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European Fertility: An Examination of Shifting Fertility Trends in Italy, Spain, and Sweden

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**Abstract**

Total fertility rates throughout the European Union (EU) have fallen and are now below the replacement rate of 2.1 births per woman. Maintaining a sustainable population size is crucial for the future of the EU, and this concerns both politicians and scholars. This paper will examine three countries to represent the broader EU and discern causal factors in this fertility crisis. Italy and Spain are two southern states experiencing sharp fertility decline, while Sweden is a northern nation with a more modest change. I argue that women’s economic stability and experience of gendered norms within the domestic sphere are the two key factors in shifting fertility outcomes. Women’s job security and family planning are often put at odds, complicating the decision to have multiple children. If fertility rates are to improve, countries must understand and address the socio-cultural norms and political institutions that empower or impede women’s combined employment and fertility.

**Keywords**

fertility rates, gender, economic security
INTRODUCTION

Fertility rates across Europe are falling at an alarming rate. Maintaining a sustainable population size is crucial for the future of the European Union, and this diminishing fertility concerns both politicians and scholars. Different perspectives regarding the role of government in family planning have led to varied responses from each state on how best to encourage population growth. Although fertility rates are falling across Europe, this phenomenon has not been experienced equally throughout—the drop in birth rates is more acute in certain countries than others. This paper will examine three countries to represent the broader EU and discern causal factors in this fertility crisis. Italy and Spain are two southern states experiencing sharp fertility decline, while Sweden is a northern nation with more modest change. Discussions about falling fertility have become increasingly linked to discourse about the union’s future.

The total fertility rate (TFR) explains “the average number of children a woman will have over the course of her lifetime” (Krause & Marchesi, 2007, p. 351). Over the last fifty years, total fertility rates throughout the European Union have fallen significantly and are now below the replacement rate of 2.1 births per woman. The replacement level represents the total fertility rate needed to keep a steady population size barring immigration factors (Eurostat, 2017). Lowest-low fertility is a TFR below 1.3 births. Currently, many nations’ fertility levels hover near this, and in 2014 only France broke the 2.0 mark with 2.01 live births per woman in 2014 (Eurostat, 2017). This change is concerning but manageable if addressed soon. These low and lowest-low levels of fertility are not because women stopped having children entirely, but because they are having fewer total children overall (Fiori, 2009). The difference is largely in the decision whether or not to have a second child. This raises the questions: what determines whether women will have a second child and what can be done to promote sustainable levels of fertility?

Women’s economic stability and gender dynamics have the greatest significance in determining family size. Government programs that support affordable child-care, a more equitable division of domestic labor among partners, and generous maternity/paternity leave policies are crucial aspects in the decision to have a second child (DiPrete, Morgan, Engelhardt, and Pacalova, 2003). In particular, women’s job security and experience of gendered norms within the domestic sphere are key factors in shifting fertility outcomes. Women’s employment and family planning are often put at odds, complicating the decision to have multiple children. If fertility rates are to improve, many countries must understand and address the political institutions and socio-cultural norms that empower or impede women’s combined employment and fertility.

HISTORY

This paper’s focus begins in the 1960s when the current trend in European fertility began. Fertility outcomes in Italy and Spain have been similar in many ways. Sweden has a largely different fertility history and will be used for contrast. In 1960, TFRs in Italy and Spain were fairly typical at 2.37 and 2.86 births, respectively, when they began declining steadily (Pérez & Livi-Bacci, 1992; World Bank, 2017). Sweden, meanwhile, had a TFR of 2.17 births (World Bank, 2017). In 1964, the EU had an annual high of 7.7 million total births, which declined to a low of 5.0 million births in 2002 (Pérez & Livi-Bacci, 1992). While there are fluctuations in national fertility rates over the course of this paper’s timeline,
they are temporary and do not detract from the overall effect of Europe’s declining fertility.

Figure 1.  

In the post-war period, fertility rates peaked around 2.5–3.0 births per woman (Pérez & Livi-Bacci, 1992). But during the 1960s, there was a downward shift in the total fertility rates of many European countries as women entered the workforce and began postponing childbearing. This was attributed to increased access to education, changing notions of family formation, and a cultural shift in gender roles for women (Modena, Rondinelli, & Sabatini, 2014). Couples in Italy and Spain married at a later age, which depressed fertility; postponing pregnancy rose the average age of first births and decreased overall fertility in this period (Pérez & Livi-Bacci, 1992). In the 1980s and 1990s, the decline was attributed to the tenuous economic situation, in which excess children were an unsupportable expense. While Europe’s economy improved in the early 2000s, fertility rates fell again following the global economy crisis.

Although fertility rates are declining, this does not mean it is the desired outcome for families. Previous studies show a discrepancy between ideal and actual family size in Europe (Chesnais, 1996; Sleebos, 2003). Pérez and Livi-Bacci (1992) studied the fertility patterns of women in Italy and Spain and questioned women’s family size preferences. Their answers imply “that Italians have not rejected the concept of replacement-lever fertility” (p. 167); in fact, their fertility ideals were much higher than the actual rates. Therefore, if these women are not achieving their desired family size outcomes, their fertility must be limited by factors outside of their control. While it is difficult to explain this discontinuity between theory and practice, Pérez and Livi-Bacci (1992) suggest implementing state policy to alleviate the costs of childbearing, to make pregnancy and child rearing more affordable for mothers. They attribute women’s increased age when first having children as responsible for changes in period and cohort fertility in Italy and Spain. The researchers agree “women’s labor-force participation is an important variable in the timing of births and in completed family size” (p. 167). This conclusion is reinforced by Chesnais’ (1996) findings that the discrepancy between the ideal and actual family size is to the fault of public policy.
which has failed to limit external barriers that impede women’s actual fertility desires.

ECONOMIC FACTORS

Economic stability is a determinate factor in having a child. When planning a pregnancy, women must consider the economic implications of this choice. A family’s income and housing status, efficacy of local welfare system, and quality of familial support system determine this stability. Raising a child is a substantial cost to mothers, in terms of actual spending, as well as in impact to potential earnings. There is an “implied opportunity cost” that occurs when women exit the labor force “during pregnancy, birth, and childrearing” (DiPrete et al., 2003, p. 3) that impacts a woman or family’s ability to support a subsequent pregnancy. Taking time off of work to have a child incurs a list of costs that originates from “forgone earnings during the time spent with the child; a lower wage growth due to forgone experience; and, finally, a potential increase in unemployment risk” (Adserà, 2014, p. 18). The income loss experienced by new mothers varies with her age and could negatively affect future career and salary opportunities. For years the “substitution effect” meant that as women’s income increased, her likelihood of reducing work hours to bear children decreased, leading to lower levels of fertility (DiPrete et al., 2003). State institutions that support mothers’ employment via flexible hour work programs, maternity and paternity leave, and affordable childcare services, have been shown to offset this effect. For example, in Spain it is particularly difficult to achieve motherhood and paid work simultaneously because the nation lacks supportive infrastructure. Brodmann, Esping-Andersen, and Güell (2007) found that compared to Denmark, a northern European country with strong social programming, the income penalty of Spanish mothers was estimated to be much greater larger than of Danish women. This is in part because of Denmark’s strong welfare system that support women’s employment, as well as more frequently shared domestic responsibilities between partners. Brodmann et al.’s (2007) study supports the argument that government policy can minimize the conflict between motherhood and employment to facilitate increased birth rates.

In the 1970s, when women began entering the workforce in massive numbers (out of personal desire, as well as financial pressure from a shrinking labor force in many European countries), fertility fell significantly (Ahn & Mira, 2002; Pérez & Livi-Bacci, 1992). There was no social or economic structure to support women in dual employment and fertility roles. Without an integration program to bridge this radical change in the work force, Italy and Spain suffered sharp fertility declines in the 1970s and 1980s (Boca, Pasqua, and Pronzato, 2005). This exemplifies the substitution effect: as women’s income increases due to participation in the labor market, their likelihood of reducing work hours to bear children decreases, leading to lower levels of fertility (DiPrete et al., 2003). Without institutional support for new mothers, fertility rates throughout the EU declined. However, since the late 1980s the correlation has become positive; now women who are part of the labor supply are more likely to have greater fertility (Ahn & Mira, 2002; Brodmann et al., 2007, DiPrete et al., 2003). The intensity of this shift varies per region and depends on particular state context. This reversal is based on the extent to which the state has subsidized costly factors involved in having children and given women the financial security to expand their families (DiPrete et al., 2003). This is evident in Scandinavian countries like Sweden that provide substantial assistance and public work programs for mothers. By linking the
gendered experience of fertility with state issued welfare programs, the substitution effect was negated and inverted. Brodmann et al. (2007), attributes this to policy that lowers the cost of growing one’s family. Promoting female independence via work opportunities gives women the ability to choose both, comfortably and with job security. Reliance on the traditional single-breadwinner family model limits a family’s fertility potential. Sweden demonstrates how greater gender equity in employment practices has positive fertility effects, by eliminating the difficult choices women face between career and family. Expanding women’s freedoms to work and grow their families simultaneously gives them more autonomy and will, ultimately, help the state replenish its population.

Quality of life is an important consideration for planning a family. The overall economic security of each couple impacts the decision of when to have children and how many to have. Wealth insecurity is a factor in women’s decision to have children in Italy (Modena et al., 2014). Higher wealth insecurity indirectly correlates with fertility intentions (Modena et al., 2014). Parents consider the financial expense another child will have on their existing family and the future financial implications. Modena et al.’s (2014) study did not find this factor to affect the rate of first births but did see it decrease the occurrence of subsequent births. Greater wealth insecurity negatively affects family decisions to have a second child more so than the first. Part of this comes from the income effect, which illustrates how couples earning less are less likely to plan on a second child (Fiori, 2009). The modern notion of a strong family is small but well provided for (Krause & Marchesi, 2007). In Italy, this can be seen in the way parents—especially the mothers—are attentive to their children’s upbringing. Thus, women are still having children and desiring large families, but are economically pressured into having fewer children to maximize care per child.

Women’s roles in society are evolving and their increased level of education and participation in the labor force, along with the popularity of contraception, has noticeably correlated with the decline in fertility (Mills, Mencarini, Tanturri, & Begall, 2008). Countries like Sweden and other Scandinavian nations have demonstrated a commitment to gender equality through policy over decades, while Mediterranean counties like Italy and Spain lack this crucial infrastructure. Young women across Europe receive more education, which shapes their personal goals and views of these traditional family models. They have greater employment opportunities than ever before, which encourages some to postpone starting families in favor of beginning their own careers (Chesnais, 1996). However, many countries still struggle with offering substantial job opportunities to women. Italy has one of the lowest rates in female employment, and Spain, likewise, has a notably precarious job market (Mills et al., 2008; Brodmann et al., 2007). In these countries it is difficult to achieve motherhood and paid work simultaneously because of inflexible job markets limited part-time work opportunities (Adserà, 2014).

Women’s fertility is linked to their participation in the labor force (Del Boca et al., 2005). From 1994 to 2008, female employment in Italy, Spain, and Sweden rose from, 35.4% to 47.9%, 31.5% to 56.2%, and 70.7% to 71.9%, respectively (Figure 2). In the same period, total fertility rates increased from 1.25 to 1.45 births per woman in Italy, 1.2 to 1.45 births in Spain, and 1.88 to 1.91 births in Sweden (Eurostat, 2017). This was a period of significant growth for women’s employment in Italy and Spain, which mirrored a small uptick in fertility levels. However, while women entered the labor force in new numbers, they held tenuous positions “characterized by low levels of maternal and sick leave protec-
tion, clearly penalizing women and discouraging them from having children” (Modena et al., 2014, p. 251). Women faced challenges to balancing both employment and childcare. Modena et al. (2014) found women without secure employment have lower fertility expectancy. These factors combine to explain why Italy and Spain maintained TFRs below average during this period. The greater job insecurity the lower the estimated fertility. In this case, economic insecurity forces women to choose between pursuing their careers and having children.

![Female Employment](http://scholarship.claremont.edu/urceu/vol2017/iss1/5)

Figure 2.
Source: OECD (2017)

The job market is highly competitive in countries like Italy and Spain that have high rates of unemployment. Spanish women face “high incidence of precarious jobs, unemployment and the lack of access to flexible part-time options” (Brodmann et al., 2007, p. 9). For this reason, women struggle with the decision to postpone their careers “during childbearing years, finding it difficult to re-enter the labor market” (Del Boca et al., 2005, p. 54). Ahn and Mira (2002) suggest that the high rates of unemployment in Italy and Spain during the 1980s, in countries that already had low levels of female participation in the labor force, created a faster decline in fertility. Spain is a unique case due to its combined low rates in fertility and female labor participation. Although women in the workforce are more common today than fifty years ago, the job market is notably inflexible and competitive—two factors not conducive to increasing fertility rates. In Sweden, women work in the public sector, in part-time jobs that allow flexibility (Chesnais, 1996). Part-time labor is a crucial aspect of the country’s higher fertility rates. Since part-time work is difficult to find in other countries, this forces many women to choose between their careers and their families. This conflict ultimately delays childbirth, which, by shortening the window of fertility, also has the effect of lowering the expected fertility rate (Modena et al., 2014). Without a more stable and flexible job market women will continue to grapple with this difficult choice.

In Italy, uncertain finances encourage residents to postpone or entirely forgo having children, which decreases the country’s fertility rate. Vignoli, Rinesi, and Mussino (2012) found that in Italy the home is a crucial marker for economic stability. They found a positive correlation between “the fertility intentions of couples and the degree to which
they feel secure about their housing situation” (p. 68). Moreover, quality housing is dependant on “the geographical area of residence, the housing tenure, the degree of economic security and the number of rooms” (p. 68). Vignoli et al. (2012) found women who were confident in their housing status to be significantly more likely to plan on having a child within the next three years than those who were not. Italy’s housing situation is unique because of the late average age of first purchase of a home that comes from children sharing residence with their parents into their thirties. Young adults in Spain share this delayed economic dependence on the parents, due to the tight housing market that has drastically increased the cost of buying a home (Pérez & Livi-Bacci, 1992). Mediterranean countries frequently see families come together to fill infrastructure gaps left by the government—for example, relying on family networks to raise children. Because of these close ties and the extended reliance on one’s parents, there is a slower transition to becoming independent adults. This familial support system can be a beneficial network for raising children, but living with one’s relatives can delay starting a family and decrease the overall fertility rate.

**Gender Factors**

Gender dynamics are also a factor in fertility. A woman’s decisions to have another child is facilitated or complicated by the level of support she has. Brodmann et al., (2007) studied Denmark, a Nordic country with many similarities to Sweden, and found the “potential income penalty of motherhood” (p. 10) to be a significant deterrent from having a second child. Women in intense work environments may not prefer or be able to work part-time while raising a child; they may prefer to focus entirely on their career instead. In this case, they must rely on someone else for childcare and support. Brodmann et al.’s (2007) study found that this responsibility is eased when Danish men take a greater role as care givers. Women take off time from work before, during, and after the birth to have a child. This is a substantial period when they are not making an income (depending on the nation’s maternity leave policy), one that may endanger their employment. This struggle can be simplified by public policy, but also by increasing the “fathers’ engagement in active parenting and a more equal division of household work between partners” (Oláh, 2003, p. 173). By sharing the responsibility for raising children between both parents, women are encouraged to participate in the labor force and are more open to having multiple children.

This influence of gender expectations and traditional gender roles is a key issue in childbirth. The “societal gender structure” (Oláh, 2003, p. 185) influences public policies and family-level gender relations. Sweden and other Scandinavian nations provide generous social programs, which incentivize women to pursue both employment and motherhood (Adserà, 2002; Oláh, 2003). Sweden’s TFR has decreased from 2.17 births in 1970 to 1.89 in 2014 (Eurostat, 2017). Although that is a .28 decrease in TFR, this is a still a relatively positive example on which to model fertility practices. Their effective policy and social values, in the form of greater labor-force participation and shared family domestic duties, are something to be watched and emulated. Sweden is an important case study because it embodies a state with societal and familial gender equality. This originates from a long-standing national effort to create policy that supports men and women’s shared division of labor, which led to the breakdown of traditional gender roles that keep women at home and reliant on men to be the sole breadwinners. Sweden’s past struggle to meet sustainable population levels, dating back to the early 1920s, shows their commitment to growth and
solving these population problems (Chesnais, 1996). The government implemented a multistep program, based on increasing access to “contraception and family planning services,” (Chesnais, 1996, p. 732) as well as giving family allowances to reduce the financial burden on children and families. In the 1960s, due to labor shortages women entered the workforce in greater numbers, finding part-time jobs that allowed for simultaneous fertility and employment. When facilitated by supportive public programs, women can be both mothers and workers. When men are not expected to be the sole breadwinner, the family unit may flourish as traditional gender roles and expectations are undone. The aforementioned substitution effect is rendered null when checked by supportive policy that challenges gendered expectations of the family.

Productive policy promotes flexibility within job markets, but also “access to crèches and daycare facilities for preschool children” (Chesnais, 1996, p. 733) that are widely available in nations like Sweden. Oláh (2003) studied Sweden’s implementation of parental leave and childcare programs to see the effects on fertility rates. Sweden has a combination of three key factors that support women’s ability to be working mothers: high female labor-force participation (including part-time work), social welfare services like public childcare, and strong parental leave programs (Oláh, 2003). Extended parental leave, when combined with public childcare, encourages women to have a second child. These programs enable women to take sufficient time off to have a child and then allow them to return to work once ready. These programs without childcare, however, do not impact second birth rates. Thus, time flexibility for work hours is a crucial factor for fertility. The opportunities for part-time employment and affordable childcare (be it public or paternal) are crucial for women considering maternity.

The lack of welfare and infrastructure for new parents, particularly mothers, is a problem in countries like Italy and Spain. Modern low fertility rates are due, in part, to market conditions that are unfriendly to mothers and encourage them to delay pregnancy (Kohler, Billari, & Ortega, 2002). There is minimal social welfare to encourage families in Italy. In September 2016, a campaign to promote “Fertility Day” in Italy caused controversy and outrage. This was an Italian government effort to spur fertility throughout the county via social media, the Internet, and fertility events in certain cities (Coppolaro-Nowell, 2016). It was widely criticized for urging women to have children despite a lack of government programs to support new mothers (Piangiani, 2016). Some considered it offensive; others went as far as to compare it to Fascist slogans from the 1930s that similarly pressured women to reproduce (Coppolaro-Nowell, 2016). The campaign put the onus women to fix the problem when the government should be creating programs to support their choices instead.

In Italy, the primary source of childcare is the family; daycare is expensive and most employers are not accommodating to the schedules of new mothers (Piangiani, 2016). Government support is inadequate, so the family, particularly the grandparents, is responsible for childcare (Fiori, 2009; Del Boca et al., 2005). The misconception of these nations as having high fertility rates may come from the “central role children play in family and society” (Pérez & Livi-Bacci, 1992, p. 162) in Italy and Spain. Both Piangiani (2016) and Coppolaro-Nowell (2016) call for the state to take responsibility and empower families to have children by addressing the rampant unemployment for young couples. Lack of government support remains problematic, even after previous Prime Minister Matteo Renzi
admitted “to increase the birthrate, structural issues like day care and services need to be addressed” (Piangiani, 2016). This problem is common throughout Mediterranean countries that rely on family networks to raise children.

This issue is similarly experienced in Spain where the care of grandparents allows mothers to return to work (Brodmann et al., 2007). Spanish mothers require free family help, because regular day care is limited, private, and expensive when not subsidized, unlike Nordic countries. Until this problem is addressed fertility rates will likely continue to fall.

The insufficient labor and welfare systems in Italy and Spain produce a conflict for working women pursuing motherhood. While these programs are designed to support fertility growth, they have limited success helping employed women become mothers (or mothers become employed). The predominant family model of the male-breadwinner, the small and inflexible childcare system, and the assorted social programs that largely benefit single-income earning couples are just some of the obstacles these women face. Women are responsible for assuming most of the domestic and household work, while men work full time and earn the majority of the family income. Therefore, women must make careful planning decisions for their families when deciding to become pregnant. These problems will persist until they are addressed by policy that facilitates postpartum re-entry into the labor force and steps are taken to change socially held notions of domestic responsibility.

Solutions

States must commit to improving fertility conditions if they want to keep a sustainable population, which means supporting family planning policies that empower women before and after children are born. Programs that enable mothers to remain part of the labor force are critical means of increasing fertility. This requires available and affordable childcare options, plentiful parental leave, and part-time work opportunities. To increase fertility levels Modena et al. (2014) suggest creating policy to “account for—and seek to reduce—insecurity about women’s future empowerment and the household income and wealth” (p. 251). Securing steady employment may reduce women’s anxiety over family income and give couples more freedom and confidence to increase fertility. There is potential in mirroring policy of northern European countries that have higher total fertility rates, by promoting increased employment opportunities for women (Del Boca et al., 2005). For example, part-time labor allows women flexibility and choice. Low fertility countries should invest in robust childcare programs to complement women’s labor participation. Affordable childcare is available in Sweden, Denmark, France, and other EU countries with high fertility rates. These programs reassure women that having a child will not hurt their careers because they can return to work soon after the child is born. This requires quality childcare resources that are affordable and accessible. The choice of motherhood should be left to individual families but supported and encouraged by the state structures.

Changing the gender expectations of couples will also impact fertility rates. By breaking down traditional gender roles, like those of the male-breadwinner model and female caregiver, struggling European countries may respond positively to a more equitable balance of labor both at home and in the workforce (Fiori, 2009). There is a recorded “positive relationship between fathers’ greater participation in childcare and/or domestic activities” (p. 582) and fertility outcomes. This observed phenomenon gives women greater freedom to plan for more children and larger families. Expected fertility outcomes for a sec-
ond child increase with a “higher paternal commitment to childbirth, childcare, and household chores” as well as with “help from the informal family network” (p. 591). Liberating women from the sole responsibility of domestic labor opens fertility opportunities. Fathers who are interested in taking time off after their child is born should have the resources to do so. Maternity leave must be expanded to cover both parents. Paternity leave is weak to nonexistent in most countries and would alleviate some of the childbearing responsibility on women. The impact of increased paternal involvement in childrearing deserves further study to reveal the scope of potential fertility impacts.

The dangers of this historic low fertility will come into effect before policy can be developed to improve fertility rates to sustainable levels. Therefore, Europe must figure out a way to support the growing aging population. Immigration is a relevant potential solution. The Syrian migrant crisis is an opportunity for European countries to welcome fleeing individuals and families into their borders. Countries like Italy and Spain should consider the benefits of “a manageable inflow of immigrants” (Chesnais, 1996, p. 729) to stabilize the population. The rapidly aging population is growing without the support of an equally robust working class to support them. Concern is great for current young workers who will be forced to support an unreasonably large amount of retirees as they age out of the labor force. While previously suggested policy reforms may increase fertility, this is not an immediate solution—a new generation of workers will not spring up in the span of a few years. Governments must find an immediate solution to this problem and welcoming immigrants could be the answer they need.

**CONCLUSION**

Evidence suggests that fertility is affected by market conditions that force women to choose between a job and a child. Job security and family planning are often put at odds, complicating the decision to have multiple children. This conflict manifests in decreased fertility intentions regarding second children. These conditions are observed in Italy and Spain. Sweden demonstrates the opposite patterns, due to the success of their public programs that support job opportunities for women and shared gender responsibilities. Factors like family income, housing status, childcare availability, government financial assistance programs, and quality of familial support impact family planning. If fertility rates are to improve, many countries must understand and address the socio-cultural norms and political institutions that empower or impede women’s combined employment and fertility.

Because of these factors, Italy and Spain are struggling to meet sustainable population levels. Fertility is at a low that coincides with that of other Mediterranean countries but contrasts with many states in northern Europe. Sweden is a Scandinavian nation with greater social and political gender equality. It is due to substantial social policy for mothers—policy focused on affordable childcare and flexible employment—that Sweden has largely elided the fertility crisis in ways Italy and Spain have been unable to avoid. These unprecedented levels of low fertility have serious long-term consequences. Decades of this phenomenon have lead to an unfavorable “ratio of numbers of people of pension age to people of working age” (Maclellan, Muellbauer, & Stephens, 2000, p. 32). Countries with a significant aging population and low birth rates will find that a decline in the active working population leads to undue stress on the remaining younger generations. The current
levels of fertility cannot maintain the population and will have “far-reaching demographic, economic, and social consequences” (Kohler et al., 2002, p. 642) if not addressed soon. Thus, it is important to study the contributing factors to this phenomenon and uncover methods to supplement the population differential.

Further research may compare experienced fertility using other European (or non-European) countries as case studies. These may include other Mediterranean countries suffering from similar declining rates and northern European countries with promising fertility rates. Or it may review anomalous southern and northern European countries that contradict the trends established by Italy, Spain, and Sweden. Countries not suffering from low or lowest low fertility should be evaluated to discover what factors lead to more sustainable populations. This research may consider the impact of immigration to boost Europe’s population and workforce. Alternatively, it may look at how changing women’s participation in the labor force could impact this trend. The subject of paternal roles in childcare and domestic work is an underdeveloped area of study that may help elucidate causes and solutions to the fertility decline. All of these factors, and more, may be considered in subsequent review of this topic.

References


