Childlessness in Spain: Tick Tock, Tick Tock, Tick Tock!

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In less than a decade, women born in 1975 will be reaching half a century of existence as members of the most infertile of all cohorts born in Spain in the past 130 years, the period for which we have statistical information. In all likelihood, one in four women born in 1975 won’t have had children when she turns fifty, the cut-off point at which demography appraises the completed fertility of a birth cohort. Part of this childlessness is due to frustration of the reproductive project of these women and, eventually, that of their partners. This little-known datum has been envisaged year after year because of causes that are known in theory but difficult to discern and quantify. In societies like ours, which are so concerned about population ageing and its consequences for sustainability of pensions, the viability of a universal health system, increased dependence and its repercussions on gender inequality, or the decline of the working-age population, it’s surprising that there is so little discussion of the fact that, contrary to her own expectations and wishes, one in every four women will be childless. This is why the first number of Perspectives Demogràfiques, a scientific publication on demography addressed to the general public, is devoted to the trends and possible causes of infertility in Spain.

FIGURE 1. Evolution of childlessness and completed fertility in cohorts of women born in Spain between 1886 and 1980

INCREASING CHILDLESSNESS

The progressive waning of fertility in Spain was only and exceptionally interrupted in the years of the baby boom. The completed fertility of the generations of women born in Spain between 1886 and 1980 (Figure 1) is reduced to half in the period between the generation of 1900 (3.15 children per woman) and that of 1969 (1.49 children per woman). Generation after generation, women have been having fewer children except for those born between 1930 and 1943, the protagonists of the baby boom who sustained the figure of 2.5 children per woman or even surpassed it (for example with 2.64 children per woman in the generation born in 1938).

However, never have all the women of any generation been mothers, and still less so now. Between 25% and 30% of the women born in the second half of the 1970s will be childless. One
needs to go back to generations born before 1922 in order to find levels of childlessness that compare with those of the present, although the earlier figures never exceeded 25% of childless women. The proportion of childless women starts to fall between the generation of 1922 and that of 1944 (11.8% of childless women), after which it steadily increases.

The relationship between childlessness and completed fertility is not linear. The fact that 20% of the women born between 1886 and 1922 had no children did not prevent this group from reaching a completed fertility figure of more than 2.5 children per woman. The high generational childlessness of the women was compensated by the large number of offspring among the women who did have children. Nonetheless, the reduced childlessness among the cohort born from 1930 to 1943 was a key factor in sustaining, and even surpassing, the figure of 2.5 children per woman in these baby boom generations. After 1944, the relationship between completed fertility and childlessness grew closer, especially with more recent generations. The drop from 2.03 children per woman for the generation of 1952 to 1.49 for that of 1969 is mainly explained by increased childlessness rather than by any reduction in the average number of children born to women who have been mothers.

**CAUSES OF CHILDLESSNESS**

The reasons why women are childless are several and known, although it is not always possible to quantify their importance (Devolder 2015). In theory, we identify five main explanations. First, are the women who, for biological reasons, are unable to have children which, in medical terminology, is called primary sterility. Second, are fecund women who don’t want to have children, a decision they stand by throughout their lives, and which we call voluntary childlessness. Third, is the case of women who can and would like to have children but they don’t plan to do so because they believe they are too young, a situation we put under the heading of normative childlessness since it is determined in accordance with the socially acceptable age for becoming a mother. Fourth, are the women of a socially acceptable age for motherhood, and who can and would like to have children but who opt to wait for some years because they don’t enjoy the right family conditions and/or optimal material circumstances for taking on the costs of reproduction, a situation we call transitory childlessness. Fifth and finally, are those women who, whether or not they attain the circumstances they deemed indispensable some years earlier, decide to have children but don’t have them because they can’t get pregnant owing to age-related low fecundity or acquired sterility, which is increasingly the case after 35 years of age.

Which are the most important of these reasons? With the (very scant) data available in Spain it isn’t possible to give a definitive answer to this question but at least we can discard several hypotheses. Primary sterility has a low, constant rate of about 2% and doesn’t explain Spain’s high childlessness rates. Moreover, assisted reproduction technology has contributed towards reducing the levels of primary and acquired sterility. Then again, women who don’t want to have children and who stay with this decision throughout their fertile life are a minority, always less than 5%, according to data obtained from the most recent fertility surveys published in Spain. In fact, Spain is one of European countries with the greatest gap between the number of children desired and those actually born (Castro-Martín, Seiz-Puyuelo, 2014). Neither can we attribute increased childlessness to the fact that women don’t plan to have children in the early years of their fertile life, for example.

**FIGURE 2. Evolution of the average age at the birth of the first child in 35 European countries, 1970-2012**

Source: CKD using Eurostat data.
between 15 and 25 years of age. In this range, the women who are mothers represent a minority and there are still enough years left for having children. Everything would seem to suggest that today’s childlessness rates are linked with postponing the mother’s age at the birth of the first child and the material or conjugal conditions surrounding the decision to have children between 25 and 40 years of age.

AN INTOLERABLE DELAY

Spain heads the list for delayed maternity in Europe (Figure 2), presently showing the highest average age in the world at the birth of the first child. Between 1985 and 2012 the average age of Spanish women at the time of the birth of the first child rose from 26 to 30.5 years. In practice, this increase reveals a displacement in the window of years in which women plan to have children, situating it at an age level where fertility quickly declines.

The postponement of the average age at the birth of the first child, in particular when it is in the range between 25 and 35 years, has direct consequences for the final levels of childlessness (Figure 3). The gulf between birth cohort in terms of the central ages of a woman’s fertile life, from 25 to 35 years of age, is the clearest graphic evidence of delaying the age of having the first child since, at these ages, the generational differences reach their highest values. Although these differences are reduced at more advanced ages, the younger generations do not recover all the possibilities for maternity they have lost before turning 35 and end up with a smaller proportion of mothers. It is important to note, too, that when the average age at the birth of the first child is at present-day levels of about 30 years, the effects of further delay are magnified.

At these levels, delaying motherhood for an additional year turns into an eventual rise of two points in the final proportion of childless women.

FRUSTRATION OF REPRODUCTIVE PROJECTS

So far, demography has fulfilled its first task of showing and demonstrating that rising childlessness in Spain is associated with delaying the birth of the first child. It is now necessary to inquire further into the causes of this delay. We know that there is no general opposition to having children and that, rather, delay in having them is a result of the difficulties of achieving the family and material circumstances that would make maternity viable. These difficulties make it necessary to put off the decision until ages where fecundity is on the wane, thus jeopardising the reproductive projects of both women and men.

As for demographic conditions affecting family formation, the situation of the marriage market shouldn’t be overlooked. A good part of the childlessness in cohorts born before 1922 is related with a considerable, definitive number of unmarried people in a very rigid marriage market. Now, in more flexible conditions, we find, however, a very large proportion of young people who are not living with a partner in their peak years of fecundity. Many of them have had one or more partners in the past. In fact, it’s not a problem of a scarcity of men or women in the strict numerical sense but more like a lack of agreement in the expectations of men and women in the marriage market (Estève, García, Permanyer, 2012). This aspect is certainly an obstacle to the formation of stable couples who are willing to have children in conditions of equality. It can be deduced from comparative study with other developed countries.
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In increasingly long-lived generations, the period for reproduction is limited and, moreover, it competes with time given to consolidating professional careers. Reproduction has costs (in the forms of opportunity, time and resources) and, as a result, it is a decision that requires a certain degree of security about the present and future in order to take them on. People will be obliged to decide about reproduction in a short period of time, and this will affect our kinship availability forever.

PRESSING DECISIONS

As a society, we should consider the assignation of resources in our lives and incorporate the raising of children in youthful years as one more pillar of the welfare state, knowing - as we do know - that we are facing growing frustration of reproductive projects among a considerable part of the citizens. Trying to fit together reproductive projects and professional demands on men and women has turned into an exercise of squaring of the circle in many societies. Family transition based on the assumption of egalitarian gender values needs institutional support. We’ve become accustomed to burdening women and the younger generations with the responsibilities of reproduction, pressuring them with the famous biological clock. Yet the same minute hand marks the hours of society as a whole and measures, neither more nor less, the distance that separates us from a more just and egalitarian society, for which we are all responsible. Starting with our institutions.

Demography has a lot to say about this process which conditions private lives and the collective developments which nudge us about reproduction in a short period of time, and this will affect our future in order to take them on. People will be obliged to decide about reproduction in a short period of time, and this will affect our kinship availability forever.

Bibliographical References

Esping-Andersen and Billari, 2015) that, first, achieving a career in an increasingly competitive professional field and, in particular for women; and, second, finding a partner who can share the reproductive project on equal terms when the State refrains from discussion of the matter or reduces it to increasing-the-birth-rate rhetoric, are the two main factors responsible for this intolerable postponing of fertility. Some years ago the term “family transition” had already been coined to refer to this increasing constriction in Spain (Cabré, 2007). Even today, the distribution of household roles is asymmetrical in Spain and it becomes still more unequal after children are born.

However, the material conditions shouldn’t be overlooked either. The frustration of reproductive projects of Spanish men and women, including accepting childlessness as an option, can’t be understood without taking into account the absence of real support for reconciling family life with working life, the lack of any clear attempt to promote young people and women and, in general, policies based on deregulation and insecurity. Unemployment, precarious work, limited access to housing, difficulties in consolidation of working life, long working hours, low salaries and a scant number of public policies have done nothing to encourage reproduction, or fill the pockets of young people, or foster policies in support of reproduction (for example free pre-school education).

If, to all this, we add that most of the costs of reproduction are borne by women, childlessness is the logical result.

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Demography has a lot to say about this process which conditions private lives and the collective developments which nudge us into public decisions but, if we are to be able to respond to this challenge, we need institutional willingness to produce more and better data about childlessness in Spain.

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