Session 9
Fertility Decision Making

Social and Economic Aspects of Fertility Decline
Population, Family and Reproductive Health
380.655
AY 2008-2009
Objectives of the lecture

After listening to this lecture and doing the recommended readings students will be able to:

• Identify the theoretical origins of fertility decision making models

• Identify the analytic constructs in models of fertility decision making
  – Identify the difficulties in applying these models to fertility
  – Distinguish between sequential and one time decision making models of fertility

• Describe why fertility decision making models are important for public policy
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Change Gears

• Up to now considering overall fertility levels in societies and how they change
• The authorities that control a population cannot change its fertility rates the way they can change laws or boundaries
• Even Bongaarts framework doesn’t address this, because even he is talking about the distributions of e.g. coital frequency or contraceptive use
What do the various theories we’ve considered assume about individual behavior?

• Coale “fertility must be under **conscious** control.”
• Ideational: didn’t **know** about contraception
• Economic: supply and demand
• DTT, fit between type of economy and fertility
All assume that people are making **decisions** about fertility

- What do we know about fertility decision making?
  - Theories ultimately emanate from cognitive psychology
    - Health belief model etc.
    - Break mental processes into steps
      » Attitudes
      » Behavioral intentions
Ajzen and Fishbein

• Originators of these ideas
• Been modified by many
• In use in many fields
  – Medical compliance
  – Blood donation (other altruistic acts)
  – Market research
  – Lots of applications to fertility
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In what follows:

• Outline the basic constructs of a cognitive decision making model
• Highlight how it has been applied
• Discuss some of the problems and issues
Individual Characteristics
Psychological
Social
Economic

Attitudes

Beliefs

Behavioral Intentions

Behavior

Subjective Norms

Intervening Events
Individual Characteristics

- Culture
- Religion
- Current Social Policy
- Current Economy
- Individual Economic Position
- Psychological Traits
This is where “demand” side factors operate
Individual Characteristics
Psychological
Social
Economic

Attitudes

Beliefs

Subjective Norms

Behavioral Intentions

Behavior

Intervening Events
Attitudes

• Orientation toward things
  – Not liking to touch your body (condoms)
  – Adverse to taking medicine (OC)
• Connotations
  – Past experiences, associations
    • Experiences with doctors
• Affect
  – Is the behavior something you feel strongly about?
    • Donation to library, do you like to read?
    • Do you like children?
    • Do you find children very difficult?
Beliefs

• Do you believe the behavior is wrong or illegal?
  – Convictions that contraception is wrong
• Do you think the behavior might make you sick?
  – Beliefs about side effects of contraceptives
• Do you think it won’t matter for some reason?
  – Hopelessness, expectations of death
Subjective Norms

• What do people you know think?
  – What are the attitudes and beliefs of significant others?

• How important are those people to you?
  – Perhaps someone feels strongly, but you usually don’t agree with that person

• Are your perceptions accurate?
  – Do you actually know?
Subjective Norms

- In the case of fertility, joint decision making
- Couple models
Individual Characteristics
Psychological
Social
Economic

Attitudes

Beliefs

Behavioral Intentions

Intervening Events

Behavior
Behavioral Intentions

• No one does anything without intending to do it
  – Must form an intention
  – Based on attitudes, beliefs and subjective norms
• Probably the most problematic part of the model
  – Forced sex
  – Unexpected sex
Measurement of Fertility Intentions

• If?
• How many?
• When?
  – Two models: sequential and one time
Individual Characteristics
Psychological
Social
Economic

Attitudes

Beliefs

Behavioral Intentions

Behavior

Subjective Norms

Intervening Events
Intervening Events

- Time (found to be very important in blood donation)
- Coercion (this is where you could incorporate forced sex)
- Weakening of Intention
- Changes in attitudes, beliefs and subjective norms
- Life course factors
  - Never marry
  - Infertility
Individual Characteristics
Psychological
Social
Economic

Attitudes

Beliefs

Behavioral Intentions

Behavior

Subjective Norms

Intervening Events
Behavior

• Contraception or Proception
• Not birth or not
  – Infertility
  – Failure to find a partner
  – Partner separation or death
  – Contraceptive failure
  – Unexpected partnership
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Why is this important?

• How to influence people’s behavior in family planning programs
  – Concept of “unmet need”
    • People who claim to not want another child(now), but who are not using contraception
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