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Partners' Fertility Intentions: A Note of Discord and Inconsistent Contraceptive Use

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INTRODUCTION

It may sound like a truism to say that we should consider partners, not just individuals, when studying fertility choices. In practice, however, this truism is frequently forgotten as we analyze childbearing intentions and behavioral outcomes of individuals – mostly females. Studies on fertility that involve couple's perspective are still scarce, mostly due to a low availability of adequate data. Nonetheless, some attempts to understand fertility intentions and reproductive behavior at the couple's level have been taken (e.g.: Miller 1981; Beckman 1984; Thomson, McDonald et al. 1990; Corijn, Liefbroer et al. 1996; Thomson 1997; Thomson and Hoem 1998; Miller, Severy et al. 2004; Jansen and Liefbroer 2006; Rosina and Testa 2009; Testa 2010). Although faced with various methodological challenges, the researchers explored sources of partners' disagreement in childbearing attitudes and intentions, discussed power relations in a couple in case of such disagreements and suggested several possible mechanisms of how the final decision about childbearing is made.

Previous research has shown that the lack of partners' unity in a sphere of reproduction leads to postponement of childbearing. Until the agreement is reached – no active steps towards having a child are taken. Therefore it appears crucial to explain why disagreement occurs and how it is resolved. With the current study, I take a closer look into the stage when no agreement between partners has been reached yet. I apply qualitative approach to explore couple dynamics in a case of different childbearing desires and

intentions of the partners. I show behavioral strategies that are applied at this stage. I show that negotiations and persuasions are not the only actions taken.

DATA AND METHOD

For the purpose of this study, I analyze data on 23 young, Polish couples (age of female partners varied from 20 to 30). In-depth interviews with male and female partners (separately) were conducted in Warsaw in 2004 and 2005. In the sample, 16 couples were childless and seven had one child. The couples differed in respect to their marital status: there were 13 married and six cohabiting couples, in four cases, the partners were “living-apart-together”. The respondents were also of different status in the labor market and educational attainment, although in the vast majority of cases they were medium to highly educated.

Each interview contains rich data on interviewees’ experiences, expectations and opinions related to childbearing. In particular, all respondents were asked numerous, detailed questions about their (past or current) desires and intentions to have a child. They were asked to report on their partner’s desires and intentions as well and to describe any discussions they might have had on the topic. The interview guideline includes also questions on contraceptive use and proceptive behaviors. As the interviews were conducted with both partners, I was able to reconstruct couple dynamics from both perspectives.

I started the analyzes by grouping the couples according to their childbearing intentions and reproductive behavior. For all childless couples I considered the intentions for parenthood expressed during the interviews by both partners, and checked to see whether they agree or disagree on that issue. Further, I examined whether intentions were accompanied by adequate reproductive behaviors; in particular, I analyzed whether the respondents make any attempts at having children, or whether they use any form of contraception. For the respondents who are already parents, I used retrospective information and reconstructed the situation as it had been before the woman became pregnant.

RESULTS

I identified six main categories of couples, with each category characterized by a different combination of partners’ intentions. This typology is briefly presented in the Table 1 below.

Table 1. Categories of couples, according to their fertility intentions at the time of the interview (for childless couples) or prior to the pregnancy (for couples with one child).

Category	Description
Actively avoiding (5 couples)	Both partners agree that they will not have a child in near future. In the case of one couple a decision to postpone childbearing was made, when initial disagreement between the partners was settled.
Actively trying (5 couples)	Both partners agree to have a child in near future and start actively trying to get pregnant. In the case of three couples a decision to start trying for a child was made, when initial disagreement between the partners was settled.
Mishap (3 couples)	Both partners did not want to have a child at a given time, but a woman got pregnant as a result of a failure of contraception.
Indifferent (4 couples)	None of the partners is able to clearly define their childbearing intentions. They do not intend to have a child in the near future, but at the same time this option is not completely ruled out. Vague intentions.
Male partner reluctant (3 couples)	A female partner wants to have a child soon. A male partner lacks desire to have a child or does not feel ready for fatherhood.
Female partner reluctant (3 couples)	A male partner wants to have a child soon. A female partner lacks desire to have a child, does not feel ready for motherhood or expresses ambivalent emotions towards it.

In this paper, I focus on the couples, who experience (or experienced in the past) some sort of disagreement about their childbearing aspirations and plans. Therefore, I do not describe all aforementioned categories in details, but instead explore different situations related to such disagreements. It is possible to divide them into two general categories: resolved and unresolved disagreements. The third, quite peculiar category consists of couples, where partners are not in any strong conflict, but at the same time they are not able to formulate any clear intention in respect to childbearing.

Actively trying or actively avoiding: Disagreement resolved

Partners' agreement in respect to their childbearing plans does not necessarily indicate that there have always been unity between them. Among the respondents, who are actively avoiding childbearing or actively trying to have a child there are cases, where a decision to have a child has been postponed due to a disagreement between the partners.

The respondents recall discussions, when one partner has been trying to convince the other to change his or her mind about the issue. The couples differ in respect to how big tensions between the partners were caused by this disagreement. Also the time frame, in

which the conflict has been resolved, varies. But in all cases, there were discussions and negotiations before some compromise has been reached. Or before one partner has given in to the other partner's wish.

A good example comes from the couple, who has started their attempts to become parents around the time of the interview. In the interview, the woman describes in details how she has been trying to persuade her husband to have a child,

"After we got engaged, we started discussing when to get married and when to have a child. His first call was: in three years' time. I got terrified (laughs): no way I could wait to have a child for another three years! (...) He was trying to convince me that this was just a stage that I was going through, a whim (...) but then we reached an agreement, he finally understood that I would keep saying: 'next year, next year, next year' until he would finally say it too. He agreed (...) but then we had a terrible financial situation and we decided to postpone having children for another year. And recently, my husband wanted to postpone it further, but I said no, I said I would not manage. And we have reached a decision that we want to have a child." (W004, Fem, 25)

Her husband paints a similar picture of this disagreement,

"I wanted to postpone it a little bit more, wait until some of my financial issues get better. But M. [my wife] is right, too. It might be that we will sit down next year and again some things won't be perfect and again I will want to postpone it (...) And this decision is somewhat enforced by her – to be honest [that we're trying to have a child now]. Her biological clock is ticking..." (W004, Male, 25)

For this couple, almost four years passed since they got engaged, until they decided to become parents. The woman wanted to have a child earlier, but only after that time her partner complied. Only then, they stopped using contraceptives and started active attempts to become parents.

In case of another couple, at the moment of the interview they are still postponing childbearing, even though the woman strongly desires to become a mother. In the interview, she recalls that a year before she tried to talk her partner into having a child, but he convinced her that their material situation was not good enough and that they should postpone this decision for some time.

There are two common features of the four couples, who experienced some disagreement about their childbearing plans and have resolved it. First, in all cases disagreement has led to childbearing postponement. Second, respondents' contraceptive behavior has been consistent with their joint position on childbearing all along the way.

The partners stop using contraceptives and start trying for a child only after a joint decision to have a child is made. As we shall see in the next section, this is not always the case.

She wants, he wants: Disagreement unresolved

Not every case of disagreement gets resolved with discussions, negotiations and persuasions. I shall discuss two scenarios of unresolved disagreements, (1) when a male partner objects to childbearing, and (2) when a female partner is reluctant to have a child.

She wants...

In the sample, there are three couples, in which a male partner does not feel ready to become a father, while his partner insists on having a child as soon as possible. And in all three cases, a rather strong conflict between the partners can be observed. In the interviews with both males and females, there are passages expressing anger and frustration with partner's position. The following quotes are good examples of that:

"Generally A. [a wife] is planning to have a child in a year's time, to get pregnant. I tell her maliciously to 'go and speak to the neighbor.' A. [the wife] knows my current opinion. When I grow up to it, she doesn't need to worry, she will be the first one to know! But not now!" (W009, Male, 25)

"He knows it perfectly well, and I always make him realize it that I'm getting older and I don't want to feel resentment towards him later for having postponed it for too long and that I cannot have a child anymore." (W025, Fem, 29)

Interestingly, frustration of a female partner can be so strong that it poses a threat that she will stop taking the Pill, even though her partner does not want to have a child. One woman has just recently done that. She says that she was encouraged by her doctor to quit the Pill, and she did it with the clear goal of getting pregnant. Her partner, however, is opposed to the idea. Thus, she leaves the contraception completely to him now.

Another woman still takes the Pill, but she intends to stop soon. Moreover, apparently the pressure she exerts on her partner is so great that he seems to be afraid that his wife might stop the Pill without telling him. He says that he "*believes her*" when she says that she is on the Pill, which is quite an unusual expression (other men simply say that their partner is on the Pill). She also reports that, when she was changing the type of the Pill and her period was late, it resulted in a huge fight, as he was really angry with her. Clearly, he is afraid that the pregnancy might be presented to him as a *fait accompli*.

He wants...

A situation looks different when the male respondent wants to have a child and his partner is not ready. In the sample, there are three couples, in which the woman is or was reluctant to have a child. Curiously, in two cases the women got pregnant. They were 25 years old at that time. In the interviews, they both acknowledge that their partners strongly wanted to have a child, and they encouraged them to become parents. For the female respondents, it was too early. They did not feel ready and they both express some regrets related to the pregnancy at that time. Yet, they did not use any method of contraception (occasionally, they used *coitus interruptus*), and at the interview they are not able to explain why. They are both familiar with modern methods of birth control and one of them decided to use the IUD shortly after the delivery of her child. Still, they say that at that time they simply *"didn't think about it."* One of them says,

"We were planning the marriage but not the child... I wasn't prepared for it yet. Not yet at that moment... It was horrible for me when I first realized it. I couldn't come to terms with it.

Q: But did you use any contraception?

We didn't think about it... He [my husband] was very happy [when I got pregnant]! Based on his reaction, I think it might have been his trick (laughs)." (W107, Fem, 28)

The situation of the third woman can shed some light on this apparent discrepancy between women's childbearing intentions and behaviors related to contraception. She is still childless at the moment of the interview and she does not feel ready to become a mother. She does not feel any desire to have a child, while her partner wants to become a father soon. She finds this situation disturbing: She feels she *should* have some maternal instincts and *should* want to have a child. During the interview, she says,

"I'm afraid I will keep on postponing it [childbearing]. Postponing. Not yet. Some more medical check-ups. Some more thinking about my situation at the company. That it is not excellent and I should reconsider [having a child]. And I'm afraid that I will keep acting like this. I'm afraid that if R. [my husband] does not put some more pressure on me... if he is not more decisive... I'm afraid, I might be postponing it until... never.

Q: From what you're saying I have the impression that you would like him to put more pressure on you?

A LOT!!! It would help a great deal!" (W019, Fem, 29)

It seems that if a woman does not feel any (strong) desire to become a mother or does not feel psychologically ready for this step, she might allow her partner to make this decision for her. She does not feel she is in a position to object (at least not for long), apparently accepting her role as a mother. It goes beyond the scope of this paper to discuss all possible reasons behind this behavior. Yet, my other analyses of the same set of interviews indicate that social norms and moral obligations play a pivotal role here (Mynarska 2009; Mynarska 2010).

No decision, no conflict: When it's hard to tell if there is any disagreement at all

There is one more, curious category of couples, worth describing in some details. Namely, in the case of four couples, none of the partners is able to formulate any clear plans regarding childbearing. Or, to be more precise, they are indifferent about the issue. The partners are not in conflict, but they agree on one thing only: They do not want to make any declarations or any decisions at the very moment. They don't feel completely ready, and in some cases they also believe that their economic situation should improve before they become parents. At the same time, however, they admit that *"it would not be the problem"* if conception occurs.

It is very difficult to tell, what answer these respondents would choose in a survey, when asked: "Do you intend to have a child in the next three years?" Some of them seem to be inclined towards "probably yes", others – towards "probably not". Consequently, also in case of these couples some disagreement between partners would possibly be observed.

Interestingly, the respondents in this category show indecisiveness in their declarations as well as in their actions. Some respondents use contraceptives, but they do it inconsistently. The following passage from the interview explains it best,

"The Pill is not healthy. I used to take it for a year and a half and I don't think my body is any better (...) and anyway, we don't always use protection [a condom] now, sometimes we are careless. Because now it wouldn't be such a big deal (...)

Q: You say that it would not be a big deal, so if you learned now that you're pregnant...?

There would be a little bit of panic because of financial matters. Apart from that it would be great, positive by all means." (W020, Fem, 27).

Others, do not use contraception at all, consciously increasing a probability of becoming pregnant, even though they do not intend to become parents. Again, a quote from the interview explains this apparent contradiction best,

"It was not a typical situation that I got pregnant accidentally. I knew, consciously, that I'm not using any contraception but... my way of thinking was that 'maybe if there is a child, it will change something.' Basically I wasn't fully convinced whether I wanted to have a baby (...) I think that at some point I longed for something different and my attitude was: 'If I get pregnant – I will be pregnant'. And it wasn't that we wanted to have a baby so we planned and got to work on it. No, simply I wasn't fighting against it but it wasn't that I wanted to have this baby." (W112, Fem, 28)

CONCLUSIONS

In line with previous findings, the study shows that if partners disagree about their fertility intentions, it prevents them from taking active steps towards having a child. Yet, the results presented here provide valuable insights into the couple's dynamics and into reproductive consequences of partners' disagreement on the issue.

In some cases, the partners indeed postpone parenthood, until both of them agree to have a child. I have shown, however, that under some circumstances partners may behave in a way that increases a probability of pregnancy even before they reach such an agreement.

When one partner strongly desires to have a child, the couple might switch to less reliable methods of contraception or do not use any contraception at all. This decision might be fully conscious or it might even be an act of pressure, designed to convince a reluctant partner. For instance, as it was in the case of the woman, who stopped the Pill despite her partner's will. In other situations, a deliberate decision, related to contraception, is absent and individuals might even be unable to explain their contraceptive behavior. We observed such a situation in the case of the woman, who did not want to get pregnant, but at the same time did not use any contraception, apparently giving in to her partner's childbearing desires. Finally, individuals might start "running the risk" of an "accidental" pregnancy, when they are undecided about childbearing.

More research is necessary to determine why some partners wait until their disagreement is resolved, while for other couples a note of discord in childbearing intentions may lead to an inconsistent use of contraception and increase a probability of pregnancy. Contraceptive risk-taking might be a legitimate strategy, when a decision to start trying for a child actively is for some reason difficult (Luker 1977; Luker 1999; Lifflander, Gaydos et al. 2007).

To summarize, the study shows that reproductive behavior is not a straightforward product of partners' fertility intentions added up. It is not necessary for the partners to

reach the agreement on the issue in order to conceive. They may exhibit behavior that increases a probability of pregnancy, even though their disagreement does not allow them to take active steps towards becoming parents. In such cases, some postponement of childbearing can be observed, but a child is likely to be conceived well before the partners reach an agreement on their fertility plans.

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