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A life denied: The dark practice of female infanticide in India

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Abstract

In India, the killing of female new borns is known as female infanticide. For ages, this behaviour has been common in India, and it continues to be problematic today. In India, the dowry system, poverty, and the desire for male offspring are some of the several causes of female infanticide. A specific sum of money is given to the groom's family by the bride's family under the dowry system. Poor families may find this to be a financial hardship, and it may even cause them to murder their female infants. Female infanticide is also influenced by the desire for male offspring. Boys are valued more than girls in many places of India. This is because boys are viewed as a source of revenue and are able to continue the family name. In India, female infanticide is a severe issue. Thousands of female infants are thought to be killed annually. Although efforts have been made by the Indian government to curb this practice, it remains difficult.

Keywords: Foeticide, infanticide, crime against women, killing, dowry system

Introduction

The intentional killing of a new born girl or the selective abortion of a female foetus are both considered forms of female infanticide ^[1]. Millions have died as a result of the practice, which is a serious source of worry in many countries, particularly China and India. In patriarchal society, women are perceived as having a low position, which renders society gender prejudiced and fosters prejudice against women. It is important to recognize that this situation is not new, in actuality, female infanticide is as old as many societies, has probably resulted in millions of gender-selective deaths over the ages, and continues to be a serious issue in many countries to this day. Female infanticide is arguably the most horrifying and destructive example of the anti-female prejudice that permeates "patriarchal" nations, or those where cultural norms place a higher value on male offspring than female offspring. In every case, it demonstrates the low status of women in most of the world ^[2].

Sex selection in favour of sons, also known as female de-selection or son preference, is a very widespread practice, particularly in developing nations (China, Korea, Taiwan, Singapore, Malaysia, India, Pakistan, and New Guinea) in Asia and North Africa ^[3].

The most horrible crime against humanity in general and all women in particular is female foeticide. A situation where the birth of a daughter is avoided at all costs has resulted from the desire for a male, the small family notion of family planning, and the practice of dowries. Therefore, the most horrible crime is committed by the society's leaders: They kill the girl child while she is still in the mother's womb. Human rights, gender inequality, and the ethics of using and abusing scientific technology have all been raised by such an atrocity.

The removal of a girl infant from the womb following a sex determination test is known as female foeticide. The elderly members of the family want a boy to be born first, therefore the girl kid is slain in the womb before birth. Family pressure, particularly from the husband and in-laws, is the reason behind all of these treatments. Unplanned pregnancies are the most common cause of abortion, whereas family members commit female foeticide. In Indian civilization, the custom of killing unwanted females has existed for millennia ^[4].

People don't realize that only girls, not boys, are capable of bearing children in this world, and they think that boys carry on the family tradition.

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Meaning and definition of female foeticide

Taking a female foetus out of the mother's womb is known as female foeticide. According to Section 4(1) (b,c) of the Prenatal Diagnostic Methods (Control and Avoidance of Abuse) Act of 2002, a foetus is "a human organism during the period of its development beginning on the ninety-seventh day after fertilisation or formation?".

Objective of research

In certain regions of India, sex selection has become a widespread social phenomena, such as the intentional killing of a newborn girl or abortions. It is independent of caste, class, and community differences, as well as geographic location. Even before they are born, the girl children are being attacked. Regarded as a liability. A complicated web of social, cultural, and economic variables has led to this style of thinking. The extent of female infanticide and foeticide in India, as well as how these issues impact gender issues pertaining to the sex compositions of Indian homes, are conceptually examined in this work. Additionally, ideas and actions to stop this issue before it gets worse have been presented.

This essay aims to make readers aware of the actual nature of India's infanticide problem among girls. It reflects the demonic practice of female de-selection, both historically and currently. Finding the problem behind the smoke screens of claims that everything is under control and acting before its too late are the objectives.

• History

Since they did not worship images, the people of Duma, in particular, slaughtered a kid every year and buried it beneath an altar. People were buried alive by the Persians. For the sake of her soul, Xerxes' wife, Amestris, entombed twelve people alive. Listing every city or province where these practices were prevalent would take an eternity. Human sacrifice was recommended by the Cyprians, Rhodians, Physicians, Chios, Lesbos, and Temenos. This kind of behaviour was also common among the Romans. All of the inhabitants of northern Europe followed these customs. All of the countries outside of the Baltic, especially the Suevi and Scandinavians, including the Massageta, Scythians, Getae, and Sarmatians, adhered to the unwavering belief that the only way to achieve their happiness and security was to sacrifice the lives of others. Most of America and Great Mexico followed these customs. In Africa, some war prisoners were offered to their fetiches in order to gain their favour. Fetiches in an effort to get their approval.

At one point or another, people from a wide variety of religions engaged in human sacrifice. Human sacrifice was performed in a variety of ways among Hindus. Hindus have been offering human sacrifices since the early fifth century, and this practice is still practiced today. Human sacrifice was also practiced by the Arabian Muslims. For example, the Pagan Arabs buried their daughters alive. Throughout the middle to late 19th century, infanticide took many various forms and occurred in a variety of countries, it had been outlawed in the majority of them. However, infanticide is still a problem in other nations, such as India ^[5].

The low value attached to the birth of females is the cause of this deliberate slaughter of infant girls. The death of disabled or female infants was allowed, if not encouraged, by the government in numerous societies. Otherwise undesirable offspring. For instance, the murder of female children was so widespread in 200 B.C. Greece that, out of

6,000 families at Delphi, only 1% had two daughters. Almost as many of the 79 families had one child as two. There were 118 sons and only 28 daughters overall.

• <https://books.google.co.in>

But ancient Greece was by no means an exception. From the Renaissance until the present, one-third of eighty-four societies have killed "defective" offspring, according to RJ Rummel. For instance, in India, due to the strict caste structure and Hindu beliefs, young. It was just a matter of girls being killed. In the eighteenth century, when the first demographic data were gathered, It was determined that in "some villages, no girl babies were found at all; in a total of thirty others, there were 343 boys to 54 girls in Bombay, the number of girls alive in 1834 was 603 ^[4]". In 1857, John Cave-Brown first wrote about the practice of female infanticide among the Jats in the Punjab region. The Jat have been killing female infants for 150 years, according to data from the colonial era census and the 2001 census. The earliest documented instances of sex ratio disparities between Lewa Patidars and Kanbis in the Gujarat region date back to 1847.

In 1789, the British discovered that female infanticide was common in Uttar Pradesh during their colonial rule in India. According to a letter sent by a magistrate assigned to the North West region of India at the time, no daughter had ever been brought up in the Rajahs' strongholds for many hundred years.

Mynpoorie, However, once a district collector named Unwin stepped in, the king of the period did manage to keep a daughter alive in 1845.

While not all communities engaged in this practice, it was widespread. According to a review of research, the North West of India was the site of the majority of female infanticides during the colonial era. Following an investigation, the colonial authorities outlawed the practice in 1870 ^[6].

In India, amniocentesis has been performed to determine a child's gender before birth since 1974. If the new-born is female, an abortion may be performed. It is "almost impossible to do away with them" since certain customs are so ingrained in Indian society, according to women's rights advocate Donna Fernandes claimed that a form of "female genocide" is occurring in India.

According to the UN, India is the nation where female children die the most, with a 75 percent higher death rate for female children between the ages of 1 and 5 in 2012 than for male children. According to estimates from the children's rights organization CRY, 12 million girls are born each year.

One million people will have passed away in their first year of life in India. During British rule, the Kallars and Todas in the Indian state of Tamil Nadu were known to practise female infanticide. The southern Tamil Nadu town of Usilampatti continued to practise female infanticide. According to a June 1986 India Today cover article titled "Born to die". Among the Kallars, the region's ruling caste, the practice was most common ^[7].

National framework and situation

Prevalence in India: John-Thor Dahlburg asserts that "in rural India, the centuries-old practice of female infanticide can still be regarded as a prudent course of action ^[8]".

In 2011, the overall sex ratio rose to 940, according to census data, the reality that India is actually being

"Masculinized" is concealed behind the gender imbalance, which shifted from 972 girls for every 1,000 males in 1901 to 933 in 2001. Even though the term "masculinization" has a more scientific definition and The article "The Masculinization of India" ^[9], written by Mr. Kannan Kasturi, examines this underlying phrase in light of current social developments.

The phrase refers to a shift in the social balance that favours a larger male population over a female population ^[10], which causes the population to become overly masculinized, particularly among children aged 0-4. The indicator that has helped the author determine that the quantity of The sex ratio for females in the 0-4 age group has declined throughout time, as seen by census data from different decades.

The sex ratio for the 0-4 age group was 934 in the 2001 Census ^[11], but it dropped to a pitiful 915 in the 2011 Census. Similarly, the sex ratio for the 0-6 age group dropped to a startlingly low 914 in 2011 from 976 in 1961, 964 in 1971, 962 in 1981, 945 in 1991, and 927 in 2001. This demonstrates unequivocally that concerns about the decline in the child-to-sex ratio are real and not a gimmick.

Numerous unsettling incidents involving the cruelty of female infanticide have been reported from all throughout India.

Case 1: In the Usilampatti region of Tamil Nadu, which consists of over 300 impoverished hamlets, up to 196 girls perished in 1993 under mysterious circumstances. Some were forced to consume toxic fertiliser powder, or they were fed dry, unhulled rice that irritated their windpipes. Others were strangled, left to starve, or suffocated with a wet towel cloth. According to a study conducted by the Community Service Guild of Madras, "female infanticide is rampant" in Tamil Nadu, but only among Hindu families not Muslim or Christian ones. Of the 1,250 households in the research, 740 had only one girl kid, and 249 specifically said that they had disposed of the unwanted girl child. Half of the respondents had only one male child, and over 213 of the families had several male children ^[13].

Case 2: The oleander plant produces a beautiful, attractive blossom as well as a milky sap that can be poisonous if consumed. In Tamil Nadu's Salem District, a region known for female infanticide, it is among the methods used by households to kill baby females ^[14]. Nearly 60% of girls born in the Salem District pass away within three days after their birth, according to the local social welfare agency. The increasing frequency of abortions carried out there to prevent a female infant from being born to term is not included in that.

Cause of female foeticide: Because of certain cultural and socioeconomic practices, female foeticide has been practiced from ancient times, which is an evil conduct. The causes of female foeticide in Indian society are as follows:- Because sons are the primary source of money and girls are only consumers, the preference for male offspring over female children is the primary cause of female foeticide. The idea that girls are someone else's property while boys serve their parents is a common fallacy in society. One of the biggest obstacles parents in India confront is the long-standing dowry system, which is the primary cause of the avoidance of girl births ^[16].

- In the patriarchal Indian society, women have a low standing.
- While girls are only supposed to take care of the house, parents think that sons will carry on their family name in society.
- The legalization of abortion is the second main cause of unlawful sex determination and female child termination in India.
- The development of technology has also promoted female foeticide.

Effects of female foeticide

A number of ills have arisen as a result of female foeticide. Large-scale female foeticide has had negative impacts over the past three decades, including a decline in the sex ratio and a lack of brides for boys who are ready to get married. Demographers also caution that males will marry younger women in the next 20 years as the number of marriageable women declines, which would raise the birth rate and accelerate population growth.

• <https://egovernance-vikaspedia.in>

Girl abduction is another linked issue. There are risks associated with a culture where many men are single. It's conceivable that more women will be exploited as sex workers. Rape and sexual exploitation are inevitable outcomes. The repercussions of an unbalanced sex ratio are linked to the sharp rise in sexual offenses over the past few years.

• Legal provisions related to crime

"Whoever intentionally causes the abortion of a woman, unless he does so with good intention and the continuation of the pregnancy is not dangerous to the woman's life, shall be punished with imprisonment of seven years," according to Section 88 of the Bharatiya Nyaya Sahinta 2023 provisions. Additionally, it makes killing a woman because of an attempted abortion (Section 90) and performing an abortion without the woman's consent (Section 89) illegal. According to Section 91, unless the mother's life is being saved, anybody who takes any action prior to the birth of a child that hinders the birth of a living child or results in the kid's death after birth He will spend ten years behind bars. Simply put, Sections 88 to 91 address the following offenses: performing an abortion, preventing a child's birth, killing the unborn child (Section 316), abandoning the baby (Section 93), and hiding the kid's dead body or silently destroying it (Section 94). Both offenses are included in these pages, even if the terms infanticide and foeticide are not used explicitly. In order to be applicable to fetuses of any sex, these sections employ gender-neutral terminology. In India, however, infanticide or child foeticide is unheard of. In Indian society, women are under tremendous social and psychological pressure to have a son, despite the fact that this desire is ingrained both structurally and culturally. Some other significant difficulties, such as women getting pregnant more than once and having recurrent abortions as a result of intense social pressure, are not covered in these parts.

A committee was established by the Ministry of Health in 1964. In light of women's calls for the legalization of abortion, this committee, led by Shantilal Shah, was given the responsibility of taking into account the human rights concerns surrounding women's reproductive rights. With the

intention of removing any potential for abuse, passed by parliament in 1971. On April 1, 1972, the medical termination of pregnancy act, and 1971 (MTP Act) went into effect. It was later modified in 1975 and 2002 by the Medical Termination of Pregnancy Amendment Act (No. 64 of 2002). With just eight clauses, the Medical Termination of Pregnancy Act is a small piece of legislation. Some dishonest people are abusing this Act by solely aborting female fetuses, despite the fact that it talks about a woman's right to privacy, her right to limited reproduction, her right to have a healthy kid, and her freedom to make decisions about her body.

Some related case laws

- **Voluntary Health Ass of Punjab vs Union of India & Ors., (2013) 4 SCC 1**

The researcher's attention is drawn to the central idea of the concept by the Apex Court's ruling in the aforementioned case. Being the most recent ruling, this case represents a significant advancement in the discussion of social perspectives. As expressly mentioned in the Supreme Court's ruling. Essentially, the Court noted that the various States and Union Territories were not applying the Act's provisions correctly, in addition to the rules set forth in the CEHAT v. UOI case in 2001 and again in 2003. On 8.1.2013, the court issued an order requiring the Health Secretaries of the states of Punjab, Haryana, NCT Delhi, Rajasthan, Uttar Pradesh, Bihar, and Maharashtra to personally appear in order to assess the measures taken to ensure the proper and efficient implementation of the Act's provisions as well as the various directives issued by this Court. According to the case's ratio decidendi, the court assumed control of the matter and carried out an incredibly exhaustive investigation. The case's obiter dicta provided the following rules, which were required to be followed and whose noncompliance would have dire repercussions. The case's comparable data additionally implies that the court's ruling was the result of careful consideration and careful study of the available data. The court further observed that no meaningful oversight or follow-up measures had been taken to fulfill the PCPNDT Act's goals.

The court further noted that, in practically every region of the nation, According to the authorities granted under the Act, No thought was given to the growth of different sonography centres, genetic clinics, genetic counselling centres, genetic laboratories, ultrasonic clinics, and imaging centres. Nevertheless, the court stated that the authorities under the Act are unfortunately not sufficiently overseeing or monitoring their activities to ascertain whether they are abusing prenatal diagnostic techniques to ascertain the fetus's sex, which could lead to feticide.

In order to monitor and keep vigil, the court defined several crucial criteria in this area and created a hierarchical structure for reporting on the work that each committee has done in accordance with the directives. As a result, the case has sparked academic research to determine how the judiciary elevates and bestows legal sanctity on the subject.

- **Manju v. State on 12 March, 2010**

In addition to offering a legal perspective, the judiciary has gone one step further in this case by pointing out that the parents' actions were forced by social and economic conventions. The Delhi High Court's ruling begins with such delicate language that it may cause the reader to cry. It

begins describing the child's fate after being murdered by her own parents. The verdict highlights the moral principles that every person holds inside themselves. The parents who killed her are shamelessly and tragically referred to as "architects of crime," having plotted her murder even before she was born.

The fact that the woman who gives birth murders her own kid because she is aware of how her child would be treated is incredibly ironic. However, what causes this fear? What scares a person's heart more, poverty, illiteracy, or socioeconomic factors? Mother upon discovering that her new-born is a girl. It's a question that each person must consider. Books, papers, and legal actions won't help if the fundamental thought process is tainted.

The case essentially gives all the information required on the child's birth and death. Following a string of events, it was decided that parents had no right to kill their children under any circumstances. One topic in the debates brought up the fact that "it rests on the birth giver to keep the kid or to murder the infant. The court responded by saying that the Almighty has the authority to determine that When a child is born, the parents are required to keep them; if they are not fulfilling this obligation, they have no legal right to murder the child. Therefore, the court's ratio makes it abundantly evident that the guilty party is the one without a conscience, but if the other elements that are affecting the wrongdoer's choice, then the question of whether society is becoming more globalized or outdated arises. As a result, the case has provided insight into the current general practice, giving it a formal form through the application of the relevant legal rules.

Centre for enquiry into health and allied themes (CEHAT) v. Union of India and ORS, (2003) 8 SCC 398

This case's current writ petition, which was brought about by the 2001 case, alleges that the statutory authorities have not complied with the court's 2001 directives and recommendations. The relevance of the prenatal and preconception diagnostic testing is the main concern in this instance. PCPNDT, or the Techniques (Prohibition of Sex Selection) Act. The case's analysis of technological developments in science is its most fascinating feature. The court carefully points out and clarifies that technology is intended to enhance and progress humanity rather than to destroy it. The technology used to diagnose children is related to their growth and health and is utilised to identify any anomalies that may occur, as per the court's evaluation of the PCPNDT and PNDT (Prenatal Diagnostic Techniques) Act not to ascertain the sex of the child. The rising condition is being ruined by modern technology, which is diminishing the sex ratio. The writ petition focused on the aforementioned acts' lax implementation policies. The growing number of advertisements for prenatal sex, the lack of authorities, and the absence of control by the appointed authorities.

The main focus was selection, which included all other methods of sex determination. There was support for both banning such advertisements and asking for guidance on the other matters. As a result, the court issued comprehensive instructions in this area and appointed several committees to investigate the issue and hold monitoring meetings every six months to confirm and go over the policy's correct execution. Every six months to confirm and talk about how the policy is being implemented correctly. Therefore, the

ruling gives the act's legislative provisions adequate comprehensiveness and offers improved methods for ensuring that they are being implemented correctly. The court's order resulted in the formation of the Central Supervisory Board and repeated directives to the central government over this matter. Because of this circumstance, the appropriate complaint system mechanism was also being improvised. Additionally, the courts recommended that appropriate awareness initiatives that need to be carried out in order to educate the public and help them comprehend the policies that the state and federal governments have developed for the welfare of female children.

Reasons as to why this practice is followed

Three factors economic utility, socio-cultural utility, and religious functions have been identified by studies as the main causes of female de-selection in India. Economic utility is influenced by the fact that research shows men are more likely than daughters to support the family and integrate into the family company. Earn money and provide parents with old age benefits. When a son marries, he adds a daughter-in-law to the family by helping out around the house and giving her money in the form of dowry payments. When daughters marry off, the situation is the exact opposite, and the daughters are therefore viewed as an economic burden. The daughters are seen as a monetary penalty. Similar to China, India's patrilineal and patriarchal family structure requires at least one son to carry on the family line; sons stand for ancestry; daughters marry and move in with their husbands; and many other sociocultural factors make female de-selection useful.

Sons add a level of status to households. The religious roles that only sons are allowed to play are the final justification for women's de-selection. Boys are supposed to light their parents' funeral pyre and assist in the soul's redemption, according to Hindu tradition ^[15].

Furthermore, there is another factor contributing to the widespread murder of girls in several regions of India. The goal is to preserve property rights. Similar to the Vellala Gounder community, the majority of the land is owned by the dominant caste, who are determined to keep family property rights ^[16]. Additionally, this Reason can become the main cause after the existing rights to daughters' succession. These sociocultural problems are the root causes of India's increasing problems, claims Krishna H. Pradhan ^[17], and despite the fact that we live in the twenty-first

century, people's perspectives have not changed and will not change until we take action.

The unauthorised abortion of a female foetus is referred to as "female foeticide" in India. Based on information from the Union government, a Pew Research Centre study estimates that between 2000 and 2019, at least 9 million women were slain. The survey found that 86.7% of these foeticides were committed by Hindus (80% of the population), followed by Sikhs (1.7% of the population) with 4.9% and Muslims (14% of the population) with 6.6%. The study also revealed an overall decline in the era's desire for sons.

According to a pew research centre study based on data from the union government, at least 9 million women were killed between 2000 and 2019 ^[7]

Table 1: Religious composition by caste in percentage terms (2000-2019)

Cast	Percentage	2000-2019
Hindu	86.7	-
Sikhs	4.9	-
Muslim	6.6	-

The natural sex ratio is assumed to be between 103 and 107 males per 100

7-Kaur, Banjot (2022-09-06). "Foeticide: More 'Missing' Girls among Hindus than Muslims in last two decades, official data shows". The Wire. Retrieved 2022-09-06. Females, and any number above that is considered to be indicative of female foeticide. According to India's decennial census, the sex ratio in the 0-6 age group rose from 102.4 boys per 100 females in 1961 to 104.2 in 1980, 107.5 in 2001, and 108.9 in 2011 ^[8].

Child sex ratios are within the normal range in all of India's eastern and southern states ^[9], but in a number of western, particularly northwest, states, including Maharashtra, Haryana, and Jammu and Kashmir, possess far greater ratios (as of 2011: 118, 120, and 116, respectively) ^[10]. The child-to-sex ratios of Gujarat, Uttar Pradesh, and the western states of Maharashtra and Rajasthan were 111, 112, and 113, respectively, according to the 2011 census. Another reason influencing the higher percentages in Gujarat and Maharashtra is the influx of males into the region ^[11].

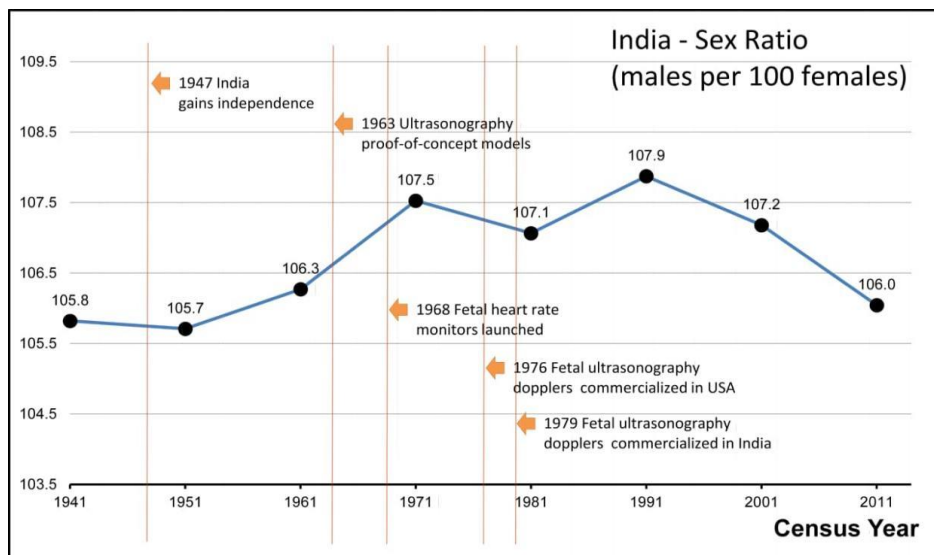


Fig 1: Male-to-female sex ratio in India, 1941–2011

Male to female sex ratio for India, based on its official census data, from 1941 through 2011. The data suggests the existence of high sex ratios before and after the arrival of ultrasound-based prenatal care and sex screening technologies in India. Male to female sex ratio for India, based on its official census data, from 1941 through 2011. The data suggests the existence of high sex ratios before and after the arrival of ultrasound-based prenatal care and sex screening technologies in India.

- **Census of India 2011:** Child sex ratio drops to lowest since independence the economic times, India. Child Sex Ratio in India Archived 2013-12-03 at the Wayback Machine C Chandramouli, Registrar General & Census Commissioner, India (2011). Child Sex Ratio 2001 versus 2011 Census of India, Government of India (2013).

- **India at Glance:** Population Census 2011-Final Census of India, Government of India (2013) The introduction of inexpensive ultrasound technology in the early 1990s and its extensive use in India have been connected to female foeticide. Both transvaginal and trans abdominal obstetric ultrasounds look for different indicators of foetal sex. At or after week twelve of pregnancy, it can be done. According to a 2001 study, 3/4 of the foetal sexes can be accurately identified at this stage [15]. About 50% of males and nearly 100% of females are accurate. Ultrasonography provides a nearly 100% accurate outcome when done after week 13 of pregnancy [12].

Consequences of a declining sex ratio in Indian states

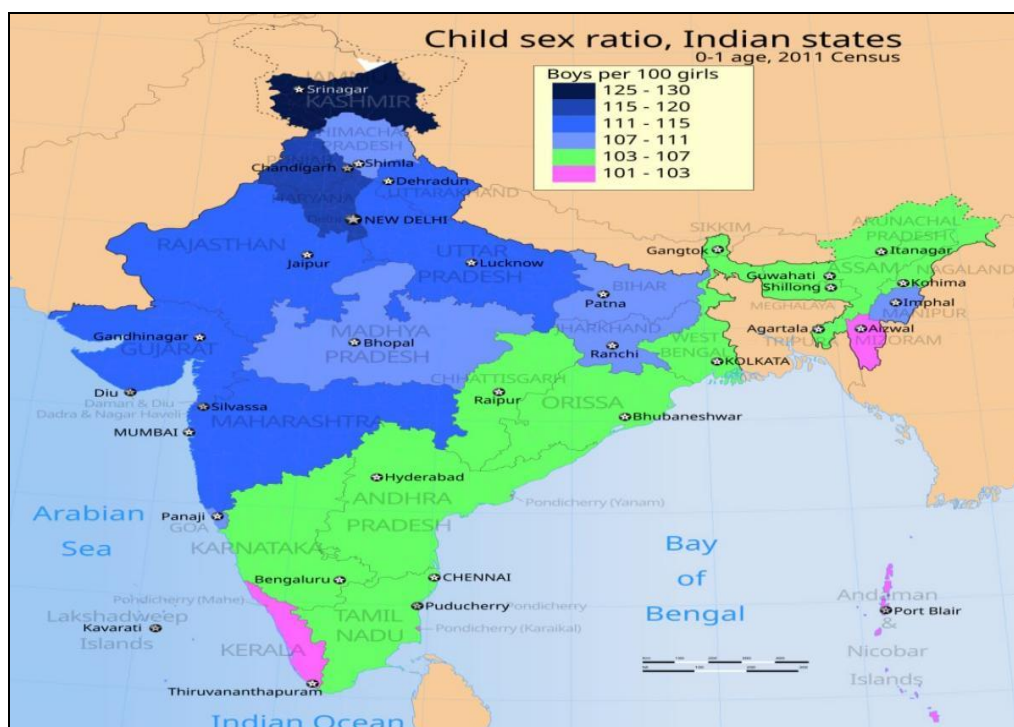


Fig 2: Child sex ratio, Indian States

The following table displays the child sex ratio data for the population count in the 0-1 age group for each of India's

states and union territories based on the 2011 Census of India [36]. The data showed that birth sex ratios in 18 states

and Utah were higher than 107, indicating either an excess of males born or an excess of females who passed away after delivery but before turning one year old. There were excess females at birth and/or excess male mortalities after birth but before he reaches the age of one in four states and Utah, where the birth sex ratio was less than 103. Thirteen

states/UT had normal child sex ratios in the 0-1 age group [13].

Mazza V, Falcinelli C, Paganelli S, *et al.* (June 2001). "Sonographic early fetal gender assignment: A longitudinal study in pregnancies after in vitro fertilization". *Ultrasound Obstet Gynecol.* 17 (6): 513-6
DOI: 10.1046/j.1469-0705.2001.00421.x. PMID 11422974.
Age Data C13 Table (India/States/UTs) Final Population-2011 Census of India, Ministry of Home Affairs, Government of India (2013)

Laws passed in India to alleviate female foeticide

Table 2: Trends in the sex ratio (m/f) of children aged 0–6 years, major states of India, 1981–2001

Other Legislation	Years	goals
Dowry prohibition	1961	Prohibits families from taking a dowry, punishable with imprisonment
Hindu Marriage Act	1955	Rules around marriage and divorce for Hindus
Hindu Adoption and Maintenance Act	1956	Deals with the legal process of adopting children and the legal obligation to provide "maintenance" for other family members
Immoral Traffic Prevention Act	1986	Stops sex trafficking and exploitation
Equal Remuneration Act	1976	Prevents monetary discrimination between men and women in the workforce
Female Infanticide Act	1870	Prevents female infanticide (Act passed in British India)
Ban on ultrasound testing	1996	Bans prenatal sex determination

14. Tandon, Sneha (2006). "Female Foeticide and Infanticide in India: An Analysis of Crimes against Girl Children" (PDF). *International Journal of Criminal Justice Sciences*. 1. Archived from the original (PDF) on 2017-11-18. Retrieved 2018-03-05.

Table 2: Trends in the sex ratio (m/f) of children aged 0-6 years, major states of India, 1981-2001

	Child sex	Ratio (m/f)		Percent in child sex	Change ratio
	1981	1991	2001	1981-91	1991-2001
India	1.040	1.058	1.078	1.73	1.89
South					
Andhra Pradesh	1.008	1.027	1.041	1.88	1.36
Karnataka	1.026	1.042	1.057	1.56	1.44
Kerala	1.031	1.044	1.041	1.26	-0.29
Tamil Nadu	1.034	1.055	1.062	2.03	0.66
East					
Orissa	1.005	1.034	1.050	2.89	1.55
West Bengal	1.019	1.034	1.042	1.47	0.77
North-central					
Bihar	1.019	1.043	1.055	2.36	1.15
Madhya Pradesh	1.022	1.050	1.073	2.74	2.19
Rajasthan	1.048	1.092	1.100	4.20	0.73
Uttar Pradesh	1.070	1.078	1.085	0.75	0.65
West					
Gujarat	1.056	1.078	1.132	2.08	5.01
Maharashtra	1.046	1.057	1.095	1.05	3.60
Northwest					
Haryana	1.109	1.138	1.221	2.61	7.29
Punjab	1.101	1.143	1.253	3.81	9.62

Note: *Bold italics* indicate a reduction in the rate of increase in child sex ratios between 1981-91 and 1991-2001. The Indian census provides child sex ratio data for the age group 0-6.

Source: Census of India 1981, 1991, and 2001. The 1981 and 1991 figures are published in *Registrar General of India (1992: 13)*. The 2001 figures are published at <http://www.censusindia.net/>

Central and state government schemes to alleviate female foeticide and child mortality [15]

Table 3: Central and state government schemes to alleviate female foeticide and child mortality

Program	Year Passed	Central or State Government	Benefits
Balika Samridhi Yojana	1997	Central government	Cash transfer to mother based on child meeting educational conditions and partaking in income generating activities
Dhan Laxmi Scheme	2008	Central government	Cash transfers to family after meeting conditions (immunization, education, insurance)
Kanya Jagriti Jyoti Scheme	1996	Punjab	Cash transfers to two girl children in a family after meeting conditions (immunization, education, insurance)
Beti Bachao, Beti Padhao Yojana	2015	Central government	Cash transfers based on educational attainment
National Plan of Action	1992	Central government	For the survival, protection, and development of girl children. Goals include ending female foeticide, reducing gender disparity, and giving girls better access to resources
Cradle Baby Scheme	1992	Tamil nadu	To eradicate female infanticide and to save the girl children from the

			clutches of death
Devirupak	2002	Haryana	Cash transfer to couple accepting terminal method of family planning (vasectomy, tubectomy) after birth of 1st or 2nd child
Delhi Ladli Scheme	2008	Delhi	Cash transfer based on educational attainment for first two daughters
Apni Beti Apna Dhan	1994	Haryana	Cash transfer if daughter reaches the age of 18 without being married
Girl Child Protection Scheme	2005	Andhra Pradesh	Cash transfer based on age and educational attainment. Family also has to partake in family planning
Beti Hai Anmol Scheme	2010	Himachal Pradesh	Interest earned on bank account in daughter's name and cash scholarships for each year of school
Bhagya Laxmi Scheme	2007	Karnataka	Cash transfer based on age and educational attainment. Cash provided to families for natural death, health insurance, and scholarships
Mukhyamantri Kanya Suraksha Yojna and Mukhyamantri Kanya Vivah Yojna	2008	Bihar	Cash transfers to poor families with two daughters
Indira Gandhi Balika Suraksha Yojana	2007	Himachal Pradesh	Cash transfers based on age attainment
Ladli Laxmi Yojna	2006	M.P., Jharkhand	Cash transfers based on educational attainment
Rakshak Yojana	2005	Punjab	Cash monthly transfers for families with two girls
Mukhyamantri Kanyadan Yojna	2017	M.P.	Cash transfer for marriage assistance if the family waits until the legal age to marry off their daughter
Sukanya Samriddhi Account	2015	Central govt	Interest earned on bank account opened for daughter after she turns 21

15. Sekher TV (2010). "Special Financial Incentive Schemes for the Girl Child in India: A Review of Select Schemes" (PDF). International Institute for Population Sciences.

Movie based on female foeticide in India

In August 2023, "Panch Kirti: Five Elements", a movie based on the Swachh Bharat Mission, was released. It told five stories and was primarily filmed in Chanderi, Bundelkhand and Madhya Pradesh. It was a film that focused on women and addressed a number of significant issues and themes related to women. The importance of social movements like the "Swachh Bharat Abhiyaan" and the "Beti Bachao Beti Padhao Abhiyaan" that are taking place in India is also examined ^[16].

Other campaigns

Celebrities and journalists have launched numerous campaigns to oppose sex-selective abortions as a result of growing public awareness of the issue. The inaugural "Daughters Are Precious" episode of Aamir Khan's television program Satyamev Jayate was devoted to raising awareness of this widespread practice. Concentrating especially on Western Rajasthan, which is acknowledged as one of the areas where it is common. Between 2001 and 2011, the sex ratio dropped from 901 girls to 1000 boys to 883 girls to 1,000 boys. Following the broadcast of this show, the Rajasthan local government responded quickly, demonstrating the impact of the media and public awareness of the problem. Officials promised to establish fast-track tribunals to penalize sex-based abortion practitioners. Six sonography centres had their licenses revoked, and more than 20 more received notifications ^[17].

16. <https://zeenews.india.com/bollywood/panch-kirti-five-elements-a-film-that-showcases-rural-india-in-its-real-form-2633758.html>

17. Helen Pidd (13 July 2012). "Indian campaign confronts prevalence of female foeticide". The Guardian.

Measures to prevent incidents of female foeticide

The administration has put in place a comprehensive strategy to stop female foeticide in the country. This encompasses initiatives to raise awareness, enact laws, and support the socioeconomic empowerment of women. Below are a few of these actions.

- The pre-conception and prenatal diagnostic Techniques (Prohibition of Sex Selection) Act, 1994, was a comprehensive law that regulated prenatal diagnostic

procedures and outlawed sex selection both before and after conception. In 2003, it underwent an alteration.

- In addition to amending certain regulations, such as penalizing unregistered clinics and sealing and seizing unregistered machines, the government expedited the law's effective implementation. Only within registered premises was the use of portable ultrasonography equipment subject to regulations and notifications. Ultrasonography can be performed by any physician at up to two ultrasound centers in an area. The cost of registration went up.
- The Minister of Health and Family Welfare requested that the State Governments aggressively implement the Act and take steps to prevent illegal sex determination procedures.
- By emphasizing education and empowerment, the Hon'ble Prime Minister called on the Chief Ministers of every State to halt the neglect of girls and reverse the trend of gender inequality.
- The states and union territories have been urged by the Ministry of Health and Family Welfare to give this law their full attention and to take it seriously.

Empowering Women: Educating and empowering women is crucial. This includes:

- Making high-quality education and job opportunities accessible. Advancing gender equality and women's rights. Promoting the financial independence of women.

Changing Social Attitudes: It is necessary to alter societal perceptions of girls. This can be accomplished by:

- Public awareness campaigns that highlight the value of girls.
- Promoting positive role models of successful women.
- Challenging harmful gender stereotypes and cultural norms.

Improving Healthcare Access: Ensuring that every woman has access to high-quality healthcare is essential. This includes.

- Provide prenatal care together with other accessible and reasonably priced healthcare services.
- Encouraging women who do not want to carry their pregnancies to have safe and legal abortions.

Community Involvement: Engaging communities in the fight against female foeticide is crucial. This can be done through:

- Community-based programs that promote gender equality and the value of girls.
- Encouraging community leaders to speak out against female foeticide.
- Forming community-based organizations to monitor and report cases of sex-selective abortions.

It should be noted that combating female foeticide necessitates a multifaceted strategy that addresses the problem from a number of perspectives, such as legal, social, and economic ones.

Conclusion

From the aforementioned debates, we have concluded that the primary cause of these heinous actions is the presumption that girls are a liability. A vast web of social, cultural, and economic variables underlie this mind-set. Due to social norms and traditions, the dowry system, and a lack of economic independence, the female to a subordinate position. Although the severity may differ, discrimination and the neglect of girls go hand in hand.

Female foeticide is a grave violation of human rights and a serious societal issue with far-reaching consequences. It stems from deeply ingrained gender biases and a preference for male children. Addressing this issue requires a multi-pronged approach that includes strict enforcement of laws, empowering women, changing societal attitudes, improving healthcare access, and fostering community involvement. Only through concerted efforts can we hope to eradicate this abhorrent practice and create a more equitable and just society for all.

Reference

1. Henslin JM. Social Problems: A Down to Earth Approach. 11th Ed., Cram 101 Textbook Reviews; 2016.
2. Goodkind D. Should Prenatal Sex Selection be Restricted? Ethical Questions and Their Implications for Research and Policy. *Population Studies*. 1999;53(1):49-61.
3. Gettis A, Gettis J, Fellmann J. Introduction to Geography. 9th Ed., New York: McGraw-Hill; 2004.
4. Rummel RJ. Death by Government. New Brunswick, NJ: Transaction Publishers; 1994.
5. Browne CJ. Indian infanticide: its origin, progress, and suppression. London, England: WH Allen & Co; 1857.
6. Einarsdóttir J. Tired of Weeping: Mother Love, Child Death, and Poverty in Guinea-Bissau. 2nd rev. Ed., University of Wisconsin Press; 2004.
7. Kowaleski M. gendering demographic change in the middle ages. In: Bennett JM, Karras RM, Editors. *The Oxford Handbook of Women and Gender in Medieval Europe*. Oxford University Press; 2013.
8. Dahlburg J. Where killing baby girls 'is no big sin'. *The Los Angeles Times*; 1994 Feb 28.
9. The India Together article. 2011 Apr 18.
10. Report available on http://www.unfpa.org/gender/docs/studies/summaries/regional_analysis.pdf.
11. Office of Registrar General and Census Commissioner, India. Age Data: Census of India 2001: Compact Disc. New Delhi; 2004.
12. Census of India; 2011. Retrieved from http://www.censusindia.gov.in/2011census/population_enumeration.aspx.
13. Karlekar M. The girl child in India: Does she have any rights? *Canadian Woman Studies*; 1995 Mar.
14. Girish U. For India's Daughters, A dark birth day: Infanticide and sex-selective abortion yield a more skewed gender ratio. *The Christian Science monitor*; 2005 Feb 9. Available from: <http://www.csmonitor.com/2005/0209/p11s01-wosc.html>.
15. New World Encyclopaedia. Available from: <http://www.newworldencyclopedia.org/entry/Infanticide>.
16. Girish U. For India's daughters, a dark birth day: Infanticide and sex-selective abortion yield a more skewed gender ratio. *The Christian Science Monitor*. 2005 Feb 9. Available from: <http://www.csmonitor.com/2005/0209/p11s01-wosc.html>.
17. Pradhan KC. Disparity and deprivation of female children. New Delhi, India: Mangalam Publications; 2010.
18. Hausfater G. Infanticide: Comparative and Evolutionary Perspectives. *Current Anthropology*. 1984;25(4):501.
19. Why Do baby girls have a higher survival rate than boys? Available from: <http://www.hngn.com/articles/32460/20140528/why-do-baby-girls-have-a-higher-survival-rate-than-boys.htm>.
20. Bridges. Surplus Males: The Need for Balance; 2000.
21. Sabarwal S. Son Preference in India: Prevalence, trends and agents of change. *The International Journal of Interdisciplinary Social Sciences*. 2(1):245-254.
22. The Hindu: Tamil Nadu. Fall in female infanticide, thanks to rise in awareness; 2004 Nov 5.
23. Goodkind D. On Substituting Sex Preference Strategies in East Asia: Does Prenatal Sex Selection Reduce Postnatal Discrimination? *Population and Development Review*. 1995;22(1):111-125.
24. Hudson and de Boer; 2004. Available from: <http://www.demographicresearch.org/volumes/vol22/3/22-3.pdf>.