

Title: The desire for a child amongst a sample of heterosexual Australian couples

Authors: Damien W. Riggs and Clare Bartholomaeus, Flinders University

Abstract

Objective: To understand the desire for children amongst heterosexual couples planning for a first child.

Background: In Australia, almost two thirds of all pregnancies are planned, and over 40% of all children born each year are to first-time mothers.

Methods: Semi-structured interviews were undertaken as part of a longitudinal study on planned first-time parenthood amongst Australian heterosexual couples. Ten couples who were planning for a pregnancy were interviewed, men and women separately.

Findings and Interpretations: An inductive thematic analysis identified four modes of decision-making: 1) female partner directed, 2) male partner directed, 3) joint directed due to circumstance, and 4) joint directed, and three themes related to the desire to have a child: 1) having children is a natural progression, 2) there is an innate drive to want to have children, and 3) a desire to see oneself reflected in another human being.

Implications: The paper concludes by exploring the implications of the findings for service provision. Specifically, intending parents may be better supported by services that provide gender-specific information during the planning stage, including about infertility.

Keywords: pregnancy planning, reproduction, parenting desire, heterosexual couples

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Introduction

Over 200 million women become pregnant worldwide each year, with over half of these pregnancies classed as 'planned' (Sedgh, Singh, & Hussain, 2014). In Australia (where the research reported here was conducted), data from the 2005 *Household Labour Dynamics* survey indicate that of the 1,751 participants who had experienced a pregnancy, 65% were planned (Hewitt, England, Baxter, & Shafer, 2010). Yet despite these relatively high rates of planned pregnancy, attention tends to be focused on the potential consequences of *unplanned* pregnancies (Mosher, Jones, & Abma, 2012; Sedgh, et al., 2014; Taylor, Levi, & Simmonds, 2010). The relative lack of focus on planned pregnancies is particularly notable in the context of first-time mothers, with Australian data indicate that births to such mothers constitute approximately 42.4% of all annual births (Hilder, Zhichao, Parker, Jahan, & Chambers, 2014, p. 18).

Much of the previous research on pregnancy planning has utilised the Theory of Planned Behaviour (TPB). Such research has found that individual attitudes, subjective norms, and perceived behavioural control may each play a role in determining fertility intentions (e.g. Ajzen & Klobas, 2013; Dommermuth, Klobas, & Lappegård, 2011). Yet despite these findings, it has also been suggested that the TPB may not fully account for actual pregnancies (e.g. Morgan & Bachrach, 2011). Certainly, attitudes, subjective norms, and perceived behavioural control may play a significant role in determining *if* individuals intend to have children, and indeed when they have them. However, these factors may not account for the individual desires that may lead to a pregnancy (Klobas, 2011).

Previous longitudinal studies of heterosexual couples planning for a first child have tracked them from during the pregnancy, rather than from the pre-pregnancy planning stage (e.g. Baum, 1990; Fox, 2001; Lupton & Barclay, 1997). What is required, then, are studies that examine the desires of heterosexual couples actively planning for a first child, tracking such couples from before conception until after the birth. The present paper reports on the first stage of such a study. As discussed in the implications section of this paper, the findings are important as they offer the potential to provide directions for family planning services in terms of key issues that heterosexual couples may often fail to consider when planning for a first child.

Method

Participants

Key selection criteria for inclusion in the study were that people were 1) in a heterosexual relationship (married or de facto), 2) planning for a first child, 3) Australian citizens living in Adelaide, South Australia, and 4) not aware of any significant fertility concerns.

At the time of the 20 interviews (constituting 10 couples) that formed the first stage of the study, the women's ages ranged from 25-38 years (mean 31.9 years) and the men's ages ranged from 26-41 years (mean 32.6 years). All women participating had a bachelor degree or higher, whereas the highest qualification attained by four of the men was either secondary school or a trade certificate. Most participants worked full-time, with three participants being full-time students. Of the participants 12 identified as

'somewhat' or 'quite' religious, with their religion named as Christian or Catholic. Most couples were married (6 couples) with the other couples engaged or de facto. Couples had been together for between a year and a quarter and just over 13 years (mean 6 years) and had lived together for between 6 weeks and over 12 years (mean 4.5 years).

Procedure

Ethics approval was granted by the authors' university. Participants were recruited during February-May 2015 by advertising in local media and community newspapers, and on social media and internet forums. While over 2,000 people visited the study website in the space of a month, only 16 made contact asking for more information. Of these, ten couples participated in the first round of interviews.

Semi-structured interviews were conducted by the second author, with male and female partners interviewed separately. Interview questions focused on what it would mean to have a child, reasons for wanting a child, and expectations about having a child.

Interview recordings ranged in length from 33-81 minutes (mean 52.2 minutes). All interviews were audio-recorded and transcribed verbatim by a professional transcription service. Participants were allocated pseudonyms by the authors following transcription.

Analytic Approach

An inductive thematic analysis was undertaken (Braun and Clarke, 2006). Given the dearth of previous research on heterosexual couples actively planning to have a first

child (as opposed to possible future plans or retrospective accounts), it was considered appropriate to explore how the participants accounted for their desire to have a child from the ground up, rather than applying, for example, the TPB as a lens through which to examine the data. Braun and Clarke refer to such an inductive theoretical approach as 'contextualist', in that it seeks to understand how people create meaning in their lives, and how this meaning reflects broader social constructs. Moreover, the theoretical approach is specifically a feminist contextualist approach, in that it seeks to consider how men and women are differentially impacted by social expectations about reproductivity.

In terms of the specific steps involved in a thematic analysis, Braun and Clarke outline six: 1) becoming familiar with the data, 2) generating codes, 3) identifying themes, 4) reviewing themes, 5) refining specifics of the themes, and 6) selecting extracts that best illustrate the themes identified. In terms of the first stage, the first author repeatedly read the entire corpus of data, focusing on how participants spoke about their desire to have a child. From this, two key codes were identified. The first of these was at the level of the couple, where each of the couples appeared to frame their desire within the context of one of four modes of decision-making with regard to having a child (see Table 1).

[Insert Table 1 about here]

Across these modes of decision-making, there were also patterns identified that pertained to how participants as individuals (as opposed to in couples) described their desire to have children. Having identified this as a second code, the third stage then involved identifying themes within this code. Three themes were identified: 1) having

children is a natural progression, 2) there is an innate drive to want to have children, and 3) a desire to see oneself reflected in another human being, often specifically pertaining to genetic-relatedness. The fourth stage of the analysis then involved the second author reviewing the themes generated through comparison with the corpus of data, and in so doing confirming the patterns identified by the first author. As member checking had not been included in the ethics protocol (based on the intention of the authors to utilise Braun and Clarke's, 2006, approach to thematic analysis which does not advocate for member checking), the themes generated were not returned to participants.

In the fifth stage of the analysis both authors discussed the three themes in detail (including an examination of the data at the latent, as opposed to simply semantic, level), and agreed upon appropriate titles for each theme. Finally, the first author selected indicative data extracts for each theme as well as identifying one couple from each of the modes of decision-making that most clearly illustrated the findings of the analysis. The findings and the interpretation of them – with a specific focus on how participants justified their decision making and framed their desires through broader cultural constructs in which reproductivity is naturalised – is now reported through the presentation of four couples (each representing one mode of decision-making) and the analysis of the three themes across these couples.

Findings and Interpretations

Female partner directed decision-making

In only one couple was it the case that the female partner strongly desired to have a child more so than did the male partner. In this couple, however, the woman expressed concern that her directedness had forced her partner's hand:

Lisa: From the very beginning I have been very, 'this is what I want in my life and if that's not something that you want perhaps we need to not be together'. It wasn't at first when we started dating; it wasn't something that he ever really wanted, though now I would say he does. And I worry in a sense that I have done that to him.

Lisa's husband, however, indicated that whilst it was indeed Lisa who had changed his mind about having children, he certainly was not opposed to the idea now:

Cameron: In my early to mid 20's I was single and going out a lot and I just thought that if you had kids, you know, you spend 18 years of their life running after them and you lose your own life and it becomes all about them. But then when I met Lisa and she wanted kids my thoughts changed on things, and thought well actually I wouldn't mind having kids.

In terms of desire, Lisa gave responses that fell within two of the themes identified. At one point in the interview she depicted having children as a 'natural' part of a relationship lifecourse:

Lisa: Our relationship just felt like it followed a natural progression, we got engaged, like it just sort of followed that sort of form. I don't really feel like there was ever a point where had to say yes, okay, we are definitely going to have children in our life because, like I said, that was something I've always said from the beginning.

This extract is interesting for the fact that whilst Lisa begins by suggesting that having children was a 'natural progression', she then goes on to acknowledge that it was a 'progression' pre-determined by the fact that she had asserted she wanted children from the beginning of the relationship. Lisa's framing of having a child as a 'natural progression' reflects previous studies where parenthood is discussed as a 'natural' step or stage in life (e.g., Lupton & Barclay, 1997; Morison & Macleod, 2015; Sevón, 2005).

Lisa also drew on the idea that having children reflected a desire to see something of herself in another person:

Lisa: There's this feeling that's there but I guess it sounds weird, it's this ownership type feeling of just being able to have said that you've done all of that and that's your work and your child is a part of you that's going to continue on into the world and do amazing things and you just get to put them into the world and see what they do.

Lisa's husband similarly drew upon the idea that parents see something of themselves reflected in a child, albeit Cameron framed this slightly differently:

Cameron: I guess I have come to the point where I think it's fine to have kids and raise little persons and so forth and just the benefits that you can get from seeing someone grow up and live a life you can see... it's another human being going in your footsteps or carrying on your legacy.

Here Cameron depicts a child as 'carrying on your legacy', which Cameron frames as a 'benefit'. As others have also found, personal and familial continuity is a reason given for wanting children, particularly amongst men (e.g. de Montigny Gauthier and de Montigny 2013; Eriksson, Larsson, & Tydén, 2012).

Male partner directed decision-making

For both of the couples where the decision to have a child was primarily directed by the male partner, the women had fairly vocal critiques of the presumption that all women should want to have children. Yet despite noting that she had 'never been at all maternal', the female partner in the couple that we focus on here articulated the following 'positive' about having a child:

Jemma: Having a child is something that's - I'm going to say fulfilling, but there's an implication there that I'm not fulfilled. I don't know, just something nice that is - again all the adjectives imply an ideal. You know, probably as an

extra layer of meaning, I guess the idea of like cultivating a family that's a little bit more extended than just the two of us and the dog is kind of a nice idea. That and the continuation of genetic material.

Jemma's narrative potentially reflects two of the themes identified. The first – that of a child as part of a normative relationship lifecourse – is implied in the suggestion that a child might give 'an extra layer of meaning', as 'cultivating a family that's a little bit more extended than just the two of us and the dog'. As Jemma notes, however, this type of 'cultivating' implies that she is not currently fulfilled. And it is this binary that Jemma seemed most to struggle with: that having a child is not, for her, a necessarily unwanted experience, but it also cannot be separated out from 'an ideal'. Jemma then provides a concrete solution to this apparent struggle by making reference to the 'continuation of genetic material', an argument that is used to bolster or indeed warrant her decision.

Jemma's husband – who clearly articulated a long-standing desire to have a child – reported that despite being highly motivated to have a child, this was highly contingent on Jemma progressing this agenda:

Adam: It would be disappointing if Jemma decided she didn't want to have kids. But because we have talked about it a lot I have always had the impression that she did want to at some point, just it was always later. And when it came to the milestone that we sort of said we'd think about it, it'd be, 'Oh, no, later' so, the goal posts kept moving.

Here Adam depicts the 'milestone' of having a child as a 'moving goal post'. This idea of a 'milestone' is reflective of one of the three themes identified in terms of the desire to have children. Here a 'milestone' is a normative aspect of a relationship lifecourse, one that, if denied to Adam, would be 'disappointing'. As this potential for disappointment would suggest, male-directed decision making in our sample was necessarily contingent on the accompanying decisions made by the female partner, highlighting the pressure that normative assumptions about reproductivity may place on women (as identified in previous research on the topic, see Morell, 2000).

Joint directed decision-making due to circumstance

For three of the couples the decision to plan for a child arose from a paired contrast between the sense that a child was part of a normative relationship trajectory, and a set of competing demands that had prevented a pregnancy in the past. For these couples other demands (such as setting up a business, travelling and/or career goals) had taken precedence. The decision to have a child had not occurred, however, because these other demands had reduced, but rather because the female partner was reaching an age where it has been found that fertility decreases (Dunson, Colombo, & Baird, 2002). This finding is also reflected in previous studies, such as Rijken and Knijn (2009), who found that most of the women in their sample who conceived at an older age referred to the 'biological clock' as influencing when they had their first child.

The interweaving of age, fertility concerns, and the decision to have a child can be seen in the following extract:

Interviewer: How have you come to make the decision to have a child?

Catherine: Because I am almost 39, so time is the reason and it's mostly my age that's pushed me towards making that commitment, and the doctor's [GP] recommendations about that, that yeah, I'm going to miss a window, the small window of opportunity that's left. So, that's made me have to make more of a commitment at this time.

Of note in this extract are the ways in which Catherine attributes agency for her decision-making to others. For example, it is the 'doctor's recommendations' that have 'made' Catherine 'have to make more of a commitment at this time'. In her interview Catherine did acknowledge that she had always thought she would have a child, yet there was a disjuncture between thoughts such as this, and finding time in her life to have a child. The point is not that Catherine did not want a child *per se*, but rather that having a child was something that to a certain degree was both internally and externally imposed. Similar to Jemma, in a way, this imposition stood in the face of Catherine's own belief that women should determine their own trajectories.

Catherine's partner similarly drew upon the idea that, due to Catherine's age, attempting a pregnancy was something they should do:

Interviewer: So, you spoke a little bit about this already, but how did you decide that now is a good time to have a child?

Craig: I suppose we haven't decided now is a good time to have a child but we've decided that because of Catherine's age, because as a female it becomes a lot more difficult. So, it's just like, 'Let's just see what happens and if anything happens we'll just deal with it and if it doesn't then we'll go and see somebody who can advise us on how to improve our chances of getting pregnant'. But at the moment we're just playing the 'If it happens, it happens' game.

To a certain degree Craig is even more explicit than Catherine in stating that their decision-making about a possible pregnancy was driven more by Catherine's age than by any other factor. This is most obvious in the language that Craig uses, such as 'if anything happens we'll just deal with it' and in his seeming nonchalance in referring to their pregnancy planning as a 'game'. Importantly, the point here is not to minimise Craig's potential investment in having a child. Rather, and as was the case with Adam and Cameron, these the men appeared to minimise their potential emotional investment in a pregnancy, instead focusing on the pragmatics.

Joint directed decision-making

Different to the previous mode of decision-making, the four couples in this final mode each jointly wanted to have a child, and this was not due to circumstances. The individuals in these couples frequently suggested that their desire to have a child was 'innate', as can be seen in the following extract:

Interviewer: How much have you thought about the reasons why you wanted to have a child?

Paula: I haven't thought so much about why, although like obviously the instinct is there and it's stronger when you're with someone. I don't know, it's just a natural longing I suppose... I find it interesting that some people don't have the instinct because I always thought that everybody had it, that every female had it. And when I was growing up all the women that surrounded me had it.

Paula's struggle to elaborate how wanting a child was an 'instinct' and a 'natural longing' is indicative of the struggles that all four couples appeared to experience (see also Lupton & Barclay, 1997; Morison & Macleod, 2015). Similar to the other couples, Paula resorted to a paired contrast between instinct as a presumed norm that cannot be explained, and those for whom the same instinct is not evident. Whilst not necessarily the intention of Paula, this pairing implies a contrast between 'natural' and 'unnatural': that to *not* desire a child is to not be like 'every female'; not to be like 'all the women'. As such, whilst the language of 'instinct' and 'natural longing' might facilitate the decision-making of some people, it may also serve to alienate others (see Rich et al., 2011).

This implied paired contrast between a 'natural' desire for a child, and what may be construed as the 'unnatural' desire *not* to have a child, was stated even more clearly by Paula's partner:

Interviewer: What are some of the things that appeal to you about becoming a dad?

Isaac: I think it's the looking after thing which, I don't know, it's kind of selfish I suppose but at the same time it's also contributing to the species or whatever but yeah, just having someone to look after and to give what my parents gave me... I think it's just everyone's drive to keep the ball rolling kind of thing. To me it seems unnatural not to want to have kids because if you want to get all philosophical about it what other purpose is there except to reproduce and then die?

In this extract Isaac draws upon the idea that a desire for children is 'natural', and like Paula he makes his claim to naturalness through a paired contrast with the idea that it would be 'unnatural not to want to have kids'. Like many of the other men interviewed, then, Isaac makes a pragmatic bottom-line argument about planned parenthood: it is 'everyone's drive'.

Implications

Rather than repeating our findings here, we instead conclude by considering some of the potential implications of the findings as extrapolated to the broader population of whom the participants are likely representative (i.e., heterosexual couples planning for a first child). Specifically focusing on the three themes identified in regards to the desire to have a child, the first of these – the idea that having a child is part of the normative lifecourse of a heterosexual relationship – warrants ongoing attention in terms of the implications for instances where a pregnancy or birth does not occur. As we know from the literature on infertility (Ulrich & Weatherall, 2000) and pregnancy loss (Collins, Riggs, & Due, 2014), often what is experienced as a loss is the normative expectation of

having a child. Whilst there are many websites and face-to-face services that cater for those already pregnant, in Australia there are relatively few services available for those considering pregnancy. As such, it would appear that there is a need for services that target those planning for a child, and that such services are mindful of the fact that assumptions about fertility can have negative consequences if a pregnancy and birth do not occur.

The second theme – that of desiring a child being experienced as innate – suggests the need for services that provide information to people about possible reproductive futures well before they attempt to have a child. This could include information provision for young people as a part of sexual health education, so that they are aware that an ‘innate desire’ for children may not be paired with the capacity to become pregnant (Family Planning Victoria, 2014). Important also would be to include information in such education that depicts the decision *not* to have children as legitimate, so as to challenge the pronatalist injunction experienced by many. Medical professionals, and general practitioners specifically, may also benefit from training focused on speaking with patients who report an intention to have a first child, so that possible barriers to achieving this can be discussed, as well as linking patients in with supports if a desired pregnancy is not achieved.

Finally in terms of the third theme – having a child as a way of seeing oneself reflected in another – there were noticeable gender differences, seemingly stemming from social expectations and norms around gender. Whilst both men and women made comments that were identified as falling within this theme, it is nonetheless suggested that men more than women made recourse to pragmatic arguments about this. As such, men and

women may require different service responses in order to think through their desire to have children. This is particularly important in regards to potential experiences of infertility, which are rarely discussed in relation to male partners in heterosexual couples (Hinton & Miller, 2013).

To conclude, it must be acknowledged that the focus of the longitudinal project and the interview questions themselves – on desires for, as well as experiences of, having children – may well have shaped the findings reported here. Nonetheless, the modes of decision-making identified reinforce those identified in previous research, and the detailed thematic analysis highlights the complex ways in which the desire for a child is enunciated. As the first stage of a longitudinal study, it will be interesting to follow these intending parents, and consider what their potentially shifting views of parenting mean for service provision.

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Table 1. Modes of decision-making

Decision-making pattern	Number of couples
Female partner directed	1
Male partner directed	2
Joint directed due to circumstance	3
Joint directed	4