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Med venlig hilsen

The Chapmen Else Øllgaard

Vedlagt: · Executive Summary · Introduktion og

· Preface

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Nina Willacisen

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PERSPECTIVE SERIES

CHINESE STATE BIRTH PLANNING IN THE 1990s AND BEYOND

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All sources of information contained in this document are identified and are publicly available.

DISCLAIMER

The July 27, 1990 Regulations, "Aliens and Nationality: Asylum and Withholding of Deportation Procedures," mandated the creation of a new corps of Asylum Officers to provide an initial, nonadversarial adjudication of asylum claims. Asylum Officers use asylum law, interviews with asylum applicants, and relevant information on country conditions to determine the merits of individual claims for asylum. As specified in the Regulations (8 CFR 208.12), as amended, such information may be obtained from "the Department of State, the Office of International Affairs, other Service offices, or other credible sources, such as international organizations, private voluntary agencies, news organizations, or academic institutions."

Perspective series reports are one means by which information on human rights conditions in a country and/or conditions affecting given groups or individuals deemed "at risk" within a given country is presented to Asylum and Immigration Officers. These reports are descriptions of conditions in countries based on information provided by the sources referred to above. They are prepared by expert consultants and/or the staff of the Resource Information Center, Immigration and Naturalization Service, U.S. Department of Justice. This paper was researched and written by Susan Greenhalgh, Associate Professor of Anthropology at the University of California at Irvine and Edwin A. Winckler, Research Associate of the East Asian Institute, Columbia University. Edwin Winckler translated the Fujian Birth Planning Regulations in Appendix Three from Chinese to English.

Perspectives cannot be, and do not purport to be either exhaustive with regard to the country surveyed, or conclusive as to the merits of any particular claim to refugee status or asylum. The inclusion of this paper in the Perspective Series compiled by the Service does not constitute an endorsement of the information in the paper. The views expressed in the paper, therefore, do not necessarily represent statements of policy of the United States Government, nor does this paper reflect foreign policy concerns of the United States Government.

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EXECUTIVE SUMMARY

MAIN THEMES

Birth limits. Throughout the 1990s, the Chinese government continued to sharply limit the number of children a couple was allowed to bear. These restrictions are likely to remain in force for at least the next decade and a half. Most urbanites are allowed to have only one child, while about two-thirds of ruralites qualify for two because of special occupational or family circumstances. Third children are "resolutely prohibited" for all but some ethnic minorities. The government adheres rigorously to these limits, fearing that the public would take advantage of any liberalization to press for more children. During the early 1990s, the government demanded stricter enforcement from all localities, but especially from populous provinces with high rates of "multiple" (third or higher-order) children. By the late 1990s, policy makers believed that reported fertility was about as low as it could go. Program leaders do not intend to try to push birth rates any lower, except in a few less developed areas where fertility has fallen only moderately. In most places, including major cities, a couple in which both spouses are single children is now allowed to have two children. As the number of such couples increases early in the 21st century, some automatic de facto liberalization of birth limits will occur, providing the program with a "soft landing"— at least in the urban areas. In the countryside, where the majority of the population lives, the gap between state demands and popular preferences persists. In the more developed rural areas, the number of children couples want has fallen since the 1980s, though it remains slightly above program limits. In the poorer parts of rural China, family size ideals remain well above state limits. No soft landing can be expected here.

Enforcement strategies. Throughout the 1990s, the birth-limitation policy remained mandatory on all citizens. It is likely to remain so for the foreseeable future. The policy is a "basic state policy" and a national constitutional obligation about which all provincial legislatures have passed detailed regulations. Evidently, much of the public largely accepts the legitimacy and even necessity of state limitation of births, deeming it a patriotic duty, like the payment of income taxes. It is expected that by 2002 a new national law will spell out both the obligation to obey the policy and protection from arbitrary implementation of it. The policy is a matter of civil law that is enforced mostly through government propaganda-and-education (a broad term with a distinctive meaning in the Chinese context) and community social pressure. These preferred means are backed up mostly with economic fines that are meant to be steep but not crippling. In the 1990s, however, fines rose sharply, causing considerable economic hardship for many required to pay them. Administrative means such as dismissal from jobs and termination of party membership can be used as well. Citizen non-compliance with birth limits is not a matter of criminal law punishable by prison. In China, non-compliance is not considered to express dissident political opinion. In the course of the 1990s, the program increasingly emphasized "lawful administration" by grass-roots cadres, forbidding "forceful methods" of physical violence to persons or property. Cadre violation of such strictures is a criminal offense, and some local cadres guilty of coercion or corruption have been punished, a few of them severely. Yet scattered evidence suggests that in some places where couples insist on having more children than allowed, cadres continue to use heavyhanded, even abusive, measures, and some are not punished. There is no way to know how widespread such practices are.

Implementation methods. During the 1990s, and especially after 1993, program leaders sought to increase the program's reliance on the routine work of public education and service delivery. At the same time, they strived to reduce the dependence on crash campaigns, which produce clumsy implementation, high-pressure tactics and poor-quality medical procedures. Program administrators also gave more emphasis to preventing unwanted and unauthorized pregnancies before they occur, in order to minimize the number of abortions, which remain mandatory for all unauthorized pregnancies. About 40% of married women between the ages of 15 and 49 use intra-uterine devices (IUDs). One member of about half of couples that had their permitted children has been sterilized. At least a quarter of women have experienced contraceptive failure (or deliberate removal of contraceptive device), unauthorized pregnancy and mandatory abortion. In the late 1990s, nearly half the provinces revised their regulations; reportedly all removed the requirement that one member of a couple with two or more children undergo sterilization. The program will continue macro-planning of population targets, but evidently in some places it is beginning to reduce the micro-management of subnational governments and private couples. Or perhaps local governments and individuals are simply seizing control from the center. Since the mid-1990s, the program has been giving new and much needed emphasis to improving the quality of reproductive health care. Despite these promising developments, strict control of population growth remains the program's central goal. A rebound in population growth may well threaten these liberalizing trends.

Local resistance and human costs. Because the state's reproductive rules have permitted fewer children than couples (especially rural couples) wanted, the program has always met covert resistance from individual families and even cadres. Resistance has been much fiercer in the countryside than in the cities and much stronger at times of intense enforcement than weak. In the 1990s, local resistance to state birth planning moved to a new, more overt and collective level, in which collectivities such as local legislatures and media organizations worked to document and oppose the program's harshest provisions, most abusive practices, and most inhumane consequences. At the same time, the human costs of the program—especially for women and infant girls—remained high. The greatest costs to individuals were undoubtedly the harm to women's reproductive health, the survival risks faced by infant girls, and the fate of children who had the great misfortune to come into the world "unplanned." Legally non-persons, these children are denied the right to a wide range of state benefits essential to membership in the social collectivity.

The rest of this Executive Summary provides a *precis* of this Report. The Preface notes the purposes and sources of the Report. The Table of Contents gives an overview of the detailed contents of each chapter. The body of the Report contains four sections, each with two chapters. The introductory section summarizes some basic facts about Chinese state birth planning policy and enforcement, describes the politics of resistance to birth planning, and documents some of the costs to individuals and to society of China's top-down approach to population control. The second section of the Report describes national policy and program performance in the 1990s. The third section describes how the program is organized and how it varies along several dimensions. The fourth and final section of the Report surveys variation across provinces in the 1990s before sketching the history and geography of birth planning in Fujian, the province that has produced a disproportionate share of the asylum applicants claiming persecution under the one-child policy. Four appendixes present the important policy Decision of March 2000, define

Chinese terms, translate Fujian regulations, and provide Fujian data.

I. INTRODUCTION

Chapter One provides an overview of program policy and enforcement. The program is mandatory state birth planning, not voluntary family planning. The main program rules have been mandatory contraception after a first child and mandatory sterilization after a second, but there have been both deliberate and inadvertent exceptions and the rules are beginning to be softened. In principle, the main means of enforcement have been, first, propaganda-and-education (a technique that can involve considerable coercion), second, economic incentives and penalties, and only as a last resort, more drastic "administrative means." 1990s innovations sought to strengthen institutions to make enforcement more reliable and more lawful, increase the resources devoted to professional salaries and mass incentives, and improve information by intensifying monitoring and computerizing client data. These innovations were all aimed at strengthening the program, improving compliance, and increasing state control over reproduction.

Chapter Two outlines the politics of resistance to the birth planning policy and the human costs of state birth planning. Rapid economic growth, coming on top of decades of state propaganda, has measurably reduced the number of children that most Chinese couples want. Although people often desire more children than program rules allow, most people accept the legitimacy and necessity of birth limitation. Because the rules have been out of line with deeply felt reproductive desires, however, the program has always faced covert individual resistance, especially in the countryside, both from couples targeted for surgery and from local cadres charged with enforcement. During the 1990s, the program also became the subject of overt collective politics of resistance. As foreign journalists have graphically documented, the human costs of state-directed birth planning have been steep. In this deeply patriarchal culture, women and infant girls have borne the great bulk of these costs. Women have borne the burden of contraception, at great risk to their reproductive and emotional health. In a culture in which son preference remains strong, girl infants have faced particular risks, the first of which is sexselective abortion. If carried to term, the girl child faces the risk of concealment, abandonment and, in certain times and places, infanticide. The result is a growing imbalance in the sex ratio at birth. In the 1990s, state attention to reproductive health may have begun to alleviate the problems faced by women, but the sex ratio at birth remained distorted and may have even worsened.

II. NATIONAL POLICY AND PERFORMANCE

Chapter Three delineates continuity and change in Chinese birth policy in the 1990s. The main continuities were in "strictly limiting" second children to couples fitting specific circumstances, "resolutely forbidding" "multiple" (or third and higher-order) children, delaying the timing of childbearing by requiring spacing between births, and combining routine administration with crash campaigns. One set of changes was administrative rationalization. From 1989 to 1993, the government strongly re-enforced existing policy. From 1993, it emphasized shifting from emergency to routine work, and from 1995 on it stressed linking birth planning to related programs such as poverty reduction. Another set of changes was incipient

liberalization. From around 1995, the program drew increasingly on international influences. From around 1998, it stressed improving the quality of care and began slowly reducing its micromanagement of individual behavior.

Chapter Four reports national population change and program performance in the 1990s, according to the program's own measures and data. Unfortunately, extensive underreporting of births makes interpretation of these data somewhat difficult. The evidence available suggests that the program helped limit China's population to just under 1.3 billion in the year 2000, perhaps 300 million less than the total otherwise would have been. The average number of children per woman fell from about six in 1970 to around two in the 1990s. Contributing to this goal, by the late 1990s, reportedly more than half of marriages were "late" and more than 90% of married women aged 15-49 practiced contraception. However, only about a fifth signed contracts agreeing to have only one child. During the 1990s, according to program statistics, the proportion of annual births that were "within plan" rose from about 80% to over 90%, and the proportion of births that were "multiple" (third and higher-order) children fell from 19% to 5%. These program statistics may well exaggerate the extent of change, but the trends of change they indicate are probably in the right direction. Despite these statistics showing rising contraceptive use and falling fertility at the end of the 1990s, only somewhat more than a third of Chinese women of childbearing age had only one child. Slightly under a third had two, a quarter had many, and 6% had none.

III. ORGANIZATION AND VARIATION

Chapter Five outlines the program's administrative organization, public involvement, and legislative basis. Backed by China's senior political leaders, program agencies include Birth Planning Commissions or committees at every level of government. Numerous other agencies, such as the Ministry of Public Health, also have responsibilities for birth planning. Public involvement in enforcement is extensive. Throughout the program's history, public involvement has included the work of basic-level administrative organizations and the "mass organizations," in particular, the Women's Federation. The 1990s saw growing public supervision of the program, known as "oversight from below," through the actions of legislative committees, investigative reporting by the media, and other means. Birth policy has evolved from administrative dicta toward legislative legitimacy. Recent revisions of provincial regulations have somewhat liberalized them. An anticipated forthcoming national law will spell out not only the duty of citizens to comply but also the protection of citizens from abuse. Interaction of the program with foreign organizations has been growing, a trend that has contributed significantly to the beginning of some liberalization of the program. Appended to this chapter are charts of the organization of the program at the national, subnational, and local levels.

Chapter Six defines some dimensions along which the program varies. Across provinces, birth limits were implemented earlier and more strictly in Han Chinese areas (which include about 91% of the population) than in minority nationality areas. In some areas, historically strong regionalism may have softened policy and implementation, as perhaps along the Southeast Coast. Within provinces, birth limits were imposed earlier and more strictly in urban than in rural areas. Relatedly, birth limits have been more strictly enforced in state work units than in collective ones and least strictly enforced in individual private work units and

among migrants. The policy was applied earlier and more strictly on government employees than on ordinary citizens. Women have borne most of the contraceptive burden and run most of the medical risks involved in a program that has long emphasized reaching urgent demographic targets regardless of the cost.

IV. PROVINCIAL PROGRAM PERFORMANCE

Chapter Seven canvasses provincial population change and program performance in the 1990s. The center delegates most implementation to provinces and localities, using program indicators to monitor provincial performance. Over the last thirty years, the program has gradually reduced the differences between provinces in basic demography, program inputs, and program outcomes. In particular, at the beginning of the 1990s, the center demanded stricter implementation from the nine largest agricultural provinces and from any province with a high "multiple" child rate. By 1995, the center had brought nearly all provinces into compliance, at least according to program data. The exceptions are mostly provinces that contain a high proportion of minority nationality population. Within provinces, differences in implementation capacity involve an interplay of formal administrative hierarchy and core-periphery geographic structure.

Chapter Eight focuses on the coastal province of **Fujian**, home to a large proportion of asylum applicants. The province has remained somewhat distinct from most of the rest of agricultural China because of mountain barriers, maritime orientation, cultural distinctiveness and post-1949 "battle-front" status. Until about 1990, Fujian's birth program implementation was distinctly lax, relying too much on crash campaigns and too little on routine work. During the 1990s, the program received higher priority and more funds, as a result of which implementation became both more strict and more lawful. Within Fujian, program implementation is solid in most of the advanced coastal plain, but not all of it. Enforcement remains weak in poor mountainous rural areas and among urban migrants. Fuzhou City has generally strong implementation, but its coastal counties are notoriously unruly and resistant to the demands of municipal and provincial birth planners.

APPENDIXES

Two of four appendixes treat national terms and policies, while two provide Fujian local regulations and data.

The first Appendix contains a Glossary that defines special terms used by the Chinese program and by this Report. Selective in coverage and detailed in content, the Glossary amounts to a summary of key policy emphases in Chinese birth planning during the 1990s.

The second Appendix provides a translation of the complete text of a major March 2000 "Decision" by the party Central Committee and government State Council on overall birth policy for the 2000-2010 period and beyond. This weighty "Decision" is the authoritative summary of official Chinese thinking about birth policy at the turn of the millennium.

The third Appendix translates the 1991 Fujian Birth Planning Regulations. In effect

throughout the 1990s, the regulations convey the rules actually applied to Fujian residents during the last ten years. Though dry, these regulations are well worth reading, for they illustrate the incredibly systematic and detailed nature of provincial legislation on birth planning. The regulations also provide concrete illustration of many of the larger points made in this Report.

The fourth Appendix presents a set of tables providing quantitative **data about Fujian**. The first part, on Fujian as a whole, includes indicators of the province's demographic history and occupational structure. The second part records Fujian's major cities and prefectures. The third part provides basic data on Fujian's 77 counties. Read carefully and comparatively, these data provide clues to the likely harshness of birth planning enforcement in each of the counties of the province from which perhaps the majority of asylum applicants originate.

PREFACE: PURPOSES, SOURCES AND USAGES

PURPOSES

China's state birth planning program evolved significantly during the 1990s and promises to change even further in the first decade of the 21st century. Relative to the significance of the program and the magnitude of these changes, Western journalism and scholarship have provided little coverage of them. Few sustained descriptions exist of the program's baseline policies, organization and methods. Few systematic analyses exist of how the program has changed in the 1990s and how policy and enforcement have varied from place to place. Few accounts exist that place China's unusual approach to population control in the larger context of the country's rapidly changing politics, economy, and culture. In the absence of concrete recent information, foreign perceptions of the program remain dominated by images of the highly coercive program of the early 1980s and, to a lesser extent, the early 1990s. The little foreign discussion of the program that does occur tends to remain a worthy but general discourse about the role of coercion in the program, abstracted from the program's evolving rules, procedures, and context.

This Report tries to help fill these gaps. It outlines the program's main reproductive regulations, enforcement methods, administrative organization and legislative basis. The Report sketches changes in national policy and program performance during the 1990s and anticipates developments early in the 21st century. It indicates differences in program outcomes across provinces and the special pressure on some "laggard" provinces to improve. The analysis remains largely qualitative, but contains enough quantification to suggest the scale of the processes and the magnitude of the changes involved.

The Report does not claim any direct relationship between this general background and particular INS asylum cases. No analysis of general processes can specify the circumstances of a particular applicant. The Report simply describes some major changes that have occurred in the Chinese program and defines some major dimensions along which individual asylum cases are likely to vary. An understanding of these changes and dimensions should help INS officers inquire knowledgeably into particular cases.

SOURCES

This Report both deepens and updates previous coverage. It incorporates the findings of the few main English-language materials on the Chinese birth program in the 1990s. These include academic publications such as a 1990s field report on urban program implementation, a recent fine rural field report, and other recent analyses. Most other Western academic analyses,

² Zhang, Weiguo. "Implementation of state family planning programmes in a northern Chinese village," China Quarterly (No. 157, March, 1999).

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Preface

ere able to use only a small part of the large nuch of it by Chinese scholars.

t its focus and findings:

ne Chinese program is "birth planning" or ontrast between socialism and capitalism. luction should be scientifically planned by reproduction is chaotic and inefficient. o planning by the Chinese party-state, not to

this Report distinguish between broad
) and a narrow focus on human reproduction
this Report deal primarily with
of "birth policy." Throughout this Report,
ntent of the program, including how goals
ed as policy is implemented.

to the organizational embodiment of that It includes whatever concrete measures have tness, we often refer simply to "the

e the Glossary in Appendix One at the end

however, are quite out of date and not also include some translations of prima (FBIS, American, now available on the Broadcasts (SWB, British, now available services are admirable, but their coverage.

Given these limitations of the I recent materials published in China in officials. Although government public program's record of its own developm is several orders of magnitude more configurated program and politicized vocabulary of contemp they too have limitations. Given the program to any given time the most recent Chines before. In addition, it takes six months Thus for a report written in 1999 and muns only through the end of 1998. The change in the program today.

For information on the past ferdepth interviews with high-level Chin 1998 and 1999. Again, although these to be mostly quite candid and comple explain recent changes, which eviden constitute some of the latest and most program, the Report's authors have drand influential members of the State I The most recent interviews were contributed.

For the broader context in wh have drawn widely on the scholarly li Field research in Shaanxi Province in around the country in 1993 have info To illuminate the costs of the prograr traumatic or troubling experiences so broader demographic context in whice

peasantization of the one-child policy in Sha Davis and Stevan Harrell (Berkeley: Univer: Zhu and Li Nan. "Restraining population gra (Vol. 20, No. 2, June 1994) p. 365-395; Gre practice in peasant China," Signs: Journal of 641; Winckler, Edwin A. "Re-enforcing stat Edwin A. Winckler (Boulder, Colorado: Ric planning: Continuity and change in the 1990 state birth planning: Provincial performance