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RESEARCH ARTICLE

Persistent effects of China's one-child policy on childbearing attitudes of the Chinese diaspora in the United States: a qualitative study

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Abstract

This study examines how China's former one-child policy has shaped fertility attitudes among the Chinese diaspora in the United States. Through semi-structured qualitative interviews with thirty reproductive-age women of Chinese descent, either born in China or first-generation immigrants to the United States, this study explored opinions towards the policy, self-reported impact on reproductive decision-making, and attitudes towards family size. Participants were recruited from an internet-based survey distributed through cultural groups on social media, paper flyers, and email listservs. Interviews were analysed using the principle of thematic analysis by three authors, who met after coding to resolve disagreements. The mean age of participants was 33. Six participants (20%) used an interpreter. Eighteen participants (60%) were born in China. The range of pregnancies was 0–5, and the range of births was 0–2. Authors found that while participants were no longer directly constrained by the one-child policy, many continued to demonstrate preferences for fewer children. Financial strains, resource allocation, societal shame, and internalised social norms emerged as key themes. These themes echo messages promoted during the one-child policy era through propaganda and enforcement measures, such as audits of family registrations, rewards for compliant families, fines, mandatory IUDs, or sterilisations for noncompliant ones, and even forced abortions for 'unauthorized' pregnancies. These messages reinforced that small families were more appropriate. These findings suggest a lasting cultural shift towards fewer children as a result of the policy, even after emigration. They also carry theoretical implications towards understanding the long-term social and psychological consequences of reproductive mandates and the generational transmission of policy-shaped fertility norms. This study offers a perspective for nations currently implementing pronatalist fertility regulations. These findings highlight the role of historical policies in shaping contemporary reproductive perspectives, family dynamics, and potentially, engagement with medicine beyond geographic, political, and temporal boundaries.

Keywords: one-child policy; contraception; male preference; family planning; childbearing

Introduction

China's One-Child Policy remains a precedent of controversial social engineering. In 1980, the Chinese Communist Party called upon the country to adhere to a policy that limited families to one child. This was enacted in response to China's rapid economic and population growth after the Cultural Revolution, which engendered concerns about maintaining standards of living with

limited natural resources (Zheng, 1985). Policymakers also sought to balance population control with economic growth, believing that a reduced birth rate would facilitate more sustainable development, improve per capita resource distribution, and accelerate China's progress toward becoming an industrialised economy (Zhang 2017). Widespread propaganda campaigns were used to promote the programme and encourage compliance (Fang and Leong, 2014). Family registrations were required and frequently audited, and while compliant couples were rewarded with preferential treatment in education, healthcare, housing, and jobs, penalties such as hefty fines were enacted for those with more than one child (Hesketh and Zhu, 1997; Doherty *et al.*, 2000). In many areas, mandatory intrauterine devices (IUDs) were placed postpartum, abortions were mandated for 'unauthorized' pregnancies, and permanent contraception was required for couples with two or more children (Hesketh and Zhu, 1997; Doherty *et al.*, 2000). During the 35-year period of the one-child policy, strict implementation and widespread enactment succeeded in curbing China's population growth; however, it also brought a wide range of downstream social, cultural, and demographic effects, many of which may still persist among the Chinese diaspora.

In contrast, countries such as Singapore, Norway, Sweden, Hungary, Poland, Czechoslovakia, Albania, the USSR, and Bulgaria all endorsed pronatalist policies in the 1980's, offering benefits such as public childcare, family leave, and workplace flexibility, with varying degrees of success (David, 1982; Cook *et al*, 2023; Tan, 2023; Hart and Holst, 2024).

While effects such as a skewed sex ratio or a diminishing workforce have been well examined within China, little is currently known about the continued reproductive impact on the current Chinese diaspora (Zhu *et al.*, 2009; Gustafson and Baofeng, 2014; Campbell, 2019; Feng, 2021; Flowers, 2023). As such, in-depth interviews with Chinese-born and first-generation women of Chinese descent in the United States were conducted to describe their effects on the Chinese diaspora. Key themes identified in this study included financial strains of having more than one child, a personal preference for smaller families for optimised resource allocation, as well as societal shame associated with having more than one child.

Methods

The authors of this study conducted thirty audio-based interviews with reproductive-age Chinese-born or first-generation women of Chinese descent. This study was approved by the Institutional Review Board (IRB) of the Albert Einstein College of Medicine. Participants were recruited from a larger validated national survey examining the impact of China's one-child policy on contraceptive utilisation and childbearing choices. Interviews were conducted between 1/1/2021 and 12/31/2021.

Inclusion criteria consisted of persons aged 18–50, self-identifying as female or assigned female at birth and at risk for pregnancy at some point during their life, of Chinese descent, which was defined as being born in China or having biological parents born in China. Participants were recruited from a larger survey study on the reproductive effects of the one-child policy. Participants were recruited through cultural groups on social media, paper flyers posted in Chinese-predominant neighbourhoods in New York City, and through email via the Collaborative Approach for Asian Americans and Pacific Islanders Research and Education Registry (CARE), which is supported by the National Institute on Aging of the National Institutes of Health. After survey completion, participants were invited to provide contact information to participate in a 45–60 m interview about the one-child policy at a later date. Participants were selected by the authors based on survey responses to represent a wide variety of opinions and experiences towards the policy, as well as demographic heterogeneity. All women who were chosen to be interviewed received a $40 Amazon gift card following the interview.

Participants were contacted via email to schedule a date and time for the interview. Those who completed the survey in Chinese were also offered live Mandarin or Cantonese interpretation.

All interviewees agreed to be interviewed on audio over Zoom or over the phone. All interviews were conducted by two of this study's authors, AW and JN. Prior to starting the interview, participants were reminded they would be asked questions about sensitive topics such as their experience with the one-child policy, contraceptive utilisation, and childbearing goals. During the interview, the only people present were JN with or without AW, a certified Mandarin or Cantonese interpreter if needed, and the participant. Interviewees were told their identity and identifiable information would be removed or altered before the final report, and that their identity would be kept confidential. Interviewees could also stop the interview at any point.

Interview guide design

An interview guide was created with two core sections. The first core section focused on the participant's historical perspective, while the second focused on contraceptive utilisation and childbearing choices. The guide was developed based on the authors' conceptual framework, a literature review of factors affecting experience with the policy, and from a convening of content experts and stakeholders, including behavioural scientists, researchers, clinicians, and end users from the cultural group of interest. The guide was developed and piloted with two end users to ensure clarity and reproducibility.

Historical perspective questions focused on the participant and their family's exposure to the one-child policy and if or how the policy affected their upbringing, including relationships with others, education or employment. Several questions focused on how the participant's sex affected their experience and opinion of the policy. Contraceptive utilisation and childbearing choice questions queried how the policy might have affected their reproductive choices as well as contraceptive methods used or considered. Several prompts queried the impact of a participant's present or future child's gender on childbearing choices or contraceptive utilisation, the most important qualities of a method used, and usual sources for reproductive health information.

Analysis

Interviews were analysed using Dedoose (version 9.2.012) and followed the principle of thematic analysis, in which researchers identify patterns of experience and overarching themes within a qualitative data set. Two authors, AW and JN, initially read four interviews and met to develop a codebook that reflected common themes. AW and JN then independently coded the remainder of the 30 interviews. As new patterns arose, AW and JN met to edit the codebook as needed. After completion, AW and JN met to discuss any disagreements on the application of a code. A third author, NN, then recoded all interviews to identify the most prevalent themes without seeing prior codes to ensure agreement on themes. Analysis tools on Dedoose were also used to assist in identifying themes.

Analysis began after 25 interviews, so that if thematic saturation was reached, the study would be concluded. However, it was felt by all authors that after 25 interviews, additional interviews should be conducted with an older demographic to capture any potential variation in experience. Therefore, an additional 5 interviews were conducted.

Results

Thirty women were interviewed for the study. All participants resided in the United States at the time of the interview. The mean age of participants was 33, with a range of 18 to 50 years. Each interview ranged between 45–60 minutes in length. Six of the participants used interpreters. Eighteen of the participants (60%) were born in China, and for these participants, the mean

number of years residing in the United States was 14.1 years. The range of pregnancies among participants was 0–5, and the range of births was 0–2.

Financial concerns

Financial concerns were one of the most consistently discussed themes across participant interviews. In fact, 15 of the 30 respondents (50%) directly mentioned financial burden as a major factor influencing their childbearing decisions. Participants described a variety of financial pressures, including the costs of childcare, education, and housing, both in China and in the United States. One participant explained her desire not to have any children, stating:

> *'I don't want to like . . . raise a child in conditions where we always have to worry about money and finances and stuff like that. So, that's one thing that has influenced my decision for now that I don't really want kids too much.'*

Another woman, who was orphaned due to the one-child policy, and ultimately adopted by an American family, shared a similar perspective:

> *'Even if you are making a higher salary, it's just so much money to raise a child well. If you want to pay for daycare and quality schooling and stuff, it's just more money in general.'*

These two participants, interestingly, expressed these opinions about future children even after leaving China. While some interviewees expressed not being able to afford an additional child even if they desired to during the one-child policy, as economic turmoil was rampant, several participants continued to demonstrate these views despite now living in a new country with different policies. For instance, one participant stated,

> *'Even though everyone is allowed to have more than one child, the majority of my family has one child. I think the cost of living is so expensive, and the idea of the kind of like educational investment into your kids is so expensive, so I think they're very hesitant to divide their resource into multiple children.'*

One woman even perceived the rationale of the one-child policy as still economically relevant in the United States, sharing,

> *'I think I actually benefitted from this policy on a personal level because . . . paying for prep schools and colleges in the U.S. is insanely expensive.'*

Interestingly, this specific participant endorsed the policy's outcome as logical and beneficial, capturing the internalised rationale for a small family across generations.

Other participants discussed ongoing preference for small families even after the expansion of the one-child policy, stating,

> *'Now they're at a three-child policy in China, but people are not willing to have up to three children because of so many different circumstances . . . they're just affording to live for themselves.'*

Together, these accounts illustrate how financial reasoning remains a significant determinant of reproductive decision making for the Chinese diaspora both in and out of China, echoing the one-child policy's intended association between economic prudence and small family size.

Shame

The one-child policy also created a cultural norm in which significant social pressure limited family size. The repercussions of defying the policy, such as fines, mandatory abortions, and forced sterilisations, brought significant stigma to families. One interviewee shares the story of a friend who was born under the One-Child Policy as the secretive second child:

> *'I actually have a friend now in New York, she's from (Shienne) and she's actually the second child in her family. . . . She actually went to boarding school throughout her entire life because I think her parents just had to hide her in different boarding schools so they were not living together in the same apartment.'*

This need for concealment due to defying the state-mandated policy ultimately shapes the collective mindset with a sense of 'wrongness' and inherent moral coding. In addition to the aforementioned financial and reproductive consequences, widespread propaganda further bolstered adherence to the mandate, disseminating messages like 'One child born outside the policy, the whole village gets sterilized' and 'Those who have more children than allowed will lose a family fortune' made it very clear the attitude of the country's leadership towards those who openly defied this norm (Li, 2021; Koetse, 2023). One study participant, when asked about the consequences of having more than one child during this period, recalled,

> *'I think the other thing about it is when you have more than one child it comes with shame. It comes from shame in a society. And it's like, there is the logistics and the financial aspect of it, but then there's also just a social pressure. I remember we have a distant relative when I was a kid, and she had four daughters, and he was still trying to get a male heir. But I feel like their family was just a nomadic family that was on the run all the time, because they couldn't settle in any place because they would get found out. So, that's like something I remember. I remember feeling judge[ment]—I can remember me as a very small child judging them, just like why do they need so many children? And why do they just really insist on having a male child? But I think having more than one child comes with shame.'*

As expected, participants mainly discussed the theme of shame when describing life under the one-child policy. While participants did not explicitly report *current* feelings of shame for having more than one child, five respondents explicitly described negative connotations or alluded to persistent social stigma attached to larger families, reflecting the collective memory of punishment and social judgment from that time. One interviewee reflected on the experiences her mother shared with her during the One-Child Policy, discussing forced terminations, mandatory contraception, as well as monthly medical examinations, and shared how this impacted her own reproductive perspectives. She stated,

> *'I think maybe to some level after hearing a not so pleasant pregnancy and childbearing experience she has gone through partially because of the One Child policy . . . I think to some level it affects how I view my birth choices in the near future . . . I don't find having children very attractive.'*

Her views reflect a residual aversion to childbearing, which was in part shaped by her mother's experiences with the policy. She emphasises a desire to avoid all the unpleasantries of the policy, which, at a minimum encompasses societal shame and, at a maximum, may have included fines, mandatory abortions, or sterilisation surgery.

Another participant discusses lingering social stigma regarding expanding one's family as well. She shares the perspectives of her mother's friends who currently reside in China under the three-child policy, stating,

> *'. . . because during her age everyone was brainwashed by the government, so they all think it's a policy that they should follow . . . now they opened up the policy, but because of the economic problem and the society pressure, they don't even want more kids anymore.'*

In contrast to the shame perpetuated by China at this time, pronatalist cultures such as Israel, Russia, and many sub-Saharan countries viewed procreation as a natural part of life and even a fundamental obligation. In these communities, building large families was encouraged and seen as one of life's successes (King, 2002). In fact, in these countries, birth rates were notably higher than China's. For instance, in 1995, fertility rates in Israel hovered around 2.90 births per woman, compared to China's 1.59 births per woman that same year (Commons, 2024; O'Neill, 2024). Indeed, several Jewish interpretations of the biblical commandment 'Be fruitful and multiply' in a post-World War II climate have underscored Israel's vastly different approach towards family planning compared to China. While there are many factors that contribute to a country's population growth, these data support the significant role of a country's messaging to its people.

Benefits of one child and the desire for a few children

The benefits of having a single child were also identified as a prevalent theme among participants; most discussed the advantages of increased resource allocation towards one child as well as the ability to parent with undivided attention. As such, having a small family was a common goal. This sentiment was apparent in one study participant, who, when asked about any further reproductive plans after having one child, stated,

> *'I spend so many time taking care of her [daughter]. I cannot think—I cannot image if I have another kid, how can I —how—I don't have time to work.'*

The benefits of having a single child were discussed not only from a parenting perspective but from the viewpoint of only children as well. Many study participants were the only children of parents affected by the policy, and they highlighted the benefits of being the sole recipient of resources such as food, clothes, toys, education, tutoring, as well as parental attention. One participant recalled,

> *'. . . from what I can remember, [I] didn't want any siblings growing up because like every time when I have my favorite food or my toys or anything, and then I just don't want to share with other people or my cousins or neighbors or whoever, and then especially my mom would just be like, 'Oh, you can't be this selfish, especially you are lucky you are the only child. If you have siblings you have to share.' I really hated it, so I was, 'No. I am just going to be the only one."*

Similarly, another participant discussed the benefits of undivided parental attention:

> *'. . . I feel like because I'm the only child I feel like I'm getting all the love from my parents, it's like 100%, which I really appreciate.'*

During the policy's enactment, campaigns not only affirmed that the programme was a logical and necessary collective solution to overpopulation, but they also promoted the benefits for individual families and their offspring. Government messages were disseminated through media, slogans, and posters that endorsed the advantages of smaller families due to their ability to invest more in their child's education, and by extension, would bolster their ability to succeed as an adults in a competitive global economy (Commons, 2024). In light of this, the phrase 'Having only one child is good' became the most popular slogan of propaganda posters during the time (Koetse, 2023). That these participant responses mirror the messaging of the one-child policy aligns with a persistent impact of the policy even after emigration. Participants did not adopt the pronatalist

attitude promoted by other countries during this time after emigration, suggesting that China's policy continues to influence the attitudes of its people even as far as one generation later.

In fact, this idea of maximising attention and resources towards one child became a common theme within Chinese society, and eventually brought rise to the 'Little Emperor Syndrome' or 'Little Emperor Effect,' in which only children born to wealthy and upper-class families under the one-child policy were notoriously spoiled and entitled (O'Neill, 2024). A defining characteristic in families with 'little emperors' was the '4-2-1 syndrome' where the standard for a nuclear family consisted of four grandparents, two parents, and one child (Jiang and Sánchez-Barricarte, 2011). The combination of increased spending power due to China's recovering economy and parents' desire for their children to fare better than themselves resulted in a generation of children showered with attention, toys, and resources. Despite this well-documented pitfall of the one-child policy, most study participants still highlighted the benefits of having only children.

Discussion

This study aimed to describe the reproductive effects of China's one-child policy on the Chinese diaspora living in the United States. Results found that most participants felt financial concerns about having only one child, which was in line with Chinese propaganda at the time, as well as significant shame among those who defied policy. This study also found that both parents and children preferred one-child families because of the resources and attention that could be focused on a single child, which echoed the same messages promoted by the Chinese Communist Party.

Much of the rhetoric promoting the one-child policy should be taken in context. After the Cultural Revolution, China underwent a dramatic economic change. In addition, political instability during this time led to pervasive economic difficulties, in which a wave of strikes, factory slowdowns, and worker absenteeism arose (O'Neill, 2024). As such, much of the propaganda associated with the one-child policy focused on the financial requirements and burdens of building larger families.

The implications of these attitudes towards childbearing have begun to be described. Drastic demographic shifts have been well documented in the decades following the one-child policy. For instance, the emergence of a significantly skewed sex ratio has been recognised as a consequence of the one-child policy. There now exists drastically more males than females in China, with approximately 110 males born for every 100 females, making it the country with the largest gender difference in the world (Feng, 2021). As male children are viewed as being able to continue the family line, inherit property, head the household, and care for their elderly parents, the traditional standard for male preference has been exacerbated by the limitations of having a single child. Given the heightened preference for male heirs, it has been reported that sex selective terminations and adoptions have increased (Zhu *et al.*, 2009). China now has significantly more adult males, which scholars have hypothesised could increase marriage coercion, sex work, labour markets, employment, and even crime rates (Li *et al*, 2005).

Additionally, the aforementioned '4-2-1' family structure in combination with China's increasing life expectancy has resulted in an expanding ageing population with fewer family members than ever before to assist in caring for them (Nie and Wyman, 2005). More than 200 million elderly people currently live in China, equivalent in size to the fifth most populous country in the world (Zhang and Goza, 2006). An unintended consequence of this family structure includes the creation of the 'sandwich population,' which describes a middle generation who simultaneously care for both the ageing older population as well as the 'little emperor' younger population (Nie, 2016). In fact, China's current policymakers have been tasked with the job of reversing the messaging of the one-child policy. Since 2014, the Chinese Communist Party has implemented a two, and subsequently three-child policy, in addition to incentivising births to combat the demographic crisis, as the fertility rate continues to remain below replacement levels (Cao and Wang, 2009).

The findings observed in this study carry theoretical implications for understanding the Chinese diaspora's relationship with modern Western medicine, as decades of propaganda, mandated reproductive procedures, compulsory contraceptives, and state-controlled educational and employment benefits tied to reproductive health care may contribute to patterns of medical mistrust, hesitancy toward certain contraceptive methods, and enduring caution around reproductive autonomy in the United States, where historical context is very different.

These findings may also have broader implications for how governments approach fertility policy today. Many nations, such as Japan, South Korea, Singapore, and several European countries, are facing persistently low fertility rates and have responded with pronatalist measures such as financial incentives, extended parental leave, and subsidised childcare (Boydell *et al.*, 2023). Although these initiatives are not nearly as obligatory as China's former one-child policy was, they still reflect a form of state involvement in shaping reproductive behaviour. The experiences of the Chinese diaspora queried in this study showcase that when fertility norms become ingrained in culture, they can persist long after the policies themselves have changed. Even after the introduction of the two-and three-child policies, China's birth rate has continued to decline - falling below ten million births in 2022 and reaching the lowest natural population growth rate recorded in the twenty-first century (Wang *et al.*, 2025). This continued preference for smaller families illustrates how cultural attitudes toward childbearing can outlast direct policy enforcement.

These patterns raise important questions for other countries now attempting to encourage higher fertility. While the aforementioned efforts in Japan, South Korea, Singapore, and several European countries rely on incentives rather than restrictions, it is difficult to anticipate what the long-term social consequences of such policies may be. As history has shown in China, once government messaging about family size becomes internalised, its effects may endure in ways that are unintended and hard to reverse. In this sense, China's one-child policy serves as an example; policies that intervene in personal reproductive decisions can have lasting impacts on how individuals and societies come to view childbearing, reproductive goals, or their relationship with modern Western medicine.

This study has several strengths. The interview guide created was informed by stakeholders, participants and content experts, and was piloted prior to use in this study. The participants interviewed had a wide range of ages and backgrounds. Chinese academics and community leaders were also involved in an effort to understand perspectives on researching a charged and stigmatised topic. As this qualitative study drew from a prior survey, the authors were able to use both survey information and detailed qualitative interviews to thoroughly explore participants' thoughts regarding all pertinent topics, resulting in rich narratives about life under the one-child policy. Additionally, multiple authors individually coded themes that were then mutually agreed upon as common topics, potentially reducing researcher bias.

Limitations of this study included potential reporting bias from participants, as it is recognised that there can often be a discrepancy between their responses and true beliefs or actions. Participants could also be subject to recall bias, as the policy was enacted between 1980 and 2015, and their views or opinions may have been swayed by decades of news and public opinion. In addition, generalisability of this study may also be limited despite efforts to select participants to represent a wide range of experiences, as the study population was not nationally representative.

China's one-child policy remains one of the largest and most controversial family planning policies in history. Its restrictions on human liberties in an effort to curb population growth and boost the nation's economy remains a contentious topic. While scientists continue to examine the persistent consequences of the one-child policy, they may look upon its lingering impact as a cautionary tale for the reproductive regulations that are currently being debated in other areas of the world today.

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Ethical standard. The authors assert that all procedures contributing to this work comply with the ethical standards of the relevant national and institutional committees on human experimentation and with the Helsinki Declaration of 1975, as revised in 2008.

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