Gender bias in Kosovo

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Executive summary

This report on gender-biased sex selection in Kosovo originates from a wider concern about potential sex imbalances at birth in several countries in Eastern Europe. It follows the United Nations interagency statement released in 2011 on sex selection (OHCHR, UNFPA, UNICEF, UN Women and WHO, 2011), the report of the Parliamentary Assembly of the Council of Europe (Council of Europe, 2011) on the Caucasus and Southeast Europe, and the report of UNFPA (2015b). These documents called for a larger mobilization by government organizations and international agencies to gather more evidence on the phenomenon in Eastern Europe and this report represents the first attempt at examining prenatal sex selection in Kosovo.

Sex selection has emerged since the early 1990s as a widespread harmful practice in several Asian countries. It is lesser known that prenatal sex selection has also been put into practice in parts of Europe. This report starts with a brief overview of the world situation, in which we identify two regional clusters of countries in the South Caucasus and in Southeast Europe, with clear signs of potential prenatal sex selection. The sex ratio at birth (i.e. the number of male births per 100 female births), fluctuating normally around 105, has indeed increased to levels between 110 and 115 in these countries. This artificial rise in the proportion of male births began in most countries around 1990, a period marked by political and economic transformations in Eastern Europe.

The experience of Asian countries indicates that three factors are necessary for gender-biased sex selection: 1) the reduction in family size, 2) the availability of modern reproductive technologies, and 3) a staunch preference for sons. We use these three elements to investigate whether or not these conditions have been met in Kosovo.

First, we observed that high fertility in Kosovo has long allowed parents to achieve their reproductive objectives in the past. However, the average number of children has now declined and fertility has reached replacement-level (i.e. 2.1 children per woman). Parents now have to make decisive choices about both the number and the gender of their offspring. Kosovo’s sustained fertility decline is primarily due to unreliable birth control methods, and pregnancy terminations often remain the only way to avoid unwanted pregnancies. This leads us to the second precondition of sex selection, i.e. the availability of sex-selective abortions (by far the most usual method to avoid female births). Abortion was legalized early in the former Yugoslavia, and Kosovar women today have easy access to ultrasound and abortion facilities. However, without the third precondition, a strong preference for boys, the sex ratio at birth would necessarily remain close to its natural level. However, we have evidence that the family system in Kosovo is strongly biased in favor of sons. This bias is mostly due to the patriarchal kinship systems found in the Balkans, linked to the primary role of sons in old-age support and in the perpetuation of the family line. The frequent co-residence of married sons with their parents is a typical illustration of the strength of the family system in Kosovo. The absence of market mechanisms and social protection tends to reinforce the role of the family as a source of support and solidarity for its members.

In this report, we use both qualitative and quantitative data to document the nature and intensity of son preference. Discussions and interviews make it clear that most families always look for a son. We further demonstrate that gender bias influences reproductive decisions and that subsequent fertility can be twice as frequent when families do not have any sons. This quest for a son can be observed across all regions, social categories, and ethnicities of Kosovo.
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Considering the cultural context of gender bias, we systematically investigate the evidence for sex imbalances at birth, using the surveys conducted in 2015, data from the 2011 census, and the birth registration system. Group discussions, in-depth interviews, and other documentary evidence from previous studies do suggest that sex-selective abortions take place in the country. Yet, people are reluctant to discuss issues related to abortion and its commonness, and it is difficult to assess the exact prevalence of sex selection. A separate section in the report is devoted to the examination of demographic evidence.

We observe that the sex ratio at birth in Kosovo has been biased for a long time. Today, the sex ratio at birth is close to 110 male births per 100 female births. This is a level lower than those observed in Asia or in the South Caucasus, but it is equivalent to an average deficit of 5% of female births. The sex ratio at birth increases after three births, and is even higher after three female births. We also observe the sex ratio at birth to be slightly skewed for the first births. While it is difficult to date the beginning of this rise in birth masculinity, it predates 1999 and corresponds therefore to an old mechanism of gender discrimination in Kosovo attested in the past by excess female mortality. The statistical analysis also shows that in spite of some variations across groups, no population in Kosovo appears immune to prenatal gender discrimination.

A separate chapter has been devoted to the exploration of the demographic consequences of skewed levels of sex ratio at birth. The major implication is the gradual buildup of a male surplus in Kosovo’s adult population. This demographic surplus might after some years distort the marriage system and international migration would then become a natural solution for men to escape the growing local sex imbalance.

Our last chapter sums up our findings and their implications. We must emphasize that higher fertility and restriction to reproductive technologies are unlikely to have any impact in Kosovo’s modern demographic regime. The gradual disappearance of gender bias is a prerequisite for prenatal sex selection to subside in Kosovo. We conclude this report with a set of recommendations about Kosovo. They concern two different domains. On the one hand, there is a need for a finer monitoring of demographic trends and of reproductive practices, and a better understanding of the family transformations currently taking place in the country. This requires in particular better statistical and anthropological appreciation of recent trends with support from the statistical office, government departments, and civil society organizations. On the other hand, publicity and advocacy campaigns are required to share the findings of this study on prenatal sex selection in Kosovo. Dissemination activities should target the main stakeholders such as government departments, medical associations, and women’s organizations, and lead to a broader policy dialogue on the family dimension of gender inequity that lies at the root of prenatal gender discrimination.
1 Introduction

This report investigates the presence of sex imbalances at birth in Kosovo and follows a recent call to monitor the deteriorating situation in Eastern Europe (UNFPA, 2015b). It is based on a wide array of field-based and statistical sources. The main inputs include the discussions held during my visit to Prishtina in October 2015 with gender and population specialists, the findings of a qualitative survey commissioned by UNFPA in 2015, and the statistical analysis of micro-data prepared by the Statistical Agency of Kosovo (ASK). This section provides an overview of the study and of its main objectives.

1.1 Presentation of the report

This report is divided into eight chapters, starting with the present introduction. The next chapter is an overview of the issue of sex imbalances at birth. It begins with a more technical discussion of the issues related to the measurements and interpretation of the sex ratio at birth. A synopsis of the current situation in the world follows. We emphasize that Kosovo’s situation needs to be understood in its regional context, in view of the numerous cultural and sociopolitical communalities of countries where traces of sex imbalances at birth can be detected. This chapter also introduces the explanatory framework used extensively in this analysis.

Chapter 3 presents the main instruments used in this study to investigate gender bias in Kosovo. Our methodology combines the inputs from microdata from Kosovo’s Statistical Agency (ASK) and from the surveys commissioned by UNFPA in 2015 for this report. We also present the ways the census dataset has been used to supplement birth registration statistics.

The fourth chapter explores the context specific to Kosovo. We cover the economic and demographic conditions, as well as the fertility decline—all of which have affected the country over the last thirty years. The gender assessment focuses on the central place of family institutions in Kosovo and the somewhat peripheral position of women in this context. Son preference appears to be a logical consequence of a kinship system that favors male offspring.

Chapter 5 examines the nature and intensity of son preference. We start with voices heard during the 2015 survey. This field-based analysis is paired with an analysis of son preference, which has been manifested in reproductive choices. The intensity of gender bias, assessed from discussions and confirmed by a statistical analysis, is indeed widespread in the country.

Chapter 6 focuses on prenatal sex selection. This lengthy chapter begins with excerpts from the qualitative survey. While respondents are usually reluctant to discuss abortion issues, except to condemn it, sex-selective abortions are mentioned as an option for people who have only female children. We then review the statistical evidence dealing with sex imbalances at birth using both data from the civil registration system and from the census microdata. After establishing the presence of an abnormally skewed sex ratio at birth, we outline its main characteristics, focusing in particular on potential variations across ethnic, socioeconomic, and regional lines.

Chapter 7 is based on a study of the future implications of current sex imbalances at birth and we use different sets of demographic simulations to explore the potential consequences of the current situation on the future age and sex composition of the population.
The report ends with a brief summary of our findings and a set of recommendations to address the issue of gender-biased sex selection in Kosovo.

1.2 Purpose of the study

In previous decades, several studies have hinted at the presence of an elevated sex ratio at birth in several countries of Eastern Europe, starting with countries of South Caucasus region where birth masculinity appeared higher than expected following the collapse of the Soviet Union. Some later studies have also claimed that countries in Southeastern Europe were in the same situation. Following the PACE report (Council of Europe, 2011), there was an increased need for detailed studies investigating the issue of potential prenatal sex selection in these countries (UNFPA, 2015b), as well as UNFPA sponsored quantitative and qualitative research on Albania and Armenia in 2012 (UNFPA 2012b, 2013). Most recently, Azerbaijan and Georgia were studied at the request of local UNFPA offices (UNFPA, 2015a). In addition, the World Bank conducted a three-country assessment of the situation of the South Caucasus region based on extensive field investigations.

Kosovo was the largest European country initially identified in the studies of sex imbalances that remain without specific study. Several questions remain unanswered about Kosovo in relation to gender bias and sex selection. The first issue relates to the confirmation of distorted sex ratio at birth in Kosovo—its extent and its duration. This is probably not a simple issue, in light of the statistical difficulties described later in this section. The quality of Kosovo’s statistical system has been severely undermined by its political situation since the late 1980s and the data requires scrutiny. The first objective of this report is to test the presence of skewed SRB levels in the country. In addition, we need a description of the main correlates of prenatal sex selection, such as variations observed by birth order, family composition, and other socioeconomic indicators (rural/urban, education etc.). A more field-based, qualitative confirmation of this manifestation of gender bias is also necessary.

The next research objective pertains to the overall context of gender bias in Kosovo. We already have some information on some of the facilitating factors, such as the rapid reduction in fertility and the availability of modern reproductive technology, but we also want to understand the reasons underlying discriminatory behavior and the persistence of the different forms of son preference across Kosovo. These aspects directly relate to local family systems and to the disadvantaged position of girls and women in society. This analysis will rely on already published documentary sources and on lessons drawn from the surveys conducted in 2015. In addition, we will use some of our statistical materials to probe the presence and intensity of son preference in the population.
2 Prenatal gender bias and sex ratios

This section is devoted to an overview of the issue of sex imbalances at birth in the world. While the media has written a lot about the situation of China and India, sex imbalances at birth remain an issue that is difficult for population and gender specialists to grasp. The distribution of the population by sex has not typically been a matter of great concern.

Two distinct biological phenomena determine the sex ratio. First, more boys than girls are born across the world. The sex ratio at birth (SRB, computed as the number of males per 100 female births) is usually close to 105 and fluctuates within a narrow range of 104 -106. In countries such Germany, the United States, France, the Russian Federation, or Japan, the sex ratio at birth has been very close to 105 in recent years (see Table 1). Second, women enjoy better survival conditions. Except where maternal mortality is high, male mortality rates are systematically higher than female mortality rates. These two processes result in a sex ratio of 105 at time of birth, which tends to decline gradually as the population ages. The sex ratio decreases below 100 among older adults and women are more numerous among the elderly because of their advantage in longevity.

In 1990, Nobel Prize winner Amartya Sen demonstrated, for the first time, that demographic sex imbalances also reflect the strength of gender bias against women in many Asian countries (Sen, 1990). Demographers had already documented excess female mortality in many different settings, from contemporary Asian countries to historical populations in Europe. Several life tables document the presence of higher than expected female mortality as a consequence of various forms of discrimination against girl children and women alike. During the 1990s, statisticians also started to notice abnormally high proportions of male births in several countries such as China, India, and South Korea. Apart from excess mortality, women were also affected by a more insidious manifestation of gender discrimination taking place before the birth. The rise of the sex ratio at birth beyond its natural level of 105 was a clear demonstration that parents were able to manipulate the sex of their births.

The analysis of sex ratios and sex imbalances requires some familiarity with demographic notions and processes. We will start first with discriminatory mechanisms at work in sex imbalances at birth and then we will proceed to an overview of the current situation in the world.

2.1 Biological and discriminatory mechanisms

Several factors may affect sex distributions in a population from conception to death. Some are strictly biological, while others arise due to gender discrimination.

The natural level of birth masculinity is close to 105 male births per 100 female births everywhere in the world—except in Sub-Saharan Africa where the SRB is closer to 103. With mortality higher among men, the initial preponderance of males tends to decline with age and converts to a female majority among older adults. Different factors related to discriminatory practices, however, may cause an artificial rise in the proportion of men in a given population. One is excess female mortality and it is still common in many countries (United Nations, 2011). Excess mortality is due various forms of neglect towards female children and is associated with discrimination in healthcare or feeding. This can only be evidenced by reliable mortality rates by age and sex. A more common harmful practice that occurs

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1 This section draws in particular on the recent global study of sex selection (UNFPA 2012). See also Guilmoto (2015).
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today is prenatal sex selection. The development of prenatal sex diagnosis during the 1980s (via amniocentesis or ultrasound) has allowed parents to resort to abortion when they want to avoid female births. We know that millions of families have taken advantage of prenatal sex selection to eliminate unwanted female births across the world (Bongaarts and Guilmoto, 2015). More recent techniques include fetal blood tests and the pre-implantation genetic diagnosis (PGD), but these are still expensive, and therefore uncommon, procedures (Guilmoto 2015).

The overall impact of prenatal discriminatory behavior can be sizable. For instance, if 5% of the parents abort female fetuses, the sex ratio at birth will rise to 111 male births per 100 female births. It takes only a minority of couples to have a significant effect on the distribution of births by sex. Birth masculinity is often normal and close to 105 for the first one or two births. The birth of successive girls may encourage parents to manipulate the sex of subsequent births. In fact, the sex ratio of the youngest child is often skewed towards male children—a sign showing that parents need a boy to achieve their family objectives.

2.2 Sex imbalances at birth across the world

Table 1 brings together recent estimates of SRB levels across the world. We can distinguish countries affected by high birth masculinity from other countries where the SRB is close to 105 male births per 100 female births.

China is the major contributor to the number of excess male births. Not only is it the most populated country in the world, but its sex ratio at birth is still the highest observed in the world. Birth masculinity started to increase in China in the late 1980s, from 105 to close to 120 by the beginning of this century. This rise has often been linked to the implementation of a drastic family planning policy, but also to the strength of patriarchal family values. China's SRB has probably decreased over the last ten years, but it level remains the highest of any country observed today. The sex ratio at birth is also high in areas such as Taiwan, Singapore, and Hong-Kong.

The other most affected country is India, where sex selection was introduced during the 1980s. The sex ratio at birth is now estimated at 110. This moderate level reflects the fact that more than half of India is immune to sex imbalances at birth. The high SRB levels are concentrated in the Northwest of the country, with regional levels often close to 120. Other countries in Asia are also affected, such as Vietnam, where the increase in birth masculinity has been both recent and rapid since it reached 112 in a few years. The SRB has also recently deteriorated in Nepal. An interesting counter-example is South Korea, where the SRB rose up to 113 in the early 1990s, but after this period the average sex ratio at birth started to decline, and is now below 106. South Korea is the only country where birth masculinity has recorded an initial increase followed by a decrease back to normal levels.

The sex ratio at birth is also elevated in several countries of Eastern Europe. Two distinct regional blocks can be distinguished in the data shown in Table 1: South Caucasus and the Western Balkans (Duthé et al. 2012; Guilmoto and Duthé 2013). The South Caucasus represents the most affected region, where birth masculinity reached levels as high as 115 after the collapse of the Soviet Union in 1991. This is also the case for Azerbaijan and Armenia, where annual SRB estimates demonstrate a clear rise during the 1990s, followed more recently by stabilization. Azerbaijan still has the highest SRB level in the world apart from China. Georgia also recorded a steep rise in SRB during the 1990s, but birth masculinity may be on the decline today.
Table 1: Sex ratio at birth in various countries, 2009-2014

<table>
<thead>
<tr>
<th>Country/regions</th>
<th>SRB</th>
<th>Period</th>
<th>Data source</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>East Asia</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>China</td>
<td>115.9</td>
<td>2014</td>
<td>Annual estimate</td>
</tr>
<tr>
<td>South Korea</td>
<td>105.3</td>
<td>2013</td>
<td>Birth registration</td>
</tr>
<tr>
<td>Vietnam</td>
<td>112.2</td>
<td>2013-14</td>
<td>2014 Population survey</td>
</tr>
<tr>
<td><strong>South Asia</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>India</td>
<td>110.0</td>
<td>2011-13</td>
<td>Sample registration</td>
</tr>
<tr>
<td><strong>South Caucasus</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Azerbaijan</td>
<td>115.6</td>
<td>2013</td>
<td>Birth registration</td>
</tr>
<tr>
<td>Armenia</td>
<td>114.0</td>
<td>2012-13</td>
<td>Birth registration</td>
</tr>
<tr>
<td>Georgia</td>
<td>108.0</td>
<td>2012-14</td>
<td>Birth registration</td>
</tr>
<tr>
<td><strong>Southeast Europe</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Albania</td>
<td>109.0</td>
<td>2012-13</td>
<td>Birth registration</td>
</tr>
<tr>
<td>Kosovo</td>
<td>110.4</td>
<td>2011-13</td>
<td>Birth registration</td>
</tr>
<tr>
<td>Northwest Macedonia</td>
<td>110.4</td>
<td>2009-13</td>
<td>Birth registration</td>
</tr>
<tr>
<td>Montenegro</td>
<td>109.0</td>
<td>2009-13</td>
<td>Birth registration</td>
</tr>
<tr>
<td><strong>Other countries</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>South Africa</td>
<td>101.7</td>
<td>2012</td>
<td>Birth registration</td>
</tr>
<tr>
<td>Germany</td>
<td>105.3</td>
<td>2013</td>
<td>Birth registration</td>
</tr>
<tr>
<td>France</td>
<td>104.8</td>
<td>2013</td>
<td>Birth registration</td>
</tr>
<tr>
<td>USA</td>
<td>104.7</td>
<td>2012</td>
<td>Birth registration</td>
</tr>
<tr>
<td>Turkey</td>
<td>105.8</td>
<td>2013</td>
<td>Birth registration</td>
</tr>
</tbody>
</table>

Compiled by Guilmoto (2015)

A second regional cluster in Eastern Europe has been identified in the Western Balkans (Guilmoto 2010). This feature has only been observed very recently, so it remains poorly documented. The territories involved include Albania, Kosovo, Montenegro, and parts of Macedonia. These territories mostly coincide with the distribution of the ethnic Albanian population of Southeast Europe with the exception of Montenegro, whose population is of Slavic origin. Levels in these areas are closer to 110 male births per 100 female births, compared to levels such as 115 found in the Caucasus region or to levels above 120 found in many regions of China, India, and Vietnam. Statistics on these countries are often imperfect and sex imbalances need to be confirmed with census figures and other sample survey estimates. Albania remains the only country in Southeast Europe where sex imbalances at birth have been investigated (UNFPA 2012b).

2.3 Explaining prenatal sex selection

The study of sex imbalances at birth has long been impaired by doubts on the quality of the statistical evidence. Insufficient or defective data, higher biological masculinity, impacts of conflict and of prior epidemics, and under-registration of female births and girls have provided many arguments to challenge the existence of sex imbalances at birth. Beyond the legitimate statistical uncertainty
surrounding incomplete data, the underlying reason for doubting sex selection often relates to the deep sense of national embarrassment that the acknowledgement of discrimination against unborn girls provokes. The issue of sex selection is often very sensitive.

Elevated SRB levels are usually interpreted in their particular contexts, and local explanations—such as the role of dowry in India, of economic and political crises in post-communist countries, and of the one-child policy in China—predominate. However, they are never applicable to other countries. We prefer here to follow a more unified approach based on a single analytical grid, which is applicable to all cases of high sex ratio at birth. We consider sex selection to be a rational reproductive strategy pursued by couples to achieve their gendered objectives under several local constraints. We also use a three-legged framework,\(^2\) in which three specific preconditions for sex selection can be singled out:

1. **Sex selection should be feasible.** It requires the availability of affordable and efficient technologies to manipulate the sex distribution of children.
2. **Sex selection should be profitable.** Parents resort to sex selection only when they perceive benefits in having boys rather than girls.
3. **Sex selection should be necessary.** Families are no longer able to ensure the birth of a son through repeated pregnancies, as they were able to in the past.

These three preconditions correspond to parents 1) being able to resort to sex selection, 2) perceiving a clear advantage in favoring one sex over the other, and 3) lacking alternative options when fertility is low. The first of these conditions represents the supply factor. It requires modern reproductive technologies (in most cases prenatal diagnosis and pregnancy termination) to be locally accessible. This entails further conditions, such as the accessibility of effective methods and the legal environment. Methods also need to be socially acceptable, since specific techniques (e.g. abortion) may be considered objectionable for religious or ethical reasons.

The second precondition is the demand factor and this usually corresponds to son preference. Gender preferences can be understood only within a larger gender valuation system, related to a variety of social, cultural, religious, or economic benefits that vary according to local contexts. These factors include both practical considerations, such as the support and protection offered by sons to their parents, and more symbolic reasons, such as the prestige or the perpetuation of the family line. Overall, these factors are closely associated with the local family system and they usually imply that sons stay close to or co-reside with their parents after marriage. In addition, sons may work on the family land or in the family business, share their income with their parents, and inherit the family properties. Migrants are also expected to support their parents via regular remittances. In contrast, daughters leave their native family after marriage.

The third precondition relates to the role of fertility decline on reproductive strategy. When fertility nears replacement level, a significant proportion of parents will fail to have a son due to random, biological reasons. The proportion of sonless families is, for instance, 24% when people have an average of two children. Low fertility also means reduced flexibility and parents are less and less ready to have more children in the quest for a son. Low fertility acts therefore as a "squeeze factor", leading parents to make reproductive choices to avoid unwanted female births. In the past, the ultimate

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\(^2\) The framework is borrowed from a model developed by demographer Ansley Coale to describe fertility decline in Europe. See Guilmoto (2009) for a more detailed presentation of this framework.
Gender bias in Kosovo

proportion of parents without a son was negligible since they were ready to have additional children to obtain a boy.\(^3\)

In Western Europe, where fertility is low and access to modern reproductive technologies is easy, the absence of prenatal sex selection stems from the near complete lack of gender bias. In less advanced countries, high fertility or lack of easy access to new technologies precludes prenatal sex selection. Eastern Europe is largely similar to Western Europe with regard to these conditions, except for the presence of staunch son preference in some areas. It is therefore primordial to probe the nature of gender systems in Southeast Europe before envisaging the possibility of prenatal sex selection. We also need to examine the overall context particular to Southeast Europe to understand the regional ramifications of these three conditions. In particular, the region has been affected by severe political and economic crises, including violent conflicts as in Kosovo’s case. This troubled historical situation is often put forward as the explanation for various social and economic dysfunctions. We should note, however, that some other countries in the region, including some that were parts of the former Yugoslavia, went into similar crises after 1990, but without observed sex imbalances at birth.

\(^3\) An average of two pregnancies is required to ensure the birth of a boy.
3 Methodology

This section is devoted to a brief presentation of statistical sources and survey instruments. In addition to the existing documentation on gender and society issues, this report is based on a combination of a demographic analysis of original sources provided by Kosovo’s Statistical Agency ASK and the analysis of the findings of a qualitative survey conducted in 2015 by Index Kosova.

3.1 Statistical sources

Quantitative sources will help us assess the strength of son preference and its impact on the sex ratio at birth. There are three main available sources: birth registration, census data, and other demographic surveys.

3.1.1 Civil registration of births

The registration system is supposed to offer an almost complete picture of births and therefore the most reliable estimates of the sex ratio at birth. These data may be used for disaggregated analysis at the subregional level and among births at various birth orders. However, civil registration may be deficient when affected by incompleteness or registration biases. This is most particularly the case of many post-socialist countries in Eastern Europe where data collection was disrupted by political unrest and changes in the administrative setup. In Kosovo’s case, the Statistical Office did not function adequately for several years after the Serbian takeover of 1990. Figures are often missing or incomplete, especially during the worst years of conflict and political unrest in the late 1990s.

The registration of births was introduced in Kosovo in 1912. For more than eight decades, the country was part of the Yugoslav civil registration system. This system functioned satisfactorily during this period even though it never reached Kosovo in the same level of completeness as it did in other republics. It is also possible that the level of registration varied between male and female births although we have no study to confirm the presence of a systematic bias favoring male births.

During the 1990s, political unrest and the dismissal of most ethnic Albanian servants deeply affected the civil registration system. In 2000, a new system of civil registration appeared and it was computerized in 2012. Most births today are registered at the hospitals and maternities where the vast majority of births take place. A fee is charged in case of late registration at the place of residence of the parents. When births are delivered at home, parents must register them within a month, with two witnesses. Birth forms are often not completely filled in, and some information such as the education level of the parents may be missing.

The level of coverage of the civil registration system is estimated at 80-90%, although this rate varies significantly according to available studies (Wanner and Lerch 2009). Several reasons are given for this mediocre level of registration of births in the recent years: distance to the place of registration, indifference to birth registration, lack of administrative documents required for the registration, etc. It is thought that the coverage rate is lower among the Roma, Ashkali, and Egyptian (RAE) communities and in rural and more disadvantaged areas. In addition, a separate and parallel system of birth registration operates in North Kosovo for the Serb population. As it happens, death registration in

\[\text{ASK colleagues consider that the current level of underregistration is lower in 2015 due to computerization.}\]
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Kosovo is poor in quality. Many deaths do not take place in public health facilities and many deaths are not reported after they happen.

The recent MICS survey of 2013-14 estimated that 23.5% of births taking place during the five years preceding the survey were not registered. However high this rate of underregistration may appear, the survey fails to detect any difference between boys and girls in this respect. This suggests that even if births are significantly underreported in the official birth registration statistics, there should be no significant bias by sex and that the sex ratio at birth computed over registered births is reliable.

The troubled history of birth registration in Kosovo over the last 30 years has several consequences. Since we have no homogenous series since 1980, the format of available data greatly varies according to the decade and three distinct periods emerge (1980s, 1990s and post-1999). During each of these periods, the coverage has been probably different. Underreporting and specific bias may have affected the number and distribution by sex of registered births in ways that are difficult to correct. For the 1990s, the situation was especially tense due to civil unrest and the ensuing war. Some of the data reproduced here are only available in Serbian publications published after 2000 and their coverage remains uncertain. A large number of birth records were destroyed during this period or moved to Serbia. In addition, birth data are entirely missing for the worst years of the conflict and the series resumed only in 2002. Since then, we have consistent figures of births by sex. They can be further disaggregated by municipality and birth order. Disaggregated tables for 2002-2014 used here were compiled by ASK in 2015 for the purpose of this study.

3.1.2 Microdata from the 2011 census

The census of the Republic of Yugoslavia covered in particular Kosovo in 1948, 1953, 1961, 1971, 1981, and 1991. No census was taken in 2001 because of the 1998-99 war. All these censuses had led to the publication of data reflecting the sex composition of the population such as the age and sex distribution of Kosovo. After an unusual 20-year gap due to war and its aftermath, a census was successfully taken in 2011 and finally the complete data on contemporary Kosovo.5 A closer inspection of the age and sex distribution does suggest a high proportion of boys in the population aged less than 10 since 1948. For instance, the 2011 data reflect an unusual excess of boys among the child population.

Thanks to the collaboration of Kosovo’s Statistical Agency (ASK), it was also possible to access some of the raw data collected during the 2011 census operations. Census microdata complement in many ways the limitations of other demographic sources. We will give an overview of the nature of the census data and the way they were put to contribution for the analysis of son preference and sex imbalances at birth in Kosovo.

It had some limitations related to the reliability of certain items and to the fact several localities mostly inhabited by ethnic Serbs in North Kosovo were not censused (ASK ND). Because of the preponderance

5 Its main limitation relates to its failure to cover adequately localities mostly inhabited ethnic Serbs in North Kosovo were not censused (ASK ND). This entails an unavoidable statistical bias along regional and ethnic lines since the results presented here do not portray adequately these municipalities.
Gender bias in Kosovo

of Serbs in the areas missed by the census, there is an unavoidable statistical bias along regional and ethnic lines and the results presented in this study do not adequately portray these municipalities.

The census includes individual and household questionnaires, with the usual variables such as age, sex, migratory status, education, ethnicity, religion, occupation, and housing characteristics. We have information on previous and recent births, but unfortunately no detail on the sex of these births to compute the sex ratio at birth. The house listing also includes details on the family structure, with the relationship of each individual to the head of the household and the family nuclei. These variables are used for the family reconstruction in the procedure described below.

The household schedule covers a variety of information on housing status as well as on household amenities. We generated from these household-level variables a new indicator of socioeconomic status (SES). We did so by combining several variables related to the facilities of the dwelling such as water supply, type of sewage, presence of flush toilets, type of heating, as well as information on phones, computers and access to Internet. These variables are directly correlated to the quality of the housing and ultimately to the socioeconomic status of the household. We conducted a factor analysis based on these different variables. The resulting SES indicator used in our analysis ranks households by socioeconomic status and it provides a classification of households in socioeconomic quintiles, from poorest to richest households.

The reconstruction of family structures requires a more thorough analysis of available individual-level census variables. The procedure followed derives from the so-called "own-children method" developed for estimating fertility levels from census and other survey records. In each household, it is possible to relate children to their mothers and therefore to attribute a rank to all siblings. When the mother or her husband is head of the household, the procedure is straightforward, since children are labeled as "children of the household head". They constitute a separate sibship made of successive brothers and sisters. Yet, more than 60% of children below 15 during the 2011 census were not "children of the household head", but were often classified as "grandchildren" (usually children of a married son) and sometimes as "other relatives" (usually children of a married brother). In such cases, we use the information on the nucleus to reconstruct their own sibship. The resulting set of children classified by age and rank includes 483,000 children below 15 years (about 99% of the original sample of children).

Once these sibship groups were reconstructed, children were ranked by age and previous family composition. We identified in particular children with and without an older brother. The rank of children is almost equivalent to the birth parity and this information can be used for two different computations described below:

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6 The factor analysis method used here is the multiple correspondence analysis. We use the first factor as a synthetic indicator of socioeconomic status. This first factor accounts for 47% of the variance of the original nine variables.

7 When parents cannot be clearly identified from census microdata because they are absent or distant relatives of the head of the household, it is not feasible to reconstruct the family situation of children.

8 The main difference between the census-based child rank and the birth order is that the former incorporates the effect of mortality while the latter corresponds to birth history. Child ranks are based on surviving children and should therefore reflect better reproductive strategies of parents.
1. **Parity progression ratios (PPR):** This indicator measures the probability of having an additional birth by parity. It tends to decline with parity (high-parity children are less likely to have a younger sex imbalances at birth). It is computed with the Kaplan-Meier method to take care of the censoring in 2011.

2. **Sex ratio at birth of children (SRB):** This sex ratio shows whether the sex of children is influenced by rank and by family composition. These two indictors can be further decomposed by region, period, and socioeconomic characteristics of the mother and of the household.

### 3.1.3 Other sources

A few demographic surveys were launched in Kosovo after 2000 and they partly complement the imperfect knowledge on the local demographic and gender behavior during the previous decades. Three surveys in 1999-2000, 2003 and 2009 have followed the template of Demographic and Health Surveys (DHS) conducted elsewhere in the world. Reports of these surveys have been used in this report (UNFPA, Statistical Office of Kosovo and IOM, 2000; UNFPA, 2005; Republic of Kosova, 2009). The exact format of the surveys is different from the DHS rounds and micro-data not available online.

We can add to the list of useful surveys the recent Multiple Indicator Cluster Survey (MICS) conducted in 2013-14. It follows the template of other MICS surveys recently conducted by UNICEF around the world.

These different surveys provide some information on reproductive health and the status of children, ranging from contraceptive behavior to childcare. From a SRB perspective, the major source of concern is, however, the small size of the samples used for these surveys. With only a few hundred births per year, computation of the sex ratio at birth is subject to important fluctuations. Even using data over five years produces estimates that are difficult to interpret. For instance, the confidence interval of a sex ratio at birth of 105 computed over 2,000 births ranges from 96 to 116. It is difficult to conduct a detailed demographic analysis with such a large confidence interval.

### 3.2 2015 surveys

Apart from statistical confirmation, it is crucial to gather direct evidence of son preference and sex selection in Kosovo. Gender bias is a relatively new topic in Kosovo and it has been primarily covered by gender surveys conducted after 1999. It is usually framed within a larger interest for gender equity issues (employment, political mobilization, land rights, reproductive rights, etc.), but with no specific concern for gender bias in reproduction. While limited statistical sources constitute a major obstacle to the analysis of the current situation, there is a dire need for documentary evidence of family systems and gender bias. It was therefore deemed necessary to launch a specific qualitative survey in Kosovo to explore a variety of gender and reproductive issues potentially related to sex selection.

The survey was conducted by Index Kosova in November and December 2015. It includes a quantitative opinion survey on more than 1000 people as well as in-depth qualitative research through individual interviews and group discussions. The survey instruments are described in more detail in the following sections.

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9 This section draws from the report prepared by Index Kosova.
3.2.1 Sample selection

In order to understand general perceptions and extent of existence of gender bias selection, a quantitative research study was designed with a representative sample of Kosovo’s population aged above 15 years.

The opinion of 1,024 people regarding the topic was gathered across the country during November 2015. The sample was drawn using the multi-staged random probability method and its composition is proportional to the profile of the population per region and type of residence. The random-route principle was used for selecting households and next birthday selection-key for choosing respondents. The interviews with the respondents were conducted “face-to-face” using Android tablets for entering answers.

The sample includes Albanians as well as non-Serb minorities living in Albanian communities. Otherwise, the sample was mostly rural (59.4%) and comprised of an almost equal proportion of men and women (52.6% and 47.4% respectively). The quantitative research data are roughly representative of Kosovo’s socioeconomic make-up, except for the absence of the Serbian minority. The detailed sociodemographic composition of the sample is reproduced in the Appendix.

3.2.1 Focus groups and interviews

For in-depth interviews and group discussions, Index Kosova selected four different sites: 1) A larger city, viz. Pristina, where a specific neighborhood was selected, 2) the smaller town of Ferizaj, 3) a village in the municipality of Skenderaj, and 4) another village in the municipality of Malishevë.

In each study site, four focus group discussions (FGDs) were organized, leading to 16 FGDs in the country. They included about 8-10 participants in each group and lasted between 90 and 120 minutes. In view of the heterogeneity of attitudes and experiences across the population, different target groups of various demographic profiles were identified: 1) married men (35 participants), 2) married women (36 participants), 3) unmarried young men (37 participants), and 4) unmarried young women (37 participants).

The respondents were recruited using screening questionnaires for selection in order to meet the specified criteria for target group selection. The FGDs in Skenderaj and Malishevë were held in schools. The FGDs in Pristina took place in Index Kosova’s offices while the discussions in Ferizaj were held in a separate location.

In addition to focus groups, fifteen in-depth interviews were conducted to gather more information on attitudes and behaviors related to gender bias. We selected in particular:

- 3 Gynecologists
- 1 Midwife, 1 Nurse, and 1 Pharmacist
- 4 representatives of religious groups (rural and urban)
- 5 representatives of local civil society organizations.

All the in-depth interviews took place in the office of the informants. They lasted on average one hour. All the FGDs and in-depth interviews were recorded and transcribed. They were then edited for further analysis.
4 The demographic and family context of gender bias

The previous overview of sex selection elsewhere in the world has led us to put forward several dimensions of demographic and social change that are essential for envisaging the possibility of prenatal discrimination. In this chapter, we examine the overall socioeconomic, gender context of Kosovo, and review in particular the most salient features of reproductive health and the family gender system.

The major dimension of social transformation relates to the troubled 1990s and the post-conflict situation in which a new set of national institutions emerged. In the late 1980s, Kosovo witnessed a severe deterioration of both the social fabric and the institutions set in place in the former Yugoslavia. In several countries in Eastern Europe, the main shock occurred around 1991 with the collapse of the socialist regime and a long transitional period, marked at times by civil unrest or international conflict, during which the society had to recover from the brutal introduction of market reforms. This is, for instance, the case of Albania or Azerbaijan, two former communist nations in which prenatal sex selection developed during the 1990s.

Kosovo’s experience is different in this regard, partly due to the less stringent socialist system prevailing in Yugoslavia and to the protracted process of regime change. In addition, Kosovo was clearly the least developed region of Yugoslavia in the early 1990s. The political situation deteriorated gradually with the rise of Serbian nationalism at the end of the 1980s, culminating in the loss of Kosovo’s autonomy in 1989 and the dismissal of thousands of its state employees in 1990. This aggravated the political unrest and led to a near collapse of official state institutions until the end of the 1990s when armed conflict erupted leading to the war of 1998-99. Kosovo is still today recovering from the conflict reshaping its economy. Compared to other countries of Eastern Europe, the emergence of national institutions and the integration into the world market economy followed an extended period of violence and war and took place almost a decade later than in other former socialist countries.

4.1 Demographic transformations

Prior to the 1990s, Kosovo was characterized by the most rapid growth observed in the former Yugoslavia. Kosovo’s population had increased from 700,000 inhabitants after World War II to 1.2 million and 2.0 million in 1991 (estimates). Its growth rate was considerable and it never fell below 2% per year during 1948-1991. The region was by far the fastest growing in Europe, especially compared to the adjacent Yugoslav republics of Macedonia, Serbia, and Montenegro.

This demographic growth corresponds to a post-war period marked by rapid decline in mortality. During the Yugoslav era, death rates recorded a steady decline from levels close to 20 per 1000 around 1950 to 5 per 1000 in 1990.\textsuperscript{10} The fall in infant mortality was even steeper, as it dropped from 150 per 1000 after the war to fewer than 40 per 1000 during the 1990s. The exceptional gain in life expectancy was almost 30 years during these four decades. This rapid reduction of Kosovo’s death rates automatically increased the natural increase (i.e. births minus deaths), which peaked at 3% per year.

\textsuperscript{10} Estimates used here are taken from Islami (2005) and Dushi (2009). Comparative data for other republics are taken from the statistical yearbooks of Yugoslavia and of the current Republic of Serbia. See also ASK (2008a 2008b)
Gender bias in Kosovo

on several years between 1050 and 1975.\textsuperscript{11} During that period, migration contributed little to the overall demographic trends, even if Kosovo’s population lost some of its inhabitants to out-migration to the rest of Yugoslavia or to foreign countries.

4.1.1 Late fertility decline

Apart from mortality decline, this remarkable demographic progression since the 1950s stemmed directly from Kosovo’s stable high birth rate, which reached 42 per 1000 during 1950-1970. It was then more than twice higher than Serbia, and well above the rate observed in other regions of Yugoslavia. The average number of children per woman was the highest in Europe, estimated to be above 5.5 children in the early 1970s. Kosovo’s total fertility rate (TFR) was then already higher than in Asian countries such as China, India, or Indonesia.

The birth rate started to decline gradually during the 1970s, but due to Kosovo’s young age structure, the annual number of births peaked (above 55,000 per year) only during the late 1980s. More of 86% of these births were to ethnic Albanian mothers. The natural increase was 430,000 persons during the 1980s, a quarter of the total population of 1.6 million at time of last Yugoslav census of 1981. The 1970s and the 1980s constitute a major turning point in Kosovo’s demographic history, accompanied notably by rapid socioeconomic development, greater employment opportunities for women, and the emergence of family nuclearization. It was a crucial period for Kosovo’s development and opening, but much of this dynamic was nullified by the subsequent political confrontation with Serbia that forced the population to return to traditional norms and institutions.

While on the decline, fertility rates during the 1980s were still around four children per women and crossed the 3-child mark only during the early 1990s in the midst of the political crisis (see Figure 1 based on alternative World Bank estimates). Part of this decline may have been caused by the harsh social and economic conditions in Kosovo and a brief rebound above three children per woman was clearly observed after 1998 when Kosovo regained autonomy.

Since independence, fertility decline resumed, fueled by changing lifestyles and the continuing economic crisis (Dushi 2011). If fell in few years below 2.5 children and even reached 2.0 after 2005 according to the 2009 demographic survey. Fertility is today probably close to replacement-level. According to the 2013-14 MICS, the TFR was indeed 2.3 children per woman during the three years preceding the survey, and 2.0 children in urban areas. Vital statistics clearly indicate that the number of births has plateaued over the last 15 years at around 32,000 per year.

World Bank estimates of annual TFR values plotted in Figure 1 sets Kosovo’s unique situation in a broader regional perspective. We have added neighboring countries to contrast its fertility trajectory. We first note that in spite of its cultural similarity, Albania’s fertility decline proceeded much faster and was already below Kosovo’s at the fall of the communist regime. This decline took Albania’s TFR to replacement level (2.1 children per woman) in 2002 and it has now reached 1.8 children. But the reduction in fertility levels took place much earlier among Kosovo’s other neighbors such as Serbia, Montenegro and Macedonia where fertility is today among the lowest in Europe.

\textsuperscript{11} An annual increase of 3% corresponds to a doubling of the population in 23 years. It is among the fastest population growth rates ever measured in the world.
Gender bias in Kosovo

We may also contrast the trajectory of fertility in Kosovo with that observed in Bosnia and Herzegovina, a country that has much to share with Kosovo. Not only is Bosnia and Herzegovina predominantly Muslim, but its independence occurred late in the mid-1990s, after a long conflict that left far more dead than Kosovo. Ever since, the country has also remained prey to deep economic problems. But fertility in Bosnia and Herzegovina was already well below two children per woman before the collapse of Yugoslavia, a level twice smaller than Kosovo’s. It hardly recovered after the war in 1996 and the average number of births per woman continued to slip, reaching ultralow fertility levels like those found in Southern Europe (Greece, Italy etc.). These comparisons suggest that Kosovo has inherited from its unique social history a somewhat higher fertility levels than elsewhere in Southeast Europe. Albania, its closest cultural and geographic neighbor, is probably 5 to 10 years ahead in terms of fertility decline.

![Figure 1: Fertility in Southeast Europe, 1990-2013 (World Bank estimates)](image)

Fertility decline in Kosovo has been continuous since the 1970s almost as in Albania. It started a few years after the onset of the decline in Albania and proceeded at a slower pace, which explains the higher fertility observed today in Kosovo. While the decline in Kosovo was probably exacerbated by the political repression during the 1990s, fertility rebounded in 1999. The gap between the two TFR series has remained close to 0.5 children per woman in favor of Kosovo, but it may reduce in the future. This gap between fertility history of Kosovo and Albania is intriguing. Kosovo’s higher birth rates stand in relative contradiction with the early introduction of family planning in Yugoslavia during the 1950s and the complete liberalization of abortion in 1969, compared with Albania’s strongly pronatalist communist regime, which prevented access to abortion and to modern contraception.

The main explanation for this higher fertility is that traditional social structures were better preserved in Kosovo than in Albania, a country where religion was officially banned in 1976 and political dissent severely suppressed. In addition, the demographic rivalry with local Serbs may have further slowed down fertility decline among Kosovo’s Albanians. Be it what it may, the relative delay observed in
fertility decline is not only a reflection on a more traditional family system in Kosovo, but it has also contributed to slowed social development of its female population as highlighted by persistent education and employment differentials between men and women. It also points to the more flexible nature of fertility decisions, allowing a large number of women to opt for third and high order births. In spite of low fertility today, data from ASK over the last decade show that third and later births still account for 30% of all births. This represents a rather high proportion when compared to the rest of Europe or even to Albania where births of parity 3 and higher accounted only for 17% in 2005-2010. In some families, women who are largely unemployed can play the role of a full-time house-maker and devote part of their energy to raising three or more kids in addition to other household duties.

4.1.2 From contraception to ultrasound and abortion

In addition to its relatively belated decline, Kosovo’s fertility history is also different from that of countries in the rest of the world where modern contraception played in a leading role in lowering birth rates. Contraceptive prevalence has long been surprisingly low in Kosovo. According to the latest demographic survey, no more than 15% of married women of childbearing age were currently using modern contraceptive methods in 2009. A third of them relied on IUD, another third on condoms, and the rest on other contraceptives such as the pill. Against this low proportion of women trusting modern contraception, 44% relied instead on traditional methods, namely withdrawal (42%) and rhythm (1%). In 2009, the overall prevalence of contraception was slightly higher in urban areas and among more educated women, but the dependence on traditional methods remained three times more frequent when compared to modern contraception. The latter is shunned because of its purported side effects—a perplexing situation that reflects the lack of adequate information on family planning methods as well as entrenched patriarchal attitudes on reproductive decisions. In fact, men are often responsible for the decision to not use contraceptives. The situation has been changing very slowly in recent years. The comparison with previous demographic surveys indicates that the prevalence of contraception has increased only due to the increase in the practice of the withdrawal method, which is reported by less than 15% of married women aged 15-49 years in 1999. Recent data from the MICS survey also confirm the predominance of withdrawal as the primary method of birth control. It must be noted that almost no woman gave religious reasons for not using contraception, but no fewer than 20% of married women cited health reasons instead.

The preponderance of withdrawal as the most popular method to avoid unwanted pregnancies underlines the singularity of Kosovo’s reproductive regime when modern contraception widely prevails in the rest of Europe. It is a technique that requires a woman to be at the mercy of, and to trust, a man’s abilities and decisions. Besides, withdrawal is also a method of birth control well known for its highest failure rates. It is therefore responsible for a large number of unplanned pregnancies among Kosovar women. While the rejection of modern contraception in Kosovo has resulted in the high fertility observed in the past, it is also at the root of many unwanted pregnancies today. This takes us directly to the issue of abortion, which is the only way to avoid births after the failure of traditional birth control methods.

12 In addition to demographic survey data, the survey by Basha and Hutter (2006) provides a detailed qualitative analysis of attitudes towards birth control and abortion in Kosovo. See also Dushi (2009).

13 Infertility, pregnancy, and desire of additional children were the most common reasons for not using contraception in 2009.
Gender bias in Kosovo

According to surveys, abortion plays a minor role in women’s birth history. This feature of fertility decline in Kosovo stands once again in contradiction with the trends observed in the former Yugoslavia where pregnancy termination was legalized early on, or in Albania where abortion remained banned until the early 1990s. In Albania, abortion became very common when legal restrictions were lifted, and it has been a significant component of the recent fertility decline. In the former Yugoslavia, abortion became officially available for medical and social reasons in 1969 (CICRED 1974) and the applicable law in the Republic of Serbia during the 1990s allowed it during the first ten weeks of pregnancy. Following the 2009 law on the termination of pregnancy, induced abortion remains legal in Kosovo up to 10 weeks after conception. It can be practiced beyond this limit, only after the approval of a medical committee, for health reasons or in relation to crime (rape, incest, etc.). Yet, it is generally admitted that many abortions take place beyond the ten-week period. Similarly, the law does not allow for sex-selective abortions, but this provision is vague and simply impossible to enforce since gender is only one of many considerations—such as age and family status, number and age of previous children, health condition, financial situation, or family circumstances—that may lead to a pregnancy termination. While abortion is common in private health centers, these clinics tend to under-report these abortions in order to avoid taxation and health control. Abortion may in fact be an important source of income.14

Abortion can be performed at a moderate cost (around 50€) in public or private health facilities and the size of Kosovo ensures that clinics are easily available in a nearby town for most of the population. According to my interlocutors, late abortions (beyond ten weeks) are perfectly possible in private clinics if you come "after 5 pm". They may simply be more expensive and registered as “miscarriages”. The use of misoprostol (Cytotec) for inducing abortion is already common in Kosovo (Paçarada et al., 2011). People can buy the drug in Kosovo and some incomplete abortions are indeed referred to hospitals, but there is no confirmation that women use it to induce late sex-selective abortions.

Health infrastructures have already diversified in Kosovo. They offer a large variety of reproductive services, including ultrasound testing and abortion. We may note that several ancient “folk methods” seem to have existed in Kosovo prior to the emergence of modern reproductive technology. Specifically, we were told of methods based on special massages before conception, of specific washing of the vagina after the intercourse, and about calendars. No similar technique exists to ensure the birth of a girl—a telling testimony of the nature of the gender bias.

Ultrasound was first introduced in hospitals during the 1980s, mostly with black & white equipment from Japan. It became more common during the 1990s in private healthcare clinics, which were able to import modern equipment from abroad. An ultrasound examination costs around 10-20 Euros in a clinic. The demographic and health surveys did not include any questions pertaining to ultrasound, but the topic is covered in the surveys sponsored by UNICEF. The 2013-14 MICS survey estimates for instance that antenatal care was almost universal in Kosovo and that it included ultrasound checks in 98% of the cases. Interestingly, even among the most disadvantaged groups such as the Roma, Ashkali, and Egyptian communities, prenatal visits are almost universal and invariably include an ultrasound check (UNICEF 2015).

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14 A former doctor we met in Prishtina reasoned that benefits from abortion might be even a reason why gynecologists fail to promote modern contraception in Kosovo.
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The UNICEF study on antenatal care (UNICEF 2009) shows that almost four out of five pregnant women had four or more prenatal visits during their pregnancy, all of them with a professional gynecologist or obstetrician. A large majority of women visited private healthcare centers rather than public facilities. Private clinics are preferred because they ensure safety and confidentiality. The UNICEF study does not publish the exact figure for the frequency of ultrasound tests, but it has the following comments on their use in Kosovo:

“Ultrasound examination is often done in private institutions and mostly as a means to detect the gender of the embryo”.

“In Mitrovicë, ultrasound examination is made mainly in private institutions with the purpose of determining the gender of the fetus. There are cases when patients get up to eight ultrasound checks, while at the same time the measurement of blood pressure hasn't been performed.”

“Ultrasound examination has become an obsession and every three weeks pregnant women come to attend such examination”. All excerpts from UNICEF (2009)

Repeated ultrasound checks constitute a common occurrence in countries with strong son preference such as Vietnam. Parents want in to confirm the sex of the fetus before making a decision about the pregnancy and this leads them to consult in private institutions where these services are offered. These observations on the use of ultrasound for sex determination echo what previous studies have already pointed out in relation to son preference. We find indeed similar observations in the first UNICEF situation analysis of children and women of 2004, as well as in two studies on gender-based violence published in 2008 (Agency for Gender equity, 2008; UNFPA and KWN, 2008). The 2006 study on pregnancy and family planning also commented: “the introduction of both ultrasound and amniocentesis has given parents the ability to choose the gender of the fetus before it is born.” (Basha and Hutter 2006)

In addition to prenatal diagnosis via ultrasound, a few fertility clinics in Kosovo offer in-vitro fertilization (IVF) and other modern reproductive services. We even found online advertisements for Preimplantation Genetic (PGD), provided in a Prishtina-based branch of an international health company already well established in Western Asia. PGD offers the possibility to select the sex of the embryo before its implantation. It is a rather costly procedure, available only in the most modern clinics, and it is banned for sex-selective purposes almost everywhere in Europe. Yet, further research would be required to understand how far the most recent methods of prenatal sex selection based on PGD or on misoprostol are available in Kosovo. Affluent families do not hesitate to resort to healthcare facilities abroad. Clinics in Tirana and in Skopje are favored due to their easy access and they provide a much larger choice of quality reproductive services than in Kosovo. Belgrade, Istanbul, and Cyprus are other destinations for parents who can afford the best international fertility clinics.

15 We were told on several occasions of Pristina’s gynecologist, AK, famous for his infallible talent at detecting the sex of unborn babies.

16 “There is a growing suspicion that [the over-use of ultrasound] is related to sex selection practices [...]”. (UNICEF 2004a).
4.1.3 Attitudes towards abortion

Induced abortion does not appear very frequent and it was reported by only 8% of ever-pregnant Kosovar women in 2009. This percentage increases to 11% among women aged 40+. The 2013-14 MICS survey reports a slightly higher proportion of 16% among all women aged 40-49 years. More than a third among them had two or more abortions. Disaggregated data from this survey suggests that abortion is more frequent among poor and less educated women, a difference perhaps related to the greater reliance on modern contraception among the urban middle classes. However, the average level in Kosovo remains low in comparison with abortion figures from the rest of Eastern Europe. Serbia, for instance, often recorded in the recent past more induced abortions than births per year. The country was said to reflect a “culture of abortion”, due notably to a relatively easy access to safe abortion coupled with various obstacles and resistance to the use modern contraceptives (Rašević and Sedlecky, 2009).

It is, however, likely that the frequency of induced abortion in Kosovo is underestimated by demographic surveys due to the strongly negative opinions it often generates among the public. In spite of its prevalence, it remains a taboo to many people. The practice is often perceived as a sin and looked down upon for both moral and religious reasons among Muslims and Catholics. As excerpts of the 2015 qualitative survey indicate, many respondents insisted on criticizing all types of abortion, except for health reasons or in cases of rape. Some participants stated that the child should be kept even in case of disabilities.

“Religion prohibits abortion” - Male, 14-25, urban, Prishtina (Group Discussion)

“Financial conditions do not justify abortion, since abortion is the same as committing a crime” - Male, 25+, rural, Malishevë (Group Discussion)

“We cannot accept abortion for any reason, except when the doctor determines that the mother’s health condition is in danger” - Male, 25+, rural, Malishevë (Group Discussion)

“Abortion is not an option, even if the child does not grow normally, because it is God’s will” - Male, 15-25, rural, Skenderaj (Group Discussion)

A closer look at the responses given during the survey suggests that people distinguish between two different types of situations to evaluate the justification for abortion. In the first case, unmarried women become pregnant and they find themselves unable to marry the father of their child. In the other case, married women living with their husbands simply want to avoid a birth. In the latter situation, when there is a father who accepts the child and if there is no specific health reasons, abortion is seen chiefly as a ‘sin’ or nonsense. FGD participants consider that the main reason leading to an unwanted pregnancy pertains to young single women, a situation more common in urban areas than in villages. Abortion is linked to unstable relationships as well as financial difficulties in supporting the newborn.

“Younger women practice abortion more often because they get pregnant when they are still not engaged nor married” - Female, 25+, rural, Malishevë (Group Discussions)

There are no official estimates of the annual number of abortions in Kosovo.
Gender bias in Kosovo

"Women hurry in their relations because they do not discuss in advance with their mothers."  
**Female, 25+, rural, Malishevë (Group Discussions)**

"When there are no good economic conditions then they abort the child. **Female, 25+, rural, Malishevë (Group Discussions)**

Abortions are condoned more often in such cases. Obviously, the lack of proper family environment—which comes down to the absence of a father for the child—is seen as a serious impediment, but the unfavorable consequences for the prospective mother and the child to be born are also envisaged. For unmarried women, abortion is seen as a lesser evil.

“A girl in our faculty interrupted her pregnancy because she did not want to interrupt her studies. In this case, I would have probably acted the same way”. **Female, 14-25, rural, Malishevë (Group Discussion)**

“They point out that abortion should be acceptable when women do not feel ready to become mothers and when they do not have favorable circumstances to raise the child”—**NGO, urban, Prishtina (In-depth interview)**

“Taking into account that family planning is not prohibited by law, cases [of abortion] can be excluded and considered as the best solution to overcome the [potential consequences of the] birth of the child”—**Hodja, urban, Ferizaj (In-depth interview)**

Pregnancy outside marriage is seen culturally as a grave obstacle to a happy life, but abortion is probably more suitable than abandoning a child after birth.

"It is better for women to have an abortion at the beginning rather than abandon the child [later]." **Female, 25+, rural, Malishevë (Group Discussion)**

“I would have an abortion because [otherwise] after that I would return to look for the child, it would be difficult even for the family who adopted him or her and has taken care for the child until adulthood” - **Female, 14-25, urban, Ferizaj (Group Discussion)**

Opinions remain ambiguous when it comes to pregnancy terminations among married women. Abortion as a mere method of family planning is sharply criticized, but this does not mean that the practice is unheard of. Apart from young women, FGD participants usually categorically oppose abortion at the age group of 25-30 and consider that reasons such as the mother’s carrier or readiness are not acceptable. However, participants also mention that abortion does occur among older married women already with a large number of children (or without previous male birth). According to some, abortion within marriage is more common than publicly admitted.

“Older women are the ones who seek abortion more because they do not want more children”- **Gynecologist, urban, public sector, Ferizaj (In-depth interview)**

"Some women have abortions because they get pregnant in old age and thus feel ashamed in front of the society. -**Female, 25+, rural, Malishevë (Group Discussions)**

Some participants have also shared their experience of abortion.
Gender bias in Kosovo

“I have four children and it happened that I became pregnant again. I aborted because I did not have the capabilities to raise another child” - Female, 25+, Malishevë (Group Discussion)

"I accepted that I have done two abortions, but people in general do not accept that because it is considered a sin". NGO, urban, Prishtina (In-depth interview)

Some participants do not hesitate to take a more benevolent or positive attitude towards abortion. According to some gynecologists, an adult woman should have the right to decide on her own. Respondents belonging to NGOs tend to believe that access to legal abortion is firstly a matter of human rights.

“...Abortion is always acceptable if done in the right time and that it is allowed even in medical terms. The right to abortion is also an international convention"- NGO, urban, Prishtina (In-depth interview)

The same respondent adds his interpretation of the rejection of abortion as an element of the patriarchal system.

“Abortion is viewed as a sin and as something that the women will never be forgiven for. This is due to patriarchy because pregnancies are pushing women to become dependent on others, whether by her husband, partner, or their parents-in-law. [This is] somehow [...] a way for controlling women"- NGO, urban, Prishtina (In-depth interview)

4.2 Gender and the family

Kosovo has long been in a mixed situation. On the one hand, Kosovo was part of Yugoslavia for half a century where the pace of economic and social development was extremely rapid until the late 1970s. Even if the gap between Kosovo and other republics of the former Yugoslavia never really narrowed down, regional progress was considerable in terms of social transformations and economic growth. It affected in particular access to employment, education, modern housing, and health. The socialist nature of the government and the self-management philosophy in Tito’s Yugoslavia ensured a relatively fair redistribution of new resources, including towards backward regions like Kosovo. On the other hand, the impact of the socialist policies was more superficial than in neighboring Albania. Kosovo managed to preserve some of the local traditions that Enver Hoxha’s regime strived to eradicate. The singularity of its demographic trajectory—with persisting high fertility and mortality differentials—is largely a testimony to the resilience of Kosovo’s social organizations.

In today’s Kosovo, we tend to focus our interest more on the pace of social change since 1999 and on the fluidity of new individual or economic arrangements than on the traditional value system. Recent phenomena such as mass migration, political protest, or the emergence of nuclear families are difficult to understand without fully grasping the pace of transformations over the last fifteen years. When it comes to the gender order, things tend to change at a much slower pace. Even if we do not want to picture Kosovo’s society during the Yugoslav period as frozen and unchanging, we need to examine more carefully norms inherited from the past than the largely Europeanized value system emerging today in urban areas and among the better off. Two interrelated dimensions are essential to exploring of sex imbalances at birth: the strength of family ties and the resulting gender bias.
Gender bias in Kosovo

The common story in Eastern Europe during the socialist period was one of guaranteed employment, free education, subsidized housing, social security, and pension benefits, which offered security for individuals and households. This system offered a substitute to traditional arrangements based on kinship and other forms of solidarity. In fact, many primary functions of the family and of the local community were superseded by the State, which became the chief provider of jobs, housing, care, security, or health services. The former Yugoslav welfare system, up until 1991, shared many of these features, but many of its institutions did not survive the independence of Kosovo. For instance, the pension system established in the former Yugoslavia disintegrated during the 1990s and the present setup is far less comprehensive.

The influence of the social and economic transformations associated with the socialist system elsewhere in Yugoslavia was probably less complete in Kosovo for reasons linked to both ethnic discrimination against ethnic Albanians in the region and the resilience of traditional organizations. Another departure from the East-European experience is that there was no brutal change from a controlled to a market-oriented economy. The former Yugoslavia already partly integrated into the capitalist system in the late 1980s and the dismantlement of the socialist regime did not happen overnight in 1991 as elsewhere in Eastern Europe. The capacity of Kosovar society to self-organize during the 1990s illustrates the strength of local institutions built both on old solidarity networks and on nationalist revival (Clark 2000).

4.2.1 The strength of the family institution

Besides fertility levels, another useful testimony of the evolution of the family system in Kosovo is the average size of households, a reliable proxy for estimating the size of the family. In 1999, the first demographic survey estimated the average household size at 5.6 persons in Kosovo, with a slightly higher value in rural areas (6.3 persons). Kosovo’s households included an average 6.4 persons in 1948, which shows that the situation had hardly changed in spite of the decline of average fertility. A sizable percentage of households (7.7% in Kosovo and 13.4% in rural areas) had ten or more members in 1999. Nuclear families per se (i.e. parents residing with their children) and smaller families (one-member or unrelated households) accounted for less than 40% of all households. Family structures were quite unlike those observed in other parts of the former Yugoslavia where nuclear families had become the dominant form. In Kosovo, the presence of older dependents in the household is common and so are families that include several married couples (married parents and children, or married brothers).

The latest census results do not show any significant change since the first post-war survey since the average household size is even bigger at 5.8 persons per household. Typical nuclear families account for less than a quarter of the total. It may be observed that Serbian households in Kosovo are typically smaller, but still larger than are households in Serbia proper. We may also note the smaller household size of Albania: it had already diminished to 4.7 persons per household in 1989 at the end of the communist system and went further down to 3.9 persons in 2011. This is another illustration of the resilience of the Albanian family system in Kosovo. 18 Political and economic instability and weak government institutions explain the perpetuation of these traditional household arrangements with high fertility seen as an additional factor (Kaser 2008).

18 Figures given here are from respective censuses and surveys. For a larger perspective on household in Southeast Europe, see Kaser (2012) and Halpern et al. (1996).
We cannot adequately summarize here the large body of literature on the conceptualization of the Balkan family systems and especially on Albanian families. A major reason for this difficulty is the tension between the classical anthropological view of somewhat permanent kinship structures and a more contemporary perspective highlighting the fluidity and plurality of family-building processes in modern Kosovo. It is often difficult to disentangle aspects of the family systems that constitute a direct cultural legacy from historical Kosovo from features clearly shaped by unfolding political and economic transformations since the end of the Yugoslav era (Luci 2005). The most important aspect is the transition from the traditional patriarchal male identity to post-conflict masculinity when new myths have emerged around the male contribution to nation building.

Yet, the patriarchal nature of family arrangements in the Balkans has long been recognized (Denich 1974). More recently, Gruber and Szołtysek (2015) devised a "patriarchal index" for historical Europe and the highest value among the 91 regions under study was precisely observed in the locality closest to current-day Kosovo (viz. in Puka, North Albania). Researchers working on Kosovo in particular are fortunate enough to have at least two high-quality ethnographical studies conducted from the 1970s to the early 1990s. The studies by Backer (2003) and Reineck (1991) provided an irreplaceable account of family life in two rural communities and they can be used as a detailed analysis of the workings of the Kosovar kinship system. Rural households in Kosovo are usually understood as corporate units. Houses and estates coincide and one given household tend to share land, assets, and buildings. All male household members belong to the same agnatic group with a common ancestor (or fis in Albanian). The management of the household resources is collective and not individual, and organized along a strict principle of hierarchy based on seniority and gender. The head of the family is supposed to take economic decisions on the distribution of labor and income and on the family’s social engagements such as marriage or residence. Backer lists the rules governing household management, from which we can extract the following principles:

- Patrilineal descent and patrilocal residence, with women moving to their husbands’ households after marriage and children automatically belonging to the father’s family (in spite of the preservation of "milk relations" with the wife’s family)
- Inheritance reserved to male children, with daughters excluded from any claim to their parents’ assets.
- Exogamic marriage (outside the father’s and mother’s lineages and preferably outside the locality)
- Strict gender division of labor and social spheres

Marriage compensation systems (dowry, trousseau, etc.) tend to vary significantly across Kosovo’s micro-regions or clans. Similarly, female labor participation differs across localities, with various cases of women working in fields or almost secluded at home. Unique to the Albanian context is the fact that many of these customary rules are epitomized by the Kanun, a relatively stable set of traditional laws inherited from the past. The Kanun principles are used to arbitrate in a large number of cases of conflicts and dispute (Joireman 2014). They offer a potential substitute to the legal system introduced since the incorporation of Kosovo in the Kingdom of Yugoslavia.

19 Their work had been updated by the team based in Graz, which revisited the localities originally by Backer and Reineck studied during the last five years. See in particular Krasniqi (2014), Latifi (2014) and Leutloff-Grandits (2012).
Gender bias in Kosovo

While kinship principles seem paramount to understand these family structures, it should not be forgotten that the corporate unit is implemented only through strict adherence to patrilineal power relations. Along with seniority, the gender hierarchy is central to the maintenance of the large family. The regular resort to violence within the household (notably gender-based violence) or between members of a community (illustrated in particular by blood feuds) is a clear reminder of the ways the family and gender order can be implemented in case of transgression. Incidentally, some of the first instances of sex-selective abortions reported from field studies in Kosovo after 1999 were related to domestic violence, with women subject to violence for not having sons.

4.2.2 Women in family and society

Usual indicators used for assessing gender equity place Kosovo in a relatively mediocre position. While this situation may be related to its overall low level of socioeconomic development compared in Eastern Europe or more specifically in Southeast Europe, some dimensions bring to the fore the relative marginality of women in the past and contemporary Kosovar society. In particular, there are vast disparities in educational attainment in favor of men (ASK 2013). Above the age of 20 years, women vastly predominate among Kosovo’s illiterate and population with primary level of education. However, the analysis of mortality trends (see further below) shows that women have gradually caught up to men, who enjoyed in the past a higher level of life expectancy, but maternal mortality rates remain the highest in Europe. Several other indicators, such as the incidence of domestic violence and of trafficking—affecting mostly women—are unduly high in comparison with neighboring countries (UNICEF 2004b; UNFPA and KWN 2008).

Of special relevance is the unique position of women in the labor market (D4D 2015). Even with the high level of unemployment plaguing Kosovo, female participation rates appear extremely low at 12% (vs. 34% for men). They also are seriously under-represented among business and political leaders. Unlike East-European countries, where male workers were hit especially hard by the collapse of state firms and were less active in migration, the transition to the post-Yugoslavia regime in Kosovo has not turned the tables on gender disparities. Employment has not improved for women, including for the younger generations, and migration opportunities abroad have so far mostly benefited Kosovar men (ESI, 2006; UNDP, 2014).

While women are legally granted equality with men, as per the Constitution and in line with rights inscribed in the CEDAW, they tend to be excluded from access to land and other assets. For instance, women are estimated to own only 15% of property in Kosovo. This inequity in property mainly stems from their exclusion to the family inheritance (KGSC 2011b). While the law on inheritance makes no distinction between men and women, women often forfeit their right to family assets in favor of their brothers or other male kin. They choose to do so in order to preserve their relationship with their married brothers since the claim by a daughter of her share of the family’s property tends often leads to the severing of ties with her native family. This practice is a direct legacy of the Kanun customary

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20 Two recent reports on the gender situation in Kosovo can be used for a recent analysis World Bank 2012; Färnsveden et al. 2014). See also Haug (2015) and KGSG (2011a).
21 The government launched a campaign in 2015 to encourage joint registration by husband and wife of family property. Its impact appears modest so far.
22 Our emphasis on “blood relationship” corresponding to patrilineal links should not conceal the persisting importance of “milk relationships” in Kosovo connecting in particular brothers and sisters after marriage.
Gender bias in Kosovo

law that stipulates that sons are the only heirs to family property and that land traditionally belongs to the patrilineage (fis). This typical form of discrimination survived several decades of Yugoslav rule.

Women’s employment and inheritance situations place them in an extremely vulnerable position in society and in their own families, since very few of them have independent assets or sources of income. A woman’s bargaining position after marriage is especially fragile due to the absence of a full-time job and registered property. A large proportion of marriage also remains unregistered for several years, weakening their positions in case of legal disputes.23 Unsurprisingly, the risk of poverty is at his highest among older women when they live on their own (Jerliu et al., 2012).

More than it is related to their economic position, gender valuation in Kosovo is intimately related to the position of women in the gendered power structure embodied in the “traditional” kinship system governing household formation and organization.24 Their positions in the family are both transient and marginal. Their positions are transient because they are bound to leave their native family during marriage and it is marginal because they then join a patrilineal group as the only outsider (barring other daughters-in-law). Female virginity and avoidance of divorce are two additional aspects of the marriage system (Fejza, 2013). It is only after fulfilling their patriarchal duty by giving birth to a son that women fully join the patrilineal family, but they are still barred from full rights to family property (either their parents’ or their husband’s). After the war in 1998-99, cases abounded of widows deprived of any right to their husband’s property after his death.

The relationship between fertility and patriarchal structures in the Albanian sphere is strong (Lerch, 2013), but there is no systematic assessment of the diversity of anthropological structures for Kosovo. Nevertheless, we can use census data for a general overview. We observe that up to age 35 years, a majority of the married population in Kosovo is classified either as children of the household head or as children-in-law. More than 70% of married men below the age of 30 are for classified as children of the head. Among men, it is only above age 40 that a majority of them become heads of their household (or spouse of the head in a few cases). This shows the great prevalence of intergenerational cohabitation.25 Interestingly, this proportion of co-residing married sons is hardly smaller in urban areas than in rural areas (68% vs. 71%). Lower levels of co-residence around 55% are observed only among Serbs and in the RAE communities.

We can also examine more specifically the prevalence of patrilocal residential arrangements, i.e. co-residence in the husband’s family. If we use census data, we can compute the distribution by sex of the “currently married children” counted in 2011. When children may co-reside indifferently with the parents of the husband or of the wife—in so-called bilateral kinship systems typical of Western Europe or of Southeast Asia, the population of married children co-residing with their parents comprises an equal number of men and women. However, this is far from the case in Kosovo—which has a staunch patrilineal system. The 2011 census shows that 95% of “children of the household head” residing with their parents after marriage are, indeed, men. This is a proportion higher than previously computed

23 “Marriage” in many villages corresponds to the common residence of a couple following the wedding, with no necessary religious or administrative sanction. The union is only registered usually after the birth of children.
24 We write “traditional” to underscore the relatively stylized nature of our depiction of a kinship system based on ethnographical studies of villages.
25 These figures are, themselves, underestimates of the true frequency of intergenerational cohabitation since many such apparent nuclear households—when a married man below 50 is head of the household—include widowed parents.
Gender bias in Kosovo

for countries such as Albania, Georgia, or Vietnam. Further analysis of patrilocality does not reveal any major differences between urban and rural areas, or across ethnicities and municipalities. In other words, when children co-reside with their parents, they invariably join the husband’s family. In fact, staying with the parents of one’s wife after marriage may be a source of serious social embarrassment to most Kosovar men.

Census data also confirm that unlike most men, women change households after marriage and find themselves in their father-in-law’s house. While women do in fact contribute as much as men to the well-being of their household, providing in a large array of unpaid care services, their contribution does not benefit their parents and native family. Even if siblings maintained long-term relations in Kosovo, the only expected support and protection are from brother to sister. Therefore, women are perceived as of little help to their native family and a “detachable” part of kinship (Joireman 2013). In contrast, men tend to co-reside with their parents after marriage, to work with them (and with their brothers) on the land or in the family business, and they are expected to take care of them in old age. Co-residence works as a form of insurance against economic or health shocks and it provides long-term support to every family member in case of threat from neighbors, illness, unemployment, lack of housing, lack of pension, or overall political crisis. In fact, sons act as substitutes to insurance and welfare provisions found in Western Europe such social security, subsidized housing, open labor recruitment, financial markets, policing, pension systems, unemployment benefits, and fair justice.

4.3 Conclusion

In this chapter, we have identified the main preconditions of prenatal sex selection. The first factor (and an obvious one) is the recent fertility decline observed in Kosovo over the last three decades. With an average of two children per women, more than a quarter of parents today are not likely to have a son for mere biological reasons. The second precondition of sex selection is the access to sex selection technology. This precondition is met in Kosovo, where abortion has been legal for more than 30 years. In addition, local clinics offer ultrasound services at very reasonable rates so that parents can know the sex of their child prior to its birth and may opt for a sex-selective abortion in some cases. The third factor is the preference for sons. Kosovo belongs to a cultural region where gender bias has persisted, even when it has almost disappeared in neighboring countries of Southeast Europe.

We should also emphasize that beyond the family, men have also long been in demand for protection purposes in a region where land rights and status had, at times, to be implemented by force. The recent war, from which a cohort of male heroes has emerged, has somehow revived this new form of masculinity and given son preference a new nationalist flavor (Munn, 2008; Luci, 2005).

The next chapters will examine, more systematically than the last, the strength of gender bias in Kosovo and will examine whether or not it has influenced the sex ratio at birth.

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26 There are of course patrilocal variants in which women join after marriage the household of the grandfather, the widowed mother, or the elder brother of their spouse.
5 An assessment of gender bias

We start this review of son preference in Kosovo with findings from the 2015 qualitative survey, based on group discussions and in-depth interviews.\textsuperscript{27} We then examine the quantitative evidence, focusing on mortality and on reproductive behavior, in order to provide measurements of its intensity.

5.1 Expressing gender preference

Many people in Kosovo see son preference as a permanent feature of the Albanian mindset that requires no further explanation. The opinion survey conducted in 2015 shows that 47% of the respondents express that a family requires a son, even if a large majority also agrees that ‘it is fine if all the children in the family are females’. This seems to beg the questions about the imperative need for sons, which soon emerges from more in-depth discussions.

Son preference emerges from the discussions and interviews as an instinctive attitude, unique to Albanians, going even beyond religious precepts.

‘[…] we Albanians have it in our genes to give priority to men more compared to women.’ \textit{Gynecologist, public sector, urban, Prishtina (In-depth interview)}

"The male gender is more privileged and it comes from our primitive beliefs that the man is the head of the house"– \textit{Hoxha, rural, Malishevë (In-depth interview)}

“We Albanians give more privileges to boys”. \textit{Hoxha, urban, Prishtina (In-depth interview)}

“The desire is [to have] children from both sexes. But to the Albanians, it is definitely important to have a son.” \textit{Hoxha, urban, Prishtina (In-depth interview)}

The justifications given for this bias typically echo the various roles assigned to sons in a traditional family setting. One basic difference refers to the family trajectory of daughters who leave their family after marriage.

“A boy is hereditary of the family, whereas a girl is a foreigner in the family where she was born”– \textit{Male, 15-25, rural, Malishevë (Group Discussion)}

“According to Islam, all should be equal, but the man should have the main role”– \textit{Imam, urban, Ferizaj (In-depth interview)}

“The mentality is such that we are happy when we have boys in the family. Boys are the right wing of the house considering that after a while, the girl will go to another house.” – \textit{NGO, urban, Prishtina (In-depth interview)}

Arguments can also be more pragmatic and related to a son’s future role as head of the family, his economic contribution, and the responsibility linked to inheritance.

“In our society, boys are preferred because, in the past, the wealth of a family [depended on] the boys of the family, because the more boys in the family the easier work was getting done”– \textit{Male, 15-25, urban, Prishtina (Group Discussion)}

\textsuperscript{27} Findings on son preference from the 2015 opinion survey are found in the appendix.
Gender bias in Kosovo

“Parents favor male children in order to gain some income from him. [...] if it is a boy, there are expectations from him and this happens in urban and rural areas” - Male, 25+, urban, Ferizaj (Group Discussion)

“The father is seen as the head of the house and has a leading role. Normally the woman is the female head of the house and takes care of the work for the growth and education of the children, but the main burden and responsibility always belongs to the male or father. [...] In general, boys are more privileged in families. As for inheritance, only males get it”. Gynecologist, public sector, urban, Prishtina (In-depth interview)

The encouragement for having sons is often relayed by grandparents and other family members, as well as by neighbors. The older generation plays in crucial role in inculcating gender norms and stereotypes.

“Often grandparents take their grandchildren to visit neighbors, in which case they favor boys” — Male, 14-25, rural, Skenderaj (Group Discussion)

“Grandparents discriminate too. [...] usually speaking, the difference observed [between children goes] in favor of boys”. Gynecologist, public sector, urban, Prishtina (In-depth interview)

As for grandparents, [having a son] is more important. I think it comes as a result of the desire to perpetuate the family name”. Pharmacist, private sector, urban, Prishtina (in-depth interview)

The implementation of norms favoring boys works in particular through family festivals. Birth, circumcisions, and weddings, festivals that are at the center of village life, offer the opportunity to display and celebrate sons. In the case of weddings, the groom’s family tends to rejoice because their household gets bigger and stronger. Participants to FGDs also emphasize the importance of celebrations after a male birth, especially in families that had previously only daughters.

“The last celebration I attended was when my relative had a son after 4 girls and he organized a big party in a hotel with 300 guests” — Male, 25+ urban, Prishtina (Group Discussion)

“When a baby boy is born, here in Kosovo, they pull out a rifle." NGO, urban, Prishtina (In-depth interview)

The preference for male children can be expressed in many ways, including before birth, and it may be related to expected benefits later in life:

“ If [it is] known in advance that the child will be a boy, then he will have greater care [...] because we like more men than women” — Imam, urban, Ferizaj (In-depth interview)

“Differences between children are being made. Normally this should be unacceptable. Children can be distinguished in terms of clothing, food [...]”. Gynecologist, public sector, urban, Prishtina (In-depth interview)
Gender bias in Kosovo

"They favor boys in general. They give special attention to them. [...] If a man wants to get [better] education, [a son] will have the full support of the family, while [daughters] do not."

Hoxha, urban, Prishtina (In-depth interview)

Yet, many respondents in the FGDs consider that gender stereotypes tend to weaken in cities, especially in Prishtina. Among some families, gender may even be less important than simply having children.

"In some cases they do not even know the sex before birth. Having children is very important. So reproduction is very important. Gender of the child does not matter. Usually, it is good for a family to have both sexes, but that is not too important."

Pharmacist, private sector, urban, Prishtina (In-depth interview)

“...something has changed in this respect in recent the years. Because of the level of education of the parents, there is an increase of awareness that women and men should be treated equally. Earlier, there were more cases when girls left school and were getting married immediately after puberty. I do not hear about such cases anymore.”

Imam, urban, Ferizaj (In-depth interview)

While we have emphasized the persistence of son preference, there are also distinct signs of a gradual shift towards greater gender equity in Kosovar society. In fact, transition periods are primarily characterized by a growing diversification of attitudes and behavior. We can therefore expect the coexistence of a relatively "traditional value" system, centered on the extended family, with more "modern" forms of social arrangements where couples and individuals prevail. This sociological diversity should also be reflected in the plurality of demographic behaviors observed in contemporary Kosovo.

5.2 Excess mortality of girls

A common manifestation of son preference corresponds to post-birth discrimination expressed, for instance, in selective infanticide or higher mortality rates. Mechanisms behind excess mortality include bias in food allocation or care given to girls vis-à-vis boys and are often difficult to pinpoint for lack of adequate data. Compared to these indicators, mortality is, in fact, the best measurement of the presence of gender bias because it represents the resulting outcome of the various forms of discrimination directed towards female children.

A study conducted by Courbage, published in French in 1991, examines sex differentials in mortality between 1950-90. It focuses on Muslims in Yugoslavia and therefore covers Kosovo as well as other parts of Yugoslavia such as Bosnia and Herzegovina and Macedonia. Therefore, populations concerned include Albanians, but also Bosniaks, Turks, Roms, Serbs, etc. The analysis starts with the high sex ratio observed among Albanians according to the census, a fact that may partly be caused by female underenumeration. However, it also uses the sex ratio mortality rates, computed here as female rates/male rates. This ratio should be lower than 100 due to the longevity advantage of females over males and their lower mortality rates. The analysis confirms that this ratio computed on infant
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mortality is lower than 90% for most populations of the former Yugoslavia for the period 1955-1990, but it further shows that Kosovar population stands out with a sex ratio of mortality above 100, reaching 110 for the years prior to 1975. The sex ratio of mortality is also higher among Albanian population for child and adult mortality. While enumeration errors might explain a lower sex ratio in Kosovo’s population (female underenumeration during the census), there is no reason to impute higher female mortality to the inverse phenomenon (underregistration of male deaths). The author therefore concludes that excess mortality has long been present in Kosovo, even if it declined among adults from the 1970s onwards, and attributes it to some “Mediterranean culture” characterizing Kosovo.

Puschman (2008) has recently updated the results with new data and has shown that the situation has progressively changed over time. The mortality sex ratio has improved and has become significantly favorable to women who enjoyed longer life expectancy by 7 years at the beginning of the 1990s. He attributes this turnaround to the decline of patriarchal institutions, emphasizing, in particular, the gradual disappearance of the Zadruga in the second half of the twentieth century.

In Figure 2, we have assembled the series of infant mortality rates by sex over 1950-1997 based on estimates from the Statistical Office of the Republic of Serbia (Републички завод за статистику). The data are smoothed over three years for better legibility. The data confirms that infant mortality was distinctly higher for female newborns during the three decades after WW2. It is only around 1985 that female infant mortality drops below male mortality. The gap gradually widens and by the end of the Yugoslav period, female mortality is 25% lower than male mortality, a gap in line with sex differentials observed in Europe. These figures are difficult to interpret at face value, because of the potential underregistration of births and deaths common in the past in Kosovo. Moreover, the improvement seen during the 1990s refers to a troubled period and its impact on birth and death registration is again difficult to assess. It may be safe to assume that the overall proportion of Serbian births increased during this period due to partial boycott or exclusion of the Albanian population.

![Figure 2: Infant mortality rates by sex in Kosovo, 1950-1998 (civil registration figures)](image-url)
These female mortality rates and high sex ratios among births and the child population concur to produce a picture of severe gender discrimination against girls in Kosovo during the Yugoslav era. However, statistics gathered in Kosovo since 2002 depict a rather different picture. Not only is life expectancy distinctly higher for women, but infant mortality does not show any clear sign of imbalance. When we compute infant mortality rates by sex over the last ten years (2005-2014) from published birth registration figures (Table 2), we get an average level of 10.1 and 9.4 per 1000 for males and females respectively. The female rate is indeed below the male by about 9%. We may observe that the gap between female and male infant mortality is narrower than elsewhere in Europe—where it is closer to 20%—and that in 2002 and 2010, female rates were higher than male rates. Yet, the overall picture is one of significantly higher male mortality below 1 as well among children.

<table>
<thead>
<tr>
<th>Year</th>
<th>Infant deaths</th>
<th>Infant mortality rate</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Male</td>
<td>Female</td>
<td>Male</td>
</tr>
<tr>
<td>2005</td>
<td>155</td>
<td>202</td>
<td>8.2</td>
</tr>
<tr>
<td>2006</td>
<td>236</td>
<td>174</td>
<td>13.6</td>
</tr>
<tr>
<td>2007</td>
<td>196</td>
<td>170</td>
<td>12.7</td>
</tr>
<tr>
<td>2008</td>
<td>192</td>
<td>143</td>
<td>11.1</td>
</tr>
<tr>
<td>2009</td>
<td>156</td>
<td>132</td>
<td>9.0</td>
</tr>
<tr>
<td>2010</td>
<td>139</td>
<td>135</td>
<td>8.0</td>
</tr>
<tr>
<td>2011</td>
<td>183</td>
<td>154</td>
<td>10.6</td>
</tr>
<tr>
<td>2012</td>
<td>178</td>
<td>137</td>
<td>10.0</td>
</tr>
<tr>
<td>2013</td>
<td>160</td>
<td>120</td>
<td>10.7</td>
</tr>
<tr>
<td>2014</td>
<td>120</td>
<td>92</td>
<td>7.3</td>
</tr>
<tr>
<td>2005-2014</td>
<td>1715</td>
<td>1459</td>
<td>10.1</td>
</tr>
</tbody>
</table>

Note: these are uncorrected estimates of infant mortality based on published figures.

Table 2: Infant deaths and mortality rates by sex in Kosovo, 2005-2014

These measurements are confirmed by survey-based estimates of mortality below 5. The recent MICS survey of 2013-14 fails to highlight any suspicious sex differentials: male and female infant mortality rates are 13 and 10 per 1000 births respectively and male mortality rates are also higher among children 1-4 than female rates. Therefore, excess mortality among female children appears to have disappeared in Kosovo.

5.3 Gender preference expressed in fertility behavior

Son preference is typically challenging to compute. One reason for this situation is the lack of proper indicators. Comparative studies use the ideal sex composition of the family as recorded in demographic surveys (Fuse, 2010). DHS-like surveys in Kosovo have published some data of that kind, in which we can detect traces of son preference. The 1999-2000 survey first indicated that the sex ratio of desired additional children in Kosovo was seriously skewed towards boys, with 30% more in favor of male births. The 2003 survey confirmed that women in Kosovo showed a clear preference for boys rather than for girls. The ideal number of boys, according to survey respondents, was clearly above that of girls (1.7 boys vs. 1.4 girls). Interestingly, the gap between the ideal number of sons and daughters was almost similar in rural and urban areas, but decreased among women with college and university
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educations. The preference for sons also emerges from qualitative surveys on gender relations in Kosovo. For instance, Mimoza Dushi in her 2009 study provides some of the reasons behind son preference.

These measures, however, are based on statements given by respondents rather than observed bias. In fact, people often claim to desire daughters and sons equally as the 2015 opinion survey suggests (see Appendix), but this may reflect their actual behavior. For instance, many parents will stop childbearing when they have a son. With the 2011 census data, we can identify the latest births occurring at least five years before the census and consider them the last births of the family. The sex ratio of these last-born is as high as 134 boys per 100 girls. The ratio reaches 175 if we extend the duration without further birth to 10 years. This confirms that most parents interrupt childbearing only after a male birth. We may compare this value with the sex ratio of last births computed by Bongaarts for a selection of countries (Bongaarts, 2013). The highest value of the sex ratio of last births is slightly below Kosovo’s level and it is recorded in Armenia—another country from Eastern Europe with a well-entrenched son preference. In other countries, the sex ratio of the last birth is distinctly lower. However, the sex ratio of the last birth may also be related to the average fertility level.

There is a more precise method to look at gender bias in fertility behavior. It is based on the reconstructed family structure derived from the 2011 census, consisting of all child records ranked by parity and previous sex composition of the family. With such data, we can examine whether or not reproductive decisions in Kosovo are affected by gender considerations, such as the absence of a son in the family. We examine here the intensity of fertility; measured as the probability for a couple of having another child. This corresponds to what is called the parity progression ratio (PPR) in demography. For example, it measures the progression from parity 2 to parity 3 as the percentage of women with two children who will have a third child within the next 10 years. Using the Kaplan-Meier technique, we estimate this probability on births that took place during the period 2000-2011.

These PPRs are computed at different parity levels. Progression ratios decline with parity, especially from parity 1 to higher parities. Progression ratios are intimately linked to overall fertility. The focus is here rather on the specific role of the sex composition of the family on subsequent reproductive decisions. We use these measures as an indicator of the “revealed sex preference” of parents in Kosovo.

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28 Surprisingly, the module of fertility preference was deleted from the 2009 demographic survey, and therefore we do not have any recent data on this issue.

29 More exactly, 64% of parents (175/275) stop childbearing after the birth of male child.
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Figure 3: Probability of having another child (PPR) after the birth of the first child in 2000-2011

Figure 3 shows the progression from first to second birth over the ten years that follow the first birth. Most parents will indeed progress to parity 2, and the proportion having a second child is above 90% after 10 years. This figure also underlines the slight difference between parents of a boy and those of a girl (parents without boys shown in blue in these figures). The final progression rate is higher for parents of a girl (95% vs. 91%). Albeit modest, the gap in favor of sonless parents is statistically significant.\(^\text{30}\)

The next estimates (Figure 4) correspond to the progression ratio from second to third births. Ratios are lower than the previous progression ratio because many parents today hesitate to have a third child. However, what is striking in the figure is the variation according to the previous gender composition. 60% of parents who have already had a boy, among their first two children, will have another child within ten years, but this proportion rises to 90% among parents of two girls. This probability is 50% higher than for parents who already have a son, and is, in fact, similar to the progression ratio at parity 1.\(^\text{31}\)

\(^{30}\) We use the Log-Rank procedure to test the statistical significance of gaps in fertility progression.

\(^{31}\) We could also say that 40% of parents will not have a third child if they already have a boy, but that this proportion is reduced to 10% in the absence of a male child.
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Figure 4: Probability of having another child (PPR) after the birth of the second child in 2000-2011

The next series of graphs (Figure 5) tells a similar story about parents with or without a son at higher parity levels. They correspond to progression ratios that are significantly lower after three and four births. If a family already has a boy, the progression ratios decrease rapidly to 37% and 27% at parities 3 and 4. Most parents will not have any more children. However, among those who failed to have a boy, fertility progression remains very strong and close to 80% at both parties, and the gap in progression ratios between parents without and with a boy increases regularly, from 30% at parity 2 to 46% at parity 3 and 52% at parity 4. As birth order increases, an increasing proportion of parents having another child seems to be exclusively motivated by gender considerations.

Figure 5: Probability of having another child (PPR) after the birth of the third and fourth child in 2000-2011

We see from these different estimates that a vast majority of parents that would otherwise have no more children will continue childbearing because they have only girls. It should be noted that no such symmetrical attitude is visible among parents who have only boys. For instance, there is no variation at parity 3 in subsequent fertility between parents with three sons and those with two sons and a daughter. Both groups have an identical progression ratio of 26% and the absence of a daughter among children apparently makes no difference in subsequent fertility behavior. This demonstrates that the
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reproductive strategy of Kosovar parents is not about sex balancing (having children of different sexes), but primarily about the need for sons. While daughters may certainly be loved, they are obviously not desired and actively sought in the way sons are.

5.3.1 Variations in son preference

We can apply the same method to compare subpopulations within Kosovo to see whether or not we detect variations in gender bias. Once again, we use parity progression and contrast the reproductive behavior of families with and without sons. The computation is jointly done on all parities above 1 since it is for birth order above 1 that we can detect the largest differences, according to the presence of an older son in the family.

In Kosovo, the progression ratio at parity 2+ increases from 43% to 86% in the absence of a male child. This corresponds to a doubling of fertility risk that can be attributed entirely to son preference. Do we observe the same increase across all sections of the populations in the country? Our results indicate that this higher fertility among families without son is indeed true of all groups in Kosovo. For instance, the increase is twofold across all districts and in rural as well as urban areas. However, this bias appears to be systematic in the country. The increase in fertility progression without a male offspring may appear more pronounced in some categories of the population, but this is naturally the case of populations with low progression ratios. We need to compute the odds ratio (fertility with son vs. fertility with son) to assess comparatively the intensity of gender bias in fertility behavior, which is 8.4 for the country as a whole. In the absence of bias in fertility behavior, the odds ratio (OR) would be one.

This analysis shows that there are some characteristics associated with lower risk of fertility progression in the absence of a son. For instance, the odds ratio is slightly lower in urban areas than it is in rural areas (7 vs. 10) and among the richer families (7.5 for the two richest quintiles). The same trends are visible with education, and in families in which at least one woman has post-secondary education there is a lower OR of 5.7. We also identified a lower bias in households headed by a woman (OR=5.9) and in those with employed women (OR=6.4).

There are also variations across social groups. Serbs and the Orthodox, which have significantly lower fertility rates overall than other Kosovars, display the lowest gender bias in fertility. The odds ratio computed for both of these two mostly overlapping groups is only 2.5—the lowest values observed in our sample. The smaller Bosnian, Turkish, and Gorani communities have also lower odds ratios (4.1, 5.7, and 4.6 respectively), whereas the majority Albanian population has a high OR of 9 and Roma and Ashkali communities even higher values—above 12. These differences suggest that cultural identity is at least as important to gender preference as socioeconomic differentials. Yet, the comparison highlights that no subpopulation appears immune to some level of gender bias.

5.3.2 Son preference before 1999

Our analysis so far has focused on the period following the 1999 conflict, since we rely on 2011 census data that may not be valid beyond 10 years. However, thanks to the first post-conflict demographic

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32 In populations with high fertility rates, such as the least educated families, the progression ratio is above 50% with a son. Therefore, it cannot double in the absence of son, since it always remains 100%.
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survey\textsuperscript{33}, we can also examine the situation prevailing during the 1990s. The 1999-2000 survey was carried out in 7,300 households and it covered the entire country, including Serb-majority areas. While the sample is limited to 8,500 births in 1990-99, it can be used for the same analysis of fertility behavior as conducted previously. We use the birth history data for the ten years preceding the survey to probe the presence of a gender bias in Kosovo.

The analysis of fertility progression is summarized in Figure 6. The similarity of the results for the 1990s with figures computed from census data for 2001-2011 is salient. We first observe a very high parity progression from the first to the second birth. Yet, the progression is already somewhat higher for mother of a girl (89% vs. 84%). Even if narrow, the gap between the two curves is statistically significant and demonstrates that second births are more frequent after the first birth of girl.

\begin{figure}[h]
\centering
\includegraphics[width=\textwidth]{figure6.png}
\caption{Probability of having another child (PPR) in 1990-1999, computed from the 1999 demographic and health survey.}
\end{figure}

The gap in fertility progression between mothers with or without boy widens considerably at higher parities. It is of 26% from second to third child and 33% for higher progression ratios. This confirms that fertility decisions during the 1990s were already dictated by gender considerations, especially after the birth of two girls in a row. Therefore, son preference is not a new feature of Kosovo’s reproductive behavior. It must have emerged as soon as the diffusion of contraception and abortion allowed couples to stop childbearing according the number and sex of their already born children.

\textsuperscript{33} See UNFPA, Statistical Office of Kosovo and IOM (2000). I thank Christophe Bergouignan for sending a copy of the birth history file used in this analysis.
The 1999 survey allows us also to test the difference across ethnic groups. We will focus here on the Serbs—who constitute the largest minority, but were seriously underenumerated by the 2011 census. The comparison of fertility progression with or without previous male birth—limited here to births of parities 2 and higher—indicates that while Serbian fertility was much lower than that of the rest of population during the 1990s, the positive impact of the absence of a previous boy on subsequent fertility was as pronounced among Serbs as it was among other ethnicities.\(^{34}\) In contrast, the 2011 census suggests a weaker son preference among Serbs compared to Albanians.

### 5.4 Summary

The measurement of fertility progression confirms that the birth of a son is crucial for a large number of Kosovo inhabitants and gives evidence of the strength of this prejudice. This directly echoes the statements collected during the qualitative survey, but the analysis of fertility behavior shows how the need for a son is actually implemented in reproductive behavior. Gender is, of course, not the only factor behind reproductive decisions, but the objective of having at least one son emerges as guiding principles after the birth of the first two children. Very few couples will hesitate to have another child unless they have already given birth to a son. The comparison of 2011 census and 1999 survey data further demonstrates that this strong son preference is not a new feature of Kosovo’s fertility behavior.

The overall influence of this gender bias and need for a son may not be considerable on the overall fertility level, since fertility is above replacement level and a large proportion of couples will have sons after three births. As long as average fertility was well above two children per woman, only few parents were directly affected by the lack of male offspring. Indeed, the probability of having three girls in a row is less than 12%. However, when fertility diminishes to two, the probability of remaining sonless further reduces to 24% of couples and the perceived cost of an additional birth in today’s Kosovo is much larger than it was in the past. This creates conflict for parents who want both to ensure a male birth and to avoid additional children.

It also needs to be underlined at this point that this type of gender bias in fertility behavior has no impact on the overall sex ratio at birth. Without deliberate sex selection, the sex ratio of all births at all parities remains purely random. Now that new reproductive technologies may now provide couples another method to fine-tune their fertility to their gendered needs, the sex ratio at birth may, however, be affected by gender bias. The next chapter explores in more detail the resulting sex imbalances at birth.

\(^{34}\) The comparison across ethnicities is performed with odds ratios of fertility progression with or without previous male births.
6 Sex imbalances at birth

The relative reluctance to discuss abortion matters is a frequent source of difficulty in reviewing the reality of prenatal sex selection in any country. To start with, abortions are rarely properly estimated, and Kosovo has no reliable abortion statistics. Even with reliable statistics, there is no way to assess the (relatively small) proportion of pregnancy terminations due to gender considerations.

Therefore, it is not surprising that no consensus exists on the reality of prenatal sex selection in Kosovo. A few of the personalities we met during our visit doubted that prenatal sex selection ever existed in Kosovo. For instance, a high-level policy maker in charge of gender issues did not believe such abortions could take place at all and blamed nature for the apparent high sex ratio at birth. The director of one of the country’s largest public health facilities also asserted that women had no way to know the sex of their child with certainty before 16 weeks of pregnancy and "did not like to believe" that fellow medical practitioners could indulge in sex-selective abortions. In contrast, another doctor told us of her internship during the 1990s, and stated that sex-selective abortions were extremely common in a large hospital where she worked. She narrated the story of a woman refusing to participate actively in her delivery, simply because she knew she was giving birth to a girl. A gynecologist confided to us that the first question after an ultrasound was always about the sex of the fetus—rather than about its health—and the accompanying mother-in-law (vjetra) was especially interested in this information. According to this gynecologist, half of the women wishing for a boy would request an abortion upon learning that they were expecting a baby girl. Sex selection is obviously a contentious issue in Kosovo, clouded in the secrecy of women’s lives and is a potential source of intimate shame or public embarrassment.

The absence of clear consensus and the serious limitations of data on abortions themselves have lead demographers to focus on the sex ratio at birth—the resulting outcome of gender bias. In addition, we need direct evidence gathered from field-based surveys. In this section, we will present findings from studies published since 1999, as well as excerpts from the qualitative survey conducted by Index Kosova in late 2015, before examining the statistical evidence on birth masculinity in Kosovo.

6.1 Mentions of sex-selective abortions

Several quantitative and demographic surveys were conducted in Kosovo during the post-conflict period. None of them was initiated in order to probe the presence of sex selection in the country, but mentions of sex-selective abortions surfaced somewhat spontaneously from these surveys. The first observation was merely statistical and appeared in the 1999-2000 demographic survey (UNFPA et al., 2000). The team reported a suspiciously high sex ratio at birth, interpreted as a potential sign of sex-selective abortions. The next round in 2003-2005 reiterated this hypothesis (UNFPA 2005). It was reformulated by the 2009 UNICEF study on prenatal care (UNICEF, 2009), linking sex selection in particular with the frequency of ultrasounds to confirm the sex of the fetus.

The qualitative study on reproductive behavior, conducted in 2006, devoted, for the first time, a brief section to sex selection in Kosovo, describing the situation as seen by women or by health practitioners. The report describes instances of prenatal sex selection in Kosovo.

“[…] after the second female child, members of the family usually start worrying whether they will have a son/grandson or nephew. There is pressure for a woman to deliver a boy. Given that she cannot make this happen on her own volition, she might be pushed to select the
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gender of the child by aborting female fetuses until she is pregnant with a boy. [...] In most cases women are obliged to have an abortion if there is family pressure to have a boy”. Basha and Hutter (2006)

Gynecologists, who are especially aware of the pressure exerted on married women to beget sons, confirm the situation.

Gynecologists claim that the number of women who select the gender of the child is declining but admit that the practice exists and it is not rare. [...] According to gynecologists, it is common that a woman has an abortion secretly, knowing that her husband will not allow another female child—which might risk the woman’s marriage and family.

In 2008, the study on GBV provided further illustrations of gender-biased sex selection as told by Kosovar women. Here are a few quotations from the report:

“[I had an abortion] because it was noticed that I would give birth, again, to a female. “

“[I have] hematomas, swelling, and stress because I always think that it would be easier for me if I would have a son. [...] I had an abortion] because of the bad economic situation and the fear that I could give birth to a fourth daughter.”

“The client has lost self-esteem. She has been accused always because she didn’t give [birth to] a son”. UNFPA and KWN (2008)

As the second quote makes it clear, gender considerations are always coupled with other factors, such as the couple’s material circumstances or the number of previous daughters. The study directly associated gender violence with the lack of male progeny and stated that women could be pressured to undergo ultrasound in order to ensure the birth of sons. The same year, the report for the Agency for Gender Equality (2008) summarized the situation by saying that “social and family pressures to have male children have impacted some women’s decisions to abort female fetuses”. In the absence of male progeny, newly born girls may receive specific first names in the hope of influencing the sex of the next child.

The 2015 survey conducted for this study has found new evidence of prenatal sex selection. As the excerpts quoted earlier show, the reluctance to bring up the issue of abortion and to acknowledge its presence is very strong, and this affects the discussion of sex-selective abortions in Kosovo’s society. In fact, the survey asked a sample of Kosovars for their opinions on using ultrasound to determine the sex of children in advance. Only 45% of them agreed that this is a useful method of prenatal diagnosis, with a slightly higher proportion among the rural population (49%). However, when asked whether ultrasonography may be appropriate to select the sex of one’s child, the approval dips further to 23%, with 60% of respondents expressing their opposition. We find even a lower percentage of persons (18%) agreeing that abortion is a way to control the number and sex of one’s future children against 64% who oppose this view.

The public opposition to sex-selective abortions appears widespread in Kosovo, with no noticeable difference across genders, age groups, or residence (see Appendix). However, this does not mean that sex selection does not exist in Kosovo. This is hardly surprising in view of the strength of son preference described elsewhere in this report. When probed, participants often acknowledged in the course of
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the discussion the possibility that some abortions may be dictated by the need for a boy and that this may happen in “remote rural areas”, i.e. where old patriarchal traditions still hold sway. Some FGD participants mentioned instances of sex selection in the recent past, the reason being ultimate need for a boy in the family. Selective abortions emerge as a rational answer in case of repeated births of girls.

" Couples who have more boys do not allow abortion even if they expect another male birth, but [when they] have more girls, then they will abort if the next pregnancy is a girl"- Female, 25+, urban, Ferizaj (Group Discussion)

The same reasoning appears from different FGDs conducted in 2015. The absence of male progeny leads people to interrupt pregnancies of girls even when they otherwise profess a strong dislike of sex-selective abortions. We should note that, apart from gender, the size of the family is a major consideration and that having four daughters in a row is thus considered highly undesirable:

“ If the gender of the 4th or 5th child is revealed to be female and the previous children were also female, then abortion will happen for certain” – Female, 25+, rural, Malishevë (Group Discussion)

"On the other hand, ultrasound is very bad because at the time that the mother reveals the gender of the child, they may decide to have an abortion, for example, if they have three daughters, [and] she is pregnant with another girl "- Female, 15-25, urban, Ferizaj (Group Discussion)

Abortion is obviously one natural solution to the gender predicament of many Kosovar families who fail to have a son. In fact, abortion emerges as the only solution to unwanted pregnancies and the sex of the child may simply be one of the determinants of the decision to continue or not. The demographic analysis will now outline the exact impact on birth outcomes of son preference.

6.2  Skewed sex ratios at birth

The previous sections, based only on qualitative evidence, suggest the presence of prenatal gender bias. However, we still do not know the intensity of the practice. The only way to tackle this issue is to look at birth outcomes in order to examine the distribution of births by sex. We will start with older data first, and then we will examine the current data in detail in the next section.

By collating data from the Yugoslav and the most recent period, we get a long-term perspective on birth masculinity in Kosovo. First, when we examine the raw number of births registered per year (displayed in Figure 7), we observe the distinct trend reversal during the late 1980s. This series covers the entire period with the exception of the years 1999-2001 for which no estimate is available. From World War 2 onward, the number of births had regularly increased in Kosovo, surpassing 55,000 births per year in 1984. After a brief plateau period, the number of births started declining after 1990. This rapid decline has taken the annual number of births after 2005 to a level comparable to that measured in the late 1940s when the total population of Kosovo was only a fraction of what it is today.
The sex ratio at birth, based on these figures, is displayed in Figure 8. We have indicated the annual figures, but it can be seen that there are important fluctuations from year to year. For instance, the SRB estimate peaked to 113.1 in 1981 (vs. 110.5 during the adjoining years). Recently, the SRB jumped to 112.2 in 2010, while it was only 108.9 in 2009 and 2011. Similarly, a few years, such as 1985 and 2002, are characterized by unusually low SRB values below 108. Therefore, we added a smoothed curve, computed on moving averages, to the annual figures.

This figure leads to several observations. First, the SRB in Kosovo has not been below 106 male births per 100 female births since 1947. Second, it has oscillated between 106.5 and 113.1 during these decades, with a few significant annual deviations in the trend that cannot be attributed to random factors. Third, the SRB level averaged over three successive years, as showed in the figure, was usually above 108 male births per 100 female births—a level clearly above the standard 105 figure. Finally, we notice that since the early 1980s, the sex ratio at birth is closer to 110 during most periods. A slight decline is discernible after 1990 from 111 to 109 in 2005, but the SRB rebounded during the last five years.

A statistical analysis of SRB variations indicates that the lowest and highest estimates are significantly different from levels observed during the adjacent years. Therefore, they cannot be attributed only to random SRB fluctuations due to the number of annual births.
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years and is now above 111. This level is only slightly higher than corresponding data from Albania and Montenegro for the recent period.

We have only limited alternative sources for estimation birth masculinity in Kosovo. While there have been demographic surveys since 2000, the sample is usually constituted of a few thousands births and therefore too small to provide robust estimates. We may observe that survey-based estimates tend to agree with our figures of skewed SRB well above 105. For instance, the latest demographic survey conducted by UNICEF in 2014 put the sex ratio at birth at 110 during the period preceding the survey (UNICEF, 2014). The sex ratio of children below 5 was 112 in 2003, but as high as 116 in 2009, according to the different rounds of Kosovo DHS.

Census data can be better quality sources, since they cover the entire population residing in the country. We can use the population enumerated in 2011 to estimate the births before the census. Figures are corrected for mortality by sex, since survival rates tend to be higher for female children. We have computed the survival by sex by using a combination of the WHO life tables for Albania and Moldova and used it to correct the sex ratio by age group derived from the 2011 census figures. This computation is only possible up to age 15, beyond which migration and other factors may also affect the distribution by sex. Census-based estimates shed also light on the 1999-2001 years for which we do not have birth registration figures.

![Birth registration vs. Census corrected SRB](chart.png)

**Figure 9: Sex ratio at birth in Kosovo according to 2011 census and birth registration, 1995-2013**

Figure 9 compares the sex ratio at birth according to these two sources (census and civil registration). These estimates appear similar and coincide with the four years preceding the census. The average SRB level is close to 109.5 during this period according both sources. For the period before 2007, birth masculinity, according to census-based estimates, is slightly lower, averaging for instance at 108 during 2002-2006 against 109 according to the registered births. The gap between both sources widens to 2 per 100 during the earlier period. Since both sources are presumed to exhaustive, it is difficult to understand the cause of the bias. This may be due to the underregistration of female births or a level of mortality among male children stronger than assumed here. Yet, a closer examination of the size of the birth cohorts—which are smaller among children above 10, according to the census, suggests that
the gap may rather be related to a significant underenumeration of boys above 10 during the census, which would artificially lower down the estimated sex ratio at birth of the corresponding birth cohorts.

What may also be observed is that year-to-year fluctuations in SRB levels are rather similar, according to both birth registration and census figures. Peaks and troughs in the two series tend to match, as can be observed in 1996 or 2004 (troughs) and in 2003 and 2007 (peaks). This suggests that these annual fluctuations are not random artifacts. Yet, we still have no explanation for these annual oscillations—such as the jump in birth masculinity observed in 2003 and the ensuing fall in 2004.

6.3 Birth masculinity in Kosovo since 2002

We can use birth registration data to examine variations by locality and birth order. Yet, there are important statistical limitations due to the small size of Kosovo. The total number of births in the country oscillates around 32,000 per year and it is therefore difficult to disaggregate data since subsamples may be too small. For instance, we find, on average, 800 first births every year in the Ferizaj municipality and the number of births of higher parity is even smaller (230 annual births of parity 4 and higher). On such samples, the sex ratio at birth tends to fluctuate randomly. In Ferizaj, the sex ratio of first births in 2014 was, for instance, 105.8 male births per 100 female births. However, the 95% confidence interval for the 803 first births recorded in this locality in 2014 is wide-ranging from 92 to 122 male births per 100 female births. It is therefore not possible to interpret such a figure. This suggests that births have to be aggregated in order to constitute samples amenable to statistical interpretation.

6.3.1 Regional variations in birth masculinity in Kosovo

The first variation in birth masculinity that can be observed within a country often refers to rural and urban variations. Cities are often characterized by better health infrastructure and lower fertility—two features that may exacerbate the pressure for prenatal sex selection, while the influence of traditional patriarchy may be in contrast stronger in rural areas. Since we have no rural/urban classification of birth registration data, we can use census data to probe the presence of differentials between towns and villages. Interestingly enough, the sex ratio at birth, of the population born after 2009, proved identical in rural and urban areas of Kosovo in 2011. A further analysis by size of the localities (from small hamlets to larger cities) also fails to highlight any significant difference in the sex ratio. This demonstrates that birth masculinity is not a matter of cities, towns, and villages.

Does the lack of rural-urban differentials mean that the sex ratio at birth is equally skewed across Kosovo’s regions? Regional SRB differentials are considerable in large countries, such as India or China, but it is not clear whether this hold true in a smaller territory, such as Kosovo, where birth masculinity is otherwise identical in urban areas and in the countryside. Birth registration figures can be computed for all municipalities, but we have removed municipalities with fewer than 1000 births in 2002-2014. The 25 remaining units have then been ranked by average SRB, starting from 105 in Obiliq to 114 in Rahovec along with the total for Kosovo (110 in 2002-2014). The average SRB figures over the 13 years of observation are plotted in Figure 10. We have also added the confidence interval computed from the total number of births. For instance, the figure shows that the confidence interval ranges from 99.9 to 112.2 in Obiliq where the average SRB was 105.4. This means that this value is almost identical to

36 I thank my colleagues at ASK for the preparation of the tabulations used here.
the normal 105, but is not statistically different from the average SRB in Kosovo, which was 109.7. Confidence intervals are narrower in larger demographic units such as Prizren and Prishtina.

Figure 10: Sex ratio at birth in Kosovo by municipality with 95% confidence intervals, 2002-2014 (civil registration figures)

The average level of birth masculinity in 2002-2014 was clearly above normal in Kosovo, but data demonstrates that most municipalities also recorded SRB values that are significantly above 105. Only very few municipalities display birth masculinity levels undistinguishable from 105: Obiliq, Shtime, Viti, Pejë, and Kamenicë. The map in Figure 11 indicates that these municipalities are scattered almost everywhere in the country. Yet we notice municipalities with the highest average level of birth masculinity tend to be found in the Southwestern part of the country, especially around the town of Rahovec. The use of confidence interval estimates confirms that municipalities with the highest SRB levels (shown to the right in our Figure) such as Prizren, Rahovec, or Suharekë reach values above 112 male births per 100 female births that are statistically higher from that of about half of the municipalities (shown to the left in the Figure).
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**Figure 11**: Sex ratio at birth in Kosovo by municipality, 2002-2014 (civil registration figures)

The overall regional demarcation is not very clear, with no unique concentration of high sex ratio. In order to overcome the limitations related to the small demographic of most of these municipalities, we have reclassified data by districts (*rayone* or *okruzi*). The seven districts represent larger population units for statistical processing. The total number of births ranges from 38,000 (Gjilan) to 114,000 (Prishtina) in 2002-2014. Table 3 and the map on Figure 12 show the results of our computations.

District-level SRB figures appear less scattered. They range from 107.9 in Ferizaj to 112 in Gjakova. Thanks to larger birth numbers, all these SRB values are now statistically different from 105. In other words, sex imbalances at birth in 2002-2014 are significantly skewed in all parts of Kosovo. In addition, the adjacent districts of Prizren and Gjakova stand out with the highest level of sex ratio at birth (close to 112). In these two districts, the SRB is confidence intervals are above the national value of 109.7. Elsewhere, the SRB might be low, but not statistically different from the average level of the country.

<table>
<thead>
<tr>
<th>District</th>
<th>Births</th>
<th>Sex ratio at birth</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ferizaj</td>
<td>46,464</td>
<td>109.7</td>
</tr>
<tr>
<td>Gjakova</td>
<td>47,949</td>
<td>110.1</td>
</tr>
<tr>
<td>Gjilan</td>
<td>38,914</td>
<td>109.1</td>
</tr>
<tr>
<td>Mitrovicë</td>
<td>51,580</td>
<td>109.5</td>
</tr>
<tr>
<td>Pejë</td>
<td>40,519</td>
<td>108.5</td>
</tr>
<tr>
<td>Prishtina</td>
<td>113,991</td>
<td>108.8</td>
</tr>
<tr>
<td>Prizren</td>
<td>86,107</td>
<td>111.7</td>
</tr>
<tr>
<td>Total</td>
<td>425,990</td>
<td>109.7</td>
</tr>
</tbody>
</table>

Table 4 also provides SRB estimates by parity. As the data indicate, the high level of SRB is closely associated with the level observed among the later births, ranked 4 or higher. This means that the SRB
is high, mostly because of the extreme values observed among higher-parity births. For instance, in the high-SRB districts of Prizren and Gjakova, the sex ratio at birth among birth of parity 4 or higher is also high, reaching 122 male births per 100 female births. Such a level corresponds to an apparent deficit of 16% of all female births. When examined at municipality level, the sex ratio of fourth and later births reaches the record level of 130 in Prizren, Rahovec and Suharekë.

Figure 12: Sex ratio at birth in Kosovo by district, 2002-2014 (civil registration figures)

Sex ratios for births of parities 1, 2 and 3 are in comparison less scattered across districts and they oscillate between 106 and 113. Prizren and Gjakova districts tend, however, to record the highest levels in the country.

6.3.2 Demographic and other social variations in birth masculinity in Kosovo

The annual SRB by birth order is reproduced in Figure 13. It is based on birth registration statistics. At the outset, we may observe that all these SRB values are above 105. But the figure also underlines the difference between low and high parities. Among births of parity 1-3, the sex ratio is almost similar at all parities. It oscillates around 108 until 2008 and records a slight increase during recent years, reaching levels above 110 in 2013 and 2014. In contrast, the sex ratio of the highest parity group (4+) is distinctly higher than for lower-order births. It oscillates around 112 during a first period and it increases after 2006 to level close to 120.

Important year-to-year variations can also be observed. They can be partly explained by the smaller number of births used for the computation by parity level.
The average levels for these four parity groups during 2002-2014 are respectively 108.6, 109.3, 109.4, and 115.4 (see also Table 3). The first three birth orders are characterized by sex ratios almost indistinguishable from the average sex ratio during this period (109.7).

The SRB of higher order births reaches 115. This rather high level corresponds to a 10% surplus of male births. The difference with first, second, and third births is rather pronounced. As Table 3 already showed, the level of birth masculinity is even higher in some areas of Kosovo. The Prizren and Gjakova districts registered values close to 122 male births per 100 female births at parity 4+. At the municipality level, the three highest SRB around 130 at parity 4+ are found in Prizren, Rahovec, and Suharekë. While the numbers of registered births in these individual localities may be small in statistical terms, there is no missing the fact that the highest values are precisely observed in three adjacent localities. This obviously constitutes the hot spot of high birth masculinity in the country and this cluster also coincides with municipalities with the lowest Human Development Index according to the latest UNDP report (UNDP 2014).

However, the analysis of birth masculinity leads to a more qualified assessment of the role played by high-order births. First, it needs to be pointed out that birth masculinity among parities 1-3 are already skewed. In many countries in the world, the sex ratio of first and second is often normal, but may reach astronomical levels for higher-parity births (such as 170 in Armenia among third births). The situation appears different in Kosovo, since the sex ratio of first births is already moderately skewed (108.8 in 2002-2014), and the sex ratio at birth for later births is less skewed than expected. In addition, we should remember that high-order births represent only a minority of all births registered in Kosovo. Their proportion is fast coming down due to the continuous process of fertility decline observed in the country. The proportion of births of parity 4+ was 16% of all births in 2002, but it further declined to
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9% in 2011. As a result, the effective contribution of these births to the overall sex imbalances at birth is less important than imagined. We can compute the number of missing female births as the gap between observed and expected female births, assuming an expected natural SRB of 105. The contribution of higher-order births amounted to 32% missing female births in 2002, but this share has regularly decreased over the years and reached 17% in 2014. In other words, the sex ratio of high-parity births may be quite high, but the overall proportion of women with a fourth or higher-order is rapidly diminishing and the impact of this prenatal discrimination at this parity level is rather low. Sex imbalances at birth among first, second, and third births represent the majority of the female births who disappear in Kosovo, accounting for 88% of the total deficit of female births in 2002-2014.

We can confirm this finding on sex ratio by parity by examining census. The sex ratio at birth according to the census was respectively 107.6, 107.8, 107.9, and 112.0 for parities 1, 2, 3, and 4 (see Table 4). Here again, we find sex ratios at birth that are significantly above 105 for all parities and a substantial increase in SRB that is visible only at birth order 4 or higher.

If we look for comparison, Kosovo’s SRB by parity appears closer to the situation observed in Albania, where birth masculinity in 2000-2010 is already close to 110 for first and second births and jumps to 121 for parities 3 and higher (UNPFA, 2012b). We observe a strong similarity since the first and second births are already characterized by high masculinity in Albania. The only difference is that compared to Albania, the sex ratio at birth in Kosovo does not increase at parity 3, but at parity 4. However, this difference can be explained by the higher fertility found in Kosovo since Albania’s fertility had already crossed the replacement level by 2003.

Census estimates allow us to go further in our demographic analysis. The family reconstruction procedure, based on census data, gives us all detail on the family composition and especially on the older surviving siblings of all children. We can therefore compute the sex ratio of children according to their rank and the sex of their older siblings. Table 4 presents the result of this analysis. On each row, we see the sex ratio of births of a given rank (parity) according to the number of older brothers in the family.

<table>
<thead>
<tr>
<th>Child rank</th>
<th>Number of previous older brothers</th>
<th>None</th>
<th>One</th>
<th>Two</th>
<th>Three or more</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>107.6</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>107.6</td>
</tr>
<tr>
<td>2</td>
<td>107.6</td>
<td>108.0</td>
<td></td>
<td></td>
<td></td>
<td>107.8</td>
</tr>
<tr>
<td>3</td>
<td>109.4</td>
<td>108.2</td>
<td>104.8</td>
<td></td>
<td></td>
<td>107.9</td>
</tr>
<tr>
<td>4</td>
<td>126.1</td>
<td>110.0</td>
<td>106.7</td>
<td>106.0</td>
<td></td>
<td>112.0</td>
</tr>
<tr>
<td>Total</td>
<td>109.0</td>
<td>108.5</td>
<td>105.7</td>
<td>106.0</td>
<td></td>
<td>109.0</td>
</tr>
</tbody>
</table>

Table 4: Sex ratio at birth in Kosovo by child rank and gender composition computed from 2011 census data, 2000-2011

This table shows that the absence of an older male sibling has no impact on second births. The sex ratio of children is almost identical and distinctly above 105 with or without older brother. However, among third births, children born in families without son or with only one son (respectively 109.4 and
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108.2) have already an SRB level slightly higher than after the birth of two sons (104.8). The situation becomes even more salient among four births: in the absence of a previous son, the sex ratio rises to the record level of 126.1. It decreases to 110 when there is already one male child in the family and reaches 106.7 and 106 when there are already two or more boys. The last row demonstrates that the sex ratio does not exceed 106 among children having already two or more brothers, and it can therefore be considered normal. However, in families with only one or no older son, the sex ratio is higher.

The pattern of sex ratio by gender composition of the family in Kosovo is, once again, similar to that observed in other countries. The lesson from this analysis is twofold. On the one hand, it shows that the absence of a male sibling has an impact on the sex of the subsequent child, especially at parity 3 or higher. The largest sex imbalances at birth correspond to younger children born after a succession of female births. This demonstrates that the need for a male child affects the sex of the subsequent births and that imbalances at birth in Kosovo are related to the absence of a male sibling. On the other hand, the sex ratio remains biased even in families who already have a son and the sex ratio comes down to a more normal level only after the birth of two or more boys. As in families with only sons, there is no bias against boys in subsequent fertility and the sex ratio is indeed never below 105.

6.3.3 Other socioeconomic correlates

Using census indirect estimates, we fail to observe any statistically discernible difference among households headed by a woman or in extended families (defined as households with more than one couple). We have found only few significant correlates of high or low SRB within the country using other individual sociocultural characteristics. There is, for example, no difference between Serbs and Albanians or between Muslims and Orthodox when we use the ethnic, linguistic, or religious variables provided by the census. The only variations we were able to detect refer to smaller minority populations. This is for instance the case of the population, which is neither Muslim nor Orthodox: its sex ratio is 103, well below the level observed among Orthodox and Muslims. This population comprises a large majority of Catholics, who are traditionally against abortion, and this could explain why their sex ratio is closer to a normal level. Using mother tongue statistics, we also found that the sex ratio of children among linguistic minorities speaking Turkish, Bosnian, or Romani is close to normal level. These isolated cases demonstrate that sex ratio levels can be normal among small sections of the population.

We also examined the impact of education on sex imbalances at birth. To do this, we use three indicators: the education levels of the household head, the highest education level in the household, and the highest female education level in the household. The most pronounced variation relates to the highest education level of family members: if we consider, for instance, children born after the birth of two or more girls (i.e. with no previous male birth), the corresponding sex ratio rises from 100 among the less educated (primary or below) to 117 in families with at least one member who completed upper secondary level. It reaches even 125 when one woman in the household had reached the tertiary level, but the sample of births is admittedly limited (n=2,769). This suggests that education is here positively correlated with sex selection in the case of successive female births.

The trend linking sex ratio at birth with education can be further illustrated by considering socioeconomic status. With the help of the socioeconomic variable we created, we can divide households into quintiles, ranging from the poorest to the most affluent households. Results shown in
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Table 5 illustrate the extent of variations across these quintiles. When we consider all children, the variations are modest and almost invisible, except for the first quintile with a slightly lower sex ratio. However, if we restrict our examination to children born after a succession of girls, the variations appear more pronounced. The third, fourth, and fifth quintiles have increasing levels of birth masculinity, with the richest quintile reporting a sex ratio of 123. We obtained the same SRB level when we looked at households with the most educated women in the previous analysis. While both subpopulations with higher female education and better living standard are likely to overlap, it must be stressed that these two indicators were constructed from two different sets of variables (individual variables for education and household variables for quintiles), but that they point to the same higher level of birth masculinity among the most prosperous households.

<table>
<thead>
<tr>
<th>Quintile</th>
<th>All children</th>
<th>Children of parity 3+ with no older brother</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Sex ratio</td>
<td>Children</td>
</tr>
<tr>
<td>Poorer</td>
<td>107.6</td>
<td>44351</td>
</tr>
<tr>
<td>Poor</td>
<td>108.2</td>
<td>40909</td>
</tr>
<tr>
<td>Medium</td>
<td>109.2</td>
<td>39085</td>
</tr>
<tr>
<td>Richer</td>
<td>109.1</td>
<td>35637</td>
</tr>
<tr>
<td>Richest</td>
<td>108.7</td>
<td>25801</td>
</tr>
<tr>
<td>Total</td>
<td>108.5</td>
<td>185783</td>
</tr>
</tbody>
</table>

Sex ratios corrected for mortality differentials

Table 5: Sex ratio at birth of children by socioeconomic quintile in Kosovo computed from 2011 census data, 2000-2011

These variations are stronger than regional variations observed earlier. When it comes to sex selection, socioeconomic status matters more than the local community does. Many parents from the upper strata of society are indeed reluctant to have third or higher-order births, but when they do, a significant proportion among them tries to manipulate the sex of the child. These sex ratios above 120 also reflect an easier access to sex selection technology, associated with urban residence, better information and financial means, but also the unwillingness among the higher quintiles to let chance decide of the sex of the baby.

6.4 Conclusion

The gender composition of families is paramount to reproductive strategies among Kosovar couples, whose major objective is to have at least one son. This explains the bias in the sex ratio at birth found in the country. Even if sex imbalances at birth are not as frequent as in countries such as Azerbaijan or China, our analysis has shown it to be more widespread than initially thought. It is found is all parts of Kosovo, in rural as well in urban areas, among the educated and the uneducated, and among first as well later births. The latter aspect of sex imbalances in Kosovo is unusual, since in many countries, the sex ratio at birth is normal for the first two births and increases only for later births (i.e. when couples have had two girls in a row). In Kosovo, the sex ratio at birth is indeed affected by the absence of a son after two births, but the gap is far less pronounced than in other countries. What is striking is the
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A skewed sex ratio at birth—visible right from the first birth; a feature confirmed by both birth registration and census figures.

Yet, prenatal sex selection is not the only way to ensure the birth of a son. In spite of the current rapid fertility decline in Kosovo, fertility flexibility allows many families to have a boy simply through additional pregnancies. This method does not require prenatal sex diagnosis or selective abortion. It is only based on contraceptive use to stop childbearing once the desired gender composition is achieved. Resorting to additional pregnancies in the hope of having a son is, however, not a panacea. In fact, it presents in fact several pitfalls. The first one is that it is an unreliable strategy, since there is a 50% risk that a child will be a girl. The second one is the heavy burden it places on women through repeated pregnancies—which are harmful to them in health and socioeconomic terms, and potentially to their already living children as well. The third limitation is that an additional child may also be perceived as a liability for the entire family because of their limited resources. In fact, Kosovo has witnessed a gradual decline in the average size of its families and the process has been recently aggravated by several factors, such as the economic crisis. In such a context, the birth of an additional girl in the absence of prior male births is less and less welcome.
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7 Sex imbalances and demographic prospects

Prenatal sex selection is primarily considered as a severe form of gender discrimination. However, the resulting sex imbalances at birth also have long-term implications for sex imbalances that will be reflected on the future age and sex structure of Kosovo. With fewer girls born today, the sex composition of the adult population will invariably be affected after two or more decades. The future can be partly anticipated with population forecasting, one of the most widely used tools in demography. Population projections are regularly carried out by both national and international institutes.

The recent 2011 census provided a set of demographic figures used as the baseline for population projections (ASK, 2013b). These projections have used the biological value of 105 male births per 100 female births. This is not a plausible scenario for the current period since the number of years during which the sex ratio at birth has been skewed. We will therefore develop a different set of projections based on two different SRB scenarios. In doing so, we do not want to produce a fresh set of population forecasts, but rather to give an idea of the consequences of an elevated sex ratio at birth on the age and sex composition of the population for the next decades. More than actual demographic forecasts, our projections represent simulations of what different scenarios would imply for population changes in Kosovo in the future.

7.1 Demographic parameters

We are using the 2011 census results as a baseline. The projections start from the age and sex distribution of the resident population at the time of the census. The method for projection is the cohort method, in which mortality, fertility, and migration are estimated by five-year intervals from 2011 to 2071. For fertility and mortality, we are using the same sets of parameters as the projections prepared by ASK (2013b) in their “medium variant”. These parameters include a significant readjustment of mortality estimates in 2011, with a life expectancy of 74 and 79 years in 2011 for men and women respectively (medium variant estimates). This level is well above those of Serbia or Montenegro, and may be on the high side. We keep the same set of fertility estimates, positing a gradual decline from two children per women in 2011 to 1.5 in 2061, followed by stabilization thereafter. This assumes that Kosovo will reach an "ultra-low" level of fertility in the future.

The new feature of our set of projections relates to the sex ratio at birth. We use here two distinct scenarios of SRB estimates. The first series is based on a normal sex ratio at birth of 105 and will be referred to as "normal SRB" scenario. We assume that birth masculinity has remained normal over the last two decades and will remain so until the end of the projection period. As a result, we use a normal 105 SRB values for the forecasts beyond 2011. In addition, we correct data for the period since the 1990s, when the sex ratio at birth was already skewed. To this, we have corrected the sex distribution of the child population in 2011: we assume a normal sex ratio of 104.5 for the 0-4 years and of 104 for the 5-19 years. The total population of each age group remains the same.

The second series—referred to as the "high SRB" scenario—is based on the recent elevated SRB level of 111. We keep this SRB value for all births after 2011. This SRB level is taken from the recent birth registration figures of sex imbalances at birth in Kosovo in 2012-2014. The simulation exercise will therefore be based on two different SRB scenarios, determining two distinct sets of age and sex structures.
Regarding migration, our central scenario differs again from the official projections (ASK, 2013b). We compute here population figures of the Kosovo population without any international migration during the entire 2011-2071 period. This may not sound like a reasonable hypothesis in view of the well-known migration pressure existing today in Kosovo, but the idea is to explore the growth of Kosovo’s population both inside and outside its borders. The future diaspora is therefore included in our computations, whereas the diaspora population is usually excluded from standard scenarios (with migration). These demographic simulations, without migration, capture the entire Kosovo-born population in the future. We have also prepared an alternative set of projections with migration. The assumptions regarding migration are less straightforward, since Kosovo’s migration is affected by considerable year-to-year fluctuations in terms of volume, composition, and direction. We have found it safer to retain the migration parameters used by ASK in their 2013 projection set. It assumes sustained out-migration trends from Kosovo, with an equal share of women and men among migrants.37

### 7.2 Demographic simulations

According to our projections, the population of the country is expected to continue growing at a sustained level over the next decades, a consequence of a very young age structure in Kosovo’s population today. The population will reach 2 million inhabitants in 2025 and peak at 2.3 million in 2055. After this date, the impact of below-replacement fertility will lead finally to a gradual decline in the population. The impact of high SRB on population growth itself is significant and amounts for instance to a demographic decrease of 18,000 inhabitants in 2051 compared to the normal SRB scenario. This difference is due to the reduction in the number of births in the future, itself caused by the lower number of women among adults due to sex imbalances at birth. In 2051, there would for instance be 800 fewer births per year due to past sex imbalances at birth.

A more sizable impact of the high-SRB scenario relates to the mounting deficit of women. The deficit of female births will cumulate over the years. For instance, according to civil registration data, 15,600 female babies were born each year on average during 2002-2014. If the sex ratio at birth had been 105 male births per 100 female births, there would have been 6,523 more female births in Kosovo during this period.

The cumulative impact of this annual deficit of female births will grow rapidly over the next decades. It can be converted into the number of "missing women" for the entire female population and of "missing girls" for women below 20 years. The number of missing women in Kosovo in the high-SRB scenario is computed for different periods by comparison with the sex distribution observed in the normal-SRB scenario. For each period and age group, we compute the expected number of women by applying the sex ratio observed in the normal-SRB population forecasts to the observed number of men. Missing women represent the difference between the numbers of expected women in the normal-SRB scenario and of projected women in the high-SRB scenario.

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37 On the volume and sex composition of international migration, see also UNDP (2014).
In 2011, the age and sex distribution of Kosovo’s population already suggested the presence of a deficit of girls born over the last 20 years and we can estimate this deficit to amount to 5,000 young women for 2011. If the SRB remains at 111, this number is to increase to 10,000 by 2031 and plateau after 2050 at about 13,500 missing women below age 20 (see also Figure 14). By 2051, the proportion of the female population missing below the age of 20 would amount to more than 5% of this broad age group.

A similar computation leads to an estimate of the number of missing women of all age groups. In 2011, it is restricted to the younger ones born since 1991. However, this number will steadily increase over the years, as older age groups will be gradually affected by earlier sex imbalances at birth. As Figure 14 indicates, the total number of missing women would reach 10,000 in 2021, 20,000 in 2041, and 41,000 in 2071. By that time, these missing women would amount to almost 4% of the overall female population in the country and the imbalance would be visible in all age groups.

Therefore, Kosovo’s population sex ratio is bound to grow in the future unless the sex ratio at birth comes back to a normal level. It should be noted that Kosovo's population has long been predominantly masculine, in spite of significant male outmigration. This is unexpected and, in fact, most populations in Europe are predominantly feminine—notably in the former Soviet Union where excess male mortality among adults has taken a heavy toll. Kosovo’s situation can be primarily explained by the extent of high female mortality in the past. With a normal SRB and balanced mortality between men and women, the overall population sex ratio should decline and this is what Figure 15 shows. According to this set of projections, the population of Kosovo should become predominantly feminine during the current decade and the sex ratio would continue to decline in the future because of higher female longevity.

In the high-SRB scenario, the population sex ratio would tend on the contrary to increase slowly in the future due to the surplus of male births. The highest sex ratio level observed in our projections corresponds to 103 at the end of the period under study.

38 Computing missing women aged 20-39 years from the 2011 census is especially difficult due to the high number of male out-migrants.
We can now breakdown the sex ratio into various age groups. Figure 16 displays values for the child population below age 15. As could be expected, the sex ratio of the child population is very close to our assumptions related to the sex ratio at birth (111). In the normal-SRB scenario, it would remain at 104 boys per 100 girls. Both estimates of child sex ratio remain very stable over the years.

The impact of the different SRB scenarios is more complex when examined for the other age groups. We focus here on young adults aged 20 to 39 years. This population constitutes the first age category among adults to be impacted by sex imbalances at birth. The sex ratio according to the two SRB scenarios is shown in Figure 17. Up to 2021, the curves increase because of our hypothesis of not net migration of young men. After 2015, the divergence between the two series widens. According to the normal-SRB scenario, the ratio of young men plateaus at just above 105 and oscillates around this level during the next decades. This small surplus of men corresponds to the sex ratio at birth of 105 and the subsequent impact of higher male mortality.

In the high-SRB scenario, the sex ratio of young adults will increase further. The birth cohorts affected by prenatal sex selection will gradually reach adulthood over the years and raise the sex ratio of this age group. The sex ratio of young adults reaches 105 in 2016 and finally 110 in 2046. The sex ratio
remains very close to 111 during the following period. The comparison of both sex ratio curves reveals the growing gap between young men and women if sex imbalances at birth were to persist into the future, with a surplus of men of about 10% among young adults.

**Figure 17:** Sex ratio of the population aged 20-39 years in Kosovo according to two SRB scenarios, 2011-2071

The gap between the number of young women and young men will increase after 2011, partly because of our no-migration hypothesis. The departure of international migrants from Kosovo during the last twenty years decreased artificially the adult sex ratio because migrants were mostly males. In addition, the recent conflict has further reduced the sex ratio among adults. The departure of international migrants from Kosovo during the last twenty years decreased artificially the adult sex ratio because migrants were mostly males. In addition, the recent conflict has further reduced the sex ratio among adults. Our simulations show that the gap between young men and women will increase both in proportions and in numbers. In 2051, young men aged 20-39 years will outnumber young women by 28,000 in the high-SRB scenario. This male surplus in 2051 would represent more than 9% of their population.

The gap in sex ratio among adults depicted in Figure 17 is likely in turn to affect the marriage schedule. If men predominate in demographic terms, they are likely to delay marriage. It should be noted that men already marry rather late in Kosovo. Some of these men may not be able to marry because of the imbalance. We have also computed the sex ratio of men aged 25-44 years over women aged 20-39 years in order to take into account the spousal age gap (data not shown here). This sex ratio better reflects the imbalances in the so-called "marriage market". It also increases very quickly over the years and reaches 114 in 2041, pointing to a 14% surplus of men over women at marriageable age. In conclusion, if the sex ratio at birth remains as high in the future as it is today, the number of prospective grooms will significantly exceed that of prospective brides within a few decades.

In view of this imbalance among adults, we have included net international out-migration in our high-SRB scenario. We follow here the parameters used by ASK in its own set of projections. Yet, according to the migration scenario used by ASK, there is no more sex imbalance among out-migrants originating from Kosovo. This follows to some extent the experience of Albania where mass migration (to Italy or

---

39 Kosovo’s men of military age (15–49 years) had higher age-specific mortality rates from war-related trauma (Spiegel and Salama 2000).
40 The average age at marriage in Kosovo was respectively 30.8 and 27.3 years for men and women in 2013.
41 This is what is currently observed in many parts of China and India after decades of severe sex selection (UNFPA, 2012a).
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to Greece) was mostly masculine during the 1990s, but became gradually more balanced over the years. This corresponds to Kosovo’s recent evolution. While men still accounted for a majority of migrants in 2011 (57%), their proportion reduced very significantly over the last decades and emigration during the last five years was more balanced between men and women (see UNDP, 2014). This suggests that international migration would not have an impact in the future on the sex imbalances forecast for the adult population. Our alternative set of simulations with international migration confirms this idea. According to this scenario, the sex ratio among adults will continue growing at a similar pace, creating an important surplus of adult men after two or three decades if the sex ratio at birth doesn’t come back to normalcy.

The growing surplus of men may influence migratory behavior in the coming decades independently of other factors, such as local unemployment or low wages. Imbalances in the marriage market may become a new factor for migration; the departure of male migrants could therefore act as a safety valve to counterbalance the predominance of men among adults. Men facing a marriage squeeze may be led to migrate for both demographic and economic reasons. This is not an imaginary scenario, since Kosovo has long been affected in the past by important streams of male emigration to countries such as Switzerland, Slovenia, or Germany.

To conclude this simulation analysis, we should first mention that, if unchanged, sex imbalances at birth will generate significant demographic imbalances in the population of Kosovo—imbalances that are hardly visible today. A surplus of male births today will mechanically affect the adult population after 20 years. Future missing women may slightly reduce the number of births in the next thirty years, but it may also generate significant imbalances among the adult population. This is true for the entire population, which has incidentally been abnormally masculine for a long time. While this was due in the past to excess female mortality among the youth and adults, the recent surplus of male births points to a more radical change affecting already the base of the age pyramid that will reach older age groups in the future.

The demographic consequences are easy to forecast, but the social impact of these skewed sex ratios is more difficult to figure out for a variety of reasons. First, male surplus at marriageable age will inevitably make marriage more difficult for men if the “marriage market” is limited to people born in Kosovo. If we extend the marriage market to the entire Albanian-speaking population of Southeast Europe, the situation would not be eased, since they are also affected by skewed sex ratio in Macedonia and Albania. However, the actual consequences of a "marriage squeeze"—on social behavior and family formation are more difficult to foresee, especially in view of the rapid changes in Kosovo’s family and value systems since 1999. Second, migration could play the role of a safety valve in alleviating the male surplus. In such a scenario, Kosovo males would migrate not only for labor reasons, but also if they fail to find local spouses. Increased migrations would be an unwelcome scenario in a country wreaked by war a few years ago.

Yet, we should also include an important caveat in this conclusion. We need to consider these projections and the scenarios that they are based on with some caution. More than fertility and mortality trends, transformations in SRB levels are difficult to predict and international migrations are especially volatile. The conjunction of these mechanisms is consequently difficult to prognosticate with certainty and the simulations outlined in this chapter should therefore treated as potential scenarios rather than definite forecasts.
8 Conclusion and recommendations

This is the first time a study is devoted to prenatal sex selection in Kosovo. In Southeast Europe, only Albania has been the subject of a systematic study, and many of the lessons of this prior study hold for Kosovo as well. The prime objective of this report was to address a poorly known dimension of Kosovo's demographic situation, i.e. the unusually high proportion of male births in its population. Despite its obvious demographic manifestation, confirmed by various statistical sources, the issue has not made headlines and sex imbalances at birth in Kosovo are almost absent from the discussion in the media.

The reason for such a silence is usually attributed to the availability and quality of demographic data. There is no doubt that statistical operations—both the census and birth registration—have been disrupted in Kosovo since the early 1990s. As in many other countries of Eastern Europe, data collection and publication have greatly suffered during the political transition and the conflicts that have often followed. When we examine the statistical evidence, we notice that birth registration data prior to the 1990s already pointed to a suspicious proportion of male births. However, without a full census analysis, it was difficult to disentangle artificial registration issues from real imbalances. It is only by combining the 2011 census data with birth statistics that the full picture can emerge.

Yet, it must be said that sex-selective abortions are, to some extent, an open secret since the strength of son preference is well known in the country. The pressure to have sons is conspicuous for anyone familiar with Kosovar society, and sex-selective abortions appear an obvious remedy for families who feel the need to have at least a son. Albania provides an indirect confirmation of what is happening in Kosovo, but the lesson drawn from its experience has not percolated through Kosovo. The results of this study aim to inform policy makers and civil society representatives alike. Sharing widely these is necessary to break the silence on prenatal discrimination. This is undoubtedly a precondition to sow the seeds of a more ambitious policy mobilization around the issue of gender-biased sex selection in Kosovo.

8.1 The main lessons

The study aims to bridge many of our knowledge gaps on the issue, related in particular to the underlying gender bias in society, the sex imbalances at birth observed since more than two decades and the potential implications on Kosovo’s future demographics. The report is based on a systematic review of evidence of a gender bias and an analysis of its recent manifestations.

After a brief presentation of technical issues related to sex imbalances at birth, we first provide a brief overview of the global situation. The cases of China and India, where the sex ratio at birth increased from the 1980s, are relatively well known, but observers have long been reluctant to draw a parallel between Asia and the situation of former socialist countries where signs of imbalances have been visible since the 1990s. However, the decomposition of prenatal sex selection in its three core factors—low fertility, access to modern reproductive technologies, and staunch son preference—helps to emphasize the communalities between Asia and Eastern Europe.

These three conditions are indeed met in Kosovo. First, there is a preference for boys in Kosovar society, deriving primarily from the male-centered kinship system found in the Western Balkans. The obligation to have a male heir stems from the patrilineal system and from the responsibility entrusted to sons in supporting their parents and perpetuating the family line. Patrilocal co-residence after marriage is confirmed not only by field studies, but also by the recent 2011 census data examined in
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this report. Moreover, the demographic analysis of reproductive behavior shows that gender preferences directly affect reproductive decisions. We show that the absence of a son among previous births intensifies subsequent fertility. This underlying need for a son can be, to some extent, simply satisfied by increased fertility and this explains in part why Kosovo’s fertility has long been the highest in Europe. Yet, fertility gradually declined since the 1980s and has now reached replacement-level. As a result, parents who want to reduce their fertility often find themselves without a son. The reduction in family size goes against the absolute need to have at least one boy. In the course of the 2015 qualitative survey, most Kosovars express their strong desire to have a son and explain it in terms of traditional mindset as well as family responsibilities.

Even if often condemned for moral reasons, abortion has long been available in Kosovo and this situation dates from the Yugoslav period. At the same time, clinics and hospitals have modernized and prenatal sex diagnosis is a routine examination for all pregnant women. Access to ultrasound and abortion has made therefore prenatal sex selection feasible, enabling couples to influence the size and sex composition of their family.

We review in a separate chapter the evidence on prenatal sex selection in Kosovo. There is an obvious reluctance to discuss the issue among participants in the 2015 qualitative survey. To many participants, sex-selective abortions might, however, be common among couples who fail to have a son and this is confirmed by health practitioners. The demographic evidence, based on an apparent surplus of male births, is even stronger. The gender composition of families is indeed paramount to reproductive strategies among Kosovar couples, whose major objective is to have at least one son. Over the period 2002-2014, the average sex ratio at birth was close to 110 male births per 100 female births. This corresponds to a male surplus of about 5% of the births. The rise in birth masculinity in Kosovo is difficult to date with certainty, since historical data from the Yugoslav period show an imbalance since the 1950s. Yet, this bias in the past may have been due to the underregistration of female births and the underenumeration of female children. The confrontation of recent census and birth registration figures demonstrates that the excess of male births observed today is real. The level today seems to be somewhat stable around 110-111 male births per 100 female births per year, but there are yearly fluctuations caused by the small size of Kosovo’s population. It is next to impossible to detect clear trends pointing to a future decline or increase in birth masculinity, but there is no reason to expect a sudden turnaround of birth masculinity in the country.

Even if sex imbalances at birth are less pronounced than they are in other countries in the South Caucasus or in Asia, our analysis has shown them to be more widespread than initially thought. They are found in all parts of Kosovo; in rural as well in urban areas, among the educated and the uneducated, and among first as well later births. The latter aspect of sex imbalances in Kosovo is unusual, but it suggests that Kosovar couples may resort to sex-selective abortions right from the first births. It is also surprising to see little differences across regions or between cities and villages. This indicates that son preference has not disappeared among the urban population and the limited variations across socioeconomic quintiles is a further confirmation of the widespread prevalence of sex ratio imbalances within the country.

It should be noted that prenatal sex selection is not the only way to ensure the births of a son. Many families expect to have a boy simply through additional pregnancies. This method requires no prenatal
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sex diagnosis or selective abortion, but it presents many pitfalls. It is unreliable and results in many unwanted births, which may become a burden for households with limited resources.

Prenatal sex selection today will invariably lead to population imbalances tomorrow. We have therefore included a separate demographic study of the long-term implications of a skewed sex ratio at birth. Using demographic forecasting methods, the SRB trend observed during the last five years can be projected into the future in order to assess the impact of sex imbalances at birth. We have used two demographic scenarios, with and without skewed sex ratio at birth, to explore the demographic consequences up until 2071. We observe notably the growing number of “missing girls” and “missing women” in Kosovo in the future decades. If the sex ratio at birth remains skewed, sex imbalances will grow bigger among adults and this in turn might increase male international migration—the only way to reduce the male surplus at marriageable age. However, nobody would want to promote further migration from Kosovo to the rest of Europe.

We hope that this study will provide elements for a larger debate in Kosovo’s civil society on gender bias and its links to the family system. The report provides the public and policy-makers with the best possible evidence of sex selection in Kosovo and its links with the family system. Future transformations in the demographic situation or in health infrastructures are unlikely to significantly reduce the frequency of sex selection and change can only come from a reduction in the gender bias. The growing role of women in society should weaken this age-old gender bias, but we cannot expect overnight transformations in old Albanian traditions. It is, however, obvious that the faster these transformations occur, the less severe the implications of current sex imbalances will be on the future population setup of the country. There is a need for a rapid mobilization of social and political organizations towards a better understanding of the existing discriminatory mechanisms. This should lead ultimately to the design of specific policy measures addressing gender bias and other forms of discrimination towards women.

8.2 Main recommendations

We have demonstrated in this report the presence of sex-selective abortions in Kosovo. The intensity and characteristics of prenatal sex selection appears in line with what is observed in other countries of Eastern Europe, most notably Albania. In this section, we present several policy recommendations addressing the issue of sex selection in Kosovo. The main gaps identified in this study are the limited information on the prevalence of sex imbalances at birth, our limited understanding of its workings, and the lack of awareness relating to its existence, and, finally, the absence of mobilization of government and civil organizations.

Monitoring and understanding sex imbalances at birth

The recent 2011 census and the civil registration system offers, today, new opportunities to bridge the knowledge gap that has long impaired our understanding of sex imbalances at birth. These two sources are essential for effective monitoring of trends and differentials in Kosovo. As to the mechanisms of sex selection, we still have only limited information on abortion and on the role of health providers. We also need to better understand the dynamics of family systems in Kosovo in order to examine whether son preference is indeed retreating—as often claimed in the case of Prishtina.

- Strengthen efforts to improve the quality of birth registration.
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- Continue the regular publication of annual birth data and provide in particular disaggregated data by sex, parity, and municipality.
- Use the 2011 census data for in-depth studies of gender bias, sex imbalances at birth, family structures.
- Support anthropological research on family transformations in rural and urban areas in relation to son preference.
- Support special studies on health facilities and the supply of sex-selection services.
- Support capacity-building activities to strengthen national competences in SRB analysis and in family studies.

Disseminating knowledge, raising awareness, engaging national organizations

Gender-biased sex selection represents a potential violation of human rights and carries long-term demographic consequences on society; two aspects that need to be emphasized. At the core of public action, there is a need for wide information on the current situation to launch a public debate on gender bias in Kosovo and its impact. Civil society organizations, the medical community, and governmental departments should be the main stakeholders in this debate. Awareness and advocacy can break the long silence on this harmful practice and represent the first step of a broader policy-making process to address this issue.

- Widely disseminate the findings of this study to raise public awareness
- Target specific groups for sensitization campaigns, e.g. the youth, teachers, the media, women’s groups, social and religious leaders, and government officials.
- Involve the medical community in the fight against prenatal discrimination through their associations and ethical guidelines.
- Reconcile traditional family values with gender equity and ensure that reproductive choices do not reinforce male-oriented bias within the family.
- Specifically address women’s vulnerability issues, most notably in relation to property registration and inheritance.
- Reinforce partnerships between international organizations and related government departments to promote international cooperation within Eastern Europe.

It is probably too early to formulate concrete policy options given today’s limited knowledge on the issue gender bias in Kosovo. There is no instant recipe to combat son preference and the spontaneous call for restricting access to ultrasound or abortion is misplaced and potentially hazardous since it would negatively affect reproductive health (UNFPA, 2015b).

The root factor for sex imbalances at birth remains the preference displayed towards sons within the family in Kosovo, originating from a traditional family system that has been recently reinforced by conflicts, reduction in government intervention, and economic duress. Gender disparities at the core of women’s marginality and vulnerability in society do not only affect reproductive choices, but also limit the prospects for robust and inclusive growth. Beyond demographic imbalances, addressing gender bias will have multiplier effects on social and economic development.
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References


ASK (Agjencia e Statistikave të Kosovës), (ND), *Quality report*, Kosovo Population and Housing Census 2011, Pristina.


ASK (Agjencia e Statistikave të Kosovës), 2008b, *Demographic changes of the Kosovo population 1948-2006*.


Council of Europe 2011 *Prenatal Sex Selection*—Report, Committee on Equal Opportunities for Women and Men, Rapporteur: Ms. Doris Stump, Switzerland.


Democracy for Development (D4D), 2015, *The Cost of Patriarchy to Development*, Democracy for Development Institute, Series: Public Interest, No. 5, Prishtina.


Gender bias in Kosovo


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Republic of Kosovo, 2009, Demographic, Social and Reproductive Health Survey in Kosovo, Ministry of Public Administration, Pristina.


UNFPA, 2005, Demographic, social and reproductive health situation in Kosovo. Results of a household survey July 2003 January 2005, UNFPA UN House, Prishtina.


UNFPA, 2012b, Sex Imbalances at Birth in Albania, UNFPA, Tiranë.

UNFPA, 2013, Sex Imbalances at Birth in Armenia. Demographic Evidence and Analysis, UNFPA, Yerevan.
Gender bias in Kosovo

UNFPA, 2015a, Gender-biased sex selection in Georgia. Context, Evidence and Implications, UNFPA, Tbilisi.

UNFPA, 20015b, Preventing Gender-biased Sex Selection in Eastern Europe and Central Asia, Regional Issue Brief, 4, UNFPA, Istanbul.


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## Appendix

### Main findings of 2015 quantitative survey

<table>
<thead>
<tr>
<th>For the following statements, please tell me to what extent do you agree or disagree with each of them: In my family, the head of the household has the final say, regardless of the dissatisfaction that other family members might have related to the decision.</th>
<th>Respondent Gender</th>
<th>Age</th>
<th>Residence</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Male</td>
<td>Female</td>
<td>15-25</td>
<td>26-40</td>
</tr>
<tr>
<td>Completely agree</td>
<td>22.9</td>
<td>27.3</td>
<td>24.2</td>
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<td>16.3</td>
<td>14.3</td>
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<tr>
<td>Absolutely disagree</td>
<td>32.9</td>
<td>23.5</td>
<td>30.8</td>
<td>34.2</td>
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</table>

<table>
<thead>
<tr>
<th>In my family, when planning family activities, including where the family lives and how many boys and girls live in the household, the head of the household has the final say.</th>
<th>Respondent Gender</th>
<th>Age</th>
<th>Residence</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Male</td>
<td>Female</td>
<td>15-25</td>
<td>26-40</td>
</tr>
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<td>12.0</td>
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</tr>
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<td>24.7</td>
<td>24.2</td>
<td>22.2</td>
</tr>
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<td>16.4</td>
<td>20.8</td>
<td>18.9</td>
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</tr>
<tr>
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<td>44.2</td>
<td>36.1</td>
<td>39.6</td>
<td>40.6</td>
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<table>
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<th>It is fine if the children in the family are all girls</th>
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<th>Masha</th>
<th>Age</th>
<th>Residence</th>
<th>Total</th>
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</thead>
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<td>Male</td>
<td>Female</td>
<td>15-25</td>
<td>26-40</td>
<td>41+</td>
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<td>47.0</td>
<td>48.4</td>
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<td>33.3</td>
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<td>Somewhat disagree</td>
<td>10.0</td>
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<th>A Kosovan family should at least have one male child.</th>
<th>Respondent Gender</th>
<th>Age</th>
<th>Residence</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Male</td>
<td>Female</td>
<td>15-25</td>
<td>26-40</td>
</tr>
<tr>
<td>Completely agree</td>
<td>20.0</td>
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<td>20.9</td>
</tr>
<tr>
<td>Somewhat agree</td>
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<td>25.6</td>
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<tr>
<td>Somewhat disagree</td>
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<td>18.2</td>
<td>22.8</td>
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<tr>
<td>Absolutely disagree</td>
<td>32.5</td>
<td>31.0</td>
<td>30.2</td>
<td>35.1</td>
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</table>

<table>
<thead>
<tr>
<th>Please tell me, for each of the following statements, you agree or disagree: Abortion in Kosovo is a legal procedure that can be decided upon at any time during pregnancy.</th>
<th>Respondent Gender</th>
<th>Age</th>
<th>Residence</th>
<th>Total</th>
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<tbody>
<tr>
<td></td>
<td>Male</td>
<td>Female</td>
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<td>26-40</td>
</tr>
<tr>
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<td>23.2</td>
<td>20.5</td>
<td>22.5</td>
<td>23.1</td>
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<tr>
<td>Disagree</td>
<td>54.6</td>
<td>66.5</td>
<td>58.9</td>
<td>62.8</td>
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<table>
<thead>
<tr>
<th>Ultrasounds are a useful tool to determine the gender of the fetus at early stages.</th>
<th>Respondent Gender</th>
<th>Age</th>
<th>Residence</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Male</td>
<td>Female</td>
<td>15-25</td>
<td>26-40</td>
</tr>
<tr>
<td>Agree</td>
<td>42.9</td>
<td>46.8</td>
<td>44.9</td>
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<tr>
<td>Disagree</td>
<td>32.7</td>
<td>42.8</td>
<td>33.7</td>
<td>36.3</td>
</tr>
</tbody>
</table>

| Ref/DK | 24.4 | 10.3 | 21.4 | 12.9 | 18.8 | 22.1 | 14.8 | 17.8 |
### Gender Bias in Kosovo

#### Sociodemographic Description of the Sample of the 2015 Quantitative Survey

<table>
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<tr>
<th>Residence</th>
<th>Rural</th>
<th>Urban</th>
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<tbody>
<tr>
<td></td>
<td>59.4%</td>
<td>40.6%</td>
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<table>
<thead>
<tr>
<th>Gender</th>
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<tbody>
<tr>
<td></td>
<td>52.6%</td>
<td>47.4%</td>
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</table>

#### Survey Results

<table>
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<tr>
<th>Ultrasound Use for Family Planning (to pre-select If you want a girl or a boy)</th>
<th>Agree</th>
<th>Disagree</th>
<th>Ref/ DK</th>
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<tbody>
<tr>
<td>Male</td>
<td>22.2%</td>
<td>56.3%</td>
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<td>Female</td>
<td>23.7%</td>
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<td>15-25</td>
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<table>
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<tr>
<th>Ultrasound Prohibition for Sealing the Gender of the Fetus at Early Stages of Pregnancy</th>
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<th>Disagree</th>
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<td>42.9%</td>
<td>27.9%</td>
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<td>34.7%</td>
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<td>18.4%</td>
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<th>Abortion Management</th>
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<tbody>
<tr>
<td>Male</td>
<td>17.4%</td>
<td>60.4%</td>
<td>22.2%</td>
</tr>
<tr>
<td>Female</td>
<td>18.0%</td>
<td>67.7%</td>
<td>14.3%</td>
</tr>
<tr>
<td>15-25</td>
<td>18.2%</td>
<td>61.1%</td>
<td>20.7%</td>
</tr>
<tr>
<td>26-40</td>
<td>20.3%</td>
<td>67.1%</td>
<td>12.6%</td>
</tr>
<tr>
<td>41+</td>
<td>15.6%</td>
<td>63.4%</td>
<td>21.1%</td>
</tr>
<tr>
<td>Urban</td>
<td>13.4%</td>
<td>65.0%</td>
<td>21.7%</td>
</tr>
<tr>
<td>Rural</td>
<td>20.6%</td>
<td>63.1%</td>
<td>16.3%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>General Importance of Knowing Gender Before Birth</th>
<th>Extremely Important</th>
<th>Somewhat Important</th>
<th>Somewhat Unimportant</th>
<th>Absolutely Unimportant</th>
<th>Ref/ DK</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>6.0%</td>
<td>34.1%</td>
<td>36.5%</td>
<td>39.0%</td>
<td>3.6%</td>
</tr>
<tr>
<td>Female</td>
<td>7.1%</td>
<td>33.7%</td>
<td>36.3%</td>
<td>37.7%</td>
<td>5.4%</td>
</tr>
<tr>
<td>15-29</td>
<td>6.9%</td>
<td>33.1%</td>
<td>17.0%</td>
<td>39.3%</td>
<td>3.7%</td>
</tr>
<tr>
<td>40+</td>
<td>6.1%</td>
<td>34.8%</td>
<td>15.7%</td>
<td>38.2%</td>
<td>5.3%</td>
</tr>
<tr>
<td>Urban</td>
<td>4.5%</td>
<td>28.1%</td>
<td>14.5%</td>
<td>40.2%</td>
<td>4.7%</td>
</tr>
<tr>
<td>Rural</td>
<td>7.9%</td>
<td>37.6%</td>
<td>17.1%</td>
<td>32.3%</td>
<td>4.3%</td>
</tr>
</tbody>
</table>

---

**Gender Bias in Kosovo**
Gender bias in Kosovo

**Age group**

<table>
<thead>
<tr>
<th>Age Group</th>
<th>15-25</th>
<th>26-40</th>
<th>41+</th>
</tr>
</thead>
<tbody>
<tr>
<td>Percent</td>
<td>25.8%</td>
<td>29.4%</td>
<td>44.7%</td>
</tr>
</tbody>
</table>

**Education**

<table>
<thead>
<tr>
<th>Education Level</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than high school</td>
<td>8.9%</td>
</tr>
<tr>
<td>Elementary school</td>
<td>31.9%</td>
</tr>
<tr>
<td>High school</td>
<td>38.9%</td>
</tr>
<tr>
<td>University</td>
<td>16.2%</td>
</tr>
<tr>
<td>Ref/Don’t know</td>
<td>4.2%</td>
</tr>
</tbody>
</table>

**Employment**

<table>
<thead>
<tr>
<th>Employment Status</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Working full-time</td>
<td>27.1%</td>
</tr>
<tr>
<td>Working part-time</td>
<td>5.6%</td>
</tr>
<tr>
<td>Housewife</td>
<td>25.5%</td>
</tr>
<tr>
<td>Student or apprentice</td>
<td>12.8%</td>
</tr>
<tr>
<td>Retired/disabled</td>
<td>8.5%</td>
</tr>
<tr>
<td>Unemployed and looking for work</td>
<td>16.6%</td>
</tr>
<tr>
<td>Unemployed, but not looking for work</td>
<td>3.6%</td>
</tr>
<tr>
<td>Don't know</td>
<td>.3%</td>
</tr>
</tbody>
</table>