Original Paper

Childbearing Tendency and Related Factors Among Married Women in Rasht City, North of Iran

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ABSTRACT

Introduction: Reducing childbirth rates is a serious problem in some countries. Iran is one of the countries experiencing a decrease in the fertility rate, with a more than 50% decrease in avery's child statistics.

Objective: This study aimed to determine childbearing desire and its related factors among married women.

Materials and Methods: In this cross-sectional study, 550 women aged 15 to 49 referring to comprehensive health centers in Rasht City were selected by multi-stage random sampling. Information was collected using a questionnaire consisting of three parts. The audience was asked about their willingness to have children in the personal and social profile section, the fertility information section, and the third section that to detect degree of desire to have children. Descriptive statistics and the chi-square and logistic regression were used to investigate the factors affecting the reluctance to have children.

Results: The results of the research showed that the mean age of the women, the spouse, the age at marriage, and the duration of their marriage were 31.57±6.2, 35.69±6.6, 22.42±4.52, and 9.05±6.5 years, respectively and 54.9% of women were currently willing to have children. The relationship between unwillingness to have children was significant regarding the husband's age (OR=1.112, 95% CI, 1.050%-1.177%, P=0.001). Also, the relationship between reluctance to have children and the age at marriage was not significant; however, it became significant with the length of marriage (OR=1.090, 95% CI, 1.019%-1.167%, P=0.013). The relationship between unwillingness to have children and the women's opinion about the desired number of children was significant (OR=8.101, 95% CI, 3.518%-18.654%, P=0.001). The relationship between unwillingness to have children and the number of current children was significant (OR=16.515,95% CI, 8.293%-32.888%, P=0.001).

Conclusion: Our analysis showed that the inability to accept the responsibility of being a parent is one of the reasons why people postpone childbearing to the fourth decade of life and even beyond. Detailed studies are needed to correct the current trend of population decline.

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Highlights

- Declining fertility is a serious problem in both developed and developing countries.

- Iran is one of the countries that has experienced a sharp decrease in fertility worldwide, more than 50%.

- The decrease in the level of birth and fertility, in addition to having a decisive effect on the growth rate of the population, will push the people out of the state of youth and toward old age.

- The desire to have children is one of the most important factors that affect women's reproductive behavior.

Plain Language Summary

In recent years, significant demographic changes have occurred worldwide; one of the most important changes is the decrease in childbearing in many regions. Corresponding to these developments, Iran has also experienced extensive changes. During the last 10 years, the fertility rate in Iran has reached below the replacement level, and this is the most significant and fastest fall in fertility recorded in Iran so far. This study aimed to determine the desire to have children and related factors in married women. The results showed that the inability to accept the responsibility of being a parent is one of the reasons why people postpone childbearing to the fourth decade of life and even beyond.

Introduction

Having children is one of the most important demographic components, which has a decisive role in economic and social development in societies. The significant decrease in childbearing is one of the most important demographic changes during the past years in all world regions [1, 2]. The total fertility rate in the world has decreased from 6 children per woman in 1960 to 2.5 children in 2013 [3]. In 1970, 22 countries had fertility rates below replacement level, but from 2010 to 2015, this number quadrupled to 79 countries. Over time, between 2015 and 2020, 25 countries had a fertility rate of less than 1.5 [4]. Declining fertility is considered a serious problem in both developed and developing countries, and it has faced these countries with a fertility crisis below the replacement level [5, 6]. Half of the world's female population lives in areas with total fertility rates below the population replacement level [7]. So, the birth crisis in some countries has led to the downward growth of the population in recent years [8].

Meanwhile, Iran has a similar situation. During the last 10 years, the fertility rate in Iran has reached below the replacement level [3]. With a decrease of more than 50%, it experiences a severe decline in fertility [9], so the fertility rate in 24 out of 30 provinces of the country has reached 2.1 [10]. Since 2006, the total fertility rate has fallen below the replacement level [11]. According to the World Bank, Iran's population growth will reach 1.23% in 2015-2019, 1.13% in 2020-2024, and below 1% after 2025 [12].

In addition to having a decisive effect on the growth rate of the population, the decrease in the level of birth and fertility will also affect the composition and structure of the society [13], pushing the population out of the state of youth and towards senility. Thus, the age pyramid of Iran's population has changed in the last 20 years due to decreased fertility and a kind of indentation at the pyramid's base [3]. The increase in the growth rate of the elderly population increases their needs, including health, hygiene, and treatment. It also puts tremendous pressure on retirement and social welfare plans [14, 15]. Today, Iran is 1 of 10 countries that quickly goes to senility and is the sixth aged country in the world [16].

The desire to have children means that regardless of whether a person desires to have another child, she should have 1 to reduce or satisfy a series of needs [2]. In other words, childbearing desire shows individuals willing to bear a child [17], and its correlated behaviors are affected by the social values and norms, protocols and customs, level of education, individuals' knowledge, employment, economic conditions of people and society, child mortality rate, marriage age [18-21], and even the availability or lack of contraceptives [22]. In addition, education, finding the right job, feeling insecure in job situations, the threat of losing their job because of pregnancy and parturition vacation, and the future costs of baby care decrease the women's childbearing desire [23-25]. Planners and policymakers discuss the issue of population in any society. It is not a simple is-

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sue but a broad and complex political, social, economic, and security aspect; therefore, all its aspects should be examined comprehensively and correctly [26]. Thus, the researcher conducted the present study to determine the childbearing tendency and related factors among married women referring to comprehensive health service centers in Rasht City, in north of Iran.

Materials and Methods

This cross-sectional study was conducted on women aged 15 to 49 referred to health centers in Rasht City, Iran, in 2016. Considering a 95% confidence, the sample size was determined to be 550, using Cochran's formula inserting P=0.15 and d=0.03 based on Tavousi et al.'s study [27] about a positive tendency to have children. Through cluster sampling, health centers and bases in different areas of Rasht in the north of Iran were selected. In this way, first, all the health centers and bases in the city were listed; each of the health centers and bases was considered as a cluster, and 10 out of the total of 15 health centers and 12 out of 18 health bases were selected from 5 points: North, south, east, west and the city center of Rasht. The sampling was done through convenience sampling, in which 25 persons were included in each cluster. The sample selection criteria included married women aged 15-49 who lived with their husbands without menopause and infertility experience, reading and writing ability. They were all asked to sign an informed consent form.

The questionnaire included three parts. The first part questioned personal and social characteristics. The fertility information section consisted of 10 questions. In the third part, the study data were collected using the questionnaire "degree of desire to have children," taken from the questionnaire of Tavousi et al., used as a pilot study of a national plan [27]. This questionnaire was used after assessing validity and reliability. The questionnaire was submitted to 11 expert persons from Guilan University of Medical Sciences to determine the validity and obtained CVI (0.97) and CVR (0.99). Also, the Cronbach α value (0.75) confirmed its reliability through the pilot test among 15 married women referred to health centers. The audience was asked about their willingness or unwillingness to have children. If the opinions were positive or negative, the answers were divided into two groups for having and against having children. The positive group included 15 items, and the negative group included 25. The responses were set based on a 5-point Likert scale, and finally, each question was scored descriptively.

After going through the ethical and legal steps of conducting the research, receiving the letter of introduction, and obtaining permission, the researcher went to the comprehensive urban health centers in Rasht from September to November 2016 to collect data. The researcher introduced and explained the research objectives and how to answer the questions, establishing proper communication with women and emphasizing the confidentiality of the contents of the questionnaire. After obtaining the research units' consent, the questionnaire collected the data. In the end, 550 questionnaires were received from the research units. The studied data were analyzed using descriptive statistics, the chi-square test, and logistic regression in SPSS software, version 16. were used. A P<0.05 was considered significant.

Results

Totally 550 married women from Rasht City participated in this study. The Mean±SD ages of the participants, husbands, marriage, and marital life were respectively 31.57±6.2, 35.69±6.6, 22.42±4.52, and 9.05±6.5 years. Also, the Mean±SD number of participants` children was 1.28±1.41, the number of abortions was 0.3±0.6, and the number of stillbirths was 0.03±0.17. Table 1 presents some of the individual-social and fertility characteristics of the research samples.

According to study findings, 54.9% of women have a childbearing desire at present, and 45.1% had no childbearing desire, whereas 26.2% of them had a childbearing willingness in the future, 72.2% declared no childbearing desire even in the future, 1.6% had no idea about their childbearing desire in future.

The results of the research based on the chi-square test showed a statistically significant relationship between the variables of age (P=0.001), spouse's age (P=0.001), age at marriage (P=0.001), and duration of marriage (P=0.001), education (P=0.001), spouse's education (P=0.001), occupation (P=0.026), spouse's occupation (P=0.037), income (P=0.001), number of current children (P=0.001), age of the last child (P=0.001), number of births (P=0.001), number of abortions (P=0.001), type of birth (P=0.001), the age of first childbearing (P=0.001), the distance between marriage and the first childbearing (P=0.001), and the desired number of children (P=0.001) were associated with the desire to have children.

Table 1. Distribution of research units according to individual-social and fertility information

Variables		No. (%)
Age (y)	<20	9(1.6)
	20-35	414(73.3)
	36-50	142(25.1)
Spouse's age (y)	<25	19(3.4)
	25-50	531(94)
	≥50	15(2.6)
Age at marriage (y)	<20	215(38.1)
	20-35	347(61.4)
	≥35	3(0.5)
Duration of marriage (y)	<1	43(7.6)
	1-10	316(55.9)
	≥10	206(36.5)
Education	Illiterate	1(0.2)
	Elementary	33(5.8)
	High school	88(15.6)
	Diploma	211(37.3)
	University	232(41.1)
Spouse's education	Illiterate	5(0.9)
	Elementary	59(10.4)
	High school	105(18.6)
	Diploma	179(31.7)
	University	217(38.4)
Job	Employed	98(17.3)
	Housewife	430(76.2)
	University student	37(6.5)
Spouse's job	Employee	161(28.5)
	Manual worker	69(12.2)
	Farmer	4(0.7)
	Self-employed	323(57.2)
	Unemployed	1(0.2)
	Retired	7(1.2)
Self-assessment of income level	Good	213(37.7)
	Medium	340(60.2)
	Weak	12(2.1)
The opinion of the audience regarding the number of children	Do not have children	2(0.4)
	One child is enough	57(10.1)
	Two children are enough	398(70.4)
	Three children and more are enough	108(19.1)
The number of children in the audience at the moment	Without children	95(23.8)
	One child	191(33.8)
	Two children	170(30.1)
	Three children and more	109(19.3)

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Table 2. Related factors on childbearing unwillingness by logistic regression

Variables	Beta Coefficient	SD	Wald	df	P	Odds Ratio	95% CI	
							Lower	Upper
Current number of children	2.804	0.351	63.662	1	0.001	16.515	8.293	32.888
Children numbers desire	2.092	0.426	24.164	1	0.001	8.101	3.518	18.654
Proper childbearing age from the attitude women's	-0.374	0.266	1.979	1	0.159	0.688	0.409	1.158
Husband's age	0.106	0.029	13.220	1	0.001	1.112	1.050	1.177
Marriage duration	0.087	0.035	6.192	1	0.013	1.090	1.019	1.167
Income	0.513	0.272	3.561	1	0.059	1.67	0.98	2.847

A logistic regression test was used to investigate the factors affecting the reluctance to have children, and the following results were obtained (Table 2).

The relationship between the unwillingness to have children and the spouse's age (OR=1.112, 95% CI, 1.050%-1.177%, P=0.001) was significant, so that for every year of increase in the age of the spouse, the chance of not wanting to have children increased. The relationship between unwillingness to have children and length of marriage was significant (OR=1.090, 95% CI, 1.019%-1.167%, P=0.013). So, the chance of not wanting to have children increased with each year of marriage. The chance of not wanting children in people who evaluated their income is as low as 67%, which is more than in people who assessed their income as high. The relationship between unwillingness to have children and the audience's opinion variable regarding the desired number of children was significant (OR=8.101, 95% CI, 3.518%-18.654%, P=0.001). People who considered less than 2 children to be enough were 8 times more likely to dislike having children than those who considered more than 2 children to be enough. The relationship between unwillingness to have children and the number of current children was significant (OR=16.515, 95% CI, 8.293%-32.888%, P=0.001), so that for each child, the chance of not wanting to have children increased 16 times. The relationship between unwillingness to have children and suitable age for having children was not significant from the women's point of view.

Discussion

This study was carried out to determine the desire to have children and its related factors. What stands out among the results of the present study more than anything else is the willingness of 54.9% to have children. Research in Turkey showed that 88.45% of samples had a positive desire to have children [28]. However, in a study in Iran, 63.6% of women intended to stop having children [29]. Another study in Iran showed the desire to have children among women and men about 46.22% [30]. Also, based on the results of a study in Iran, 3 out of every 4 young married men and women tend to stop having children [31]. The desire to limit the size of the family is also seen in other countries compared to previous years [32]. Having children is often considered one of the main motivations for starting a family. In developing societies, it is common for couples to give birth to their first child shortly after commencing their married life. Also, if the conditions of employment with proper salaries are considered for them, this will be synonymous with increasing the birth rate. However, this desire has faded in recent years, considering the challenges and economic problems after marriage. While in developed societies, the issue of having children is looked at with a different perspective. Individuals make independent decisions about their fertility and childbearing [33].

Among the other findings of this study was the increase in the odds of reluctance to have children with the rise in the number of participants' children. This result is similar to other studies in Iran [27, 34]. On the contrary, Kuhnt stated that women and men who were parents were more likely to desire to have children than couples who did not have children [35]. Persistent low fertility is not desirable for any population. As a result, any practical program to prevent further decline in childbearing should focus on employment and favorable quality of life, especially among women without children, those with one child, and newly married couples.

This research also showed that the reluctance to have children was 8 times higher for people who considered fewer children enough for the family than for people who

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believed in more children. Economic and employment issues seem to strongly influence the desire to have children in Iran. A study in Iran showed that economic factors have been more effective than other factors, such as belief, cultural and cognitive identity, and physical factors, in creating a negative tendency in young families towards having children [8]. In this study, the reluctance to have children was 67% higher among people who reported their income as low than those who reported it as high. In line with the present study, a study found that Australian men's desire to have children is related to economic base and income. Hence, people with a high economic base wanted more children [19]. However, another study showed that a better economic situation was associated with a lower desire for children [26]. It seems that the high costs of having a child and the need to have a job with a decent income have reduced the desire to have children in different societies. Good economic status can be effective in having children from two aspects: First, a person with a good economic situation can have more children and provide welfare and a quality life for all of them. And on the other hand, wealthy people are less willing to have children due to their different perspective on life and the special cultural conditions prevailing in this segment of society [36].

In the present study, women's age had no relation to having children, but the husband's age and the length of marriage had. A study showed a negative and significant relationship between women's age and delay in having children, and the desire to have children decreased among older people [29]. Contrary to these findings, another study showed that older women had a greater desire to have children, and younger women had less [7]. The length of marriage has a direct relationship with the right time for having children [13]. As the age of marriage increases, it can affect reproductive behavior in different ways. Marrying at an older age reduces the length of the childbearing period. Women who marry at an older age increase their expectations of life and desire to choose the number of children and family planning [37]. Increasing age as an influencing factor in fertility is considered a serious threat to women's reproductive power and will cause increased problems and diseases during pregnancy and childbirth.

This study showed that the appropriate age for having children from a woman's point of view did not affect the tendency to have children. In a research conducted in Iran, this variable influenced the desire to have children, so 87% of women believed that 25 to 29 years old is the right age for having children [38]. But in a study conducted in Nigeria, the predominant childbearing age was 17-21 years [39]. Also, Vassard et al. concluded that

having children is difficult for women under 25 to 30 years old or even less, and it is better to postpone it until after 40 [25]. The inconsistency of different studies can be due to the cultural, social, and economic differences. Many couples delay having children for a long time after starting a family. In some societies, despite having ideal living conditions, people are not satisfied with having children. The inability to accept the responsibility of being a parent is one of the reasons why people postpone having children until their fourth decade and even beyond. To correct the current trend of population decline, it is necessary to pay attention to the influencing factors of this phenomenon by conducting detailed studies and carrying out the necessary planning, including increasing the amount of leave for pregnant women, raising awareness about the importance of having children, reducing the costs of raising children, providing business opportunities for young people, providing suitable housing, and so on. However, the increase of the mass population based on these analyses will not be without difficulties, and one should not ignore its many consequences. Among the limitations of this research, we can mention the mental and emotional states of women who refer to comprehensive health service centers in the city, which may influence the answers and affect the research results while filling out the questionnaires, which the researcher was not able to control.

Ethical Considerations

Compliance with ethical guidelines

Funding

Authors' contributions

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Conflict of interest

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