CHINA'S BIRTH CONTROL POLICY IN THE TIBET AUTONOMOUS REGION

Myths and Realities

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The nature of China's population policy in contemporary Tibet (the Tibet Autonomous Region [TAR]) is a controversial issue. A series of published reports claim that China was and is compelling Tibetans to adhere to a *strict* birth control program that includes forced abortions, sterilizations, and even infanticide. This article addresses this issue by presenting new data independently collected by the authors during field research in Tibet from 1985 to 1988.

Claims for a Coercive Birth Control Policy

The charge that China is implementing a coercive birth control policy in Tibet has appeared on numerous occasions over the past few years. The latest accounts are articles in the Washington Post of February 26, 1989, and in the research section of the August 1989 issue of Tibet Review by Blake Kerr, an American physician. A report titled Tibet Today, published by the U.S. Tibet Committee (a private organization) in 1987, and essays by John Avedon in Cultural Survival and the Himalayan Research Bulletin present a similar account, as does an Asia Watch report titled Human Rights in Tibet that was released in February 1988. These publications make serious assertions and accusations in several related population areas.

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On limits to the number of children Tibetan women may bear, Kerr states that Tibetan "minority women are allowed to have two children while Chinese women are allowed to have only one child." This policy, he states, is implemented for all Tibetan nomads and farmers who, it is asserted, are so poor that if they exceed the limit they cannot pay a fine so have their livestock confiscated instead.

Avedon also asserts that there are enforced birth limits. Tibetan common folk ("the masses") are permitted to have two children and Tibetan officials (cadre) only one. The Asia Watch report states similarly that "Tibetans in Tibet maintain that . . . the two child limit is applied universally in the TAR and in neighboring Tibetan regions" (emphasis added). The U.S. Department of State's "Special Report on the Treatment of Minorities in China" hedges a bit, noting that "Tibetans are reportedly allowed two, and sometimes three, children."

On forced abortions, sterilizations, infanticide, and roving birth control teams, Kerr states that Tibetan women who become pregnant in violation of the rules "must have an abortion and/or be sterilized, or face severe social and economic sanctions." He also claims "that forced abortion, sterilization, and infanticide are part of China's birth control policy in Tibet." Avedon writes:

The scenario is identical across the country. A Tibetan mother arrives at the hospital to give birth. She is asked for her pass, issued by her local administrative unit, granting permission for the child. When it is not forthcoming, she is allowed to go through labor, and often hears the newborn cry, only to revive and be told the infant died. . . . In many cases, she has also been sterilized.⁴

Kerr indicates he collected 92 accounts of Tibetan refugee women in India who were alleged to have had abortions and/or been sterilized, and states that 20% of those reported that they had been forced to do so.⁵

The February 1988 Asia Watch report repeated the charge that there are forced abortions and sterilizations and registered its concern about these reports, but concluded that it was unable to assess how widespread

^{1.} Blake Kerr, "Refugee Accounts of Human Rights Violations in Tibet." *Tibetan Review* 24:8 (1989b), p. 10, and Blake Kerr, "Witness to China's Shame: How Human Rights and Families Suffer in Tibet." *Washington Post*, 26 February 1989, p. C4.

^{2.} John Avedon, Tibet Today: Current Conditions and Projects (New York: U.S. Tibet Committee, 1987), p. 9; also Himalayan Research Bulletin 7:2/3 (1987), pp. 1-11; Asia Watch Committee, Human Rights in Tibet (Washington: Asia Watch Committee, 1988), p. 54; U.S. Department of State, Special Report on the Treatment of Minorities in China, Washington 1987, p. 11.

^{3.} Blake Kerr, "Refugee Accounts."

^{4.} John Avedon, Tibet Today, p. 10.

^{5.} Blake Kerr, "Witness to China's Shame."

such practices are.⁶ A supplementary report released in July of 1988, however, was less cautious, stating: "Further reports have now become available that tend to support the concerns we raised on this issue [coercive birth control in the February 1988 report]." The State Department report makes no reference to forced abortions and sterilizations.

Kerr describes one mechanism by which this coercive birth control policy is implemented: mobile teams that visit Tibetans living in small villages and nomadic areas performing abortions and sterilizations. Such teams, he says, "have a monetary incentive to do abortions and sterilizations on as many women as possible." For example, he cites a report from two refugee monks alleging that in Amdo (an ethnic Tibetan area in Qinghai Province), in the autumn of 1987, every pregnant women in a village was forced to abort and all women of childbearing age were sterilized. This source also states that these birth control teams began in 1982 and have increased in number and frequency since 1987. Kerr reports the refugees' serious charge that, "Tibetans are outraged that the Chinese are trying to wipe out the Tibetan race." Avedon has written similarly. Avedon, Asia Watch, and Kerr, therefore, assert that Tibetan farmers and nomads are permitted only two births and that extremely coercive measures are taken to enforce these regulations.

In sharp contrast to these accounts of exceptionally restrictive birth control measures, Chinese sources claim that China's strict population control policies have not been imposed on the national minorities and that minority regions like Tibet are not subject to the same restrictive population laws applied in Han (ethnic Chinese) provinces. Although the specifics of the policy for Tibet vary slightly in different Chinese accounts, they all adhere to this general position. For example, a Beijing Review article on population policy in Tibet written by Zhang Tianlu, an associate professor at the Population Research Institute in Beijing, states that the TAR established its provisional regulations on family planning in 1986 and that these included: (1) second births and, in special cases, third births being allowed in families of Tibetan and other minority cadres and workers; and (2) no family planning targets being set for rural, pastoral, and border areas for the time being. These regulations also stated that "publicity and education

^{6.} Asia Watch Committee. Human Rights in Tibet, p. 55.

^{7.} Asia Watch Committee. Evading Scrutiny: Violations of Human Rights after the Closing of Tibet (Supplement to the Asia Watch Report on "Human Rights in Tibet") (Washington: Asia Watch Committee, July 1988), p. 27. It appears that Kerr, Avedon, and Asia Watch may be using data from basically the same subjects.

^{8.} Blake Kerr, "Refugee Accounts," p. 11.

^{9.} John Avedon, Tibet Today, p. 10.

on the significance of family planning and on health care for women and children should be conducted among the masses."¹⁰

Judith Banister of the U.S. Census Bureau has examined this issue using Chinese publications and radio broadcast translation series such as the Foreign Broadcast Information Service and the Summary of World Broadcasts. She concluded that minorities in China were explicitly exempt from the family planning program until recently, and that attention was given to the minority areas beginning only in 1979-80 when China launched its One-Child Family campaign. Banister reports that in 1982-83, variable rules were implemented throughout China for minorities with three million or more members. This would include Tibetans. These rules were vaguely worded so that some minority individuals in these groups were limited to two or three children and others to only one if they lived near Han (presumably to eliminate jealousy); yet others were simply "requested" to have not more than four. Banister also reports that the Sixth Five-Year Plan (published in June 1983) gave localities flexibility in implementation: "Family Planning must also be implemented in the areas where minority nationalities live in compact communities, and each area should work out a program for family planning that takes into account its economic, natural, and population conditions."11 She indicates this was done in Tibet via a set of new regulations announced in late 1983, which stated that government workers in Tibet could have a maximum of two children, Tibetan peasants and herders in densely populated areas a maximum of three, and those in sparsely populated areas could have an unlimited number of children.

Susan Greenhalgh of the Population Council investigated the population regulations promulgated by the CCP Central Committee in 1984 and 1986. Like Banister, she noted that population regulations at the local level were supposed to be developed in accordance with a variety of local conditions, and she reported an interesting example from Sichuan Province where cadres divided a county (Emei) into five types of areas and devised different birth regulations for each. These were: "(1) nonagricultural areas, including cities, towns, and mining regions: encourage one child per couple; (2) plains township: advocate one child per couple; (3) hilly regions at 500–1,000 meters above sea level: allow two children if the first is a girl; (4) mountainous areas at 1,000–2,000 meters above sea level: permit two children among couples in the highest townships; in lower townships allow

^{10.} Zhang Tianlu, "Tibet's Population Develops," Beijing Review 30:33 (1987), p. 21.

^{11.} Judith Banister, China's Changing Population (Stanford, Calif.: Stanford University Press, 1987), pp. 249-50.

two children only if the first is a daughter; (5) ethnic minority areas: do not implement birth control" (emphasis added).¹²

Both Banister and Zhang, therefore, see the limit of two births as recent and applicable only to Tibetan cadre and workers in the TAR. Zhang asserts that there are no other limits, while Banister mentions a three-child limit in densely populated rural areas and none in sparsely populated areas. Greenhalgh's information is generally consistent with this, although it does not deal with the TAR per se. The Kerr, Asia Watch, and Avedon accounts bear no resemblance to any of these. The gulf between these very different accounts of birth control policy in Tibet is so enormous and the reliability of the respective data sources (Tibetan refugees versus published data from China) so uncertain that there has been no way to make an informed judgement on this issue. What has been missing are data collected in Tibet itself by independent researchers. In the course of our research on nomad pastoralism in Tibet, we collected such data and are presenting our findings in order to try to clarify this issue. However, before examining these data, it is necessary to clarify the meaning of "Tibet."

What and Where Is Tibet?

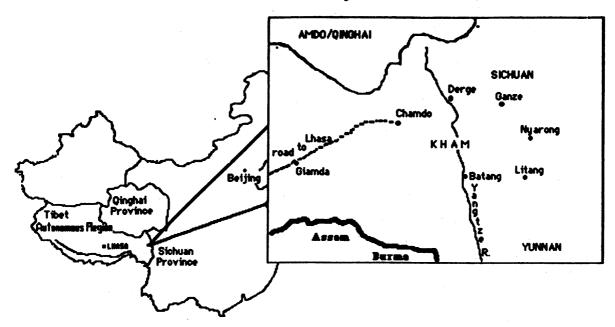
A source of confusion in the literature on contemporary Tibet is the failure of some authors to clearly distinguish between Tibetans living in the TAR, i.e., in Tibet proper (the state ruled by the Dalai Lama until 1959), and those residing in other Chinese provinces such as Qinghai, Sichuan, Gansu, and Yunnan. "Tibet" is often discussed as if all ethnic Tibetans in the People's Republic of China lived there. While many Tibetans believe this would be an ideal state of affairs, Tibet proper in modern times was politically distinct from the ethnic Tibetan areas in the adjacent Chinese provinces; to represent them otherwise, for example, by generalizing from the experiences of ethnic Tibetans in Chinese provinces to those in the TAR, is misleading.

Most of the ethnic Tibetan areas that are now outside of the TAR have been under direct Chinese administration for centuries. Amdo and a large part of Kham (e.g., the areas east of the Yangtze River such as Ganze, Litang, Nyarong, and Batang) fell under Chinese control in the early eighteenth century (see Map 1), the border being the Mekong-Yangtse river watershed. Some regions in Kham such as Nyarong were regained

^{12.} Susan Greenhalgh, "Shifts in China's Population Policy, 1984-86: Views from the Central, Provincial, and Local Levels," *Population and Development Review* 12 (3): 499-500, 1986.

^{13.} Graham Clarke, an anthropologist who visited Tibet in 1986 criticized the Avedon, Kerr allegations, although he did not present demographic data in support of his views, in "Tibet Today: Propaganda, Record, and Policy," *Himalayan Research Bulletin* 8:1, p. 32.

MAP 1—China with Detail of Kham and Amdo



by the Dalai Lama's government in 1865, only to be lost to China again in 1905–11 as a result of the military advances of Chao Erh-feng who reasserted control over the parts of Kham east of the Yangtze River and actually pushed the Sino-Tibetan border to Giamda some 350 miles west of the Yangtze. Military clashes between Tibet and China in 1917–19 ended with Tibet regaining control over the areas of Kham west of the Yangtze, as well as Derge, an important Tibetan principality east of the river. 14 Twelve years later, however, a string of military defeats led to the Sino-Tibetan truce of 1932–33 in which China regained control of Derge. The de facto border became the Yangtze River; it was that when the Dalai Lama fled Tibet in 1959 and remains so today. 15

It is, therefore, somewhat disingenuous to discuss regions such as Amdo as if they are or were part and parcel of Tibet proper. The Amdo people have lived under Chinese rule for centuries, they have experienced a very different history from Tibetans in Tibet, and they were not subsumed

^{14.} Josef Kolmas, Tibet and Imperial China, Occasional Paper no. 7 (Canberra: Australian National University, 1967), p. 41, and Eric Teichman, Travels of a Consular Officer in Eastern Tibet (Cambridge: Cambridge University Press, 1922).

^{15.} Richardson, Tibet and Its History (Shambala Press, 1984), p. 135; W. D. Shakabpa, Tibet: A Political History (New York: Potala Publishers, 1984), pp. 269-70. Richardson, pp. 1-2, handles this important distinction by using the terms "political" and "ethnographic" Tibet for these two areas. He contrasts them as follows: in political Tibet, "Tibetan governments have ruled continuously from the earliest times down to 1951," and in the ethnic Tibetan areas outside of "'political' Tibet, Tibetan governments exercised jurisdiction only in certain places and at irregular intervals." And even though some would argue about how much China really controlled the different areas in "ethnographic Tibet," it is clear that they were not under the control of the Dome Chigyab, the Tibetan government's governor in eastern Tibet whose headquarters were at Chamdo.

under the terms of the Seventeen Point Agreement, the 1951 pact between Tibet and the PRC that defined their relationship. The implications of this are not trivial. For example, in accordance with the terms of the Seventeen Point Agreement, agricultural land reforms were not enacted during the 1951–59 period in Tibet proper, while collectivization and other reforms were begun in the adjacent provinces precipitating revolts and much loss of life beginning in 1956.

Similarly, because regulations concerning issues such as birth control and migration are based in large part on local conditions and are generally promulgated on a provincial level, the operating rules for the minorities in the provinces adjacent to Tibet may differ significantly from those extant in the TAR. Certainly one cannot assume they are identical, especially since the ethnic composition of the adjacent provinces is very different from that of the TAR where Tibetans are the overwhelming majority (see Table 1). The data in Table 1, however, are somewhat misleading because while Tibetans are a minority in the provinces adjacent to the TAR, they tend to be clustered primarily into delimited subareas that are called "autonomous prefectures" and "autonomous counties." K. B. Dumbaugh, in a Congressional Research Service report prepared for the U.S. Congress, attempted to assess population size and composition with respect to such areas rather than the overall province-level data. Using China's 1982 census data and figures provided by China's State Nationalities Affairs Commission and Beijing Review, his data (see Table 2) reveal that while Tibetans are the majority population in these minority areas of the three provinces adjacent to the TAR, there are also very large Han populations in each of them. The different political and historical experiences of the Tibetans in Qinghai, Sichuan, Gansu, and Yunnan require that they not be aggregated with the Tibetans in the TAR without warning the reader explicitly. To lump statistics from other provinces with those of the TAR is deceptive and somewhat analogous to reporting on Mexico using examples from Mexico's "lost territories" of Texas and California, or of failing to note whether the referent is the Republic of Ireland or Northern Ireland. In this article, therefore, Tibet refers to the TAR—what used to be the state ruled by the Dalai Lamas in modern times.

Research Site and Methods

The questionable reliability of the accounts of both the Tibetan refugees and the Chinese government and the absence of other impartially collected data necessitate that our own research findings form the basis of this

^{16.} See Melvyn C. Goldstein, A History of Modern Tibet, 1913-51: The Demise of the Lamaist State (Berkeley: University of California Press, 1989), ch. 20 and 21.

TABLE 1 Ethnic Tibetans in PRC Provinces Surrounding the Tibet Autonomous Region

Province	Total Population	# Han	# Tibetan	% Ethnic Tibetans
Sichuan (1987)*	104,390,600	99,628,800	1,090,700	1.0
Yunnan (1987)*	30,547,700	23,009,900	410,000	1.3
Gansu (1987)*	20,972,500	19,097,000	694,000	3.3
Qinghai (1987)*	4,195,500	2,250,600	1,058,300	25.2
Tibet Autonomous Region (1985)**	1,990,000	70,000***	1,920,000	96.5

^{*}These data derive from Tables 1-4, The 1987 1% Sample of Population Statistics (in Chinese) Beijing, 1988, p. 4. It should be noted that these data were collected from a sample of county administrative units (and therefore exclude city units), so they underrepresent Han.

TABLE 2 Regional Han and Tibetan Civilian Population in the TAR and Contiguous Areas (Excludes Other Minorities)

	% Tibetan	% Han
TAR	95	5
6 Autonomous prefectures in Qinghai	47	41
1 Autonomous county and 1 autonomous prefecture in Gansu	39	54
2 Autonomous prefectures and 1 autonomous county in Sichuan	56	33
1 Autonomous prefecture in Yunnan	33	18

Data from Appendix A in Tibet: Disputed Facts About the Situation in Tibet, Kerry B. Dumbaugh, Congressional Research Service Report for Congress, May 3, 1988, p. 25.

^{**}Zhang Tianlu, "Tibet's Population Develops," Beijing Review 30:33, p. 20, 1987.

^{****}This is surely an underestimate of the number of Han in Tibet, even excluding the army troops stationed there. The Chinese government has a complicated system of household registration wherein all citizens have a legal residence (hu kou) where they have full rights, e.g., access to schools and subsidized foodstuffs. Many, if not most of the Chinese found in urban areas in the TAR are considered temporary (lin shi hu kou) rather than legal (permanent-hu kou) residents, so appear not to be counted as being part of the TAR. How many of this type of Han are living in Tibet at any given time is, of course, not known, but even if we make a generous (and rough) estimate and say that 150,000 such Han live in Tibet (excluding the army), 90% of the population in the TAR still would be ethnic Tibetans. Similarly, resident Tibetan pilgrims and traders from outside of the TAR are also not included in these figures.

by Melvyn C. Goldstein on a fellowship from the National Academy of Sciences' Committee for Scholarly Communication with the People's Republic of China (the National Program for Advanced Research and Study in China), and 16 months of joint fieldwork conducted by the authors in the TAR in 1986, 1987, and 1988 under sponsorship of the above program, plus the Committee for Research and Exploration of the National Geographic Society and the National Science Foundation. Ten months were spent living with a community of 263 nomadic pastoralists in a relatively isolated, traditional nomad area called Phala some 300 miles northwest of Lhasa and 115 miles north of the TAR's main east-west road on the west-ern Changtang, Tibet's vast Northern Plateau. ¹⁷ This research included comparative work in Nyare, a village three miles north of Lhasa city.

Traditional anthropological methods such as participant observation and in-depth, open-ended interviewing provided the data utilized in this article. Interviews ranged from quasi-formal, where notes were taken and tape recorders often used, to informal, where data were collected as part of conversations. No restrictions were placed on meetings or interviews and officials did not accompany us. All interviewing was conducted in Tibetan. In Nyare, demographic data derived from a household survey that was conducted in 1985 by Goldstein and updated by Goldstein and Beall in 1987. In Lhasa, informal discussions and conversations were held on this issue with friends and acquaintances among both the "cadre" and the "masses." 18

Birth Control Policy in Tibet

Lhasa

There is clearly a policy of coercive birth control operative in Lhasa. Restrictions and limits differ depending on social stratum (cadre and factory workers versus the masses) and on ethnicity (Han versus Tibetan). The attitudes of local officials also play a role in how energetically policies are implemented. Han cadre/officials in Tibet are subject to the standard rule

^{17.} This area and group are further described in M. C. Goldstein and C. M. Beall, "The Impact of China's Reform Policy on the Nomads of Western Tibet," Asian Survey 29:6 (1989), pp. 619-41, and Nomads of Western Tibet: The Survival of a Way of Life (Berkeley: University of California Press, 1990).

^{18.} Since we were not in Tibet to conduct research on population policy, we had no connection with the TAR offices in charge of family planning. Consequently, we had no access to official family planning rules and regulations, which are restricted (neibu) like virtually all unpublished regulations and statistics (even on such innocuous subjects as the number of nomads).

in urban China: each couple is permitted to have only one child and has to ask its unit (danwei) for permission to have the birth.

Tibetan cadre/officials in Lhasa are limited to two children per couple. They may have the first whenever they choose, but permission should be requested for the second. There are incentives for sterilization and long spacing between births. For example, mothers usually receive 75 days of paid leave for the birth of a child, but they receive four month's leave with pay if there is more than a three-year interval between births. If a woman is sterilized after a first birth, she receives a one-year vacation with pay and five yuan per month for the child (until 18 years of age). There are also special privileges in terms of entering nurseries and schools and in securing work later. There appear to be no automatic negative sanctions if these limits are exceeded but one must suspect that such individuals might suffer in terms of raises and promotions. All hospital costs, moreover, have to be paid by a couple for births that exceed the limits, and those children do not receive permanent resident status for Lhasa. It appears from our conversations that this policy has been effective and that most Tibetan cadre in Lhasa have only one or two children, although it should be noted that this is partly due to the perceived high cost of children in urban areas.

For the Lhasa "masses," most individuals we spoke with said that they were not sure what the official rules were but that limits were not being strictly enforced. Some, however, thought there was an official limit of three births per couple, and one said the rule for the masses was the same as that for the cadre. In the summer of 1990, a new policy was implemented in Lhasa, which, for the first time, clearly stipulated that the urban "masses" were permitted to bear only two children per couple, this bringing them into line with the regulation for Tibetan cadre. At the time we left Lhasa in August 1990, it was still not clear whether fines and punishments would really be levied on those who continued to give birth after having two children. Since we did not conduct systematic research and interviews in Lhasa, we shall say no more of the situation there and instead turn to rural Tibet, the site of our major research.

Nomadic and Farming Areas in the TAR

The situation in Tibet's farming and nomadic areas (about 90% of the total ethnic Tibetan population) is clearer. We found no evidence of any policy restricting the number of children that herding and farming women can bear, although there has been publicity extolling the advantages of family planning and smaller families, particularly in areas near administrative centers.

In Phala, by 1988 some nomads had heard that there was a way to stop getting pregnant, but there was absolutely no pressure to utilize family

planning to restrict family size. In fact, one woman with many children actually came to us asking if we could help her obtain birth control "medicine." When we looked into this, we found that contraceptive injections were available at the district health post, three days away by horseback, and that IUDs and sterilizations were done at the more distant county headquarters. During 1986-88, the period of our research there, no propaganda appeared extolling the value of small families. In 1990 small numbers of two kinds of contraceptives (injection and the pill) were distributed to the local officials (of the xiang) who were instructed to ask each reproductive-age woman whether she wanted to use contraception, but again there was neither pressure nor coercion to use them. Not surprisingly the nomads, including their officials, had large families. The fertility history of Phala's four local Communist Party members (all nomads who joined the party during the Cultural Revolution) reflects this. For the three who are married: the party secretary's wife has had seven children (six are alive); the two (successive) wives of a second official have eight living children; and the wife of the third has had seven births (six living children). These general observations of high fertility are supported by demographic information for all the females in the nomad community.

Fertility Among Nomads: Phala 1986-88

The crude birth rate (CBR) (the number of births per 1,000 population in a given year) over the two-year period 1986-88 was 33 per 1,000 and was 35 per 1,000 over the four-year period 1986-90. The crude death rate (CDR) (the number of deaths per 1,000 population in a given year) varied more than the CBR; it was 19 per 1,000 between 1986-88 and was 30 per 1,000 for the four-year period 1986-90, due to a number of fatal illnesses between 1988-90. The crude rate of natural increase (CBR - CDR). therefore, was 14 per 1,000 per year for 1986-88 (a 1.4% annual growth rate) and 5 per 1,000 for 1986-90 (0.5% annual growth rate). This represents a population doubling time of 53 and 140 years, respectively. Table 3 compares these rates in a broader context. Tsochen, Gerze, and Gergye are exclusively nomadic pastoral areas in western Tibet; Ngamring is the predominately agricultural district in which Phala is located. Phala's fertility falls toward the lower end of these four, slightly more than Ngamring and Tsochen but less than Gergye and Gerze. It is only 6-13% higher than Tibet as a whole, but 57-67% higher than the all-China CBR. Table 3 also shows that Phala's crude birth rate resembles the CBRs of high growth countries such as India and Mongolia more than it does China's. These data are inconsistent with the existence of a coercive birth control policy in Tibet limiting all couples to only two children as claimed by Kerr, Avedon, and Asia Watch.

TABLE 3 Phala Population Statistics Compared with India, Mongolia, China, Tibet as a Whole, and Other Areas in Western Tibet

Location	Crude Birth Rate/1,000	Crude Death Rate/1,000	Crude Rate of Natural Increase
Phala (1986–90)*	35	30	0.5%
Tsochen (1981)**	31	17	1.4
Gerze (1981)**	43	10	3.3
Gergye (1981)**	39	16	2.3
Ngamring (1981)**	30	9	2.1
Tibet Autonomous Region (1981)***	31	10	2.1
China (1987)****	21	7	1.4
Mongolia (1987)****	37	11	2.6
India (1987)****	33	12	2.1

^{*}Calculated from birth and death data collected via household interviews conducted in 1986, 1988, and 1990 by the authors.

Our CBR and CDR figures for Phala, however, are based on births and deaths over only a four-year period. To obtain a better understanding of population dynamics in this community, fertility histories were collected from all females ages 15-59 (N = 71). Table 4 presents the actual number of births experienced by these women. Column 1, which includes all women, shows that reproduction starts relatively late but that by the age 30-39, women have an average of 3.3 children. And by the age 40-49, women experienced on the average 5.4 births, with 4.9 (71%) of these surviving in 1988. This relatively high fertility would be even higher if it were not for the late age at first birth (22.4 years) and the large number of women who have never given birth (5 of 39 aged 30-59). Column 2 presents the data on births to women who have actually borne children (parous women). This gives a better picture of fertility by eliminating fertile couples and unmarried females who have not conceived. The fertility of this subpopulation of women averages 0.5 to 1.8 births more than that for

^{**}The Population Atlas of China (Oxford: Oxford University Press, 1987).

^{***}From Judith Banister, China's Changing Population (Stanford: Stanford University Press, 1987), p. 252.

^{****} World Population Data Sheet, 1987. Population Reference Bureau, 1987.

TABLE 4 Births to Phala Nomad Women Age 15-59 as of 1988

	All Won	ien	Parous* Women		
Age	Average # Births N		Average # Births	N	
15–19	0	12	0	0	
20–29	1.3	20	2.3	11	
30-39	3.3	18	3.8	16	
40-49	5.4	11	5.9	10	
50-59	5.4	10	6.8	8	

^{*&}quot;Parous" refers to women who have given birth to at least one child.

all women and far in excess of any limit of two or even three births per couple.

Tables 5 and 6 present data on the number of surviving children to parous women in Phala. Table 5 reveals that Phala women, aged 30-39, who have given birth to at least one child, had on the average 2.8 surviving children, and those 40-49 years of age had 4.9 surviving children. Another way to examine whether coercive birth limitations were being enforced is to examine the number of women who have given birth to more than two or three children. Table 6 presents these data. Table 6 reveals that 25 of the 45 (56%) parous women in Phala had three or more surviving children. Many had even more surviving offspring. Among the parous women aged 30-39, five (31%) had four or more surviving children and three (19%) had five or more surviving children. Among Phala women aged 40-49, six (60%) had five or more surviving children and seven (70%) had four or more surviving children.

Despite such strong evidence that fertility is very high in Phala, these data do not preclude the possibility that coercive birth control limitations have been implemented only recently, for example, after 1983 when Banister reported formal regulations were promulgated. Our data, however, also indicate this has not happened. Between 1984–88, seven Phala women gave birth to their third surviving child, four to their fourth, three to their fifth, five to their sixth, and one to her ninth. The reproductive histories of Phala women at all ages, therefore, provide strong evidence in support of the conclusion that no population control policy restricting couples to two births was or is operative. Furthermore, no Phala nomads have ever been levied fines for their third, fourth, fifth, or subsequent children, and all such children and their families have full rights in the community.

TABLE 5 Mean Number of Surviving Children to Parous Women in Phala

Age	No. of Women	Mean Number of Surviving Children
20–29	11	2.
30–39	16	2.8
40-49	10	4.9
50-59	8	4.

TABLE 6 Number of Surviving Children to Phala Women Who Have Had at Least One Birth

_	20-29 Years	To Women 30–39 Years of Age		50-59 Years	To All Women
0	0	0	2	1	3
1	4	4	0	0	8
2	3	5	0	1	9
3	4	2	1	1	8
4	0	2	1	1	4
5	0	2	1	2	5
6	0	1	2	1	4
7–10	0	0	3	1	4

Fertility Among Villagers: Nyare 1985-88

While it appears that nomadic pastoralists such as those in Phala are free to have as many children as they want, what of Tibet's agricultural villages? Data collected by the authors in Nyare, an agricultural valley located in the suburbs of Lhasa only three miles north of the city, reveal a pattern similar to that found in Phala. Nyare consists of several sub-units that were "brigades" during the commune era. A household fertility survey was conducted in one brigade in the center of the Nyare valley.

Unlike Phala, family planning is well known and used in Nyare. There is easy access to contraception, including placement of IUDs at a nearby military hospital or in nearby Lhase city. In fact three (7%) of the women in our sample reported having had an abortion. However, there is no pol-

TABLE 7 Comparison of Fertility in Phala and Nyare

Age	Phala Births/ Female	N	Nyare Births/ Female	N	Phala Births/ Parous Female	N	Nyare Births/ Parous Female	N
20-29	1.3	20	2	15	2.3	11	2.7	11
30-39	3.3	18	3.3	10	3.8	16	3.3	10
40-49	5.4	11	3.4	7	5.9	10	3.4	7
50 +	5.4	10	5.1	7	6.8	8	6.0	6

^{*}No births were recorded for women 15-19 years of age.

TABLE 8 Number of Surviving Children to Nyare Women Who Have Had at Least One Birth

			To Women 40-49 Years of Age	50-59 Years	To All Women
0	1	0	1	0	2
. 1	2	2	1	0	5
2	6	4	0	1	11
3	1	2	2	0	5
4	1	1	2	4	8
5	0	1	1	0	2
6	0	0	0	0	0
7–10	0	0	0	1	1

icy of coercion, and although we found slightly lower fertility than that present in Phala, it is still far higher than what would be consistent with the limits claimed by Kerr, Avedon, and Asia Watch. Table 7 illustrates this, revealing a pattern of relatively high fertility in Nyare. Women age 20–29 who have given birth to at least one child had an average of 2.7 children and those age 30–39 had an average of 3.3 births. The lower fertility of Nyare women vis-à-vis those in Phala in the 30–39, 40–49, and 50–59-year categories is perhaps explained by the voluntary utilization of family planning among the former. Table 8 presents the number of surviving children to women of different ages. Examination of Table 8 provides evidence in support of the position that these areas had no limits on the

number of children per couple. In Nyare, 16 (47%) of the 34 women who had given birth had three or more surviving offspring. Of the parous women age 30–39, four (40%) had three or more surviving offspring, and two (20%) had four or more. And for women age 40–49, five (83%) had three or more surviving offspring and three (50%) had four or more.

Recent census data reported by China are also consistent with the pattern of high fertility presented above. The 1,786,500 ethnic Tibetans listed in the 1982 national census as residing in the TAR had increased to 1,920,000 by 1985. This increase of 133,500 ethnic Tibetans over the three-year period represents a 7.5% increase, or a 2.1% annual increase (33-year population doubling time). 19

Conclusion

These data suggest that the Tibet Autonomous Region is actually experiencing high population growth rates rather than suffering a policy of coercive and restrictive birth control that is causing population decline and threatening the continued existence of Tibetans. At current growth rates, over half a million Tibetans will be added to the TAR's population in the last decade of this century. These additional people will pose an enormous economic and social burden for Tibet's underdeveloped economy as, for example, a rapid population increase clearly reduces the amount of farm land per capita. All the commune's land was divided equally among the members in the early 1980s and represents a fixed resource. There is simply no new land to provide for families that have increased in size since decollectivization. Consequently, a very interesting question is why China is not insisting on a restrictive population control policy there as it is for its own Han population.

One reason may be that population increases in Tibet have little significance for China's overall population policy. Tibet contains 13% of China's land mass but only 0.2% of its population. At 1985 population levels, the 2.1% growth rate in Tibet means an annual increase of only about 40,000 persons, a figure that is inconsequential given China's annual increase of about 15.5 million persons. Even if Tibetans in the TAR reproduced at the high rate of 3% per year, only 60,000 people would be added each year. A second and probably more important reason appears to be the strong pro-natalist feeling among most Tibetans, both the "cadre" and the "masses." Tibetans in the TAR see themselves at risk of being swamped by Han hordes and consequently see strength and power in numbers. Living in the shadow of a billion Han Chinese, they argue vociferously that restrictions on reproduction are not justified in sparsely popu-

^{19.} Zhang, Tianlu, "Tibet's Population Develops," p. 20.

lated Tibet. Tibetans see population control in terms of power and ethnic survival rather than with respect to the carrying capacity of the resources in their area. These feelings and anxieties have been exacerbated by the substantial influx of Chinese workers and tradesmen into the TAR's urban areas after 1984. Family planning is, therefore, a delicate political issue in the TAR, and China has apparently decided not to push the policy and alienate the overwhelming majority of Tibetans.

In conclusion, then, we found no evidence of such limitations as have been claimed on the reproductivity of the nomadic and agricultural populations we studied in Tibet. There were no roving sterilization teams, and no forced abortions and infanticide in either Phala or Nyare. Quite the contrary, fertility was high. While reproductive limits have clearly been placed on Tibetan cadre in the cities in the 1980s, and on the urban "masses" in 1990, the bulk of Tibetans who live in rural farming and nomadic areas appear to have had no restrictions as of 1990.²⁰

The discrepancy between our first-hand, independently collected data and the reports presented by Kerr and Avedon requires comment. We suggest several possible factors that may have interacted to produce the spurious data on which the charges of coercive birth control were/are based. One likely factor is that the accounts offered by Tibetan refugees (and apparently also a few individuals in the TAR) are exaggerations or fabrications told to foreigners to garner sympathy and support for the "Tibetan cause." On a number of occasions in Lhasa, we heard such exaggerations and distortions with respect to various issues such as the economy or religious freedom. Individuals (friends of friends, or people in tea shops or on the street), for example, would initially tell us that the situation was terrible in Lhasa regarding some issue that we knew was either untrue or a gross distortion. When we politely responded that "the abuse isn't occurring now is it?" or that "things don't seem so bad on that issue, for example, what about X or Y?" they would sometimes admit that things recently have improved, although they then often attributed this to outside pressure on China. In other words, they were inclined to represent the current situation negatively. Or alternatively, they would clarify the initial statement by saying that these things happened during the Cultural Revolution a decade earlier. In short, one of the legacies of Chinese direct rule in Tibet since 1959 is that many Lhasa Tibetans harbor deep-seated anger and hostility toward the Chinese, which colors their perception of the current situation and sometimes leads to distortions, exaggerations, and fabrications.

^{20.} We did not conduct research (or even visit) the ethnic Tibetan areas in Qinghai, Sichuan, Gansu, and Yunnan, so cannot comment on conditions there. Evaluation of their status will have to wait until Western researchers have had the opportunity to collect data.

One would expect that recent refugees would manifest this behavior more intensely.

A second possible factor is that the accounts reflect misinformed opinions. In some cases, the individual Tibetans reporting incidents may well believe something happened to them even though it did not. For example, a Tibetan woman who lost a child during delivery in a hospital may blame the Chinese for killing her child rather than accept that it died naturally. Similarly, a woman who was unable to conceive after giving birth in the hospital may have unconsciously let her dislike of the Chinese lead her to conclude that her misfortune is part of an anti-Tibetan Chinese plot.

A third possible factor is that the accounts are true but reflect sporadic abuses carried out by overly zealous officials. Since excesses in the implementation of birth control are known to have occurred in China, it is not unreasonable to suspect that isolated instances may have occurred in Tibet. For example, Greenhalgh notes that "in 1983 parts of the country were swept by campaigns of abortion and sterilization, which apparently led some parents, desperate for a son, to kill their newborn daughters." This may well have occurred in some minority areas too. Thutnadoge, the ethnic Tibetan who is deputy head of the TAR's Public Health Bureau, appeared to hint at some earlier excesses when he wrote that the Tibet region encouraged family planning during the Cultural Revolution even though this contradicted the national policy of no birth control for minority peoples. ²²

A fourth relevant factor is the methodological flaws of Kerr's and Avedon's data collection. Both base their claims on accounts of selected Tibetan refugees. Given the highly emotional and politicized atmosphere of the Tibetan refugee community in India with regard to the issue of China's control of Tibet, this is an undertaking fraught with pitfalls. Kerr realized the possibility that the reports could be self-serving exaggerations or outright fabrications and tried to address this possibility as follows:

Interviewing indigenous Tibetans [those in Tibet] would have been preferable to interviewing refugees. Refugee accounts could be fictitious, biased, or represent aberrations in Chinese torture and birth control policy. However, these accounts are both widespread, and consistent with accounts from other travellers.²³

^{21.} Susan Greenhalgh, "Shifts in China's Population Policy," p. 491.

^{22.} Thutnadoge, "Population, Health Care and Birth Control in Tibet," in *Tibetans on Tibet* (Beijing: China Reconstructs Press, 1988), p. 98. See also S. M. Huang, *The Spiral Road* (Boulder, Colo.: Westview Press, 1989), pp. 175–85, and Greenhalgh, "Shifts in China's Population Policy," pp. 491–515.

^{23.} It should also be noted that the Chinese government's refusal to permit impartial observers to conduct their own investigation on some of these issues and their reluctance to

However, these investigators did not conduct the careful research on this issue that would have allowed them to control for such possibilities, perhaps because they were predisposed to believe highly negative accounts. For example, although they never indicate how they located their interviewees among the thousands of Tibetan refugees in India, it is clear that they did not conduct a systematic scientific survey of a representative sample of recent refugees. Instead, they appear to have focused on interviewing women who said that they had undergone an abortion and/or sterilization without taking the next obvious step of comparing and contrasting the experiences of such refugee women with others from the same areas who said they had not. They also do not list specific villages (names and dates) where these alleged events are claimed to have occurred. Even their own data are not straightforward. For example, Kerr reports that only 20% of the 92 cases of reported abortions were claimed to have been forced, despite his claim that coercive abortions and sterilization were really a systematic and ubiquitous Han policy aimed at Tibetans. We suspect that a more rigorous survey methodology might have raised significant questions about the accuracy of the reports themselves and led to a different conclusion. By failing to undertake such investigation, the validity or reliability of their data would be suspect even without the contradictory data presented in this report.

Thus, we suspect that a combination of these possibilities accounts for the reports of alleged abuses collected by Avedon and Kerr, and conclude that the persistence of allegations of pervasive human rights violations in Tibet in the area of birth control reflects not the objective presence of a policy of systematic and coercive birth control in Tibet but rather the highly emotional atmosphere surrounding the struggle of Tibetan refugees and their supporters against the Chinese. The reports appear to be an illustration of how easily strong political emotions can misinform objectivity.

open Tibet's various subregions to academic researchers has hampered the free dissemination of objective information on conditions in Tibet and facilitated the persistence of the birth control abuse issue.