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“You get the baby you need”: Negotiating the Use of Assisted Reproductive Technology for Social Sex Selection in Online Discussion Forums.

While some medical ethics issues are framed as being relevant only to specific stakeholders, there are others that are constructed as being of concern to us all because the potential consequences might alter society. The use of Assisted Reproductive Technologies (ART) such as In Vitro Fertilisation (IVF) to select the sex of a child for non-medical reasons (known as social sex selection) is one of these issues. IVF, though by no means universally accepted, is not enacted as a public concern and despite issues around access by single and lesbian women, it has achieved “mainstream status” in Western culture (Correia & Broderick 2009; Sills & Palermos 2002, p.433). Similarly personal practices designed to sway the odds in favour of one sex over the other such as ovulation trackers or dietary changes are not a subject of public scrutiny. However the use of ART technologies specifically for sex selection has been constructed as a “controversial issue” that warrants “further community discussion” (National Health and Medical Research Council 2007, p. 53).

Preimplantation Genetic Diagnosis (PGD) is an ART procedure that was developed to screen embryos for genetic markers of particular conditions such as Down syndrome and cystic fibrosis prior to implantation using IVF (Sills & Palermos 2002). PGD is widely used not only in Australia, but in most countries where IVF is available (Tam 2006). Indeed a recent ruling by the European Council of Human Rights found that the Italian government was in violation of the European Convention of Human Rights in prohibiting the use of PGD to screen for genetic disorders (Ramos-Ascensão 2012). During the screening process it is also possible to determine the sex of the embryo. Providing that implantation results in a viable pregnancy, PGD as a method of sex selection is “virtually 100%” successful (The Fertility Institutes n.d.). When the procedure first became available in Australia there were no
guidelines or laws governing its use and for approximately five years IVF clinics were able to offer PGD for social sex selection (Johnson 2005). In that time 107 babies were born using the procedure (Johnson 2005). In 2004 the Australian National Health and Medical Research Council (NHMRC) published its *Ethical Guidelines on the Use of Assisted Reproductive Technology in Clinical Practice and Research* and in February 2005 all ART “non-medical” sex selection processes (with a specific reference to PGD) were suspended “pending further community discussion” (NHMRC 2007, p. 53).

Australia is not alone in banning the use of ART for social sex selection; it is also prohibited in the UK, Canada, China and India (HRC Fertility 2014). However it is permitted in other countries such as the USA and Thailand meaning that couples wanting to choose the sex of their child can travel to these countries to undergo the procedure (HRC Fertility 2014). In fact one of the leading fertility clinics in Australia has links to a ‘sister’ clinic in Bangkok, and it is estimated that since the ban between 100 and 200 people each year have gone overseas for social sex selection (Rowlands 2012; Matthews 2013). It therefore seems evident that there would be considerable demand for this technology if it was permitted in Australia. The use of ART for social sex selection can thus be understood as a dilemma in which the desire of prospective parents to choose the sex of their child is set against concerns about the potential social consequences of allowing such choice.

The NHMRC’s guidelines include an appendix that lists “substantial considerations” for and against the use of ART for social sex selection (NHMRC 2007, p. 90). The considerations in support include: family balancing; religious and cultural obligations; and individual autonomy. Considerations against social sex selection include: an incompatibility with a relationship of unconditional acceptance between parent and child; discrimination against girls; and a shortage of women causing harm to men in particular cultural groups due to a lack of women to marry (NHMRC 2007, p. 90). A review of the academic and
professional literature from Australia and other Western countries reveals that similar arguments are frequently mobilized in discussions of the issue (e.g. Savulescu 1999 and Dahl et al. 2006). International agencies including both the United Nations and the World Health Organisation have expressed concerns about sex selection in general and the use of ART for that purpose fearing a disruption of the natural sex ratio and the devaluing of females (HRC Fertility 2014; WHO 2014).

The acceptance of PGD to screen embryos on some bases but not others highlights the extent to which the use of these technologies is a social, rather than purely technical, issue that is informed by cultural values. As mentioned, two of the major objections to letting parents choose the sex of their children are that it will result in the devaluing of females and a disruption of the population sex ratio. These fears are often expressed in relation to the examples presented by particular non-Western societies in which son-preference is well established and where ultrasound technology has enabled prenatal sex selection via abortion of female foetuses and a skewing of the natural sex ratio (Das Gupta et al. 2003; Chamie 2008). These concerns may also be well-founded in Western societies in which, for social, economic and psychological reasons, male children are historically both valued more than females and preferred as first-borns (Dahl & Moretti 2008; Hank 2007; Marleau & Saucier 2002; Swetkis, Gilroy & Steinbecker 2002). However Hank’s 2007 review of gender preference research found that it is far from straightforward in Western countries making it difficult to predict the effect that ART for social sex selection would have on sex ratios. Gender preferences often relate to the desire for a family to be ‘balanced’ by including at least one child of each sex (Hank 2007). Regional variations in this desire for ‘balance’ can be seen; in Italy, Belgium and Australia parents are more likely to have further children if they already have two or more children of the same sex but it is a decreasing trend in the US since the mid 1980’s and is not evident in France, Poland and Germany (Hank 2006).
Preferences are certainly not stable over time and Kippen, Evans and Gray (2007) give the example of Japanese women planning to have one child only; in 1982 52% wanted a boy, but by 1992 76% wanted a girl. Whether the preference relates to the first born, only child or family balance it is an expression of the gender system within the particular society and the expectation that boys and girls are different either in what they can provide to the family or in their traits and behaviours (Gray and Evans 2005). This conflation of sex and gender is also apparent in the way in which the two terms are used synonymously in many discussions of the issue (e.g. Dahl & Moretti 2008; HRC Fertility 2014 and WHO 2014): choosing sex is choosing gender.

The appendix from the NHMRC guidelines recommends that future decisions about whether to permit PGD for social sex selection should follow from “well-informed public discussion” that is not “dominated by any particular interest group” (NHMRC 2007, p. 89). The committee tasked with the original review of ART guidelines was made up of experts in health ethics, medical and public health researchers and IVF providers (NHMRC 2004). However the NHMRC has a process for public consultation that involves a period of time during which individuals and organizations can make written submissions. One section of the guidelines relating to research was reviewed and updated in 2007 because of legislative changes concerning cloning; as part of the review there was a one month period of public consultation. While there was no possibility of changes to the chapter relating to social sex selection at this time it was the first opportunity for comment since the suspension just over two years earlier. There were 93 public submissions, 90 of which were made by medical, government or religious organizations or by individuals with a professional interest such as doctors and lawyers. Three submissions were made by women who wanted to be able to choose the sex of their baby. Part B of the guidelines which covers both PGD and social sex selection was due to be reviewed in 2011, although no changes were expected (NHMRC
While that review did not take place, public submissions were called for during March and April of 2014 and a review is expected to be completed by the end of 2015 (NHMRC 2014). The make-up of the 2014 working committee is similar to that of the 2004 committee.

Although the NHMRC’s guidelines frame this as a community discussion positioning us all as stakeholders, one group can be considered as more immediate stakeholders: the potential users of the procedures. Despite the NHMRC’s concern about a balanced debate, it appears from the make-up of both the committees and of the public submissions that thus far the views of this group have been underrepresented. Furthermore by listing points for and against sex selection the NHMRC has run the risk of prescribing the parameters of the debate and excluding other potential constructions of the issue. In this paper, we set out to explore how sex selection procedures are constructed and negotiated by their potential users; parents-to-be and parents of young children who are still in the reproductive phase of their lives. We do this by examining naturally occurring data in the form of online discussions from several Australian parenting websites. These data provide the opportunity to gather talk that is neither formalized nor oriented towards the points raised in the guidelines as public submissions might be, and is not mediated by researcher expectations.

Method

The Data

The online discussion threads that form the data corpus were found by entering the terms ‘sex selection’ and ‘methods for sex selection’ into an internet search engine and specifying Australian content. The data consist of six threads from forum discussions on three Australian parenting websites; The bub hub, Birth and Natural Parenting. The discussions took place between December 2007 and September 2009. There were a total of 179 posts from 97 posters. The three parenting websites all offer information and articles relating to conception,
pregnancy, birth and parenting. The bub hub is the biggest and most commercial of the three also offering product reviews, competitions and an events calendar. Birth has a slightly narrower focus being mainly concerned with what to expect during pregnancy and birth. Natural Parenting, as its name suggests, provides information on ‘natural’ options for conception, pregnancy, birth and parenting. All three sites have forums where members can post questions or introduce topics for discussion.

The threads were selected to represent views that supported and were against the use of ART for social sex selection. The threads used were “Sex-selection-do we have a right?” (Natural Parenting, 8 posts), “Gender disappointment” (Birth, 33 posts), “IVF Gender selection would ‘kill relationships’” (The bub hub, 12 posts), “$30 000 for babie sex…” (The bub hub, 61 posts), “WDYT about choosing your baby’s gender?” (The bub hub, 53 posts) and “Microsort and pgd-Bring it back to AU!!!” (The bub hub, 12 posts).

Posters did not explicitly identify themselves as male or female, however through a process of identifying either gendered names, details within the post (such as having experienced a miscarriage) or information provided in the electronic ‘signature’ that attaches to the end of each post, 80 posters were identified as female, 1 as male, and 16 unknown.

Approach to Analysis

We take a social constructionist position that holds that language and talk are forms of social action (Wetherell 2001, p. 14); the ways we talk about and negotiate issues create particular versions of reality that then have consequences for people’s experience of their lives. We employ critical discourse analysis informed by Wetherell’s “synthetic approach” that attends to both the construction of interactions and the broader ideologies utilized (Augoustinos 2013; Wetherell 1998, p. 388). The analysis is critical in that its first concern was a social issue rather than the language itself (Fairclough 2001).
We began our coding process by dividing posts into those that were broadly supportive of social sex selection and those that were against. At this point it became apparent that there were two distinct issues being addressed in these posts (both positively and negatively): i) whether or not procedures such as PGD should be available to the population for non-medical sex selection, and ii) whether or not it is acceptable for (potential) parents to want to use such procedures to select the sex of a child. We labeled these issues ‘availability’ and ‘desire’ and sorted the posts into supportive and opposing arguments for each of these issues. The final stage of the analysis involved exploring the various discourses of sex, gendering, parenting and nature that were reflected in these arguments, focusing on what version of reality they were being used to construct and how they were deployed in the arguments for or against the use of PGD in social sex selection.

**Ethical Concerns**

The Association of Online and Internet Researchers guidelines (Markham & Buchanan 2012) informed our assessment of the appropriateness of the data. Our evaluation included consideration of the data type and venue, specifically the distinction between public and private data as outlined in Appendix 1: Heuristic Chart of Ethical Questions by Data Type and Venue (Markham & Buchanan 2012). All data gathered for this paper was publically accessible with no need for a password or log-in. Moreover the data was collected from group discussions that called for people to contribute their opinions on the issue indicating that contributors were aware that their posts would be read and responded to by others. All sites also have guidelines relating to the moderation of comments and the possibility that posts could be removed if deemed inappropriate, suggesting a level of surveillance. In terms of identification and potential harm to participants it was noted most posters used screen names rather than their real names. Nonetheless all names of posters were omitted from the analysis in order to reduce the possibility of participant identification.
We were aware of the potential double standard of being informed by ethical guidelines developed by academics when researching an issue dictated by similar guidelines. We have attempted to understand and respect the perspectives of the participants throughout the analysis. We believe that the importance of understanding the way this particular group of stakeholders negotiates the issue balances concerns about the inability to obtain consent from these posters to use their data for our analysis.

**Analysis and Discussion**

As explained above, an important distinction identified in the data was the difference between whether or not ART should be available for social sex selection, and whether or not it is acceptable to actually want to choose the sex of your child. The focus of the supportive arguments concerned the *desire* to sex select, which was discussed in terms of the different types of relationships formed with sons and daughters and the emotional experience of the desire for a child of a particular sex. The arguments against using ART for social sex selection addressed both why it is wrong for the individual to want to do it, and broader societal explanations of why it should not be available. Below we discuss first the discourses used to support sex-selection and then those used to oppose it. But first we address a discourse than runs through all the data.

*Girls and Boys are Different Countries*

A travel metaphor that was employed to illustrate the experience of wanting a child of one sex and getting the other highlights the unchallenged construction of gender that underpins the data.

**Extract 1:**

[...]When you're going to have a baby, it's like planning a fabulous vacation trip to Italy. You buy a bunch of guide books and make your wonderful plans. The Coliseum. The Michelangelo David. The gondolas in Venice. You may learn some handy phrases in
Italian. It's all very exciting. After months of eager anticipation, the day finally arrives.

You pack your bags and off you go. Several hours later, the plane lands. The stewardess comes in and says, "Welcome to Holland." "Holland?!?" you say. "What do you mean Holland?! I signed up for Italy! I'm supposed to be in Italy. All my life I've dreamed of going to Italy." But there's been a change in the flight plan. They've landed in Holland and there you must stay. The important thing is that they haven't taken you to a horrible, disgusting, filthy place, full of pestilence, famine and disease. It's just a different place.

So you must go out and buy new guide books. And you must learn a whole new language. And you will meet a whole new group of people you would never have met.

It's just a different place […]

This post illustrates the “two-sex-model” (Folgerø 2008, p. 137) that is fundamental to the discussion of social sex selection. Girls and boys are different from each other, in fact they are different countries altogether; they are conceptualized as fulfilling different roles, behaving in different ways and forming different relationships. Parenthood is constructed as being about raising a girl or a boy, rather than a child, and parents need to change their parenting behaviour accordingly. Furthermore all babies and children are predictable along gender lines; all girls are Italy and all boys are Holland, so a parent can know beforehand what sort of relationship they will have with their future child based only on their sex. As stated previously, choosing sex is choosing gender.

**A Special Bond.**

Posters who acknowledge wanting to use sex selection methods explain this in terms of their desire to experience (or, less often, avoid) particular kinds of emotions and a style of relationship that they have predicated on having either a male or female child.

Extract 2:

[…]I really really really want to know the feeling of having a daughter to protect and spend time with and just enjoy.[…]

Extract 3:

[…]i also wante all boys im not a girly mum so girls seem foreign to me at times[…]

9
The poster in extract 2 has previously explained that she has two sons, and she clearly expects that the ‘feeling of having a daughter’ will be different. This is line with Gray and Evan’s findings that gender preference is informed by the belief that children differ predictably along gender lines (2005). Furthermore the expectations are based on “surprisingly traditional” gender roles (Kane 2009, p. 373). The poster in extract 3, despite her own experience of not conforming to a particular gender role, expects girls to be ‘girly’ and foreign. Girly is an interpretative repertoire that usually evokes a particular type of femininity within the broader possibilities of femaleness, but here it is used to represent femaleness as a whole; she doesn’t want girls, because girls are ‘girly’. However in not wanting girls she is an exception within the data as the mother daughter relationship is constructed as a special and strong bond.

Extract 4:

I think most women would love to have a mother daughter relationship, that’s why we like to have at least one girl.[…]

Extract 5:

[…]She has brought so much happiness to my life in the last 2 months, I love my boys to bits but felt there was a part of me missing with out a precious little girl, a daughter that I can watch have her own kids, go shopping with and do girly things.[…]

The mother/daughter bond is constructed by these posters as being different from the mother/child bond and it is seen as natural and for “most women” to want this ‘deeper’ type of relationship. By invoking her group membership as a women in extract 4 ; “we like to have at least one girl”, the poster normalizes the desire. It is constructed as being based on the shared experience of being female which includes the biological (having children) and the gendered (doing ‘girly’ things together). There is the assumption that a mother can never have that type of connection with a male child. Kane found a similar construction of the mother daughter relationship amongst mothers who expressed a preference for girls (2009).
Mothering and fathering are presented as different roles (Morison & Macleod 2013) as many posters frame the issue in relation to their partners’ desire for a particular type of relationship with a son or daughter.

Extract 6:

[…]I know how important it is to him to have a little girl to love and nurture and protect[…]

Extract 7:

[…]Then he got angry… I don’t want it.. I don’t need another girl.. I can’t teach a girl all I know.[…]

Girls and boys are constructed here as eliciting different fathering behaviour; girls are treasures to protect, while boys have a job to do, they are vessels for preserving and extending their father’s knowledge and experience. Some posters give accounts of their partner’s ‘need’ to have a son and their own anxiety or sense of failure at not being able to ‘give’ them that boy.

Extract 8:

He would be more than happy with a girl over the moon in fact but since I have the fertility issue and I know deep down he really wants a son this would be a massive load of my mind

Extract 9:

[…]After much deliberation and discussions, we decided to try for the son my husband yearns for.. (He is the last male to carry on the family name..)

recently we found out our baby was a girl.[…]

My DH*.. just seemed to get all depressed about it.. saying stuf like.. ‘Why me???

Everyone else gets to have their boy.. etc.[…]

*darling husband

These posts not only frame son preference as a personal truth, and even an entitlement, for men, they also frame women as responsible for both the sex of their children and for fulfilling their partners’ desires. The gender roles of both the future children and the parents are evident here with the mobilization of the wife/mother as nurturer and husband/father as protector (Bem 1981; Morison & Macleod 2013). That a man should want a son is reproduced in
popular media and borne out in statistical data (e.g. Dahl & Moretti 2004; Parry 2010). Kane also found mothers expressed this ‘understanding’ that their partners would want son, and their own desire to provide one for them (2009).

**What it Feels Like**

The term “gender disappointment” is used often throughout the data without further explanation, suggesting that this experience is a recognisable emotional response. Whether experiencing it personally or empathizing with those who do, posters frame the unfulfilled desire for a child of a particular sex as a profound and painful emotional experience.

Extract 10:

I have experienced it and I am still not 100 per cent over it, even though I love my boys dearly. I still yearn for another girl.

Extract 11:

[…], the pain of that will never, ever, ever, ever go away... because the loss of that dream is a very, very significant loss.

Extract 12:

[…]i grieve that daughter i will never have[…]i grieve many things that are associated with never having a daughter and dont know if i will ever really fully get over it[…]

These posts mobilize sorrowful emotions. Yearning, loss and grief are constructed in Western culture as profound emotional experiences that require psychological ‘work’ to overcome (Valentine 2006). In extracts 11 and 12 posters use repetition to emphasize the extreme depth and enduring nature of their emotions, something that can perhaps be managed, but never resolved. Evoking emotion both works up the legitimacy of the accounts of the experience and positions the feelings as uncontrollable and distinct from reason (Edwards 1999). This “emotional legitimacy” negates accountability; the individual cannot be blamed for uncontrollable reactions (Edward 1999, p.285). Lack of control is an important aspect of both the construction of the experience of the desire to sex select and the reasons behind the
desire; the posters are not making a choice to feel a certain way. What is more, they are surprised or uncomfortable with their feelings; “I was not prepared for the sadness”. The emotional reaction is framed as unexpected, again creating the distinction between emotion and reason, and allaying criticism as it is less acceptable to criticise someone’s personal truth than reasoned, considered responses (Edwards 1999; Pillow 2003).

This is also achieved by mobilizing guilt and shame.

Extract 13:

im disappointed in myself and ashamed to admit that i cried 2 weeks ago when i delivered a beautiful healthy baby of the "wrong" sex[…]

The emotional reaction is tempered by self-censure not only mitigating censure by others but also showing that those who long for a boy or a girl need to manage their longing in relation to the accepted construction of parental love as unconditional and the framing of children as blessings (Hays 1996; Morison 2011). The quotation marks on “wrong” communicate that this poster ‘knows’ that it is not acceptable to label a child this way, and the contrast of “beautiful healthy” with “wrong” further highlights the ‘proper’ way to talk about a new baby. This construct of unconditional, selfless love is well established in the discourse of parenting and is reproduced in psychological and educational literature informing policy and practice (Ramaekers & Suissa, 2011). It is also readily taken up by mothers as an essential aspect of being a ‘good’ mother (Lupton 2000).

Extract 14:

[…]I hate admitting this even now but my heart sank and I was not prepared for the sadness and joy I felt at the same time. I was estatic he was healthy but felt so sad I guess I had all my life hoped for that daughter…

The juxtaposition of sadness and joy constructs an emotional experience in which the “appropriate response” of “appreciation” (Morison 2011, p.187) exists alongside
uncontrollable and unwanted sadness. Again the management of this response can be seen in
the self-reflective self-censure and the framing of the desire as longstanding.

The posts that do not support the use of ART for social sex selection deal with two
main discourses: blame and censure relates to the desire of individuals to use sex selection
procedures and the price we’d pay reveals a fear about the implications for society.

**Blame and Censure**

Despite the conventions around emotional discourse and the expression of personal truths
talked about previously there is little reticence at challenging people’s feelings and
undermining their explanations of the desire to choose the sex of their child. Some times this
is done as part of a general discussion around the topic and sometimes it is a direct response
to someone talking about their own desire to sex select. A discourse of parenthood that gives
primacy to the needs of the child and requires self-sacrifice by the parent (Morison, 2011;
Morison & Macleod 2013) is deployed to undermine the emotional responses of people
wanting to sex select and their suitability for parenthood. In fact the more strongly someone
desires a child of a particular sex, the less suitable s/he is are to be a parent at all.

Extract 15:

> I would never spend $30,000 to make sure of a certain sex. I don't think it should matter
> that much 😊

Extract 16:

> I think if any couple that is going to be so disapponted if they get the 'wrong' gendered
> baby then they really shouldnt be having any more children.

Extract 17:

> you have a baby because you want to give birth to a life... a happy and healthy
> baby.... not a "girl" or a "boy". To me, personally, if you are trying to have a baby for a sex
> you are doing it for the wrong reasons![…]
These extracts express a concept that comes up often: if someone is willing to use the technology to avoid gender disappointment then it matters too much to them and they are unfit for parenthood. Many posts question whether those who would avail themselves of the option to choose should have children at all. The reasons for having children are framed in terms fulfilment and happiness, and the parent child relationship as one of unconditional love and acceptance (Langdridge, Connolly & Sheeran, 2000; van Balen & Bos, 2004). A parent’s main concern should be the needs of the child (Morison, 2011; Morison & Macleod 2013); in putting their own desires ahead of their children’s needs would-be sex selectors are framed as having children for the “wrong” reasons. They are further constructed as not only having the wrong priorities but also being ungrateful.

Extract 18:

[…]There are so many people in this world who can't have kids and would desperately love to become parents….I just think that if you (generally speaking) are blessed and fortunate enough to have a baby, really you should be deeply grateful for that gift, regardless of gender.

As PGD exists within the context of IVF much of the discussion takes place between people to whom IVF is relevant: those who are experiencing or have experienced fertility problems. This extract frames infertile people sympathetically while constructing would-be sex selectors as lacking the appropriate gratitude. When contrasted with the inability to have children at all, the specific desire for a girl or a boy is framed as trivial and selfish. In fact, in one discussion posters are admonished to be mindful of the feelings of IVF users. A major concern is who has a ‘right’ to use technology that was initially developed to aid couples experiencing fertility problems. Parents who are ‘picky’ about what type of child they want to have and wish to make use of the technology when they could conceive without it are
constructed as the epitome of selfishness, and therefore do not have the ‘right’ to use the procedures.

Extract 19:

......i do not know if you have had your children by ivf....if NOT then you should realise that such a post in this forum is considered, to me anyway, highly inappropriate where ppl would be grateful for one child of ANY gender.

please be mindful of posting such topics here, i dont think it is appropriate. im so tired of listening to "greedy" people..........

This poster is ‘so tired of listening’ to these people; sex selectors are a ‘type’ and there is no consideration given to individual circumstances or emotions. By creating an ‘us’ and ‘them’ and invoking emotional pain that trumps any pain expressed by ‘them’, sex selectors are constructed as greedy and their feelings as inappropriate.

They are further framed negatively, this time as “controlling”, by the construction of reproduction as a ‘natural’ process.

Extract 20:

[...]TTC* naturally doesn’t give you a choice, so why do they want to be so controlling on what should be one of the few exciting surprises in life.

* trying to conceive

The invocation of ‘nature’ and natural processes in sex selection discussions frames not only PGD but also the desire to sex select as unnatural. The interpretative repertoire of nature representing balance, order and the way things are ‘meant to be’ works to define the unnatural as wrong (Macnaaghten & Uryy 1995). Those who wish to select the sex of their child are constructed as trying to control things they should not; they need to let nature surprise them and give them what they ‘need’.

Extract 21:

[...]I believe that you don't get the baby you want, you get the baby you need [...] my babies are here to teach me something, and each of them are people in their own right. It is not up to me to design the people I want in my life. It is up to me to nurture the people
that come into my life.[…]

This particular construct of nature as connected to fate is powerful within the discourse of parenthood as it is linked to the notion of the unconditional acceptance of the children that nature ‘gives’ parents (Morison, 2011). If parents attempt to “design the people” they want in their lives they are crossing a boundary and disturbing the natural order.

The vehemence of arguments against social sex selection in some of the threads censors individuals who may have a different opinion, and prevents them from discussing their reasons for either wanting a boy or a girl or supporting the availability of the procedures. One poster reflected on her own experience of this:

Extract 22:

I remember posting a thread when I found out I was carrying a boy asking for help coming to terms with having a boy and being shot down in flames so silently grieved and didn’t mention it again[…]

Within the data it seems that the pain surrounding the inability to conceive “naturally” entitles IVF users to attack the feelings of others, even when they may be asking for help with their own difficult feelings. In this extract the response is positioned as extreme, she is “shot down in flames”, and isolating. Just as posters need to manage their desire to sex-select in relation to the discourse of ‘proper’ parenting, they also need to manage expressions of their pain in relation to a hierarchy of pain that is not challenged directly, but may be undermined in separate spaces.

**The Price We’d Pay**

The strongest discourse against using ART procedures was one that emphasised potential negative social consequences. In common with the WHO and the UN there is concern in the data that allowing sex selection will lead to changes in the ‘natural’ sex ratio that will reshape our cultural landscape.
Extract 23:

[…]I know it's not quite the same, but look at the stress China was under with such a skewed ratio of men/women because of the one child policy resulting in the discarding of little girls.[…]

Extract 24:

I think if this becomes widely available and affordable then we would see a wave of girls being born in middle class America/Canada and an even bigger wave of boys in China/India[…]

Similar to many academic articles on social sex selection (e.g. Chamie 2008; Goodkind 1999; Steinbock 2002) posters make use of China and India to illustrate the potential problems with upsetting the natural sex ratio and in doing so the concern is legitimized and the future potential landscape is characterized as foreign and other. India and China are invoked as evidence of the distorted sex ratios that are constructed as the inevitable results of allowing parents to select the sex of their child; these posters make clear that a skewing of the sex ratio is something to be avoided as a ‘wave’ of one sex would overwhelm the ‘natural’ balance and society would change in unspecified, but clearly undesirable, ways.

Posters also express a fear that if people are allowed to use this technique to select an embryo based on its sex, society will move closer to allowing people to select an embryo based on other genetic criteria, perhaps eye colour, physical build, athletic ability or intelligence. Sex selection is thus constructed as a gateway procedure for further genetic manipulation.

Extract 25:

[…]It opens previously closed doors - how long before you can choose the colour of eyes, the intellect etc etc […] I feel it takes playing God to a whole other level. It opens up the door for pushing the boundaries, and creating super babies, who are only affordable by the uber wealthy.

Extract 26:

[…]So if you have only wealthy couples being able to access technology which in essence is being used to *weed out* undesirable characteristics whether it be gender or anything else, do we run the risk of creating a sort of genetic underclass?[…]
Extract 27:

[…]I can see how genes for athleticism or brains could become a preference however. To the point that a diabolical government could support such technology if it were available…[…]

These extracts make it clear that some qualities are constructed as more valuable than others and that the ability of some (wealthy) people to choose these characteristics for their babies would be disruptive and dangerous to the wider interests of society. This particular vision of the future in which the technology could be exploited by the wealthy and powerful to the detriment of the rest of the population positions the technology as part of some science fiction nightmare to be guarded against.

Conclusion

One of the most interesting findings from the data is that the potential use of ART for social sex selection is negotiated on two levels: whether the procedures should be available and whether people should actually want to use them. Thus the debate is both societal and very personal. In the arguments supporting the use of PGD for sex selection, the Ethical Guidelines’ first 2 points for sex selection, namely family balancing and individual autonomy, were expressed (although not discussed explicitly in the analysis) by both people who wanted to sex select and by others who would not necessarily use the procedures but thought it should be allowed. The third point relating to religious obligations and cultural expectations, though likely to be read as referring to cultures other than White Anglo Saxon Australia, can be seen to apply to the concept of a ‘balanced’ family. Not only is the value of ‘balance’ culturally constructed, the gender differences that are fundamental to the desire for a particular type of parent/child relationship arise from cultural expectations. The posts that do not support social sex selection are critical on three different levels. First, emotional experiences of gender disappointment are constructed as wrong by the mobilization of proper parenthood as being predicated on unconditional love of any child. The feelings of would-be
sex selectors are framed as inappropriate and their fitness for parenthood is called into question by the existence of those feelings. Second, the evocation of nature positions parenthood as matter of destiny, suggesting that, rather than try to control nature, parents should give themselves over to it. And finally the feelings of individuals are constructed as irrelevant in the face of the potential consequences to society. These arguments against allowing sex selection correspond with the Ethical Guidelines’ references to the nature of the parent/child relationship, the potential discrimination against girls, and problems that a shortage of females might lead to. However the guidelines do not address the concern with the ‘natural’, fatalistic element of parenting nor the risk of eugenics and the need to be protected from ourselves.

Online data comes from a space that is anonymous and disembodied yet not detached from the social realities of the offline world (Mungham & Lazard 2011). This means that it has the potential to provide insight into both entrenched cultural values and also the points at which they may be challenged. The value of using this particular data set to explore the issue of social sex selection is evident in the tension within the data over where to locate the issue. The construction of the unfilled desire for a girl or a boy as a profoundly emotional experience locates the issue as internal and personal, belonging to the private sphere within which the use of IVF and PGD for genetic screening is typically located. However, other constructions that highlight the potential social consequences of unbalanced sex ratios, or that set the very desire (let alone action) to select the sex of one’s child as being fundamentally at odds with the requirement of unconditional parental love, locate the issue as public and open to scrutiny.

While this tension between public and private is noteworthy, what is perhaps most interesting about this data is that it leaves a potential site of tension unchallenged; the gender constructions underlying the desire to have a child of a certain sex. The linguistic conflation
of ‘sex’ and ‘gender’ mirrors the entrenched gender discourse evident in the data, and the accepted notion that gender stems from biology. While would be sex selectors are pilloried for valuing one set of traits over another, that they should expect different traits is unchallenged.

In this paper we examined how the issue of PGD and other ART procedures for social sex selection is constructed and negotiated by those with a strong personal stake. In doing so we aimed to identify whether the points prescribed by the ethical guideline match the concerns of those people or if there are alternative ways of framing the issue. And we also wished to add other voices to the debate that has thus far privileged the views of those with a professional or institutional investment in issues around bioethics. The use of parenting websites enabled us to gather data from a fairly large sample from this targeted population, and the nature of the online discussions allowed us to explore the complex ways in which the issue is actively negotiated and constructed. Through the use of this analytic method and data we have been able to bring into view the intensely emotional nature of the unfulfilled desire for a child of a particular sex, and expose the traditional gender discourse that underpins it. While we do not argue that the emotional experiences of parents who wish to choose the sex of their child should outweigh other concerns about the use of sex selection technologies, we do consider it vital that room is made in these debates for the consideration of the widest possible range of perspectives. This research highlights the need for wide-ranging public discussion on this issue which includes the interrogation of the essentialist construction of gender.
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