

Gender equity in theories of fertility transition¹

Peter McDonald

Demography Program, Australian National University

The 1994 International Conference on Population and Development placed issues of gender at the centre of discussion of population and development (United Nations 1995). The leading theme of the conference was that, in less developed countries, higher levels of gender equity are a necessary component in the achievement of lower fertility. In apparent contradiction with the 1994 ICPD, I have postulated that very low fertility in advanced countries today is the outcome of a conflict or inconsistency between high gender equity in individual-oriented social institutions and sustained gender inequity in family-oriented social institutions (McDonald 1997). The implication is that higher levels of gender equity in family-oriented social institutions are necessary to avoid very low fertility. Thus, on one hand, a higher level of gender equity in social institutions is claimed to lead to lower fertility while, on the other hand, a reorientation of social institutions towards a higher level of gender equity is claimed to prevent very low fertility. The paper addresses this apparent contradiction through consideration of more generalised theory of gender equity in fertility transition.

What is gender equity?

In an important review paper on gender and demographic change, Mason (1997) employs the concept of the gender system. She defines the gender system as:

The socially constructed expectations for male and female behaviour that are found (in variable form) in every known human society. A gender system's expectations prescribe a division of labour and responsibilities between men and women and grant different rights and obligations to them (Mason 1997: 158).

She observes that 'studies explicitly concerned with gender systems and their impact on demographic change are relatively new' (Mason 1997: 158). That this is the case in respect of studies of fertility is lamentable. Indeed, it is almost unbelievable that fertility transition can be studied without considering 'socially constructed expectations for female behaviour'.

Mason (1997: 159) subdivides the gender system into gender stratification (institutionalised inequality between male and female members of society) and gender roles (the division of labour between men and women). Gender equity derives from both of these elements of the gender system. Inequality between men and women and the division of labour between men and women in a particular gender system can be evaluated from the perspective of rights. Levels

¹ I wish to acknowledge improvements to this paper following discussions with Rebecca Kippen and Hera Cook.

of equity in such an evaluation constitute the level of gender equity (Fraser 1994). Thus, gender equity is a value-laden concept and begs the question of whose values should be applied.

In consideration of fertility transition, the obvious answer is that it is the values of the women and men who are making fertility decisions that are important. Do women (or, at least, some women) in the particular society consider that existing gender inequality or the existing division of labour is fair and equitable? Do the views of men and women coincide? Of course, women and men are very unlikely to express themselves in the rarefied language of sociology. Even in the United States in 1963, Betty Friedan (1963) could refer to gender inequity only as *The Problem That Has No Name*. In high fertility contexts, gender inequity within the family may be expressed by women as a generalised dissatisfaction with the rigours and dangers of a constant round of childbearing and childrearing brought upon them by spousal, familial or societal expectations².

The use of the word 'system' to describe gender stratification and gender roles may be misleading in that it implies the consistency between different social institutions inherent in the classic structural-functional anthropological approach. Essential to the argument of this paper is the notion that, for societies in transition, gender stratification and gender roles in different social institutions in the one society will be inconsistent with each other.

Studies of gender and fertility

Mason (1997: 163-72) provides an excellent review of the methodologies that would be required in studies of fertility and the gender system and reports upon the very few studies that approximate her standards of evidence. As she points out, the complexity involved in proper studies of the gender system and fertility is challenging. Indeed, it may be argued that despite the logical importance of the gender system to fertility, its lack of centrality in transition theory (until recently) is in no small measure due to the poor design of quantitative analyses. To test the relationship between gender equity and fertility, demographers conventionally have sought a sample of women in which there were measures of each woman's 'status' and a measure of their fertility. A multivariate, cross-sectional analysis is then applied to examine whether there is a significant relationship between women's status and fertility at the individual level. A more sophisticated analysis may add community level measures of the status of women to the model.

This could be described as a unidirectional, dichotomous model. Low women's status leads to high fertility; high women's status leads to low fertility. In regard to the fertility transition, this is just one example of several unidirectional dichotomous models that have been addressed in the literature. Here is a list of some others. High education leads to low fertility, higher economic status leads

² If the risks of a plane crashing today were the same as the risks of death in childbirth in the historical past, who would want to fly over and over again, particularly when you had already reached your destination.

to lower fertility, higher levels of social inclusion lead to lower fertility, lower infant and child mortality leads to lower fertility, higher costs of children lead to lower fertility, lower fertility comes with lower religiosity, lower fertility is associated with a transition from extended to nuclear families, urbanisation leads to lower fertility and a nearer point on the low fertility-ideation trail leads to lower fertility. There is also the tautology that higher or better use of birth control leads to lower fertility.

In general, the logic of unidirectional dichotomous models has been criticised because they imply a simple, evolutionary process of social change, universal across all societies, in which progression along the path of the model is always superior (Derrida 1976; McDonald 1994). In regard to fertility, these models have been criticised for not situating fertility within its cultural and institutional context (McNicoll 1980; Greenhalgh 1995). The unidirectional, dichotomous model applies irrespective of, or is only vaguely modified by, the social context³.

Quantitative studies of the relationship between gender equity and fertility require measures of gender equity. As defined here, gender equity would be evaluated for each social institution on the basis of the assessments of women and perhaps, men, in the society under study. This definition has obvious inherent difficulties in regard to historical studies. In this case, we would be reliant upon diaries, letters and published statements of women. On the other hand, much historical research uses similar sources. An excellent example of such an historical study which provides conclusions that support the arguments of this paper is Catherine Scholten's (1985) study, *Childbearing in American Society: 1650-1850*⁴. In contemporary societies, if gender equity is a problem that has no name, it is difficult to obtain measures of the perceptions of gender equity from individual women. Depending upon the social context, social-psychological scales may be useful. Inevitably, however, gender equity will be measured by the researcher's own assessment of the levels of equity applying in different social institutions based upon quantitative measures of those institutions. Such measurement will require an anthropological knowledge of the society. This is the approach used in the small number of recent quantitative studies reported upon by Mason (1997: 169-72). The argument that complexity implies the use of qualitative methods is also apposite.

Some propositions regarding the relationship between gender equity and fertility

The place of gender in fertility transition theory can be considered in terms of the following propositions:

³ On the other hand, at the opposite extremity, there is a recent fashion to attribute unexplained variation to a black box called 'context', adding little or nothing to theory.

⁴ Other examples are Pat Quiggin's (1988) study: *No Rising Generation: Women and Fertility in Late Nineteenth Century Australia* and Wally Seccombe's (1993) study: *Weathering the Storm: Working-Class Families from the Industrial Revolution to the Fertility Decline*.

1. Fertility in a society falls through the cumulation of the actions of individual women and men to prevent births⁵.
2. Sustained lower fertility in any society will lead to fundamental changes in the nature of women's lives.

The first proposition is a direct or indirect component of most theories of fertility transition. In accepting this proposition, the implication is that fertility change in a society must be capable of being explained in individual terms. The dimension used in this paper, gender equity, is not an individual characteristic. It is a characteristic of the institutions of society. The first proposition says that people, not institutions, change fertility levels. Thus, in proposing a place in fertility transition theory for gender equity, a theory must elaborate upon how the levels of gender equity in social institutions are played out in individual-level decision-making.

The first proposition also implies that individuals have the knowledge and the social permission necessary to control their births. That the spread of the idea of birth control is a component of fertility transition is tautological. The way in which the idea is spread, however, is a highly relevant consideration (Watkins 1986).

The second proposition states that if fertility falls in a society from high to low levels then, inevitably, this will change the nature of the society. In particular, it will change the nature of women's lives. Implicit in the gender system of a high fertility society is that women devote a great deal of their time and energy to childbearing and childrearing. If fertility falls to lower and lower levels, this in itself is an indication that society no longer places the same emphasis upon this division of labour. Mason (1997: 173-75) reports upon the small number of studies that have considered the impact of lower fertility upon the gender system, but none of these studies consider the impact of fertility change on women's lives as a component of fertility transition theory. Demographic investigation, as mentioned above, conventionally considers the reverse causal direction of this proposition, that is, that fundamental changes in the nature of women's lives lead to sustained fertility decline. Thus, in the conventional approach, change in women's lives occurs first and then fertility falls. The aim of expressing the proposition in the reverse is to argue that women have a smaller number of children in order to change the nature of the rest of their lives, not necessarily because those changes have already occurred in their past lives. A birth is not an event that simply occurs at a moment in time and is explained by circumstances before and around that point in time. In Levinson's terms (Levinson 1980), fundamental life events are constructed as part of a transition in people's lives. The decision to have a child (or to avoid having a child) is not independent of the effects upon lives that ensue from that decision. That is, women have a birth or avoid a birth in an effort to change their futures, not because the decision was pre-ordained by a set of characteristics that they had accumulated prior to the

⁵ Maybe including non-marriage or delay of marriage, although, in an early paper, I have argued against this (McDonald 1981).

decision (McDonald 1996). This provides a much more active conception of the role of gender equity in fertility transition. Women in high fertility societies have fewer children in the expectation (or vague hope) that this will change their futures⁶.

The expectation may not be realised and this complicates quantitative study of the issue. A smaller number of children might not mean that a family is economically better off or that the woman is able to pursue paid employment outside the family circle. At an early point in the transition, the statistical evidence may be weak. However, so long as women are able to continue to hold the expectation that restriction of their fertility will lead to change in their lives, eventually, through successive age cohorts, the expectation will be more often realised.

This future orientation is consistent with the household economics approach to fertility decision-making (Becker 1981). The decision is made in order to maximise future utility. However, the household economics approach is limited by its exclusive focus upon economic utility, its specification of children as normal goods and its presumption that the individual or the individual couple makes decisions in an institutionally unconstrained manner. Evidently, the nature of social institutions and the place of women in those social institutions has a considerable bearing on the degree of freedom or autonomy that a woman has to make a decision that will change her future fertility (Greenhalgh 1995).

In the well-known European Fertility Project, a ten per cent fall in fertility was set as the criterion for acceptance of the onset of fertility transition (Coale and Watkins 1986). The concentration in this study was upon the onset of the decline as it was concluded that, once a fall of ten per cent had been observed, continuation of the decline was inevitable. The study found that little generalisation could be made across districts of Europe in the conditions that were contemporaneous to this ten per cent fall. Given the extent of institutional variation across cultures at the onset of decline, it is not surprising that generalisation proved to be difficult. If consideration is extended to all world cultures, this conclusion is very much more likely to be reached. It is argued here that the emphasis on the theory of the onset of decline may be misplaced. More value may be obtained from study of why fertility continues to decline to low levels after it has commenced to fall. That is, the scope for theoretical generalisation is probably greater in study of the sustained fall of fertility than it is in study of the commencement of fertility decline.

⁶ And, possibly, the futures of their children and the futures of other women. There may be some altruism involved in suffering as an innovator.

Fertility transition, gender equity and the institution of the family

Childbearing is inherent to family reproduction and, as such, it should be impossible to theorise about fertility transition without considering family reproduction and family organisation (Seccombe 1993). Folbre (1983: 267), in addressing conventional theories of fertility transition, has said that ‘the failure to incorporate any consideration of changing power relations within the family constitutes what many feminists might consider a fatal error of omission’.

Family organisation varies from society to society and the role of women in that organisation is highly variable from society to society. Thus, in this most important element, the starting points of each fertility transition are different. This complicates the use of standard variables across cultures as the social meaning of particular measures will be variable. However, the following general propositions can be made:

3. In pre-transition societies, high fertility was (is) socially determined, not naturally-determined.

4. The transition from high to lower fertility is accompanied by an increase in gender equity *within* the institution of the family.

There is a great deal of literature on the social supports to high fertility. Often, social-structural arguments are given for the benefits of high fertility. These principally revolve around the value of children to the family whatever its structure. There are studies that suggest that there was some degree of control over fertility in many pre-transition societies, that is, the valued number of children was high but below the biological expectation. However, the supports for high fertility in pre-transition societies are more than social-structural. High fertility becomes a part of the established family morality and is supported by the institutions of morality, principally religion.

“A mother with a train of children after her is one of the most admirable and lovely Sights in the visible Creation of God,” declared Benjamin Colman as he introduced the text of his sermon “Fruitful Mothers in Israel” to his Boston congregation. In 1715 the Old Testament injunction “Be fruitful and multiply,” which Colman proceeded to discuss, was familiar to his listeners, and his interpretation of the text was representative of American thought on the purpose of marriage and on women’s ordained part as childbearer (Scholten 1983: 8).

Fertility transition requires not only changes to the social-structural supports but also to the moral supports. Here, we would be looking for changes in the morality governing the nature of the couple relationship and women’s ordained part as childrearer. In the West, there may have been a process by which the assertion of the rights of the individual through the Enlightenment gradually filtered down to

the rights of women within marriage. In the past 30 years in developing countries, westernisation has been a force with which traditional moralities have had to contend. Education in itself empowers the individual allowing for a questioning of traditional morality.

In western Europe, the decline of parentally-arranged marriages and the shift of power over the means of production from the parental generation to the generation of the young couple are indicators of a changing role for women within a modified family organisation. These changes extend back into the 18th century, predating or contemporary with the fertility decline. Seccombe (1993: Chapter 5) argues that women in the late 19th century and the early 20th century had a very much stronger desire to put an end to the constant cycle of births than men did. The fact that their wishes were given credence by most husbands represented a shift away from patriarchy and towards gender equity in the couple relationship. Prior to the transition, Folbre (1983: 270) says, 'women's freedom of reproductive choice is often constrained by forms of patriarchal oppression which are coercively pronatal'. However, throughout the fertility transition in western Europe, women remained dominated by their role within the male-breadwinner model of the family. It is only in the past 40 years that women in general, but especially married women, have been able to assert an independent status outside of the family.

Family organisation is an important aspect of cultural identity. Because of this, family is a conservative institution that will normally change only very slowly. In all societies, family organisation is protected from radical change by an idealised family morality. This moral conservatism is often enshrined in the prevailing religion. Most often, idealised family morality confines women to the hegemony of men. Radical change can occur, however, through changes of political power or through changes of the attitudes of those in power. Otherwise, change is gradual (McDonald 1992; McDonald 1994). Increased gender equity within the family can be a gradual process that does not portend radical family change. Thus, a society may provide women with increased control over their own fertility within what is, in most respects, a male-dominated family system so long as their increased independence does not threaten the prevailing family system.

Depending upon the cultural or economic setting, there are various factors that may enhance gender equity within the family and hasten the adoption of lower levels of fertility. Where limited fertility control has been practised before the onset of sustained fertility decline, decline may proceed more rapidly because the idea and practice of control is already present in the society. Advances in education for women will attune them to ideas and provide them with the confidence to adopt new ideas. Husbands also may more often defer to the wishes of the educated wife. As more children survive, control of later fertility may be implemented. Changing cost structures such as compulsory education of children or urban residence may induce changes in fertility. The reversal of wealth flows across the generations may be another factor. Political regimes that

are more socially inclusive may provide access to contraception and the freedom to use contraception to a wider range of people. The free movement of information between women in a society and from society to society is another factor. The medical profession may become increasingly involved in natal care and warn of the dangers to a woman of having another birth. Advances in contraceptive technology enhance the ease of control over fertility. Finally, government-sponsored family planning programs may provide social permission and access to contraception. There is no claim made here that increased gender equity within families is a sufficient condition for fertility transition, however, it is claimed to be a necessary condition. It becomes sufficient only through some amalgam with the other forces of change enumerated above.

Part of the success of government-sponsored, family planning programs in the past 30 years has been that they addressed their campaigns directly to women, but always within their family context. Conservatism surrounding family organisation clearly provided no other option, but the effect has been to raise the levels of gender equity within the institution of the family. It has been argued that, in Bangladesh for example, the family planning program itself has been an agent in improving the status of women within the family. The program relates women to the modern, outside world, it encourages them to take their own actions in regard to their fertility, it brings them in contact with other women who are not members of their family and, since the change to a clinic-based delivery system, it has allowed women to leave their houses unaccompanied by a male family member. This, together with a gradual shift in the power regime within families from the extended to the conjugal unit, has increased gender equity within the family (Simmons 1996).

In summary, there is a strong case that, where women are provided with decision-making power within the family, especially in regard to the number of children that they have, it is possible that fertility can fall to low levels without there being major changes in women's lives outside of the family. Fertility in the West fell to replacement level by the 1930s at the same time as the male breadwinner model of the family was rising to its zenith. That is, fertility can fall to low levels while most institutions outside the family are marked by considerable gender inequity. Folbre (1983: 276) even argues that the early advance of capitalism may have worsened gender equity in market employment while improving it within the family. At the same time, as proposed earlier, low fertility *will* change the nature of women's lives. In time, this will lead to rising demand for greater levels of equity for women in institutions outside of the family. This realisation lies at the heart of conservative, usually religious, reactions to birth control⁷. In terms of the Cairo agenda, just as women in developing countries have been the beneficiaries of more advanced contraceptive technology than was available during the fertility transition in the West, they are also likely to participate in a more rapid shift towards gender equity in individual-oriented institutions than was the case in the West. Thus, compared to the schematic view

⁷ The papal encyclical, *Humanae Vitae*, is an example.

of change in the West (Figure 1), gender equity in individual-oriented institutions may be changing earlier in the fertility transition than was the case in the West. This should accelerate the transition.

Gender equity in individual-oriented institutions

The growth of individual rights and freedoms in the West in the past 200 years has led to the development of institutions that have become increasingly individual-oriented. The institutions of democracy, for example, provide individual voting rights, not family voting rights. However, the progress to this situation has been through a period in which rights and freedoms were extended to individual men not to individual women. Effectively, prior to the 20th century, men exercised the democratic rights of women. In education, women were educated to the level that would fit them to be suitable wives to the husbands that they might be expected to marry. Education for women was not directed towards future employment in the paid labour force. In employment, by the late 19th century, a woman was expected to eschew paid employment unless she was single or could not rely upon the earnings of her husband⁸. Thus, individual-oriented institutions were male institutions and, as such, they promoted and enshrined the male breadwinner model of the family. Gender equity was a characteristic of women in their family role only.

Women in the West have gradually gained rights within individual-oriented institutions. The early successes were property rights and voting rights. Rights in education grew gradually over a long period of time to the point of equality (or better) today. Rights of women in market employment have risen dramatically in the past 20 years. Generally women can expect equal pay for equal work and, at least at the non-managerial level, to be able to compete equitably with men in the employment market. In total, these changes represent radical or revolutionary change.

At the same time, gender equity within the family and hence in family-oriented institutions has continued to change only very slowly. While, as argued in the previous section, the change within the family has been sufficient to allow women to have extensive control over their fertility, it has not provided other forms of equity within the family. In respect of the family, full gender equity would be achieved only if gender was not a determinant of which member of the couple undertook the three forms of family work: income-earning work, caring work and household maintenance work. In marriages, women remain the overwhelming providers of care and continue to carry most of the burden of household maintenance. Gender stratification within the contemporary Western family remains considerable. It is also considerable in the East Asian developed economies that also now experience low fertility.

⁸ This is an idea not past its time, it seems. Mead (1999) argue that mothers in couple families should not be in paid employment while mothers in sole parent families should.

Gender equity and very low fertility

In advanced economies today, women are able to compete as equals so long as they are not constrained by their family roles. Women who place a value upon their involvement in individual-oriented institutions will therefore be faced with a dilemma if a potential future family role is seen as being inconsistent with their aspirations as an individual. Some women in this circumstance will opt to eschew the family role rather than the individual role, that is, they will not form a permanent relationship or they will have no children or fewer children than they had intended (McDonald 1997). Most young women today have been educated and socialised to expect that they will have a role as an individual beyond any family role that they may have. Thus, a fifth proposition can be made:

5. When gender equity rises to high levels in individual-oriented institutions while remaining low in family-oriented institutions, fertility will fall to very low levels⁹.

I have argued that cross-national comparisons of contemporary advanced countries provide evidence that supports this proposition (McDonald 1997).

Conclusion

The apparent contradiction stated at the beginning of the paper has been addressed through the division of gender equity into two broad forms of gender equity: gender equity in family-related institutions and gender equity in individual-oriented institutions. It has been asserted that the fertility transition from high to low levels has been associated mainly with slowly improving gender equity within family-oriented social institutions, almost exclusively within the family itself. The fall in fertility is associated with women reducing the number of their births to more desirable levels. However, change in the institution of the family proceeds gradually because the family system is strongly linked to conservative institutions such as religion. The link is the reification of family through an idealised family morality.

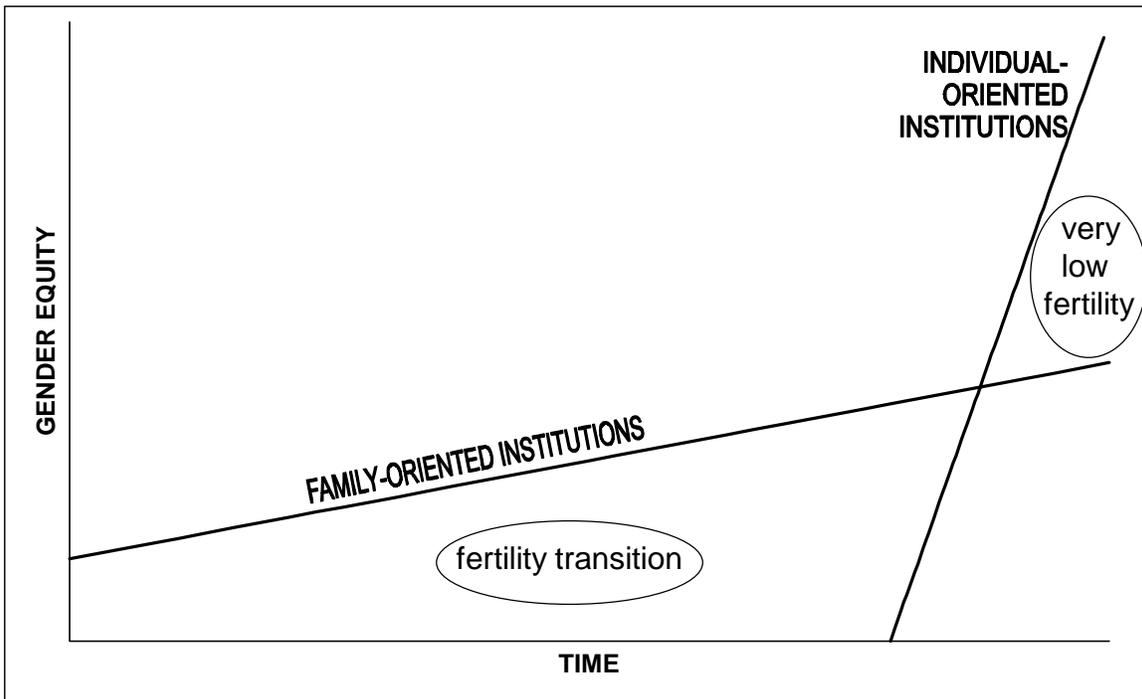
During the 20th century, there was a revolution in levels of gender equity in individual-oriented institutions in advanced countries. From a point where women had little or no equity in individual institutions such as education and market employment, the century ended with very high levels of gender equity in these institutions. High levels of equity for women as individuals in combination with continuing low levels of equity for women as wives or mothers means that many women will achieve lower fertility than they aspired to when they were younger. In demographic terms, lower fertility is played out through the delay or impermanence of relationships, through childlessness and through delayed commencement of childbearing. The outcome for the society is a very low fertility rate.

⁹ Very low means a total fertility rate below 1.5 births per woman.

I have argued that the achievement of gender equity in individual-oriented institutions will not be reversed. Hence, very low fertility rates will persist unless gender equity within family-oriented institutions rises more sharply than it has in the past. Thus, in a context of high gender equity in individual-oriented institutions, higher gender equity in family-oriented institutions will tend to raise fertility. In contrast, as argued here, in a context of low gender equity in individual-oriented institutions, higher gender equity in family-oriented institutions will tend to lower fertility. The idea is conceptualised in Figure 1.

Beyond the gender equity argument is an argument about equity between those who have children and those who do not have children. Equity for families with children in the tax-transfer system also needs to be considered in addressing very low fertility.

Figure 1. A conceptual representation of gender equity, social institutions and fertility in the West.



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