

China's One-Child Family Policy

TO THE EDITOR: Hesketh and colleagues (Sept. 15 issue)¹ provide an interesting survey of the effects of the infamous Chinese one-child policy after 25 years. However, I was somewhat taken aback by the authors' editorial statement that "relaxation of the policy can be considered only if fertility aspirations are such that a baby boom will not result." Certainly, this is the same sort of argument that tyrannical regimes have given for continuing their oppressive policies, from apartheid and dictatorships to the oppression of women and just about any other human-rights violation through history. The policy of one child per family has been a terrible violation of the personal rights of millions of Chinese women. All that is necessary for the draconian policy to be removed, not just "relaxed," is for the Chinese government to make the decision to stop such repressive measures and start dealing with the problems posed by an expanding population through moral means. I am disappointed to see the "ends justify the means" logic endorsed and unchallenged on the pages of a respectable medical journal.

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1. Hesketh T, Lu L, Xing ZW. The effect of China's one-child family policy after 25 years. *N Engl J Med* 2005;353:1171-6.

THE AUTHORS REPLY: We agree that the one-child policy is a violation of the human right to reproductive choice, as we acknowledge in our article. It is precisely for this reason that it is so controversial. But we should not judge the Chinese by Western standards. Few Chinese see the policy as a human-rights violation. Most (though not all) accept it with equanimity, even in the cities where the one-child rule is enforced. This is perhaps less surprising when one considers the overcrowding in Chinese cities, the pressures of child care with two working parents (as is usually the case), and the high cost of raising children.

The Chinese authorities would argue that the policy has contributed to improvements in human rights by lifting more than 200 million people out of poverty and by raising living standards for the majority of the population. In an increasingly interdependent world, where available natural resources per capita are decreasing, the Chinese government should perhaps be applauded for having the courage to take unpopular measures to control population growth.

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Public Health Principles for the HIV Epidemic

TO THE EDITOR: We commend the call by Frieden et al. (Dec. 1 issue)¹ for a comprehensive public health approach to the epidemic of human immunodeficiency virus (HIV) infection. The authors' lack of evidence with regard to the relative impact of their case-finding approach, however, raises questions about the scientific basis for their conclusions. Given that there is considerable stigma against injection-drug users, men who have sex with men, and sex workers in many localities and institutions, it is important to evaluate whether the case-finding techniques would increase stigmatization of those at risk and thereby weaken HIV-prevention efforts among stigmatized and fearful risk groups. Injection-drug users in New York City began reducing their high-risk behavior before AIDS was identified in 1981, and their effec-

tive efforts to minimize risk and to communicate methods of risk reduction still continue.²⁻⁴ Organizing on the part of homosexual men since the early days of the HIV epidemic has contributed to far-reaching effects on policy, high-risk behavior, and community norms.⁵ Before the case-finding proposals of Frieden and colleagues are implemented, research should determine whether they would weaken the prevention efforts of the populations at risk.

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