seek to explore the probable causes of sex-selection and high boy

preference in Armenia. At the end you will find some policy recommendations and conclusions are presented.

Methodology

The design of the research is mixed: during the research both primary and secondary data was used. The primary data was collected by means of the expert interviews as well as interviews with doctors in the city of Yerevan and two marzes: Gyumri and Gegharkunik. The marzes of Gegharkunik and Gyumri are chosen intentionally, as the abortion as well as boy preference rates are higher here than in other marzes (See figure three on page 30).

The Focus group with the doctors was done in Yerevan, in the Shengavit Medical Center. The intention of the focus group was to discuss the phenomenon of sex-selection and also the social status of women in the Armenian society. The doctors were able to discuss and compare different marzes with each other, as many of them had many working visits to different marzes of Armenia and were familiar with perceptions in most of the marzes.

The secondary data was obtained from Armenian National Statistical Service (NSS), Caucasus Research Resource Center (CRRC), United Nations Population Fund in Armenia (UNFPA) as well as National Demographic Health Survey (DHS) which is done once in every five years. All of the above mentioned sources have representative sample size during their survey.

CRRC conducts surveys in the region of the three republics of the South Caucasus. The first three country survey (Caucasus Barometer) available was conducted in 2008. The nationwide representative survey samples vary from 2000 – 2365 or more. The margin of error is not greater than 5%. Data was collected by means of face to face interviews with adult respondents: 18 years-old or older. The interview language in Armenia was Armenian.

Demographic Health Surveys are implemented once every 5 years. The survey samples vary from 7 500 – 8000 households both in rural and urban areas of the Republic of Armenia. Data collection was done by means of face to face interviews. The survey was made among teenagers and adults between the ages of 15-years-old up to the 50 years-old.

UNFPA report was made in 2011. The surveys were implemented in rural and urban among the respondents at the age of 15-49. Surveys were implemented also among women who had at least one pregnancy as well as among those women who attended hospitals with the aim of doing an abortion. The sample size includes 2830 households out of which 2046 are from urban areas and the rest from rural areas. UNFPA study also included focus group discussions. Participants for these discussions were chosen, based on education, gender, social status, marital status and other factors.

Literature Review

A Brief Description of Sex-selective Abortion: Regulating Laws and Policies

Abortion is intentional termination of pregnancy, when undeveloped embryo is removed, so that it does not result in a child birth. The term “selective abortion” refers to those pregnancy cases, when there is a health risk for embryo of having defect or impairment, or because parents do not prefer the gender of the fetus. The latter is mostly referred to as sex-selective abortion (Medical Dictionary Online, 2012).

Certainly, there are specific laws in each country regarding the abortion, but there are also some that are general to all. In 2007, in 97 % of the countries abortion was permitted to save the woman’s life (World Abortion Policies, 2007). In 2011, the rate already became 100 % (World Abortion Policies). In addition to this law there are also 6 other principles that are common to many countries: (2) to preserve a woman’s physical health; (3) to preserve a woman’s mental health; (4) in case of rape or incest; (5) because of foetal impairment; (6) for economic or social reasons; and (7) on request (World Abortion Policies, 2011).

Since independence, Armenia started reforms in the legal framework to comply with the norms and regulations of the international treaties. Because of the lack of family planning, abortion was considered one of the main means to regulate birth control and was permitted until fourteenth week of pregnancy (Elimination of Discrimination against Women, 1997). In nowadays Armenia, the limit for doing abortion is shortened up to the twelfth weeks of pregnancy. The right to do an abortion is given only to licensed physicians in hospitals or other officially recognized medical centers (International Parenthood Federation, 2009). Armenian abortion policy implies all the seven points mentioned in World Abortion Policies (2011) above.

Evidence of Sex-selective Abortion

It is believed, that women constitute the large part of the population in the world. They outnumber men and are more resistant to hard conditions: given the same kind of life conditions women tend to survive more than do men. Amartya Sen was the first author who announced about the mass gender discrimination in different Asian and African countries. In 1990 he wrote an article “More Than 100 Million Women Are Missing “ (Sen, A.1990) after which many scholars paid attention to the issue and numerous studies were conducted.

The natural proportion of sex ratios is 100 women to 105 men; however, this ratio is highly distorted in many countries, because of sex selective abortions. For getting the idea about the “missing women” (Sen, A., 1990) one should calculate the number of extra women who should have been born. In China the calculated number of missing women, who should have been born, reached to almost fifty million. The situation is about the same in many other Asian countries, but in some African countries it is even worse: the number of unborn daughters in Africa reached for about 100 million (Sen, A., 1990). Probable reasons of female discrimination in Asian and African countries are considered to be low social status and respect of women. (Guilmoto, C. Z., 2009).

As one of the causes for such huge difference between sex ratios decrease in fertility rates all over the world is mentioned. However, “This process of demographic masculinization has proceeded at a pace unprecedented in recorded history” (Guilmoto, Z., 2009, p 519). There is fear that the trend will also spread in Asian countries, where the rates are not very high, the only good news is that the situation is already under control in South Korea and may be reversing in other countries too. Therefore, the countries that face such a problem, should implement certain policies not to deepen the gap even more. The female discrimination is somehow connected with

technological innovations of the century. The ultrasonic technology innovation in medicine allows to decide the gender of wanted children and control the number. Families that want to have limited number of children and have gender preference, due to these technological innovations can do it easily (Guilmoto, C. Z., 2009).

The rate of sex selective abortions is rather high in Armenia, according to official statistical data, from 1993 the ratio of boys to girls in Armenia was 110-120 to 100 girls, while the accepted biological ratio is 102-106 boys to 100 girls, which means that Armenia each year loses 1400 potential mothers (UNFPA, 2011).

Reasons behind Son Preference

Reasons may vary from country to country. Generally they may be classified as political, economic, cultural etc.. The first reason, that is very important and widely discussed by many scholars is higher social status of men in many Asian and African countries (these are the countries, where rates are dramatically higher than anywhere else). So what are the privileges of sons? They are “bread winners” (Abrejio, F. et al, 2009, p. 10), they inherit the family name, are responsible for the security of the family and parents, when they are already old, and have higher social status than women (Abrejio, F. et al, 2009).

In some countries where a woman gives birth to a baby boy, her status increases in her family as well as in the community. In Vietnam, women keep having kids until they will have a son. If they are “lucky enough” and their second or third child is a son, they stop having children and family enjoys socially and economically assured life. In many Vietnamese families, girls have to drop the school and start working just because of the fact that family is already large enough and cannot support them. The family will continue having children even in extreme poverty until they will have a male heir, who later on would provide for his family. However, the

pressure is not only put by the family member or the community, but also women themselves strive to have a baby boy (Blanger, D., 2002).

One of the strongest arguments for having son preference is hard economic conditions of families. This is the most common explanation that one may give to gender discrimination. In Asian countries not only males are considered economically preferable, but on the contrary girls in some cases become additional burden for their families. In India (especially) as well as in many other Asian countries there is a dowry system according to which while getting married girls' parents should give precious presents to her. Besides a girl, when already married lessens her contacts with her initial family and starts to work and live with her newly attained family (Hasketh, T., Xing, Z, W, 2006).

Taking into consideration above-mentioned son's economic and social benefits, it is not difficult to assume, why in China the rate of sex selective abortions is so high. Sex selective abortion high rates in China in a way are connected with the Government's one child policy. When Chinese are allowed to have only one child, they prefer it to be a boy, for the simplest reason that later on he will earn money and take care of his family (Hasketh, T., Xing, Z, W, 2006).

Portner (2010) disagrees with the definitely drawn arguments about sex selective abortions. He argues that until now these reasons are vague and nobody can definitely state the true reasons for sex selective abortions. The author suggests that the fertility rate may also have influence on gender preference. What he suggests is that the number of children a certain family wants to have is strongly connected with sex selection. As an example let us take a family, which wants a boy, but is willing to have up to six children, therefore, the rate for sex selection is low

here. However, when a family wants to have a son and no more than one or two children, then the rate for sex selection will rise (Portner, C., 2010).

According to PACE (Parliamentary Assembly of the Council of Europe, 2011) sex selection is typical for growing poor countries (among which also Armenia). The reasoning behind this logic is similar to the above discussed cases: families need helping hands to overcome the difficulties (in some places hard physical labor is still needed to make the family living). Sons usually continue and develop what their parents have started. Sons are those who help and support their families, while daughters are contributing into their new families (PACE, 2011).

Consequences of Sex Selection and Probable Policy Implications

The consequences of sex selective abortions are evident in three largest countries of the world: China, India and Korea (Abrejo, F.G. et. Al, 2009). South Korea was the first country that indicated very high sex ratio imbalances in birth and implemented certain banning and punitive policies. The son preference was so widespread and high that it mattered even in the case of first pregnancy “because there is traditional preference for first-born to be male” (Hasketh, T., Xing, Z, W, 2006). Because of this “male surplus” (Hasketh, T., Xing, Z, W, 2006) South Korea now faces serious problems. There are higher rates of violence, as there is evidence that congregated young men are more prone to aggression. Going further in this assumption one can conclude that men will be more engaged in military type organizations, which raises probability not only in internal but also external violence of that particular country, thus distracting regional security. Besides, in case of having male surplus the rate of human trafficking will also rise. In India and China already there is high raise in sex industry. However, one also should admit, that male surplus is not the only reason for increase (Hasketh, T., Xing, Z, W, 2006).

As rightly mentioned by many authors it is not possible to achieve effective short-term results in case of sex-selective abortions. The problem lies much deeper than it seems. The first thing that needs to be done is raising social status of a woman in the society, which takes a long time and also change of national mentality. In China and India several policies banning sex selection are implemented, however, it is difficult to ensure the effectiveness of such policies. One of the strictest policies on gender discrimination was implemented by South Korea, results of which are tangible, as the sex ratio in Seoul fell from 117 to 113 (Hasketh, T., Xing, Z, W, 2006).

However, policies directed to ban sex-selection abortions may have their negative consequences (Vogel, L., 2012). Such policies may create new healthcare issues and complications: women having no right to do abortion legally may do it at home by their own means. The practice may lead to serious reproductive health problems, and even death, which is the case especially in India.

Problem of Sex Selective Abortions in the South Caucasus

The region of South Caucasus is described as one that has all imaginable conflicts: ethnic, geographical, political and others. The states located in the region are the Republic of Armenia, Georgia and Azerbaijan. All of the mentioned are former Soviet Union Republics and share some common cultural, political and economic features. Abortion rates in these countries according to CRRC (2013) are high, especially in Armenia and Georgia. The abortion rates in these two countries are higher than the EU average is.

The Economist (CRRC, 2013) placed Armenia, Georgia and Azerbaijan in the second, third and fourth places respectively, while making a list of countries with high abortion rates worldwide. Some part of these abortions are because of sex-selection, which is a common feature

in the region of South Caucasus. The European Union condemned the phenomenon of sex-selection in Armenia and suggested assistance to struggle against it, as the phenomenon may lead to terrible consequences such as population imbalances, raise of criminality, human rights violation and others (Council of Europe, 2011).

Reasons behind such high rates of sex-selection in these countries according to the European Community find their roots in a culture of gender inequality, which results in violence against women in the South Caucasian countries. As a means to struggle against gender discrimination the Council of Europe suggests: “to introduce legislation with a view to prohibiting sex selection in the context of both assisted reproductive technologies and legal abortion, except when it is justified to avoid a serious hereditary disease” (Council of Europe, 2011). Armenia, Georgia and Azerbaijan in addition are invited to collect reliable data about the phenomenon and take serious steps to find out the root causes behind sex-selective abortions (Council of Europe, 2011).

Chapter 1

In the scope of the first chapter, I will give some general background about the abortion policy, laws and regulation in the Republic of Armenia. Firstly, I will discuss some laws, regulations and decisions about the abortion process. However, the legislative framework of the very topic will not be fully covered: the issues of discussion are chosen according to their importance and relation to the theme of sex-selective abortions. Secondly, the paper will discuss the awareness level of then Government and society about sex-selective abortions.

Legislative Framework

The legislative framework that will be discussed below is comprised of the following documents: the Law on Reproductive Health and Rights of the Republic of Armenia (2002), Decision of the RA about Establishment of the Terms and Conditions of Abortions (2004).

The Law on Reproductive Health and Rights of the Republic of Armenia is composed of 22 articles. Those articles regulate the maintenance of reproductive health and rights, as well as order and conditions of technology use in this field. The measures stated in the Law should correspond to the standards of those international treaties to which Armenia is a signatory and to the Constitution of the Republic of Armenia. The law refers to the citizens of the RA, international citizens and people having no citizenship.

According to the second point of the 4th article of the Law on Reproductive Health and Rights of the Republic of Armenia, everybody has the right to make a family and decide the number of children in their family using safe and effective means to regulate the birth of children. It is not mentioned what are acceptable and advisable “means” to regulate the birth order and it is not clear whether abortion is considered as such. According to the third point of

the same article everybody has right to be protected from unwanted pregnancies as well as unwanted abortions.¹

One more arguable statement in this article is the eighth point, where it is mentioned that everyone has a right to use modern and effective reproductive technologies to “regulate birth”. Though abortion is legal in Armenia until 12 weeks of pregnancy, as mentioned below, it is again unclear, whether it is considered as acceptable or advisable means for birth regulation.

The 6th point of the same article is about the safe maternity. According to this point, every medical intervention to pregnancy should be done with the woman's permission and awareness. A woman has a right to claim intervention until 12 weeks of pregnancy, however, when there is a danger to her life or in case of any dangerous disease towards the environment, commission of doctors is allowed to make an intervention without her permission.

Article 10th of the Law on Reproductive Health and Rights of the Republic of Armenia deals with the issues connected with permissible abortion. Legally acceptable rules and regulations for abortion are as follows:

- Until 12 week pregnancy may be interrupted according to the woman’s application
- Until 22 weeks, the abortion is allowed due to socio-medical issues.

¹ This is important point, as we will see further in this paper, when examples such as future mothers forced by their husbands or someone else to make an abortion are discussed. Forcing such decisions is punishable by the law; however, most of the population does not know about it or just ignores the fact.

- When the application is made by a teenager, the abortion should be done by the permission of parents. In case, if awareness of parents is not possible, the abortion is done by the permission of medical commission.
- The abortion procedure is regulated according to the RA Government decision 1116

According to the Law it is allowed to use different kinds of modern technologies as having a child by means of donors (parents are allowed to choose donors) or making artificial insemination, however, it is not allowed to plan the sex of future baby.

The decision 1116 about the abortion procedure and conditions adopted in August 16, 2004 is a supplement to the article 10th of the Law on Reproductive Health and Rights of the Republic of Armenia. The decision establishes rules and regulations for the abortion procedure i.e. this document defines the cases when abortion is legal and permissible and on the contrary, cases when it is illegal.

As it was mentioned above, everyone can make an abortion until 12 weeks of the pregnancy. Abortion after 12 weeks up to 22 weeks is being made by the permission of doctors' special commission based on different factors. The factors that allow abortion are divided into two large groups: medical and social. Medical factors include different kinds of diseases that arise during pregnancy or may be inherited from parents genetically such as infectious diseases, malignant neoplasm, blood diseases with frequent aggravations, diseases of nervous system and other diseases that are a threat for both the future mother and baby. The concluding parts of the section of allowed abortions are the following four important points:

- Dead fetus

- Diagnosis of a disease that is incompatible with life
- Birth of two or more children that have similar defects
- Birth of children with genetically passing diseases connected with the sex of children

It is very important to understand the last point mentioned above correctly. It means that sex-selective abortion is allowed only in the cases when there is a danger of genetic disease that passes only to that particular gender. Here there is no distinction of specific gender of the child: it may be both masculine and feminine.

The second group of factors that can become a legal basis for making an abortion are social factors such as death of husband during the pregnancy, imprisonment of one of the parents during pregnancy, divorce and pregnancy as a result of rape. There are also a number of medical restrictions that do not allow abortion such as suspicion about extrauterine pregnancy, mismatch of uterine size with the pregnancy period, acute infectious diseases and others. Before making an abortion the doctors are required to make a thorough medical investigation of the pregnant women.

Current Situation and the RA Government Actions

According to the official data from the site of the Ministry of Health of the RA (2010) there are notable fluctuations in the number of birth rates in Armenia. Between 1990 – 2001 the birth ratio was rather low and there was a noticeable tendency of decrease more than twice (1990 rate: 22.5 and 2001 rate: 10.0). The rate is defined by means of calculation of the number of live births per 1000 person. However, the situation was changed beginning from 2001: the rate of

birth for 2010 is calculated as 13.8, 3.8 more than it was in 2001 (Ministry of Health of the RA, 2010). The change is not big, but the decreasing rates were stopped.

The same article also refers to the issue of sex selection in the Republic of Armenia. It mentions that there is not enough data and evidence claiming that the phenomenon of sex selection exists in Armenia. However, they base their knowledge on indirect indices “the number of live births per gender and birth order are used in relation to the girl/boy ratio” (Ministry of Health of the RA, 2010) to indicate whether there is sex-selective abortion. We should also mention that the ministry accepts the worldwide indicators of 100 girls to 106 boys at birth as a normal ratio.

Based on the data analyzed the paper states that “it is possible to make an indirect assumption about sex-selective abortions” (Ministry of Health of the RA, 2010). As one of possible factors that contribute to the increase of sex-selective abortions, the government mentions the development of modern technology, that allows determining the sex of the baby. The government accepts the issue as being an important issue that needs further thorough investigation to come up with the causes of sex-selective abortions: “the issue is much more profound and multi-factor and the final conclusion can be drawn after conducting demographic investigation and analysis” (Ministry of Health of the RA, 2010). In the scope of these investigations the RA Government cooperates with the United Nations respective programs.

Though there are no concrete decisions about sex-selective abortions, the government implements certain kind of projects that refer to the health of mothers and babies. One of such projects is “Mother and Child Health Care Protection Strategy for 2003 – 2015 years” adopted by the decision N 1000 on August 21, 2003.

The purpose of Mother and Child Health Care Protection Strategy for 2003 – 2015 years is to give thorough analysis about the situation and define problematic issues that need immediate reaction. First of all we should state that one of the causes for worsening the situation is economic hard conditions, that worsened even more in recent years because of economic crises. Therefore, as in any other sphere the crises had its impact in the medical and social life of the citizens too. The main problematic issues defined in the document are decreasing birth rate, contracting HIV, high maternal mortality rate and others. It is important to mention that one of the causes for high maternal mortality rate is unsafe abortion. Though according to the investigation 61% of women uses contraceptive measures, however, only 22 % of them were of high quality and effective. Thus, the paper concludes that abortion remains one of the main means to regulate birth rate (Mother and Child Health Care Protection Strategy for 2003 – 2015 years, 2003).

The document defines not only medical but also social factors that create problematic situations. Namely, they pay attention to the woman's social status and problems that arise because of its low level such as violence against women, trafficking, women discrimination and others. Absence of strategies dealing with above-mentioned issues worsens the situation even more.

For keeping maternal and children health following aims were put forward in the document: strategies directed to improve child healthcare (decrease child mortality rate, decrease HIV contraction rate among children etc.), strategies directed to maternal healthcare improvement (decrease mortality rate minimum by ½, at least double the size of antenatal surveillance service improvement, increase rates of screening against HIV AIDS among at least 80 % of pregnant women etc.), strategies directed to reproductive health improvement (double

the size of provision of modern contraceptive means, decrease the rate of sexual infections among women at least by 1/3, make screening against HIV AIDS among women's risk groups etc.) and others.

For above mentioned strategy implementation the following measures are carried out: provision of medical assistance to mothers, as well as improvement of already existing medical assistance services especially emphasizing the factor of rural community, creation and continuous improvement of informative-analytical system about the reproductive health situation in the country.

Public Awareness

The phenomenon of sex selection is recorded from 1990s in Armenia. However, it gained attention of the government as well as the public just in recent years. The reasons for late response may be of different kinds: difficult political and economic situation during 1990s, because of Nagorno Karabakh war, the worsening situation over time i.e. by the time the rates of sex selection grew and others.

The phenomenon of sex selection became a more or less discussed topic starting from the 2010s. From 2011, there were periodically typed articles in the media, and TV programs were recorded. The government started cooperation with UNFPA "Strengthening Sexual and Reproductive Health Services" Project to find out the reasons behind sex selective abortions and also explore probable ways to struggle against gender discrimination. The articles that appeared in the media were of different kinds: professional, based on some data and non-professional based on evidence or specific stories.

One of the first articles was written by Marianna Grigoryan in 2011. It was entitled “Armenia: Are Selective Abortions behind Birth Ratio Imbalance?” The distorted proportion of male to female ratio started to be used in each and every article, however, these were not based on empirical data and careful analysis. But the fact, that people started to pay attention to issues like this, was already a step forward. The importance of necessity of further research was being emphasized more and more, as only blurred assumptions could be made based on the information available.

Starting from 2011, the media started to be filled with the articles about women doing sex selection abortions, which became fatal for them: many women after making the abortion were not able to bear a child any more. For example, a 22-year-old woman waiting for her firstling girl made an abortion under pressure of her family. After that that day she could never have babies (Mkrтчyаn, Sargsyan, Zohrabyan, Tovmasyan, & Artsruni, 2012) . Emotions and criticism towards people doing sex-selective abortions were common in the media articles. Already in 2012, the issue started to be discussed in blogs, and more articles started to be published, which means that the awareness rises year by year. While there is a growing discussion of sex-selective abortions in the society, it is worth noting that not everyone sees it as a problem. Even among these directly dealing with this issue, there is a variety of opinions.

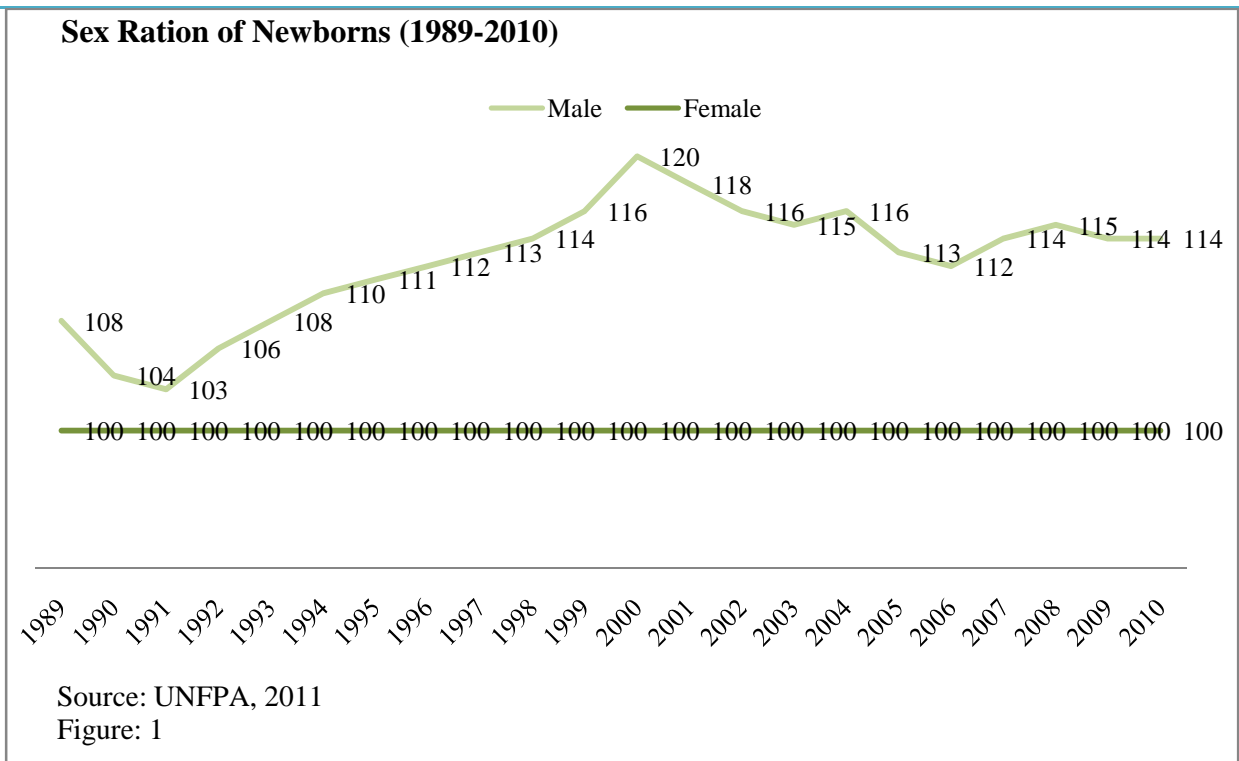
There are also cases when doctors do not accept that there is sex selective abortions: “It’s just that more boys than girls are born” says Dr. David Mkhitaryan, the medical director of Shengavit Medical Center (M. Grigoryan, 2011). During the interview in 2013, that was conducted in the scope of this research project, he and also some doctors from the Medical Center gave similar answers. That was also the case in Gyumri’s Medical Center, where proportionally high rate of birth of baby boys was seen as an ordinary phenomenon.

Chapter 2

Sex Imbalances in Armenia

Internationally accepted proportion rate of men to women is 105 to 100, which is natural. The proportion of male rates are higher, because males are biogenetically weaker than females i.e. mortality rates are higher within male population, females are more resistant to difficult life conditions, female immunity system is better and stronger than those of males etc. Therefore, it is necessary to have 5% more males than females to keep natural demographic balance. However, in many countries, especially those of Asia, these rates are even higher: 110-120 male to 100 female. Such high rates of gender distortion bring to demographic imbalance, the impact of which is not evident in short term, but in long term, it brings to demographic masculinization of the population (Guilmoto, C. Z., 2012).

As mentioned above sex-selective abortions were evident starting from 1990s in Armenia, but the issue gained relatively more attention starting from 2010s. The line chart below shows that sex-selective abortions gained higher rates recently. The chart shows the ratio of male population to female. As it was already mentioned, the natural ratio is 100 females to 105 males. If the ratio is distorted, i.e. the difference between the gender ratios is more than five, it means that there is certain distortion in that particular year. Already in 1990s, sex distortions became evident. A growing tendency of sex ratio distortion is growing up to 2000s. The highest rates were recorded in the years of 2000 and 2001. Though, the tendency is decreasing since 2001, the rates of sex-selection are still high.



The abortion rates, as well as phenomenon of sex-selection are not equally distributed over the territory of the Republic of Armenia: it is different in urban and rural areas. In rural areas, both the fertility and abortion rates are slightly higher than in urban areas (DHS, 2012, p. 58, table 5.2).

The pie charts represented below indicate that preference for sex selection were evident both in rural and urban areas already in late 1990s. According to World Values Survey, conducted in Armenia in 1997, in the urban areas, the son preference is less likely than in rural areas. Second factor that makes us think that sex-selective abortions are lower in urban areas is that almost half of the respondents told that the gender of the child does not matter, while in rural areas only 23% think that the gender of the child is not important.

Gender Preference according to the Place of Residence (%)

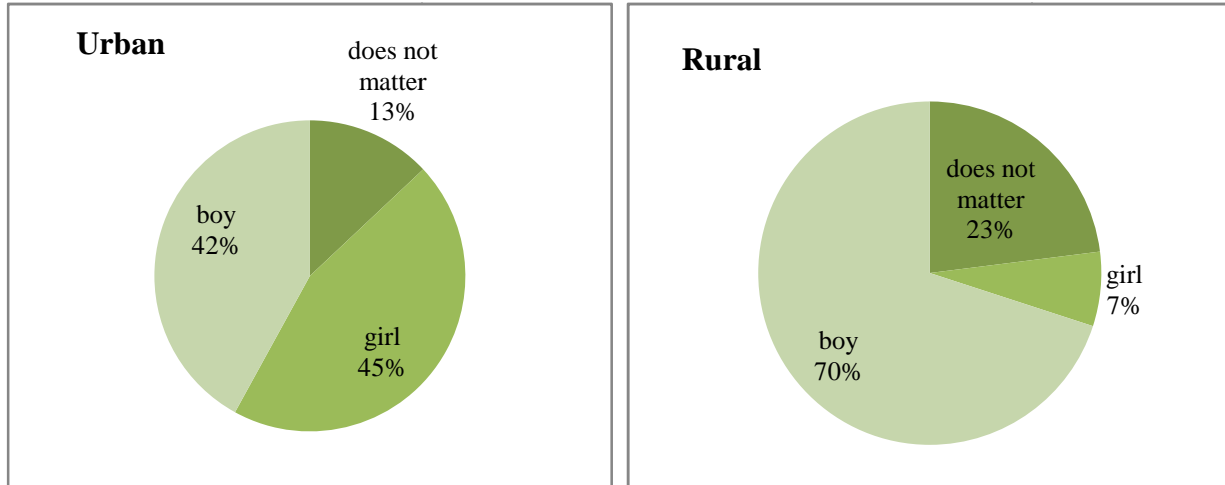


Figure: 2: Source: World Values Survey, 1997

Since 1997, there was not much change in the Armenian mentality on the issue of preferred gender of the child. The same question about the preferred gender of the child was asked by the Caucasus Research Center during a survey conducted in 2011. Most of the respondents answered the same way as in 1997. Though slight change is observed in the number of respondents with boy preference in 1997 it was 56% while in 2011 it is 54%. The number of respondents indifferent to gender preference increased only by 1% (in 1997 it was 34% in 2011 it was 35%). Meanwhile, girl preference does not change from 1997 up to 2011: in both years only 10% of the respondents wanted to have a girl.

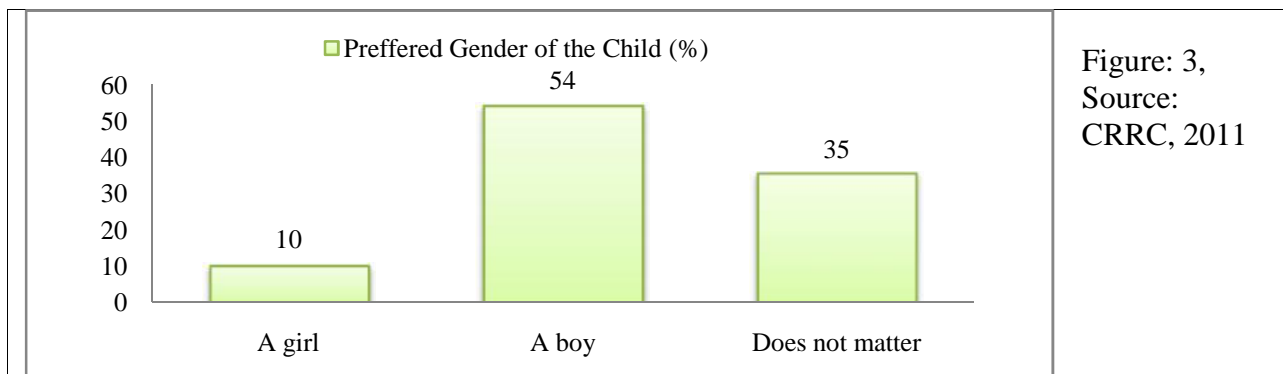
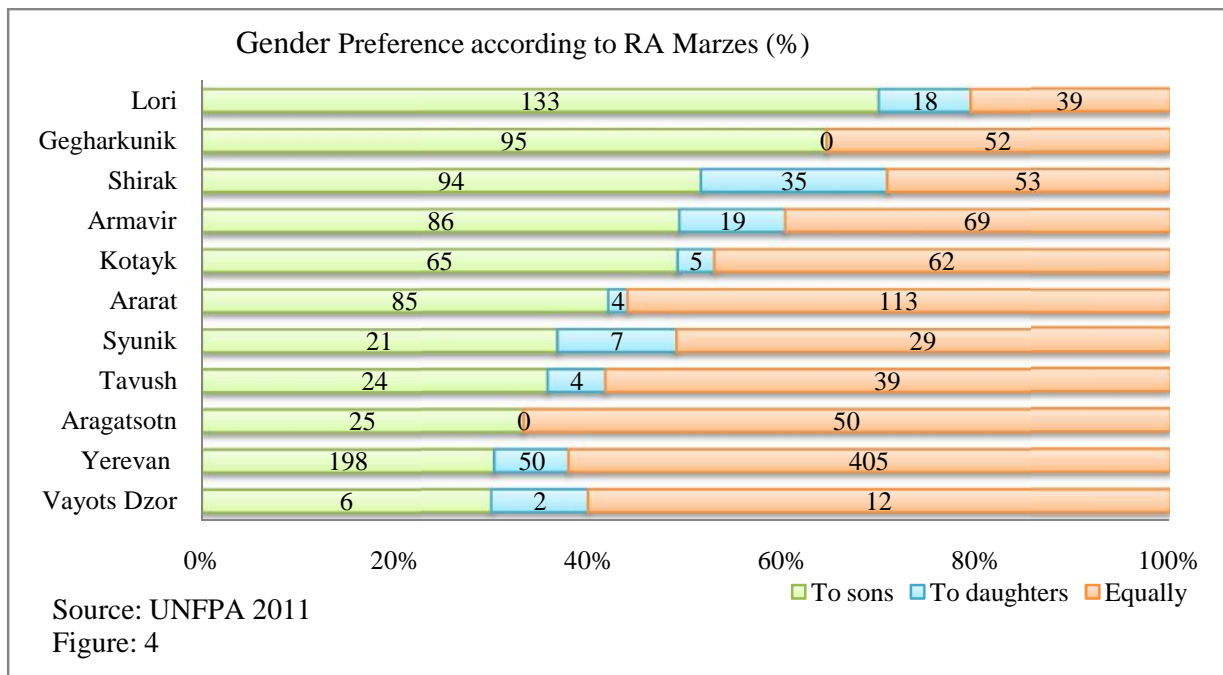


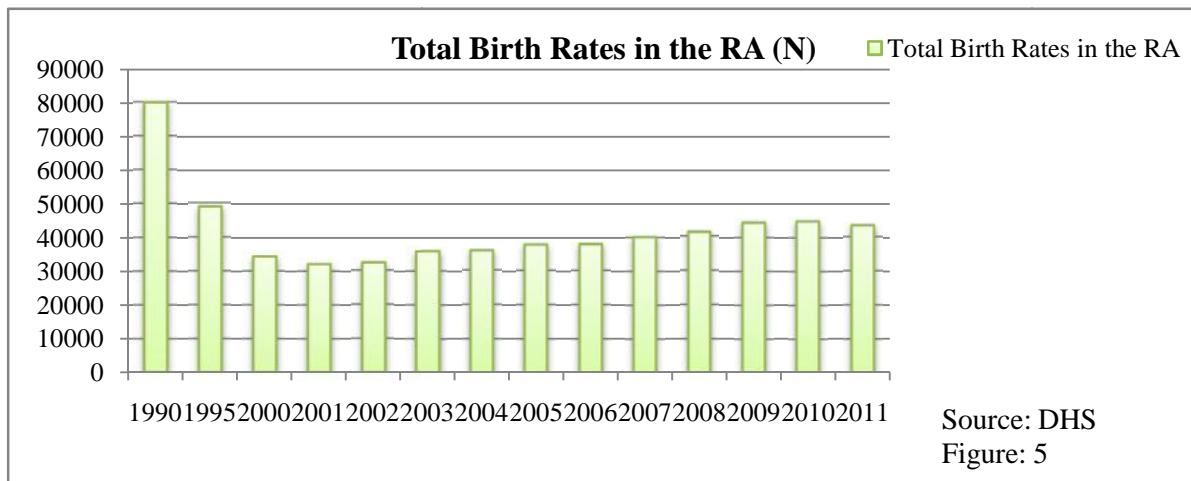
Figure: 3, Source: CRRC, 2011

Morover, the numbers are different across the marzes². As it is seen from the chart below the highest son preference is in Lori marz reaching for about 70%. The lower percentage is in Yerevan, which is in accordance with the data above that son preference and sex selective abortions are lower in urban areas. I would like to draw the attention to Aragatzotn and Gegharkunik marzes, where there is none that wants daughters: they either want a son or do not care about the gender. The situation is more alarming in Gegharkunik region as more than 60% of the population want a son and the rest are indifferent of the gender of the child. The responses from Shirak marz are also worth of attention, as it has one of the highest rates both among son preference and among daughter preference. There is son preference in other marzes too, however, the results are not so alarming as in mentioned three marzes. It should also be noted, however, that the data should be interpreted with caution, as number is very low for some marzes and response categories.



Upon these data, two marzes were chosen for semi-structured interviews with doctors in the scope of this paper.

Sex selective abortions are connected with the low live birth rates. Figure five shows live birth rates across the republic starting from 1990s. There is evident decrease in birth rates from 1990s: the decrease in birth rates from 1990 to 2000 is about 37000. This difference for a small country like Armenia is rather huge and if we again refer to the first figure where the proportion of males to females is indicated, we can see that the data somehow correspond to the statement, that increase of sex-selective abortion rates are connected with the decrease in fertility rates. As it is evident from the first figur, sex-selective abortions in Armenia were recorded from 1990s. Early 1990s is also the period, where huge decreases of live birth rates are recorded.



Desired Number of Children

The link between fertility rate and sex discrimination seems logical. If we take into consideration that we live in a society, which is strongly regulated by traditions, then it will be logical to conclude that lowering fertility rate impacts sex-selection. Thus, according to the Armenian tradition males own the heritage of parents, take care of them and preserve family name³. If a few years ago parents would care of having a son after the third or fourth child, now

³ Impact of cultural and social factors will be discussed in the next chapter in more detailed

they make the sex selection after the second child, as many families want to limit the number of children up to two (Mirzoyan, V., 2012).

Thus, if families want to have baby boys to continue their line and at the same time, they are willing to have four or six children, then the probability of sex selection would be low. But families, wanting to have a baby boy and willing to limit the number of children up to two or three sometimes have to make a sex selection to achieve the target. Therefore, falling fertility rates may become a reason for increasing sex-selective abortions (Portner, 2010).

Figure 6 represents percentage of men and women in reproductive age (15-49 years old), who currently have one or more children and have desire to limit further childbearing. Both females and males in urban area after the first child want to continue childbearing by 20%, while the most part of the rural population wants to continue childbearing (only for about 10% of the respondents answered that he/she wants to stop childbearing after the first child). The percentage of childbearing limitation abruptly raises in case of the third child in the family. For about 60% of female population does not want to have the third child. However, the difference in limitation between the third and fourth childbearing is not large (for about 10%). While comparing the results of females to males, we again see slight difference: the desire to limit childbearing is slightly higher among the female respondents than in the male population. As it is obvious from the charts both in rural and urban areas, parents prefer to have one or two children, as after the second child about 80% of the population both in rural and urban areas want to have kids no more.

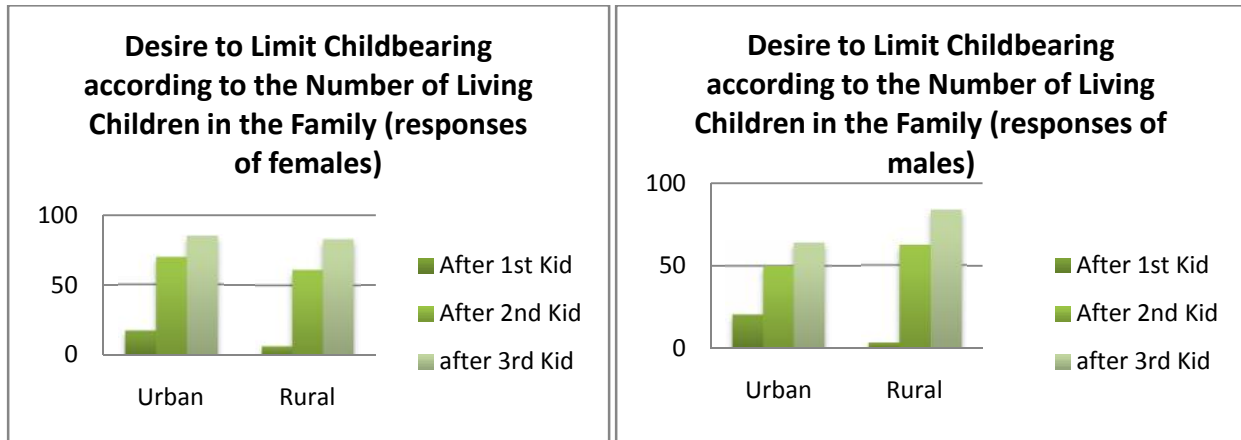


Figure 6 / 7. Source: DHS Armenia (p.68-69)

According to the data provided by the CRRC (2011) most of the population wants to have three children (38%) and more than half wants at least one child to be a boy (54%). If we apply the Portner (2010) theory about the relation between desired number of children and preferred gender, we can state, that there is stable ground for sex-selective abortions in Armenia. Thus, if we analyze the data from the figures 6, 7 and 8, we will see that most of the families want to have a small family size with their preferred gender of the child. The probability of sex selection increases with the number of pregnancies.

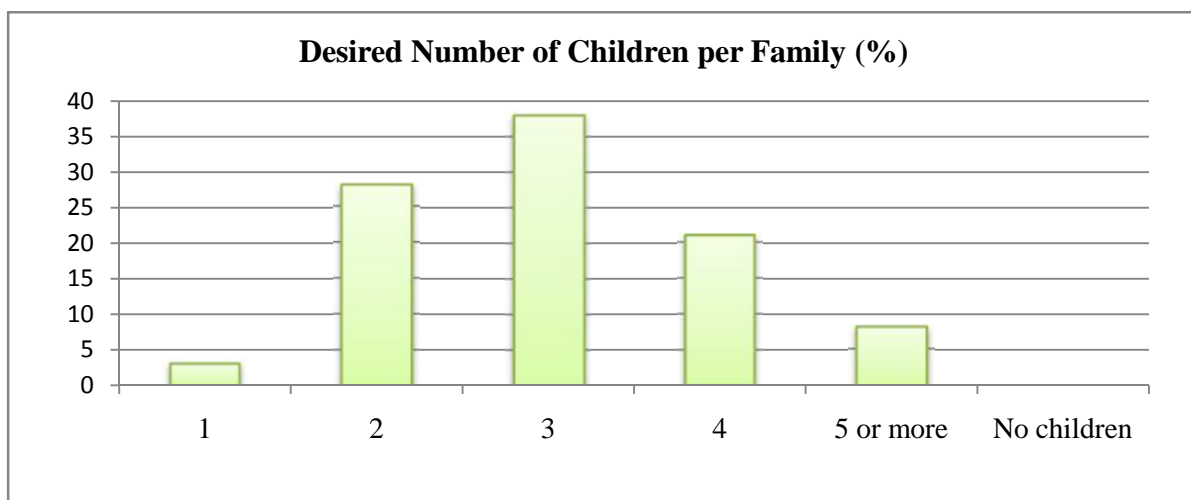
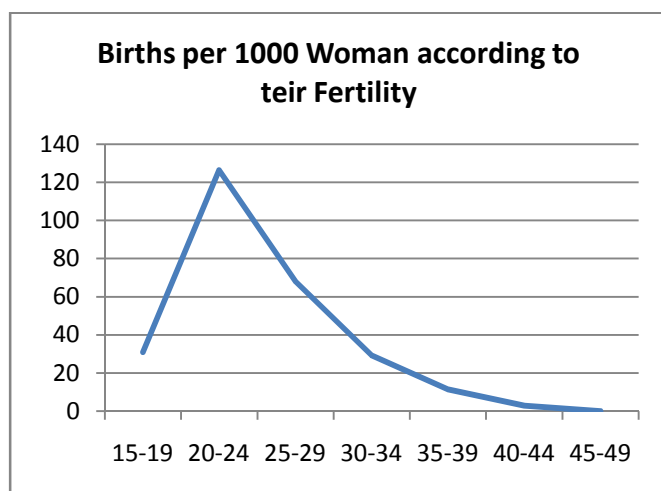


Figure 8: Source: CRRC, 2011

One of the methods to understand fertility rate decrease is to investigate age-specific fertility rates. Age specific fertility rate is the number of births in specific age group per 1000 woman. Most of the women in Armenia bear children in their twenties. The age specific fertility rate reaches its peak at the ages of 20-24 regardless of the place of residence (DHS, 2005, p. 41).



The fertility rate lowers by the aging of women: those between 30-34 have lower fertility rates (20%-15%) and those above 35 comprise only 5-10%. In fact, fertility rate between the age groups of 20-24 and 25-29 comprise account for three-fourths of the total fertility rate.

Source: United Nations Statistics Division, 2006

Figure: 9

Age specific fertility rates counted for a five-year period indicate that the fertility rate has decreased in recent twenty years in the Republic of Armenia. The decrease is widely observed within the 20-24 and 25-29 age groups (the groups, which had the highest fertility rate). In the period of five to nine years, the fertility in the age group of 20-24 declined from 178 births per 1000 women to 146 births. The decrease is almost 18% (DHS, 2005, p. 43-44).

Comparing the DHS surveys from 2005 and 2010, we can state that the ideal number of children mentioned by the male population is changed slightly: in 2005, the mean number was 3.1 and in 2010, it decreased to 2.9. There is also significant change in the mean ideal number of children (DHS, 2010, p. 9). The decrease in the number of wanted children in the family, means that the risk of sex-selection rises. However, one should be careful dealing with the age-specific fertility rate preferences, as the mean ideal number of children among males and females

increases with age i.e. age group 15-19 want 2.3 children and age group 45-49 2.8 children (DHS, 2010, table 6.4). As Fertility rate decreases through aging and childbearing in the age group of 45-49 comprises only 20% of the total fertility rate, the increase in desired number of children cannot significantly influence fertility rate increase and consequently cannot lead to sex-selective abortion rate reduction.

Birth Order

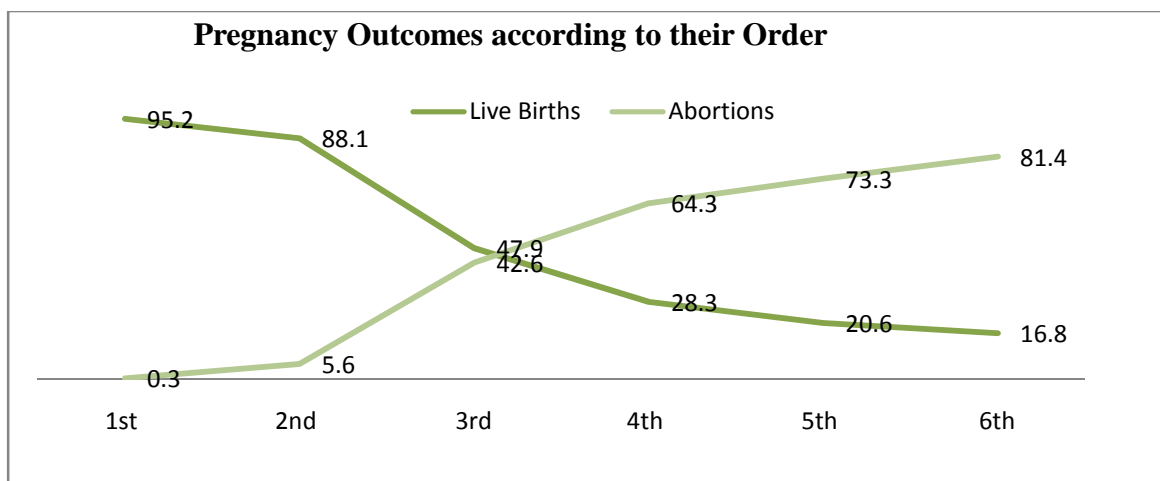
It is important to watch fertility and birth rates, while discussing the link between sex-selective abortions and desired number of children. If there is no phenomenon of sex-selection, then boy preference may lead to the increase of fertility rate. The reason for increase of fertility rate would become the fact that families will have as many children until they reach the desired number of boys. However, if a family has relatively large number of baby girls, it is likely that they would like to have another child hoping that it would be a son. However, this effect of increasing fertility has low probability to be real, when the family succeeds to have desired number of sons during the first births. Thus, in general terms we can state, that the families having sons early, stop childbearing and the families having daughters continue childbearing until they have a baby boy (Portner, 2010, p. 5-10).

The desired number of children, as mentioned above varies from two to three in Armenia. Starting from the third birth the rate of desired pregnancies is decreasing. According to data (Guilmonto, C.Z., 2012, p. 25-26) parents do not care about the gender in case of the first pregnancy. Gender discrimination becomes more evident after the second or third pregnancy, if parents did not manage to have the desired number of boys. The discriminations become stronger, when the expected child should be the last to fulfill the family. Thus, if a family plans to have three children and wants at least one boy, but in preceding two pregnancies, parents do

not manage to have their desired number of male children, then the rate for sex-selective abortion raises during the third and last pregnancy.

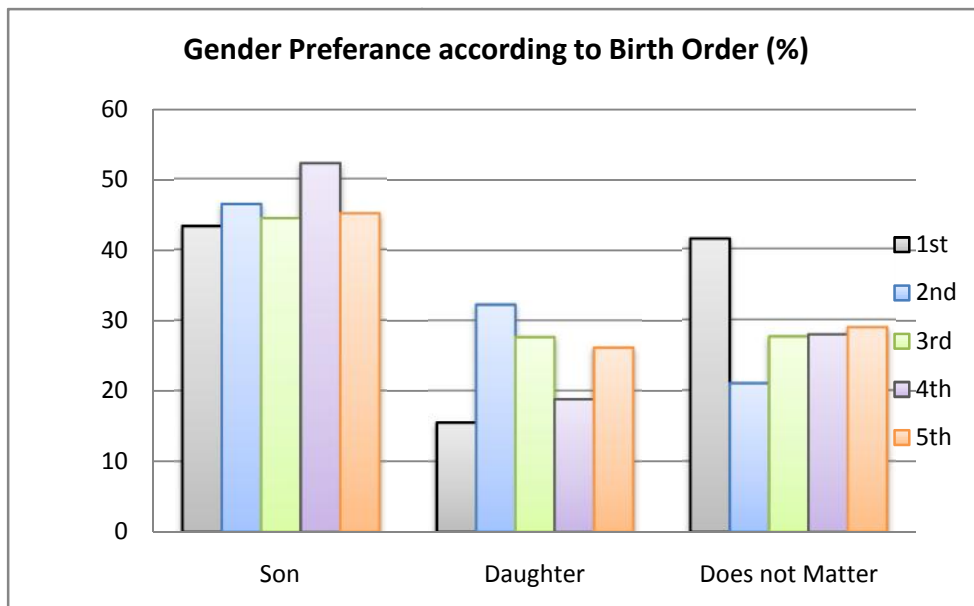
In Armenia, as it can be expected from the data available above, many pregnancies end up with abortion after the second or third child as evident from the figure 10. Almost all the first pregnancies end up with live birth in Armenia. However, starting from the third pregnancy the rate of live births abruptly lowers and the rate of abortions consequently rises. If we compare the rates of second and third pregnancies, then it will be evident that the rate of abortions after the third pregnancy raises for about 5 times. As we see after the fourth birth more than half of the pregnancies end up with abortion (about 60%).

If in 1970s parents were ready to bear large number of children to have desired number of sons, they started limitations to fertility already from 1980s and 1990s. Technology and medicine advancement made their business of sex-selection easier and more productive. (Guilmonto, C.Z., 2012, p. 29). Nowadays not only in Armenia but also in many other Asian countries sex ratio destruction means, that parents want to have certain number of children (mostly the preferred gender is male) keeping the family size small.



Source: UNFPA, 2012, Figure: 10

According to the study by the UNFPA (2012) during the first pregnancy almost half (41.4%) of the respondents mentioned that they would like to have boys. The number of those who had boy preference during the first pregnancy is twice big from those, who want a girl first (15.5%). In case of the second pregnancy the rate for boy preference grows more (46.4 %), but the number of those having girl preference also grows by twice (15.5% - 32.2%). Thus, the number of respondents who did not care about the gender during the second pregnancy is low, only 21.4%, though it increases by 6.5 during the third pregnancy and remains stable during the fourth. In case of the third girl preference rate is lower from boy preference by 16.5. Therefore, if we accept that the ideal number of children is three per family and if the parents did not manage to bear their desired number of boys during the first or second pregnancy, then the probability of sex selection increases.



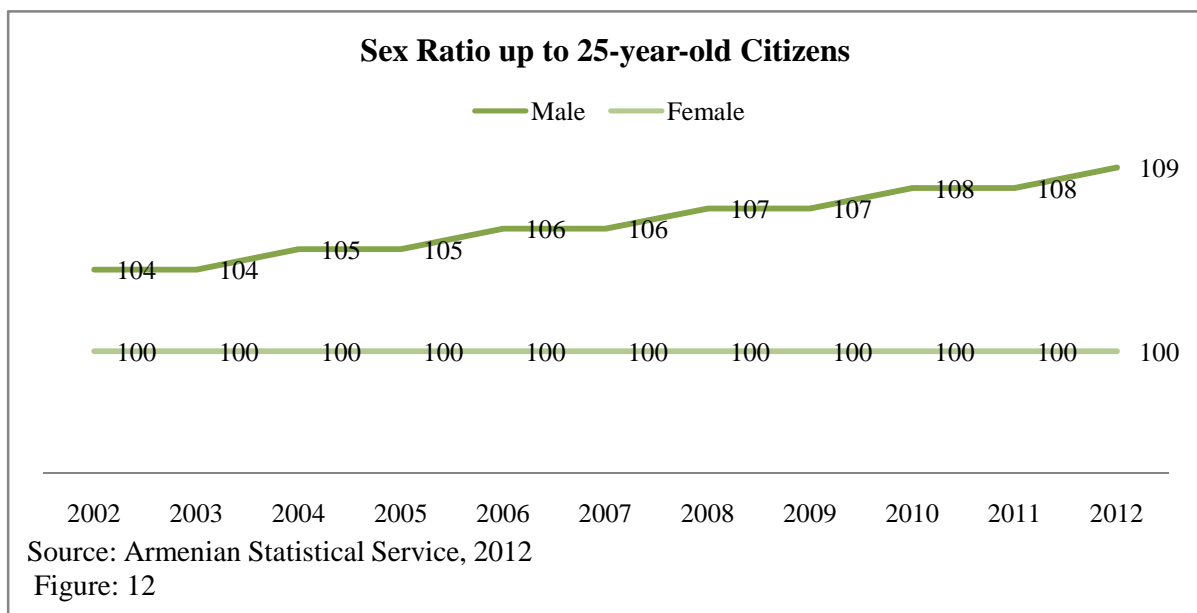
Source: UNFPA, 2012, p. 17

Figure: 11

As dangerous consequences of boy preference raising criminality rate, human trafficking, rapes, “lack of brides” etc. may be counted. “Of course, sex-selection is a dangerous thing. The Nature created a man and a woman, as Adam and Eve. Now, imagine that only

Adams will be born. Of course, it is dangerous and we should take measures regarding this phenomenon” (Hovhannisyan, A., 2013).

As we saw from the graph one on page 29 the rates of sex-selective abortions are very high among newborns in the RA. However, sex-ratio changes by the time. When sex ratio is calculated taking wider range, than just newborns, we see that distortions are not so evident. The reason is not just high mortality rate in those years compared to 1990s but also high migration rates (Armenian Statistical service, 2011). “Today the migration rates are very high. And this is not only about Gyumri, but also for all the republic. The delicacy here is that, people leaving Armenia are mostly in their eproductive age” (Khachatryan, E., 2013). The figure 12 shows sex ratio of men to women and it is calculated up to the population of 25 years, because those born in 1990s now should be in their twenties. Thus, what we observe is that when the generation reaches the age of 20-25, the ratio returns to its natural rates. The explanation of this phenomenon may be high migration rates in Armenia, however, the link between these phenomenon is not yet stated.



Chapter 3

Perceptions of Sex Selective Abortions and Gender Discrimination

It is suggested that, “Sex selection is mainly an adaptative behavior to avoid births of the unwanted sex and represents a rational strategy that comes as a response to fixed constraints and modern opportunities” (Guilmonto, 2012, p. 34). The views on sex-selective abortions are not unilateral both at public in general and among scholars. They can be divided into two large groups. The first are those of claiming that sex-selective abortions contribute to gender discrimination and, thus, threaten women’s security in the society. The second group puts the emphasis on the freedom of choice and liberty, claiming that everybody has the right to choose the gender and number of their children.

Some of the doctors think that not only sex-selective, but abortions in general should be banned categorically in the RA. Abortion is not acceptable at all as a means to regulate births in the family. “There should be a Law banning abortion, except the cases dangerous for life and probability of disease transmission”. Because of the sex-selection the society faces skewed sex ratios, which may create unfavorable conditions for women in the society. First, there will be shortage of brides, there will be raise in prostitution, human trafficking and others.

While the opposing group emphasizes the importance of liberty. They object that sex-selection does not yet mean that people think that male gender is better than female. The choice for male offspring is just a matter of preference and none has the right to limit people’s choice, as everybody is born free and the freedom of choice is protected by the law (McCarthy, 2001, p.302).

As for McCarthy (2001) there are no reasonable arguments that will prove the necessity to ban the abortion. “The fact that some women are prepared to go through with it tells us that,

for one reason or another, it is very important to them” (McCarthy, 2001, p.303). Moreover, in many families females are mistreated because of their gender: be they males they would be loved and treated otherwise. Thus, none has the moral right to impose the opinion on others and make the female exist in humiliating conditions. As comparison, he takes the examples of smoking pregnant women and those who make sex selection, assuming that they harm the child equally by 10%. Such “non person affecting” (McCarthy, 2001, p.303) principles are not right.

Some specialists to whom I have talked think that there are sex-selective abortions in Armenia at some point i.e. they agree that the number of male births outnumber the number of female births, but the sex ratio, which is recorded in nowadays Armenia, is not alarming at all. Moreover, some doctors think that there is even no gender discrimination in Armenia: *“There is nothing dearer to me than my mother and sister, how can they be ignored and discriminated. If they are not involved in big politics it is their right and their choice”* told a doctor from Shirak hospital. Some sarcastically add the discussions about the gender discrimination not only in Armenia, but all over the world is just a *“fuss”* created by women. The intention of the fuss is just to attract men’s attention: *“may be our fault is that we somehow a little bit ignored them”* told another doctor from Akhuryan (Akhuryan is a district in Shirak region) hospital.

As opposed to the men, women specialists were extremely feministic in their views. While discussing the question “How would you evaluate the status of women in society?” all of the participants of the focus group in Shengavit Medical Center mentioned that women are underestimated. One of them told

There was a woman, who made for about eight nine abortions, she would definitely keep the children if not directed by her husband. Thus, this means that most of the women are just being used by men and have no their own opinion.

Those of male interviewees, who agreed that the status of women is low in the society, thought that it was mainly because of undeveloped society in general. A doctor from Martuni Medical Center connects the low status of women with low level of development of the entire region:

The development rate in the region is very low. Sometimes people cannot even write their names, they are illiterate. Thus, first of all we should work on increasing the development level in the entire region and work on those problems then the status of women in the society will improve.

Why Boys? Deep Rooted Cultural Preference

In many Asian countries, boy preference is a deep-rooted cultural phenomenon. There are some general cultural features, which are applicable to almost all Asian countries. An old Indian saying “Grooming a girl is like a watering a neighbor’s garden” (Sharma, M., 2008, p. 200) is peculiar to many Asian countries. Historically people valued boys more than they valued girls. One of the reasons for valuing boys more than girls is that after growing up girls leave their parents’ houses and become a member of their husbands’ family. They take their husband’s family name, work and take care of their new family members. While sons stay with the family and take care for the house and parents during the rest of their lives. Besides, they are the breadwinners and heads of the families.

In Armenia as in many other Asian countries the society is mostly male dominated. However, boy preference comes not only from the male population: many women in Armenia themselves prefer to have a boy rather than a girl. In one of the focus groups a woman that had two boys and because of certain health issues could not have any other children in case of probable pregnancy would still like to have a son:

If I were fortunate enough to have another child, I would like to have yet another son. I do not agree with the idea that the society finds girls less important. Each person thinks in their own way. Each person has their own individuality, so it all depends on how that person thinks and approaches that question. I, for instance, value sons. I simply love sons (UNFPA, 2011, p. 32).

However, strong boy preference still may be connected with male dominance in the society as well as the family. In many cases women start thinking the way their husbands are thinking, because the head of the family is the husband and whatever he thinks becomes acceptable and right for the wife:

In Armenian families, a man's word carries more weight with women. The man wants to have a son, therefore, the woman also wants a son because this is what the man wants. The man's opinion prevails in the family (UNFPA, 2011, p. 31).

But as one of the doctors in Shengavit Medical Center projected if women would be strong enough to sustain their point of view and protect their rights everything would be otherwise. As mentioned Mrs. Gevorgian (2013) during the focus group, perceptions about weak women in our society should not be generalized all over the society, as many things depend on individual. If the individual is strong enough, it does not matter in what conditions she is or how much pressure there is on her, she will do whatever she thinks is the right thing:

I myself was expecting my firstling. As ultrasound test showed I was expecting a baby girl. My husband and mother-in-law told me that I should make an abortion. I objected and said that I would never make an abortion. I gave a birth to the child and guess what? It was a baby boy.

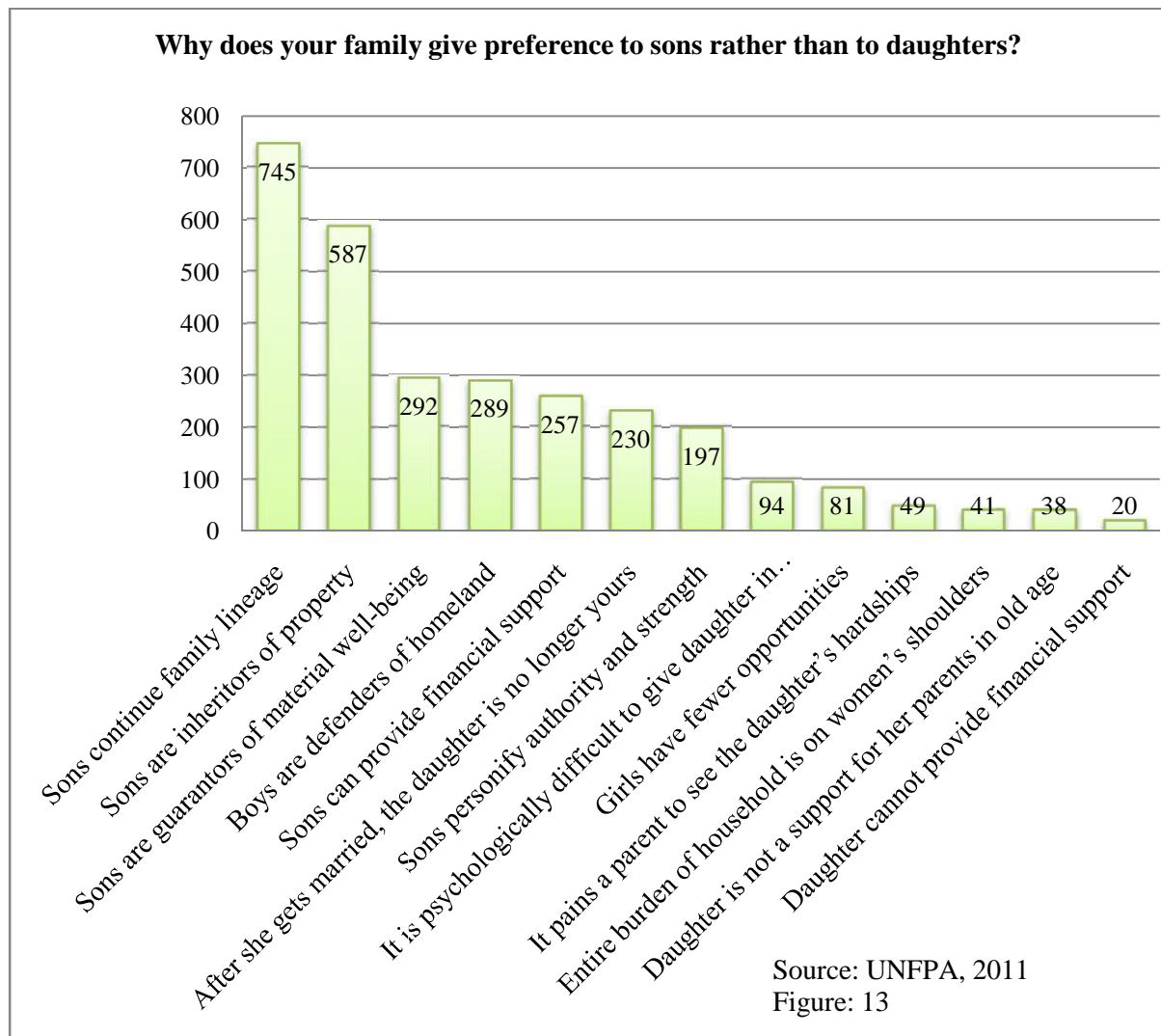
Other participants of the focus group mentioned the importance of women's involvement in social life: "*By our example we want to show other women how important it is to be employed*". Some participants of the group were even feministic in their views on the issue claiming that all the important fields of our social life should be ruled by women:

Have you heard? People decide that it is better to have women presidents rather than men, and it is true: women can govern better, there would be no wars and conditions will certainly become better.

Anyhow, there is also evidence that women obey the will of their husbands and mother-in-laws rather, than protesting their decision on whether to keep or abort the baby girl. The phenomenon of obeying is more evident in different marzes of Armenia than in the capital city of Yerevan. Mr. Hovhannisyan (2013) from Martuni Medical Center during his practice in recent year had many cases, when young mothers start crying when they are told, that they are expecting a baby girl: "I try to talk to them, to talk with family members and persuade them not to make an abortion because of the gender" (Hovhanisyan, A., 2013). In Armenia "May you have a boy" sounds like a compliment to a pregnant woman (Hekimian, K., 2013).

According to the data provided by the UNFPA (2011, p. 33) many of the families want to have a boy because of the continuation of family lineage, because it is the males that inherit the family name and pass it to other generations, thus providing continuity to the very nation they belong to. Figure 13 shows the most frequent reasons why families prefer to have a boy rather than a girl. The second reason for strong boy preference is property heritage. Most of the people want to inherit their property to the male heir. The other reasons also have economic background such as "sons are guarantors of material well-being", "sons can provide financial support" and others. Such answers show that many old people and some part of female

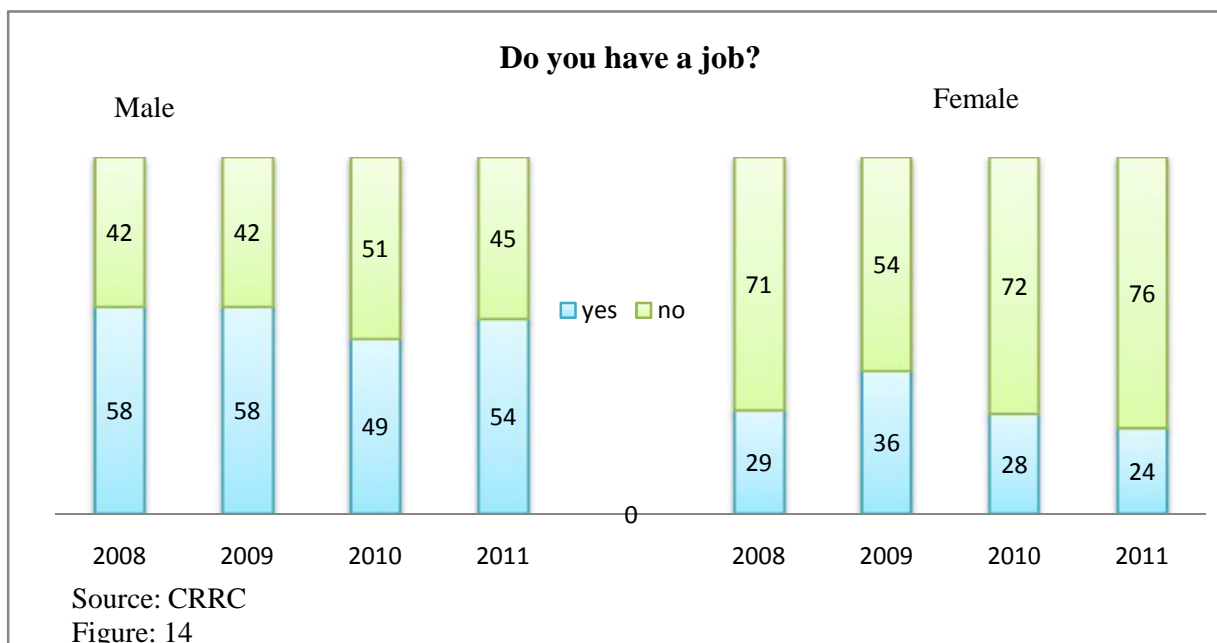
population is economically dependent of males, therefore, males have greater economic value. Besides, “sons personify authority and strength”, which is one more reason to believe that the Armenian society is highly male dominated. As it is evident most of the prevailing reasons for boy preference are economic.



Role of Economic Factors

In our society men are in more favorable conditions than women are: they enjoy more favorable conditions while being employed, they earn more and have more chances in career development than women. The unemployment rate is very high in Armenia almost half of the population are unemployed (CRRC, 2011). The employment rate does not altered much since

2008, though there is slight increase in 2011. Comparing the employment rates of women and men, it becomes evident that male employees outnumber female employees for about 30%, as the unemployment rate among women varies from 50 % to 70% or more, which means that most of the women do not earn money for their own and are supported by someone else (husband, family members or others). Being dependent from someone else hinders free self expression of women lowering their social status.

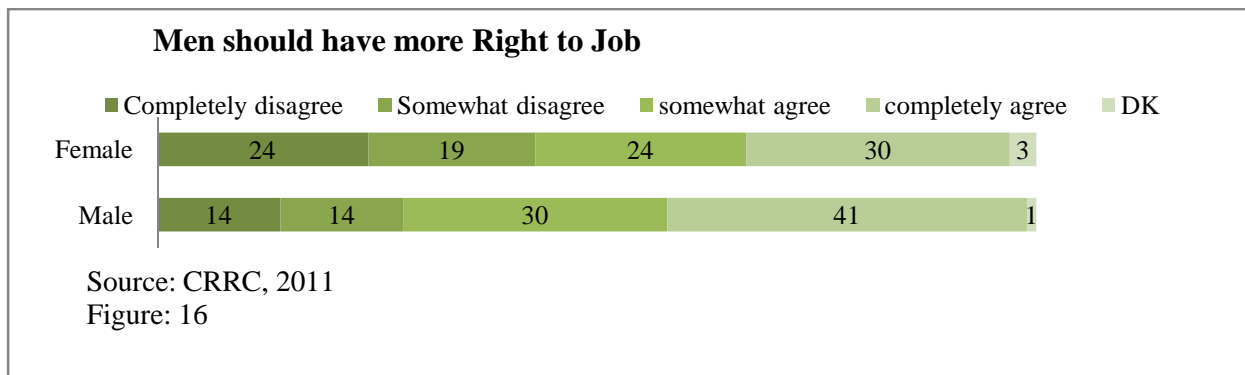


Even those women who work do not get enough salary to be able to live independently. Men in average get higher salaries than do women. The average salary of female population is more than twice lower than the average salary of men.

The average salary per month by gender			
	2009	2010	Source: National Statistical Service (2009, 2010) Figure: 15
Male	22614	25497	
Female	9211	9365	

More than half of employed women get minimum salary, which equals for about 30.000 AMD (CRRC, 2011). This much salary is not enough even for the minimal expenses per person. Only 24 % of women get salary of about 31.000-80.000, which again is not enough for independent life. Only 15% of women get a salary of about 100 000 – 140 000 AMD, which is enough for living and covering minimal expenses in household. Thus, the data above once more proves that males are economically more beneficial. Males are future guarantors of family’s well-being, as women with their low salaries and employment rate cannot sustain even themselves and constantly will need protection and care of their parents or husbands.

However, the phenomenon of gender discrimination during employment is accepted as normal both by males and females. For about more than half of the male population agrees that they should have priorities over women while applying for a job. Almost half of women also accept that they should have lower chances for employment, than that of male.



The data above gives a stable ground to think that men in our society are in more favorable economic conditions. The breadwinner of the family is the male and women mostly are dependent on them, though, there are women who are working. However, not all of them get enough salary to sustain themselves and support the family.

Conclusion

Abortion policies are different all over the world, however, there are several principles which are common for all the countries worldwide. The policy is regulated by the constitution and laws of the particular country. The abortion policy in our country is regulated by the Law on Reproductive Health and Rights of the Republic of Armenia. The laws should comply with the constitution of the RA as well as with the International treaties, to which Armenia is a signatory. However, there are certain points which do not comply with those treaties and also need clarification and more detailed explanation. Besides there is considerable lack of control in policy implementation.

Sex-selection was evident started from 1990s in Armenia, however, only in recent years scientists and doctors started to pay attention to the phenomenon. UNFPA in cooperation with the relevant governmental bodies, started preparing reports about the current situation in the country. In the South Caucasus region the sex-selection rates are the highest in Armenia. In the Report prepared by the UNFPA we can find certain data and proof on the issue of sex-selection, however in the official website of the Ministry of Healthcare, it is mentioned that there is still not enough evidence about sex-selective abortions.

Theoretically, it is believed that when there is considerable decrease of fertility rate in the societies with high boy preferences, the probability of sex-selection will increase. Thus, already in 1990s the fertility rate in Armenia fell greatly: the fertility rate decreased twice in 2000s as compared with the 1990s. Simultaneously there was considerable difference in natural ratio of men to women (the natural ratio of men to women is 105 to 100, as men are biogenetically weaker than women and the mortality rate is higher among men as compared to women). The peak of sex ratio distortions were registered in 2000 and 2001, though there is no

more tendency of growing distortions, the difference between male and female newborns is still high in Armenia.

The factor that contributes to sex discrimination is also the decreasing desired number of children. If in former times, families were willing to have up to 4 children, nowadays the preferred number of children varies from 2 to maximum of 3. It is logical to conclude that the rates of sex-selection will go higher, considering that Armenian society has high boy preference (half of the population give preference to a boy). Thus, what we observe is that simultaneously with increasing frequency of pregnancies the abortion rates also go higher.

There is no much difference in rural and urban areas while discussing the issue of sex-selection. According to the data the desired number of children is slightly higher in rural than in urban areas, therefore, the fertility rate is also higher in rural areas. People in rural areas have much higher boy preference than those living in urban areas. Both females and males have similar attitude towards gender and desired number of children. Though, the male population slightly differs from females in case of the desired number of children: on average men want more children than women do.

The reasons behind sex-selective abortions are different. It is believed that cultural peculiarities have a great role in shaping the attitude towards females and gender discrimination. Thus, as in many Asian countries males are valued more than females in Armenia. One of the most frequently mentioned reasons for boy preference is that the males continue the family lineage and take care of their family. Girls, however, marry and in most part take their husbands' family name and start to take care of and contribute to their new family.

Other factors that mostly contribute to gender discrimination in the society have economic background. Most of the respondents mentioned that they would prefer boys over the girls because males are heirs of family property, they are guarantors of material welfare and can provide financial support to the family. Thus, it can be concluded that males are economically in more beneficial conditions than women, as the average salary per person is much higher than those of female population. Besides, it is interesting the most part of the population, both male and female, think that it is natural that men should have more work opportunities than women.

Anyhow, the issue of gender discrimination and sex-selection is not accepted unilaterally by the public, doctors and scientists. They can be divided into two large groups: those claiming that sex-selection is a matter of gender discrimination and gender bias and those, who argue that sex-selection is a matter of freedom of choice and has nothing to do with discrimination. When people choose the gender of their future child they should have very serious and reasonable arguments for that, and nobody has right to limit other's choice.

Recommendations

Recommendation 1: Raise public awareness on the issues of gender discrimination, sex-selection and status of women in the society. Awareness raising is especially important among female population, as first of all women should value and believe in themselves knowing, that they also can be equal to men.

Recommendation 2: Raising the quality of life: improving social conditions of people will allow them not to think that in old age they will stay alone without someone caring and supporting them. Women will have equal chance to be employed.

Recommendation 3: Improve laws and regulations about the abortion policy. Many points in our legislative framework do not comply with the international treaties to which Armenia is a signatory.

Bibliography

- Abrahamyan, R., Gyulkhasyan, V., Avagyan, G., Kuyumjyan, K., Saghatelyan, A., Aghajanyan, A., & Arushanyan, A. (2012). *“Prevalence of and Reasons for Sex Selective Abortions in Armenia” Report | UNFPA Armenia Country Office official website*. Yerevan. Retrieved from <http://unfpa.am/en/publications-sex-selective-abortions>
- Almond, D., & Edlund, L. (2008). Son-biased sex ratios in the 2000 United States Census. *Proceedings of the National Academy of Sciences, 105*(15), 5681–5682.
doi:10.1073/pnas.0800703105
- Abrejo, F., Shaikh, B., & Rizvi, N. (2009). 'And they kill me, only because I am a girl'...a review of sex-selective abortions in South Asia. *European Journal of Contraception & Reproductive Health Care, 14*(1), 10-16. doi:10.1080/13625180802518231
- Armenia 2005 Demographic and Health Survey Armenia 2005. (2006, December). Armenian Statistical Service of Republic of Armenia. Ministry of Health Yerevan, Armenia. ORC Macro Calverton, Maryland USA. Retrieved from <http://www.armstat.am/en/?id=288&nid=81>
- Caucasus Research Resource Centers. (2011). ODA - Online Data Analysis. Retrieved April 26, 2013, from <http://www.crrc.ge/oda/?dataset=5&row=135>
- Caucasus Research Resource Centers. (2013, April 1). High Abortion Rates vs. Conservative Views against Abortion in the South Caucasus. Retrieved April 21, 2013, from <http://crrc-caucasus.blogspot.com/search?updated-min=2013-01-01T00:00:00%2B04:00&updated-max=2014-01-01T00:00:00%2B04:00&max-results=10>

- Council of Europe, Committee on Equal Opportunities for Women and Men. (2011). *Prenatal sex selection* (No. 12715). Retrieved from <http://assembly.coe.int/ASP/Doc/XrefViewHTML.asp?FileID=13158&Language=EN>
- Ghazarian, A., (2004). *Triggering Agendas for Reproductive Rights in Armenia*. Hungary. Central European University, Center for Policy Studies. Retrieved from <http://pdc.ceu.hu/archive/00001869/01/ghazaryan.pdf>
- Grigoryan, M. (2011, July 6). Armenia: Are Selective Abortions Behind Birth Ratio Imbalance? *EurasiaNet*. Retrieved from <http://www.eurasianet.org/node/63812>
- Guilmoto, C. Z. (2012). *UNFPA - Sex Imbalances at Birth: Current trends, Consequences and Policy Implications* (No. ISBN: 978-974-680-338-0). Thailand. Retrieved from <http://www.unfpa.org/public/home/publications/pid/12405>
- Hesketh, T., & Xing, Z. W. (2006). Abnormal sex ratios in human populations: Causes and consequences. *Proceedings of the National Academy of Sciences*, 103(36), 13271–13275. doi:10.1073/pnas.0602203103
- Blanger, D. (2002). *Sex Selective Abortions: Short-term and Long-term Perspectives*. *Reproductive Health Matters*, Vol.10, No. 19. Retrieved from <http://www.jstor.org/stable/3775793>
- McCarthy, D. (2001). Why sex selection should be legal. *Journal of Medical Ethics*, 302–307. doi:10.1136/jme.27.5.302
- International Parenthood Federation. (2009). *Abortion Legalization in Europe*. IPPF European Network. Brussels (1000). Retrieved from http://www.ippfen.org/NR/rdonlyres/DB347D31-0159-4C7D-BE5C-428623ABCA25/0/Pub_AbortionlegislationinEuropeIPPFEN_Feb2009.pd

- Mkrtchyan, M., Sargsyan, M., Zohrabyan, M., Tovmasyan, O., & Artsruni, L. (2012, February 8). The Unborn Daughters of Armenia: Experts voice alarm on female child abortion /Digital Story/ | JNews. *Jnews.am*. Retrieved September 12, 2012, from <http://www.jnews.am/en/unborn-daughters-armenia>
- National Statistical Service (Armenia), International, I., & Ministry of Health (Armenia). (2012). *Armenia Demographic and Health Survey 2010 [FR252] - FR252.pdf*. Retrieved from <http://www.measuredhs.com/pubs/pdf/FR252/FR252.pdf>
- Pörtner, C. (2010, May 25). Sex Selective Abortions, Fertility and Birth Spacing. Seattle University - Albers School of Business and Economics; Center for Studies in Demography and Ecology. Retrieved from http://papers.ssrn.com/sol3/papers.cfm?abstract_id=1615833
- Portner, C. (2010). *Sex Selective Abortions, Fertility and Birth Spacing*. Seattle: Department of Economics, University of Washington. Retrieved from <http://are.berkeley.edu/documents/seminar/Portner.pdf>
- Abortion Legalisation in Europe (2009). *IPPF European Network*. Retrieved from http://www.ippfen.org/NR/rdonlyres/DB347D31-0159-4C7D-BE5C-428623ABCA25/0/Pub_AbortionlegislationinEuropeIPPFEN_Feb2009.pdf
- Selective abortion - definition of Selective abortion in the Medical dictionary - by the Free Online Medical Dictionary, Thesaurus and Encyclopedia. (2012). *Free Online Medical Dictionary, Thesaurus and Encyclopedia*. Retrieved from <http://medical-dictionary.thefreedictionary.com/Selective+abortion>

- Sen, A. (1990, December 20). More Than 100 Million Women Are Missing. Retrieved from
<file:///C:/Documents%20and%20Settings/Administrator/Application%20Data/Zotero/Zotero/Profiles/nau1337e.default/zotero/storage/44CPTDR2/sen100m.html>
- United Nations Population Fund. (2011). *Factsheet on "Prevalance and reasons of Sex Selective Abortions in Armenia*. Yerevan: UNFPA. Retrieved from
http://unfpa.am/sites/default/files/Sex_Selective_Abortions-brief_factsheet-Eng.pdf
- Vogel, L. (2012). Sex-selective abortions: no simple solution. *CMAJ: Canadian Medical Association Journal*, 184(3), 286-288. doi:10.1503/cmaj.109-409
- Sharma, M. (2008). Twenty-First Century Pink or Blue: How Sex Selection Technology Facilitates Gendercide and What We Can Do About it. *Family Court Review*, 46(1), 198–215. doi:10.1111/j.1744-1617.2007.00192.x
- Sleeboom-Faulkner, M. (2010). Reproductive technologies and the quality of offspring in Asia: reproductive pioneering and moral pragmatism? *London : Informa Healthcare*, 12 (2), 139–52. doi:10.1080/13691050902912767
- Social Science in the Caucasus: High Abortion Rates vs. Conservative Views against Abortion in the South Caucasus. (2010). *World Values Survey*. Retrieved April 21, 2013, from
<http://crrc-caucasus.blogspot.com/2013/04/high-abortion-rates-vs-conservative.html>
- The Government of the Republic of Armenia. (1997). *Committee on the Elimination of Discrimination Against Women, Concluding Observations/Comments - Armenia*. Retrieved from <http://www1.umn.edu/humanrts/cedaw/cedaw-armenia.htm>
- World Abortion Policies. (2007 & 2011.). Retrieved September 18, 2012, from
<http://www.un.org/esa/population/publications/2011abortion/2011abortionwallchart.html>

- ՀՀ Ազգային ժողով. (2001, 12). ՀՀ օրենքը 2002 թվականի առողջապահական պետական նպատակային ծրագրերը հաստատելու մասին. Առլիս. Retrieved April 26, 2013, from <http://www.arlis.am/>
- ՀՀ Ազգային ժողով. (2002, 12). Հայաստանի Հանրապետության օրենքը մարդու վերարտադրողական առողջության եվ վերարտադրողական իրավունքների մասին. Retrieved April 26, 2013, from <http://parliament.am/legislation.php?sel=show&ID=1339>
- ՀՀ Ազգային ժողով. (2003, 08). ՀՀ կառավարության որոշումը մոր եվ մանկան առողջության պահպանման 2003-2015 թվականների ռազմավարությունը հաստատելու մասին. Retrieved April 26, 2013, from <http://www.arlis.am/>
- ՀՀ Ազգային ժողով. (2004, 08). ՀՀ կառավարության որոշումը հղիության արհեստական ընդհատման կարգը եվ պայմանները հաստատելու մասին. Առլիս. Retrieved April 26, 2013, from <http://www.arlis.am/>