

Thematic Barrier



PRESSURES OF FERTILITY AND FIRST BIRTES

Stuck between social norms and aspirations, couples negotiate with pressures of having the first child immediately after marriage

CONTEXT

With migration and blurring boundaries of urban and rural landscape, increased access to technology and changing family structures, the lives of young couples are at a crucial turning point as they juggle with traditional and modern values.

This thematic brief provides evidence from global literature and our primary research in Uttar Pradesh and Bihar, India, on the pressures of marrying early and proving fertility. It unpacks the layered issue of fertility norms couples face and how they are experienced. It also elaborates the aspirations of women and men and how they negotiate with norms. This brief shall enable researchers and programmers in the family planning landscape to approach the issue of fertility norms with a nuanced and detailed understanding of couples' aspirations and potential pathways to address their family planning needs and choices.

HOW THIS THEME WAS EXPLORED

The study participants, married women and men, were asked a series of questions to understand their aspirations, expectations and pressures to marry early and to prove their fertility. We explored their experiences of having the first child and how this influenced their ideas of building their family, weaving in aspects of spacing, limiting and intention to use contraception. We also explored the motivations and barriers to intention to use, and the role of key influencers in shaping these intentions through social network mapping. This theme and the mentioned probes further emerged with the support of tools such as visual metaphor elicitation and life trajectory mapping.

These narratives enabled us to build an understanding on spousal communicationⁱ and decision-making processes as well as on communication with parents and the larger community, who are the harbingers of such pressures.



KEY INSIGHTS

Family and community pressures high for first births – "A sense of incompleteness" perpetuates among couples and perceptions of infidelity deter use.

Literature suggests that the couples' social environment embodied a sentiment of "incompleteness" of a home without children, encouraging couples to have children relatively quickly after marriage mostly within the first year (Char et al., 2010; Kumar et al., 2016; Rimal et al., 2015). To avoid stigmatization and to dispel any myths or perceptions of "bad spirits", couples often had at least one child immediately after marriage (Rimal et al., 2015). Further, literature suggests that let alone use, even discussion around the use of contraceptives before they

I used to use condoms when I was working in Mumbai but why will I use a condom in my marriage. If the wife does not have any other relationship, then why will we use it. I know about condoms but I do not think it is right to use it.

MAN, PARITY 3, GORAKHPUR (URBAN) (*Married for eight years, with one son and two daughters. Spoke of three abortions*) We have one child; we are unable to manage her only. I wanted a 4-year gap at least, but 1-2 months after marriage everyone started questioning, so we had our daughter. Now parents will be happy if we have a son too.

MAN, PARITY 1, KANPUR (Married for two years, with a one-year-old daughter)

have achieved their desired family size is socially inappropriate (Chipeta, 2010) and such conversations are met with backlash. Connotations of promiscuity and infidelity come to fore if women bring up these discussions (Mosha et al., 2013) (Bunce, 2007). Such strong fertility norms coupled with the reluctance related to initiating conversation on family planning with their partners inhibit family planning uptake (Vouking et al., 2014).

Findings from our primary research also highlight that the need to prove fertility is extremely high and acts as a barrier to delay the birth of the first child as well as a reason for rejection of family planning and contraceptive use by young couples. First births are early and unplanned due to social pressures, coupled with the woman's perceived need to prove her fertility and the man's need to prove his virility. Our primary research highlights how men, especially those who have migrated for work to other cities, associate using contraceptives and any conversation around family planning as a marker of having more than one partner, hence unnecessary within the ambit of marriage. Couples still discuss use of contraceptive and family planning at least once, even though with some hesitation. In some cases, other women from the natal households of married woman respondents as well as the in-laws had knowledge and played a role in sharing it with the women and advising them, more so, if the woman had undergone abortions or multiple unplanned pregnancies. This is reflective of the concern that older women, who have been through their reproductive journey, feel for other women. It is important to note that older women are enforcers of fertility pressures and, at the same time, their negotiators.

He (husband) wants a daughter, he is very fond of a relative's daughters and plays with them too, and I am happy with whatever he wants. I. We talk about everything, I share my thinking with him freely.

MAN, PARITY 0, BEGUSARAI (Married for one year and six months)

Preference for not one but two sons; gender-indifference an emerging trend for young couples.

Norms around having a son also dominate fertility decisions and influences contraceptive use. The fertility intentions of a couple are triggered by son preference until the desired sex composition in the family is achieved (Dahal et al., 2008; Nanda et al., 2013). Men's preferences carry more influence, particularly when the couple has few children, mostly one (Yeatman & Sennott, 2014). In terms of family composition, couples My brother has two sons, my wife's brother has two sons, I and my wife are very happy with our daughter. My daughter is my son and I don't want another child.

MAN, PARITY 1, PURNEA (Married for four years, with a one-year-old daughter)

expressed desire for having not one, but two sons. This largely stems from concerns to safeguard family's wellbeing as sons are expected to play the role of protectors and providers for the family.^{II} Notably, it was seen that in communities marginalized by caste, class and economic status, son preference was heightened. The reasons cited were that they wanted more sons in order to protect themselves from the societal backlash that they face or may potentially face in politically turbulent times in the country, especially in Uttar Pradesh.

There were a few but significant voices from young couples who expressed reduced son preference and a preference for daughters or even gender-indifference in some cases. This was largely in instances where the couple had healthy emotional intimacy, consistent and non-conflictual spousal communication on issues pertaining to the household and their life as a couple. There were instance where the couple was indifferent to the sex of the child, based on certain characteristics, for instance, where the couple had healthy emotional intimacy, where the marriage was out of choice and the couple knew each other, or where one or both of the partners were educated and had aspirations for progress in life. With healthy emotional intimacy, also stemmed comfortable and non-conflicting communication. For instance, in these cases, the two partners communicated more openly, had little gestures for each other if one had an issue or was angry at the other, which would be resolved amicably or using humor.

In retrospect, older women and men wished that they had more daughters than sons as they expressed that daughters are easier to speak to and understand their emotional needs, men, on the other hand do not care.

Evolving aspirations of women and men, and financial considerations translate into high intent for spacing.

Our primary field research suggests that couples were conscious of the costs of bearing another child and calculated

We have a kaccha house, so we have one child. First, we will get a pucca house and only then will I ever think of having another child. I can't have a house where my relatives cannot come and my child cannot grow.

I earn Rs 6000/- and we have one child, when I'll earn Rs 6000/- more, I will think of having another child.

COUPLE, PARITY 1, PURNEA

(Married for four years, with a one-year-old daughter)

how an additional child would result in excess expenditure that they may or may not be able to bear depending on what juncture they were at in their lives. However, there were instances where couples struggled with this as they overestimated their ability to provide for the family and subsequent children. This was largely due to lack of financial

> We decided to have a child after one year as we got married quite early, my wife was especially young and bodily quite weak so we thought that for a minimum of two years we will not have a child. My mother and extended family put pressure but I have clearly told them.

MAN, PARITY 0, GORAKHPUR (URBAN) (Married for two years, with no children)

planning of the additional cost. Financial planning and estimation for another child had a marked influence on the couple's intent to have better-spaced and fewer children.

Young couples admitted to negotiating with many of these norms, within their contexts, with each other and with their immediate family and community. The negotiations came with the realizations of their own aspirations of – better jobs, completing their education and overcoming mobility restrictions to access public spaces. Younger couples expressed the desire to travel, spend time with each other and understand each other better before having children. Some of the female respondents also expressed that they would like to finish their degree/education, get a job or even wear jeans and go out before they have a child. In many cases, these individual aspirations became a strong motivation for delaying or spacing births and reason for using contraceptives. Concern for partner's health also came out as a positive motivator, especially, in case for multiple pregnancies. However, more often than not, it was seen that the young couples were unable to negotiate and achieve their plans to delay first birth and space subsequent births adequately. Even with expressed desire to space their first birth, young men and women found it extremely difficult to postpone the first birth and could mostly do so only by a few months. Most men spoke about financial stability as a key marker of their decision to delay the birth of subsequent children, while some also spoke that developing emotional intimacy and getting to know their partners better was quite important.

Some young couples, mostly in their early 20s and who knew each other before marriage, were more aligned in their choices and had women-led decision-making or joint decision-making on family planning. They also displayed better emotional intimacy and resilience, even if they were not educated or had familial pressures.

SPECTRUM OF RESPONSES

Younger couples based at urban sites living in nuclear families displayed high negotiating intention and ability to deal with fertility pressures. Couples from rural sites living with joint families were unable to postpone childbearing. Further, couples where both the partners were educated and their fertility aspirations and choices were more aligned with each other were able to negotiate with their immediate family and community. Older couples, who had two or more children and a case of abortion, looking back at their reproductive trajectory said that if they knew better, they would have not had children within a short time-span.



PATHWAYS TO ADDRESS THE BARRIER

Couples who have just had their first child present an important opportunity to shape intention, tapping into men's and couples' aspirations, and family size desires. They have the potential to explore enhanced women's agency and men's aspirations could be utilized to direct some of these opportunities.

- Identify changing family structures and aspirations and reframe them to suit the needs of the couple, keeping in mind their aspirations that must be negotiated within a largely gender normative framework.
- Build women's solidarity in the community, also within households in an intergenerational manner wherein mothers-in-law are sensitized toward the needs of their daughters-in-law. Provide tools for the mothers-in-law to understand that their daughters-in-law so that the latter need not face what they faced in their earlier days due to pregnancies.
- Facilitate couples to do financial goal setting and planning by enabling them to understand their present and future needs and aspirations, and providing them with tools to calculate costs, expenditures, contingency fund, etc.
- Facilitate young couples to explore ways in which they can achieve their differential individual aspirations with the same family goals and provide them with tools to visualize and actualize them.
- Induct young couples in the community, who are more open to discussion and actively negotiate with norms, to programs for advocacy.

COVID-19 IMPACT

In light of the COVID-19 pandemic, new challenges will emerge for young couples who are about to plan a family or want to have a child in the near future. Considering mass reverse migration from urban to rural areas, loss of jobs and resources, families are facing economic distress like never before. While the risk of unplanned pregnancies is heightened during this period, the economic difficulty is also pushing couples to reconsider having a child. The current situation may lead to much greater agency on the part of couples to challenge norms. This calls for research to understand household dynamics, economic distress and how couples are negotiating with it. To this effect, ICRW has conducted a rapid researchⁱⁱⁱ to understand the changes that COVID-19 has brought to the family planning landscape.



ENDNOTES:

- i Spousal communication: Communication between two intimate partners, the quality of which is determined by the presence/ absence of conflict, emotional intimacy.
- ii Please refer to Thematic Barrier One: Inequitable Gender Norms.
- iii ICRW conducted a rapid qualitative study to understand the impact of COVID on family planning needs of women and men and its implications on engaging young men and couples in family planning in Uttar Pradesh and Bihar. Please refer to Nanda, S. et al. (2020). Family Planning in Times of COVID-19 A Remote Qualitative Study in Uttar Pradesh and Bihar. Research Brief. New Delhi: International Center for Research on Women.

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Thematic Barrier 5 Pressures of Fertility and First Births





