

*A Study of Factors Relating to the Low Sex Ratio in the Negro  
Population of the United States*

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FOR YEARS demographers have viewed the low sex ratio among the Negroes in the United States with considerable interest and have regarded the search for factors contributing to this phenomenon as a promising field for scientific investigation. In an effort to explore these factors, the present study was directed to the role that the subordinate status of Negroes may play in the determination of their sex ratio.

For more than half a century, the proportions of males to females in both white and Negro populations have experienced a decline, the decline being greater among the colored than among the white population. Since 1930 the Negro proportion has remained at 97 males : 100 females. The white sex ration has consistently remained over 101 males : 100 females during most of our national history. This is largely attributable to the preponderance of males in the foreign-born stock. In 1940, among the foreign-born white population, there were 111 males : 100 females, while the sex ratio for the native whites for the same year was 100 males : 100 females. In 1950, for the first time in our national history, there were fewer white males than females.

The sex ratios for both Negroes and whites are noticeably higher in rural than urban areas. For the total population there are only 93 males : 100 females in urban places while the rate in rural areas is over 103 males : 100 females. The white sex ratio in the urban category is nearly the same as that for Negroes, but, it greatly exceeds the colored ratio for rural areas. The nonwhite population has recently experienced large movements to urban areas, and the Negroes are no exception to the phenomenon that urbanization has a depressing tendency upon the rate of increase for most populations.

Any attempt to account for the low sex ratio among American Negroes must proceed through an examination of vital statistics. Factors associated with vitality and mortality affect the sex ratio through differential influences upon males and females. Since, in general, some of these factors apply more to Negroes than to whites, they may be regarded as factors associated with the low Negro sex ratio.

More than twenty years ago, it was observed by Winston (1926) that there are fewer males per females at birth than there are at conception. In large groups of people, the sex ratio at birth averages 105 males : 100 females, while the approximate sex ratio at conception is 110 males : 100 females. The difference is due to a differential prenatal mortality that bears more heavily upon the male than upon the female fetus. During the last twenty years, there have been from 103 to 102 males : 100 females at birth in the Negro as compared to approximately 106 males : 100 females in the white population.

To follow the analysis of Winston (Smith; 1948: 124), the comparatively low number of Negro males at the time of birth is accompanied by and probably determined by a high rate of stillbirths. "For some as yet unknown reason," he says, "stillbirths are heavily masculine, the sex ratio being about 110 males : 100 females among all pregnancies and varying between 120 and 170 males : 100 females among stillbirths. Therefore, a high proportion of stillbirths among all pregnancies should reduce the sex rate at birth among those born alive." The stillbirth rate among the Negroes is twice as great as that for whites. In 1950 there were forty stillbirths per one thousand live births among Negroes as compared to a rate of twenty stillbirths per one thousand live births for whites. Even though the stillbirth rate in the colored population has declined from 73 fetal deaths per 1,000 live births in 1926, the sex ratio among the stillborn remains high—being 123 males : 100 females in 1947, increasing to 124 : 100 in 1949. This high predominance of male stillbirths seems to be a definite factor in bringing about a low proportion of males in the Negro population.

The greater tendency for male fetuses to die in the uterus seems to be a human phenomenon evident among all races and in all regions. As early as 1927 this phenomenon was attributed to biological differences between the sexes. Holmes (1927: 270) states:

The fundamental differences of sex are determined by peculiarities of the chromosome complex characteristics of males and females. These characteristics are transmitted by hereditary processes and the greater mortality of the male may be regarded as an illustration of the natural selection in discriminating against one sex on the basis of hereditary endowment. Evidence indicates that the male is the weaker sex.

It seems reasonable to assume that any condition in the environment, such as inadequate nutrition, over-work, or disease, which would tend to weaken the pregnant mother, would also act toward increasing the probability of miscarriage and stillbirth. The high morbidity rates among American Negroes, especially as they pertain to tuberculosis, syphilis, and deficiency

diseases, cannot be ignored when assessing the factors behind the stillbirth records in the colored population.

Not only does it seem that the circumstance of sex reduces the proportional number of males by stillbirths, but infant mortality rates include also a greater proportion of male deaths. Any set of conditions that would tend to lower the resistance of the newborn during the first year of life would at the same time tend to decrease the proportion of males in the population who would begin their second year of existence. Again we can observe the impact of social conditions on the sex ratio of American Negroes. The infant mortality rate is approximately twice as high in the colored as in the white population. Tuberculosis, syphilis, or diseases of the respiratory system cause 20 per cent of the Negro infant deaths, as compared to only 10 per cent for the whites. The Negro mortality rate due to syphilis, for example, is estimated to be about one and one-half times the rate for whites. With these indications Dublin, statistician for the Metropolitan Life Insurance Company, was of the opinion that (Johnson; 1930: 406):

A condition which underlies Negro deaths, is the extremely high death rate for syphilis. If we could eliminate this one disease and the sequels of it, the mortality of the colored people in the next generation would probably become as low as among the whites. It decimates the children. It is often a cause of stillbirths, premature births, of congenital malformations, and it underlies a great deal of the excessive tuberculosis mortality among the colored people. It drains their vitality and makes the individual subject to infection and then causes him to succumb to diseases which otherwise he could throw off.

The sex ratio, as it applied to infant mortality, was 128 males : 100 females in 1949. In certain categories of causes the male predominance was even greater. For postnatal asphazia it was 135 : 100, and for congenital malformations, which, according to Dublin, are related to conditions of syphilis, it was 132 : 100. These conditions indicate that the numerical disparity between the sexes affected by fetal mortality is enhanced by high infant death rates.

An anomaly exists, however. The sex ratio not only remains constant, but also tends to decrease further with a declining mortality rate. For instance, over the years the rate of stillbirths has declined, yet within this decrease there is an increase in the proportion of male to female stillbirths. This suggests that greater advantages in medication seem to have more success among female births, for, if the results of medication were nearly equal, there should be little change in the proportion. This may be more clearly described by Holmes (1927: 267):

In places and periods where infant mortality is high, the ratio of boy deaths to girl deaths is low, and conversely, where there is a low rate of infant mortality, the death rate of boys is relatively high . . . With the reduction of infant mortality in recent years, there has been a marked increase of boy deaths. The sex ratio at death varies with the age of infants in their first year of life. For young infants, the sex ratio is higher and decreases during the year. The ratio is higher for stillbirths than it is for infants dying after birth.

In summary, it appears that the low sex ratio of Negroes, which is currently 97 : 100 (males : females), is effected by factors definitely influenced by the socio-economic conditions of the Negro population. The predominant factors—high rates of stillbirths and infant mortality—suggest improper care of parents and infants. Further, the socio-economic basis for these factors reflects differential rates with those of whites and would also indicate the influences of subordinate conditions under which, in general, the Negro population endures. That improved advantages are available to Negroes as well as whites is indicated by the decrease in the incidence of many diseases. Many of these improved advantages took form in such things as slum clearance, the extension of health services to more people, better education, less discrimination in employment practices, and many other things that improve the role of all social participants. The Negro rates, in nearly all cases, although higher, follow pretty much the same trends as those for the white population—the Negro rates approximating those of the whites twenty years ago. There are indications that, as the Negroes become more adequately assimilated into white man's civilization, their birth and death rates will come to approximate those of the whites.

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