2017-04-14

How China's Family Planning Laws Reflect Attitudes Toward Congenital Disabilities

Dickman, Alexis

http://hdl.handle.net/10456/42860

All materials in the Allegheny College DSpace Repository are subject to college policies and Title 17 of the U.S. Code.
How China’s Family Planning Laws Reflect Attitudes Toward Congenital Disabilities
How China’s Family Planning Laws Reflect Attitudes Toward Congenital Disabilities

Submitted to the Department of International Studies of Allegheny College in partial fulfillment of the requirements for the degree of Bachelor of Arts.

14 April 2017

I hereby recognize and pledge to fulfill my responsibilities as defined in the Honor Code and to maintain the integrity of both myself and the College community as a whole.

__________________________  
(Signature)

Approved by:

__________________________ (1st Reader’s Name)

__________________________ (2nd Reader’s Name)

__________________________ (3rd Reader’s Name)
Table of Contents

Dedication iv
Acknowledgements v
Abstract vi
Introduction vii

Chapter I
An Overview of Disability in China 1

Chapter II
Chinese Eugenics 18

Chapter III
The One Child Policy and Disability 30

Chapter IV
Disability and China’s Maternal and Infant Health Care Law 41

Conclusion 51

Bibliography 54
Dedication

This work, as the culmination of my entire undergraduate career, is dedicated to my grandfather, Paul Dickman. His strength of character was only outmatched by his work ethic and selfless dedication to our family. I wish you were here to see this, and I hope I’ve made you proud.
Acknowledgements

I owe great thanks to the entire Allegheny College community for making my college experience so valuable. I leave our campus infinitely more knowledgeable, articulate, and wise than when I came. I feel truly blessed to have found a second family here at my second home.

Thank you to my advisor, Guo Wu, for mentoring me throughout the completion of this project. I am inspired by your passion for Chinese history, and I cannot thank you enough for your invaluable feedback and encouragement.

Thank you to my grandmothers, Carol Courtney and Carolyn Dickman, for your unconditional love. I would not have made it through college without your support and companionship. I can only hope to be half of the woman you are.

Thank you to my little brother, Cam Dickman, for looking up to me. Any time I’ve wanted to quit over the past four years, knowing you were looking up to me kept me motivated to do my best. As you grow into a remarkable young man, it is I who looks up to you.

I owe unending gratitude to my wonderful parents, James and Collette Dickman. Thank you for supporting me unconditionally. Thank you for encouraging me to be myself and to dream big. Thank you for being proud as long as I am happy. Thank you for instilling in me the importance of sticking up for those who cannot do so themselves, which was a major inspiration for this work. I love you both, always.

Thank you to my fiancé, Mitchell Hayslett, for heeding my request to read this work in its entirety and still loving me at its conclusion. I am so thrilled we got to take this journey together. Thank you for your strength, love, companionship, and support, and for always being up for take out when things got too stressful. I cannot wait for what lies ahead.

Thank you to Dr. Chad Blunt for being my advocate throughout these past four years. There is no telling what would have happened to me if not for your tenacity and selfless commitment to your profession. I cannot express how much everything you’ve done for me means. Thank you for always being just a text message away.

Thank you to Dr. Bradley Champagne for saving my life. Everything I have accomplished and will accomplish after October 26th, 2015 is to your credit. Thank you for holding my hand during the scariest times in my life. This work would not exist without you.
Abstract

The factors that contribute to any society’s view of disability are many in number and complex in nature. When encountering a society where negative attitudes towards people with disabilities are pervasive, it is necessary to identify and expound on the conditions that contribute to such attitudes in order to change the society’s narrative on disability. By all accounts, the Chinese perspective of disability is overwhelmingly negative. In light of this, I seek to explore evidence of cultural bias against people with disabilities in Chinese family planning legislation. I begin by describing the Chinese view of disability through the study of Chinese language, history, culture, and social welfare. I argue that the origins of China’s negative view of disability are found in these elements. I then explore how the eugenics movement in China compounded the effects of entrenched cultural bias towards people with disability. Lastly, I explore China’s One Child Policy and Maternal and Infant Health Care Law in depth to prove that China’s family planning laws reflect and reinforce negative attitudes towards disability.
Introduction

As an American, the structure of Chinese government has always been fascinating to me. Perhaps it is because of the evolution of Chinese government from dynastic rule to a contemporary, one-party state. Perhaps it is the lack of executive transparency enjoyed by the Chinese populace that juxtaposes itself against my own country’s system of government. Perhaps it is because there is no government structure more at odds with American values than that of Communism. Most of all, I am intrigued by the way the Chinese government ensures legislation permeates the daily life of its constituents. From household registration to the restriction of reading material, the Chinese cannot escape the often-encroaching influence of their government on daily life. The most striking of public laws governing private life are China’s family planning laws. Although recent years have seen a relaxation of these laws, their contents can be very revealing of Chinese cultural values. Two articles of China’s family planning legislation, the One Child Policy and the Law on Maternal and Infant Health, are very telling when it comes to Chinese attitudes towards congenital disabilities.

China’s attitudes towards disability have been widely described as negative. Chinese attitudes towards fetuses, children, and adults with disabilities are largely discriminatory. This discrimination is concretely observed in low self-reported levels of quality of life among people with disabilities. This experience is the equally dismal for those with congenital disabilities and those with acquired disabilities. Coupled with a

---


lack of government initiatives benefitting the disabled community such as social security provisions, there is a plethora of evidence reflecting negative attitudes towards people with disabilities in China. Discrimination against people with disabilities comes, in part, from China’s goal of modernization, emphasis on economic prosperity, and other political initiatives. People with disabilities are viewed as lost biocapital, unable to contribute to the national cause as an able-bodied person would. Even fetuses with disabilities are viewed in light of their perceived lack of potential in comparison to an able-bodied fetus. Aside from political objectives, negative attitudes towards the disabled community in China are intimately tied to Chinese support for eugenic theory.

The widespread acceptance of eugenic theory in China led to the incorporation of eugenic elements in China’s family planning laws. Eugenics received such esteem in the Chinese scientific community at its origination in China that the word eugenics still does not carry a negative connotation in China as it does internationally. The eugenics movement served as the foundation for much of China’s family planning legislation. This is most evident when examining China’s One Child Policy and Law on Maternal and Infant Health Care.

China’s One Child Policy, promulgated in order to control China’s population, is proven to have been based on a political agenda rather than purported demographical concerns in relation to modernization. The One Child Policy is at odds with China’s

---


traditional family structure, the interaction with which devalues children with disabilities as a result of their perceived inability to provide for their parents in old age. Because children with disabilities are less likely to be able to care for their parents financially, couples whose firstborn has disabilities are permitted to have a second child without penalty. This state sanctioned ability to ‘try again’ after having a child with disabilities results in the devaluation of children with disabilities under the One Child Policy. This law also contributes to overwhelming statistics in regards to infant abandonment. A high percentage of abandoned infants in China have disabilities, corroborating the undesirable nature of children with disabilities that results from the One Child Policy’s interaction with the traditional family structure in China. This is concrete evidence of the negative attitudes against children with disabilities perpetuated by China’s One Child Policy. The high incidence of fines and low incidence of incentives for cooperation with the One Child Policy ensures that the negative attitudes towards children with disabilities perpetuated by the policy are internalized by the country’s people. This demonstrates how China’s socialist construction reinforces the negative attitudes against people with disabilities present in Chinese family planning laws.

China’s Law on Maternal and Infant Health Care further reflects negative attitudes towards those with congenital disabilities. Although the law’s aim was to improve healthcare for infants and their mothers as part of the country’s efforts to modernize, this law contains language that is overtly discriminatory towards people with


disabilities\textsuperscript{10}. The law is clearly rooted in eugenic practices and advocates for the abortion of fetuses with disabilities\textsuperscript{11}. The language of the law is explicitly eugenic in origin and treats fetuses with congenital disabilities as a phenomenon that is to be avoided at all costs. Most strikingly, the law provides for free abortions for fetuses with congenital disabilities. Evidence of discrimination does not come more forthright than state subsidized abortion of fetuses with congenital disabilities as provided by the Law on Maternal and Infant Health Care. The enforcement of this law at all levels of government down to the village level ensures that these negative attitudes permeate the consciousness of the Chinese people\textsuperscript{12}. Taken together, it is clear that China’s One Child Policy and Law on Maternal and Infant Health Care reflect negative attitudes towards congenital disabilities.

There is little existing discussion of China’s family planning laws as they relate directly to China’s attitudes towards congenital disabilities. The eugenics movement in China has been historically analyzed and the effects of the One Child Policy and Law on Maternal and Infant Health Care have been explored, but only laterally related to the country’s attitudes towards its disabled community. China’s attitude towards people with disabilities as reflected by family planning laws has been explored as an afterthought. Instead of relating China’s One Child Policy and Law on Maternal and Infant Health Care directly to attitudes towards congenital disabilities, the conversation typically centers on their economic impact or even the disturbing nature of eugenics in general.

The direct relationship between eugenics-based legislation operating under the guise of


\textsuperscript{12} Therese Hesketh, “Health in China: Maternal and Child Health in China,”.
measure measures to improve economic growth and China’s negative attitudes towards congenital
disabilities must be explored. This will provide insight as to how the lives of people with
disabilities in China can be improved, as well as predict future evolution of China’s
attitudes towards congenital disabilities as the One Child Policy and Law on Maternal
and Infant Health Care are modified and even repealed. This gap in the narrative on
disability in China presents a valuable opportunity for study.

This work examines how two particular Chinese family planning laws, China’s
One Child Policy and the Law on Maternal and Infant Health Care, reflect negative
attitudes towards congenital disabilities. The first chapter provides an overview of
disability in China, explains disability as represented in Chinese language, discusses the
evolution of the idea of disability throughout Chinese history, explores disability as
defined by Chinese culture, discusses attitudes on acquired and congenital disabilities,
and outlines the living conditions and experiences of people with disabilities in
contemporary China. The second chapter discusses the eugenics movement. Specifically,
it explores the history of the international eugenics movement; the use of eugenics in the
Chinese context; and the evolution of eugenics in Qing China, Republican China, Mao’s
China, and Post-Mao China. The third chapter examines the first of two Chinese family
planning laws, China’s One Child Policy. Chapter three provides an overview of the One
Child Policy, delineates the negative impacts of the policy on China as a whole, and
explores the intersection of the policy with disability. The fourth chapter investigates
China’s Law on Maternal and Infant Health Care, the eugenic components of this law,
and the specific articles in this law that reflect negative attitudes towards congenital
disabilities. In both the third and fourth chapter, I examine how these laws are enforced,
emphasizing the role China’s socialist construction plays in increasing the impact of law and policy in the lives of its people.
Chapter 1

Introduction

To understand how China’s family planning laws reflect attitudes on congenital disabilities, we must first explore these attitudes. A member of any society is raised in a framework of certain unquestionable facts. These facts are the cultural norms of our society, and we grow up assimilating these norms into our own unique worldview. It is often not until later in life, challenged by exposure to worldviews unlike our own, that we critically examine the deeply held belief systems bestowed upon us by our upbringing. It is at this juncture, critiquing our core attitudes, that we question where the views we have come to regard as the true way of the world came from.

Upon looking inward at our own views and attitudes, we realize these views are anything but our own. The beliefs we take as fact from an early age are artifacts of the societies in which we were raised. Rather than novel perspectives of our own creation, our attitudes regarding a number of issues are a conglomeration of our cultural environment. Innumerable factors, including religion, ethnicity, geographical location, historical experience, shared memory and more, combine to comprise the attitudes of the members of any society.

By articulating our attitudes on an issue, we can begin to critically examine them. From this critical examination, we can hope to determine the origins of these attitudes, delineating the intermingled conglomeration of factors that led us to develop these beliefs. By deconstructing our belief system into its respective components, we demystify the cultural norms and societal beliefs that influence us. It is here in this process of
introspection that we can eradicate inherited bias and view our world through a lens no longer clouded by legacy.

The evidence of the way the views of our society color our personal views is evident in the disparities among the nature of each society’s definition of disability. As Stein asserts, “…the category of individuals labeled as ‘disabled’ is a social construct, and thus culturally variable”\(^\text{13}\). This is evident in the discrepancies between self-reported numbers of citizens with disabilities between states, ranging from twenty percent in New Zealand to less than one percent in Kenya. The differences in the numbers of individuals with disabilities between societies is not consistent with higher levels of health care or some genetic proclivity of certain peoples to be able-bodied, but are symptomatic of differing definitions of disability across cultures. By deconstructing what contributes to these differing definitions, we can dismantle arbitrary biases against people with disabilities and make each society more accessible to those who differ from the mainstream.

\textit{Disability in Chinese Language}

The Chinese language translations of words used to describe people with disabilities are quite telling in regards to Chinese attitudes towards disability. Prior to the 1990s, the term most frequently used to describe individuals with disabilities was \textit{canfei}, translating roughly to “useless due to handicap”. Over time, this terminology evolved and

was replaced by *canji*, meaning “handicapped” and “ill”\(^\text{14}\). The term *canji ren*, or “handicapped” and “sick person” is used as well, albeit less frequently. These translations demonstrate in clear language the way disability is framed in the mind of the Chinese. While the term *canfei* is now obsolete in China, its use until the 1990s is telling of the Chinese view of disability. Referring to individuals with disabilities as useless demonstrates a markedly negative attitude towards the disabled community. In addition, this term shows a clear devaluation of the lives of people with disabilities and an assumption of their little value to society based on their disability. Although the evolution of Chinese language describing people with disabilities from *canfei* to *canji* may be indicative of a social climate more favorable for people with disabilities, the use of *canji* is still somewhat problematic.

Although *canji* takes a descriptive tone rather than the derogatory tone of *canfei*, this term also illuminates the way in which disability is thought about in China. The idea of disability as reflected in language is centered on illness and defect. The emphasis on illness and handicap rather than individuality is indicative of the subscription of China to the medical model rather than the social model of disability. Attitudes towards disability and disability legislation in China have been markedly medical-based\(^\text{15}\). The medical model of disability views disabilities as medical conditions to be treated, with the ultimate goal of complete rehabilitation and ‘normal’ function. The medical model puts the onus of disability on the individual, as a flaw or defect. In other words, the medical model of disability “…narrowly sees disability as residing within the individual rather


\(^{15}\) Michael Ashley Stein, "China and Disability Rights," 2.
than within the interaction of the individual’s condition and the social environment in which he or she resides”\textsuperscript{16}. Conversely, the social model of disability puts the onus of disability on society. The social model asserts that society places barriers in the way of people with disabilities by creating infrastructure and social norms that make society itself inaccessible to individuals with disabilities. If society were to remove these barriers, the social model maintains that disability would no longer exist. While neither the social nor medical model are uniformly accepted more than the other among disability advocates, China’s use of the medical model negatively influences disability legislation, which will be explored later.

While \textit{canji} reveals China’s subscription to the medical model of disability, the infrequent use of \textit{canji ren} is demonstrative of Chinese attitudes towards disability as well. This is the only term for a person with disability that uses \textit{ren}, the Chinese word for person. The more frequently used \textit{canji} does not acknowledge the personhood of the individual with disabilities, and instead focuses on their illness or lack of capability. The rare use of ‘people first’ terminology to describe people with disabilities in Chinese language is worth expanding on here. A ‘people first’ term, preferred by Western disability advocates, puts an individual’s personhood before their disability when referring to someone who is disabled. For example, instead of using the terms ‘disabled person’, ‘handicapped person’, or ‘special needs person’, ‘people first’ terminology would dictate one say ‘person with a disability’, ‘person who is handicapped’ or ‘person with special needs’. Disability advocates stress the importance of such terminology, maintaining that this language puts the individual first, thus acknowledging their identity

before their disability. While the lack of ‘people first’ terms in Chinese language may not be directly reflective of Chinese attitudes towards people with disabilities, it is important to note here. This signals a clear departure from Western ideas of disability and the most current language used by disability advocates internationally, indicating either a rejection of ‘people first’ notions of disability or a cultural difference in the way disability is thought about.

The lack of ‘people first’ language used to describe people with disabilities in China is not the only way Chinese language reveals the way people with disabilities are denied personhood in Chinese society. The terms used to describe a fetus with disabilities are remarkably ignorant towards the personhood of individuals with disabilities. While observing the clinic encounters of pregnant women in China in the mid 2000s, Jianfeng Zhu, assistant professor in the School of Social Development and Public Policy at Fudan University, detected the use of discriminatory language towards fetuses suspected of having a disability. While both doctors and pregnant women referred to the fetus as *baobao* (baby) initially, upon the detection of a potential disability, their language changed immediately. They began using *tai’er* (fetus) to describe what had been, moments ago, a baby. While I make no assertion to the personhood or lack thereof of a fetus, I argue that this change in language from *baobao* to *tai’er* is demonstrative of a downgrading of the perceived personhood of the child in question. While *baobao* can also describe a person of very young age, *tai’er* can only describe a fetus existing inside a mother’s womb. In other words, *tai’er* lacks the personhood status that *baobao* implies. Therefore, referring to an unborn child as *baobao* and acknowledging its current status as

a human being, then abruptly changing to tai’er, shows a purposeful downgrade from independent personhood to medically quantifiable existence inside the womb. It follows that while a fetus showing no signs of disability is called baobao, a fetus at the same stage of development with a detected disability is termed tai’er, thus representing devolution from person to object. This is corroborated by the use of the word ta, “it”, and dongxi, “thing” in public education classes when describing a fetus with disabilities.18 Taken together, the language used to describe both fetuses and people with disabilities in China denies their independent personhood.

Disability throughout Chinese History

While the Chinese words to describe disability have remained relatively unchanged over time, the social concept of disability has not. As Chinese society has evolved, so has the Chinese concept of disability. In early China, body difference and physical abnormality were not necessarily negative.19 Popular deities and legendary figures often had physical appearances that differed from the mainstream. This neutral image of body difference began to change in the second century, when literati such as Cai Yi labeled those with physical abnormalities as non-Chinese outsiders, ugly, and unworthy. This neutral to lukewarm hostility in early China remained until the early 1900s.

Republican China saw an evolution in the Chinese concept of disability. By this time, the negative attitudes of early Chinese literati had prevailed. Disability was viewed

---


as a deformity and a disease. Late Qing reformers like Kang Youwei, Yan Fu and Liang Qichao, in an effort to transform China in the wake of the Sino-Japanese War, claimed that the physical strength of China’s population was directly related to the nation’s power. This prompted an emphasis on eradicating disabilities through the control of reproduction, enhancing China’s overall strength as a result. National regeneration efforts also led to an increased emphasis on science during this time. Chinese promotion of science and national strength through controlled reproduction served as the foundation for China’s eugenics movement, which will be discussed in depth in chapter two.

Conditions for Chinese people with disabilities improved with Mao’s seizure of power in 1949. For the first time in Chinese history, the Chinese government addressed the issue of scarce economic resources for families of individuals with disabilities, and China saw small improvements in care for people with disabilities. I offer that this may be as a result of Mao’s effort to mobilize all of China, regardless of disability, in the efforts to rebuild China in the Communist image. Although the People’s Republic of China saw improved living conditions for its constituents with disabilities during its early years, these improvements were not without their flaws. The same Maoist philosophy of the contribution of all of China’s people to the nation’s regeneration negatively impacted China’s disabled community as well. The image of the “active and productive body” Mao emphasized to contribute to the nation’s strength reflected negatively on people with disabilities who may not be able to contribute physically in the same way others would.

In addition, any progress under Mao was achieved at the same time eugenic principles

---

20 Xun, Zhou, "The Discourse of Disability in Modern China," 106.

21 Xun, Zhou, "The Discourse of Disability in Modern China," 111.

were supported by the government and incorporated into legislation\textsuperscript{23}. Improvements in living conditions for people with disabilities occurring concurrently with eugenic legislation demonstrate an ideological inconsistency. Although improvements in the lives of people with disabilities would suggest the Chinese government promoting a positive image of people with disabilities as worthy of social resources, this idea is logically inconsistent with the concurrent promulgation of legislation advocating for the forced sterilization of people with disabilities and state sanctioned abortion of fetuses with disabilities. This inconsistency in action demonstrates that the Chinese government under Mao likely did not promote a positive image of the disabled community based on morality, but allocated resources to help people with disabilities in order to serve the government’s own agenda.

Regardless of time period, superstitions have consistently influenced the way China views disability. Some disabilities are considered punishment from deities or blamed on spirits afflicting an individual\textsuperscript{24}. There is a great deal of superstition regarding behavior during pregnancy that may result in a fetus with disabilities. Some of these include an unbalanced diet, emotional issues, and temper tantrums during pregnancy. Some superstition may result from popular religion in China, such as the fear that karmic consequences from a past life may result in disability in one’s current life\textsuperscript{25}. These superstitions and others like them interact with the dominant view of disability throughout history and negatively impact Chinese attitudes toward disability.

\textsuperscript{23} Xun, Zhou, "The Discourse of Disability in Modern China," 111.

\textsuperscript{24} Gloria Zhang Liu, "Chinese Culture and Disability: Information for U.S. Service Providers," 8.

Disability in Chinese Culture

Aside from negative attitudes towards disability revealed in Chinese language and as prompted by China’s political history, there are also cultural customs that normalize the marginalization of China’s disabled community. One of the Chinese cultural customs that foments negative attitudes towards people with disabilities is the Chinese concept of personhood. The two main markers of personhood in China are work and marriage\textsuperscript{26}. Through work and marriage, the Chinese gain individual identity and an identity within their community. Without a job or a partner, a person in Chinese society may feel that they lack personal identity, or may find themselves looked down upon by their community. This is the case for individuals with disability in China. There are innumerable barriers between people with disabilities and securing a job and finding a partner. In fact, in 2006, people with mild disabilities in China were 20\% less likely to be employed than their able bodied counterparts\textsuperscript{27}. Those with serious disabilities experienced even more difficulty securing employment, being 46\% less likely to be employed. Statistics regarding marriage of people with disabilities are less disparate from the able bodied population, reflecting 12\% and 24\% lower marriage rates for mild and severe disabilities, respectively. The lower employment and marriage rates for people with disabilities in China demonstrate the difficulties with which Chinese people with disabilities have access to the main markers of personhood in Chinese culture. Without being able to achieve independent personhood by Chinese cultural standards, the lives of people with disabilities suffer greatly. Lacking personhood, they are dismissed by their


\textsuperscript{27} Loyalka et. al, “The Cost of Disability in China,” 104.
community, reinforcing already discriminatory views of people with disabilities. This is likely one of the reasons Chinese people with disabilities report low levels of inclusion in Chinese society. The inability of people with disabilities to find employment and a partner likely reflects structural barriers in the form of discrimination resulting from negative attitudes towards disability in Chinese culture.

Evidence of employment discrimination against people with disabilities in China is striking. Most private employment available to people with disabilities is low-waged and low-status work. Some may argue that this is evidence of a lower level of education in this demographic. Despite legislation guaranteeing equal access to education for people with disabilities, it is true that the disabled community encounters difficulty in accessing opportunities to develop necessary skills to secure employment. However, the same barriers to employment exist for the small population for high-achieving graduates with disabilities as for the rest of the disabled population. This demonstrates without question the existence of negative employer attitudes towards potential employees with disabilities. This is corroborated by the preference of most state and private employers to pay a fine rather than adhere to the state sanctioned 1.6% quota of employees with disabilities. Especially in light of equal access to education for people with disabilities and the lack of legal requirement to spend any profit on accommodating employees with disabilities, there is no explanation for the employer preference to pay a fine rather than


hire an employee with disabilities other than negative, discriminatory attitudes towards individuals with disabilities. The use of a quota system to guarantee employment for people with disabilities is problematic itself. Michael Stein, executive director of the Harvard Law School Project on Disability, argues that the use of quota systems “… arise from charitable motivations that do not accord persons with disabilities equal and rights-based access to the open labor market”\(^\text{32}\). When employers choose to adhere to China’s quota system, they do not always do so honestly. In fact, there is evidence of disabled people on payroll that have been paid to stay home\(^\text{33}\). This is a blatant effort on behalf of employers to keep individuals with disabilities out of their workplaces. Taken together, the low-status, low wage work available to individuals with disabilities; scarcity of work available for individuals with disabilities; and employer preference to pay fines rather than hire employees with disabilities demonstrate negative employer attitudes towards people with disabilities. This proves the difficulty with which Chinese people with disabilities have in accessing the major markers of personhood in Chinese culture.

Chinese people with disabilities have just as much difficulty finding a partner as they do gaining employment. The rarity with which people with disabilities in China achieve economic independence is one reason they struggle to find a partner\(^\text{34}\). Without financial self-reliance, people with disabilities are considered not to have truly achieved adult status, and as a result are unsuitable for marriage. Another contributing factor to lower marriage rates in the Chinese disabled community is traditional Chinese gender roles. In traditional Chinese culture, women were expected to stay in the house and tend

\(^{32}\) Michael Ashley Stein, "China and Disability Rights," 5.


\(^{34}\) Emma Stone, “Experience of Disability: China,” 661.
to the children, while men were expected to be out of the house and supporting the family. The gender expectation for men to be active and independent is problematic for men with disabilities who may not be able to do so. Gender norms do not impact women with disabilities in China as much as men with disabilities, as the female gender expectation to stay within the domestic domain is less at odds with the capabilities of a person with disabilities. Lack of economic independence and gender roles are compounded by negative mainstream attitudes towards people with disabilities to contribute to the difficulty with which Chinese people with disabilities have in accessing another main marker of personhood in Chinese culture. Without marriage and without work, Chinese people with disabilities lack personhood, and are thus ostracized by their community.

While the infrequency with which people with disabilities access the main markers of personhood in Chinese culture would be enough to foment negative cultural attitudes towards the disabled community, it is not the only cultural element that contributes these negative attitudes. China’s traditional family structure foments negative attitudes towards people with disabilities. In Chinese culture, children are expected to provide for and take care of their parents physically, emotionally, and financially upon reaching adulthood. This is nearly impossible for people with disabilities, who often struggle to provide for themselves in these ways. This leads to resentment on behalf of their parents and criticism from their community. Because people with disabilities struggle to fulfill their filial responsibilities and thus adhere to the structure of the traditional Chinese family, they are looked down upon in Chinese society. The high
incidence with which people with disabilities are unable to care for their parents negatively impacts the view of people with disabilities in Chinese culture.

Aside from filial responsibility, China’s traditional family structure emphasizes familial interdependence. Family is one of, if not the most important social relationship in Chinese culture. Because Chinese families are so dependent on one another, the responsibility to care for the individual with disability falls on their family members. Most people with disabilities in China’s source of direct care, assistance, and support is a family member. Because this heavy responsibility falls on the family, the family may perceive their loved one’s disability as a burden. The lower income levels of Chinese households with members with disabilities and the extra costs of disability on top of lower levels of income enhance the likelihood of feelings of burden. When families view loved ones with disabilities as burdens, negative attitudes towards disability are reinforced.

While family relationships impact cultural attitudes towards people with disabilities, cultural attitudes towards people with disabilities also impact family relationships. There are numerous works testifying to negative public attitudes towards disability. The contributing factors to these negative attitudes have been outlined in depth previously. This great stigma attached to disability in Chinese society impacts family relationships immensely. Negative cultural attitudes give rise to guilt and shame

---


plaguing family relationships within families of individuals with disabilities. This shame towards the outside world’s view of the family and guilt shared between people with disabilities and their family members reinforce negative attitudes towards people with disabilities in Chinese culture. Upon observing these family relationships impacted by guilt and shame, those who view people with disabilities negatively see their prejudices substantiated.

_A Congenital Versus Acquired Disability in the Eyes of the Chinese_

A defining characteristic of the Chinese concept of disability is the distinction between congenital and acquired disabilities in Chinese culture. Individuals with congenital disabilities are treated more negatively than people with acquired disabilities in China. A 1997 study quantified this cultural bias, finding that Chinese students were markedly less positive in their attitudes towards congenital disabilities versus acquired disabilities. The lower levels of acceptance and higher incidence of negative attitudes towards individuals with congenital disabilities in Chinese culture could be attributed to several factors. Because congenital disabilities are thought by the Chinese to be linked to wrongdoing or neglect in pregnancy, incidence of congenital disability exacts particular shame upon the family of the individual with the disability, especially the mother. This supposition may lead others to view an individual with a congenital disability as evidence of their family’s neglect and overall low caliber. This judgment, together with the fact

---


that the weight of familial shame cannot be understated in terms of Chinese culture, may explain why individuals with congenital disabilities are viewed more negatively than individuals with acquired disabilities. Another reason for this may be the influence of Deng Pufang, former leader Deng Xiaoping’s eldest son. Deng Pufang became a paraplegic after falling from a window. After being rehabilitated from his accident, Deng Pufang used his family’s political power to establish the China Welfare Fund for the Disabled, and founded the China Disabled Persons’ Federation. Deng Pufang greatly increased the visibility of those with acquired disabilities, promoting a positive view of this demographic to mainstream China. I also offer China’s socialist construct as an alternate explanation for the disparity between attitudes towards congenital and acquired disabilities. Great emphasis has been placed on a strong work ethic in Chinese history, especially during the Cultural Revolution. The Red Guard violence during this time period, coupled with rapid industrialization, undoubtedly led to a higher incidence of individuals with acquired disabilities. Therefore, Chinese culture may see acquired disabilities with the possibility of the disability resulting from political strife or hard labor, thus assigning a more positive connotation than that of congenital disabilities.

Regardless of the reason why there is such demarcation between congenital and acquired disabilities in Chinese culture, it makes this topic of study all the more relevant. We must fully describe the negative attitudes of the Chinese against individuals with congenital disabilities to remedy them.

Legislation and Social Welfare for Chinese People with Disabilities

---

Those who deny the prolific nature of negative attitudes against individuals with congenital disabilities in China may cite the Chinese legislation protecting individuals with disabilities as evidence to the contrary. There are, in fact, several pieces of legislation, organizations, foundations, and committees founded by the state and by private citizens in China that advocate for the rights of China’s disabled community. These include, but are not limited to, the China Fund for the Disabled, Chinese Disabled Persons’ Federation, China Rehabilitation Research Center, The People’s Republic of China’s Law on the Protection of Persons with Disabilities, National Help the Disabled Day, and the State Council’s Disability Coordination Committee. Although these initiatives may be numerous, they do not achieve their desired purpose. In terms of economics, “social security policies are not enough to offset existing income differences, much less cover the extra costs of disability." Existing social security policies are not only insufficient, but also largely fail to target the disabled community specifically, indicating the disabled community’s lack of priority. Regrettably, social security policies are not the only Chinese policy initiatives for individuals with disabilities that are inadequate.

The Law on the Protection of Persons with Disabilities falls short of its desired effect as well. The law states its purpose in its first article,

This law is formulated in accordance with the Constitution for the purpose of protecting the lawful rights and interests of, and developing undertakings for, disabled persons, and ensuring their equal and full participation in social life and their share of the material and cultural wealth of society.


As previously stated, Chinese people with disabilities report a low level of social inclusion in Chinese society, demonstrating shortcomings in the law’s efforts to ensure “equal and full participation in social life”\textsuperscript{46}. In addition, people with disabilities in China report low levels of quality of care and support, indicating that the law’s efforts to “protect the lawful rights and interests” of China’s disabled community are also falling short\textsuperscript{47}. Furthermore, although the law purports efforts to give people with disabilities access to “their share of the material and cultural wealth of society”, the law has been unsuccessful in terms of material wealth. Chinese households with people with disabilities report lower income levels and a lower standard of living\textsuperscript{48}. This is not to mention the barriers Chinese individuals with disabilities face to gain employment and accrue wealth previously discussed. Evidence of the low socioeconomic status occupied by individuals with disabilities in China proves that they are not, as the Law on the Protection of Persons with Disabilities proclaims as its purpose, receiving an equal share of the material wealth of society. The part of its purpose this law does fulfill is the commitment to creating undertakings for people with disabilities. China has state run rehabilitation services that benefit people with disabilities\textsuperscript{49}. Whether these services result from a desire to better the lives of China’s disabled population or from efforts to gain


\textsuperscript{47} Qiao-Lan Zheng et al., "The Role of Quality of Care and Attitude Towards Disability in the Relationship between Severity of Disability and Quality of Life: Findings from a Cross-Sectional Survey among People with Physical Disability in China," 5.


\textsuperscript{49} Gloria Zhang Liu, “Chinese Culture and Disability: Information for U.S. Service Providers;,” 11.
economic benefit from their rehabilitation and return to the workforce has yet to be determined.

Chapter 2

Introduction

With a firm understanding of Chinese attitudes on disability as presented in Chinese language, history, culture, legislation, and social welfare, it is imperative to determine from where these attitudes originate. The foundation of these attitudes in concepts of body difference, the stances of early Chinese literati, Maoist political motivations, superstitions, markers of personhood, cultural emphasis on filial piety, and China’s traditional family structure has been fully explored previously. However, another theme is intimately tied to attitudes on disability that has yet to be explored: the widespread subscription to eugenic beliefs in China. While widespread support for eugenic practices is found both in the Chinese government and among China’s people, this support does not indicate a causal relationship between eugenic thinking and negative attitude towards people with disabilities. A negative view of China’s disabled community was fully engrained in Chinese consciousness before eugenic principles were conceptualized, let alone introduced in China or incorporated into government agenda. This absence of causation does not make eugenics any less relevant to Chinese attitudes towards disability, however. In fact, I argue that eugenic principles reinforced negative attitudes towards people with disabilities, enhanced the popularity of such attitudes, and
made these attitudes quantifiable in the sense that they could be incorporated into national legislation, agenda, and initiatives.

Before eugenics in the context of China is explored, it is important to note that this idea was of foreign origin. Eugenics, or “the study of human improvement through genetics”, originated in Britain in the late 19th century. Francis Galton, regarded as the ‘father’ of eugenics, applied Darwin’s Theory of Evolution to societal development, asserting that some individuals were of greater value to society than others. Using this logic, Galton argued that society could be improved through social engineering. This social engineering entailed preventing individuals of less societal value from procreating, thus preventing them from passing on their undesirable traits to future generations and improving the future of society as a result. The proposed modus operandi for preventing the reproduction of less valued individuals was sterilization. As eugenics became the main scientific focus of the time, supporters radicalized these ideas, suggesting euthanasia as a means of preventing the reproduction of undesirables. Euthanasia was not as widely accepted of a eugenic tool as was sterilization, but certainly achieved more recognition as a result of its most recognized supporter: Nazi Germany. Although ideas like sterilization and euthanasia are now virtually universally accepted as cruel, archaic infringements upon personal liberties and grave violations of human rights, governments worldwide openly endorsed eugenics in the late 19th and early 20th centuries.

---


government leaders began to apply it to the Chinese context. As the Chinese government began to use eugenics as an ideological tool and eugenic principles became household concepts, existing negative attitudes towards disability in China devolved even more.

_Eugenics in Translation_

As previously outlined, the principles of eugenics were not conceived using Chinese language. Eugenics in translation is quite descriptive of the Chinese application of the word. When eugenic theory made its way to China, it was referred to as _ren zhong gai liang_ (improvement of race), _shu zhong xue_ (science of racial betterment) or _zhe si xue_ (science of intelligent descendants)\(^53\). The term _ren zhong gai liang xue_ (the knowledge of racial improvement) was the most widely accepted early term for eugenics, as it appeared in the Zoology Dictionary of 1922\(^54\). As eugenics was studied further in China, the language used to refer to this field evolved. Currently accepted Chinese terms for eugenics include _you sheng_ (quality birth)\(^55\); _you sheng you yue_ (better birth, better care)\(^56\); and _you sheng xue_ (science of superior birth), added to the Chinese national register of scientific terminology in 1941\(^57\). Here, we can observe that the concept of eugenics evolved from primarily race-based to concentrating on family planning. This


reflects the presence of eugenic theory in Chinese family planning laws that will be discussed later.

It was not only the language of eugenics that differed from Western language, but also the connotation of eugenics in the Chinese context. After WWII and as a result of Nazi implementation of eugenic theory in the crimes of the Holocaust, eugenics took on a negative connotation in the West. No longer the up and coming field of scientific inquiry, the mention of eugenics evoked images of genocide, monstrosity, and mass murder in Western minds. Although this change was evident in the West after WWII, eugenics did not develop the same ominous meaning in China. Taking on a meaning closer to the Western concepts of “genetic counseling, genetic screening, or clinical genetics”, eugenics is still referred to in China today, absent of pejorative overtones\(^{58}\). While in the West eugenic theory would be intimately tied to efforts in racial purification, the Chinese use of this term is generally incorporated into discussions of purported national health concerns. Whether the official use of eugenic theory in China is solely to remedy national health issues or does indeed have racial motivations is up for interpretation. Regardless, this difference in connotation of the word ‘eugenics’ in the West and in China is crucial to understanding the modern incorporation of eugenic theory in Chinese legislation.

*Eugenics in Qing China*

Although eugenic theory was not conceived until the late 19\(^{th}\) century, the foundation for eugenic thinking was present in late imperial China. As previously discussed, individual disability was viewed as a detriment to the nation as a whole as a

---

result of the linkage of the wealth and power of a nation to the physical strength of its constituents by Qing reformers such as Kang Youwei, Yan Fu, and Liang Qichao\textsuperscript{59}. Because the physical strength of the individual was directly related to the wealth and power of the nation by these reformers, negative sentiment towards disability in Chinese culture was reaffirmed; disability, assumed to be a detriment to individual physical strength, was perceived as a detriment to the wealth and power of the nation. As it follows, disability was viewed in Qing China as injurious to national power, and out of this view came concerns with population quality as a whole. With the support of leading scholars, concerns with the physical strength and quality of China’s ever-increasing population began to arise during the Qing dynasty. Later, these concerns would take concrete form in family planning legislation.

Trepidation regarding China’s constantly growing population and the quality of said population was rampant in China at the same time changes in the perception of race and ethnicity were taking place\textsuperscript{60}. The combined result of these ideological changes in China was the emergence of the concept of population as a subject to be governed. Gary Sigley with the University of Western Australia expanded on this phenomenon, arguing,

To be Chinese… now meant belonging to a race, and an inferior one at that. The concept that the vital statistics of a population are not only measurable but also comparable with other populations is located in the social Darwinist and eugenic discourses that dominated the way in which nations were thought to coexist. Government had to intervene in order to preserve the Chinese race\textsuperscript{61}.


As a result of the intersection of concerns with China’s increasing population, the quality of said population, and changes in the way race and ethnicity were perceived in China, population became subject to government intervention. To improve the perceived quality of the population as a whole and in comparison to other nations, the Chinese government began to promulgate legislation that utilized eugenic theory. As we can now see, these important ideological shifts in late Qing China primed China for the popular dominance of eugenic theory before such theory was even conceived.

**Eugenics in Republican China**

While the late Qing period saw a shift in the way population and race were perceived, Republican China was characterized by the rise of modern science. As the imperial system collapsed, modern science filled the vacuum vacated by cosmological thinking and Confucianism. Science came to be regarded as the method by which China could achieve national regeneration in the wake of the fall of the Qing empire. This emphasis on scientific inquiry in Chinese government and culture occurred during the same time the field of eugenics was gaining worldwide momentum. This fact, combined with the ideological shifts that took place in late Qing China, led to the subsequent employment of eugenic theory by the Republican Chinese government.

The emphasis on both science and race in Republican China greatly increased the study of disability in China. People with disabilities appeared for the first time in medical texts under the category of inbreeding. Because the physical capabilities of a person

---


were intimately tied to the strength of a nation according to contemporary scholarly thought, disability was viewed as a social problem that eugenics could solve. In other words, “…public health was expressly linked to the goal of regenerating the nation and proponents of eugenics argued that people with ‘subnormal abilities’ should be physically prevented from ‘perpetuating their infirmaries’”64. Predictably, the Chinese government began to incorporate eugenic principles like selective breeding and sterilization in efforts to improve population quality and thus enhance national status.

The Nationalist government first incorporated eugenics into state action in the creation of the Committee for the Study of Population Policy by the Ministry of Social Affairs in 1941. This committee applied eugenic principles to China’s population policy, recommending sterilization for people with disabilities and the segregation of people with physical and mental disabilities for the benefit of “cultural advancement and racial rejuvenation”65. Soon, the eugenic theory utilized by the Committee for the Study of Population Policy was also incorporated into legislation. Eugenics was first enshrined in Chinese law in the National Population Policy passed on 5 May 194566. Conceived with the goal of strengthening the nation, the National Population Policy of 1945 was based on the eugenic theory that those with ‘inferior’ genetic qualities should be prevented from passing those qualities to future generations. Many of these ‘inferior’ qualities, such as being ‘criminally inclined’, had no true genetic basis, but were widely accepted as within


the realm of what eugenic principles could remedy. In the creation of the Committee for the Study of Population Policy and the National Population Policy of 1945, we can see eugenic principles becoming a part of Chinese government and legislation. In an effort to curb population growth and ‘improve the quality’ of the nation and race, officials in Republican China used government resources to study eugenics and enacted legislation with eugenic themes. State sponsorship of eugenics during the Republican era continued to reinforce negative attitudes towards people with disabilities in mainstream China, and provided a foundation for increasingly eugenics-based legislation in the future.

Eugenics in Mao’s China

Although Mao’s assumption of power and the formation of a one-party Chinese state in 1949 signaled a time of great change in China, this period was not marked by change in the field of eugenics. In the wake of WWII, eugenics was no longer pursued in the West due to its ideological connection to Nazi Germany. Although genetic scientists banned eugenics internationally, China reintroduced the term in 1959 in connection to the study of the ideas of Galton and Darwin. Despite China’s continued study of eugenics under Mao, China did not see new eugenic legislation under his rule. However, Mao’s political ideology and initiatives reinforced eugenic thought in China.

One of Mao’s primary political objectives was to modernize China. This modernization would improve the nation and elevate its global status to a place among other international powers. To do so, Mao looked to mobilize all of China under his

---


cause. As a result, the subordination of individual bodies to the needs of the nation became the ideological norm. Because of Mao’s goal to mobilize China’s population to modernize the nation, individual worth in Mao’s China could be assessed in terms of biocapital value to the state. Mao’s political agenda encouraged the view that individual worth was based on the economic value one can contribute to the nation. While the assessment of individual value based on biocapital value to the nation is not necessarily a eugenic concept, the use of this logic encourages eugenic thinking. People perceived to have little biocapital value to the nation, such as people with disabilities, represent lost potential to aid in the nation’s prosperity. It follows that practices that deter the presence of people of little biocapital value, such as eugenic practices, would be beneficial to the nation. This is the logic that has supported eugenic legislation in post-Mao China.

One way Mao attempted to increase the biocapital value of future generations was with the promulgation of the 1950 Marriage Law. This law declared equality between husband and wife; protected freedom of choice of partner; provided legal protection of the rights of women and children; and mandated marriage registration and pre-marriage health examinations. The latter two of these provisions are directly related to the future incorporation of eugenics-based laws into the lives of the common people. Because marriage registration was contingent on passing a pre-marriage health examination, a request for marriage could be denied based on eugenic principles. Therefore, marriage registration became a way for the state to “highlight the importance of familial and

---


reproductive hygiene”, ensuring eugenic principles permeated the consciousness of the common people. The requirement for marriage registration and pre-marriage health examination provided for by Mao would make eugenics-based legislation easier to enforce in post-Mao China.

**Eugenics in Post-Mao China**

Post-Mao China has seen China’s most blatantly eugenics-based legislation. After the reintroduction of the term ‘eugenics’ in 1959, the field slowly regained its pre-WWII momentum in China. In 1980, the Chinese Annals and Encyclopedias included an entry on “eugenic science”. Eugenics became so prolific in China that eugenic theory began to be applied to fields such as environmental science, toxicology, and neuroscience. Aside from these unconventional applications of eugenic theory, the post-Mao Chinese government has incorporated eugenic principles into legislation governing population policy. China’s One Child Policy and Law on Maternal and Infant Health Care are two examples of eugenics-based legislation in China, and their foundations in eugenic theory will be explored in depth in the remaining chapters.

The incorporation of eugenic principles into legislation in post-Mao China has been framed in terms of economics. Eugenics-based population policy has been justified as economically beneficial to the country. This was evident in the 1993 national exhibition entitled “Human Reproduction and Health”, where the lives of people with disabilities were described as not worth living and representing a heavy burden on the

---


People with disabilities are thought of as financial burdens to the state, damaging China’s national economy and draining public resources. Eugenics-based legislation was put forth as a remedy to this burden on China’s economy, which was already believed to be straining under the weight of its constantly growing population. By preventing the birth of people with disabilities with the Law on Maternal and Infant Health Care and ensuring a couple’s only child would not be disabled with China’s One Child Policy, the Chinese government looked to alleviate the perceived burden of people with disabilities on the Chinese economy. In this way, eugenics in post-Mao China continued to reinforce and even helped to proliferate negative attitudes towards people with disabilities.

《中国残疾人保障法》里的优生

正如在中国以优生为基础的立法是有问题的，对残疾人来说，优生理论的本质也是有问题的。中国的有关残疾人的法律《中国残疾人保障法》是以优生为基础的。当这个法律在一九九零年公布施行的时候，第十一条说：

国家有计划地开展残疾预防工作，加强对残疾预防工作的领导，宣传、普及好优胜和预防残疾的知识，建立健全出生缺陷预防和早期发现、早期治疗机制，针对遗传、疾病、药物、事故、灾害、环境污染和其他致残因素，组织和动员社会力量，采取措施，预防残疾的发生，减轻残疾程度。国家建立健全残疾人统计调查制度，开展残疾人状况的统计调查和分析75.

直接把优生理论放入《中国残疾人保障法》的问题在于这个法律对残疾人的态度。优生理论认为残疾人没有健康人有价值，如果一个国家想越来越强大，应该有越来

---


越少的残疾人。为了有越来越少的残疾人，优生理论认为政府应该剥夺残疾人的人身自由，给残疾人施行绝育和安乐死。中国的关于残疾人的最重要的法律加入了优生理论是令人忧惧的，因为这个法律提倡为了优生而隔离残疾人、给残疾人施行绝育和安乐死。这意味着在中国的关于残疾人的最重要的法律中，政府剥夺残疾人的正面的态度。关于残疾人的法律应该帮助残疾人，直接把优生理论放入《中国残疾人保障法》的问题在于这个法律对残疾人的态度。这不但显示了中国法律对残疾人的负面态度，也让残疾人对自己持负面的态度。因为中国政府把法律推行到村一级，相对于其它国家，中国人对自己的法律知道得更多，使得情况更严重。相对于其它国家中国人对自己的法律知道得更多二零零八年，第十一条修正为：

国家有计划地开展残疾预防工作，加强对残疾预防工作的领导，宣传、普及母婴保健和预防残疾的知识，建立健全出生缺陷预防和早期发现、早期治疗机制，针对遗传、疾病、药物、事故、灾害、环境污染和其他致残因素，组织和动员社会力量，采取措施，预防残疾的发生，减轻残疾程度。

国家建立健全残疾人统计调查制度，开展残疾人状况的统计调查和分析76。

这个修正最重要的改变是把“优生”替换成了“母婴保健”。虽然优生理论从这个法律中剔除了，但是优生理论并没有从中国关于残疾人的讨论中消失。对于国际社会，优生理论是过时的，不科学的，但是在中国，优生理论是科学，仍然受到科学家的尊重。因为优生理论仍然被尊重，很多人想到残疾人就想到优生，科学家和普通中国人对残疾人都有负面的态度。如果考察独生子女政策和《母婴保健法》，我们可以看到优生理论以及由此带来的对残疾人的负面态度。下一章我会讨论独生

子女政策，这个政策也用了优生理论。本来用来解决中国的人口问题，独生子女政策显示和强化了中国人对残疾人的负面态度。
Chapter 3

Introduction

Scientific advancement and political agenda intersected to form a fatal combination for people with disabilities in twentieth century China. As eugenics came to be regarded as the most advanced, contemporary field of study, concern was heightening in regards to China’s growing population. After a period of neglect in the wake of the atrocities of Nazi Germany in WWII, eugenics rose to prominence in China as fear of uncontrollable population increase reached a fever pitch. Government officials vied for legitimacy with proposals of how to avoid the impending buckling of China’s economy under the weight of its massive population. The result was the promulgation of family planning legislation with eugenic principles. This family planning legislation proved to be fatal for people with disabilities.

While the word ‘fatal’ may seem sensational or overemotional, it is the harsh reality faced by many people with disabilities because of eugenics-based family planning legislation. China’s One Child Policy has had particularly fatal consequences for children born with disabilities. Much to the dismay of people with disabilities and their advocates, China’s One Child Policy has seldom been studied in relation to the impact this policy has had on Chinese attitudes towards disabilities. The impact of the One Child Policy on fertility, gender discrimination, the Chinese economy, and even carbon emissions has been explored in depth, but its consequences for the country’s disabled community have proven to be an afterthought. The relationship between the One Child Policy and disability in China may not be the first thing that comes to mind when describing the implications of this policy, but this relationship is nonetheless incredibly significant. The
One Child Policy contributes to the devaluation of the lives of people with disabilities in China, contributes to their economic disadvantage, and intersects with China’s socialist construction to reinforce a negative view of the disabled in the minds of the Chinese populace.

An Overview of China’s One Child Policy

China’s One Child Policy is arguably the most easily recognized family planning law worldwide. Enacted in 1979, the One Child Policy served as China’s primary population policy for several decades. Although a highly visible piece of legislation both domestically and internationally, the One Child Policy is not as simplistic as commonly believed.

The origins of China’s One Child Policy are located in concerns regarding China’s massive and seemingly ever-expanding population. While the prospect of burdening China’s economy with a large population had been looming on the peripheries of the Chinese consciousness for most of the twentieth century, paranoia over this possibility peaked after demographic projections suggested that China must halt all population growth as quickly as possible. Although these projections were made with pseudo-scientific methods by a small number of researchers and are now understood to be wildly incorrect, they were accepted as fact in 1970s China. Growing hysteria over population growth in China combined with the announcement of these grave projections prompted government officials to adopt proactive population policy. The One Child

---

Policy was the proposed solution to the alleged population growth problem China was facing.

In order to prevent China’s economy from collapsing under the burden of an enormous populace, the One Child Policy was put forth to produce a “small quantity but high quality population”\textsuperscript{78}. The inclusion of population quality in legislation designed to target population quantity is revealing of the policy’s eugenic foundation. Despite the outright mention of population quality, the eugenic themes present in the One Child Policy have seldom been explored.

Simplistically, China’s One Child Policy limited the number of children each household could have to one. If a household did not obey this policy, it was subject to fines per above-quota child birthed as well as significant social stigma. If a household adhered to this policy, there was the prospect for subsidies and cash incentives. While this is the essence of the policy as a whole, the enforcement and particular details of the policy vary greatly across China\textsuperscript{79}.

Although China’s One Child Policy has been heralded as a monumentally successful population policy, critical examination of the policy’s impacts says otherwise. The intended purpose to curb population growth and protect the Chinese economy was accomplished in the end not by the One Child Policy, but by coercive birth control campaigns and loosening state control over the economy\textsuperscript{80}. Not only did this policy fall


short of its intended purpose, but the motives of its creators have been called into question as well. Many scholars regard the One Child Policy as largely politically motivated and lacking understanding of demography. The most significant purported accomplishment of the One Child Policy has been discredited as well. The highly publicized claim that the One Child Policy “prevented 400 million births” has been dismissed as inaccurate and misleading. These shortcomings, combined with other, undesirable consequences, led to the end of the One Child Policy effective on 1 January 2016.

**Negative Impacts of the One Child Policy**

The faults of the One Child Policy do not stop at the shortcomings discussed above. The One Child Policy also had numerous other unintended, negative consequences. One of these consequences is intimately tied to the policy’s failure to prevent the birth of more than one child per household. Because of the disincentives in place for second and third children, the “one child norm” imposed by the One Child Policy often masked the two child reality faced by many families. The One Child Policy prevented parents from registering other children, impeding their access to education, health care, and other state resources. Something as simple as birth order put a segment of China’s population at a disadvantage from birth because of the One Child Policy.

---


When couples could not hide the unauthorized birth of subsequent children, the large fines provided for by the One Child Policy caused massive financial distress for families. For some localities, reported fines for unauthorized children were approximately fifty percent of median household income\textsuperscript{84}. This is a virtually insurmountable economic burden for families to bear. The negative economic consequences of the One Child Policy are not limited to the family, but affect the nation as the whole. Although we know the decline of China’s population growth cannot be solely contributed to the One Child Policy, the restriction on fertility it reinforced has changed the demographic makeup of China’s population. This has created an aging population, which promises to burden the social welfare system\textsuperscript{85}. As less and less of China’s population is eligible to work and more and more of China’s population requires social support, the national economy will suffer.

The demographic ratio in China has been skewed in more than one way as a result of the One Child Policy. The male to female ratio at birth is skewed in favor of males, likely due to sex selective abortion\textsuperscript{86}. Abortion of female fetuses, although illegal, is practiced in China as a consequence of the One Child Policy. Where enforcement of the one child rule is strict, couples abort female fetuses in light of the cultural preference for male children. Unwanted pregnancies with female fetuses also result in a higher incidence of abandonment of female children\textsuperscript{87}. The negative impact of the One Child

\textsuperscript{84} Susan Short and Zhai Fengying, “Looking Locally at China’s One Child Policy,” 380.


\textsuperscript{86} Susan Short and Zhai Fengying, “Looking Locally at China’s One Child Policy,” 376.

Policy on women in China does not stop at sex selective abortion and child abandonment. The skewed sex ratio has resulted in the abduction of women as ‘brides’ for men unable to find partners.\(^{88}\) The One Child Policy has created a demographic imbalance in China that is particularly harmful to Chinese women.

\textit{The Intersection of the One Child Policy and Disability in China}

The undesirable effects of the One Child Policy do not stop at creating barriers for children of later birth order, burdening multiple child families with massive fines, straining China’s social welfare system, skewing China’s demography, and contributing to an imbalanced sex ratio that is dangerous for Chinese women. Although the intersection of China’s One Child Policy and disability is seldom studied, the One Child Policy has grave impacts on China’s disabled community.

The negative impact of the One Child Policy on attitudes towards people with disabilities in China begins with the purpose of the policy. The emphasis on population quality present in the purported goal of China’s One Child Policy contributes to the devaluation of the lives of people with disabilities. The eugenic framework of this policy is evident in the mention of improving population quality as an aim of the One Child Policy. The dangers of incorporating eugenic principles into legislation have been explored in depth in the previous chapter. The inclusion of population quality in the purpose of the One Child Policy has implications outside of the impacts of eugenic thinking on China’s disabled population. The policy’s goal of producing a “quality child” to contribute to a “high quality population” is particularly problematic for people with

disabilities. This “quality child”, typified as “the talented offspring of urban intelligentsia”, is likely not a child with disabilities\textsuperscript{89}. As a result, children with disabilities are framed as a counter to a “desirable” child under China’s One Child Policy. Because China’s population was intensely restricted under the One Child Policy, each child has a greater impact on China’s population as a whole. Therefore, a child with disabilities is perceived as a detriment to population quality. In this way, the One Child Policy’s purpose to produce a “small quantity and high quality” population contributes to the devaluation of the lives of people with disabilities. This exclusion of people with disabilities from a “quality” population both reveals implicit negative attitudes towards people with disabilities and reinforces these attitudes by striving towards a population without disabilities.

Aside from the purpose of the One Child Policy, one provision of the policy in particular is especially revealing of negative attitudes towards people with disabilities in China. If a couple’s first child is disabled, couples were permitted to have a second child\textsuperscript{90}. Where other provisions of the One Child Policy vary according to locality, the exception for a second child if the first was disabled was nearly universal\textsuperscript{91}. This is monumentally revealing of the negative attitudes present in China towards people with disabilities. By creating an exception in the form of children with disabilities to the One Child Policy, the state makes an assertion on the value of disabled children. If a couple first had a child with disabilities, they were allowed to ‘try again’, where other couples


\textsuperscript{91}Susan Short and Zhai Fengying, “Looking Locally at China’s One Child Policy,” 376.
were not. This reinforces the idea that people with disabilities are undesirable and of little value to the Chinese family. The exception to the One Child Policy created for children with disabilities unquestionably casts a negative light on the birth of a child with disabilities, and both reveals and reinforces negative attitudes towards people with disabilities.

Although couples were nearly universally permitted to have a second child if their first child was disabled under the One Child Policy, some couples chose to rid themselves of their child with disabilities altogether. Orphanages in China report that the majority of the children in their care are children with disabilities. This is likely due to a complex amalgam of factors, including the cost of raising a child with disabilities, a limit on fertility in China, and cultural bias against children with disabilities. However, if fertility were unrestricted in China, there is reason to believe less children with disabilities would be abandoned. I am in no way trivializing the economic strain caused by the medical needs of a child with disabilities, especially for China’s rural population. However, if couples were permitted to reproduce unrestrainedly, these extra costs could be combatted in areas where collective family labor is linked to household income. By allowing for the birth of multiple additional children, families would have greater labor available and thus more household income to combat the extra costs of a child with disabilities. In addition, permission to have multiple children may reduce the impact of the birth of a child with disabilities. Allowing couples to have multiple children may combat the effects of negative societal attitudes towards children with disabilities, thus lessening the number of

---

92 Kay Johnson, Huang Banghan and Wang Liyao, "Infant Abandonment and Adoption in China,” 500.
children with disabilities abandoned in China. Regrettably, these possibilities were precluded under the One Child Policy.

Another contributing factor to the high incidence of infant abandonment for infants with disabilities is the intersection of the One Child Policy and China’s traditional family structure. This intersection results in perhaps the most damaging effects of the One Child Policy on China’s disabled population. China’s traditional family structure dictates that children are responsible for the economic burden of their elderly parents. This makes having a child that can contribute fully to society by way of earning income not only a dream of parents for their children, but also vital to the parents’ future economic survival. The One-Child Policy necessitates that the burden of both elderly parents is placed on one, single child. In turn, parents are pressured to produce a child they can rely on economically. The economic difficulty faced by people with disabilities in China has been explored in depth previously. Because people with disabilities in China encounter such financial struggle, the birth of a child with disabilities is viewed as economic doom for parents. If not for the One-Child Policy placing the economic burden of elderly parents on a single child, this would not be the case. Therefore, the way this policy intersects China’s traditional family structure perpetuates negative stigma towards people with disabilities.

*China’s Socialist Construction and the One Child Policy*

The role of the One Child Policy in negatively impacting China as a whole, perpetuating negative attitudes towards people with disabilities, and revealing an already

---

93 Kay Johnson, Huang Banghan and Wang Liyao, "Infant Abandonment and Adoption in China," 475.
hostile climate towards people with disabilities has been explored in depth. While the adverse consequences of the One Child Policy are evident enough on their own, they are made more powerful and more impactful as a result of China’s socialist construction. Due to China’s political structure, the One Child Policy is enforced through multiple institutions at the city, county, township, and village levels. Under the One Child Policy, Chinese people were obligated to go through several different government institutions to register the birth of and ensure care for their child. Because of this increased interaction with government institutions, the provisions of the law are strictly enforced and therefore internalized among the Chinese people. This system is made possible under China’s socialist construction and allows for the pervasive nature of all legislation.

The way China’s socialist construction contributes to the internalization of values enshrined in legislation can be observed in the birth control campaign that preceded the One Child Policy. Grass-roots birth planning workers stationed at the village and neighborhood levels went so far as to track the menstrual cycles of individual women in their responsibility to enforce birth planning standards. Strict monitoring of women’s fertility resulted in a sharp increase in birth control operations such as abortions, IUD insertions, and sterilizations even before the One Child Policy was instated. The level of control exerted over women’s body autonomy and fertility would not have been possible without China’s socialist construction. Without the enforcement of birth planning standards at the lowest levels of government, it is unlikely that China would have seen

---


such an abrupt increase in birth control operations during this time. China’s socialist construction inserted national population policy directly into the lives of Chinese women, resulting in an internalization of the values of this policy and an abrupt change in birth control practices. China’s socialist construction ensures that the populace internalizes the values enshrined in Chinese legislation. This has devastating effects when these values reveal and perpetuate negative attitudes towards people with disabilities, as is the case with China’s One Child Policy.
Chapter 4

Introduction

The One Child Policy revealed and reinforced negative attitudes towards people with disabilities in China through a complex interaction among the partly eugenics-based purpose of the policy, exemptions for the policy, China’s traditional family structure, and already ingrained bias against people with disabilities. Despite the disadvantageous consequences of the One Child Policy on China’s disabled community, this intersection has been examined as an afterthought to the more visibly problematic consequences of the policy. While this is unfortunate, it is understandable; it is the nuances of this policy that are eugenics-based, perpetuating a negative view of disability, and revealing of social bias against people with disabilities, not necessarily its provisions or outright language. The same cannot be said for another eugenics-based family planning law in China: the Maternal and Infant Health Care Law.

It is important to note that, like the One Child Policy, the Maternal and Infant Health Care Law both reveals and reinforces negative attitudes towards people with disabilities in China. The origins of these attitudes as already ingrained in the Chinese consciousness before this legislation was passed have been explored in depth previously. While entrenched cultural bias against people with disabilities played a role in the creation of this legislation and the inclusion of eugenic theory in its language, enshrining these attitudes in law and policy reinforces their existence in society. In this way, the dual function of eugenics-based family planning laws in China like the One Child Policy and Maternal and Infant Health Care Law to both reveal and reinforce negative attitudes
towards people with disabilities makes their presence doubly problematic and worthy of examination.

_A Summary of China’s Maternal and Infant Health Care Law_

China’s Maternal and Infant Health Care Law (MIHCL) was promulgated at the 10th meeting of the Eighth National People’s Congress Standing Committee on 27 October 1994. Taking effect in June 1995, the law has 38 articles divided into seven chapters. The MIHCL made significant contribution to China’s population policy and healthcare legislation, and, although amended, is still in effect today.

The first article of this law contains its self-stated purpose, which is to “guarantee the health of mothers and infants and to improve the quality of births”. The remaining five articles of the first chapter of this law explain its general principles. These include a commitment by the state to fund maternal and infant access to health care; a delegation to all levels of government to work towards improving maternal and infant health care in accordance with national goals of economic and social development; the placement of responsibility for national work towards improving maternal and infant health care under the State Council’s Public Health Administration; the commitment of the state to fund scientific research pertaining to maternal and infant health care; and the recommendation of rewards being given to those with outstanding performance in scientific research or work pertaining to maternal and infant health care.


The second chapter of the MIHCL contains articles regarding premarital health care. This chapter mandates that health care facilities offer premarital healthcare services, including sex education, premarital hygienic consultation, and premarital medical checkups. This chapter also stipulates what diseases should be tested for in premarital medical checkups; contains a mandate that a couple postpone their marriage if either partner is found to be in the infective stage of a contagious disease; a mandate that couples agree to long-lasting contraception, undergo ligation, or forgo marriage if either partner is found to have a “serious hereditary disease”; the allowance for couples to object to the results of premarital checkups and obtain an alternate certificate to allow them to marry; the mandate for couples to present certificates of premarital checkups upon marriage registration; and a mandate that provincial, regional and municipal governments should create guidelines for the implementation of premarital checkups.

Chapter three of the MIHCL sets health care standards for women during pregnancy and childbirth. This chapter specifies the health care services Chinese women are entitled to during pregnancy. In addition, this chapter mandates medical guidance for high-risk pregnancies; mandates medical professionals supply pregnant women with medical opinions regarding the presence of hereditary disease in themselves or their partners; mandates prenatal diagnostic testing when fetal abnormalities are detected; mandates medical professionals offer their medical opinion and recommendation for pregnancy termination when fetuses are found to have serious hereditary diseases, serious deformities, or serious illnesses; mandates health care providers receive consent for the termination of pregnancy or ligation and provide either service at no charge; mandates couples undergo examination before conceiving a second child if the first was “seriously
defective”; mandates medical professionals improve delivery procedures; mandates midwives to adhere to guidelines for sterile health care; dictates guidelines on distributing birth and death certificates; and mandates that health care professionals provide child-rearing education to pregnant women.

The remaining four chapters of the Maternal and Infant Health Care Law are shorter and less impactful in nature. Chapter four creates the organization responsible for dealing with appeals to the results of premarital checkups, and sets guidelines regarding who staffs this organization. Chapter five iterates the necessity of the involvement of all levels of government in working towards the improvement of maternal and infant health care. Chapter six dictates the legal consequences for those who circumvent or disobey the provisions of the MIHCL. The law’s seventh and final chapter specifies the definition of several phrases used in the text of the law.

Since the Maternal and Infant Health Care Law took effect in 1995, it has been amended several times. In 2001, the Implementation Methods of the Law of the People’s Republic of China on Maternal and Infant Health Care was promulgated, which removes some vagueness present in the law, makes it more executable, and provides guidelines for its implementation. Heeding popular dissatisfaction regarding premarital checkups, in 2003 government officials announced new regulations that no longer require the presentation of the results of premarital examinations when registering marriages.

---


Although the MIHCL still requires these examinations, these regulations have been interpreted to make premarital examinations voluntary.

Taken as a whole, there are many benign and even beneficial provisions of the Maternal and Infant Health Care Law. There is no doubt that providing more and improved health care for women and infants in China has the potential to improve the health of the nation as a whole. The provisions of this law are especially beneficial to rural women who had previously encountered difficulty in accessing appropriate health care while pregnant. As beneficial as some provisions of the Maternal and Infant Health Care Law are for women and infants, other provisions are equally damaging to the Chinese view of disability.

*The Maternal and Infant Health Care Law and Disability*

Like China’s One Child Policy, the negative impact of the Maternal and Infant Health Care law on disability in China begins at the law’s self-stated purpose. The purpose of this law to “guarantee the health of mothers and infants and to improve the quality of births” is problematic in the relation of discussions on birth quality to eugenic theory. As discussed in chapter two, the negative impact of eugenic thinking on the view of people with disabilities cannot be understated. In addition, as discussed previously, a “quality” child by Chinese standards is likely not a child with disabilities. If the Maternal and Infant Health Care Law looks to improve the quality of births, and a quality birth likely is not the birth of a child with disabilities, it logically follows that the MIHCL looks to eliminate people with disabilities from the population. This makes a clear assertion towards the low value of people with disabilities to China as a whole. While
improving national quality of life by lessening conditions that contribute to the incidence of disability in a population is a worthwhile goal, one cannot ignore the implications that seeking to prevent the birth of people with disabilities has on China’s disabled community. Enshrining this goal into law in the MIHCL reinforces entrenched negative attitudes towards people with disabilities and is evidence of the incorporation of negative attitudes and eugenic thinking into legislation.

Guaranteeing the health of mothers and infants and improving the quality of births was not the original goal of the Maternal and Infant Health Care Law. At its conception, the law’s goal was to prevent “new births of inferior quality”\(^\text{100}\). Because many of the law’s provisions pertain to identifying hereditary diseases in couples and fetuses and preventing their respective reproduction or birth, it is evident that the ‘new births of inferior quality’ as referred to in the original version of this law references births of infants with disabilities. In other words, the original text of the Maternal and Infant Health Care Law directly labels people with disabilities as those of inferior quality. The issue here, quite literally, speaks for itself; labeling the entire disabled population as inferior reveals the negative view of people with disabilities in China and reinforces this negative view by incorporating it into law. The law’s original goal proves problematic for people with disabilities, as does its original title, “The Eugenics and Health Protection Law”. The influence of eugenic thinking on bias towards people with disabilities has been explored in depth previously.

While the goals and title of the Maternal and Infant Health Care Law were altered to rid them of negative connotation, the provisions of this law remained starkly damaging.

to several segments of China’s population. The provisions MIHCL have dire implications for Chinese women’s body autonomy and the personal freedoms of couples across China, but these implications reach beyond the scope of this work. Instead, I will focus on the provisions of this law most damaging to China’s disabled population.

Article 9 of the Maternal and Infant Health Care Law is one of the three most detrimental provisions of this law for people with disabilities. Article 9 reads,

When either one of the couple preparing for marriage is found to be in the infective stage of a legal contagious disease or at the pathogenic stage of a relevant mental disorder during the premarital medical checkup, the doctor should offer medical opinions and the couple should postpone their marriage\textsuperscript{101}.

The text of the law defines a relevant mental disorder as “schizophrenia, manic-depressive psychosis and other major psychoses”. This limits the freedom of people with mental disabilities in China to marry. What is especially problematic is the fact that the hereditary nature of the majority of mental disabilities has yet to be proven\textsuperscript{102}. This is very telling of the view of people with mental disabilities in China; lawmakers view people with mental disabilities so negatively that they promulgated legislation against their marriage and reproduction before proof of the hereditary nature of these disabilities exists. This reveals an alarmingly deleterious attitude towards people with disabilities, and ensures that this attitude is perpetuated through incorporating it into legislation.

Article 10 of the Maternal and Infant Health Care Law is another damaging provision. Article 10 reads,


When either one of the couple is diagnosed to have a serious hereditary disease, which is medically deemed unsuitable for reproduction, the doctor should explain the situation and offer medical opinions to the couple. The couple may marry if they agree to take long-lasting contraceptive measures or give up child bearing by undergoing ligation; this does not apply to those whose marriage is prohibited by articles in the “Marriage Law of the People’s Republic of China”.  

The text of the law defines serious hereditary diseases as, … congenital diseases caused by hereditary factors, which are medically deemed as not suitable for child bearing because such diseases make patients lose total or partial ability to live independently and have a high potential to be passed to the next generation.

The vague nature of this definition is, frankly, alarming. It is rare if not impossible for any one individual to retain complete ability to live independently at all points in the human lifespan, making the potential for liberal application of this law quite evident. The ambiguous language of this law ensures the possibility for its abuse, which could be leveraged to prevent any number of groups or people from reproducing. Furthermore, the assertion that those with hereditary illnesses are “not suitable for childbearing” is a direct assertion against the value of people with disabilities. This provision also embodies the state’s firm stance against the reproduction of any couple that may birth a child with disabilities, sponsoring the negative view of people with disabilities in China. Article 10 of the Maternal and Infant Health Care Law is palpably biased against people with disabilities, revealing negative attitudes towards people with disabilities in China and perpetuating these attitudes through mandating long-term contraception, sterilization or abstention from marriage for couples that may birth a child with disabilities.

---


Perhaps the most injurious provisions of the Maternal and Infant Health Care Law for people with disabilities are within Article 19. Article 19 specifies, “termination of a pregnancy or ligation performed according to the provisions of this law is free of charge”\textsuperscript{105}. In other words, abortion of a fetus with a disability is performed at no cost to couples, using state funds. While I make no assertion as to whether the abortion of a fetus with disabilities classifies as the murder of a person with disabilities, the specification in this article makes an assertion about the value of people with disabilities to the state. The state would sooner allocate funds to terminate pregnancies that may result in the birth of a child with disabilities than have people with disabilities present in the population. The state’s willingness to fund abortion on the basis of a suspected disability combined with entrenched bias against people with disabilities in China actively encourages the abortion of fetuses with disabilities. As stated by Carole J. Petersen, Director of the Spark M. Matsunaga Institute for Peace and Conflict Resolution, this “conflicts with the obligation to respect and promote the dignity of persons with disabilities” that China committed to uphold in the ratification of the United Nations Convention on the Rights of Persons with Disabilities\textsuperscript{106}. State sponsored abortion of fetuses suspected to have disabilities as provided for in Article 19 of the MIHCL exemplifies the ingrained negative attitudes towards people with disabilities in China and ensures these attitudes are perpetuated generation after generation.


China’s Socialist Construction and the Maternal and Infant Health Care Law

China’s socialist construction compounds the deleterious nature of the provisions of the Maternal and Infant Health Care Law. Article 3 of the MIHCL states that, “people’s governments at all levels exercise leadership in the work of maternal and infant health care”, ensuring that the damaging provisions of this law are inserted into the lives of Chinese people down to the village level\(^\text{107}\). In addition, the law’s mandate for premarital health examinations ensured that every person looking to marry in China would encounter the provisions of this law in some way. This guarantees that the negative attitudes towards people with disabilities enshrined in the Maternal and Infant Health Care Law are perpetuated.

China’s socialist construction further increases the adverse impact of the Maternal and Infant Health Care Law in the law’s requirement of premarital health examinations for marriage registration. The law grants discretion to local, low-level authorities in deciding what medical conditions can disqualify a couple for marriage. This has resulted in some localities banning those with “low intelligence”, “extreme short sight”, and “unusual facial and body features” from marriage and reproduction\(^\text{108}\). This is evidence of the possible abuses of this law as necessitated by the law’s vague language. This also highlights the dangers associated with the intersection of China’s socialist construction and the provisions of the Maternal and Infant Health Care Law.


Conclusion

I would be remiss if I neglected to acknowledge the positive outcomes of China’s family planning laws amidst their criticism. Family planning legislation in China has, in part, contributed to China’s growing middle class, educated China’s masses on sexual health, and provided increasingly better health care for women and children, especially in China’s rural areas. These accomplishments are no small feat. While the contribution of China’s family planning laws to the country’s economic gain and overall health has been substantial, the implications of this legislation in relation to the Chinese perspective of disability cannot be ignored.

While I set out to prove that China’s family planning laws reflect the negative view of disability present in China, I discovered the dual nature of this legislation. China’s family planning laws do not only reflect negative attitudes towards people with disabilities; they also reinforce these attitudes. By enshrining cultural bias in legislation, this cultural bias is guaranteed to permeate generations to come. This is especially problematic in a socialist country such as China, where legislation is enforced down to the village level. Through my research, it became evident that the role of family planning legislation in reinforcing negative attitudes towards people with disabilities is equally as important as how these negative attitudes are reflected in family planning legislation. This dual nature of revealing and reinforcing cultural bias against people with disabilities is evidence of the complex amalgam of factors that contribute to any society’s view of people with disabilities.

In light of the end of the One Child Policy effective on 1 January 2016, we may see changes in the way disability is viewed in China. With the removal of the constraints
on fertility under the One Child Policy, the birth of a child with disabilities may be looked upon as less of an economic crisis for parents. In turn, familial relationships between people with disabilities and their loved ones may improve, eventually resulting in a more positive cultural view of disability. The end of China’s One Child Policy did not mark the beginning of a period of unrestricted reproduction, however. Any improvement in the way disability is viewed in China is mitigated by this fact, as well as by the other contributing elements that affect the view of disability in China.

As China opens itself to the world economically, it is reasonable to assume that the populace may have increased access to Western standards of individual freedoms and demand those same freedoms from their own government. Possible evidence of this phenomenon can be observed in the growing discontent in the early 2000s with mandatory premarital health examinations, which lead to the subsequent relaxation of this requirement by the Chinese government. As the populace demands the most intrusive government regulations be repealed, it is likely that the most damaging provisions of the Maternal and Infant Health Care Law will be some of the first to go. This would mitigate the negative impact of the MIHCL on China’s view of disability, if not neutralize the adverse consequences of the law completely. With the removal of the most intrusive aspects of the MIHCL, what would be left is improved health care for mothers and infants across China.

Exploration of China’s family planning laws in relation to the country’s view of people with disabilities has proven to be a worthwhile endeavor. The continued study of the factors contributing to China’s negative view of disability is necessary to change this view. To rid Chinese society of negative attitudes towards people with disabilities, the
origins of these attitudes must be fully identified and expounded upon. In determining the
dual role that family planning legislation plays in revealing and reinforcing negative
attitudes towards people with disability in China, the importance of identifying and
removing provisions of this legislation that contribute to the negative view of people with
disabilities in China is even more evident. When these elements are removed from
legislation and exposed in society, the Chinese perspective on disability will change. The
need for this change for all people with disabilities in China cannot be overemphasized.
Bibliography


