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Fertility Reduction among Iranian WomenA Qualitative Study

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This study is about developing conceptual layers of perceptions and lived experiences of social actants (women in childbearing age) regarding parturition. Although Iran is a developing country, the fertility process of women in this country is similar to that of developed countries, as women's social participation has increased. The research study adopts a qualitative approach, using grounded theory methods. Semi-structured interviews on fertility perspectives were conducted with 42 women. Women's fertility in this region demonstrate interclass features.

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INTRODUCTION

Fertility comprises two biological and social aspects, both of which are necessary for becoming a parent (Weeks, 2008). Although fertility is one of the most intimate decisions that couples make in their nuptial lives, it also constitutes a social action, which clearly ensures the incorporation of thought processes with a meaningful action, caused by the occurrence of the stimulus and the final response to it, and the action is performed when an individual interprets it based on his/her subjective meaning (Weber, 1978). In this study, women's subjective meaning of fertility and childbearing is related with women's social lives as a manifestation of various social relationships and interactions.

The population of Iran exploded in the 1976–86 decade with a growth rate of 3.9 percent (including immigrants and refugees). In 1986, Iran's population policy was based on birth control measures; the population growth rate in 2016 reached 1.29 percent. At present, Iran's fertility has reached below the replacement level, and the current population growth in Iran is due to the positive momentum of population growth. Since 2011, Iran's population policy has been based on increasing births.

Changes of fertility rates in various socioeconomic classes of Iran are not in conformity with the demographic transition theory (Hosseini 2012). In developing countries, low fertility is explained by demographic theories and specifically the second demographic transition theory, since it has happened in tandem with the development of those countries. However, these theories cannot be used to explain the reduction of fertility in Iran, as Iran experienced the second demographic transition very quickly. Consequently, a conceptual gap regarding fertility in Iran exists. Female fertility is changing in conformity with the pattern of developed countries and, therefore, the reasons for reduced fertility rates among women as the main actants of this demographic phenomenon should be studied. In other words, while the Iranian society is in a transition phase, convergence of reduced fertility rates among actants is in line with modern societies.

This research uses a qualitative approach to investigate whether the fertility phenomenon in Iran bears a superficial resemblance to the experience of developed countries or whether this similarity can also be reported in lower layers too. Additionally, utilising the grounded theory methodology, we aim to expand the conceptual model of women's fertility. Mashhad was chosen for this study, as it is a religious and the second most populous city (having a population of 3,001,184) of Iran (Statistical Center of Iran, 2016).

In other words, the trend of changes in Iran's fertility is similar to that of developed countries, as Iran is considered a developing country. Qualitative research is necessary because there is a conceptual gap.

Literature Review

Fertility, one of the three factors affecting demographic change, is regarded as a meaningful action in this study. The researchers believe the actants' interpretations and mentality regarding this phenomenon determines their actions. Thus, in order to become familiar with the fertility actions and their determining factors, it is necessary to become conversant with the existing life-world and discourse regarding this phenomenon to unravel the thoughts and perceptions behind childbearing actions and to understand a couple's interpretation of fertility.

In the traditional lifeworld, fertility is instinct in combination with supernatural tools and contents. At times, satisfying the instinct and protecting the supernatural contents were not quite distinguished and separated. However, in the traditional society, actants were concerned with both worldly and heavenly benefits and, therefore, the happiness of bearing children and gaining entrance to paradise as a reward. In such conditions, a couple's fertility can be explained by intermediate variables proposed by Davis and Blake (1956) and Bongaarts and Potter (1983), who believed that the variables pertaining to intercourse, conception, gestation, and parturition are influential in fertility. In traditional societal structures, children are viewed as sources of economic benefits for parents. According to the intergenerational wealth flow theory (Caldwell, 1982), wealth flows from children to parents in traditional societies. Lie Stein's child utility theory analyses childbearing from an economic perspective wherein children are a source of benediction and blessing for parents, as they are a productive unit, a source of personal pleasure, and also a source of security in old age (Andorka, 1978).

During the transition from tradition to modernity, childbearing has been transformed into a social action, which not only concerns men and women, but, in some instances, relates to the social interaction with the network of relatives, friends, and other members of their generation. In their interaction with various social groups that couples communicate with, couples need to justify their intention to bear a child. According to Caldwell's theory (1982), wealth flows from parents to children. Easterlin (1975) believes that parents try to strike a balance between the physical ability to bear children and deciding on the ideal number of children. Socioeconomic factors have a direct influence on the variables relating to intercourse and nuptial fertility. Their influence on the general control of nuptial fertility is indirect. Decision making about fertility is formulated based on three concepts: potential output of children, demand for children, and costs. Gary Becker (1960) emphasises the importance of women's time value as a factor affecting the number of children desired by women and their partners. Baker developed a conceptual framework for understanding the relationship between fertility and economy by focusing on the role played by women in the workforce. In this model, mothers' opportunity cost is accentuated, and it predicts that an increase in female wages has a negative effect on the demand for children (Grogan, 2006).

Spolaore and Wacziarg (2019) introduced a model that includes the main determinants of fertility choices as: intrinsic costs and benefits from having children; social norms about fertility control; and the process of social influence through which norms change and defuse across deferent societies. This model generates testable implications regarding the pattern of diffusion of new fertility behaviour.

McDonald (2000) believed that discrepancy and incongruity between high levels of gender equality in individual-based social entities and continuation of gender inequality in family-based social entities makes women unable to maintain a work-life balance. Fertility in developed industrial countries is reduced to below replacement levels, as women have fewer children. Kolk (2019) tried to find out if gender equality of a society was related to fertility. He examined the relationship between fertility (Total Fertility Rate) and gender equality in 35 countries in the 20th century. The findings were the same as others; the greater the gender equality the higher the fertility.

While transitioning from traditions to modernity, fertility becomes a social action, that is, the centre of attention turns from the childbearing action toward rational action. Social concepts affecting the occurrence of this phenomenon need to be explored. In the modern era, fertility has assumed an aura of rationality as actants initiate childbearing actions knowingly. Fertility can therefore be explained by the second demographic transition theory as a result of: expansion of education; increased economic uncertainty specifically among youth; gender revolution, which has mainly resulted in the almost complete incorporation of women into the labour market; and sexual revolution which has brought about changes in the sphere of couple relationships (Cabella and Nathan, 2018). The category of childbearing and quality of life in the qualitative study of Chen, Jones and Jackson (2018) showed that economic development, specifically with regard to materialistic values, has a negative influence on the childbearing values. Thalberg's (2013) study conducted on a sample of university students showed that mental well-being and awareness of one's goals in life are among the major prerequisites for childbearing. In a qualitative study, Pond (2012) found that social changes have introduced considerable changes in gender relationships and norms as manifested in the wedding styles, dowry, and domestic violence. Mahmudian and Rezaei (2012) found "self-protection" as a justification for low childbearing among women. According to Kaboudi and others (2013) the "perceived need for childbearing" is not indicative of an individual's internal inclination towards having children, but underscores a perception that having another child can satiate some of the individual's perceived need. Razavizadeh, Ghafarian and Akhlaqi (2015) identified two underlying sets of factors for low childbearing: individual factors (concerns of parents, individual opinions of couples, and perceived advantages and disadvantages of childbearing); and social factors (having few children is normalised).

RESEARCH METHODOLOGY

The aim of this exploratory study is to present a typology of women's fertility in accordance with the perceptions and lived experiences of actants. This study adopted a qualitative approach to fill the conceptual gap regarding women's fertility (Figure 1). A total of forty-two participants were selected through purposive sampling from Mashhad, Iran (Corbin and Strauss, 2015). Semi-structured interview guides were used to collect data over a period of 15 days.

Data Analysis

In this study, the data are analyzed using open, axial and selective coding techniques (Corbin and Strauss, 2015). Maxqda software package was used to analyse the data. It permits the researcher to perform the three coding stages and tag notes to each code. It also provides an environment which facilitates the integration of codes and notes and can accelerate and regulate the movement among the text, codes, notes, and graphs.

The core category of the research is "fertility as an interclass action" that shows a reflective turn in women's fertility activity in Mashhad, which has not been mentioned before. Proponents of population growth policies often promote these policies in religious cities to get better results in a shorter time, but the results of this study show that despite the religious beliefs of women in Mashhad, they were reluctant to reproduce. This reluctance, unlike in previous years, is not limited to middle-class and upper-class women, but has led to similar results among women in the lower classes. Moreover, women whose ideal number of children is more than just one child, are often religious and would consider their childbearing conditional on having special privileges from government. They want such privileges as babysitting, food, clothing, housing, healthcare, free education, and employment for their children. These women see childbearing as a ransom from government and refuse to have children without the special privileges. Women of all social classes who had more than one child were regretful and unsatisfied about having children.

Rigour

Reliability is considered to be an important feature of scientific studies. Kirk and Miller define reliability as "the degree to which the finding is independent of accidental circumstances of the research" (Silverman, 2004). In order to improve the reliability of the research, three techniques were used: auditing, analytical comparison, and member check (Creswell, 1994).

Members of the thesis committee supervised the progress of the study. The creation of concepts and the extracted categories were finalised in accordance with their opinions. Following data analysis and formulation of the theory, the core category was compared with the raw data to prevent the inclusion of irrelevant discussions and add information that may have been inadvertantly left out. Transcriptions of each interview was shown to the respective participant for authentication. The extracted theory and its concepts were shown to a few participants of the study. Their confirmation of the theory is considered a prerequisite for finalising the obtained theory (Figure 1).

FINDINGS

Since women have always been the final target of demographic policies, 42 women in the fertility age were asked to take part in the interviews about their experiences. The demographic, social, and other features of the participants are shown in Table 1. From the raw data gathered in the interviews, 120 concepts were extracted at the open coding stage.

Table 1: Demographic Characteristics of the Interviewed Participants (n = 42)

Demographics	Number	Percent	
Age (year)			
15–19	4	9.5	
20–24	4	9.5	
25–29	8	19.0	
30–34	7	16.7	
35–39	8	19.0	
40–44	8	19.0	
45–49	3	7.1	
Total	42	100	
Age of marriage (years)			
15–19	13	33.3	
20–24	17	40.5	
25–29	7	16.7	

Figure 1: The Final Paradigmatic Model of the Research – A Framework for Women's Fertility Action

Causal conditions • Women's attitude toward themselves Thought of achieving social success High costs of raising children Liberation of motherly responsibilities • Dominance of "looking-glass" self • Pressure by significant others • Employment discrimination Epistemological challenges A sense of social isolation Phenomenon Fertility as an interclass action Intervening conditions **Foundation** - Increased age of marriage - Cultural foundation for low fertility - Family's access to the media - Patterns of gender discrimination in - Imbalanced separation of male and society female roles - Patriarchal culture - Women's job market conditions - Change in communication methods - Friendship group - Ease of access to social networks - Prevailing marriage patterns in the society - Demographic policies - Women's beliefs and religious origins - Economic fluctuations Strategies • Women's pursuit of personal pleasure • Devoting a long time to decisions regarding childbearing · Normalization of Low fertility • Choosing modern sources of information Concerns about children



Outcomes

- Aging population
- · Promoting the legitimacy of personal pleasure
- Couples turning into roommates
- Dominance of gender-based discourse
- Intensified individualization
- Perfectionist fertility

Demographics	Number	Percent
30–34	1	2.4
35–39	2	4.8
40–44	1	2.4
Age difference with the spouse (years)	•	•
0–4	13	31.0
5–9	20	47.6
10–14	8	19.0
>15	1	2.4
Mother's age at the birth of the first child (years)	•	•
No children	14	33.3
15–19	9	21.4
20–24	7	16.7
25–29	10	23.8
30–34	2	4.8
Number of actual children	•	
No child	14	33.3
1	7	16.7
2	11	26.2
3	10	23.8
Number of ideal children	•	•
No child	4	9.5
1	11	26.2
2	18	42.9
3	5	11.9
4	4	9.5
Employment status		•
Employed	22	52.4
Unemployed	20	47.6
Level of education		-
Primary School	5	11.9
Secondary School	3	7.1
High School Diploma	9	21.4
Bachelor's Degree	12	28.6
Master's Degree	6	14.3
Ph.D.	7	16.7
Social Class		
Upper	14	33.3
Lower	14	33.3
Middle	14	33.3
Contraceptive methods		

Demographics	Number	Percent
Natural	28	66.7
Contraceptive pills	6	14.3
Natural - contraceptive pills	4	9.5
IUD	2	4.8
Other methods	2	4.8
Preferred gender of the child		
Girl	20	47.6
Boy	22	52.4
Decision for having a child		
Remains with the wife	5	11.9
Remains with the husband	17	40.5
Is based on mutual consent	20	47.6

During the axial coding and following a deeper familiarity and creation of links among concepts, five categories were created. In the third stage of coding, that is selective coding, a final core category was extracted from all the categories (Table 2 shows the main and secondary categories extracted from the study).

Table 2: Main and Secondary Categories Extracted from the Study

Core Category	Main Categories	Secondary Categories	
Fertility as an interclass action	Category 1: Individualism	Secondary Category 1: Female's attitude toward self	
		Secondary Category 2: Liberation from motherly responsibilities	
	Category 2: Dominance of "looking-glass self"	Secondary Category 1: Pressure by significant others	
	Category 3: Mental well-being	Secondary Category 1: Gender concerns	
		Secondary Category 2: Dominance of gender-based discourse	
	Category 4: Perfectionist fertility	Secondary Category 1: Epistemologica and ontological challenges	
	Category 5: Fear of future	Secondary Category 1: A sense of social isolation	

Category 1: Individualism

Individualism coined in the nineteenth century (Cheal, 2008) is considered to be an outcome of modernity. Some equate it with preferring self to

others while others consider it to be a positive characteristic, which is based on triumph and trust in one's abilities. Like other outcomes of modernity, individualism affects families and ushers in changes in the roles and relationships among family members, family functioning, family solidarity, the degree and manner of the interaction between parents and children, parenting style, and so on (Segalen, 1986).

The findings of the study underscore the influence of individualism on fertility, which causes parents to prioritise their own social promotion and welfare over childbearing. Individualism is synonymous with the collapse of preexisting social forms and increased fragility of categories such as class and social status, along with gender, family, and neighbour roles, and so on (Beck and Beck-Gernsheim, 2002).

Secondary Category 1: Female's Attitude towards Herself

Women's attitudes towards themselves is among the debatable topics about the prevailing gender attitudes in the society. In recent years, their attitudes towards themselves is based on their ability to achieve social success, seeking welfare, social limitations of children for mothers, risk of pregnancy, and fear of parturition along with high costs of raising children. Women consider their own needs and expedience. The interviews revealed the attitude of women participants towards self.

Overall, my daughter is enough for me. Wherever I worked, I used to do my job perfectly; I planned to continue my studies because I am employed and promotion and advancing my career is much more important to me than having children (Participant 4).

Secondary Category 2: Liberation from Motherly Responsibilities

Increased gender discrimination in society, reduced tendency to preserve an identity as mothers, sidelining various feminine roles and identities, maintain a traditional family structure regardless of increased awareness and higher levels of education among women and their participation in social and economic activities all make women escape their central role as mothers (Rafatjah, 2018).

Currently I have a calm and satisfactory life. Proper facilities, travels, journeys, you name it. I don't like to lose this state of calm for a child because raising a child is expensive and in addition, I'm terrified of giving birth and don't like to sacrifice my current calm life for a child (Participant 17).

Category 2: Dominance of "looking-glass" Self

This concept is created through our reciprocal actions with others. Feedback that we receive from others about ourselves make us realise and accept who we are and adjust our behaviour according to what others expect (Cooley and Schubert, 2001).

Secondary Category 1: Pressure by Significant Others

Social networks are comprised of interconnected individuals or groups who create access to information and other resources through shared relationships. Reactions of the social network regarding childbearing affect an individual's decisions regarding fertility (Rossier and Bernardi, 2009). Individuals are inclined to follow their reference groups, specifically when making personal decisions. People constantly communicating with each other in social networks become significant. Since sibling relationships continue throughout life, siblings are among the initial, powerful, and usually stable elements of an individual's social network. Siblings can act as role models and thus the individual's fertility behaviour and ideals can be formed under the influence of the social networks in which they engage (Haurin and Mott, 1990). Moreover, their behaviour, attitude, values or preexisting family influence can affect an individual's fertility behaviour (Axinn, Clarkberg and Thornton, 1994).

In addition, as the role of friends in the formation of social behaviour nowadays is on par with or even more important than the sibling effect, interactions with friends also play a major role in decisions regarding fertility that are manifested as social influence, social pressure and social contagion (Bernardi, Keim and von der Lippe, 2007). In this study, participants expressed that in their kinship and social networks, childbearing is denounced and therefore the change in their beliefs.

Because of her job, my mother has two children, me and my sister. I have two sons and my sister has two children, too (a son and a daughter). I liked to have a daughter, but whenever I talked about it my mother and sister used to criticize me (Participant 23).

Nowadays it is easy to access information through Internet and major changes are introduced in the communication world. Most people use these networks for their daily and even personal tasks. One example is advertisements about bearing few children or no child at all; under current circumstances people easily receive such messages from these networks and act accordingly (Participant 38).

Category 3: Mental Well-being Secondary Category 1: Gender Concerns

Gender inequality has lowered mental well-being in women and, hence, lowered fertility rates among them (Cabella and Nathan, 2018). Unbalanced separation of roles along with the prevailing gender attitudes, which favour men and put women at a disadvantage, have deprived women of mental well-being; and the birth of a newborn is a threat to a mother who risks losing her job and becoming unemployed. Some women with unstable employment status believe that during maternity leave or when problems are created for the child following his/her birth, employers find a replacement for them. They also believe that employers overall have a very negative attitude towards married women with children, or those who intend to have children. Even women with permanent jobs say that their employers tend to offer major organisational positions to men and not women, let alone married women, even if they have full faith in the competence and performance of their female employees.

I am a bank employee but ever since my boss realized that I am pregnant, he was constantly putting me under pressure by telling me that he would replace me and since he couldn't find a temporary replacement for me, I needed to find another job after my maternity leave. Because they wanted to replace me with a man. The fear of being fired made me return to my job 15 days after giving birth to my child and didn't go on the maternity leave which I deserved (Participant 14).

Secondary Category 2: Dominance of Gender-based Discourse

Misogyny is a social phenomenon in which women are discriminated against, are subject to hatred or are deemed untrustworthy. It is "the implicit or explicit male denigration and/or hatred of women, and latterly of feminism" (Code, 2000), which runs in the Western thought from Aristotle to Marx

I have a 4-year-old daughter. My husband didn't help with her upbringing and I used to become very tired. Even today, I bear complete responsibility for protecting her, which is why I would never agree to have another child (Participant 25).

Category 4: Perfectionist Fertility Secondary Category 1: Ontological and Epistemological Challenges

In perfectionist fertility, an imbalance is created among lower and upper classes, such that as we move from the lower class to the upper class, we can find women whose ontological and epistemological challenges have reduced their fertility action.

I still don't know why I was born. I don't know why I was born or what I am supposed to do here. I don't know whether I am going to heaven or hell in the afterlife. So what? If I'm going to hell, so be it. I don't know why I came to this world, or why I'm going to leave it. Why should I give birth to a creature that is going to ask the same questions from me? How am I supposed to answer my child when I myself am confused in this world? (Participant 17).

Category 5: Fear of Future

Female participants pointed out issues such as inequality and lack of a proper social platform for childbearing, despair for the future, lack of proper conditions for raising children, decline of ethics and uncertainty about the continuation of married life. Other similar issues are related to uncertainty regarding the quality of children's lives in the future and fear of an unfortunate fate or suboptimal life quality for children.

Secondary Category 1: A Sense of Social Isolation

The growth of a sense of social isolation in a nation or in a social condition can be attributed to the decline of ethical norms, and the erosion of public trust together with fleeting and short-term actions. As a result, members of a society lose their ability to foresee the future. Therefore, individuals feel they have lost control over their lives and have adopted fate-based attitudes on the basis of luck. This situation fuels the sense of desperation and decreases social participation and effectiveness (Goudarzi, 2016).

With the current situation of our society, I don't want to have any children. In terms of economic and social pressures that people are facing at the moment, I don't think we can provide a comfortable life for our child; besides, in this dogeat-dog society you cannot trust anyone. Do you think I was able to fulfill my dreams in this society? How can I expect my child to do better than men? The situation is far worse than it seems. Nowadays you cannot even trust teachers to teach useful things to children. The future is gloomy for children. More importantly, I am not sure about my husband's fidelity, how can I be the mother of his child? Divorce rates are so high that even after three years of marriage, I can't decide about having a child (Participant 41).

DISCUSSION

This qualitative study used grounded theory methods to collect data through in-depth interviews with women between 15 to 49 years of

age. Following data analysis, an interclass formulation of fertility emerged. This tendency has been explained under five main themes: (i) Individualism; (ii) Dominance of "looking-glass self"; (iii) Mental wellbeing; (iv) Perfectionist fertility; and (v) Fear of future. In other words, the core category is "fertility as an interclass action", as in all social classes, female fertility has a declining trend, and married couples do not use fertility as a strategy for the betterment of life (Modiri and Ghazi Tabatabaei, 2018).

All women shared a common point in that they wanted few children or no children at all. Therefore, in the studied territory in Mashhad, Iran, the economy plays an important role in the fertility of women and underscores that cultural promotion, political power to enforce demographic policies, mass media advertisements, people's religious beliefs, and so on, are no longer effective in increasing the population. Faced with economic challenges and with the aim of appropriating more economic resources to themselves, women across all social classes voiced reservations about childbearing action, which was directed towards lower fertility.

In the upper social class, this convergence of fertility behaviour is justified with favourable conditions to immigrate to other countries. In the middle class, it is justified with improving the quality of life for children. In the lower class, it is justified with the lack of minimum economic resources. In the lower class, patriarchy was a considerable factor affecting the decisions regarding childbearing, and men in this class who did not have a permanent job or had a low level of income discouraged their spouses from having children. Seventy-three percent of women used natural methods to prevent unintended pregnancy, 17 percent used contraceptive pills, and 10 percent used condoms.

In the middle and upper social classes, both women and their spouses prefer to have a daughter, but in the lower class, sons are preferred. It seems that along with the decrease in women's fertility, the preferred gender for the child changes from boy to girl.

Without a doubt, in today's world, major changes in communication methods and ease of access to information have provided women across all social classes with a certain level of information and awareness. As a result, they have modified their fertility action towards lower fertility, as bearing children limits or denies them access to the resources they require. Hence, women adjust their fertility in accordance with their awareness and received information (Enavat and Parnian, 2013).

In this study, the fear of future is so high in people that they do not consider society suitable for progeny. First, because of rising divorce rates, they believe they should first become sure about their partner and then decide to bring forth a child. Then, some people who recognise that the economic and social situation is deteriorating, believe that children's welfare facilities will not be available in the future. Injustice and lowfertility social norms, despair of the future, lack of resources, decline of morality, not meeting the requirements for children's upbringing, and lack of certainty regarding continuity of marriage are contributing factors for couples not wanting to have children.

Perfectionist fertility is an important finding revealed in this study. Upper social class women are grappling with epistemological challenges and believe that their creation is devoid of any purpose or is vague. As they do not want their children to face the same challenge, they prefer not to have any children. Some participants ascribed their lack of desire to have children to individualisation. This group of fertile women wanted no children at all (if they felt that their marriage would remain safe), otherwise they prefered to have few children.

Mental well-being plays an important role in the fertility of women and underscores the fact that cultural promotion, political power to enforce demographic policies, mass media advertisements, drawing on people's religious beliefs, and so on, are no longer effective in expanding the population, because women's fertility action in all social classes is influenced by economic challenges women encounter.

In the first demographic transition in developed countries, low women fertility was instigated by decreased influence of traditional forces (Hashemi, Rajabi and Ahmadi, 2017; Hamidifar, Kanaani and Ebadollahi, 2016) along with, increased urbanisuation (Gries and Grundmann, 2018), higher level of education among women (Van Bavel, Schwartz and Esteve, 2018), their participation in labour force (Kirmeyer and Hamilton, 2011), rationalisation (Khorram and others, 2017), individualisation (Mohammadi and Seifouri, 2016), social participation and gender equality in employment (Anderson and Kohler, 2015), women's liberation from family limitations and responsibilities, and increased costs of raising children (Panopoulou and Tsakloglou, 1999).

In the study, apart from individualism, other extracted categories such as dominance of "looking-glass" self, mental well-being, perfectionist fertility and sense of fear of future, were not present in the conceptual models of reduced fertility in developed countries; and it seems that in the

social foundation of a developing country like Iran, these categories cast a doubt on the fertility action of women.

CONCLUSION

"Fertility as an interclass action" as a conceptual model resulted from the qualitative assessing of the fertility of Iranian women (living in Mashhad). As Iran is a developing country, the models of declining populations of developed countries cannot be generalised to Iran. The qualitative study showed that fertility decline in Iran is similar to the experience of developed countries. Even in the underlying layers, the similarities can be seen. However, Iranian women's reluctance for fertility or their inclination to having few children is not because of rising development indices, but more an interclass phenomenon. Using grounded theory, a conceptual model explaining the similarity in fertility action was developed. The model was based on the experiences, attitudes and understanding of fertility given the underlying, causal and intervening conditions. Apart for individualism, categories such as dominance of "looking-glass" self, mental well-being, perfectionist fertility and sense of social isolation were not present in the conceptual models of reduced fertility of Iran.

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