CASE STUDY

The use of ultrasound technology in India for sex-selective abortions

In the 1990s, General Electric (GE) brought ultrasound technology to India. Previously, ultrasound machines were bulky and expensive, so traveling doctors could not use them. The potential for doctors, nurses, and medical technicians to go to rural and remote communities and practice preventative medicine was vast, and the potential health benefits were enormous. The process for doing so included partnerships between GE and local doctors. That is, GE knew that local physicians would be best situated to serve as consumers and advocates for the new technology. The corporation invested in ways to help doctors become trained in the latest technology and then serve as part of the salesforce, sharing the capacity for bringing the new tools to broader communities. Instead of going through the government or large hospitals, working with individuals allowed GE to bring their ultrasound technology to areas quickly, and with maximum opportunities for quick sales.[12]

During this time, many people in India viewed female infanticide as an appropriate way to promote the ideal family – where sons were given priority. One Punjabi proverb put it memorably – 'Raising a daughter is like watering your neighbor's garden.'[13] In other words, investing in a daughter was expensive, and another family would receive the benefits of that investment. Sons were the ones who went to work, carried on the family name, were responsible for the care of aging parents, and in the Hindu tradition even lit the funeral pyre of their deceased parent. So tremendous cultural forces and expectations gave priority of

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place to sons over daughters. This was exacerbated by the tradition of a daughter's family paying a dowry for her marriage. Even though the tradition had been outlawed, it was still practiced.

One unintended consequence of GE's ultrasound technology was that those in the business of providing gender screening were immediately able to purchase the smaller ultrasound machines and set up small businesses providing this service. In many regions in India, there remains a cultural preference for male children, and female infanticide remains a challenge for human rights activists, religious leaders, and policymakers. In some rural areas, there are not enough women for men in the community to marry and start families of their own. While female infanticide is illegal and therefore screening for sex is illegal, many families seek out ultrasounds to either procure an abortion if the fetus is female or to arm themselves with information that would help them decide to dispose of the newborn once it is born. Because of the preference for male children, another kind of market for portable, affordable ultrasound technology existed, and – without meaning to – GE became the perfect deliverer of the tool that would end up exacerbating a complicated national issue with political, ethical, and cultural challenges.

The Indian government and local nationals immediately stepped up education campaigns at both the local and national levels and added legal ramifications, such as requirements for signage, requirements for extra training, and legal consequences for doctors or technicians providing ultrasounds for sex-selective abortions. India's Parliament enacted the Pre-Conception and Pre-Natal Diagnostic Techniques (PCPNDT) Act in 1994 to stop female feticides and work to halt the declining sex ratio in India. The act banned prenatal sex determination.

As a response, GE took their complicity in contributing to the decline of girls' birth and ease of illegal – and to many, immoral – actions seriously. The company was forced to examine cultural values and how some of the needs of the communities served in India, such as access to affordable preventative care, were at odds with other needs in those same communities. They worked to create a culture shift at several levels: first, they reached out to local activists, community health educators, and religious leaders to understand how the problem worked on the ground, especially with poor and rural families who needed male children to help with work and take care of elderly family members. Managers and salespeople within India participated in professional development and training to become familiar with the ethical challenge and with the legal ramifications associated with the technology, as well as to become sensitive to the more systematic issues that made gender selection seem necessary for some families. Sales plans had to take into account that although a purely economic standpoint, increased sales were a boon, ethical planning would call for GE to take a stand on whether or not it wanted to be part of sex-selective abortions, or whether it wanted to use its economic power to provide education and greater access to rights for their Indian consumers.

In the end, GE positioned themselves as economic partners with their Indian clients. Not only did they want to be at the forefront of providing affordable, reliable medical

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technology, they also wanted to contribute to a society where girls and women have access to rights and education. They wanted to help eliminate the false choice that seemed to require their Indian patients to access illegal technology in a struggle to make sound decisions for their lives and the lives of their families. Indian campaigns on billboards and signs remind viewers that a girl is 'as good as a son' and that all children should have rights to education. Indeed, as economists remind us, literate women propel economies forward. GE also produced cultural studies courses and worked to become partners with health and education providers in Indian states. Of course, this positioning also had a financial advantage – for a multinational corporation with diverse constituents, it would be detrimental to be associated with female feticide and illegal gender selection practices.

Now let's apply the five component analysis to this case. The leader at the start of this case was not an individual leader, but a multinational corporation, General Electric. At the time of this case, GE was in a phenomenal growth period under the leadership of CEO, Jack Welch, but for GE to sell ultrasound products in India in the late 1980s and early 1990s, it needed additional influencers in India.[14]

If we understand GE to be the leader in this case, there are multiple followers. There are the salespeople who delivered and trained on the devices, the medical facilities who purchased them, the doctors who used them, and the patients who received services. All

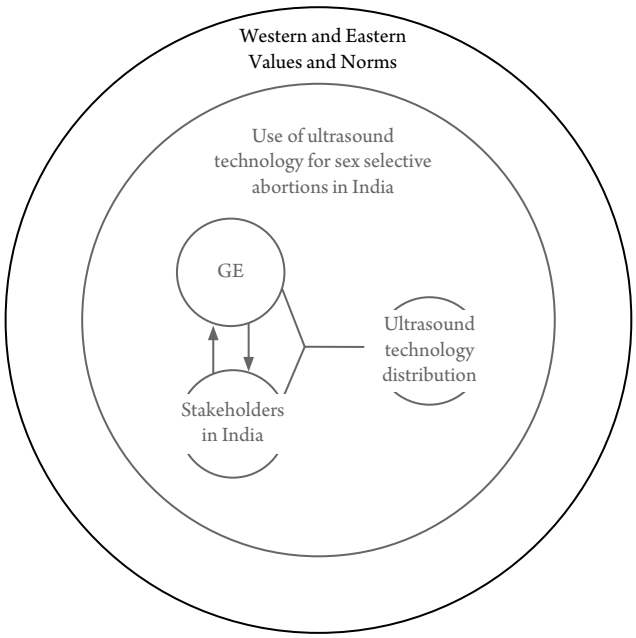

Figure 7.3 The Five Components of Leadership Model applied to the GE ultrasound and sex-selective abortion in India case study

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of these followers were stakeholders in achieving the overall goal of bringing ultrasound technology to India. As followers implemented that business goal, conflicting cultural values surfaced.

Note that the solution here was not solely administered top-down from the leader. Given the distance between GE's business headquarters in the United States and the Indian continent, a practical solution would require a partnership between the business and the people on site. So, followers also had a role to play in resolving the situation. Not only did GE address the issue, but the Indian government and doctors did as well, and the success of these actions depended on how they were received in the rural communities where sex-selective screening was taking place.

In this case, there was an overall goal at work – bringing ultrasound technology to India. It was the implications of that goal in a particular context that caused the ethical struggle. In that sense, this case is a helpful illustration of 'unintended consequences.' Local business people saw an opportunity to sell sex-selection services that were made even more accessible because of the affordability of ultrasound methods in contrast to the other available options.[15]

So our case not only illustrates different cultural values at work, but it also shows how these values interplay with factors including public health, technological advances, cultural and religious beliefs, and commitments to investors and to economic growth – both internationally and within emerging markets. All of these factors influence how the goal is perceived.

In this case, the context of the leadership engagement was different from the originating context of the leadership organization. The initiative was started in the western hemisphere of the global north and was implemented in the eastern hemisphere of the global south. This contextual difference was part of what led to the unintended consequences. In one context, the sale of ultrasound devices in rural communities could be viewed as providing a beneficial resource that would improve local health as well as economic growth. In another context, these same devices were to provide services that would negatively impact the birthrate of females in India.

The case illustrates multiple cultural forces interacting. Some of those cultural forces include local Indian customs and traditions and preference for male children existing alongside 'Western' values like feminism, individual freedom, the values of Western investors, and the profit motives for both international business leaders and local business outlets.

From the perspective of Western values, Jack Welch had publicly stated that GE was not trying to use ultrasound technology as a way of monetizing India's preference for sons.[16] Additionally, many feminists struggled with the conflicting values of allowing women the freedom to choose an abortion while also trying to value female fetuses.[17] To resolve these cultural differences, neither GE nor the Indian government could simply say that all values were equal. They had to work together, along with other stakeholders to determine a way to move forward. All parties had to understand the different cultural values and norms that were at play to find a way to reach the goal of bringing ultrasound technology to patients in India.