

# Reproducing Identity

## Using Images to Promote Pronatalism and Sexual Endogamy among Tibetan Exiles in South Asia

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*In this paper the authors analyze images from publications, produced by the Tibetan Government-in-Exile during the 1990s, that were used to educate Tibetan exiles living in India about health issues. The purpose is to show how the images promote pronatalism and ethnic endogamy—objectives that Tibetan exiles view as essential steps toward stemming a perceived threat, perpetrated by China, to their existence as a distinct ethnic group. The authors argue that the storybook aesthetics used in these images efface the ideological controversy of their encoded messages by evoking the style and authority of remedial health education. [Key words: media production, public health literature, family planning, Tibetans, India]*

### Introduction

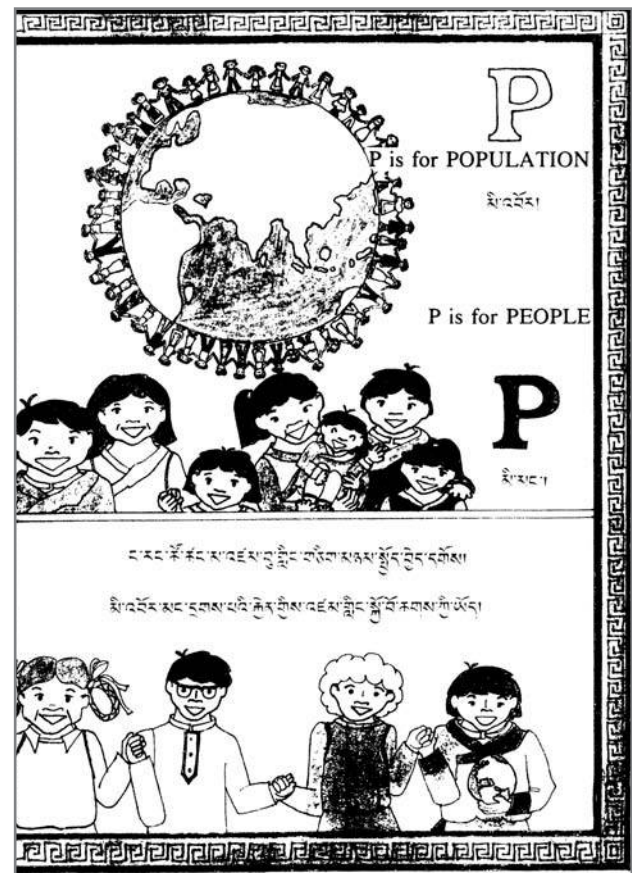
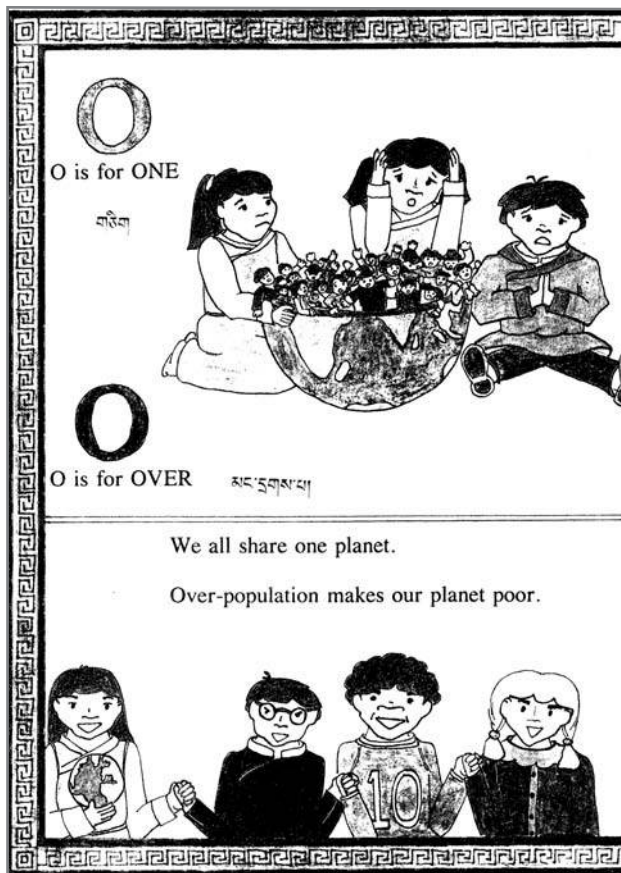
In this paper we analyze images from publications that were produced during the 1990s to educate Tibetan exiles living in Nepal and India about health-related issues. Our purpose is to show how these visual means promote pronatalism and ethnic endogamy, agendas that stem from the exiles' conviction that they must increase their population and remain ethnically pure to counteract a perceived threat of genocide perpetrated by China. We argue that the aesthetic style in which the images were created effaces the ideological stance of their encoded messages by evoking the form and authority of remedial health education. Data from surveys, in-depth interviews, and published literature emanating from the exile community are used to contextualize the discussion.

Shortly after Mao Zedong ascended to power in 1949, China asserted full military and administrative control over Tibet. A failed uprising in 1959 against Chinese rule resulted in the flight of the Dalai Lama, Tibet's spiritual and political leader, to neighboring India where he sought refuge along with thousands of Tibetans from all strata of society. Today, roughly 100,000 exiles live in refugee settlements in India and Nepal, while another 20,000 are scattered across Europe and North America (Planning Council 2000).

After arriving in India, members of Tibet's displaced nobility formed a government in exile in Dharamsala, a former British hill station. Since its inception the Central Tibetan Administration (CTA) has endeavored to foster cohesion among the refugees by limiting their assimilation into Indian society (Goldstein 1978). A strong sense of ethnic identity is instilled and maintained through secular nationalism (Klieger 1991) with a focus on Buddhist principles that are propagated through the exile school system (Nowak 1984). During the 1990s the CTA's Department of Health (DOH), in conjunction with foreign NGOs, produced illustrated booklets used to educate exiles about health and sanitation. The images that we analyze in this paper come from these publications. We argue that they advance the exiles' nationalistic agenda by conveying pronatalist and pro-endogamy messages.

Despite the increasingly accepted influence of visual media on political, economic and cultural life around the world, anthropological studies of how such forms are used by political and social elites to influence group ideology remain relatively rare (Ginsburg 1994; Mahon 2000; Spitulnik 1993). Early anthropological efforts at analyzing visual mass culture drew on the traditions of the Frankfurt school of culture critics (e.g., Horkheimer and Adorno 1947) and their





FIGURES 1 and 2. Opposing pages of a bilingual health reader for school children promoting the message that over-population engenders poverty. The reader was produced in the 1990s by the Central Tibetan Administration's Department of Health in collaboration with a foreign NGO. (Tibetan Health Education Organization and Department of Health n.d.a)

successors in cultural studies, including Stewart Hall and David Morley. Anthropologists have tended to eschew the so-called "high culture critique" associated with this tradition in favor of contextual studies of media reception practices that explore the role of culture and subjectivity in these processes (Mahon 2000).

The use of images to influence public perception of reproductive health and behavior has a long and politically charged history in many parts of the world (Crane and Dusenberry 2004). For example, the family planning industry regularly deploys images with the intent to influence peoples' decision-making processes, and can now demonstrate the existence of a strong correlation

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between reproductive behavior and exposure to messages conveyed through various media sources (Westoff and Rodríguez 1995; Piotrow et al. 1997; Kincaid 2000). In the health literature one recent study (Farrell et al. 2002) found that perceptions of the risk of contracting HIV from blood donation was significantly affected by certain “cue” images, even though the textual information provided to subjects was identical. There has also been a great deal of influential research done on the role of images in public and political abortion rhetoric (e.g., Berlant 1997; Blanchard and Prewitt 1993; Condit 1990; Esacove 2004; Newman 1996; Stenvoll 2002). Berlant (1997) and Condit (1990, 1994) have separately argued that groups opposed to abortion rights in the United States have been skillful at constructing a public image of the fetus as an innocent and vulnerable minority, mixing powerful images with the rhetoric of minority politics to personalize and moralize its ostensible plight. Because visual devices elicit visceral responses to images of surgical procedures, Esacove (2004) considers them to be the most powerful tools used by the National Right to Life Committee to infuse perceptions of abortion with negative meaning. The Tibetan exile government, on the other hand, has employed what we term a storybook aesthetic which, we argue, trades the elicitation of visceral response common to reproductive health advocacy for a covertly hegemonic authority.

This study is grounded in the tradition of anthropologists whose work on cultural producers acknowledges that media images and public information campaigns are anthropologically significant sites of cultural production and social influence (e.g., Abu-Lughod 1991; Appadurai and Breckenridge 1988; Dornfeld 1998; Ginsburg 1991, 1993). As Ginsburg has noted, cultural producers help to shape the tone and discursive boundaries of social relations by creating public artifacts that must be viewed as both “cultural product and social process” (1991:93). We approach the narratives and images of the Tibetan exile government from the perspective that they are political representations produced by social actors to be disseminated into the public sphere of the exile community. Borrowing from Habermas (1989), we posit the public sphere as a contested social space distinct from government or markets, in which the discourse of community members shapes political processes and identity formation (Mohammadi and Mohammadi 1994).

### Imaging the Ideal Family Size

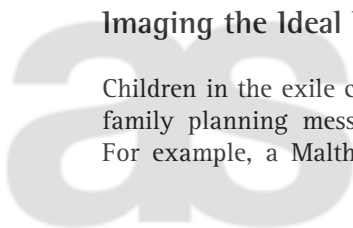
Children in the exile community are exposed to subtle family planning messages through health education. For example, a Malthusian perspective is propagated



FIGURE 3. Clockwise from upper right: “Small Family,” “Good Food,” “Habit of Bathing,” and “Childhood Immunizations.” Page from a Tibetan-language health education booklet for adults that was produced in the 1990s by the Central Tibetan Administration’s Department of Health in collaboration with a foreign NGO. “The things that a child who is loved and happy needs.” (Tibetan Health Education Organization and Department of Health n.d.b).

through a bilingual booklet titled *The ABCs of Good Health*. Figures 1 and 2 are opposing pages from this booklet; the Tibetan text in the lower panel of Figure 2 is a translation of the English text in the lower panel of Figure 1: “We all share one planet. Over-population makes our planet poor.” Together, these images and their associated text send the message that population growth engenders poverty on a global scale.<sup>1</sup>

Education materials for adults focus on household-level issues by portraying a large family as detrimental to the health and welfare of both parents and children. The Tibetan-language booklet titled, *The Little Health Reader* (“Phrod bsten deb chung”) depicts “the things that a child who is loved and happy needs” (Figure 3). In addition to inoculations, cleanliness, and nutritious food, the picture in the upper right showing a joint family is accompanied by the caption, “small family” (“nang mi nyung nyung”). A similar family is portrayed in a section that deals indirectly with family planning



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(Figure 4). The caption above the image reads, “Planning one’s family is very important for good health. What do you need [to do]?” The text that accompanies the image begins, “Each family must manage how many children it can raise and when it has children”, and then proceeds to outline the benefits of birth spacing (health of mother, health of fetus and previous child, easier to manage family’s resources). The passage concludes with the warning, “Those who must live together with many children will experience much suffering.”

Note that there is no explicit mention, beyond the pictures, of a two-child limitation on family size. The text centers on birth spacing, not on birth control. Advocating a birth interval of between two and a half and four years leaves open the possibility that parents may have more than two children, providing they are in a position to care for them properly. Simply put, the message emphasizes quality of life over quantity of children. However, methods that

couples require to accomplish long birth intervals are left undisclosed.

Besides the images discussed above, the Tibetan health literature typically portrays families with more than two children. A three-child family appears in the bilingual *Tibetan Health Reader* (“Bod yig ’phrod bsten klog deb”), a booklet aimed at educating children in health issues while they learn the Tibetan alphabet. Figure 5 shows a family, consisting of two parents and three children, coming together to nurture a sick member. A four-child family appears in a bilingual booklet titled, *Tashi’s Dream: A Children’s Health Book* (“bKris kyi rmi lam/ byis pa’i ’phrod bsten klog deb”), the purpose of which is, “to help children learn health concepts, their Tibetan language, and gain new skills in creating healthier communities.” The story centers on Tashi, a young exile whose grandmother falls ill. While he sleeps, a community health worker enters his dream and takes him on a magic carpet ride. Along the way, she



FIGURE 4. “Reasons why planning one’s family is a good foundation for good health.” Page from a Tibetan-language health education booklet depicting a three-generation family. The booklet was produced in the 1990s by the Central Tibetan Administration’s Department of Health in collaboration with a foreign NGO. (Tibetan Health Education Organization and Department of Health n.d.b)



FIGURE 5. Page from a bilingual health education booklet depicting a three-child family caring for an ill member. The booklet was produced in the 1990s by Tibetans in collaboration with foreign NGOs. (Singey, et al. n.d.)

illustrates the connections between poor sanitation and the spread of diseases. Figure 6 shows Tashi's family; he is the eldest of four siblings.

Figure 7 is a section of a cartoon booklet commissioned by the DOH titled, *Nyima the Luminous* ("Od dmangs che ba'i bu nyi ma" in its Tibetan version), which contains vignettes from the life of a young protagonist who endeavors to remedy health and hygiene problems in his community. Figure 7 depicts a conversation between his mother and father concerning the possibility of having a fourth child. The unambiguous messages are that three children form the ideal size for an exile family, and that economic concerns should dictate the decision-making process. Once again, the publication does not disclose measures couples can take to achieve their desired family size.

The drawings maintain a style reminiscent of children's books and elementary school educational ma-

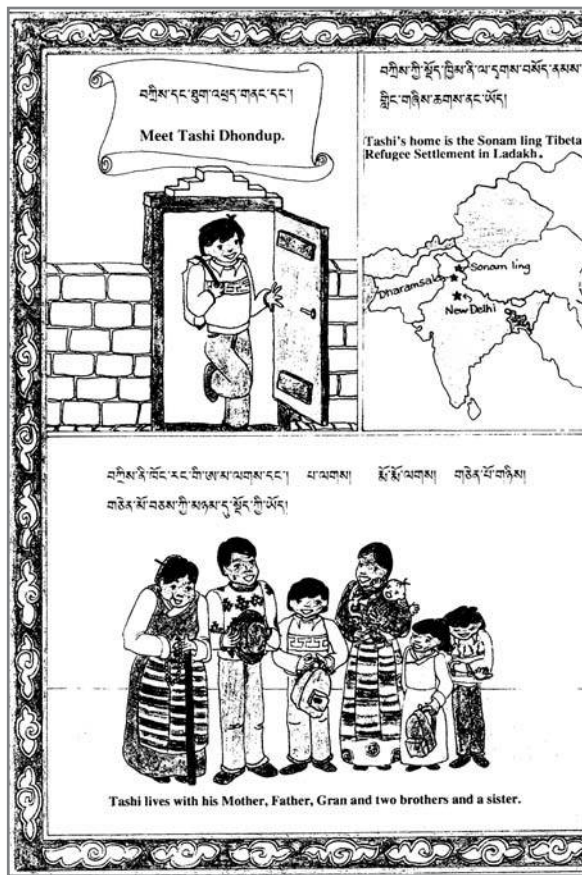


FIGURE 6. Page from a bilingual health education reader for children depicting a family with four children. The reader was produced in the 1990s by the Central Tibetan Administration's Department of Health in collaboration with a foreign NGO. (Kelsang Khedup, et al. n.d.)

terials. The DOH booklet seen in Figure 7 employs an illustration style lifted almost directly from newspaper cartoons popular in Japan and the United States (Duus 2001; Fischer and Giglio 1997). Other images employ illustration styles that evoke coloring books and youth-oriented textbooks—an amateur realism that suggest light-hearted, apolitical messages (Rifas 1991). Indeed, the impact of these illustration styles has not been lost on powerful institutions like the United States government in their efforts to encode political messages into educational materials (Edwards 1997).

Without presuming any specific intention on the part of these images' producers, we observe that the choice to employ illustration styles associated with elementary education and children's literature is a significant one. A tension between pronatalism and Malthusian concerns is evident. Although the images encourage a modicum of population growth by depicting families with more

children than are necessary to numerically replace the parents, they also convey the point that having too many children induces poverty. By couching these messages in storybook aesthetics (Sipe 2001), the larger lesson becomes that the information contained in them is not just the voice of institutional authority but something even a child should know. Adults receiving these materials are immediately situated in a context of remedial education, reading information so ostensibly basic that it has been illustrated in a manner even children could understand. By dressing the politicized message of pronatalism in such ingenuous garb, its contentious origins are effectively effaced. Encoding meanings into the style of an alphabet-learning book lend them the categorical authority of austere fact, and the high educational relevance of literacy itself.

### Pronatalism, Family Planning, and the Discourse on Genocide

Common features of the images analyzed above are the portrayal of families with more than two children, the warning of negative consequences incurred by having many children, and the lack of information on the means to limit family size. The three-child ideal stands in contrast to India's national agenda to reduce population growth and promote prosperity by encouraging couples to have only two children. Figure 8, a poster produced in 1992 by India's Ministry of Health and Family Welfare, contains the message that economic benefits derive from limiting the number of a family's children to two.<sup>2</sup> The fact that the two-child ideal has become the standard message in family planning throughout the developing

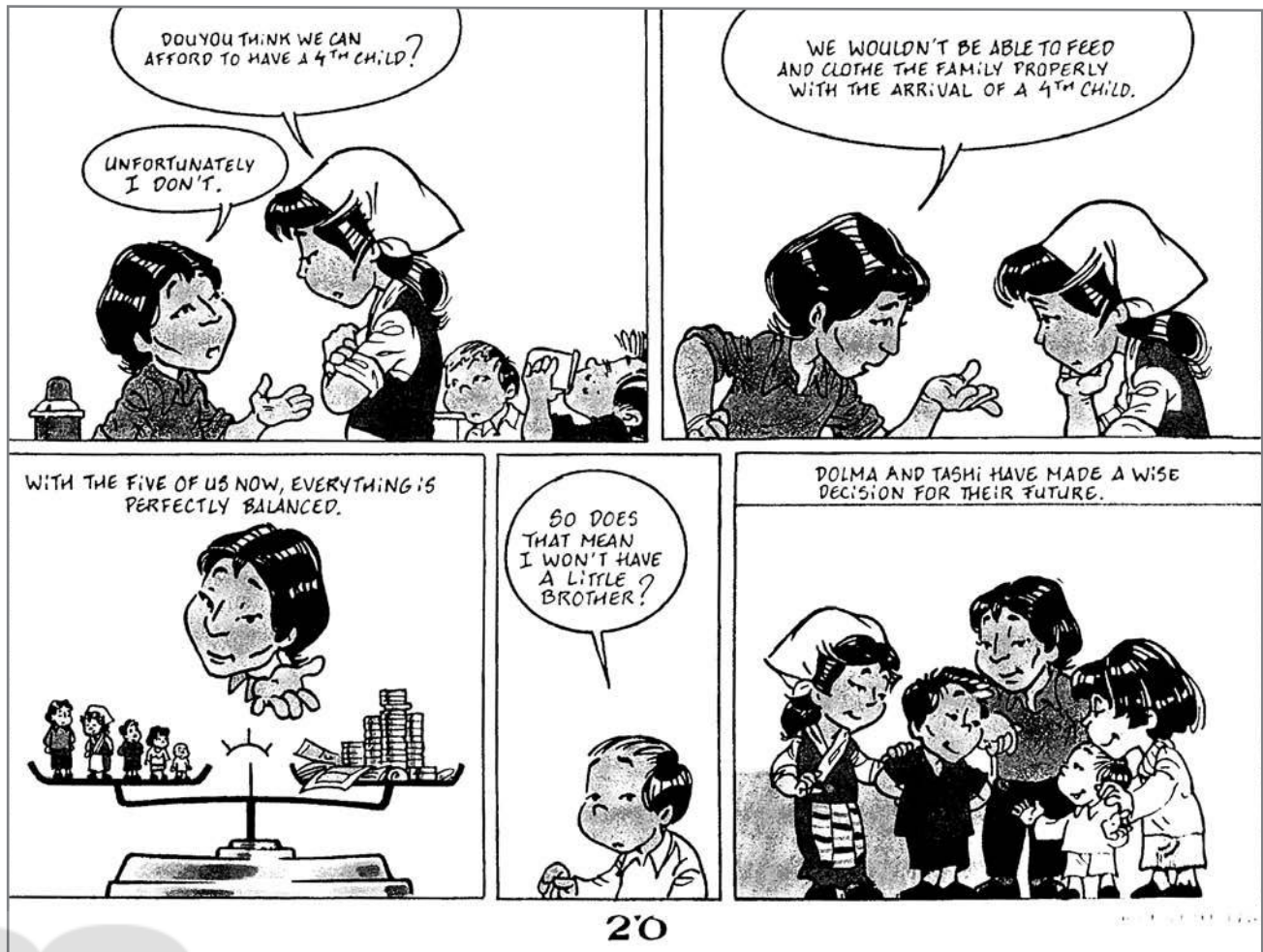


FIGURE 7. Page from the English version of a health education reader depicting a couple's rationale for limiting the size of its family to three children. The reader was produced in 1996 by the Central Tibetan Administration's Health Education and Media Unit in collaboration with a foreign NGO. (Guillon, et al. 1996).

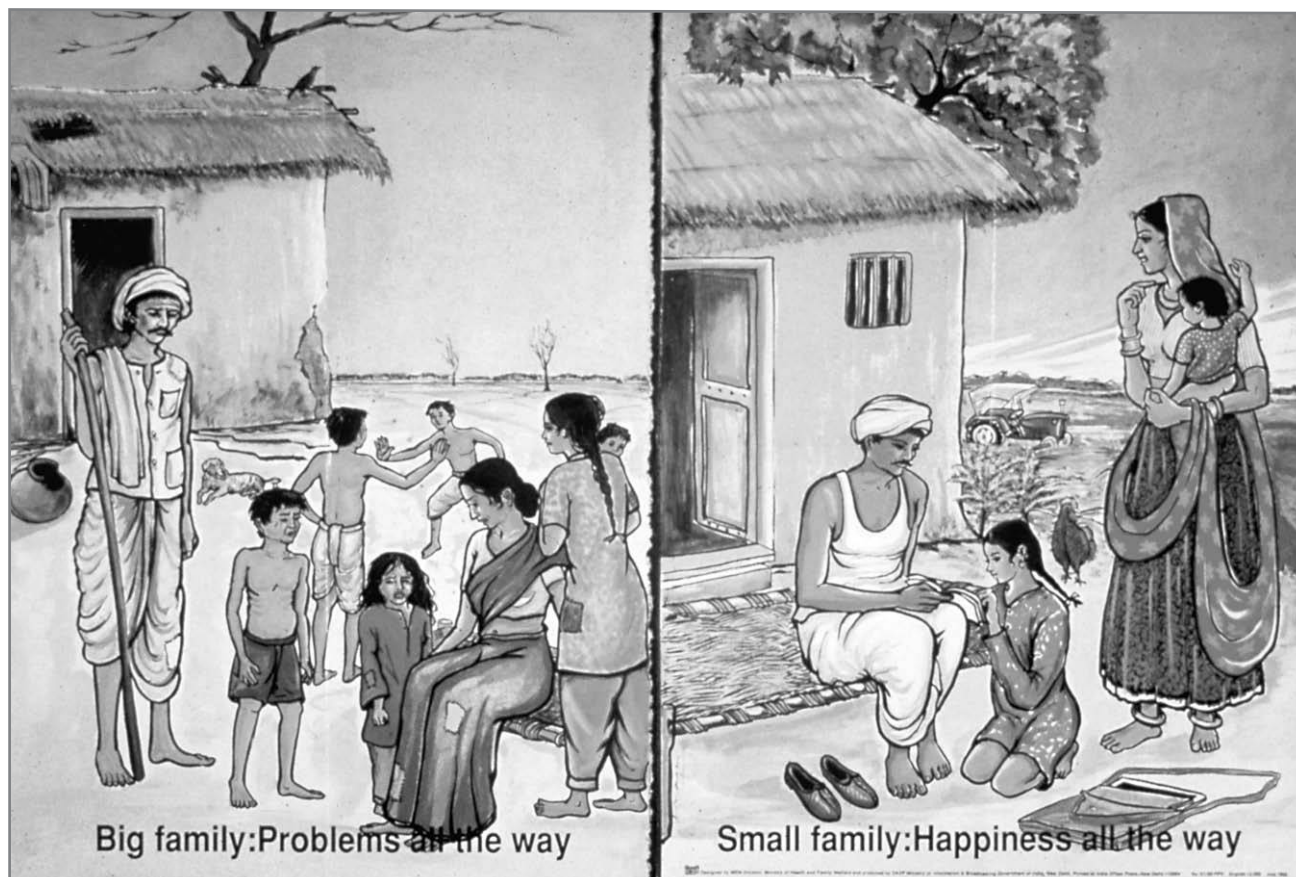


FIGURE 8. Poster depicting the social and economic consequences associated with having large or small families. The poster was produced in 1992 by India's Ministry of Health and Family Welfare to promote family planning and a two-child ideal in India.

world, with China being a notable exception, leads to a couple of questions. Why were the exiles apparently encouraging population growth? And why were they seemingly reluctant to provide information on birth control?

Although Tibetan refugees marry and raise their families in South Asia, their discourse on family planning is oriented toward Tibet, in particular to the perception that China is committing genocide against Tibetans. The CTA alleges that 1,207,387 Tibetans out of an original population of six million died prior to 1986 as a direct result of Chinese occupation. A full breakdown by region and cause of death is published on their official website (CTA 2003). These figures have never been independently verified, and their veracity has been openly questioned (Grunfeld 1987; French 2003). Regardless, the claim of 1.2 million deaths has become enshrined as an incontrovertible truth *in exile* discourse and, by the 1990s, had been uncritically accepted as “fact” by many Western scholars and supporters of Tibetan independence (e.g., Avedon 1987; Klein 1990; Kewley 1990; Craig 1992). Well-documented human rights abuses

against Tibetan women's reproductive rights, including coerced abortions and forced sterilizations (Kerr 1997), lent further credence to the genocide charge.

Although the claim of genocide has been disputed—often in polemical and politically motivated terms (e.g., Epstein 1983; Sun Huaiyang and Li Xiru 1996; Yan Hao 2000)—and doubt has been cast on the allegation that China engages in a universal policy of forcing Tibetans to have abortions and sterilizations (Goldstein and Beall 1991; Goldstein et. al. 2002), leaders in the exile community continue to portray Tibetans as an ethnic group that is threatened with extinction. According to the CTA's official website,

Today, China is implementing the same policy [as used by Hitler and Stalin] in Tibet. Begun as early as 1949, when China started the invasion of Tibet, this policy poses the greatest threat to the survival of the Tibetan nation and people. Besides inundating the country with millions of settlers from China, the Chinese Government is also employing various

coercive birth-control measures to stem the growth of Tibetan population.

The aim of this twin demographic policy is to see to it that the Tibetans are reduced to an insignificant minority in their country so as to render any resistance against China's rule ineffective. It is exactly for this reason that some observers have termed this policy as China's "Final Solution." [CTA 2003]

The Tibetan Women's Association, a prominent refugee non-governmental organization, actively disseminates this vision of demographic demise. An article in its newsletter is titled, "The Systematic Annihilation of Tibetan Race and Civilization by the People's Republic of China", and concludes, "Time is running out for Tibet—Tibetan survival is at stake! There is genocide taking place in Tibet and the world cannot afford to be a silent spectator" (Pema Dechen 1991:11).

As early as the 1960s the CTA encouraged women to counteract the effects of genocide by having many children, and thereby opposed family planning (Goldstein 1978). In the 1990s the discourse on family planning continued to be constructed in reference to events in Tibet, and not in reference to the actual South Asian context in which Tibetan exiles marry and reproduce. For example, in a position paper outlining an envisioned polity for a liberated Tibet, the current leader of the exile government writes,

Birth control may not be immediately necessary [in an independent Tibet] keeping in view the small population of the country at present; however, other issues related with family planning, e.g., minimum age for marriage, gap between two children, etc., will be resolved through legislation, if necessary. [Samdhong Rinpoche 1997:32–33]

Samdhong Rinpoche may have taken his cue from the Tibetans' preeminent moral authority. When asked his opinion about family planning "in a Tibetan context," the Dalai Lama responded,

This is rather complicated. If you look at the Tibetan community in exile, there is a need for family planning. But all the Tibetans believe that sooner or later they will return to Tibet. Tibet is a vast land and the Chinese government has openly stated that Tibet lacks human power. From that viewpoint, we need more human beings and therefore there is little need for family planning. But then again if we look at the world population which is already over 5.7 billion, even Tibetans should consider their global responsibility.

From a Buddhist viewpoint every human being is precious, and one should avoid family planning and birth control. But then if we look from the global level, that precious human life is now overcrowding the world. As a result not only is it a question of survival of a single human being but that of the entire humanity. Therefore, the conclusion is that family planning is necessary provided it is based on non-violent principles. [Dolma 1995:36]

"Dawa,"<sup>3</sup> a leading member of the Tibetan Women's Association (TWA) which opposed birth control during the 1990s, also tries to balance pronatalism with Malthusian concerns. When asked about the suitability of using birth control *in exile*, she stated,

Our organization does not like the reduction of birth rates in Tibet due to the law that a family can only have two children. If they have three children then they have to pay a penalty to the government. If they have many kids they must consider that the kids will not get education, therefore they think that it is better to have fewer children. For some families, having only one child does result in better economic opportunities. If such a way of thinking becomes very prevalent, then the population of Tibet will decrease. And if many Chinese immigrate to Tibet then the Tibetans will become less. This is a concern for Tibetan women that we cannot see firsthand. Our population will decrease.

On the other hand, the Tibetan government [in exile] has no laws about whether or not we can have children. We must think that if we have many children then they will not get a good quality education, health care, or economic opportunities. Then our difficulties will be the same [as in Tibet]. If families and the government could look after the children, then we would like to have more children. That is the opinion of our organization. We prefer for families to have many good quality children. Difficulties will result if families only have one or two children, because if they die then the Tibetan population will naturally decline. Therefore, we prefer to have a few too many children. [Personal interview, Dharamsala, December 2000]

The comments by Samdhong Rinpoche, the Dalai Lama, and Dawa demonstrate that leaders in exile were not calling for unrestrained reproduction. Their position can be characterized as temperate pronatalism: they advocated a birth rate that would ensure a modicum of population growth without impoverishing families. However, the following discussion will show that the pronatalist

message has been diluted over time, to the point where it now has little, if any, effect on people's reproductive behaviors.

During the 1970s Nowak noted the connection between the genocide discourse and pronatalism. She wrote,

But the constantly reiterated slogan of the Indian government's birth-control program—"A small family is a happy family"—does, if only verbally, challenge the Tibetan government's desire for a high birth rate among its people. Yet the students in the Tibetan schools, though exposed to innumerable radio commercials, billboards, and posters, all extolling the benefits of limiting family size, nonetheless have their way of thinking already decided in the other direction before they graduate. As one eleventh grader put it, "Family planning may be beneficial for Indians because there are so many of them. But our people are being killed in Tibet, so we should be increasing, not limiting our population." [Nowak 1984:95]

Twenty-five years later pronatalism as a means to counter genocide was still evident. In the Dharamsala Survey<sup>4</sup> women were asked to state the number of children they would like to have, and why. A 41-year-old mother of five children stated, "three to five, because we would contribute to the Tibetan population." Similar answers included, "four, as we have very less population as compared to our land and also we are in great danger of losing our human resource" (unmarried administrator, age 27); "four, to raise the population of Tibet" (unmarried student, age 21); "three, because our Tibetan population is very low and Tibet needs more citizens" (unmarried teacher, age 23); "Only girls because girls will help increase the population of Tibet" (unmarried secretary, age 30); and "I will give birth to as many as I can because I wish my people [Tibetans] to increase" (unmarried seamstress, age 22).

Some respondents to the Dharamsala Survey allude to the conflict between the pronatalist prerogative and economic constraints. For example, an 18-year-old student who wants only two children states, "because it is factual matter that having many children is a burden, although our population size needs to be increased." Similarly, one 17-year-old student states two to three to be the ideal number of children, and writes, "Because Tibetan lacks population (but family planning is important)." The situation is summed up nicely by a 26-year-old housewife with two children who rationalizes that three children are best because, "[If you have] too many you can't give them proper education and good care. Being Tibetan we prefer more population, but the prob-

lem is financial. Without sufficient funds we can't give proper education [for the children] to become good citizens of Tibet." For her, the issue is quality over quantity, sentiments that were echoed by "Pema," a middle-aged mother of four who stated,

I think that education is more important than population. If children receive a good education, and if Tibet attains freedom in the future, then they can do whatever possible [in Tibet]. It is not just a question of how many people there are. [Personal interview, Kathmandu, December 2000]

Most respondents to the Dharamsala Survey expressed a desire to have only two or three children, citing economic factors as the main reason behind their decision. The mean ideal number of children for married and never married women was 2.4 and 2.9 respectively. Those who advocated high fertility to counter genocide were a minority of respondents (roughly five percent). This mirrors the results of a similar question on another survey (the Socioeconomic Survey).<sup>5</sup> On that survey only four percent of married women (n=473) who responded to a question on factors affecting family size cited a need to increase the Tibetan population. Forty percent of women claimed that their decision was motivated by economic concerns.

The fact that the pronatalist message has not been accepted unconditionally by the majority of exiles is not surprising because the CTA is not the only source of public pronouncements on family planning. The majority of young exile women were born and raised in India, a country that has had a family planning program since the 1950s (Panandiker and Umashankar 1994). India does not usually interfere in the internal affairs of the exile community, preferring instead to give Tibetans considerable autonomy in the realms of health and education. Nevertheless, India's programs have certainly influenced Tibetan exiles' ideology about reproduction, an influence that is reflected in the Dharamsala Survey. Twenty-seven per cent of unmarried women who cited a reason for wanting a specific number of children did so by reiterating Indian family planning slogans, most notably "hum do humare do" [Hindi: we two and our two], and "a small family is a happy family" (see Figure 8). The evidence suggests that by the 1990s, economic concerns and India's family planning messages had muted the pronatalist sentiments observed by Margaret Nowak during the 1970s.

Nevertheless, two factors continued to challenge the acceptability of using birth control: (1) the nationalistic call to counteract genocide discussed above and (2) moral ambiguity over the use of contraception. During

the 1990s Kylie Siobhan Monro found that many exile women considered the use of contraception to be sinful (1999:175–182). She quotes the thoughts of a female CTA official on this matter:

Tibetans are devout Buddhists who hold reverence for all life forms and especially so for human life which is believed to be very precious. This is because of their belief that to be born a human being is to get a chance to attain enlightenment. To practice abortion is to deprive a human being of that opportunity and to submit to sterilization is to prevent a person who deserves to be born from being so born. Therefore, the act of performing abortions and sterilizations is considered sinful and it is particularly offensive to Tibetan women, since the killing of a sentient being is a sin. [Monro 1999:175]

Not all women concur with this viewpoint. Forty-three percent of unmarried women who answered a question about contraception on the Dharamsala Survey were favorably inclined toward its use. For example, a 22-year-old worker wrote, “It is very important to each and everyone to know about this [contraception] in case you meet someone with whom you don’t spend your life.” A 19-year-old student responded, “Good because many times, out of ignorance or being cavalier, unwanted pregnancies occur that may ruin a woman’s life”; and a 26-year-old teacher wrote, “Good idea, as you can achieve what you want to do in life before your first child.” Other answers reiterate Indian family planning slogans, or draw connections between high fertility and poverty. For example, an 18-year-old student wrote, “Important because small family is happy family and also there are unemployment problems in India.” Another 18-year-old student answered, “From one side it’s good as population will not increase. It’s very helpful to poor people.” On the other hand, one-third of unmarried women expressed negative opinions about contraception, usually by writing *sdig pa* in Tibetan or its English equivalent, “sinful.” One 23-year-old student even alluded to the Buddhist tenet that all actions have future consequences. She wrote, “In religious view, contraception is not good. Most of the people who use them will have future problems.”

Perhaps the term that Tibetan exiles have adopted for contraception contributes to the moral ambiguity. The most common term is *skyes ’gog*, which in a verbal sense means “to prevent a birth”—not to prevent a conception. The term is actually a contraction of the more technical *skyes sgo ’gog thabs*, which translates as “means for obstructing the birth canal.” On the Dharamsala Survey several women confounded the term with abor-

tion, which to Tibetans is unambiguously sinful (Tsomo 1998). For example, an 18-year-old student responded, “A child is god’s gift to us; we have to accept it happily. We don’t have a right to kill a child. That child has its own life and hasn’t seen the world. We must never use this bad method to kill a child.” Another wrote, “Bad from religious side. It is a sin to kill your child.”

“Yangchen,” a middle-aged woman who used to work for the CTA but now dedicates her life to promoting family planning, reported that many exiles continue to conflate contraception and abortion. When asked how she overcomes such confusion, she stated,

[I tell them that] when the baby is already conceived, and then you do abortion, it’s a sin. But we are teaching them family planning, not to get pregnant. There is nothing inside the womb, why should it be sinful? This is what we tell people. When you are already pregnant and you have an abortion, then it’s a sin. You are killing a life, our religion also says, “don’t kill it.” The lay people don’t understand, they think that contraception, family planning, means sin—killing babies, killing babies. There is no baby, so what sin is there? So when I talk about family planning, [I tell people] family planning is to prevent getting pregnant. [Personal interview, Dharamsala, June 2004]

“Nyima,” a mother of four who underwent a sterilization operation, used a similar logic to defend her decision. According to the Buddhist viewpoint, the consciousness principle (*rnam shes*) of a person enters the nascent fetus the instant that sperm meets the egg (Khangkar 1986:83–117). By this reasoning, “[Contraception] is not sinful because he [the potential fetus] has no *rnam shes*. If the soul has not arrived, the child does not exist” (Personal interview, Dharamsala, November 2000).

Ambiguity over the acceptability of birth control in a Tibetan sociocultural context, combined with pronatalist sentiments, thwarted attempts by the CTA’s Department of Health to provide comprehensive family planning services during the 1990s. Stiff opposition by members of all strata of society led to a compromise: the DOH could distribute condoms but only under the transmission of HIV/AIDS. According to several high-ranking DOH officials, their office was prevented from providing any contraceptive methods other than condoms during much of the 1990s (Personal interviews, Dharamsala, January 2000 and May 2004). Figure 9 is a poster commissioned and distributed at that time by the DOH. The upper caption reads, “I can protect you from AIDS”; the bottom caption reads, “It is very beneficial to use condoms.”



FIGURE 9. "I can protect you from AIDS. Using a condom is very beneficial." Poster produced in the 1990s by the Central Tibetan Administration's Department of Health to promote condom usage in order to prevent the spread of HIV/AIDS among the Tibetan exile communities.

It is possible that the pronatalist rhetoric influenced exile fertility during the 1970s and 1980s. The Total Fertility Rate (TFR, the average number of children who would be born to each woman if age-specific fertility rates remain constant) in 1987 was 6.3 births per woman (Childs et al. 2005). Estimates do not exist for any time prior to that year, so there is no way of knowing how long the exiles had experienced this level of fertility. Nevertheless, based on existing evidence, we can state with confidence that a TFR of 6.3 births per woman was relatively high for a Tibetan society. The only detailed demographic study of a pre-1959 Tibetan society revealed a TFR of roughly 4.4 births per woman, a level that was moderated by the high percentage of unmarried women resulting from the prevalence of polyandry (Childs 2003). Similarly, other rural Tibetan societies that practice polyandry in the Himalayan region had fertility levels lower than the TFR of 6.3 experienced by the exiles during the late 1980s (e.g., Goldstein 1976; Wiley 1998). Multiple factors could have contributed to the elevated TFR among exiles. As happened in Tibet (Zhang Tianlu and Zhang Mei 1994), the demise of polyandry in exile resulted in an increase in the proportion of ever-married (and hence reproductively active) women. In addition, as Nowak (1984) contends, pronatalist advocacy by community leaders may have prompted some couples to have many children. At the very least,

pronatalism posed an obstacle to the dissemination of contraceptive knowledge and means, and thereby delayed the onset of the exiles' fertility decline.

Despite the continuation of pronatalist rhetoric into the 1990s, the reproductive behavior of exiles was undergoing a dramatic change. The first cohort of young Tibetans who had been born in exile (i.e., after 1959) and exposed to modern education from childhood were coming of age and forming families. Women began to delay marriage and pursue new educational opportunities. Those who did marry used their education to explore means to regulate their fertility. From 1987 to 2001 the TFR for exile women dropped from 6.3 to 1.7 births per woman (Childs et al. 2005). Such a rapid decline to a low level of fertility can only be achieved through the widespread usage of modern contraception.

In summary, pronatalism for ethnic salvation—as an ideology—continued to be promulgated well into the 1990s. Although advocacy for a high birth rate influenced the public discourse about birth control, the rapid fertility decline provides evidence that other factors moderated the message's effect on private behaviors. Bear in mind that the ideologies communicated through the health literature were constructed within, and shaped by, the social, political, and demographic context described above. Pulled between a nationalistic prerogative and couples' desires to limit their family sizes, a compromise was apparently reached. The DOH health literature propagated a message of temperate pronatalism. It encouraged couples to exceed the level of fertility needed to replace the current generation, but also to reproduce responsibly in order to avoid poverty and ill-health.

### Imaging Sexual Endogamy through Picturebook Authority

The following images, taken from a DOH bilingual flip chart used by community health workers to educate the general public about HIV/AIDS, advocate ethnic endogamy by portraying relationships with Westerners as being fraught with health hazards. According to a DOH official who was involved in the production of this flip chart, the target audiences were Tibetans in Dharamsala, Kathmandu, and other places where contact with Westerners is common. The flip chart was adapted from an Indian prototype; the DOH retained the same text but produced new images (Personal interview, Dharamsala, June 2004).

Figures 10–13 appear as consecutive pages. The captions read, "The best way to avoid getting the virus that causes AIDS is by not having sex" (Figure 10); "You can not tell who is an AIDS carrier by looking at them. So don't take chances" (Figure 11); "You can get the virus

that causes AIDS from anyone that is infected" (Figure 12); and "Use a condom every time you have sex. It not only helps you to space child birth but also protects you from such serious diseases like AIDS" (Figure 13).

It should be noted that Figure 10's illustration of the (presumably) AIDS infected, blond haired Westerner does not depict a simple moment of free choice for the Tibetan *woman* protagonist. Instead, the Westerner appears to be actively forcing her into a waiting bedroom against her clear objection. The implications here are twofold: first, the Western danger is potentially more immediate than the ambiguous shell-game alluded to by Figures 11 and 12, in which the idea of a Westerner with AIDS is further problematized, including the possibility of an infected Western *woman*. This reinforces the endogamy argument by removing AIDS from the world of prostitution and foreign men, and places it instead in the world of ostensibly legitimate relationships with Westerners. The danger specifically to Tibetan women is dramatized in Figure 10 with the specter of rape and unprotected sex with an AIDS carrier bluntly raised – the nightmare scenario for a Tibetan woman intrigued by the prospect of a relationship with a Westerner, and a vivid, symbolic proxy for AIDS infection itself. Figures 11 and 12, however, serve to diffuse this dramatic warning by positing that the AIDS-infected Westerner may appear innocuous and even mix socially with Tibetans: a more likely scenario for the instigation of Tibetan-Western relationships, and perhaps a greater cause for concern among endogamists.

The second notable issue raised by Figures 10–13 relates to the continued use of an illustration style that recalls children's literature and that is couched in the context of health education. The use of this picture book aesthetic allows the authors to cast the Westerner as villain without having to explicitly state as much in the accompanying text. In order to appreciate the import of linking this aesthetically charged imagery with such messages, a brief discussion of this particular form, or "picturebooks," as Sipe (2001) terms certain similar integrations of hand-drawn image and text, is required. Recent discussions of the "picture book" form, often drawing on Zena Sutherland and Betsy Hearne's (1977) definitions, emphasize the synergy between illustration and text, but also point out the role of stylized pictures in emotionalizing a moral argument (see Kiefer 1995 for a discussion on the interdependence of text and illustration).

John Warren Stewig, for example, argues that "The two elements together form an artistic unit that is stronger than either of them would be alone" (1995:9), following Kenneth Marantz' (1977) distinction of picture books from other illustrated works. Marantz argues that only the former "is properly conceived of as a unit, a total-

ity that integrates all the designated parts in a sequence in which the relationships among them...are crucial to understanding the book" (1977:3). Lawrence Sipe further explains that, "In semiotic terms, each part of the picture-book functions as a sign and has the potential to contribute meaning to the book" (2001:24), referring to every aspect of the text, from the color palette, to the texture of the paper, to the style of illustration employed.

Of these semiotic elements, illustration style is arguably the most emotionally evocative, and thus potentially effective, means of propaganda when it is successfully linked to textual messages (see Proud 1995; 1998). In evaluating the role of illustration style in representing distinct, textual meanings, Judith Genova (1979) and Geoffrey Hellman (1977) argue against a strictly formal approach. They suggest instead that attention be paid to the subjective elements of artistic style and reference, including their interplay with the text and intertextual relationship to picturebook norms.

In Figures 10–13 we see a bright, clean illustration style, marked by strong, inked boundary lines, filled with clear, near-primary colors. Foreigners are indicated by brilliant yellow hair and predominantly red clothing, while all characters are strongly foregrounded by a paucity of background detail or color. Whereas Peter Donaldson (2001) has argued that photographs are the best medium for strengthening the impact of family planning presentations, the materials under discussion avoid the photograph's ambiguity and evoke the simple clarity of picture book illustration that—within the context of a DOH health booklet—cultivates an aesthetic of primary education, along with the institutionalized morality of children's fables. Contrast this with the photographic image used in Figure 14, produced in 1990 by India's Ministry of Information and Broadcasting. This family planning poster advocates a smaller, two-child family: without the accompanying text ("Fewer children, happier humans"), viewers are not likely to understand what the image is intended, by its publishers, to communicate. Storybook imagery, on the other hand, foregrounds meaning and symbolic association (see Figure 8) built around the author's narrative of morality and emotion. Judith Proud (1998) has argued that the framing of images as fables or fairy stories was, for example, the favored propaganda method in Vichy France, targeting both children and adults with simplified moral juxtapositions and an appeal to ethnic nationalism.

Approached semiotically, the illustrations of Figures 10–13 evoke a structurally inverted "Little Red Riding Hood" narrative, in which the danger of the "big bad wolf" is revealed prelusively, but then followed up with the even greater threat of his (or her) potential disguise and social integration. To return to

the caption of Figure 11, the associated images would appear to imply that not only can one not determine who is an AIDS carrier by looking at them, but that there could be danger even in befriending Westerners, whose temperaments are potentially unpredictable (as we have learned from the previous figure). As with the Malthusian and pronatalist messages of the previous images, the picturebook format also serves to cement this pro-endogamy warning with the authority of the schoolhouse, implying it is as apolitical and incontrovertible as the basic hygiene instructions that fill other parts of the book.

### Endogamy and Identity in Exile

To summarize the messages, Figures 10–12 unambiguously imply that Westerners are a main vector of HIV

transmission. In other words, sex with Westerners is dangerous. Figure 13 advocates ethnic endogamy: if you are going to have sex, then do so with a Tibetan. Yet, intravenous drug users and commercial sex workers are implicated as the main sources of HIV transmission in India (USAID 2003). This raises a question: why are Westerners and not Indians targeted by the DOH flip-chart?

The CTA has attempted for years to uphold Tibetan identity among exiles by discouraging social (but not economic) contacts with Indians and Westerners (Goldstein 1978). Many leaders in exile publicly disapprove of marriages outside the Tibetan community on the grounds that they dilute or threaten the Tibetan race (Penny-Dimri 1994; McGuckin 1996:106), a view that is held by many commoners as well. *Chitsok Melong* (Society Mirror), a Tibetan language newspaper published in Dharamsala since 2000, provides a forum for the discussion of social issues including the acceptability of dating



FIGURES 10-13. Pages in the bilingual HIV/AIDS educational flip chart produced in the 1990s by the Central Tibetan Administration's Department of Health. The flip chart was used by community health workers in the Tibetan settlements to promote HIV/AIDS awareness. The accompanying captions read:

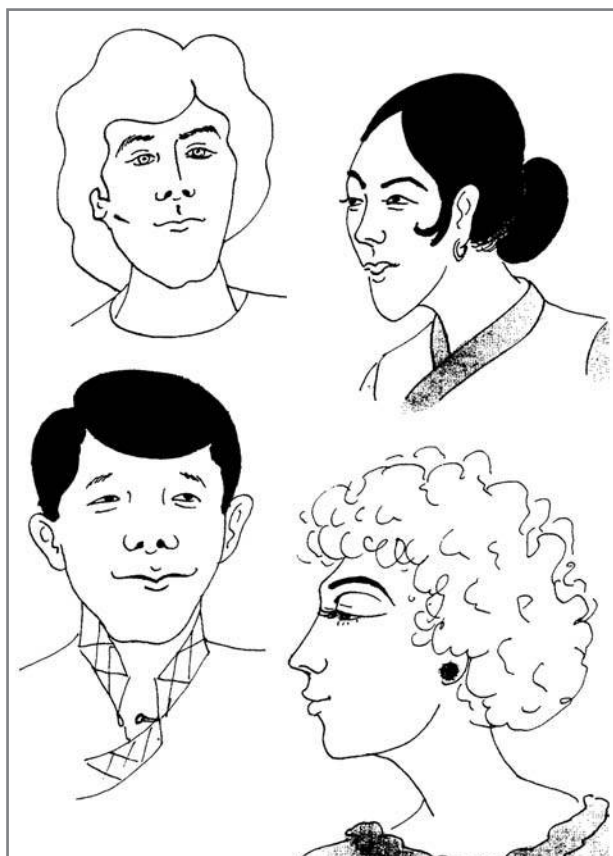


FIGURE 10. "The best way to avoid getting the virus that causes AIDS is by not having sex."

FIGURE 11. "You can not tell who is an AIDS carrier by looking at them. So don't take chances."

or marrying non-Tibetans. In one interview, a 21-year-old woman who teaches traditional songs and dances to Tibetan school children made the following comments:

*Question:* These days many young Tibetan men and women marry people from other ethnic groups. What are your thoughts on this issue?

*Answer:* In this era it is very important to marry somebody in one's own ethnic group. From one point of view it is true that affections can arise between people of different ethnicities. However, our Tibetan population is small. Therefore, if you are to get married, I think it is best to marry one from your own ethnic group.

*Question:* Do you have a desire to marry someone from a different ethnic group?

*Answer:* I only have a desire to marry a Tibetan. However desperate the situation may be, I will have no desire whatsoever to marry a person from another ethnic group. [Chitsok Melong 2001:8]

Although many exiles oppose marriages outside the Tibetan community, they censure relationships with some ethnic groups more vigorously than with others. Evidence of this disparity can be found at [www.phayul.com](http://www.phayul.com) (phayul is Tibetan for "fatherland"), a website frequented by young, educated Tibetans across the globe. When a woman self-identified as "fun loving gal" posted a message (January 18, 2003) seeking advice on whether or not to marry an Indian man over the protests of her family, several people responded with sympathetic messages such as "love is blind" and encouraged her to follow her heart's desires. Others, however, expressed hostility toward a Tibetan woman who was willing to marry an In-



FIGURE 12. "You can get the virus that causes AIDS from anyone that is infected."



FIGURE 13. "Use a condom every time you have sex. It not only helps you to space child birth but also protects you from such serious diseases like AIDS."

dian. She was reviled as “cheap,” a “prostitute,” “a traitor in a Tibetan society,” “a disgrace to Tibetan tradition and culture,” and “a b\*\*\*\* to sell her soul to an outsider.” In contrast, when another woman posted a message about her affair with an American man, respondents engaged in far less disparaging comments about her character. Despite the inconsistency in responses, postings during both exchanges raised the issue of preserving ethnic purity. Of the following three quotes, the first two were directed at the woman wanting to marry the Indian man, and the last at the woman dating the American:

Do you know what the present Tibetan diaspora situation is?...There are some people who toil all through their life for the freedom of Tibet and Tibetan and sacrifice their life committed to preserve Tibetan culture, tradition and identity, here we have some wasted chicks who go on selling their bodies to others and claiming love is blind. [Accessed December 10, 2004]

Being Tibetan, we need to realize that we are a race left on the verge of extinction, with population transfer policy in Tibet, and Tibetans reduced to minority in their own territory inside Tibet, and the Tibetans in Exile scattered in small pockets everywhere, it makes sense to remind our people to keep together... So if we go on merging with other races, time will come when no more pure Tibetans shall be left and Tibetan struggle for freedom shall have no meaning without ethnic Tibetans. [Accessed December 10, 2004]

Let me tell you that, in Tibet, Chinese are doing every nook and corner to destroy our Tibetan identity by adopting policies like one child policy, abortion, and encouraging marriage between Tibetans and Chinese. But I feel surprise and amaze that we here in exile, with no such harsh policies by China,...indulge in marriage with other racial people... Those who marry with other racial people are favoring Chinese and they are Chinese in disguise. [Accessed December 10, 2004]

Bearing in mind the usual caveats on data validity associated with internet message postings (see e.g., Hewson et al. 2002; Miller and Slater 2000; Moloney et al. 2003), such as the fact that there is no way to confirm the identity of individuals, where in exile they live, or whether or not they are Tibetan in the first place, the anonymity provided by such a forum often prompts people to express their views in a more forceful manner than they would in face-to-face encounters. These postings parallel evidence from interviews that marriages with

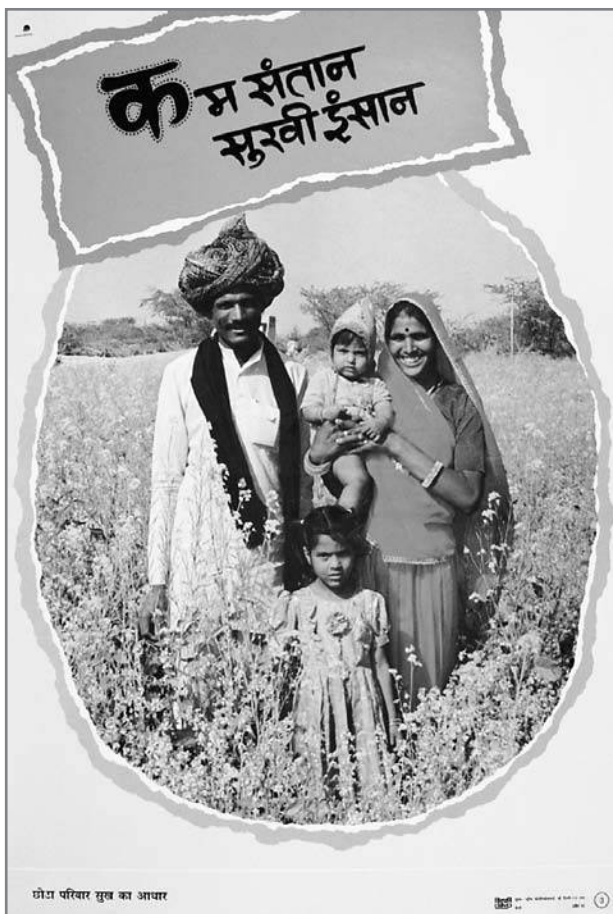


FIGURE 14. “Fewer children, happier humans.” Poster produced in 1990 by India’s Ministry of Information and Broadcasting to promote a small family ideal.

non-Tibetans are frowned upon, but far more so if the partner is Indian. For example, one woman recalled the case of a relative who was completely ostracized from the Tibetan community after she married an Indian. Another recounted the story of a woman who was beaten and publicly humiliated when community members uncovered her relationship with an Indian man (Personal interviews, Dharamsala, May 2004).

Several factors account for the fact that relationships with Westerners are deemed more acceptable than relationships with Indians. For one, Indian society’s norm of caste endogamy poses serious barriers to intermarriages with Tibetans (Frechette 2004:147). Monetary considerations figure into the equation as well. Penny-Dimri (1994) argues that Tibetans are more apt to form social bonds with Westerners than Indians because the former are seen as potential benefactors whereas the latter are not (see also Klieger 1991). Frechette cites cases where a family’s initial opposition to a daughter’s marriage with

a Westerner dissipated once economic remittances began to flow (2004:183). Similarly, a respondent to the posting by “fun loving gal” on www.phayul.com wrote,

If a Tibetan girl brings an *Inji Gopser* [Yellow-Haired Westerner] home then everyone will be so excited and even proudly take these Inji in public gatherings with families too!!... But if it is an Indian then there will be a huge fuss!! Why is it!! The answer is plain and simple!! Dollar power!! [Accessed December 10, 2004]

Compared to relationships with Indians, relationships with Westerners are constrained by fewer cultural impediments and bring more economic benefits. As a result, marriages between Indians and Tibetans are very rare in places like Sikkim (Subbha 1990:122–125) and the settlements around Dharamsala (Penny-Dimri 1994:289; Monro 1999:185). In contrast, several prominent members of the exile community, including members of the Dalai Lama’s family, have Western spouses who are readily accepted into the highest levels of society.

As noted above, the HIV/AIDS flip chart was designed specifically to educate Tibetans in Dharamsala, a community that attracts considerable attention from an array of Westerners including spiritual seekers, backpack tourists, people involved in charities, and scholars (McGuckin 1996; Diehl 2002:50–52). Nowhere else in the world have contacts between Tibetans and Westerners been as frequent or intense during the past several decades. We surmise that because Westerners have an easier time establishing intimate relationships with exile men and women, they pose an increased threat to Tibetan sexual endogamy, and by extension, the maintenance of ethnic purity. If so, this perception was taken into consideration when modifying the flip chart’s Indian prototype. The end product portrays sexual encounters with foreigners as potentially life threatening, thereby advancing the boundary maintenance agenda through the use of images in health education.

## Conclusion

In summary, the images that we presented in this paper reflect the concern of the Tibetan refugees that they are a people whose very identity is imperiled by genocide in their homeland and assimilation in their land of exile. On the one hand the health literature contains a subtle pronatalist message by depicting the ideal Tibetan family as having more than two children. On the other hand it promotes ethnic endogamy by representing Westerners as a threat for HIV contagion, thereby relegating

them to a category of dangerous Others. Members of the exile community are encouraged to further a nationalistic agenda, promulgated and disseminated by their leaders, by reproducing exclusively with Tibetans at a sufficient rate to ensure population growth.

Drawing on studies of image and reproductive ideology, we have argued that the use of particular storybook aesthetics (Sipe 2001), in the context of government health materials, has been employed such that controversial messages are (a) obscured, and (b) reconstructed as essentialized moral juxtapositions. The repetitive image of the three-child family and the construction of Western-appearing foreigners as dangerous sources of disease (as well as the absence of imagery warning of Indian “foreigners”) reflect key, real-world concerns of the exile government, if not always the exile population at large. Though hardly as visceral as the fetal imagery used by anti-abortion groups, these ostensibly neutral illustrations play an important role in transforming government ideology into an emotionally charged, visual propaganda of family, sexuality, illness, and violence.

As the Tibetan exile government seeks to influence reproductive ideologies and behavior among their community by creating aesthetic and textual products, they are also engaging in a practice of meaning construction and dissemination, employing pronatalist and endogamous urgings that are encoded as a naturalized common sense through their contextualization within educational media. We do not presuppose that these meanings are blindly internalized or homogenously influential. In fact, evidence to the contrary exists in the form of the rapid fertility decline and the fact that many Tibetans continue to form and maintain relations with Westerners. Rather, we suggest that the meanings enter a negotiated public space in which positioned receivers mobilize their own belief systems and ideologies to the ongoing negotiation of Tibetan exile identity. In a sense, they also represent the activism of a people who have historically been marginalized from the centers of power, challenging the hegemony of the Chinese and Indian government policies by promoting a media-based public culture intended to propagate their own ideologies, which are grounded in a discourse of subjugation and genocide.

## Acknowledgments

Geoff Childs’ research in Dharamsala was facilitated by an Andrew Mellon Postdoctoral Fellowship in Anthropological Demography at the Australian National University. He is indebted to Kunchok Tsundue of the CTA’s Planning Commission for granting permission to work with the data in the 2001 Socioeconomic Survey, Kelsang Puntsok of the CTA’s

Department of Health, for kindly providing copies of all the health education materials cited in this article, and to his capable and enthusiastic research assistants, Jamyang Tenzin and Diki Yangzom. Both authors would like to thank Debra Spitulnik for providing insightful comments when the paper was nearing completion, and to VAR's anonymous peer reviewers whose critical insights strengthened the final product. The authors would also like to thank Hugh Rigby of the Center for Communication Programs at Johns Hopkins Bloomberg School of Public Health for providing high resolution copies of Figures 8 and 14.

## Notes

- <sup>1</sup> The images in this article can be viewed in color on VAR's website: <http://etext.virginia.edu/VAR/>.
- <sup>2</sup> See Health Communication Partnership's website ([www.hcpartnership.org](http://www.hcpartnership.org)) for an exceptional archive of family planning images.
- <sup>3</sup> Dawa is a pseudonym, as are all other names of those who were interviewed.
- <sup>4</sup> The Dharamsala Survey was conducted by Geoff Childs in Dharamsala, India, November 2000. The non-random (and hence potentially non-representative) sample included 130 ever-married women and 392 never-unmarried women, all under the age of 50. In addition to soliciting basic demographic information on participants, respondents to the anonymous, self-administered survey were asked open-ended questions concerning marriage, family ambitions, and family planning. The exploratory intent of the survey was to probe and identify cultural concepts that guide the discourse on family planning.
- <sup>5</sup> The Socioeconomic Survey was conducted by the CTA in 2001 and included 5,189 individuals living in 961 households located in 14 settlements scattered across India. The data and analysis remain unpublished

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