## **INTRODUCTION**

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For three or four decades now, while the majority of Latin American and Asian countries have experienced accelerated fertility declines, most of them having launched family planning programmes and population policies aimed at reducing population growth and spreading family planning methods, the high fertility levels of the poorest countries, including many African ones, have not shown significant changes, if it is not increase. Similarly, the most deprived social layers of developing as well as developed countries have kept fertility levels well above national means.

On the other hand, in the last decade, tangible signs of the beginning of fertility decline have been observed everywhere, in all social sectors; moreover, most countries have officially adopted population policies. Countries whose fertility levels are deemed too high by their own governments and those where fertility depleting policies have been set up, are more and more numerous in all regions of the world. This book analyses relations between fertility change and family planning in environments of economic and social poverty. Many concrete examples are presented and analysed.

With hindsight, it becomes possible to think that fertility changes among the poor are likely to have occurred earlier than was usually believed, and that the drop in the demand for children is probably more ancient than it seems. But, whereas fertility transition started first among the most well-off and educated layers of society, changes were hindered by obstacles among populations living in harsh precariousness, with poor access to education and health and family planning services. Moreover, in many cases, attitudes remained overall in favour of large offsprings.

However, in view of the recent fertility declines, extremely rapid in the poorest sectors of different societies, it can certainly be assumed that a so-called "malthusianism of poverty" is developing in Africa, as well as in Latin America and Asia, inasmuch as the limitation of family size can derive from the difficulty of providing many children with health care and education. The costs of child rearing are amplified by new needs, particularly in urban settings and in contexts of crisis, and resources provided by child labour are strongly limited at present. This rise in child costs can lead gradually to family planning and the use of modern methods of contraception when easily accessible. Fertility decline recently spread to all environments, urban and rural, to all social circles and to all continents (Africa, Asia, Latin America).

Whereas many theoretical frameworks, notably the demographic transition one, suggest explanations for fertility declines in relation with economic and social development, we sorely miss studies and concepts allowing for the explanation of the speed and extent of fertility decline in other less favourable cases, particularly in contexts of persistent poverty. Similarly, we know little about the emergence of a demand for family planning, as well as the meeting of it, in relation with the economic, social and political situation of the most deprived populations.

Therefore, CICRED offered to organize a seminar in 1998, in order to take stock of researches developed in its member centres by examining the following topics:

- a) trends and explanations of fertility decline in contexts of poverty or economic crisis, among the most deprived social strata; emergence of a "Malthusianism of poverty";
- b) proximate determinants of fertility and poverty: changes in the process of entering into procreation, maternal health, contraception, post-partum infertility, breast-feeding, abortion all in relation with poverty, economic crises and political crises (refugees for instance);
- c) family planning and poverty: explaining factors of the extension of the demand for family planning, and of the knowledge and practice of different contraceptive methods among the most deprived layers of society;

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d) conditions of access to family planning and poverty: supply of and demand for family planning services, quality of services, institutional aspects of the supply of such services to social classes living in poverty.

The seminar "Poverty, fertility, family planning" was organized by CICRED and IISUNAM in Mexico City from 2nd to 4th June 1998. It gathered together participants from research centres in Africa, Asia, America, Eastern and Western Europe, selected on the basis of answers to a survey on research projects on these topics, conducted by CICRED among all its members. 121 projects from 58 centres were listed, dealing with the themes included in the seminar programme. Besides, Mexican institutions were invited to participate: IISUNAM, El Colegio de México, FLACSO, CONAPO, CRIM, SOMEDE, PROGRESA, etc., and they answered the invitation by taking an active part in the three study days. This book includes contributions selected from those that were presented and discussed during the seminar.

First, Rodolfo Tuirán's analysis of the links between poverty, fertility and life cycles in Mexico highlights the significant role of family dynamics and intergenerational evolution in fertility change, as well as the importance of shifts between poor and non-poor statuses. Social disparities maintain large fertility differences in spite of a general decreasing trend, and that is undoubtedly associated with social differences in access to health services. The Mexican population programme should take such social disparities into account in order to cope with their consequences.

Theoretical and methodological aspects are dealt with by D. Tabutin and B. Schoumaker, who review, thanks to a large number of cases from all regions of the world, associations between poverty and fertility. Their analysis leads to paradoxical results that closely depend on the index selected to measure poverty. One must aim at improving tools for the analysis of relations between fertility and poverty. Susana Lerner and André Quesnel, for their part, highlight the role of the paths to marital union and first maternity in explaining observed changes in the fertility level of the most deprived social categories. All over Mexico, pregnancies have come to rely on medical assistance, and this implies that various levels of analysis (society, family, institutions) have to be taken into consideration.

In fact, the topic of family formation in contexts of poverty is crucial and is widely dealt with in this book. In developed countries, this is echoed by the large number of adolescent pregnancies, a most obvious but reproved sign, often related with the lack of other options for young girls, victims of social exclusion, poor education, unemployment, precarious living conditions. Access to health services refers to issues of self-esteem, life course projects and social and personal opportunities. In the transitional economies of Eastern Europe, the steep degradation of standards of living has led families to fertility limitation and abortion, and there is evidence of chronic pessimism regarding the future, as can be observed in the case of Lithuania. Similarly, in the poor districts of Buenos Aires, the same situation leads to a fertility decline among young women, whereas problems of access to family planning and health services, as well as the prohibition of abortion, hinder the effective recourse to contraceptive methods. In spite of these difficulties, young girls will have less children than their mothers.

On the other hand, in a poor urban environment in Senegal, male practices and aspirations as regards fertility planning are limited by social and cultural factors making for high fertility levels. Changes could be made possible by an increase in the supply of contraceptives (action of a few NGOs), but this is still very limited for the moment. Other examples, rural ones this time (Nepal, Ivory Coast), also show little fertility change in contexts of crisis and social and economic precariousness, the rise in poverty being paralleled by a deterioration of the health services provided to the population, including family planning, while the conditions of access to land and the deterioration of the environment would make fertility decline necessary in order to slow down population growth. In Ivory Coast, young people remain single for a long time for want of work as well as of the means to get married, but the supply of family planning is very insufficient and very few families currently use contraceptives.

In other instances such as Mexico, Brazil and two Indian regions, the situation is quite different. The supply of family planning is abundant, fertility is rapidly declining and sterilization is spreading, especially among the poor in Brazil. The plentiful supply of contraceptives and the quality of family planning programmes are directly linked with this accelerated fertility decline in all social classes, including the most deprived ones.

Finally, the examples presented in this book show that the concept of poverty is very heterogeneous and multidimensional. Furthermore, the relations between poverty, fertility and family planning are complex and divergent, depending upon the economic, social and cultural conINTRODUCTION 9

texts. Moreover, many methodological issues remain unsolved for the time being, especially the problem of the relations between the different levels of analysis.

On the other hand, the seminar sessions clearly showed that poor social classes experience rapid changes, that their fertility and family planning change as much as those of other classes, that education as well as gender relations are crucial. Similar attention is also to be given to the demand for children (in view of family support), that can diminish as the value of children decreases, and to the supply of family planning in the framework of good quality programmes, adequately designed to meet the needs of individuals and families.

Fertility is a process on which poverty has bearing together with other factors, and it is essential to analyse in depth the relations between fertility and poverty in various settings. For that, we must take into account a number of conclusions of the seminar that would shed light on the issue through an examination of the following variables:

- The role of and access to institutional structures. For instance, abortion is a sign of the difficulties of access to family planning services and gives some indication of unmet needs in this respect;
- The role of economic structures and the organization of production. A review has been made of the way people get round the effects of economic crises and adapt their fertility behaviour to deteriorating economic contexts;
- The effects of poverty on the processes of entry into marital union, family formation, access to adulthood and autonomy for youth;
- It has been demonstrated that the poorest of the poor start demographic transition in great numbers. So, there is indeed, at least in some regions, a "Malthusianism of poverty";
- The quality of the supply of health care and family planning services is very important to meet the needs of populations as soon as they have been clearly asserted;

The specificity of the processes of fertility change in the poorest settings, offers a possibility of perceiving the emergence of new models, unforeseen by classical demographic transition theories – proof, if need be, of the complexity and variety of family dynamics, notably as regards gender and intergenerational relations, as well as of the capacities and possibilities of adaptation to modern times. This book marks the first step in a new direction that might lead to an enlarged under-

standing of the issues involved and to the emergence of new knowledge which will help fight poverty, injustice and social disparity.