

# Ethicists find UK ban on embryo sex selection 'unjustifiable'

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As Europe's leading fertility specialists gather at a conference in London this weekend, a major new publication from leading medical ethicists finds no justification to support the UK's legal ban on sex selection before pregnancy for 'social' reasons.

Overall, the ethicists found that new techniques to choose the sex of future children would be ethical to offer in the UK, based solely on parents' preference to have a child of a particular sex. The in vitro techniques are used at the [embryonic stage](#) or earlier, and at present are only legally permitted for use in the UK to avoid the birth of babies with [medical problems](#) such as sex-linked inherited disorders.

## Other findings include that

No population-level [sex ratio](#) imbalance would occur if sex selection using fertility treatments were permitted for non-medical reasons, within a strong [regulatory framework](#).

No ethical distinction was found between providing 'family balancing' (sex selection to ensure that a new sibling is of the opposite sex to existing children), or sex selection for an only child, the firstborn, or for every child in a family, including selecting all the children to be of the same sex.

Sexism was not found to be inherent in the wish to choose the sex of a

baby. Some requests reflect a high value placed on each gender being represented within a family. Other requests may stem from sexism or gender stereotyping, but these attitudes in themselves do not pose such risks to children that sex selection should be prohibited.

The authors concluded that, in the UK, it would not be right for 'social' sex selection treatments to be funded by the taxpayer. Proper regulation would be also required to minimise any harmful effects of treatments carried out for non-medical reasons.

British couples with the resources to do so are reported to be travelling overseas for costly sex-selection treatments involving IVF and embryo testing, or novel sperm 'sorting' techniques, although no official record is kept of their numbers.

These cross-border treatments may pose obstacles to the follow up of the resulting children's health. In some circumstances, they might involve fewer clinical or legal safeguards than would be in place if patients were able to access equivalent treatments in the UK.

Professor Stephen Wilkinson, Professor of Bioethics at Lancaster University, and lead author of 'Eugenics and the Ethics of Selective Reproduction', said:

'We examined the ethics of gender preference and sex selection techniques in the British context and found no reason to expect harm to future children or wider society if these techniques were made available for 'social' reasons within our regulated fertility treatment sector.

'People who would prefer their new baby to be of a particular sex often have their own very personal reasons for this, to do with their family's particular circumstances or history. We didn't find any ethical arguments sufficient to justify a blanket ban on these people seeking [sex selection](#).

'As IVF and other techniques can now fulfil these often strongly-felt preferences, it's important to ask why wishing for a girl or a boy baby might be so wrong that parents must be stopped from attempting to achieve it in the UK.'

Provided by Keele University

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