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Marry Rich, Poor Girl: Investigating the Effects of Sex Selection on Intrahousehold Outcomes in India

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This study examines the unintended consequences in India of sex selection technology on the marriage market and the bargaining power of surviving women. It finds women in regions exposed to ultrasound face poorer matches and outcomes in marriage.

Author Abstract

Sex ratios at birth have risen steadily over the last three decades across much of the developing world. Many attribute this rise to improved access to sex selection technologies such as ultrasound since 1980. This study seeks to understand the effect of access to sex selection technologies such as ultrasound, and consequently skewed sex ratios, on the marriage market and intrahousehold outcomes of females in India. Existing economic theory and literature view male-skewed populations as a boon to the marital prospects of females. However, Edlund (1999) proposes an (as yet untested) theory that, in environments where hypergamy is practiced and parents derive utility from married children, a maleskewed sex ratio can generate a permanent female underclass. I extend this theory to argue that if sex ratios are skewed disproportionately amongst the rich, as the evidence suggests, then poorer matching in the marriage market will in turn lead to weaker bargaining positions for females. I test this theory and examine its implications for later life outcomes using India-wide household level data on ultrasound use and bargaining power. I present evidence that village-level ultrasound is an exogenous source of variation for access to sex selection technology, demonstrate that parents are indeed considering the sex ratio of their unborn child's future marriage market when determining the sex composition of their own family, and utilize a difference-in-difference approach to identify the effect of ultrasound access on intrahousehold outcomes of affected women. I find evidence that greater parental access to sex selection technology at a child's birth is related to poorer outcomes in her marriage: greater marriage age gaps, increased marital abuse, lower reported autonomy, and poorer health. My results are robust to a TS2SLS specification employing distance to a major health center as my instrument. As the first cohort of females affected by ultrasound at birth have only recently entered the marriage market, this study provides timely and compelling empirical evidence of the unintended consequences on later life outcomes of sex selection in India.

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