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Effects and Social Implications of China's One-child Policy

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Introduction

In the past three decades, the total fertility rate (TFR) in China declined sharply to less than 2 in 2000, avoiding an estimated 300 million births (Population Reference Bureau, 2004). In 1971, China launched "Wan, Xi, Sho" family planning campaign to encourage people marriage late, birth spacing and less births (Banister, 1987; Peng, 1991). China's one-child policy which focuses on strict birth control was introduced in 1979 and officially adopted as law (The Law on Population and Family Planning) in 2002. China's family planning policy characterized by one-child policy has greatly contributed to dramatically reducing fertility and slowing population growth in China.

China's one-child policy also raises strong controversial arguments in the world. Literature reviews indicate that most debates occurred during the 1980's and the 1990's. On the one hand, people who support one-child policy show the figures of population reduction in China due to the one-child policy, and claim that the one-child policy will lead to higher standard of education for children. On the other hand, people who do not agree with the policy criticize that the policy is limiting women's freedom to bear chidren, and the policy has led to sexual discrimination, such as increasing female infanticide and forced sex selective abortion (Lin, 1992). In addition, the policy has led to rapid aging in China (Hardee, 1984).

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Since most debates are out-of-date and previous studies mainly worked on the prediction of the one-child policy in the 1980's and the 1990's. The paper will review the major effects of the China's one-child policy on demographic change and socioeconomic development, and discuss their potential social implications and recent policy trends, mainly based on the United Nations and China's official data and presentation since 1949, and other literatures.

In this paper, the background of one-child policy making and implementation of the policy will be introduced first, and then discuss effects of the policy. After that, implications of ederly care, implications of reported sex ratio at birth increase, and recent policy trends will be discussed. The last part is conclusion.

Background of one-child policy making

China faces population pressure. The population reached 962 million in 1978. The net population increased by 421 million (77.8%) between 1949 and 1978. And the age structure of population was young then. Aged 0-14 accounted for 33.59 percent in 1982, which means widening population base and high potiential growth capability. In addition, the population distributed unevenly. About 90 percent of population live in the southeastern region of the country. China was still an agriculture country. 79 percent of population was rural residents in 1982 (China's Statistics Bureau, 2002).

China land and natural resources limit the ability to accommodate greater number of people. China only had 7 percent of areable land with 22 percent of world's population (Meredith, 1993). In the history, China suffered severe flooding and famine many times.

China is a developing country. In 1978, GDP was 362 billion Yuan, and GDP per capita was 339 Yuan (US 42.3) in China. Many people were impoverished.

Previous measures of family planning were not enough to limit population growth. In 1971, China launched "Wan, Xi, Sho" family planning campaign. Wan=late, late marriage and childbearing; Xi=spaced, birth spacing; Sho=few, less births (Banister, 1987; Peng, 1991). People were encouraged not to marry until age 23 for women, 25 for men, to have no more than three children and to give other birth after four years. But, China could not reach the official population target of 1.2 billion by 2000 through these measures (Attane, 2002).

China's rapid population growth was slowing economic development and harming the environment in the late 1970s (Greenhalgh, 2003). So, one child per couple policy for strict birth control was introduced in 1979, to keep up the population growth with socio-economic development and utilization of natural resources and environmental protection. It reflected human response to the reality of China (Meredith, 1993). Also it mirrored the cultural and political setting in China (Greenhalgh, 2003).

China's one-child policy was characterised by birth control, which advocates delayed marriage and childbearing, fewer and healthier births, and one child per couple with limited exceptions. For example, for general population (Han), a couple should have no more than one child in the urban (cities and counties); in rural areas (below counties), a couple could have second child after 5 years if their first child is a girl. For ethnic minorities, a couple could have two children in both urban and rural areas, three in border area (Doug Payne, 1998). The one-child policy also are intended to combat the poverty and improve the quality of life. It matchs the principles and objectives of World Population Plan of Action adopted in 1974.

Implementation of one-child policy

State constitution set fertility control as its duty in 1982. The Marriage Law of 1980 stated "Family planning shall be practiced". In the 1980s, family limitation regulation was enacted in each province. In 2002, the one-child policy turned into the Law on Population and Family Planning, and prescribed having more than one child as a criminal act if people do not fit some exceptions.

The State Family Planning Commission made an official maximum completed fertility for every province through birth quotas system. Since the mid-1980s, an average of 1.62 children ever born per woman has been a target of birth control in China, varying from 1.3 in the highly developed provinces (cities) such as Beijing, Shanghai and Tianjin to 2.4 in Xinjiang, where more than 60 percent of the total population are ethnic minorities. (Yin, 1995). So, implementation of the policy differed by provinces (Attane, 2002; Kaufman and Zhang, 1989).

Incentives and disincentives measures were applied to reward parents who have one child. Incentives included extra food rations, health subsidy for the child, better housing for family in the urban; more allotted farmland in rural areas. Disincentives were big fines and even losing jobs for government and state enterprise employees (Zheng, 1996).

Short and Feiging (1998) reported that for couple who have only one child, one-half to three fourths of communities offered cash subsides, less than 62 percent of urban communities and 28 percent of rural communities paid child health subsidies in the sample survey during 1989 to 1993. In addition, disincentives prevail over incentives due to too little amount of cash subsides compared to over birth fine. The fine for one extra child was 1,000 to 2,800 Yuan ($268 to $482), as much as 50 times greater than the cash subsides which provided to one child couple. More seriously, for those who are government and state enterprise employees broken one-child policy rule would take risk of losing their jobs.

Table 1: Percentage of parity of child, China, 1970 to 2001

Parity of child	1970	1981	1990	1999	2001
One child	20.7	46.6	49.3	68.8	69.6
Two children	17.1	25.3	31.3	26.7	26.2
Three or more	62.2	28.1	19.4	4.5	4.2

Source: China's Statistics Bureau, 2001

Table 1 shows that percentage of women having one child increased from 20.7 to 69.6 during 1970 and 2001, and percentage of women having second child from 17.1 to 26.2. But percentage of women having third child decreased from 62.2 in 1970 to 4.2 in 2001. This indicates that one-child policy does not mean only one child per family in China. In 2001, about 26 percent of children were born in the second birth, 4 percent of children born in the third birth. In addition, the results means that couples would more likely to having only one child and less likely to having three or more children in 2001 than in 1970.

Table 2: Percentage of parity of child by provinces, China, 2001

Provinces (cities)	One child	Two children	Three or more children
Beijing	87.34	12.66	1.27
Tianjin	77.03	21.62	1.35
Hebei	63.74	35.01	1.39
Shanxi	61.06	31.42	7.52
Inner Monggoi	80.89	17.07	2.03
Liaoning	75.96	22.76	1.28
Jilin	88.05	11.95	-
Heilong Jiang	80.81	18.86	0.67
Shanghai	94.94	5.06	1.27
Jiangsu	90.37	9.14	0.66
Zhejing	78.32	20.05	1.63
Anhui	75.65	23.23	0.97
Fujian	75.69	21.55	2.76
Jiangxi	70.45	25.32	3.90
Shandong	69.53	29.45	0.91
Henan	61.05	34.55	4.40
Hubei	81.12	17.22	1.66
Hunan	68.42	29.95	1.75

Table 2: (Continued)

Provinces (cities)	One child	Two children	Three or more children
Guangdong	65.74	25.69	8.56
Guangxi	62.70	29.15	7.99
Hainan	59.79	26.80	13.40
Changing	74.56	24.03	1.41
Sichuan	75.57	19.89	4.32
Guizhou	58.73	28.07	13.20
Yunnan	56.49	37.09	6.42
Tibet	45.65	41.30	10.87
Shananxi	71.63	25.62	3.03
Gansu	61.67	34.49	3.83
Qinghai	60.00	32.22	6.67
Ningxia	60.23	29.55	11.36
Xinjiang	59.00	27.62	13.81
All China	69.59	26.23	4.17

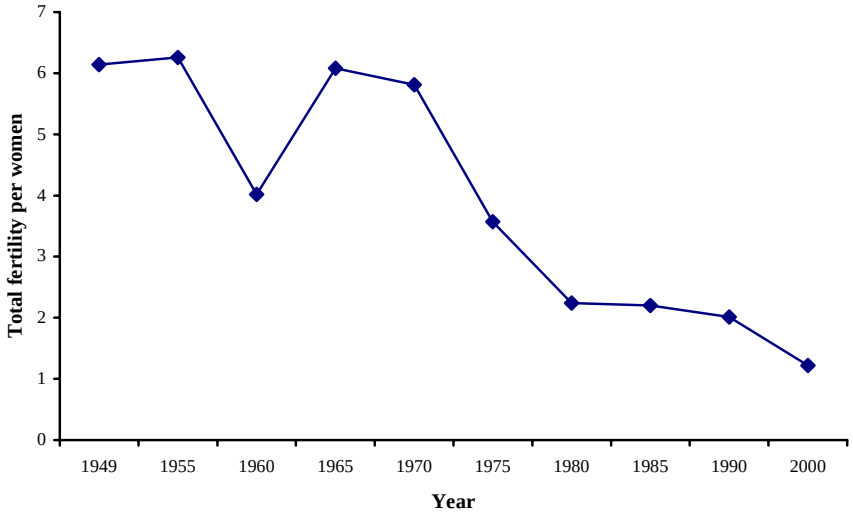
Source: China's Statistics Bureau, 2001

Table 2 displays that the percentage of parity of one child varied with provinces (cities). We could divide all provinces (cities) into two groups by average level of parity of one child in China. The sixteen provinces (cities) with above 69.59 percent (average level of China) were Shananxi, Jiangsu, Jilin, Beijing, Inner Monggoi, Hubei, Heilong Jiang, Zhejing, Tianjin, Liaoning, Fujian, Anhui, Sichuan, Jiangxi, Changing and Shanghai. Most of them are the most highly developed and urbanized regions in China. It seems that people would like to accept one child per family policy there. In the remaining eighteen provinces (cities), people may prefer two children or more. The reasons may relate to less economic development, more rural residents, higher proportion of ethnic minorities, and variation in the strength of the policy implementation in these provinces (cities).

Effects of the one-child policy

Decline of fertility

Figure 1
Total Fertility Rate in China, 1949-2000



Source: China's Statistics Bureau, 2002

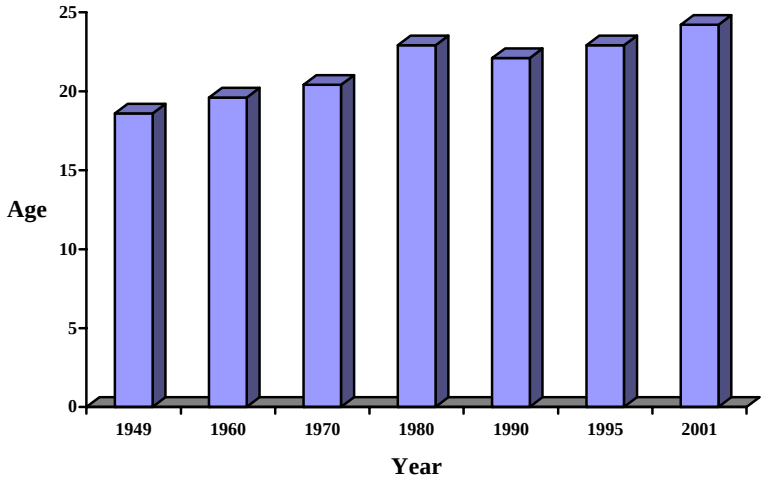
In Figure 1 total fertility rate decreased sharply in the 1970's, from 5.81 in 1970 to 2.75 in 1979, and then continued to decline to 2.01 (the replacement level) in 1991, 1.22 in 2000. The downtrend of total fertility rate from 2.75 to 1.22 during 1979 and 2000 may be mainly credited with one-child policy.

The results from the 1989-93 China Health and Nutrition Survey showed that one-child policy successfully reduced fertility level despite the significant influence from other socioeconomic factors (Li, 2002).

Reproductive behavior change

Figure 2

Mean age of first marriage of women in China, 1949-2001



Source: China's National Family Planning Commission, 2001

In China, women marry at relatively younger age traditionally. The mean age of first marriage of women was 18.6 in 1949. The family planning campaign of the 1970's led to an increase of 2.5 years in mean age of first marriage of women during 1970 and 1980. Late marriage had become the social norm during that period. And then during 1980 and 2001, the mean age of first marriage of women rose from 22.9 to 24.2, which may credited with one-child policy.

Impacts on education of children

One-child policy may contribute to the improvement of education in China, since education investment is expensive to family and country. One child per family would allow family to concentrate their resources to one child, and the country could

utilizate the investment effectively for education (China's Commission of Women and Children, 2000).

Fewer children take care their parents or grandparents.

Table 3: Percentage aged 65+ and older dependency ratio by province, China, 2000

Provinces (cities)	Percentage aged 65+	Older dependency ratio
Beijing	8.42	10.80
Tianjin	8.41	11.24
Hebei	7.05	10.04
Shanxi	6.33	9.32
Inner Monggoi	5.51	7.52
Liaoning	7.88	10.59
Jilin	6.04	8.05
Heilong Jiang	5.56	7.36
Shanghai	11.46	15.02
Jiangsu	8.86	12.36
Zhejing	8.92	12.22
Anhui	7.59	11.35
Fujian	6.69	9.51
Jiangxi	6.27	9.24
Shandong	8.12	11.43
Henan	7.12	10.60
Hubei	6.42	9.07
Hunan	7.47	10.61
Guangdong	6.17	8.85
Guangxi	7.30	10.98
Hainan	6.74	10.24
Changing	8.01	11.42
Sichuan	7.56	10.83

Table 3: (Continued)

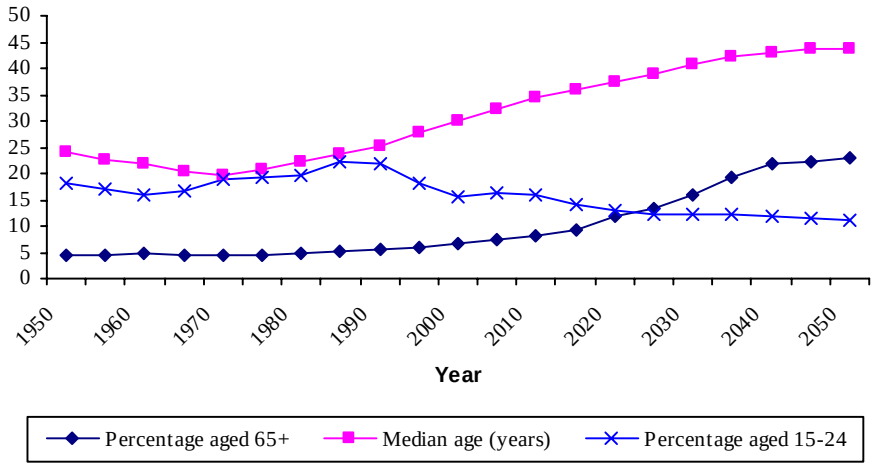
Provinces (cities)	Percentage aged 65+	Older dependency ratio
Guizhou	5.97	9.34
Yunnan	6.09	8.96
Tibet	4.75	7.42
Shananxi	6.15	8.92
Gansu	5.20	7.67
Qinghai	4.56	6.65
Ningxia	4.47	6.66
Xinjiang	4.67	6.86
All China	7.10	10.15

Source: China's Population Census Office, 2000

Table 3 shows that 13 provinces (cities) is above "aged" threshold—7 percent, accounting for 42 percent of total provinces (cities) in 2000. Most of them are more developed regions in China. In addition, older dependency ratio were also high in these provinces. In Shanghai, for example, 100 economically active people (aged 15-64) would support 15 older people (aged 65 and over), which indicates the heavy economic burden of older people on society.

Figure 3

Percentage aged 65+, and median age in China, 1950-2050



Source: United Nations, 2003

Figure 3 displays that median age of population increased from 22 in 1980 to 30 in 2000, and the proportion of population aged 65 and over increased from 6.8 percent in 2000 to 22.9 percent in 2050. This indicates that the population changed from young population to old population, since percent of people aged 65 and over exceeds 7. And China would be the process of population aging.

In addition, Figure 3 shows the aged 65 and over would make crossover with aged 15-24 in 2020 and then the gap of percentage between elderly and youth would increase greatly. This means that fewer children would take care the increasing number of the elderly in the near future.

Unbalanced sex ratio at birth

Table 4: Reported sex ratio at birth by province, China, 1990 and 2000

Provinces (cities)	In 1990	In 2000
Beijing	107.4	114.58
Tianjin	110.5	112.97
Hebei	112.4	118.46
Shanxi	110.1	112.75
Inner Monggoi	108.7	108.48
Liaoning	110.1	112.17
Jilin	108.6	109.87
Heilong Jiang	107.7	107.52
Shanghai	105.0	115.51
Jiangsu	114.9	120.19
Zhejing	118.1	113.11
Anhui	111.7	130.76
Fujian	110.6	120.26
Jiangxi	111.4	138.01
Shandong	114.8	113.49
Henan	116.4	130.30
Hubei	110.0	128.02
Hunan	111.1	126.92
Guangdong	112.4	137.76
Guangxi	117.4	128.80
Hainan	115.7	135.04
Chongqing	-	115.80
Sichuan	113.0	116.37
Guizhou	103.8	105.37
Yunnan	108.1	110.57
Tibet	104.3	97.43

Table 4: (Continued)

Provinces (cities)	In 1990	In 2000
Shananxi	111.6	125.15
Gansu	110.1	119.35
Qinghai	104.7	103.52
Ningxia	107.3	107.99
Xinjiang	105.3	106.65
All China	113.8	119.92

Source: China's Population Census Office, 1990 and 2000

Table 4 shows reported sex ratio at birth was 113.8 and 119.92, respectively in 1990 and 2000 in China. This indicated that son's preference was still popular in China and the situation was more and more serious. In addition, reported sex ratio at birth only in 8 provinces (cities) did not increase much during 1990 to 2000, but the uptrend of reported sex ratio at birth appeared in 23 provinces of 31 provinces, accounting for 74 percent. In 2000, reported sex ratio at birth was below 106 only in three provinces: Tibet, Qinghai and Guizhou. The highest reported sex ratio at birth is 138.01 in Jiangxi. Since son preference has deep cultural roots and long historical foundation in China, high sex ratio at birth could reflect social or behavioral interference.

In addition, a case study in Anhui province illustrated that overall sex ratio was 1.18 before 1980 and elevated to 1.22 in 1987-93 after the implement of one-child policy; the duration of breastfeeding was significantly shorter for girls than for boys. These suggest that the discrimination against girls such as son's preference at birth and less care for girls still exist in China (Graham, Larsen and Xu, 1998).

Implications of elderly care

Living status of retirees

Yang (1987) stated that 19 percent of 16.4 million retirees in 1985 were retired from state institutions with state pensions. 81 percent were from factories, mines and other enterprises. Some of enterprises could not increase the pensions for retirees as the price indices increase during 1980 to 2000. Many of state enterprises have stopped paying the pensions due to losing revenue or restructuring (Attane, 2002). The actual living status of some retirees deteriorated.

Health cares for the elderly

In urban, two health insurance schemes—Government Health Insurance and the Labor Insurance Schemes cover state employees and subsidize some health expenditure for employees. In rural areas, since the Rural Co-operative Insurance System was shaken, most peasants get private medical service now. So, health care expenditure is a heavy burden on the elderly. In addition, there is a problem of health care service for the elderly. For example, most of the rural clinics have difficulty in diagnosis and treatment of some complicated diseases, such as heart disease, respiratory and pulmonary disease and cancer (Lin, 1998).

Family support, community aid and Social security

Surveys show that not less than 70 percent of the elderly live with their children, and the percentage is higher in rural areas (Yang, 1987:61).

Table 5: Household size of China, 1953-2000

Year	1953	1964	1982	1990	2000
Person/Household	4.33	4.43	4.41	3.96	3.44

Source: China's Statistics Bureau, 2001

However, Table 5 displays the downtrend of household size in China during 1982 to 2000. This indicates that one-child policy may contribute to the decrease of household size from 4.41 in 1982 to 3.44 in 2000. Or the policy may affect the family structure and family financial and psychological support system for the elderly.

Since people live longer than before as United Nations (2000) predicated that life expectancy at 60 would be 16 years for male, 19 years for female in China. In addition, the "baby boom" in the 1970's will enter old age in the next 30 to 40 years. Furthermore, the number of children per family would decrease. So, Chinese family will have heavy burden of supporting the elderly, more than quadrupling in urban and more than doubling in rural areas in the next 40 years (Lin, 1995). Therefore, the traditional family support system will be overstrained unless institutional support and social security system for rural residents would be available

Implications of reported sex ratio at birth increase

Underreported female infants

The reported sex ratio at birth may be overestimated because some couples who have female birth may not register (Zeng, et al. 1993). This indicates that some girls do not have birth identification and could not benefit free education, health care from government.

Marriage squeeze

The total deficit of girls estimated from sex ratio about five millions from 1970 to 1990. It would bring down the marriageable age of girl and may intensify marriage squeeze ("Extra" male may not find females to marry) in some areas (Lin, 1992). Also, local trafficking in women and girls in some remote area might be worsening (Gauthier, 1998).

Sex selective pregnancy and abortion

Since there is a tradition of son preference for continuation of the family line and China is a man-dominated society. So, one-child policy may intensify the discrimination against girls by limiting childbearing (Banister, 1987). For instance, people could use medical technology such as ultrasound B machines for illegal prenatal sex and sex selective abortion in a small extent in middle and large cities in China (Zeng, et al. 1993).

Female infanticide and abandonment

Before 1949, a tradition of female infanticide and abandonment happened, more often in Anhui, Henan, Guangdong and Guangxi (Wu, 1988). But the increase of the reported sex ratio at birth in 1990 and 2000 may not mean a resurgence of female infanticide in China, because it was impossible for parents or other family members to do infanticide in the hospital. In addition, committing female infanticide will take very high risk of criminal penalty and psychological / moral cost. Furthermore, some parents may abandon a female infant, but usually in hospital or a place where people could find her easily and adopt her through the procedure of civil affairs (Zeng, et al. 1993).

Recent policy trends

In order to reduce some social cost, especially the effects on age-sex structure which might be brought by one-child policy, social specialists in China and oversea have debated since 1979.

Some experts called for less restrictive polices. For example, Liu group urged a go-slow policy (gradually increasing the share of first births) (Liu, Wu and Lin, 1980); Liang (1979 and 1985) recommended a two-child-plus-long-spacing policy.

Li (1997) suggested that an immediate relaxation of birth-control measures through two-child policy will limit impacts on aging in China.

But in the 1990s, there was no relaxation in one-child policy, but birth control program was strengthened to reduce the unauthorized births (Attane, 2002) or keep birth spacing in the rural area (Li, 1993 and Hu, 1998), since the population growth was major concern of Chinese government that time.

After the International Conference on Population and Development held in Cario in 1994, and the Fourth World Conference on Women organized in Beijing in 1995, there were new concerns about women's status and maternal and child health care in China.

In 1995, the State Council promulgated an Outline for Women's Development in China, putting forward ten major objectives for women's development in 1995-2000, involving political participation, employment, protection of labour, health care, education, poverty alleviation and rights of the person. (National Population and Family Planning Commission, 2005).

In addition, in 1998 China emphasized more comprehensive service through cooperation with the United Nation Population Fund in a pilot project, in which family planning organization will replace the birth quotas with "informed service". This means

that family planning organization offers a range of contraceptive method choices, reproductive health care and counseling to couples. The pilot project covered 32 counties in 16 regions and represented a cross section of China--urban and rural--involving about 20 million people (Doublin, 1998).

Moreover, local government and communities have taken measures to curb the aging of population. For example, in Shanghai, neighborhood communities encourage younger and healthier elderly to serve the dependent elderly; government policy help shape the living condition of elderly and promote co-residence of elderly with their families to prevent elderly from poverty and solitude (Lin, 1995). In a modernizing rural community in Zhejiang province, community provided elderly residents with financial and social supports (Joseph and Phillips, 1999).

Since the aging of population is going fast while the fertility in China is getting relative stable, new challenges of population are emerging and population policy is moving to new objectives.

At the 2005 National Population Conference of China, Hua Jianmin, State Councilor and Secretary-General of the State Council, addresses that China will adhere to the family planning policy to keep the low birth rate. Meanwhile, he urged local authorities to increase financial input in the family planning work and expand the mechanism of rewarding one-child families in rural areas, improve the comprehensive qualities of the people, curb gender imbalance and birth defects, and improve the social insurance system to catch up with the country's fastened pace into an aging society (Xinhua, 2005).

At the International Symposium on Government Transformation and Building of A Harmonious Society held in Haikou, on June 25, 2005, Vice Minister of the National Population and Family Planning Commission of China (NPFPC), Dr. Zhao Baige (2005) said that in the next 5 years, the Chinese government would take the following measures:

- Establish and strengthen the benefit-oriented mechanism and management and service mechanism to stabilize low fertility level;
- Carry out significant projects on health, education and training to comprehensively improve the quality of people;
- Build and strengthen the social security system, actively deal with the contradiction of population structure, and intensify integrated administration of sex ratio at birth;
- Advocate "a positive aging society" and promote the health of the aged and help them to make contributions to the society.

So far, China is extending a trial scheme of cash rewards for rural families who have one child or just two girls when they reach the age of 60. The assistance lasts for life (Xinhua, 2005). It reported that in Yunnan Province, 49,700 only-child parents at least 60 years old have received the funds of the System of Social Support for Some Rural Families Practicing Family Planning distributed timely and adequately by the government (Liu, 2005). And in Auhui province, 41,948 persons will receive at least RMB 600 per person per annum under the social support system. (Zhou, 2005).

In addition, the Ministry of Labour and Social Security has hammered out a plan for establishing a social security system in China's rural areas. By the end of 2003, more than 50 million people had joined the programme, which gave them a personal social security account totaling 30 billion yuan (US$3.61 billion). And more than 2.2 million farmers have started to enjoy pension benefits (Li, 2005).

Moreover, in Guangzhou city, policies help the education of girls. The girls who have no male siblings will enjoy a 10 percent reduction in education fees and medical cost in 2005. Since the implementation of the policy, the birth ratio of boys to girls in these two districts of Huadu and Baiyun has dropped from 127.5:100 and 123.8:100 in 2002 to 123.5: 100 and 116:100 in 2004 respectively (Qiu, 2005).

Conclusion

This paper reviews the major effects of the one-child policy on the demographic change and socioeconomic development, and discusses potential social implications and recent policy trends, mainly based on the secondary data of China's Population Census and United Nations' population estimate and projection, and other literatures. The description suggests that one-child policy help curb the population growth which keeps with the socioeconomic development and the protection of resource and environment. At the same time, it may bring about fewer children care for the elderly and unbalanced sex ratio at birth. In order to reduce the impacts of age and sex structure, recent population policy tries to promote community aid and social security system in the rural area to support the elderly, and to provide rewarding and social support system for one child or two-daughter family in the rural area as well.

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