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Ethical Dilemmas of Female Fertility under Policy Shifts

Yige Qi

School of Humanities and Social Development, Northwest A&F University, Yangling, China
estella5247@gmail.com

Abstract. China's birth rate has dropped quickly, from 1.6 babies per woman in 2016 to 1.09 in 2023. More women of child-bearing age are choosing to delay or skip both marriage and motherhood. Fertility is a major issue related to economy, society and family development. Based on care ethics and stakeholder theory, this study explores the ethical dilemmas confronting women under China's evolving fertility policies, especially Three-Child Policy. Through semi-participant observation and in-depth interviews with ten women of childbearing age, which reveals the reasons from three dimensions, it is found that workplace discrimination, social norms displayed in family field and social-cultural constraints in whole society together lead to the ethical dilemmas of female fertility. This study improves insights of fertility decision from female individuals by arguing that the current policy shifts and design lack of support and social collaboration.This finding suggests that relevant measures are supposed to be taken under policy shifts to better safeguarding women's reproductive and fair employment rights and enhancing sustainable social development.

Keywords: Fertility policies, care ethics, stakeholder theory, corporate social responsibility

1. Introduction

China's total fertility rate fell sharply below the replacement level, dropping from 1.117 births per woman in 2021 to 1.034 in 2022 and just 0.999 in 2023 . At the same time, the number of births fell to 12 million in 2020—the lowest since 1960 [1]. Facing rapid population aging and a decline in the number of adults of childbearing age, the government introduced the three-child policy in May 2021, along with a set of financial and social support measures for larger families.

Early findings on the policy's impact are still mixed, and women—the main participants in fertility decisions—confront difficult choices. Do these new measures actually reduce the economic, career, and health risks of having more children, or do they simply squeeze women's personal and work life? To explore this, this study uses semi-participant observation and in-depth interviews with ten women of childbearing age, looking at how policy design and application affect their reproductive choices, caregiving burdens, and overall well-being.

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2. Literature review

2.1. Fertility policy shifts

Since 1949, China's birth rules have passed through six main stages. Initially from 1949 to 1953, there was no formal limit and families decided freely. Then, in 1954 the government began supporting contraception and approved measures on abortion and family planning. Between 1960 and 1969 leaders issued clear calls for planned births in cities and crowded rural areas. From 1970 to 1983 family planning became a national focus, later in 1980 the one-child rule was written into the Constitution. This rule was strictly enforced for decades then, with few exceptions for some rural couples. In 2002, the Population and Family Planning Law allowed "double independent" couples—where both spouses were only children—to have two children. Later, in 2013 a selective two-child policy let couples have two children if one parent was an only child, and three years later the universal two-child policy removed all limits. Eventually, in May 2021, the three-child policy was introduced, allowing every couple up to three children and adding support such as longer parental leave, childcare services, and low-interest loans to encourage higher birth rates [2].

2.2. Care ethics and stakeholder theory

2.2.1. Care ethics

Gilligan first argued that personal ties matter more than fixed rules [3]. Noddings then pointed out the coherent ethic of care to be a cornerstone of educational and moral practice [4]. Tronto expanded this framework, applying care ethics to public policy, laying out stages of care and related duties [5], which Held later broadened to address global justice and institutional reform [6].

2.2.2. Stakeholder theory

Freeman first framed stakeholder theory within strategic management, defining stakeholders as any group essential to organizational success[7]. Clarkson refined this by establishing clear criteria for stakeholder identification and salience [8]. Then, Donaldson and Preston argued that firms have duties to these groups, not just owners[9]. And later Phillips [10] and Freeman [11] added that caring for these groups is key to a company's social responsibility.

2.3. Fertility policy shifts research in China

The idea that gender equality should shape the fertility policy-making process is not new. Kwete, Knaul, Essue, and Langer demonstrate how successive pronatalist shifts reshape women's unpaid care burdens and equity outcomes, arguing that without framing men as active caregivers, these incentives merely transfer new burdens onto women [12]. Rather than waiting to "fix" inequalities afterward, it is crucial to identify and remove barriers during policy design. However, Jie Chen, Yan Gao, and Xi Wang's PMC-based study finds that, despite overall coherence, gaps persist in policy goals and thematic coverage [13]. This shortfall matters because policies must support every stage of reproduction. For example, Li and Xiao show—using survey and administrative data—that mothers under expanded leave regimes face clear hiring bias and job instability, as employers view fertility history as a sign of future productivity loss [14]. Similarly, Leng and Kang link policy expansion to firms' perceived "fertility costs", which lead to downgraded hiring and limited promotion for women [15].

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While prior work has mapped policy shifts, measured discrimination, and identified corporate and cultural constraints, it rarely centers on women's personal perspectives. To fill this gap, this study adapts semi-participant observation and in-depth interviews—led by a female researcher—to uncover the individual priorities, dilemmas, and emotional motivations that shape Chinese women's fertility decisions under the three-child policy.

3. Research hypothesis

This study builds on care ethics, where Tronto argues that policies must secure women's emotional and relational needs by embedding care into every stage of support.From this basis, role-strain theory shows how conflicting demands—professional duties versus caregiving—create stress when support is absent, as Goode demonstrated in his work on role conflict. Empirical research on the motherhood penalty then reveals how anticipated caregiving breaks translate into workplace discrimination, turning moral strain into tangible career setbacks.

Next, cost–benefit stakeholder theory explains why employers often marginalize reproductive women: organizations assess leave costs against productivity gains and frequently deprioritize women viewed as future caregivers, a point Freeman emphasizes in strategic management. Stakeholder theory further expands responsibility beyond firms to include government and families, arguing that all actors must share in creating supportive care systems

By linking these perspectives, we trace a causal chain: weak policy design disrupts moral care obligations, heightens work–family conflict, fuels workplace bias, and reflects a narrow stakeholder calculus. Hypothesis: China's shift from a two-child to a three-child policy will intensify women's ethical dilemmas—amplifying conflict and discrimination—unless policy measures explicitly redistribute care responsibilities among employers, state agencies, and family members.

4. Methodology

4.1. Semi-participant observation

The author conducted semi-participant observation by reviewing and collecting public posts on Weibo, Xiaohongshu, and Douban—platforms where over 50% of users are women—focused on reactions to the three-child policy. Only posts with high engagement (average likes exceeding 1,000) and their top comments were included. This approach provided real-time insight into women's spontaneous reflections, concerns, and peer interactions around policy implementation.

4.2. In-depth interviews

To deepen understanding, ten women of childbearing age were recruited for one-on-one interviews lasting 45 to 60 minutes each. Participants varied in age, education level (from junior high to bachelor's degree and above), marital status, and economic background. Recruitment combined purposive and snowball sampling to ensure a diverse sample. Interviews followed a semi-structured guide, exploring personal experiences, caregiving burdens, workplace and family support, and emotional responses to the three-child policy. They will be named as A1...A10 as below in Table 1.

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Table 1: Interviewee profile distribution (N = 10)

Variable	Category	Frequency
Gender	Female	10
Age Group	20-25	3
	25-30	4
	30-35	3
Education Level	Middle school	2
	High school	3
	Bachelor's or above	5
Residence	Urban	3
	Rural	7
Marital Status	Single	2
	In Relationship	3
	divorced	2
	Prefer not to say	1
Child Status	No child	6
	One child	3
	More than one child	1

5. Ethical dilemmas

5.1. Workplace discrimination (motherhood penalty)

A3, a mid-career manager, shared, "When I told my boss I was expecting a third child, he said my promotion was 'on hold' until I showed I wouldn't leave again." Similarly, A7, a recent university graduate, recalled, "During job interviews, they always ask if I plan more children—then I never get a callback." These stories show how the three-child policy can backfire: instead of support, women face stalled careers and closed doors. Under care ethics, policies should protect women's right to both work and family life, yet employers treat motherhood as a risk to productivity. From a stakeholder view, companies are key partners in sharing care responsibilities but often refuse to adjust leave rules or offer return-to-work help. This gap forces women into a tough choice: follow state goals and risk their livelihood, or limit their family size to keep their job. Our hypothesis argues that without clear measures—like flexible leave or guaranteed re-entry programs—this policy shift will deepen women's conflict between career and childcare. In other words, unless employers, government, and families all step up to share care duties, the move to three children will only heighten the ethical dilemmas women face.

5.2. Family social norms ("absent fatherhood")

In many Chinese homes, women still do most of the caregiving. For example, A7, a university graduate in her late twenties, said, "I never thought to ask my husband for help—everyone I know expects women to handle both work and home." By contrast, A5, who finished middle school, noted, "My husband says his job is enough—cooking, cleaning, and childcare are my duties." These remarks show how unwritten rules and social pressure assign about 80% of housework to women.

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From a care ethics view, this uneven share violates women's need for mutual support. Role-strain theory explains that juggling a paid job plus heavy home duties causes ongoing stress. Stakeholder theory adds that families—key players in care—often avoid their responsibility. Fathers and other relatives are meant to share the load but frequently step back, leaving mothers alone.

Some women feel caught between knowing the unfairness and accepting it as normal. A9, an urban professional, admitted, "I know it's unfair, but it just feels right—my mother did it, and so do my friends." This shows how deeply rooted mindsets can block change.

Unless family norms shift—by encouraging fathers to take real part in day-to-day care and by rewarding shared chores—women will stay trapped between the state's call for more births and the reality of bearing almost all care work themselves. In other words, without clear steps to involve every family member, policy moves like the three-child rule will only deepen women's struggle between taking on more children and balancing work and home life.

5.3. Social-cultural constraints

The difficulties women face with reproduction also result from deep-rooted social-cultural constraints. Although China's traditional family structures have evolved, Confucian values remain resilient, framing childbirth as a collective duty rather than a private choice. As A2 explains, "In my village, they say you must have a son—stop at two daughters and you bring shame" (A2). Under this expectation, DINK couples are often labeled selfish or unpatriotic, as A8 notes: "Friends call me selfish for not having kids" (A8). Confucianism further enforces strict gender roles, assigning men to provide and women to care. Despite rising female workforce participation, mothers still bear dual burdens: "If my child fails at school, everyone blames the mother" (A5).

These cultural imperatives intersect with modern pressures of "elite parenting," where competitive education demands time, money, and emotional labor. Women shoulder most of these costs, intensifying their ethical dilemma: comply with societal duty and risk career setbacks and personal stress, or resist and face social stigma. From a care ethics perspective, this imbalance undermines women's moral right to self-directed reproductive decisions, as social norms dictate their choices. Stakeholder theory would place responsibility on families, communities, and institutions—schools, media, and local governments—to reshape norms and share care duties. Yet, in practice, these stakeholders remain passive, leaving women caught between policy incentives and cultural obligations. Without targeted efforts to transform social norms and actively involve all stakeholders in caregiving, policy shifts like the three-child policy deepen rather than alleviate women's ethical dilemmas, perpetuating a cycle of pressure, blame, and inequity.

6. Conclusion

First, this study confirms that the three-child policy, despite its aim to raise birth rates, has actually added new burdens for women of childbearing age. Through semi-participant observation and interviews with ten diverse women, we found that workplace bias remains strong, family care duties still fall mostly on mothers, and deep-rooted cultural expectations add extra pressure. These real-world insights support our central question: unless policies include clear support and shared responsibility, expanding fertility limits only deepens women's ethical dilemmas rather than easing them.

Second, the confirmation of hypothesis underscores the practical value of care ethics and stakeholder theory for understanding fertility policy. Care ethics highlights the need to build policies around women's actual care needs—emotional, physical, and logistical—while stakeholder theory

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emphasizes that responsibility cannot rest on women alone. Employers, families, and government all have a role in creating a supportive environment. By showing how gaps in policy design break these ethical and social bonds, the findings illustrate how theory can guide more balanced and humane policy measures.

Eventually, this study draw three key implications for future action. One, financial incentives alone are not enough: policies must guarantee flexible leave arrangements, secure job reentry, and accessible childcare. Two, father involvement must be encouraged through clear rules and cultural change, so that care duties are shared at home. Three, community norms and workplace culture must evolve to value caregiving as a collective task rather than a private burden. Together, these steps point toward a more coherent approach, in which policy shifts truly support women's reproductive choices without forcing them to choose between family and career. Only with this integrated effort can China build the social collaboration needed to make higher-order fertility goals realistic and fair.

References

[1] Federal Reserve Bank of St. Louis. (n.d.). (Apr 16, 2025). Fertility Rate, Total for China. FRED. https://fred.stlouisfed.org/series/SPDYNTFRTINCHN
[2] Wikipedia contributors. (December 30, 2024). Three-child policy. Wikipedia, The Free Encyclopedia. https://en.wikipedia.org/wiki/Three-child_policy
[3] Gilligan, C. (1982). In a Different Voice. Harvard University Press
[4] Noddings, N. (1984). Caring: A Feminine Approach to Ethics and Moral Education. University of California Press.
[5] Tronto, J. C. (1993). Moral Boundaries: A Political Argument for an Ethic of Care. Routledge.
[6] Held, V. (2006). The Ethics of Care: Personal, Political, and Global. Oxford University Press.
[7] Freeman, R. E. (1984). Strategic Management: A Stakeholder Approach. Pitman.
[8] Clarkson, M. B. E. (1995). A Stakeholder Framework for Analysing and Evaluating Corporate Social Performance, Journal of Business Ethics, 4(5), 53–62.
[9] Donaldson, T., & Preston, L. E. (1995). The Stakeholder Theory of the Corporation: Concepts, Evidence, and Implications, Academy of Management Review, 20(1), 65–91.
[10] Phillips, R. A. (2003). Stakeholder Theory and Organizational Ethics. Berrett-Koehler.
[11] Freeman, R. E. (2010). Managing for Stakeholders: Survival, Reputation, and Success. Yale University Press.
[12] Xiaoxiao K., Marie F. K.,M. B. E., et al. Gender equity, caregiving, and the 1-2-3-child policy in China [J].The Lancet,2021,398(10304):953-953.
[13] Chen J., Gao Y.,Wang X. Evaluation of China's fertility policy based on PMC modeling [J]. Frontiers in Public Health, 2025, 13 1533307-1533307
[14] Li, Q., & Xiao, D. (2025). Fertility discrimination in the Chinese labor market: Evidence from a correspondence study and an employer survey. Labour Economics, 92, Article 102668.
[15] Leng, A., & Kang, F. (2022). Impact of two-child policy on female employment and corporate performance: Empirical evidence from Chinese listed companies from 2010 to 2020. Humanities and Social Sciences Communications, 9, Article 451.