

SOCIO-DEMOGRAPHIC RESEARCH

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REASONS FOR POSTPONING CHILDBIRTH AND SOCIETY'S ATTITUDE TO CHILDLESSNESS: RESULTS OF IN-DEPTH INTERVIEWS WITH RUSSIAN FAMILIES



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The transformation of the Russian age model of fertility is largely due to the postponement of childbirth, which is the reason for both the decline in fertility and the final childlessness. Despite the fact that the problem has been developed by researchers, the study on the nature of this phenomenon from the perspective of families' life experience is extremely in demand, since the decision on having children is most often made by both spouses in the family. The purpose of the work is to identify the reasons for postponing the birth of children in the families of Russians who are officially married, and public attitudes to this phenomenon. The information base of the research were the materials of in-depth interviews with the representatives of childless families. Based on the generalization of the experience presented in the existing studies, the reasons for childbirth postponement were grouped by their origin and level of impact. The article focuses on micro-level motives, since the object of the study is families postponing the birth of children. In marriages, the length of the protogenetic interval depends primarily on the spouses' age. Young people usually postpone parenthood as they need time to create their family's material base. The absence of children after the age of 35 is mainly due either to a violation of partnership relations, or to the unwillingness of the spouses (or one of them) to change their usual lifestyle, or to ill health.

These factors are often accompanied by dissatisfaction with the financial situation. Special attention should be paid to the situations when the children of relatives or of a spouse from a previous marriage substitute their own children. The authors also revealed the scenarios of the conflict between spouses' orientations on educational, professional, personal development and attitudes to childbearing. There are two positions observed among the respondents to solve the problems of inability to get pregnant and infertility – an active one (undergoing treatment, readiness to use reproductive technologies, less often to adopt) and a passive one (unwillingness to change the situation, submission). The research found that the attitude towards childless families is most loyal in the largest cities and the Moscow Oblast. The results of the study are of both theoretical significance (increment of scientific knowledge about intra-family motives for postponing childbearing) and the applied one (empirical basis for improving the state family and demographic policy).

Postponement of childbirth, reproductive motives, childless families, in-depth interview.

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Introduction

The postponement of childbirth is characteristic of the modern Russian family, which leads to an increase in mother’s age at the birth of children of all orders, especially the first ones. Thus, before 1990 the average mother’s age at the birth of her first child was 19.1 years old, now it is 26.1 (Kalachikova, Gruzdeva, 2018). In Russia, there is a complete transformation of the age model of fertility, characterized by the following features: increasing age of entry into motherhood, an increase in the spread of motherhood start ages and the diversification of age models of fertility, a concomitant increase in the proportion of definitively childless women. According to the study of A.O. Makarentseva, the level of definitive childlessness in the cohorts of the 1980s is estimated in the range of 10–15%, while in the cohorts of the 1990s it is expected at the level of 15–18% (Makarentseva, 2022). Postponement of childbirth is closely related to the birth rate, since mother’s age at the birth of the first child affects the total number of children (Balbo et al., 2017). In addition, it is proved that the reason for the definitive childlessness is often a sequence of decisions to postpone the birth of a child, but not a once-made decision never to have children (Makarentseva, 2022). Thus, the postponement of childbirth is a factor in both reducing fertility and childlessness, including due to the inability

to have children because of health problems that arise with age.

A large number of studies are devoted to identifying the reasons and motives for postponing childbirth by Russians. However, the object of many of them is the entire population or its individual groups (for example, age cohorts, youth, women). It is interesting to look at the nature of the phenomenon of postponing first childbirth from the perspective of families’ life experience, since the decision to have a child is most often made by both spouses in the family.

The purpose of the study is to identify the reasons for postponing childbirth in Russian families and to study the public attitude to childlessness based on in-depth interviews with family informants who do not have children. To achieve the goal, the following objectives were set:

- to identify the main reasons for postponing childbirth among family childless informants;
- to analyze the respondents’ attitude to the inability to get pregnant, reproductive technologies and adoption of children;
- to study the opinions of childless family respondents about the attitude of society towards them.

Determining the reasons for postponing childbearing at the level of the family unit is not only of important theoretical, but also applied

significance, since it gives an idea of intra-family motives and childbirth barriers, on the basis of which it becomes possible to develop specific management decisions in the field of state family and demographic policy. In addition, the study of public opinion about the childless families' status is important, because it allows us to assess the depth of the transformation of the population's reproductive behavior and possible scenarios for changes in fertility rates in the future.

Theoretical aspects of the study

There are two main types of reproductive intentions in the scientific literature: the desired number of children or the desired family size, and intentions for the next child, i.e. the intention to have (another) child at all or for a certain time (Balbo et al., 2013; Gudkova, 2019). The first type is recognized as a weak predictor of real fertility due to the variability of orientation to the desired number of children throughout life, while the second type is considered more reliable and stable over time, especially in the case of the designation of time periods for the birth of children (Philipov, 2009; Gudkova, 2019).

The issues of postponed parenthood are discussed in the scientific literature from two points of view – a positive and a negative one (Gudkova, 2019). In the framework of the first position, delayed childbirth is considered from a positive point of view as a natural process, the result of the modernization of population's demographic behavior (the concept of demographic modernization) (Zakharov et al., 2006), the second demographic transition (Lesthaeghe, 2010; Bremhorst et al., 2019), and the contraceptive revolution (Zakharov, Sakevich, 2007). The second view interprets them as a threat to a decrease in the birth rate, the cause of forced childlessness and, as a consequence, a factor in the demographic crisis (the concept of reducing the need for children and the crisis of the family institution) (Antonov, 2009; Sinelnikov, 2018).

T.B. Gudkova identifies two groups of motives for postponement of childbirth: socio-

economic motives related to the family's well-being, its material and social capabilities, and socio-psychological motives conditioned by the ideas about family and parental roles and life stages (Gudkova, 2019). However, these are rather factors of voluntary postponement of childbirth. In our opinion, considering all the determinants, one more important group should be added, namely, biomedical factors related to the state of health and physiological capabilities. When studying the causes of fertility in developed countries, N. Balbo and his co-authors analyzed scientific approaches to the study of its determinants, including factors of postponement of childbearing, within the three levels at which they operate: the micro-level (the level of an individual and/or a married couple), the meso-level (the level of social ties and social networks) and the macro-level (the level of cultural and public institutions) (Balbo et al., 2017).

We grouped the motives for childbirth postponement simultaneously both by their origin and by the level of impact (*Table 1*). The paper will focus attention on the micro-level motives, since its object is families postponing the birth of children.

In many foreign and domestic studies, it is proved that the motives for obtaining higher education and profession, as well as building a career providing a decent standard of living, are crucial in postponing childbearing (at the micro-level). The first partnerships are increasingly of a trial unregistered nature, and the search for a partner suitable for starting a family and childbirth is delayed (Ipatova, Tyndik, 2015). In addition, even in marriage, the appearance of children is postponed, since their value competes with a whole range of other values and interests that are important for young people: career, leisure, friends, interests (Zemlyanova, Chumarina, 2018).

Studies on the population's reproductive intentions, namely the intentions to have a child at all or for some time, are carried out using various quantitative and qualitative sociological methods. The quantitative ones include sample surveys of Rosstat, sample observations of population's reproductive

Table 1. Motives for postponement of childbirth in modern scientific research

Motive	Researchers
Socio-economic	
Macro-level motives	
Unfavorable economic trends (recessions, crises, unemployment)	T. Sobotka, F.C. Billari, H.-P. Kohler, M. Mills, H.-P. Blossfeld
Lack of institutional support (in combining work and family by women; sustainable employment; social protection, provision of family benefits and services)	M. Mills, H.-P. Blossfeld
Meso-level motives	
Place of residence (urban, rural)	H. Kulu, P. Boyle, G. Andersson, S.V. Zakharov, T.M. Maleva, A.O. Tyndik
Unexpressed social capital, lack of help and support from relatives in caring for a child (for example, grandparents)	D. Philipov, Z. Speder, F.C. Billari, C. Bühler, E. Fraczak, T.B. Gudkova
Micro-level motives	
Uncertainty of the economic situation (economic recession, instability in the labor market, unemployment)	M. Mills, H.-P. Blossfeld
Unwillingness to lose the «economic gain» among working highly educated women	J. Van Bavel, K. Begall, M.C. Mills
Unfavorable financial situation of the family (financial, housing problems)	T.B. Gudkova
The desire to get a higher education and profession, get a job and build a career	S.S. Gustafsson, E.V. Zemlyanova, V.Zh. Chumarina, A.A. Ipatova, A.O. Tyndik
Increasing income levels, the need to find a better paying job	L.E. Jones, A. Schoonbroodt, M. Tertilt, T.B. Gudkova
Socio-psychological	
Macro-level motives	
Changing the values and attitudes of the population (increasing individual autonomy and needs for self-realization)	D.J. Van de Kaa, R. Lesthaeghe, T.L. Zhuravleva, Ya.A. Gavrilova
Lengthening the period of growing up (socialization)	M. Jacob, F. Weiss, A.A. Ipatova, A.O. Tyndik
The spread of contraception and contraceptive technologies	C. Goldin, R. Lesthaeghe, S.V. Zakharov, V.I. Sakevich, A.A. Ipatova, A.O. Tyndik
Meso-level motives	
Experience of colleagues and friends in the calendar of childbirth, reduction of social pressure from people around	L. Bernardi, S. Keim, A. Klärner, F.C. Billari, D. Philipov, M. Testa, B. Diaz et al.
Micro-level motives	
Fertility preferences (family-oriented, career-oriented, or both)	C. Hakim
Increasing cohabitation, postponing marriages and raising the age of marriage	T. Sobotka, L. Toulemon, M. Mills, V.N. Arkhangelskiy, A.A. Ipatova, A.O. Tyndik, E.S. Mitrofanova
Desire to live their life	T.B. Gudkova
Lack of confidence in the strength of marriage, instability of spouses' relationship	D. Philipov, Z. Speder, F.C. Billari, M.R. Testa, T.B. Gudkova, A.B. Sinelnikov
Unwillingness of one of the spouses to have children	T.B. Gudkova, A.I. Antonov et al., F.B. Burkhanova, G.R. Baymurzina, V.A. Duprat-Kushtanina, S.Y. Lutoshkina
Unequal division of domestic labor between spouses (high household loads on women), conflict between work and family	M. Mills, K. Begall

Medical and biological	
Macro-level motives	
Problems of accessibility of assisted reproductive technologies, prevention and treatment of reproductive health problems	O.G. Isupova, N.V. Rusanova, V.L. Gordeeva
Meso-level motives	
Society's attitude to assisted reproductive technologies	O.G. Isupova, N.V. Rusanova, V.L. Gordeeva
Micro-level motives	
Biological and genetic characteristics of individuals (predisposition to the birth of children)	H.P. Kohler, J.L. Rodgers
Problems with reproductive health (diseases of the reproductive sphere, infertility, inability to conceive and carry pregnancy), including health of the spouse	A.A. Shabunova, O.N. Kalachikova, E.V. Zemlyanova
Low literacy in matters of reproduction, irresponsibility in sexual behavior, abortive behavior	A.A. Shabunova, O.N. Kalachikova, Yu.A. Grigoriev, S.V. Soboleva
Attitude to assisted reproductive technologies of spouses, including the problem of conflict of opinions	O.G. Isupova, N.V. Rusanova, V.L. Gordeeva
Compiled by: (Billari et al., 2009; Bühler, Fratzcak, 2007; Begall, Mills, 2011; Begall, Mills, 2012; Diaz et al., 2011; Goldin, 2006; Gustafsson, 2005; Hakim, 2003; Jacob, Weiss, 2010; Jones et al., 2011; Keim et al., 2009; Kohler, Rodgers, 2003; Kulu et al., 2009; Lesthaeghe, 2010; Mills, 2004; Mills, Blossfeld, 2005; Philipov et al., 2006; Sobotka, Toulemon, 2008; Sobotka et al., 2010; Testa, 2006; Van Bavel, 2010; Van de Kaa, 1997; Arkhangel'skiy, 2006; Balbo, etc., 2017; Burkhanova, Baimurzina, 2022; Grigor'ev, Soboleva, 2013; Gudkova, 2019; Duprat-Kushtanina, Lutoshkina, 2014; Zhuravleva, Gavrilo, 2017; Zakharov, 2017; Zakharov, Sakevich, 2007; Zemlyanova, 2016; Zemlyanova, Chumarina, 2018; Ipatova, Tyndyk, 2015; Isupova, 2017; Isupova, Rusanova, 2010; Kalachikova, 2012; Maleva, Tyndyk, 2013; Mitrofanova, 2020; Rusanova, Gordeeva, 2016; Sinelnikov, 2019; Skhodstvo i razlichie..., 2021; Shabunova, Kalachikova, 2009).	

plans in 2012 and 2017 (Kalachikova, Gruzdeva, 2018; Zemlyanova, Chumarina, 2018), selective observation "Family and fertility" 2009¹, cohort method (Sobotka et al., 2011; Freika, Zakharov, 2014; Makarentseva, 2022); long-term (monitoring) sociological surveys of the population, for example, HSE's "Parents and children, men and women in the family and society" (Mitrofanova, 2020), HSE's Russian Monitoring of the Economic Situation and Public Health (Zhuravleva, Gavrilo, 2017). Qualitative methods of studying reproductive intentions and their motives are also used in research practice, including focus groups (Gudkova, 2019) and in-depth interviews (Ipatova, Tyndyk, 2015; Zhuk, 2016). In some works (Gudkova, 2019), both quantitative and qualitative methods are used simultaneously, complementing each other, which makes it possible to deepen the analysis, increase the reasonableness of the identified patterns and strengthen the validity of the conclusions obtained.

Our article presents the results of the second wave of the All-Russian sociological study "Demographic well-being of Russian regions"

conducted in 2021 as part of the project with the support of the Russian Science Foundation No. 20-18-00256 "Demographic behavior of the population in the context of Russia's national security". At the first stage of the research (end of 2019 – beginning of 2020), the reproductive attitudes of the population of 10 Russian regions (the city of Moscow, the Republics of Bashkortostan and Tatarstan, Volgograd, Vologda, Ivanovo, Moscow, Sverdlovsk, Nizhny Novgorod oblasts, Stavropol Territory) (Rostovskaya et al., 2021b) were studied using the method of mass questionnaire survey (the total volume of the sample totaled 5,616 people), including reproductive intentions regarding postponement of childbirth and its causes.

The second stage of the study involved the method of in-depth personal interviews (selection of informants by the snowball method), an in-depth analysis of the internal motivation of demographic behavior (including reproductive behavior), models of reproductive choice, difficulties and prospects of childbearing was carried out. The interview was conducted on the territory of the same 10 Russian regions. The design of the sample (a targeted selection

¹ Family and fertility. The main results of the sample survey. 2009 (2010). Moscow: IIC "Statistika Rossii". 112 p.

method) was carried out by recruiting informants through social networks (both personal social connections and online communities in social networks) (Rostovskaya et al., 2021a).

All informants have been selected from financially prosperous families, regardless of belonging to the social and professional stratum (the informants' level of material well-being is median by region). We should note that we did not consider the representatives of the voluntarily childless ("childfree") among the family informants who do not have children. This category was recruited and interviewed separately. The object of the study were married but childless respondents who are planning to become parents in the future (or do not exclude such a possibility).

Main results

According to the results of the first wave of the All-Russian sociological survey "Demographic well-being of the Russian regions", the attitudes for the birth of two children prevail among married childless respondents, both in relation to the desired (i.e., if all the necessary conditions are available) and the expected (actually planned) number of children (51 and 43%, respectively; Fig.). With all the necessary conditions, 30% of childless family respondents are ready to become parents with many children, but only 20% really plan on it. Only 7% of respondents want to have only one child, while almost twice as much, 16%, are expecting the appearance of one child. Attitudes towards childlessness are

the least pronounced, however, if only 3% of family respondents who do not have children would like to remain childless, then 6% actually plan on it.

72% of childless family respondents answered in the affirmative to the question about their plans for childbearing in the future, 35% of them postpone having children, 29% plan to have a child in the near future, 8% are already expecting a child (Table 2); 15% of respondents are not going to have children, and 14% found it hard to say. Men were more likely than women to declare plans to have a child in the near future (34%), while women are more likely to postpone childbirth (37%) or refuse to have children at all (19%). Young people under the age of 29 are more likely to postpone the birth of a child in the family (49%), while the population aged 30–39, on the contrary, are expecting a child (12%) or preparing for childbirth (35%). It is natural that respondents of the older age group more often stated that they had no plans for childbearing (58%).

Reasons for postponing childbirth

According to the survey data, the most significant reasons for postponing the birth of children among married childless respondents are the difficulty of raising a child (from the standpoint of effort expenditure), limited financial opportunities, the need to find a better paid job (Table 3). The respondents also highly appreciated the role of such factors as the lack of their own housing, the desire to live their life, loans payments that do not allow them

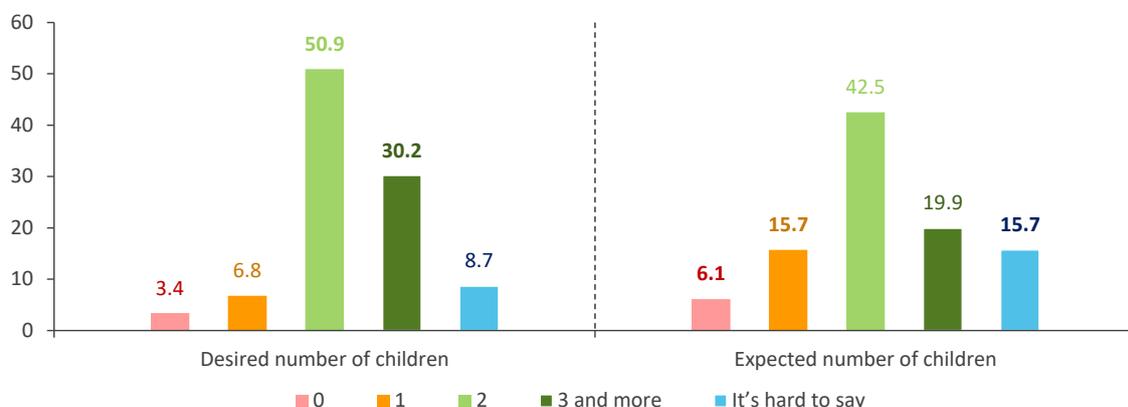


Figure. Distribution of replies of officially married childless respondents about their desired and expected number of children

Table 2. Distribution of replies of officially married childless respondents to the question "Are you going to have a child (the first one if you don't have any, or another one)?", %

Answer option	Sex		Age			Total
	Men	Women	17–29	30–39	40–49	
We are already expecting a child	6.8	8.3	5.0	12.4	3.2	8.0
Yes, in the near future	33.8	23.4	28.3	35.4	6.5	28.8
Yes, but a little later, while we postpone	32.3	36.6	49.2	24.8	16.1	34.8
No	13.5	18.6	5.8	12.4	58.1	14.8
it's hard to say	13.5	13.1	11.7	15.0	16.1	13.6

Source: data from the All-Russian sociological survey "Demographic well-being of the Russian regions", 2020 (N = 287).

Table 3. Distribution of replies of officially married childless respondents to the question "How much is your desire to postpone childbirth conditioned by the following reasons?" (on a 5-point scale from 1 – does not affect childbirth postponement to 5 – greatly affects childbirth postponement), average score

Answer option	Sex		Age			Total
	Men	Women	17–29	30–39	40–49	
Raising a child is quite difficult, it requires a lot of effort and time	5.4	3.2	5.0	3.4	4.2	4.5
My material possibilities do not allow this yet	5.4	2.8	4.9	3.4	4.4	4.4
I need to find a better paid job	5.2	3.2	5.1	2.8	4.4	4.4
Lack of own housing for raising a child	5.2	2.3	4.5	2.9	5.0	4.0
I want to live my life for at least some time	4.5	3.1	5.0	1.8	1.6	3.9
We need to pay off loans that do not allow me (my wife) to leave work at least for a while	5.2	2.0	4.3	2.6	3.8	3.8
The husband (wife) wants to postpone childbirth for now	4.8	2.4	4.3	2.9	2.0	3.7
It is difficult to combine work and child care (I am responsible for the main work at home) / It is difficult for my wife to combine work and child care (she is responsible for the main work at home)	4.3	2.3	4.1	2.5	2.6	3.5
There are no favorable conditions that facilitate child care in the place where I live (few good shops, poorly developed household services, transport works irregularly, etc.)	4.4	2.1	3.8	2.3	4.4	3.5
I do not want (my wife does not want) to leave an interesting job at least for a while	4.1	2.2	4.1	2.0	2.2	3.4
It is difficult to get a child into a preschool institution	4.6	1.7	3.9	2.3	3.0	3.4
I need to finish my education	4.1	2.2	4.0	2.2	1.4	3.3
There is no hope that relatives will be able to provide regular assistance in child care (or there are no relatives)	4.0	1.8	3.6	2.2	2.2	3.1
We are not sure that we need a child	3.6	1.9	3.7	1.5	1.6	3.0
My state of health (my wife's state of health) does not allow	3.9	1.5	3.4	1.9	2.2	2.9
I am not sure about the strength of the marriage	3.6	1.4	3.4	1.3	1.6	2.7

Source: data from the All-Russian sociological survey "Demographic well-being of the Russian regions", 2020 (N = 287).

to leave work, the desire of another spouse to delay the birth of a child. Unsatisfactory health (including spouse's health) and uncertainty about the strength of marriage are the least important factors according to the survey.

It is noteworthy that the significance of all these factors was much higher estimated by men than by women. Also, almost all the indicated reasons for postponing childbirth turned out to be the most significant for young

people under the age of 29. For representatives of the older age group, compared with others, the factors of the lack of their own housing for raising a child and favorable conditions facilitating child care play an important role in postponing childbirth. In addition, the lack of material opportunities and the need for a better-paid job have a pronounced effect on postponing the birth of children among respondents aged 40–49.

The results of a series of in-depth interviews have shown that the childless family informants' reasons for postponing childbirth are different, but they can be divided into two groups.

The first group is the reasons related to the state of health and characterizing the forced postponement of childbirth. This includes infertility of a woman or a man due to past illnesses, health problems, and the physiological inability to get pregnant or carry a child (miscarriages, frozen pregnancies).

"I have undergone several operations, including removal of the fallopian tube, which is most likely the cause of infertility" (woman, 38 y.o., vocational secondary education, Vologda Oblast).

"I had hormonal failures as an adolescence already. But as a teenager, I didn't attach much importance to this, I didn't think that it could have such a big impact on the conception of a baby. Although the doctor warned me" (woman, 41 y.o., higher education, Ivanovo Oblast).

"Well, there is a medical problem with my health... I just can't get pregnant..." (woman, 42 y.o., higher education, Nizhny Novgorod Oblast).

"... as our reproductologist, who led us in the clinic, told us, it was my husband's problem. I was told that all my body needed was healthy sperm, and I would get pregnant. Everything was fine with me" (woman, 47 y.o., higher education, Republic of Bashkortostan).

"We made attempts, and there was a frozen pregnancy, so it was not possible to give birth" (woman, 36 y.o., higher education, Stavropol Territory).

"That's it, it's not working out yet. Many people have asked this question before, and we had the answer... There were unsuccessful pregnancies" (man, 45 y.o., higher education, Ivanovo Oblast).

More often cases of infertility occurred among women, which, apparently, is due to their more responsible attitude both to their own health and to pregnancy planning, and therefore, a greater probability of detecting and making this diagnosis.

Another factor of childlessness related to the state of health is the *adverse effects of abortion in the anamnesis*.

"We made a big mistake when we were not yet officially married, and lived common law. Since we did not have our own housing and our parents did not support us, we were afraid of having a baby and I had an abortion. After the abortion, when we already began to plan, we were trying, consulting doctors, went to clinics a lot, but it didn't work out anymore" (woman, 44 y.o., vocational secondary education, Republic of Tatarstan).

"Yes, there were attempts (author's note – pregnancies), several attempts, but I did not dare to give birth because of constant quarrels and showdowns in our relationship (author's note – what ended with an abortion)" (woman, 39 y.o., vocational secondary education, Moscow).

The second group of reasons is the voluntary postponement of childbirth. The motives within this group are quite diverse:

- the desire to first get an education, build a career and get established:

"... we did not think about children during the first years of marriage. To begin with, we wanted to provide ourselves with everything we needed – housing, stable earnings, so that neither we nor our child needed anything. When we got more or less established, i.e. we had a good well-paid job, our own apartment, a car, we decided that it was time. But, as you can see, it has been unsuccessful so far" (woman, 36 y.o., higher education, Volgograd Oblast);

"To be honest, we did not think about children, we thought about how to develop our career" (man, 37 y.o., vocational secondary education, Volgograd Oblast);

"... I had some problems with work, so it was difficult to take on such responsibility for another life, because a child requires very serious and constant investments, including financial ones, and I wanted some kind of freedom, or something, to live for myself. My wife didn't work, and I didn't

want her to work, I took everything upon myself, but I was afraid of having children..." (man, 41 y.o., vocational secondary education, Moscow);

– psychological unwillingness to change the way of life and the desire to live their life:

"I wanted to have children right away, but my wife didn't, so we decided to live for ourselves, as a result we still don't have children" (man, 36 y.o., higher education, Vologda Oblast);

"Parents most often don't have the habits to devote time only to themselves. Accordingly, you will have to change your plans, life priorities, completely abandon some of your hobbies, because there will be no time for this, and you'll have to realize your children, engage in their upbringing, so you need to first mentally prepare for parental life, and only then have children" (man, 36 y.o., higher education, Stavropol Territory);

– domestic disorder and frequent relocations, especially in cases where a man is a military man:

"We had no attempts to give birth to a child. The reasons were my studies, moving, since my husband is a military man, domestic disorder" (woman, 36 y.o., higher education, Moscow Oblast);

"We had no attempts to give birth to a child. After the wedding, my wife studied in post graduate school, prepared and defended her dissertation, then there was a move to a new place of service, a change of residence" (man, 43 y.o., higher education, Moscow Oblast);

– difficult relationship between spouses:

"Maybe the problem was that we had a very difficult relationship with my husband – we often quarreled, broke up, did not talk to each other, then got back together, then all over again, and so on several times, but we didn't get divorced. Maybe all this affected me and him. I definitely felt less and less confident in him every time, I doubted very much, I assumed that at any moment we would break up, and then make up again. All these things took a lot of effort, and actually there was no time even to think about having a child" (woman, 39 y.o., vocational secondary education, Moscow).

However, as we can see it from the above examples, sometimes different types of causes of childlessness are interrelated and mutually

conditioned. For example, some informants did not plan pregnancy for the first time after marriage, as they tried to self-actualize, get established, live for themselves, and in the future, due to health problems that arise with age, pregnancy no longer occurred, that is, there was a conflict of educational, professional, personal development with childbearing attitudes.

In addition, there were situations when one of the spouses was initially determined to have children in marriage, and the second, on the contrary, postponed childbearing or refused it, which indicates a conflict of spouses' reproductive attitudes:

"My husband has always not really wanted children, so to speak. He has a daughter from his first marriage, at the moment he already has a grandson, so that's enough for him. Well, maybe he actually wanted to have more children, but not so much to worry about it" (woman, 44 y.o., vocational secondary education, Republic of Tatarstan);

"I wanted to have children right away, but my wife didn't, so we decided to live for ourselves, as a result we still don't have children" (man, 36 y.o., higher education, Vologda Oblast);

There is also a territorial specificity of reproductive attitudes. In large cities (Moscow, Yekaterinburg, Nizhny Novgorod) and the Moscow Oblast, attitudes and plans regarding childbirth are weaker, which manifests itself in deferring childbirth to a later age, postponing it due to complex, unstable relationships, psychological unpreparedness for childbirth and the desire to self-actualize. People from large cities mostly initially (starting from their youth) either do not dream of children, or dream of a small number of them in the family (no more than two).

It is noteworthy that the COVID-19 pandemic did not affect the attitudes towards childbearing of the majority of childless couples. However, there were cases when the pandemic made people think about the need to have a child: "The pandemic affected. We didn't think about having a child at all before, but during the pandemic we realized that it would be nice to have at least one child" (man, 37 y.o., vocational secondary education, Volgo-

grad Oblast); or, on the contrary, the pandemic made people wary of childbirth because of the fear of losing a child in case of illness during a potential pregnancy: *“We are very afraid of getting covid, and if you resort to surgical intervention, and if you get pregnant, you can get covid at the time of pregnancy, and this will adversely affect the development of pregnancy”* (woman, 41 y.o., higher education, Ivanovo Oblast).

Attitude to the inability to get pregnant, reproductive technologies and adoption of children

There are different positions in relation to the inability to get pregnant and reproductive technologies among the informants.

The first one is an active position. One of its options is receiving treatment and undergoing examinations.

“I am undergoing hormone therapy. I have been in the Research Institute of Motherhood and Childhood for examination and treatment... Now I am undergoing examinations, taking medications” (women, 41 y.o., higher education, Ivanovo Oblast).

“We visited a doctor. He prescribed treatment. My wife was undergoing examinations and receiving treatment. We followed all recommendations. But we didn’t use reproductive technologies, we only took therapeutic female medications” (male, 45 y.o., higher education, Ivanovo Oblast).

Another solution to the problem is the use of reproductive technologies, in particular in vitro fertilization (IVF).

“We did IVF and ICSI (Intra Cytoplasmic Sperm Injection). I mean not just IVF, but also ICSI. But for some reason my body did not accept it. I had IVF twice. But before that, I also had the so-called insemination procedure, which was not in the same clinic, but in a state one” (woman, 47 y.o., higher education, Republic of Bashkortostan).

“We have already signed up for IVF for the third time” (man, 36 y.o., initial vocational education, Republic of Bashkortostan).

“We have used reproductive technologies such as IVF 4 times, so far unsuccessfully. All of them were within the in vitro fertilization

program, except the last one which was paid. We are planning to have IVF again” (woman, 38 y.o., vocational secondary education, Vologda Oblast).

In addition, some informants consider the adoption or child custody as a way out of the situation if other methods are unsuccessful:

“Yes, if all else fails, we will adopt. Because my wife really wants to. This is very important for her” (man, 36 y.o., initial vocational education, Republic of Bashkortostan).

«If IVF fails, then we will adopt a child. I have a positive attitude towards custody and adoption. Even if we have a child of our own, we may adopt another one” (woman, 38 y.o., vocational secondary education, Vologda Oblast).

“We haven’t thought about it yet, but we still rely on our own and hope that everything will be fine. But if nothing comes out in the end, then this option, of course, is not excluded” (woman, 36 y.o., higher education, Volgograd Oblast).

At the same time, some informants from among those who are ready to adopt or register child custody have already been trained in schools for foster parents.

“We started to think about it after 2-3 years of unsuccessful attempts, when nothing worked out, and even got trained at the “School of foster parents”, we received certificates, but for some reason we did not bring this to an end” (man, 36 y.o., higher education, Vologda Oblast).

“Then my husband and I went to the school of the foster parents. To tell the truth, I was receiving this training alone, because my husband didn’t have opportunities. Then we have applied for custody or adoption of a child. We would like to adopt a child aged up to 3 years old. A year has passed since the application was submitted, but we have never received a call or been told that there is a child who can be adopted or taken into custody. I called myself, tried to find out, but they told me that there was no one...” (woman, 36 y.o., higher education, Stavropol Territory).

The second position in relation to the inability to get pregnant and to reproductive technologies is passive, expressed either in resignation to the situation or in unwillingness to take any action.

The reasons of the informants who did not resort to reproductive technologies were various:

– some of them did not see the need for this because they wanted to deal with it themselves:

“We have not resorted to serious medical intervention yet. Tried to figure it out on our own” (women, 36 y.o., higher education, Volgograd Oblast);

– others had some personal beliefs including religious ones:

“No, we didn’t use any reproductive technologies, as it contradicted our beliefs” (man, 36 y.o., higher education, Vologda Oblast);

“Yes, I know about such programs (author’s note – IVF), I’ve studied and read a lot about them. But my husband and I haven’t resolved to do it yet. Something is holding us back. But we need to think about it” (woman, 41 y.o., higher education, Ivanovo Oblast);

“... when we were offered artificial insemination, I did not go in for it, because I believe that, if God wills, he will give a baby. And if it does not work out, then God does not want it” (woman, 44 y.o., vocational secondary education, Republic of Tatarstan);

– others had fear for the health of the mother and child:

“It turns out that it is impossible (author’s note – the ability to use any reproductive technologies). There is a dysfunction that is... how to play roulette, so we didn’t want to” (woman, 42 y.o., higher education, Nizhny Novgorod Oblast);

– others didn’t use it because of the high cost of the service:

“Yes, yes, there are some, of course there are (author’s note – centers of reproductive technologies in the city). In the free ones, you need to sign up for the waiting list. I also considered it. And you can do it in the commercial ones. I do not know how to do it in free centers, because my friends mostly did a paid procedure. The only thing is that it is very expensive, and probably not every family can afford it” (woman, 44 y.o., vocational secondary education, Republic of Tatarstan);

– others just limited to treatment and examinations:

“We hope that we will have a child. We do everything for this. Not only my spouse, but I was also examined... <...> We know that such a possibility exists (author’s note – IVF). We have friends who used it. Specifically, this is not an option for us, we have another kind of a problem” (man, 45 y.o., higher education, Ivanovo Oblast).

As we can see it from the answers of informants who resorted to reproductive technologies (IVF), their attempts were unsuccessful, while the procedure was mostly done repeatedly (2 or more times). It is noteworthy that people who have resorted to IVF have high reproductive attitudes both in terms of the desired and planned number of children (2-3 or more children).

Regarding the adoption of a child/children, the informants’ opinions were divided: some are ready to resort to this measure, and, as shown above, consider it mainly as an option after unsuccessful attempts to get pregnant and IVF, others are not at all ready for adoption and guardianship, while the opponents of adoption are mainly men.

“My husband and I have been discussing it. We discussed it with both my and his relatives... we think we are not ready to raise someone else’s child, and decided to live without children. We decided not to adopt” (woman, 47 y.o., higher education, Republic of Bashkortostan).

“We haven’t thought about custody or adoption. I do not feel the mental strength to accept someone else’s child” (man, 43 y.o., higher education, Moscow Oblast).

“Well, of course, we discussed it and ... came to nothing (author’s note – about adoption). Well, for example my husband says, “I’m not ready”. I might have been ready if he hadn’t said like this... that is, I decided not to put the screws on” (woman, 42 y.o., higher education, Nizhny Novgorod Oblast).

Society’s attitude towards childless families

Residents of the Republic of Bashkortostan, Volgograd, Vologda and Ivanovo oblasts were more likely to face condemnation from society because of their childlessness.

“There was something like that from strangers. I think these people are not quite tactful, not quite smart. They expressed this not in a rough

form, but still. It was unpleasant” (woman, 47 y.o., higher education, Republic of Bashkortostan).

“Of course we have! Especially from my parents” (man, 37 y.o., vocational secondary education, Volgograd Oblast).

“I faced negative attitude from close people due to the fact that we have no children, in particular, from my mother-in-law” (woman, 38 y.o., vocational secondary education, Vologda Oblast).

“Earlier, in my youth, after 2-3 years of marriage, there was misunderstanding from all sides” (man, 36 y.o., higher education, Vologda Oblast).

“I have not encountered any toxicity. But people like to ask a lot of questions that you don’t always want to hear. They are sometimes incorrect and ask questions, getting into your soul. They ask personal questions that you would not want to hear at this moment” (woman, 41 y.o., higher education, Ivanovo Oblast).

The least public pressure or its absence was noted by the informants from the largest cities (Yekaterinburg, Nizhny Novgorod) and the Moscow Oblast.

“No, I wouldn’t say that. I have not met any negative emotions” (woman, 36 y.o., higher education, Sverdlovsk Oblast – Yekaterinburg).

“I have not encountered a negative attitude from close people due to the fact that we have no children. Of course, parents want grandchildren, but it is not customary in our family to insist on this” (woman, 36 y.o., higher education, Moscow Oblast).

“My wife and I do not face any toxicity from relatives and friends related to the fact that we have no children in our family. All our relatives are very tactful, they give us the opportunity to solve this issue ourselves” (man, 43 y.o., higher education, Moscow Oblast).

“No, we do not encounter this, no. Moreover, here in my environment, there are at least two couples of our age who do not have children, either for medical reasons” (woman, 42 y.o., higher education, Nizhny Novgorod Oblast – Nizhny Novgorod).

However, in cases where there was a problem of condemnation or frequent questions about children, especially from the respondents’ parents, sometimes it was removed due to the

appearance of other grandchildren (siblings’ children) in the family.

“I have encountered a negative attitude from my relatives, in particular, from my mother-in-law. But now, since she has other grandchildren, the relationship has improved” (woman, 38 y.o., vocational secondary education, Vologda Oblast).

“In general, my brother has a family with two children, so he has already blocked my mother’s need for grandchildren, so no one really says anything” (man, 41 y.o., vocational secondary education, Moscow).

In some cases, the absence of their own children is compensated by the participation in the upbringing of relatives’ children (nephews or children of a spouse from a previous marriage).

“We have always had a lot of nephews at home and a daughter (author’s note – the daughter of her husband from the previous marriage) generally calls me mom, since she does not have a mom, she was left without a mom at a very young age. Therefore, we did not feel that we had no our own children” (woman, 44 y.o., vocational secondary education, Republic of Tatarstan).

“We have a niece, now she is an adult, she is finishing school. My husband and I actively took part in her upbringing. Every year we went to the south and took her with us. There was a complicated relationship, her parents divorced, the first marriage was unsuccessful, so the father did not take part in the child. It turned out that my husband taught the girl to swim, ride a bike, i.e. the things that the father would have to do. But I am very glad that we have at least such a substitution. Although she has grandparents, her father has fallen out of life, unfortunately, that’s it” (woman, 42 y.o., higher education, Nizhny Novgorod Oblast).

“...all my sisters have children, that is, I have a bunch of nephews, so as I have already said, there are children to take care of” (woman, 39 y.o., vocational secondary education, Moscow).

Discussion of results and conclusions

As the analysis of in-depth interviews has shown, the reasons for postponing childbirth in Russian families are different, these are forced childlessness caused by health problems

(infertility, physiological inability to carry a child, the consequences of abortions), or voluntary postponement of childbirth for various reasons. While among the factors of voluntary postponement of childbirth, both socio-economic motives (the desire to build a career and get established, domestic disorder and frequent relocation) and socio-psychological (psychological unpreparedness for parenthood and the desire to live for themselves, problems in relationships with a spouse) are equally common. In both cases, the need for children is reduced and does not stand up to competition with other needs and/or life circumstances. The significant role of socio-economic and psychological reasons for postponing childbirth was also confirmed by the results of focus groups in the study of T.B. Gudkova. The researcher notes that significant barriers to the birth of the first child are feelings of unpreparedness for the appearance of children in the family (both material and psychological), uncertainty about the strength of partnerships (Gudkova, 2019).

In some cases, voluntary and involuntary reasons for postponing childbirth may be mutually conditioned, for example, due to a conflict between orientations on educational, professional, personal development and attitudes to childbearing. In a number of such cases, postponing childbirth eventually led to the emergence of reproductive health problems and, as a consequence, physiological infertility. In addition, during the interview, the problem of the conflict of reproductive attitudes of the spouses revealed itself, when one of them is ready and wants to become a parent, but the second one postpones childbirth for some reasons. V.A. Duprat-Kushtanina and S.Yu. Lutoshkina call such a scenario "childlessness under partner's pressure". "The focus of such a scenario is a married couple in which the relationship is very strong <...> and the partner's opinion becomes decisive when choosing a further life path without children because of the fear that the child may cause feelings to cool and the union to collapse..." (Duprat-Kushtanina, Lutoshkina, 2014). The conflict of spouses' reproductive attitudes is

largely explained by the differences in their reproductive attitudes, which is confirmed by a study supervised by A.I. Antonova, which was based on a survey of married couples. According to its results, a significant part of spouses have different attitudes on the number of children in the family: 53% of couples agree on the ideal number of children, 44% – on the desired number, 72% – on the expected number (Skhodstvo i razlichie..., 2021).

In addition, it was found that postponing the birth of children to a later age is more typical for residents of large cities (Moscow, Yekaterinburg, Nizhny Novgorod) and the Moscow Oblast, especially under the influence of such socio-psychological factors as instability of marital relations, psychological unpreparedness for childbirth, the desire to self-actualize. T.M. Maleva and A.O. Tyndik come to similar conclusions in case of Moscow, noting the fact of significant postponement of childbearing and growing childlessness in the metropolitan region (Maleva, Tyndik, 2014).

The COVID-19 pandemic affected the reproductive intentions of childless family respondents in different ways: it made some think about the need to have a child soon, while others, on the contrary, were wary of childbearing, including due to potential risks to the health of the mother and child. Nevertheless, domestic studies have already demonstrated the impact of the pandemic and its consequences on the reproductive intentions of the population. Thus, the results of the survey "Man, Family, Society" showed that in the year of the pandemic beginning (2020) compared to 2017, the share of young childless respondents declaring their unwillingness to have children increased by 12 percentage points (20% vs. 8), the share of respondents aged 35 and older – by 5 percentage points (20% vs. 15). In addition, among young childless men and women, there were more of those intending to postpone childbirth for a three-year period: 30% each (in 2017, there were 25% of men and 18% of women (Makarentseva, 2020)).

Regarding the problems of the inability to get pregnant and infertility, two fundamentally different positions were formed among family

childless respondents. The first is active, expressed in the treatment and examination in order to solve problems with reproductive health, and in readiness to use assisted reproductive technologies. It is noteworthy that those who resorted to them have high reproductive attitudes (both the desired and expected number of children – 2, 3 or more). This pattern is consistent with the conclusion of N.E. Rusanova and V.L. Gordeeva: “For infertile women, the birth of children becomes the main goal of life, and they are a priori ready to have many children and strive for motherhood, even if they have crossed the boundaries of reproductive age” (Rusanova, Gordeeva, 2016). The second position is passive, characterized by resignation to the situation or, in general, unwillingness to take any action. At the same time, the refusal to use assisted reproductive technologies was argued by informants in different ways: personal and religious beliefs, fear for health, unavailability (mainly financial) of these medical services, confidence in the help of treatment. As O.G. Isupova notes, there are still strong prejudices in Russia regarding the use of such technologies, as the position of the Orthodox Church in relation to IVF and other technologies is unfriendly. In addition, there may be biases based on the unnaturalness of the process, since a naturalistic attitude to childbirth and child care is quite common. Accordingly, many infertile women and men may refuse assisted reproductive technologies because they do not want to “go against God and nature” (Isupova, 2017).

Adoption or child custody are considered much less often as an alternative to assisted reproductive technologies. Basically, informants are ready to implement this option only after a number of unsuccessful attempts to get pregnant and IVF. It is noteworthy that the oppo-

nents of adoption or guardianship are most often male spouses in childless families.

Childless family informants from the Republic of Bashkortostan, Volgograd, Vologda and Ivanovo oblasts were more likely to face condemnation from society, while those living in the largest cities (Yekaterinburg, Nizhny Novgorod) and the Moscow Oblast were practically not subjected to it. According to the data of VCIOM (Russian Public Opinion Research Center), over the period from 1989 to 2014, the share of those who condemn spouses not willing to have children has significantly decreased (from 33 to 18%)², that is, childlessness is less and less condemned by society. It is noteworthy that some informants, both in their own eyes and in the eyes of the immediate environment and society, compensate for the absence of their own children by directly participating in the upbringing of their relatives' children (nephews or children of a spouse from a previous marriage). In addition, it was revealed that the psychological pressure of relatives (for example, parents) on childless informants is somewhat mitigated if there are other children in the family.

The research made it possible to study in more detail both forced (health-related) and voluntary reasons for postponing childbirth in Russian families. In the course of the work, we have identified the possible scenarios of the reproductive choice of family childless informants, including their attitude to the inability to get pregnant, the use of assisted reproductive technologies, adoption and custody. The study helped to indirectly assess the prevailing opinion in Russian society about childless families, which is of great importance for understanding the social background of the current reproductive behavior transformations and their consequences for fertility rates in the future.

² Marriage, children, adultery: now and 25 years ago (2015). In: VCIOM. February 10th. No. 2771. Available at: <https://vciom.ru/analytical-reviews/analiticheskii-obzor/brak-deti-supruzheskieizmeny-sejchas-i25let-nazad> (accessed May 25, 2022).

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