

Americans Prefer to Leave Child's Gender to Chance, Survey Finds

ScienceDaily (Feb. 16, 2006) — Most people would not choose the sex of their child if given the option, according to a new nationwide survey. The study is the first to examine the demand and preferences for sex selection among the U.S. general population.

“We found that only 8 percent of people would use pre-implantation sex selection for non-medical reasons,” said **Dr. Tarun Jain**, assistant professor of reproductive endocrinology and infertility at University of Illinois at Chicago and senior author of the report.

The findings, published in the February issue of the journal *Fertility and Sterility*, are the result of a cross-sectional, web-based survey of 1,197 people (587 men and 610 women) between 18 and 45 years old.

In the study, 77 percent of people who wanted more than one child indicated they either preferred an equal number of boys and girls or had no preference as to the sex of their children.

Pre-conception sex selection using sperm-separation technology is currently available in the United States as part of an FDA-approved clinical trial. The technique is not without controversy, but is expected to become more readily available to consumers at the completion of that trial.

The marketing and increased availability of the technology poses moral, legal and social issues. Some fear that sex selection may disrupt the natural sex ratio, contribute to gender stereotyping and discrimination, and hasten a trend toward “designer babies.”

“So far, all of the ethical discussions about sex selection have focused on ‘what if’ scenarios without any legitimate data,” **Jain** said. “This study should provide a legitimate framework to better lead the discussion about the realistic implications of sex selection technology.”

Sperm separation requires patients to provide a sperm sample and undergo an average of three to five cycles of intrauterine insemination at a fertility center, at a cost of approximately \$2,500 per attempt. The survey found that while the majority of respondents would not choose the sex of their child under these trying conditions, most would still not use the technology even under less demanding circumstances. Only 12 percent would use sex selection technology if it were available in any doctor's office, if it required only a single cycle of intrauterine insemination, and if it were covered by health insurance.

Even if it were possible to choose the sex of a child simply by taking a “blue pill” for a boy or a “pink pill” for a girl, only 18 percent of respondents indicated they would do so. The rest were opposed or undecided. “Perhaps this speaks to the fact that people still want to leave things up to chance and not rely on science for everything,” said **Jain**.

In an earlier study, **Jain** and colleagues reported that 40 percent of women being treated for infertility would choose the sex of their next child if given the option. The discrepancy between the two studies is significant but not surprising, **Jain** said. Infertile couples may feel they have only one chance to have a child, while the general population assumes the opportunity for more children.

“This study should ease the fears of some of the people who believe that sex selection technology will become widespread when it is readily available in the United States,” said **Jain**. “There is no evidence that the technology will have a significant impact on the natural sex selection ratio.”

Jain cautioned that the results of this survey do not apply to other countries where there may be legitimate concerns about sex selection leading to an imbalance of the sexes.

The poll — conducted online over three days in September 2004 by Harris Interactive — has a margin of error of plus or minus 3 percentage points.



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