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Legal Framework about Preconception Sex Selection in Muslim and non-Muslim Jurisdictions

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ABSTRACT

The approval of preconception sex selection for medical purposes by prominent bodies of collective Ijtihad and Fatwa councils has not only granted legitimacy but also paved the path for its commercialization. While some scholars have advocated for permissibility of preconception sex selection for non-medical reasons, others deemed it strictly unlawful. In the meantime, the exponential expansion of IVF clinics has made this contentious utilization of technology readily available to the public. It has emerged as a contentious issue in recent medical-related legislation, within Muslim and non-Muslim jurisdictions alike. This paper explores the legal framework of sex selection legislation worldwide, with a particular focus on Muslim-majority countries. In this regard, the study delves into the legal frameworks surrounding sex selection in Pakistan, other Muslim and non-Muslim countries. The comparative resource presented here aims to assist policymakers and scholars, particularly in Muslim nations, in addressing this pressing issue by highlighting diverse approaches ranging from comprehensive bans to regulated permissions and ethical guidelines. By understanding the complexities of sex selection regulation within unique cultural and religious contexts, policymakers can develop informed strategies aligning with Islamic law, ethical considerations and societal needs.

KEYWORDS:

Sex selection laws, Gender selection laws, Legislation on medical issues in Muslim nations, IVF laws, ART laws, Law and Bioethics

1. Introduction

In recent years, few issues have garnered as much attention in medical related legislation as sex selection. Many concerns has been shown that the scientific procedures for choosing a child's sex will be utilized to promote male birth, continuing the inferior status of women in society and families, as well as the devaluation of female offspring. Fears like this lead to demands that sex selection practices be outlawed both legally and professionally. It has been a focal point for policymakers and lawmakers

worldwide. While permissibility or prohibition of sex selection technologies is not a matter of consensus among Muslim jurists, various approaches have emerged based on how they perceived its possibility, and its legal and theological implications. The approach of Muslim jurists regarding sex selection technologies can be categorized into three main groups;

- 1. Prohibition: Earlier scholars when faced the issue of sex selection they usually maintained that it is impermissible in Islam, regardless of the circumstances.¹ This opinion was maintained by Abdul Raḥmān Abdul Khāliq and Dr. Muhammad Al-Natshah.²
- 2. Limited permissibility: Some Muslim scholars allow sex selection technologies under restricted circumstances for medical reasons only. For example, they may permit it when it can help prevent the transmission of serious hereditary diseases or when it is medically necessary to avoid the risk of serious genetic disorders or diseases associated with a particular sex.³ Those who went to this opinion includes; Sheikh 'Aṭiyyah Ṣaqr, Sheikh Al-Qarḍāwī, 'Abd Al-Nāṣir bin Mūsā Abu 'l-Baṣl, Muhammad Ali Al-Bar, Abdullah Ḥusayn Bāsalāmah, Zakariya Al-Barrī, Shaykh AbdAllah b. Bayyah, 'Izzuddīn Tūni, and Ibrāhīm Al-Dasūqī.⁴
- 3. General permissibility with call for regularization and supervision: Some scholars argue that sex selection technologies are permissible

^{1.} Nāṣir 'Abdullah Al-Mīmān, "Ikhtiyāru 'l-Jins Al-Janīn Min Al-Manẓūri 'l-Shar'ī," Journal of Islamic Fiqh Academy, no. 22 (2006); 'Abd Al-Nāṣir bin Mūsā Abu 'l-Baṣl, "Taḥdīd Jins Al-Janīn" (18th session of Majma'i 'l-fiqhī Al-Islāmī, Makkah: Muslim World League, 2006).

^{2.} Muhammad b. Abdul Jawwād Ḥijāzī Al-Natshah, *Al-Masāʾil al-Ṭibbiyah al-Mustajiddah Fī Ḍaw al-Sharīʿah al-Islāmiyyah*, 1st ed. (Great Britain: Majallah al-Ḥikmah, 2002), 1:231-234; Nāṣir ʿAbdUllah Al-Mīmān, "Ikhtiyāru ʾl-Jins Al-Janīn Min Al-Manzūri ʾl-Sharʿī," 72.

^{3.} Islamic Fiqh Council at the Muslim World League, "The Final Communique Issued by the 19th Session Held between 3-7 November, 2007," ed. Prof Dr. Saleh Ibn Zabin Al-Marzooqi, *The Islamic Fiqh Council Journal* 20, no. 23 (2008): 54; "Fatwa # 733: General Ifta Department of Hashemite Kingdom of Jordan," accessed June 28, 2023, https://aliftaa.jo/Question2.aspx?QuestionId=733; Nāṣir 'AbdUllah Al-Mīmān, "Ikhtiyāru 'l-Jins Al-Janīn Min Al-Manẓūri 'l-Shar'ī"; 'Abd Al-Nāṣir bin Mūsā Abu 'l-Baṣl, "Taḥdīd Jins Al-Janīn"; Yusuf Al-Qaradawi, *Fatāwā Mu'āṣirah*, 5th ed., vol. 1 (Kuwait: Dār Al-Qalam, 1990).

^{4.} ʿAṭiyyah Ṣaqr, Mawsūʿah Aḥsan Al-Kalām Fī 'l-Fatāwā Wa 'l-Aḥkām, 1st ed., vol. 5 (Cairo: Maktabah Wahbah, 2011), 288; Yusuf Al-Qaradawi, Fatāwā Muʿāṣirah; ʿAbd Al-Nāṣir bin Mūsā Abu 'l-Baṣl, "Taḥdīd Jins Al-Janīn"; Muhammad Ali Al-Bar, "Taḥdīd Jins Al-Janīn," Journal of Islamic Fiqh Academy, no. 23 (2008); AbdUllah Husayn Bāsalāmah, "Taḥdīd Jins Al-Janīn" (18th session of Majma'i 'l-fiqhī Al-Islāmī, Makkah: Muslim World League, 2006), 491–98; Nāṣir ʿAbdUllah Al-Mīmān, "Ikhtiyāru 'l-Jins Al-Janīn Min Al-Manzūri 'l-Sharʿī," 70–74.

and do not limit or give any medical conditions for it.5 However, they call for its regularization and supervision by medical and Shariah experts to prevent malpractice and misuse. Some of those who went to this opinion are Sheikh Dr. Muhammad Ra'fat 'Uthmān,6 Sheikh Nasr Farīd Wāsil,⁷ Nāsir 'AbdUllah Al-Mīmān⁸, Khalid Al-Muslih.⁹

In addition to the above-mentioned three perspectives, the theoretical works of jurists on this matter also create a large amount of uncertainty for working purposes. Earlier contemporary jurists gave general principles for the utilization of sex selection technologies, without explicitly giving their rulings about it. For example, they would say that sex selection technologies are allowed if it does not involve any forbidden thing [or act]. Thus, this general statement leaves a big room for pin pointing what is forbidden and what is not in the sex selection procedures. Furthermore, it leaves the practitioner in confusion to determine where something is prohibited and where it is allowed. Therefore, such works may be considered a good source of legal direction to the subsequent jurists but it does not furnish palpable benefit in assessment of sex selection technologies. 10

^{5.} AbdUllah Husayn Bāsalāmah, "Taḥdīd Jins Al-Janīn"; 'Abd Al-Nāṣir bin Mūsā Abu 'l-Basl, "Tahdīd Jins Al-Janīn"; Nāsir 'AbdUllah Al-Mīmān, "Ikhtiyāru 'l-Jins Al-Janīn Min Al-Manzūri 'l-Shar'ī": Muhammad 'Uthmān Shubayr, "Mawqif Al-Islām Min al-Amrād al-Wirāthiyyah," in *Dirāsāt Fighiyyah Fī Qadāyā Tibbiyah Mu'āsarah* (Amman: Dār al-Nafā's li 'l-Nashr wa 'l-Tawzī', 2001); Mohammad Ali Al-Bar and Hassan Chamsi-Pasha, "Assisted Reproductive Technology: Islamic Perspective," in Contemporary Bioethics, by Mohammad Ali Al-Bar and Hassan Chamsi-Pasha (Cham: Springer International Publishing, 2015), 173–86; Gamal I. Serour, "Islamic Perspectives in Human Reproduction," Reproductive BioMedicine Online 17 (January 2008): 34-38.

^{6. &}quot;Al-Azhar: Choosing the Sex of the Fetus Is Legal," Al-Mu'tamar Net, March 27, 2005, http://www.almotamar.net/news/20343.htm; "A Jurisprudential Dispute between Scholars of Al-Azhar over Sex Selection," accessed July 10, 2022, http://www.mafhoum.com/press8/234C34.htm; "Determining the Gender of the Newborn from the Point of View of Islamic Law," Al-Sharq Al-Awsat, December 5, 2005, https://archive.aawsat.com/details.asp?issueno=9532&article=336674.

^{7. &}quot;Determining the Gender of the Newborn from the Point of View of Islamic Law"; "A Jurisprudential Dispute between Scholars of Al-Azhar over Sex Selection."

^{8.} Nāsir 'AbdUllah Al-Mīmān, "Ikhtiyāru 'l-Jins Al-Janīn Min Al-Manzūri 'l-Shar'ī," 79– 80.

^{9.} Khālid b. AbdUllah Al-Muşlih, "Ru'yah Shar'iyyah Fī Taḥdīd Jins Al-Janīn," Journal of Islamic Figh Academy, no. 25 (2010): 96.

^{10.} See for example: 'Atiyyah Sagr, Mawsū'ah Ahsan Al-Kalām Fī 'l-Fatāwā Wa 'l-Ahkām, 5:287–88; Yusuf Al-Qaradawi, *Fatāwā Mu'āsirah*, 1:575–76; Muhammad 'Uthmān Shubayr, "Mawqif Al-Islām Min al-Amrāḍ al-Wirāthiyyah"; Nāṣir 'AbdUllah Al-Mīmān, "Ikhtiyāru 'l-Jins Al-Janīn Min Al-Manzūri 'l-Shar'ī," 79-83; Al-Muşliḥ, "Ru'yah Shar'iyyah Fī Tahdīd Jins Al-Janīn," 96; "Fatwa # 5072 Dār Al-Iftā' al-

On the other hand, these religious verdicts has no legal authority, rather, they only guide the legislation process in the Muslim countries. Thus, legal framework about sex selection forms the bedrock of regulations and guidelines that govern the practice of influencing the sex of future offspring. This exploration illuminates how the religious considerations developed by the scholars and scholarly bodies are translated into concrete legal provisions in Muslim jurisdictions, aimed at implementing the injunctions of Islam in balancing individual needs and choices, societal values, and ethical principles. This paper delves into the intricacies of the legal framework about these techniques, offering a comparative examination of legislations related to sex selection in both Muslim jurisdictions and the rest of the world.

The first section delves into the legislative landscape concerning sex selection within the context of Pakistan. This section offers exploration of the legal framework about preconception sex selection or alike practices in the country. The second section deals with legislations related to sex selection in Muslim jurisdictions other than Pakistan. It provides an indepth exploration of the legal landscape governing sex selection within various Muslim-majority countries. This section sheds light on the diverse approaches taken by these nations in regulating preconception sex selection practices by navigating through a comprehensive analysis of the legal codes. By understanding the nuances of these legal frameworks, we aim to present a broader understanding of how different Islamic jurisdictions address sex selection within their unique cultural and religious contexts.

The third section deals with the laws about sex selection in rest of the world, examining the legal approaches adopted by non-Muslim jurisdictions globally. From comprehensive bans to regulated permissions, and ethical guidelines, this section presents an array of approaches that reflect the diverse cultural, ethical, and legal considerations that shape sex selection policies worldwide. By presenting these approaches, both in Muslim-majority countries and in non-Muslim countries, we offer a comprehensive view of the global discourse on sex selection and the multitude of factors influencing legislative decisions.

Our aim is to offer a valuable comparative resource that will facilitate policymakers and scholars of Muslim nations in their efforts to address this pressing issue. With a deeper understanding of the diverse approaches taken by different jurisdictions, policymakers can develop more informed and effective strategies to regulate sex selection practices in a manner that aligns with ethical considerations and societal needs.

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Mişriyyah - Egypt," accessed June 28, 2023, https://www.fatawa.com/view/15370/.

Moreover, this analysis will contribute to filling the gaps in the addressing of this issue by Muslim scholars. It will aid Muslim scholars in navigating the complexities and nuances of sex selection from both religious and legal standpoints.

2. Legislations Related to Sex Selection in the Islamic Republic of Pakistan

Pakistan stands out as one of the leading Muslim countries with a well-developed medical field. Its achievements in the healthcare sector have garnered global recognition. Sex selection procedures are widely marketed even through SMS marketing services. It is vital that Pakistan needs legislations to regulate and strictly govern sex selection procedures. Unfortunately, despite the evident urgency to address this issue, Pakistan has yet to enact any legislation to regulate these practices. The lack of existing legislation in this area is a concerning gap that needs to be addressed to prevent potential misuse and exploitation.¹¹

a. The Punjab Reproductive, Maternal, Neo-Natal and Child Health Authority

Punjab Assembly has just passed an act to form an authority named as "THE PUNJAB REPRODUCTIVE, MATERNAL, NEO-NATAL AND CHILD HEALTH AUTHORITY". No other information is available on the formation or working of this body. Additionally, the primary objective of this authority is to enhance maternal, newborn, and child health in Punjab, with a particular focus on improving the well-being of underprivileged populations. It is evident that this authority has no jurisdiction regarding the problem presented in this study.

b. Legislation in Progress regarding Ban on Disclosing Child's Sex

On December 9, 2018, Minister for Health Dr. Yasmin Rashid addressed a seminar in Lahore on the issue of "ending gender-based violence". During her speech, she expressed concern about the alarming trend of aborting female fetuses, which was being facilitated by the misuse of ultrasound technology to determine the sex of babies before birth. To address this serious problem, the minister announced plans to introduce legislation that would prohibit the disclosure of the baby's sex during pregnancy, aiming to prevent such selective abortions based on

^{11.} Chokri Kooli, "Review of Assisted Reproduction Techniques, Laws, and Regulations in Muslim Countries," *Middle East Fertility Society Journal* 24, no. 1 (January 2020): 8–9, https://doi.org/10.1186/s43043-019-0011-0.

^{12. &}quot;The Punjab Reproductive, Maternal, Neo-Natal and Child Health Authority Act" (2014).

sex.13

This highlights a concerning trend of son preference and the use of prenatal sex determination to carry out selective abortions, particularly in favor of male babies. While the proposed legislation represents a significant effort to combat the problem, it is important to note that its focus lies on restricting the access to information about the baby's sex during pregnancy to curb the practice indirectly. Whereas, the abortion of gestation is already banned in Pakistan, whether it occurs as prenatal sex selection tool or not.¹⁴

As of now, there has not been any introduction of a bill or law aimed at banning the disclosure of a child's sex through ultrasound or other means to prevent sex-based abortions. Nonetheless, these legislative developments serve as clear indications that the government has begun to address these critical issues. Consequently, conducting studies and engaging Muslim jurists and scholars becomes crucial in facilitating Shariah-based legislations and regulations in the field.

c. Case Laws

An absence of adequate legislation on the matter of sex selection made the judicial cases of this phenomenon limited or even completely absent. However, a resembling case, involving IVF, was filed in FSC about the similar issue of surrogacy. It is Farooq Siddiqui v. Mst. Farzana Naheed¹⁵, in which the Federal Shariat Court conducted a comprehensive discussion on various forms of assisted reproduction and their legal implications in light of the teachings of the Qur'ān and Sunnah. The case that sparked this discussion involved a couple, Farooq Siddiqui and his wife, who faced infertility issues. In an attempt to find a solution, Mr. Siddiqui placed an advertisement in the newspaper seeking a surrogate mother.

Ms. Farzana Naheed responded to the advertisement and offered her services as a surrogate in exchange for a specified payment. Subsequently, an agreement was reached between Mr. Siddiqui and Ms. Naheed, and she gave birth to a baby girl as per the arrangement. Mr. Siddiqui asserted that the agreement was oral, and to keep their private matters discreet, they concocted a false cover story stating that they were married. However, after the child's birth, Ms. Naheed refused to fulfill her contractual obligation of handing over custody of the child to Mr. Siddiqui. Instead, she claimed that she was Mr. Siddiqui's wife and that the child was a result of their union. Consequently, she demanded that Mr. Siddiqui

^{13. &}quot;Bill Prohibiting Gender Disclosure during Pregnancies to Be Tabled to End Abortion," *Daily Times*, December 8, 2018, https://dailytimes.com.pk/331409/bill-prohibiting-gender-disclosure-during-pregnancies-to-be-tabled-to-end-abortion/.

^{14. &}quot;Pakistan Penal Code (Act XLV)" (1860), § 338, (A)-(C).

^{15.} The case is cited as PLD 2017 FSC 78

provide financial support for the child.

In this case, the FSC had decided that it was against the injunctions of the Quran and Sunnah. One of the honorable judges also observed that surrogacy involves social and ethical dilemmas as well. Although this case is about a very different matter, however, one thing is common, and that is the decision upon a part of IVF practices that can also be used in sex selection methods. As the judgment occurred on the issue of surrogacy, in a case when surrogate mother is not the biological mother of the offspring, the FSC or any other court may also be presented a case when surrogate is not a third individual, but the case is presented with an issue of human intervention in determining sex of the offspring. The proposed study will be proved helpful in any such future quandaries. ¹⁶

In conclusion, it is noteworthy that Pakistan lacks specific legislation concerning sex selection or the access and use of assisted reproductive technology (ART). Instead, medical practitioners in the country rely heavily on culture of marketing and consumerism along with half-truths of religious teachings and Islamic scholars' fatwas to guide their practices in this domain. The absence of comprehensive legal frameworks raises concerns about the potential inconsistencies and uncertainties surrounding the application of ART and preconception sex selection in Pakistan. Given the significance of these issues and their religious and ethical implications, it becomes essential for the policymakers to address this gap and establish clear guidelines and regulations to ensure responsible and ethically sound practices in assisted reproduction while also considering the religious and cultural values of the society.

3. Legislations Related to Preconception Sex Selection in Muslim Jurisdictions Other than Pakistan

Legislations related to sex selection in Muslim jurisdictions form the legal foundation governing the practice of influencing the sex of future offspring within countries adhering to Islamic principles. This concise exploration delves into the diverse legislative approaches taken by Muslim-majority nations. The legal framework on sex selection in Muslim countries can vary significantly from one country to another. However, Muslim jurisdictions have almost unanimously allowed sex selection for medical reasons as they have also been allowed by the experts of Islamic law.

Over the past three decades, there has been rapid growth in research and development related to human conception and manipulation of genetic material for reproductive purposes. Preconception sex selection is particularly the area of interest and marketing in Muslim lands where

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^{16.} Farooq Siddiqui v. Mst. Farzana Naheed, 78 PLD (FSC 2017).

many people link fathering a boy with social status. This progress has led to significant advancements, but it has also sparked intense ethical and legal debates. Various Muslim countries, including Bahrain, Algeria, Jordan, and Saudi Arabia, have established policies to regulate these technologies, emphasizing both prohibitions on unacceptable activities and oversight of acceptable ones.¹⁷ The following narrative delves into the diverse spectrum of Muslim legislations concerning the practice of preconception sex selection. It sheds light on the various legal frameworks established by Muslim countries to govern and regulate the delicate and ethically intricate realm of selecting the sex of offspring before conception.

a. Albania

In this European Muslim country, Albania, the sex ratio at birth (SRB) has surged to 110 to 115 boys for every 100 girls over the past three decades, giving rise to significant and consequential outcomes. Albania has ratified the Convention on Human Rights and Biomedicine of the Council of Europe. The treaty states: The use of techniques of medically assisted procreation shall not be allowed for the purpose of choosing a future child's sex, except where serious hereditary sex-related disease is to be avoided.

b. Algeria

Algeria enacted the Law No. 18-11, on July 2, 2018. According to this law, access to medical reproductive techniques is only allowed for legally married patients who are unable to conceive naturally. Although it is clear that the couples capable of natural fertilization cannot access this technology, yet the law strictly prohibits sex selection in its Article# 375.²¹

^{17.} Gamal I. Serour and Ahmed G. Serour, "The Impact of Religion and Culture on Medically Assisted Reproduction in the Middle East and Europe," *Reproductive BioMedicine Online* 43, no. 3 (September 2021): 421–33, https://doi.org/10.1016/j.rbmo.2021.06.002; Kooli, "Review of Assisted Reproduction Techniques, Laws, and Regulations in Muslim Countries."

^{18.} Christophe Z. Guilmoto et al., "How Do Demographic Trends Change? The Onset of Birth Masculinization in Albania, Georgia, and Vietnam 1990–2005," *Population and Development Review* 44, no. 1 (2018): 37.

^{19. &}quot;Chart of Signatures and Ratifications of Treaty 164," Treaty Office, accessed March 6, 2023, https://www.coe.int/en/web/conventions/full-list.

^{20.} Council of Europe, "Convention for the Protection of Human Rights and Dignity of the Human Being with Regard to the Application of Biology and Medicine: Convention on Human Rights and Biomedicine (Adopted by the Committee of Ministers on 19 November 1996)," ETS No. 164 § (1996).

^{21. &}quot;Qānūn Al-Ṣiḥḥah," Pub. L. No. 11–18 (2018); Kooli, "Review of Assisted Reproduction Techniques, Laws, and Regulations in Muslim Countries," 5.

c. Bahrain

Law 26/2017 in Bahrain governs ART. The law prohibits surrogacy, the donation or sale of gametes or embryos, and the use of stem cells from one person to treat infertility in another. It permits the storage of sperm, eggs, and tissues for a maximum of 10 years and embryos for up to 5 years with patient consent. If the marriage ends, the conserved gametes, sperm, or embryos must be destroyed. Bahrain has forbidden the establishment of embryonic or sperm banks within its borders and strictly prohibits the import or export of embryos, sperm, or eggs. Furthermore, article 7 of this Act prohibits for healthcare institutions, medical doctors, genetic counselors, and embryology specialists to engage in sex selection of the fetus, except for specific medical reasons related to genetic diseases associated with the sex of the offspring.²²

d. Egypt

The Professional Ethics Regulations of the Egyptian Medical Syndicate addressed the issues of assisted reproduction and prohibited sperm, egg, and embryo donations, as well as gestational surrogacy. Establishment of egg, sperm, or embryo banks and trade in human embryos are banned. The Egyptian Society of Obstetrics and Gynecology permits the cryopreservation of surplus fertilized eggs for later implantation in the mother. Local recommendations limit the number of embryos transferred during IVF, but regulatory mechanisms to enforce these guidelines are lacking, leading to non-compliance by IVF centers.²³

A group of Egyptian Members of Parliament (MPs) has introduced a draft bill to the parliament, aiming to regulate IVF treatment while also prohibiting sex selection for non-medical reasons. The proposed legislation emphasizes the need for well-defined laws and regulations to govern IVF procedures and ensure responsible practices. However, as this was a recent development, the outcome and implications of the draft bill remains unknown until recently. There is no specific law or regulation in place regarding preconception sex selection in Egypt.²⁴

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^{22. &}quot;Qānūn Istikhdām Al-Taqnīyāt al-Ṭibbiyyah al-Musā'idah 'alā al-Talqīḥ al-Iṣtinā'ī Wa al-Ikhtiṣāb," Pub. L. No. 26 (2017); Kooli, "Review of Assisted Reproduction Techniques, Laws, and Regulations in Muslim Countries," 5–6.

^{23.} Andrea Büchler and Eveline Schneider Kayasseh, "Medically Assisted Reproduction in Egypt, Iran, Saudi Arabia and the United Arab Emirates: Sunni and Shia Legal Debates," *European Journal of Law Reform* 16, no. 2 (June 2014): 430–64, https://doi.org/10.5553/EJLR/138723702014016002012; Serour, "Islamic Perspectives in Human Reproduction."

^{24. &}quot;Egypt's Gender Selection," *News24*, April 1, 2010, sec. News24, https://www.news24.com/news24/egypts-gender-selection-20100401; "Mad about the Boy: The Growing Gender Selection Trend in Egypt - Health - Life & Style,"

e. Jordan

Since 2007, the Jordanian government has proposed a law regarding medical techniques for reproductive assistance. The bill is still under discussion in parliament, and currently, there is no specific law dedicated solely to reproductive practices. On the other hand, the Fatwa Council of Jordan was asked the Head of the Legislation and Opinion Department to review the draft of the proposed law. The council recommended amendment in the Article 11, which allowed social sex selection. However, it kept the legal status of sex selection on medical basis and proposed: "The use of medical technologies for commercial purposes or for sex selection of the fetus is prohibited, except in the case of genetic diseases associated with the sex of the offspring".²⁵

Furthermore, in 2018, the Jordanian government passed Law 25, which includes some provisions related to artificial reproduction. Article 8 of this law prohibits human cloning and related research and experiments. Article 13 requires written approval from married patients for the application of pregnancy aid technologies and specifies that embryos can only be transplanted into a woman's uterus if the sperm is from her husband. Article 14 addresses women's sterilization, which can only be performed with the woman's written consent and approval from a medical committee.²⁶

At least in one instance, the ethics committee of a private hospital in Jordan has established guidelines for considering a Preimplantation Genetic Diagnosis (PGD) service for non-medical sex selection. These guidelines include situations such as having three or more children of the same sex and desiring a child of the opposite sex, having a mentally or physically handicapped child of a specific sex and wishing for a healthy child of the same sex, experiencing the loss of a child of a certain sex and desiring another child of the same sex, being a mother over the age of 35 with one or more children of the same sex, and desiring a child of the opposite sex, or facing a late marriage and having a special need for a child of a specific sex.²⁷

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Ahram Online, accessed July 24, 2023,

https://english.ahram.org.eg/NewsContentP/7/268253/Life--Style/--Mad-about-the-boy-The-growing-gender-selection-t.aspx.

^{25. &}quot;Decision No. (120) (5/2008) Proposed Amendments to the Draft of the Assisted Reproductive Medical Technologies Law.," accessed August 7, 2023, http://aliftaa.jo/Decision.aspx?DecisionId=122.

^{26. &}quot;Qānūn Al-Mas'ūliyyah al-Ṭibbiyyah Wa al-Ṣiḥḥiyyah," Pub. L. No. 25 (2018).

^{27.} Zaid Kilani, Mohammad Shaban, and Lamia Haj Hassan, "The Role of Sex Selection Techniques in an Assisted Reproductive Technologies Program," in *Textbook of in Vitro Fertilization and Assisted Reproduction: The Bourn Hall Guide to Clinical and*

f. Malaysia

The Malaysian Medical Council (MMC) issued key guidelines concerning assisted reproduction. ART is restricted to married couples who must provide formal consent for the treatment process. Under the provisions of Guideline 003/2006, sex selection of embryos is permitted only when a specific sex is associated with a serious genetic condition. However, the regulations lack penal provisions for non-compliance, and a planned Artificial Reproduction and Tissue Act has faced delays. Issues surrounding gamete and embryo storage, disposal, and surrogacy remain uncertain, subject to practitioner intent and patients' religious beliefs.²⁸

g. Morocco

In February 2016, a first draft of Law 47.14 concerning medical assisted reproductive technology was submitted, and it was officially adopted by the Moroccan parliament in July 2018. The law allows married couples who cannot conceive naturally for a year to access reproductive methods with formal consent. Additionally, the draft strictly prohibits sex selection. The law appears to be comprehensive and addresses contemporary ethical issues in reproductive healthcare.²⁹

h. Oman

The Omani Ministry of Health issued the Fertility Centre Standards and Regulations for the Private Sector in 2017. The regulations draw inspiration from Shariah Law and Islamic rules as applied in Oman. Strict conditions govern access to fertility center services, including preimplantation genetic diagnosis (PGD) only for couples at risk of serious genetic conditions. PGD is considered only when the disorder has been identified in the family, and a geneticist recommends it. Couples must not have any unaffected living child from their current relationship, and the female partner should be under 40 for PGD treatment. Non-medical sex selection and using sperm other than the husband's sperm are not allowed.³⁰

i. Saudi Arabia

Laboratory Practice, ed. Peter R. Brinsden and Bourn Hall Clinic (Boca Raton: CRC Press, 2005), 470.

^{28. &}quot;Controversial Banned Gender Selection Procedure on the Rise Again," *NST Online*, July 4, 2022, sec. letters,

https://www.nst.com.my/opinion/letters/2022/07/810594/controversial-banned-gender-selection-procedure-rise-again; Kooli, "Review of Assisted Reproduction Techniques, Laws, and Regulations in Muslim Countries," 7; Malaysian Medical Council, "Guideline of the Malaysian Medical Council: 003/2006 Assisted Reproduction," 2006.

^{29.} Kooli, "Review of Assisted Reproduction Techniques, Laws, and Regulations in Muslim Countries," 8.

^{30.} Kooli, 9-10.

In Saudi Arabia, the predominant motive for undergoing Preimplantation Genetic Diagnosis (PGD) is sex selection, accounting for an overwhelming 79% of all cases in one study.³¹ While there is a significant demand for such procedures, there are no correct statistics available to quantify the number of couples interested in undergoing them due to the utmost confidentiality involved.³² Nevertheless, the concept of preconception sex selection, although indirectly covered in Saudi laws, remains poorly administered.³³

The Royal Decree No. M/76, issued in March 2004, introduced the Law of Units of Fertilization, Utero-Fetal, and Infertility Treatment in Saudi Arabia. The law outlines that individuals with curable medical issues or poor fertility supported by medical evidence can access medical interventions under this law. Access to ART is limited to those in a proven existing marital relationship, and divorce or death of a partner terminates the fertilization process. The law strictly prohibits surrogacy of any kind. Article 3 of this law states, "In carrying out their activities, Fertilization, Utero-Fetal and Infertility Treatment Units shall abide by the fatwas issued by the Council of Senior Scholars in the Kingdom". This falls under the legal authority of Council of Senior Scholars in the Kingdom.³⁴

Despite my diligent efforts, I was unable to locate any specific ruling pertaining to preconception sex selection in the Fatwa repository of General Presidency of Scholarly Research and Ifta. However, in one instance, one person asked about knowledge of unseen and alluded to sex selection as well. He asked: "Likewise, it has become possible to determine the sex of the new-born (male or female) according to the parents' request in the process of artificial fertilisation outside the mother's womb". The Committee, however, replied for the main issue and

^{31.} Zeinab Abotalib, "Preimplantation Genetic Diagnosis in Saudi Arabia," *Bioinformation* 9, no. 8 (2013): 388–93,

https://doi.org/10.6026/97320630009388; Vitaly A. Kushnir, Eli Y. Adashi, and I. Glenn Cohen, "Preimplantation Sex Selection via in Vitro Fertilization: Time for a Reappraisal," *F&S Reports*, May 2023, S2666334123000673,

https://doi.org/10.1016/j.xfre.2023.05.006; Thomas Lemke and Jonas Rüppel, "Social Dimensions of Preimplantation Genetic Diagnosis: A Literature Review," *New Genetics and Society* 38, no. 1 (January 2, 2019): 80–112, https://doi.org/10.1080/14636778.2018.1549983.

^{32. &}quot;Saudis spend 30,000 riyals to ensure the birth of a male child.," August 2, 2007, https://www.alarabiya.net/articles/2007%2F08%2F02%2F37405.html.

^{33. &}quot;Private Hospitals Carrying out Illegal Gender Selection," December 17, 2014, https://saudigazette.com.sa/article/106974; Kooli, "Review of Assisted Reproduction Techniques, Laws, and Regulations in Muslim Countries," 9.

^{34. &}quot;Niẓām Waḥdat Al-Ikhsāb Wal-Ajnā Wa 'Ilāj al-'Aqam," Royal Decree No. M/76 § (2004).

ignored to answer about sex selection.³⁵ In this context, we can declare that issue of preconception sex selection is not covered with in Saudi laws.

On the other hand, The Islamic Figh Council examined the topic of choosing a child's sex at its 19th session, which took place between 22-28 Shawwal, 1428 Hijri, or 3-8 November 2007, C.E., at the Muslim World League's headquarters in Makkah Al-Mukarramah. The Council categorically mentioned that SSART is not permissible, unless there is a risk that the child may contract a congenital condition that affects only one sex. Intervention in this situation is acceptable provided it is done according to Islamic guidelines. This action can only be conducted if a specialist medical panel with at least three members has determined that the condition of the pregnancy requires sex selection to avoid passing along a hereditary ailment to the child. The report of the medical panel will then be presented to a group of Islamic experts to issue the final decision for individual cases. Furthermore, they also recommended that agencies must be established that can directly supervise the hospitals and clinics that carry out these procedures in Islamic nations in order to prevent any violations of this resolution.³⁶

j. Tunisia

The Tunisian government was an early pioneer in Muslim countries, enacting legislation on assisted reproductive technology with a focus on bioethics. Law No. 2001-93, passed on August 7, 2001, emphasized reproductive health and prohibited genetic engineering, cloning, and trafficking of fetuses and human embryos. Access to medical techniques was made contingent on formal consent and maintained through an uninterrupted marriage. However, the law did not address the issue of sex selection.³⁷

k. Turkiye

In 2010, Turkiye introduced a comprehensive regulatory framework for assisted reproductive treatment. This new regulation clarified rules for infertility treatments nationwide. Only married couples unable to conceive naturally are eligible for assisted reproduction services. The use of donor eggs, sperm, and embryos outside of married couples is banned.

^{35.} Permanent Committee for Scholarly Research and Ifta, Fatāwā Al-Lajnah Al-Dā'imah Li 'l-Buḥūth Al-'Ilmiyyah Wa 'l-Iftā': Al-Majmū'ah al-Thāniyah, ed. Ahmad bin 'Abd Al-Razzāq Al-Duwaysh, 1st ed. (Riyadh: Riyāsat Idārat Al-Buhūth Al-'Ilmiyyah wa Al-Iftā', 2005), 1:240.

^{36.} Islamic Fiqh Council at the Muslim World League, "The Final Communique Issued by the 19th Session Held between 3-7 November, 2007," 54; *Qarārātu Majma'i 'l-Fiqhī Al-Islāmī*, 3rd ed. (Makkah: Muslim World League, 2010), 503–4.

^{37.} Kooli, "Review of Assisted Reproduction Techniques, Laws, and Regulations in Muslim Countries," 10.

To ensure the health of mother and baby and prevent multiple pregnancies, the rules limit the number of embryos implanted based on age and attempt number. Sex selection of embryos is prohibited except for specific genetic disease prevention, and both having a child and acting as a surrogate mother are strictly forbidden.³⁸ Turkiye also ratified the Convention on Human Rights and Biomedicine of the Council of Europe.³⁹ The treaty states: "The use of techniques of medically assisted procreation shall not be allowed for the purpose of choosing a future child's sex, except where serious hereditary sex-related disease is to be avoided."⁴⁰

United Arab Emirates (UAE)

Amidst the pervasive establishment of IVF clinics and the extensive promotion of preconception sex selection, a notable void exists in the United Arab Emirates (UAE) legal framework—no dedicated law currently addresses this intricate issue.⁴¹

In closing, we have found that the issue of preconception sex selection remains largely unaddressed in most Muslim countries, barring a few exceptions. While strides have been taken to protect family unity and adhere to Islamic principles in ART policies, addressing sex selection remains a notable gap. Across Muslim countries with ART laws, the emphasis remains on aiding couples facing conception challenges, limiting the scope of sex selection through ART to medically necessary instances.

4. Laws about Sex selection in Rest of the World

The implications and ethical considerations surrounding sex selection have sparked intense debates, prompting various countries to reevaluate and reshape their legal frameworks. The increasing use of assisted reproductive technologies, such as sperm-sorting techniques and Preimplantation Genetic Diagnosis (PGD), has brought the matter to the forefront of legislative agendas. As a result, the discourse around sex

^{38.} Emine Elif Vatanoglu-Lutz, "Research on Embryos in Turkey with Ethical and Legal Aspects," *Journal of the Turkish German Gynecological Association* 13, no. 3 (September 1, 2012): 191–95, https://doi.org/10.5152/jtgga.2012.27; Zeynep B. Gürtin, "Banning Reproductive Travel: Turkey's ART Legislation and Third-Party Assisted Reproduction," *Reproductive BioMedicine Online* 23, no. 5 (November 2011): 555–64, https://doi.org/10.1016/j.rbmo.2011.08.004.

^{39. &}quot;Chart of Signatures and Ratifications of Treaty 164."

^{40.} Council of Europe, Convention for the protection of human rights and dignity of the human being with regard to the application of biology and medicine: convention on human rights and biomedicine (adopted by the Committee of Ministers on 19 November 1996).

^{41.} Kooli, "Review of Assisted Reproduction Techniques, Laws, and Regulations in Muslim Countries."

selection in legislative bodies has been both complex and critical, reflecting the gravity of its impact on individuals, families, and society as a whole.⁴² The regulatory structure surrounding preconception sex selection varies significantly across different nations. Many countries, as diverse as Australia, Belgium, Canada, China, India, Italy, New Zealand, South Korea, and UK, restrict the use of PGD for medical reasons only. To outlaw sex selection based on non-medical considerations, legislation has been passed in a number of nations and proposed in others.⁴³

The regulation of sex selection through sperm-sorting techniques or Preimplantation Genetic Diagnosis (PGD) varies significantly among 105 surveyed countries. Out of these, 15 countries have legalized sex selection via these methods, while 43 countries have explicitly prohibited it. Interestingly, 15 other countries lack any specific mention of sex selection using these techniques, resulting in a state of ambiguity. In terms of PGT-A for genetic sex selection, it is allowed in 21 countries, not addressed in five, and disallowed in 41. The use of PGT-A for aneuploidy varies across countries, with 28 countries commonly offering it as a clinical service, 24 infrequently performing it, 13 never performing it, and two not providing any data. Overall, the global landscape regarding the legal status and regulation of sex selection and PGT-A remains complex and diverse.⁴⁴

a. Australia

In 2004, the National Health and Medical Research Council of Australia established the Ethical Guidelines for the Use of Assisted Reproductive Technology in Clinical Practice and Research, a set of principles that carry legal weight. Within these guidelines, it is stipulated, "sex selection (by whatever means) must not be undertaken except to reduce the risk of transmission of a serious genetic condition".⁴⁵ Subsequently, these guidelines underwent revision in 2007, with the

^{42.} Steven J. Ory, ed., "IFFS Surveillance 2016, 7th Edition," *Global Reproductive Health*, September 2016, 10, https://doi.org/10.1097/GRH.00000000000001.

^{43.} Kushnir, Adashi, and Cohen, "Preimplantation Sex Selection via in Vitro Fertilization"; Judith Daar et al., *Reproductive Technologies and the Law*, Third edition (Durham, North Carolina: Carolina Academic Press, LLC, 2022).

^{44.} Steven J. Ory, "IFFS Surveillance 2016, 7th Edition"; Howard W. Jones et al., "International Federation of Fertility Societies Surveillance 2010," *Fertility and Sterility* 95, no. 2 (February 2011): 491, https://doi.org/10.1016/j.fertnstert.2010.08.011.

^{45.} National Health and Medical Research Council, "Ethical Guidelines on the Use of Assisted Reproductive Technology [ART] in Clinical Practice and Research" (Australian Government, Canberra, Australia, 2004); Rebecca Kippen, Ann Evans, and Edith Gray, "Australian Attitudes toward Sex-Selection Technology," *Fertility and Sterility* 95, no. 5 (April 2011): 1824–26, https://doi.org/10.1016/j.fertnstert.2010.11.050.

prohibition against non-medical sex selection remaining unaltered.

The latest review of these guidelines happened in 2023. After careful analysis and applying Chapter 2's principles, the Committee concluded that, under specific circumstances, non-medical sex selection aligns with these principles. Consequently, while AHEC's majority opinion suggests limited ethical barriers to non-medical sex selection in certain cases, the practice is subject to paragraph 8.14 until broader public discourse occurs or state and territory regulations address it. The paragraph 8.14 states "Sex selection techniques may not be used unless it is to reduce the risk of transmission of a genetic condition, disease or abnormality that would severely limit the quality of life of the person who would be born". 46 On the other hand, Australia did not ratify the Convention on Human Rights and Biomedicine of the Council of Europe. 47

b. Belgium

The Belgian Embryos Act prohibits research or treatments for sex selection, except to prevent sex-linked diseases. This law reflects concerns expressed in a 1997 advisory report by the Belgian National Consultative Bioethics Committee, which deemed the available preconception sex selection method unreliable. A later report from the same Committee offered a more extensive discourse on the pros and cons of non-medical preconception sex selection. However, this did not yield a consensus view or policy recommendation, leaving the matter as decided before.⁴⁸ On the other hand, Belgium did not ratify the Convention on Human Rights and Biomedicine of the Council of Europe.⁴⁹

c. Canada

The Assisted Human Reproduction Act of Canada states, "No person shall knowingly for the purpose of creating a human being, perform any procedure or provide, prescribe or administer anything that would ensure or increase the probability that an embryo will be of a particular sex, or that would identify the sex of an in vitro embryo, except to prevent, diagnose or treat a sex-linked disorder or disease". ⁵⁰ It further states, "No person shall offer to do, or advertise the doing of, anything prohibited by this section". ⁵¹ On the other hand, Canada did not ratify the Convention

^{46.} National Health and Medical Research Council, "Ethical Guidelines on the Use of Assisted Reproductive Technology [ART] in Clinical Practice and Research" (Australian Government, Canberra, Australia, 2023), 50.

^{47. &}quot;Chart of Signatures and Ratifications of Treaty 164."

^{48. &}quot;Belgian Embryos Act" (2003); G. de Wert and W. Dondorp, "Preconception Sex Selection for Non-Medical and Intermediate Reasons: Ethical Reflections," *Facts, Views & Vision in ObGyn* 2, no. 4 (2010): 267–77.

^{49. &}quot;Chart of Signatures and Ratifications of Treaty 164."

^{50. &}quot;Assisted Human Reproduction Act" (2004), § 5(1)(e).

^{51.} Assisted Human Reproduction Act, § 5(2).

on Human Rights and Biomedicine of the Council of Europe.⁵² The treaty states: "The use of techniques of medically assisted procreation shall not be allowed for the purpose of choosing a future child's sex, except where serious hereditary sex-related disease is to be avoided."⁵³

d. China

China has implemented stringent regulations prohibiting preconception sex selection, reflecting a resolute stance against sex imbalances. This is evident through comprehensive legal framework. The prohibition is enforced by stringent penalties for violators, thereby underscoring the gravity of the issue and the nation's dedication to promoting a balanced sex ratio.⁵⁴ Sex selection through various methods remains widespread in China, highlighting the limitations of stringent regulations without robust accompanying policies and societal support. This prevalent trend underscores the intricate interplay between rigorous legal measures and the necessity for holistic frameworks that address both legal and socio-cultural aspects.55

e. India

Under usual conditions, sex selection is not permitted according to Indian legislation. The legislation that forbids the preconception sex selection of a fetus in India is the Pre-natal Diagnostic Techniques (Regulation and Prevention of Misuse) Act, 1994 (PNDT), which was modified in 2002. The PNDT Act of 1994, subsequently revised in 2002, was established with the aim articulated in the preamble.; "...to provide for the prohibition of sex selection, before or after conception, and for

^{52. &}quot;Chart of Signatures and Ratifications of Treaty 164."

^{53.} Council of Europe, Convention for the protection of human rights and dignity of the human being with regard to the application of biology and medicine: convention on human rights and biomedicine (adopted by the Committee of Ministers on 19 November 1996).

^{54.} Christina Weis, "Changing Fertility Landscapes: Exploring the Reproductive Routes and Choices of Fertility Patients from China for Assisted Reproduction in Russia," *Asian Bioethics Review* 13, no. 1 (March 2021): 7–22, https://doi.org/10.1007/s41649-020-00156-w; Jie Qiao and Huai L. Feng, "Assisted Reproductive Technology in China: Compliance and Non-Compliance," *Translational Pediatrics* 3, no. 2 (April 2014): 91–97, https://doi.org/10.3978/j.issn.2224-4336.2014.01.06.

^{55.} Hilary Bowman-Smart et al., "Sex Selection and Non-Invasive Prenatal Testing: A Review of Current Practices, Evidence, and Ethical Issues," *Prenatal Diagnosis* 40, no. 4 (March 2020): 398–407, https://doi.org/10.1002/pd.5555; Jm Milliez, "Sex Selection for Non-Medical Purposes," *Reproductive BioMedicine Online* 14 (January 2007): 114–17, https://doi.org/10.1016/S1472-6483(10)60742-0; Sabu M. George, "Millions of Missing Girls: From Fetal Sexing to High Technology Sex Selection in India," *Prenatal Diagnosis* 26, no. 7 (July 2006): 604–9, https://doi.org/10.1002/pd.1475.

regulation of pre-natal diagnostic techniques for the purposes of detecting genetic abnormalities or metabolic disorders or chromosomal abnormalities or certain congenital malformations or sex-linked disorders and for the prevention of their misuse for sex determination leading to female feticide and for matters connected therewith or incidental thereto." Hence, the PNDT Act disallows the utilization of any technologies with the intent of sex selection.⁵⁶

Furthermore, the same law outlines consequences, for both patient and practitioner, for the use of PGD to determine the sex of an embryo. A first offense by a practitioner "shall be punishable with imprisonment for a term which may extend to three years and with fine which may extend to ten thousand rupees," while the patient who sought the use of PGD may receive "imprisonment for a term which may extend to three years and with fine which may extend to fifty thousand rupees".⁵⁷

Despite established bans, in the Indian context, this has not necessarily impacted the prevalent occurrence of sex-selective termination of pregnancies, given that abortion is permissible, and these regulations frequently lack effective enforcement. It is worth highlighting that the historical occurrence of female infanticide in India is well documented, but contemporary studies indicate that the reduction of female population has predominantly transitioned from infanticide to sex-selective abortion. Sex selection through diverse methods is prevalent in India. This phenomenon underscores the shortcomings of strict regulatory measures when lacking strong complementary policies and societal backing.⁵⁸

f. Italy

The landscape of preconception sex selection is addressed indirectly in Italy through the 2004 Rules on Medically Assisted Procreation. It faced judicial scrutiny due to their stringent interpretation that limited access to ART and completely prohibited PGD. These rules confined medically assisted reproduction to situations where no alternative method existed to address sterility or infertility. Italian courts gave access to ART,

^{56. &}quot;Pre-Conception and Prenatal Diagnostic Techniques (Prohibition of Sex Selection) Act" (2003); "Pre-Natal Diagnostic Techniques (Regulation and Prevention of Misuse) Act," Pub. L. No. 57 (1994).

^{57.} Pre-conception and Prenatal Diagnostic Techniques (Prohibition of Sex Selection) Act; Margaret E. C. Ginoza and Rosario Isasi, "Regulating Preimplantation Genetic Testing across the World: A Comparison of International Policy and Ethical Perspectives," *Cold Spring Harbor Perspectives in Medicine* 10, no. 5 (May 1, 2020): a036681, https://doi.org/10.1101/cshperspect.a036681.

^{58.} Bowman-Smart et al., "Sex Selection and Non-Invasive Prenatal Testing"; Milliez, "Sex Selection for Non-Medical Purposes"; George, "Millions of Missing Girls."

including PGD, exclusively to infertile heterosexual couples.⁵⁹ Thus, preconception sex selection becomes a possibility for infertile couples. On the other hand, Italy has signed the Convention on Human Rights and Biomedicine of the Council of Europe.⁶⁰ This rules out possibility of social sex selection.

g. New Zealand

Reproductive technology employment for sex selection is prohibited in New Zealand. The Human Assisted Reproductive Technology Act in New Zealand prohibits selecting in vitro human embryos based on sex for implantation and using procedures to ensure a particular sex. Violation of this law can result in imprisonment for up to 1 year or a fine up to \$100,000. However, there is an exception that permits it to prevent genetic disorders in offspring.⁶¹

h. South Korea

In South Korea, the 2005 Bioethics and Safety Act stipulates a limited scope for preconception sex selection, authorizing the use of PGD solely for the diagnosis of muscular dystrophy and specific hereditary diseases designated through presidential decree. Notably, this provision has expanded over time, with more than one hundred additional medical conditions gaining approval through subsequent presidential decrees, effectively broadening the range of circumstances.⁶²

i. UK

The United Kingdom displayed a decisive approach by implementing a ban on any technique employed for sex selection for nonmedical purposes. This significant decision was driven, in part, by public opinion surveys commissioned by the Human Fertilisation and Embryology Authority, the government body overseeing fertility clinics in the UK. In a comprehensive face-to-face interview survey involving 2,165 adults, a notable 68% expressed their support for regulating sex selection.⁶³

^{59.} Ginoza and Isasi, "Regulating Preimplantation Genetic Testing across the World"; Emanuela Turillazzi et al., "The European Court Legitimates Access of Italian Couples to Assisted Reproductive Techniques and to Pre-Implantation Genetic Diagnosis," *Medicine, Science and the Law* 55, no. 3 (July 2015): 194–200, https://doi.org/10.1177/0025802414532245.

^{60. &}quot;Chart of Signatures and Ratifications of Treaty 164."

^{61. &}quot;Human Assisted Reproductive Technology Act," N.Z. Stat. No. 92 § (2004), http://www.legislation.co.nz/act/public/2004/0092/latest/DLM319314.html?sea rch=ts_act_reproductive+technology_noresel.

^{62. &}quot;Bioethics and Safety Act" (2005); Na-Kyoung Kim, "Legislation on Genetic Diagnosis: Comparison of South Korea and Germany," *Development & Reproduction* 19, no. 2 (June 2015): 111–18, https://doi.org/10.12717/DR.2015.19.2.111.

^{63.} Human Fertilisation and Embryology Authority, Sex Selection: Options for Regulation (London: HFEA, 2003).

Additionally, a separate self-administered questionnaire, encompassing 641 respondents, revealed an even higher percentage of 82% in favor of regulating sex selection for nonmedical reasons. The overwhelming public support played a crucial role in shaping the UK's bold stance against nonmedical sex selection, reflecting a clear alignment between public sentiment and the regulatory approach.⁶⁴

The UK's approach to prohibiting sex selection for nonmedical reasons is based on the general principles and policies of the Human Fertilisation and Embryology Authority (HFEA), the regulatory body overseeing fertility clinics. The HFEA's Code of Practice and Guidelines strictly govern the use of assisted reproductive technology, and while they do not explicitly mention a ban on sex selection for nonmedical reasons, the HFEA interprets these guidelines in a way that effectively prohibits such practices. Thus, the Human Fertilisation and Embryology Act 2008, make it illegal for clinics and healthcare providers to offer sex selection services for nonmedical purposes. On the other hand, the UK did not ratify the Convention on Human Rights and Biomedicine of the Council of Europe.⁶⁵

j. USA

The United States is recognized as among the most lenient, lacking legislation and offering limited guidance on sex selection.⁶⁶ Sex selection is generally legal in the USA, but the regulations vary by state. The United States does not have federal laws that specifically prohibit or allow sex selection for nonmedical reasons. Currently, sex selection is impliedly permitted in the United States for both medical and nonmedical reasons.⁶⁷ This disparity has led infertile couples over the globe to seek

Population," Fertility and Sterility 83, no. 3 (March 2005): 650.

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^{64.} Susannah Baruch, David Kaufman, and Kathy L. Hudson, "Genetic Testing of Embryos: Practices and Perspectives of US in Vitro Fertilization Clinics," *Fertility and Sterility* 89, no. 5 (May 2008): 1055–56, https://doi.org/10.1016/j.fertnstert.2007.05.048; Tarun Jain et al., "Preimplantation Sex Selection Demand and Preferences in an Infertility

^{65. &}quot;Chart of Signatures and Ratifications of Treaty 164."

^{66.} Sarah M. Capelouto et al., "Sex Selection for Non-Medical Indications: A Survey of Current Pre-Implantation Genetic Screening Practices among U.S. ART Clinics," *Journal of Assisted Reproduction and Genetics* 35, no. 3 (March 2018): 409–16, https://doi.org/10.1007/s10815-017-1076-2; Andrea M. Whittaker, "Reproduction Opportunists in the New Global Sex Trade: PGD and Non-Medical Sex Selection," *Reproductive BioMedicine Online* 23, no. 5 (November 2011): 609–17, https://doi.org/10.1016/j.rbmo.2011.06.017; Baruch, Kaufman, and Hudson, "Genetic Testing of Embryos."

^{67.} Steven J. Ory, "International Federation of Fertility Societies' Surveillance (IFFS) 2022: Global Trends in Reproductive Policy and Practice, 9th Edition," *Global*

IVF with PGD procedures in the United States. In fact, foreign nationals undergoing IVF in the US utilize PGD and third party reproductive methods—such as oocyte donation and gestational carriers—at notably higher rates compared to residents of the United States.⁶⁸

The Ethics Committee of the American Society for Reproductive Medicine had initially discouraged IVF with PGD solely for preconception sex selection.⁶⁹ In contrast, the 2015 committee report exhibited a somewhat milder position when it conveyed that the committee "has not reached consensus on whether it is ethical for providers to offer assisted reproductive technologies for sex selection for nonmedical purposes", however, it allowed clinic employees who have reservations about the nonmedical application of PGD to decline offering it.⁷⁰

In 2022, the committee revisited the matter anew. While the committee asserted that nonmedical sex selection should not be promoted, however, in its concluding statements seem to adopt a more balanced stance. The committee acknowledges the diverse ethical considerations faced by assisted reproductive technology practitioners who either provide or abstain from offering nonmedical sex selection. Additionally, it emphasizes the importance of comprehensive discussions on advantages and disadvantages with patients.⁷¹ The Ethics Committee of the American College of Obstetricians and Gynecologists takes a stand

Reproductive Health 7, no. 3 (2022),

https://doi.org/10.1097/GRH.000000000000058; Deidre C. Webb, "The Sex Selection Debate: A Comparative Study of Sex Selection Laws in the United States and the United Kingdom," *South Carolina Journal of International Law and Business* 10 (2013).

^{68.} Kushnir, Adashi, and Cohen, "Preimplantation Sex Selection via in Vitro Fertilization"; Aaron D. Levine et al., "Assessing the Use of Assisted Reproductive Technology in the United States by Non–United States Residents," *Fertility and Sterility* 108, no. 5 (November 2017): 815–21, https://doi.org/10.1016/j.fertnstert.2017.07.1168.

^{69. &}quot;Sex Selection and Preimplantation Genetic Diagnosis. The Ethics Committee of the American Society of Reproductive Medicine," *Fertility and Sterility* 72, no. 4 (October 1999): 595–98.

^{70. &}quot;Use of Reproductive Technology for Sex Selection for Nonmedical Reasons," *Fertility and Sterility* 103, no. 6 (June 2015): 1418–22, https://doi.org/10.1016/j.fertnstert.2015.03.035.

^{71. &}quot;Use of Reproductive Technology for Sex Selection for Nonmedical Reasons: An Ethics Committee Opinion," Fertility and Sterility 117, no. 4 (April 2022): 720–26, https://doi.org/10.1016/j.fertnstert.2021.12.024; Ethics Committee of the American Society for Reproductive Medicine. Electronic address: asrm@asrm.org and Ethics Committee of the American Society for Reproductive Medicine, "Disclosure of Sex When Incidentally Revealed as Part of Preimplantation Genetic Testing (PGT): An Ethics Committee Opinion," Fertility and Sterility 110, no. 4 (September 2018): 625–27.

against any elective sex selection practices.⁷² On the other hand, the USA did not ratify the Convention on Human Rights and Biomedicine of the Council of Europe.⁷³

5. Conclusion

In conclusion, Pakistan, a prominent Muslim nation with advanced healthcare, faces widespread sex selection procedures advertised even through SMS services. Urgent legislative action is needed to regulate these practices, as the current absence of regulations raises concerns of misuse. Efforts are underway to ban disclosing fetal sex to curb sex-based abortions, reflecting an ongoing preference for male offspring. Pakistan's reliance on culture with a growth of IVF clinics without comprehensive legal frameworks poses inconsistencies in sex selective practices. This phenomenon can potentially lead to serious demographic destruction. Despite the commendable level of awareness, it is important to note that the issue of sex selection remains largely unaddressed in majority of Muslim countries. However, it is evident that the limited number of Muslim countries that have enacted laws governing Assisted Reproductive Technology (ART) have explicitly or implicitly allowed medically needed sex selection, and banned the social sex selection. We observed a consensus, in principle, supporting the utilization of preconception sex selection for medical purposes, albeit with variations in the specific criteria and regulations set forth. On the other hand, all the legislations outlined in this context, except for the United States, among the non-Muslim nations, have unequivocally banned its practice for social reasons. The USA remains a prominent hub for reproductive tourism, attracting individuals seeking preconception sex selection. After thoroughly exploring the Muslim discourse, assessing the motives, methods and effects, and legal regulations and frameworks surrounding preconception sex selection, we finish this study and embark on presenting our conclusion.

^{72. &}quot;ACOG Committee Opinion No. 360: Sex Selection:," *Obstetrics & Gynecology* 109, no. 2, Part 1 (February 2007): 475–78, https://doi.org/10.1097/00006250-200702000-00063.

^{73. &}quot;Chart of Signatures and Ratifications of Treaty 164."

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https://doi.org/10.1016/j.fertnstert.2007.05.048.

Belgian Embryos Act (2003).

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