

## Comment on Dr. Peng Xizhe's "Fertility Transition in China"

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### 1. Concerns about the presentation

I was forced to make comments on the written text at the conference on the 15<sup>th</sup>, December. I noticed that there was a substantial gap in the materials between the text and the presentation after he reported his paper on that day. In an academic society, it is responsible for an author to inform his commentator of what is to be presented in advance and the author should keep in mind that a large portion of unexpected materials in a presentation will make discussions less constructive.

### 2. Summary of the paper

The author describes the fertility transition in China in the 1970s with "one-child policy" aided by change in reproductive norms in the 1950s, which reduced TFR from 5.8 in the 1950s to 2.8 in 1979. Moreover, further decline in TFR was observed after the 1980s and the trend continued declining trend to replacement rate & economic development after the 1990s. TFR ranged 2.3-2.9 in the 1980s and declined to 1.7-1.8 in the 1990s.

The author pointed out three major determinants as backgrounds of those TFR trends. One of them is government program which consists of centralized guidance with decentralized policy formation and operation (Table 3). The program has been aided by more voluntary participation and heavy reliance on female contraception. Another driving force is socio-economic development, i.e. rapid growth and larger job opportunity and regional gap in income and education. The last factor is changes in reproductive culture like change in marriage patterns or smaller family size. The author observes large but converging regional disparity and policy TFR and economic development (per capita GDP/consumption, urbanization) matters.

### 3. Comments

If revised substantially, this paper might be a concise overview of the Chinese fertility over the 50 years. The author emphasized the three determinants in the text but it is not clear contributions and causality among those factors. He should provide empirical evidence on which is the dominant with a persuasive methodology to identify quantitatively. What is the most important for current and the future? Lower fertility has reverse causality? He should address to those issues.

In the conclusion, he mentions “rebound”. Is it possible to get back to “two child”? The current TFR is suppressed by government regulation but further economic development (quality-quantity argument) and/or change in norms might mitigate the rebounds. He should provide his logic and accompanied evidence. Moreover, he should discuss policy implications based on a long-term effect of the lower fertility such as economic growth, social security policy (pension, long-term care, medical care) and abnormal sex ratio (biological, sociological effects).

Remaining comments: Is there rationale for the policy target (one child or other)? Poverty reduction? Optimum for economic growth? Still valid now? Financial incentive/disincentive really works? (P.6).