

Son Preference in India

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What I will talk about

- ▶ Desire to have a son
- ▶ 5 underappreciated aspects of the desire to have a son
- ▶ Policy solutions

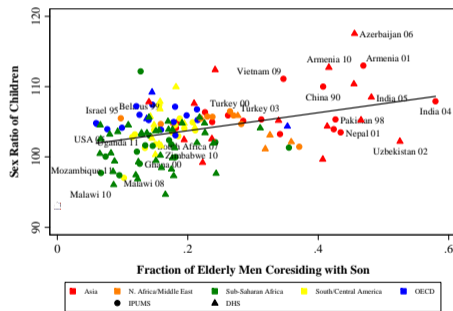
5 underappreciated aspects of son preference

1. Desire for to have a son is specific to some societies and not tightly linked to development
 - ▶ Problem and solution is cultural, not economic
2. Preference is for having *a* son rather than all sons
 - ▶ Many implications, including that dowry is not a major factor, in my assessment
3. Declining fertility worsens the skewed sex ratio
 - ▶ Problem can get worse with gains in development or women's agency
4. Desire for a son causes unintended harm to girls' health
5. Can't infer son preference well from ideal family composition

1. Desire to have a son is specific to some societies
2. Preference is for having *a* son, i.e., eldest son preference

- ▶ Trying again for a son leads to male-skewed sex ratio of last birth [SRLB] (as does sex selection)
- ▶ Male-skewed SRLB not seen historically in US or Europe
- ▶ Today, not strongly linked with level of economic development
- ▶ Cultural roots relate to eldest son's roles (e.g., patrilocality, religious rites)

Coresidence and the Sex Ratio of Children, IPUMS and DHS Samples



Source: Ebenstein (2014)

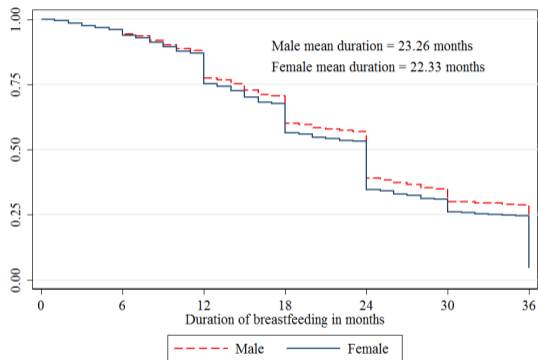
3. Declining fertility worsens the skewed sex ratio

- ▶ Family with 5 kids has 3% chance of no son; with 2 kids, chance is 24%
- ▶ Greater “need” to sex-select to obtain ≥ 1 son as desired family size falls
- ▶ Decline in desired family size explains an estimated 30-50% of India’s worsening sex ratio since 1980 (Jayachandran 2017)
- ▶ Women having more agency, e.g., via education, may not help sex ratio
 - ▶ Women fewer sons at any given fertility level
 - ▶ Women want fewer children
 - ▶ First force improves sex ratio, but second one worsens it

4. Desire for a son causes unintended harm to girls' health

- ▶ Affects spacing between births due to hurrying to have another child
 - ▶ Family size is larger than originally planned
- ⇒ Negative consequences for children's health (2 examples)

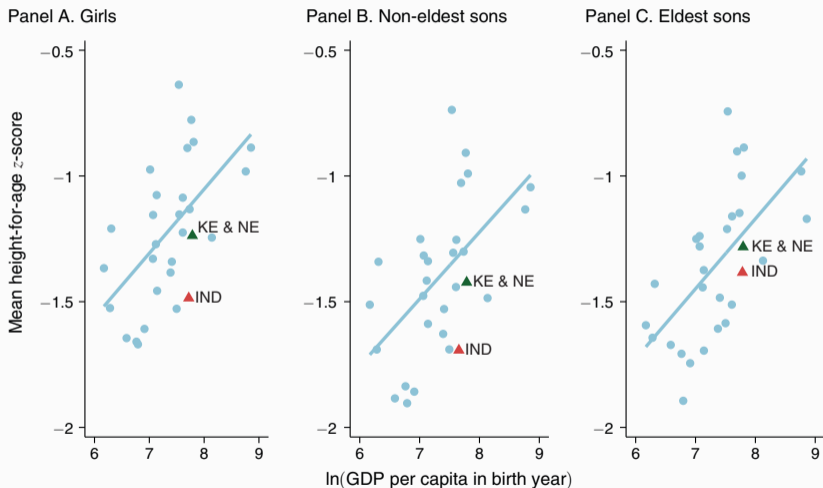
Girls are breastfed for a shorter duration than boys in India



- ▶ After birth of girl, want to get pregnant quickly to try for a son
- ▶ Quicker next pregnancies after girls → Earlier weaning
 - ▶ Know that breastfeeding reduces fecundity
 - ▶ Or, pregnancy triggers weaning

Source: Jayachandran and Kuziemko (2011)

Stunting in India: A problem among children other than eldest sons



Source: Jayachandran and Pande (2017)

5. Need better survey questions to measure desire for a son

- ▶ Demographic & Health Survey question: What is your ideal number of children, and how many of them do you want to be boys? girls?
- ▶ Most common answer in India today is 2 children – 1 boy, 1 girl
- ▶ Masks that parents would be OK with 2 boys but not with 2 girls
- ▶ Need to measure intensity of preference, and separate how many children they want from their son preference
- ▶ Message: Need to design and use better survey questions instead of defaulting to DHS question

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Policy responses to son preference

How to address desire for sons?

- ▶ Policy challenge for unintended health consequences is to direct resources *within* a family
 - ▶ Easier with health care because takes place outside the home and is non-fungible; more challenging with food
- ▶ Can we change the underlying preference for sons? Hard to do but seems worth trying

School curriculum aimed at changing gender norms



Dhar, Jain, and Jayachandran (2021)