

Fertility and family formation : Australasian bibliography and essays, 1972.

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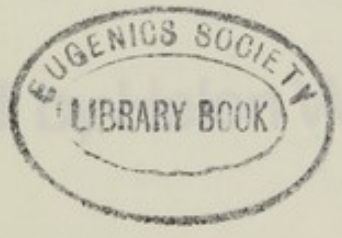
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Australasian Bibliography and Essays
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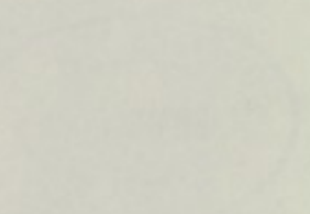
Family Formation Project

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Canberra

FERTILITY AND LAND USE

Author: [illegible]



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Fertility and
Family Formation

Australasian Bibliography
and Essays 1972

Edited by Helen Ware

Australian Family Formation Project



Department of Demography
Institute of Advanced Studies 1973

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Canberra

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PREFACE

This volume represents the first of a series of monographs on fertility and family formation in Australasia to be published by the Demography Department of the Australian National University. Subsequent monographs, focusing upon Australia, will cover such areas as changing marriage patterns since the founding of the colony, legal encouragements and disincentives to fertility, the diffusion of the use of oral contraceptives, and the life cycle of the family. However, as befits the first of the series, this monograph is chiefly concerned with defining the nature and scope of existing studies of fertility and family formation in Australasia, both as a basis for further studies and as an indication of the areas where further work is most needed. This volume also contains a series of essays on a pilot Australian fertility and family formation survey as an appropriate prologue to the new era of large-scale demographic surveys in Australia and New Zealand.

Originally it was envisaged that the bibliography would concentrate upon the technical studies of fertility in Australasia backed up by citations of some of the more general sociological studies of the family in this region. However, it soon became clear that a bibliography exclusively devoted to technical papers would be a very slender volume, and furthermore one that would ignore nearly all the material that was available for the earlier part of the period as well as a considerable proportion of post-war works related to the topic. Until very recently, neither Australia nor New Zealand has been able to support an academic community large enough to undertake great specialization in the social sciences. The result has been that much material of considerable relevance to fertility and family studies has been buried in more general writings and also that in many areas the only available commentary has been far from academic either in tone or content. Thus it was decided to extend the scope of the bibliography and to leave it to the user to determine where to draw the line. Inevitably the resulting listing provides a very mixed assortment, both in respect of quality and scope. However the arrangement of the sections should allow those who are chiefly interested in the technical studies to select the material relevant to their interests. At the same time, for readers with broader interests, the works listed here, together with the references cited within these works, should provide a full coverage of existing writings on fertility and the family in Australasia.

To avoid a duplication of effort and an excessive extension of the bibliography in certain marginal areas where there are already excellent bibliographies in existence, only those references which are most immediately related to the main theme have been cited. Readers who are interested in marginal references to the family and fertility in relation to these areas should also consult the relevant bibliographies. Thus for general references to New Zealand population studies the reader should consult R.P. Hargreaves and L.D.B. Heenan's An Annotated Bibliography of New Zealand Population, (Dunedin, 1972), remembering that official statistical publications and unpublished theses are not covered by this work. Those who are especially interested in infant and maternal mortality should study H.O. Lancaster's "Bibliography of New Zealand and Australian Statistics", (Australian Journal of Statistics, Vol.6, pp.33-99, 1964), a work much more restricted to mortality than its title would suggest, and J.W. Donovan's Bibliography of the Epidemiology of New

Zealand and its Island Territories, (Wellington, Department of Health, 1969). Equally, in view of the extensive bibliographic coverage of the demographic and social aspects of immigration (cf. C.A. Price, Australian Immigration: A Bibliography and Digest, Canberra, Department of Demography, Australian National University, No.1, 1966 and No.2, 1971; and A.D. Trlin, "A bibliography of immigrants and immigration in New Zealand", in K.W. Thomson and A.D. Trlin, eds. Immigrants in New Zealand, Palmerston North, 1970), the emphasis has been especially concentrated upon the native-born in order to redress the balance. For the same reason, those who are especially interested in Aboriginal families and fertility should consult the excellent card catalogue of the Institute of Aboriginal Studies in Canberra and the published bibliographies of the Institute cited in section A. Although these bibliographies should certainly be consulted by those interested in the wider spheres, all references from them immediately relevant to fertility and family formation should be found within this work.

This bibliography is arranged in fourteen major subject categories, starting with the most general categories of source materials and general population studies and moving on to the very specialized areas of studies of topics such as fertility differentials and abortion. Within each subsection the references are arranged in chronological order of first publication (but alphabetically by author within individual years). At the end of the volume this arrangement is supplemented by a full alphabetical index of all authors cited. This chronological arrangement has a number of advantages over the more conventional alphabetical listing by author. Firstly it presents an immediate picture of the growth and development of Australasian studies in this area which is of considerable interest in itself. Secondly it allows the reader to take up the thread at the particular moment of time which interests him. Further it greatly facilitates regular updating of references (for which there should be provision in all bibliographies intended for constant use). At the same time any reader wishing to study the writings of an individual author can easily do so by consulting the author index. Another advantage of the chronological arrangement is that it cuts the Gordian Knot in the case of anonymous works and of publications, the authors of which are variously cited, such as governmental reports which may be cited under the name of the author, of the chairman of the committee concerned, or of the issuing or commissioning body.

The table of contents provides the best overall guide to the arrangement of the bibliography, but the reader is reminded that there will always be some inevitable overlapping between sections. The general works cited in the sections on general and local population studies (B and C) are not usually re-cited under the more specific headings unless they contain a very special contribution to studies in those areas; nevertheless many of these general works should be read in conjunction with the more specialized studies. Some of the larger sections are divided into Australian and New Zealand studies; in such cases to avoid massive repetition, works dealing with both countries are cited in the Australian section only. For the same reason studies of both native born and immigrants are cited only under the general heading. Studies of local communities will be found according to their major emphasis either in the section on local population studies (C) or the section on the family (L). In brief, however specialized the interest of the user of this bibliography, the reader will

be well advised to browse through the whole, or at least through Sections A, B and C, together with those sections closest to his special interest. As an aid to such browsing, certain brief annotations have been provided to outline the contents of works with enigmatic or misleading titles. It is hoped that the publication of this bibliography in its present form will inspire further efforts and will prove to be of use to all those interested in the fast-growing areas of population studies and the sociology of the family.

No author is more indebted to others than the bibliographer. In this case, the author owes much to many different people. Other bibliographers, whose work has been of great assistance, are R.P. Hargreaves and L.D.B. Heenan, who paved the way with their bibliography of New Zealand population, and H.O. Lancaster, who produced the excellent bibliography of vital statistics of Australia and New Zealand.

The Australian Commonwealth Bureau of Census and Statistics and the New Zealand Department of Statistics very generously provided information on their respective publications; and each produced a brief comment on those publications of value to students of fertility and related subjects. These comments are to be found in Section A.

Many specialists in relevant fields assisted with references. I owe a particular debt to Murray Barson, Monash University, for medical references; to P.F. McDonald, Australian National University, for references relating to marriage; to Professor Jean Martin, La Trobe University, for references relating to the sociology of the family; to D.T. Rowland, Australian National University, for New Zealand references; and to L.R. Smith, Australian National Population Enquiry, Australian National University, for information on Aborigines and the census and other Aboriginal references. My thanks also go to all those who answered my letters, to journals with cumulative indices, and to libraries with meaningful subject catalogues.

The exacting task of typing the entire book fell to Mrs Wendy Redgrave. Finally this bibliography would never have appeared without the unstinting and intelligent cooperation of the two Elizabeths, Mrs E. Nurser and Mrs E. Baker, who have dealt with chaos. The accuracies are theirs and the imperfections mine.

Helen Ware

December 1972.

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The Australian Commonwealth Bureau of Census and Statistics and the New Zealand Department of Statistics very generously provided material on their respective publications, and each produced a brief comment on those publications of value to students of fertility and related subjects. These comments are to be found in Section 2.

Many specialists in relevant fields assisted with references. I owe a particular debt to Murray Gordon, Monash University, for medical references; to P. J. McDonald, Australian National University, for references relating to marriage; to Professor Jean Martin, La Trobe University, for references relating to the sociology of the family; to W. F. Howland, Australian National University, for New Zealand references; and to L. R. Bell, Australian National University, for Australian National University references on population and the status and other Aboriginal references. My thanks also go to all those who assisted in letters, to journals with consultative interest, and to libraries with specialist subject catalogues.

The starting point of writing the entire book fell to the worthy Hedgrave. Finally this bibliography would never have appeared without the assistance and intelligent cooperation of the two Misses, Mrs. E. Butler and Mrs. E. Baker, who have dealt with checks. The acknowledgements are theirs and the imperfections also.

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Australia and New Zealand are
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I. AUSTRALASIAN BIBLIOGRAPHY OF FERTILITY AND FAMILY FORMATION

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FERTILITY STUDIES IN AUSTRALIA AND NEW ZEALAND

Australia and New Zealand have much in common in the sphere of population studies and related social research interests. Both are ex-colonies with populations predominantly of European stock but with indigenous minorities upon whom attention has been focused. Studies of the aboriginal populations of both countries have for many years exceeded those of the native-born of European origin both in quantity and quality. Australasia is an area where anthropology long flourished prior to the introduction of sociology.¹

Even in the studies of the European-origin population there has always been a striking concentration of interest upon the most recent immigrants combined with a surprising lack of curiosity concerning the native-born population. The assimilation and integration of immigrant minorities have been discussed at length by writers who have made no serious attempt to measure the norm as represented by the native-born. The extreme extent of the disproportion between migration and fertility studies is indicated by the contents of the New Zealand population Bibliography which contains a mere 21 items relating to fertility in contrast to 220 relating to international migration.² Governments can control migration but can only influence fertility, and therefore population policy has concentrated upon the former rather than the latter. The reasons for the stress upon migration in population research however are much more complex than this. As Hansen and King have suggested, New Zealanders and Australians are generally incurious about themselves.³ There appears to be a feeling amongst the native-born of European stock that this section of the population is homogeneous and possesses known characteristics exemplified in national traditions. In this context, impressionistic studies flourish. It is possible, as Hansen and King have argued, that an underlying attitude is that any scientific study of their community must imply criticism of that society and, more importantly, that any study of differentials within the community may be considered to be contrary to egalitarian principles.

Quite apart from any national antipathy to the social sciences, until relatively recently, neither Australia nor New Zealand has had either the population or the resources to support an appreciable number of specialized social scientists. Demography was first recognized as a university subject in 1947 in Australia, and courses in sociology did not appear until the 1950s in New Zealand.⁴ The recent upsurge in the social sciences in Australasia will be discussed below, but it is important to remember that prior to the 1960s, most fertility research was produced by men and women who were not themselves social scientists. Thus Sir Timothy Coghlan had no formal training but started his career in the Public Works Department, Sir George Knibbs was originally a surveyor and E.P. Neale wrote most of his demographic studies whilst working as secretary to the Auckland Chamber of Commerce.⁵ With the passage of time, writers on fertility tended increasingly to come from disciplines more closely related to demography, especially economics from which came S.H. Wolstenholme, P.H. Karmel, C. Clark and R.E. Dyne. In 1947 W.D. Borrie was appointed to the first University demographic post in Australasia, but even in the 1970s one major writer on fertility, A.H. Pollard, is an actuary by training. The original backgrounds of many of these Australasian writers on fertility go a long way to explaining why, until recently, surveys related to fertility have been so

very rare, whilst studies of governmental statistics have been relatively plentiful, the great majority of these writers was concerned primarily to measure changes in fertility rather than to explain such variations. It should also be noted that, whereas work with published statistics requires little finance, social surveying, especially in the demographic sphere, necessitates considerable resources which have not been available until recently.

The theme of this essay is the development of demographic studies of fertility in Australasia. Although studies of the family as a whole are essential background to such studies, and are therefore included in this bibliography, there will be little reference to such works here. This is partly because studies of the family in this region have rarely placed much emphasis on factors affecting family size, or upon family size itself, and in any case are so often restricted to narrow geographical, ethnic or social groupings: Littledene, Sicilian immigrants, the families of prisoners. It is also true that such sociological studies have been very slow to develop in this region, often being mere replications of studies previously performed elsewhere, so that, late as 1956 H.J. Fallding could entitle a study of forty-six volunteer families in Sydney, "Aspects of Australian Family Structure"⁶, without qualms. It would appear that, whereas a firm mathematical grounding provides an adequate base for innovating studies of trends in fertility levels, the skills necessary for the explanation of such levels have been more specialized and harder to acquire in an Australian context.

In August 1903 the New South Wales Government set up a Royal Commission "to make a diligent and full inquiry into the causes which have contributed to the decline in the birth-rate of New South Wales, and the effects of the restriction of child-bearing upon the well-being of the community". This was the first governmental investigation of its kind anywhere in the world, and its inception and subsequent reputation bear witness both to the intensity of Australian interest in population problems and to the high standing of demographic statistics at the turn of the century. The Commission's finding that the prevalence of family limitation was due to "an increasing love of luxury and of social pleasures" and "a dislike of the interference with pleasure and comfort involved in child-bearing and child-rearing" may well have discouraged further study of the explanation of changing fertility trends. Firstly, if the cause of declining fertility was personal selfishness, then there was little that the government could do in this sphere to increase population: attention was thus diverted to the reduction of infant mortality and the increase of immigration areas, where government intervention seemed more appropriate and more likely to prove effective. It was the findings of the Royal Commission which finally ensured that Australians should think of population growth almost exclusively in terms of immigration, believing that natural increase could never be made to play an appreciable role in the growth of the nation. Apart from deflecting the focus of demographic study from fertility to immigration, the very methodology of the Commission put back the cause of demographic research into fertility. Instead of examining the differentials within the statistics presented before them and proceeding from there to investigate the causes of such differentials the Commissioners examined a number of clergymen and accepted moralizing as evidence which resulted in little more than "the substitution of ignorance in the plural for ignorance in the singular". Thus, although the Commissioner's Report represents a major landmark, it marked the end of an era. Henceforth

attention would be focused on the level of fertility rather than upon the explanation of the causes of that level. T.A. Coghlan, the New South Wales Government Statistician and a motive force behind the Commission, was "at that time ... rightly considered the greatest British authority on fertility statistics".⁷ His works, together with those of W. McLean, Victoria's Government Statist, and of A.O. Powys and other private individuals, offer impressive testimony to the flourishing state of the study of fertility in Australia during the first decade of the century. Demography itself had become a naturalized word in Australia as early as 1891, only a decade after its first use in England.⁸ In many ways, G.H. Knibbs' period of office as the first Government Statistician of the Commonwealth marks the apogee of Australian governmental investigations into fertility. As Statistician, Knibbs published a multitude of articles on such diverse aspects of fertility as the influence of infant mortality on the birth-rate, the sex-ratio in large families, the frequency of pre-nuptial conceptions and the phenomena of multiple births.⁹ However, his most significant contribution to demography was The Mathematical Theory of Population, originally appended to the 1911 Census and then published separately.¹⁰ This "monumental piece of statistical technique ... unique in studies of population"¹¹ contained two lengthy chapters on "Fertility and Fecundity and Reproductive Efficiency" and "Complex Elements of Fertility and Fecundity" of outstanding quality. Knibbs was also before his time in his appreciation of the significance of rapid mortality declines in countries with high fertility levels expressed in The Shadow of the World's Future which was published in 1928, shortly before his death.¹² Despite this early blossoming of demographic studies in Australia, this bibliography begins somewhat arbitrarily in 1920. The earlier period is already well covered by N. Hicks' study of "Evidence and Contemporary Opinion about the Peopling of Australia, 1890-1911",¹³ and G. Goodwin's history of Economic Enquiry in Australia.¹⁴ The year 1920 was chosen as the starting point to allow the coverage of half a century of writings on fertility, and also because the third decade of the century marked the inter-regnum between two eras in Australian demographic studies. When Knibbs retired as Statistician in 1921, the last of the heroic pioneering Government Statisticians had gone. The age when Coghlan's writings on The Decline of the Birth-Rate of New South Wales¹⁵ could provoke political crisis, and when the Victorian Year Book was simply known by the name of the Government Statist - "Hayter" - had passed. The second Commonwealth Statistician, C.H. Wickens, although capable, was never an international figure, nor a prolific writer.

During the greater part of the 1920s there were only two major writers on fertility in Australasia. G.H. Knibbs was chiefly concerned with the phenomenon of multiple births and published four papers on the subject during the period. More general fertility analysis was left to E.P. Neale who published an extensive "New Zealand Study in Natality" in 1924.¹⁶ Even Neale was concerned not to show trends over time, but rather to demonstrate certain relationships which could be held to be relatively constant, such as the sex ratio, the proportion of stillbirths to births, and the frequency of multiple births. Public concern at an alleged decline in morality following the war was reflected in papers by both authors on illegitimate and "prejudiced" births; both concluded that such births were declining but might well oscillate with the proportions married.¹⁷

In 1928 the proceedings of a major seminar, The Peopling of Australia

were published in eleven chapters.¹⁸ Reflecting current interests, four chapters were devoted to immigration whilst only one focused directly upon fertility. However the discussions did cover the two major issues of the day related to fertility in W.E. Agar's the "Eugenic Aspects of Australian Population Problems" and R.W. Cilento's "The White Settlement of Tropical Australia".¹⁹ W.E. Agar was a professor of zoology whose concern for eugenics and the prevention of the outbreeding of the brain-workers by the manual workers led him to be one of the principal instigators of the first birth control clinic established in Australia in 1934.²⁰

The theme of differential fertility by intelligence had been raised in Australasia as early as 1899 by W.A. Chapple at the Intercolonial Medical Congress.²¹ In Australia the idea that the intelligent had fewer children than the unintelligent was generally accepted but little studied.²² In New Zealand however this hypothesis continued to be investigated, culminating in Betty Giles-Bernadelli's paper on "The Decline of Intelligence in New Zealand".²³ In neither country however could writers find a satisfactory definition of intelligence, nor avoid the pitfall of equating intelligence with occupation.

The great controversy of the late 1920s however centred around "The Vitality of White Races in Low Latitudes" or "Natural Selection and Climate in Northern Australia".²⁴ Although the central issue of the debate was the ability of white men to labour as efficiently as Asians in the tropics, the controversy between Ellsworth Huntington, a Yale geographer, and C.H. Wickens, the Commonwealth Statistician, backed up by R.W. Cilento, the Director of the Division of Tropical Hygiene of the Commonwealth Department of Health, resulted in the production of much interesting material relating to the fertility and infant mortality of those born in Queensland or living there.²⁵ However, with respect to fertility, the most remarkable feature of the whole debate is that none of the protagonists showed any awareness that fertility differentials between different regions and birthplace groups in Australia might be due to social factors and voluntary restraint rather than to disabilities imposed by the climate. Even with respect to the relationship between the different birthrates and the different age compositions of the populations being compared, the debate shows a striking lack of sophistication.

The early 1930s were a period of quiescence for fertility studies as for many other Australasian enterprises. The Peopling of Australia: Further Studies, published in 1933, devoted five chapters to the "economic limitations" of population absorption, one to immigration and none to fertility. Attention was shifted from the concern with "carrying capacity" and "optimum population" expressed in 1928, to the attempt "to analyse and value the practical means and methods of population absorption and settlement"²⁶. Serious interest in fertility studies was originally revived by overseas demographers such as Kuczynski drawing upon the excellent Australian vital statistics.²⁷ However, as early as 1934, J. Bostock and L.J. Nye had published "A Study of Race Psychology and the Factors Leading to Australia's National Decline", deploring the effect of the depression upon the birth-rate.²⁸

1936 opened with a discussion of the growth or decline of the Australian population in the Circular of the Bank of New South Wales which showed an intelligent appreciation of the fallibility of existing measures for estimating the reproductivity of the population.²⁹

In April 1935, W.M. Hughes declared that the Australian population was "sliding down deep declivities and heading for precipitous depths ... we are stricken with a disease which threatens to be mortal".³⁰

December saw the publication by S.H. Wolstenholme, an economist, of "The Future of the Australian Population", which was to become a classic.³¹ Wolstenholme began by noting that "the sustained severity of the post-war decline in the Australian birthrate has led many observers to envisage the eventual disappearance of an Australian rate of natural increase". He went on to point out that "what is not generally realized, however, is that future reductions in the rate of natural increase do not depend upon further adverse variations in the disposition of people towards parenthood. The reproductivity of the Australian people is at present so low that, given a continuation of present reproduction rates and the absence of immigration, ultimate decline in the population can be predicted with assurance".

In a series of much quoted projections Wolstenholme predicted that even with the addition of some 40,000 immigrants each year the Australian population would be in decline by 1982, having attained a maximum of less than nine million persons. He recognised that there would be some "pickup when the record number of marriages contracted in 1935 begins to influence the register of births". However he was convinced that once the marriages postponed by the depression had had their effect, reproductivity would begin to decline again at the same rate as in the period 1925-30, hence his pessimistic predictions. He did not even discuss the possibility that reproductivity might remain constant or even rise, apparently regarding the decline since 1911 as an irreversible trend only heightened by the depression. This article became a classic not only because it was so extensively quoted but also because it explained to the intelligent layman what net reproduction rates and stable populations were and how population projections were calculated. It even flirted with the use of male net reproduction rates. This discussion of the difficulties associated with the calculation of meaningful fertility indices marked the beginning of a period of renewed interest in technical demography in Australia.

Wishing to study whether the decline in fertility was the result of smaller families or of a greater number of childless couples Edith Charles turned to the Australian data which gave births by age of mother and order of birth of child in a form not available anywhere else. Her article on "The Changing Structure of the Family in Australia" gave an extremely detailed and technically competent account of changes in fertility in Australia which had resulted in "the emergence of the fashionable family of two children".³² Despite the fact that this article was later republished, it was surprisingly little quoted in Australia. Also in 1937 S.H. Wolstenholme asked "Should we arrest the falling birth rate?"³³, a somewhat curious question since the article itself showed that the birth-rate had actually been rising for the past three years. However, there was a universal belief that the birth-rate was declining and must continue to decline and that any recovery could only be temporary. Despite the fact that there was evidence that one child families were becoming less popular, even those who proposed remedies had so little faith in change that they did not recognize it when it came. Wolstenholme continued to combine flawless technique with unduly pessimistic conclusions. "I regard it as improbable that any permanent recovery from the depression level will be observed", he remarked, adding the prediction that fertility would decline further as knowledge of effective birth-control

spread down the social scale. Haunted by the depression, he believed that once knowledge of birth-control was universal, reproductivity would rise above replacement level only in very favourable circumstances or if the government assumed a major part of the burden of raising children. A constantly declining birth-rate and the consequent ageing of the population was taken for granted even by Government committees.³⁴

Meanwhile overseas demographers continued to utilize Australasian data to investigate particular facets of fertility decline. Thus Kuczynski studying sterility found that in New South Wales in 1901 "among the wives under 45 who were married for over 20 years the proportion of the childless was only 2.5 per cent."³⁵ He also discovered flaws in the data which had not been picked up by local commentators.³⁶

In the American Sociological Review Dorn and McDowell used Australian data to investigate the "Relationship of Fertility and Longevity."³⁷ This was a theme which had been raised as early as 1901 by A.O. Powys,³⁸ but in the intervening thirty-eight years no one else had made use of the Australian data and the Census Bureau had ceased to publish the relevant tabulations. Dorn and McDowell found a positive association between fertility and length of life amongst women who died after the age of forty-five, for all ages at marriage from 15 to 39.

Despite the fact that New Zealand finally held a census in 1936 there were no major studies of the effect of the depression upon fertility in New Zealand during the 1930s.³⁹ "Is a stationary population imminent?" asked the Journal of Commerce; "Have we a population problem?" debated the Workers Educational Association.⁴⁰ The answer was provided by the New Zealand Five Million Club who put forward their views on "The Causes and Consequences of a Declining Population", but there was no demographic study to match Wolstenholme's paper on Australia.⁴¹

1939 saw a revival of interest in differential fertility. The Eugenics Review published a table of fertility, income and paternal age drawn from the Family Volume of the 1933 Census.⁴² However tabulations based upon the Census or upon income tax returns both suffered from the defect that they related to dependency rather than to biological fertility.⁴³ In his presidential address to the Australian Geographical Society D.J. Andrews noted that "during the past two decades ... there has been apparent a very marked swing in the centre of interest in regard to Australian population questions. Formerly most people were concerned with such enquiries as population - carrying capacity ... Many of these estimates would be most fitly preserved in a museum of academic curiosities: by ingenious and hard-driven argument they bolstered up the self-conceit that is usual in a young and vigorous nation by making astronomical totals of the population expected to fill 'our vast empty spaces' ... But the economic depression of the early years of this decade did a great deal to counteract the inherent Australian optimism, and new techniques in the study of population growth brought to light several features that have diverted interest into new channels. Perhaps most important among these features was the decline in human fertility, which, through the work of Kuczynski and others, could now be accurately measured in all its starkness. It became widely known that the nation's fertility had been declining since about 1913, and that up to 1933 there had been a decline amounting to something over 40 per cent. By 1933 there were not enough children being born to replace the existing population, so that the

Australian population, unless reinforced by immigration, was bound to decline at some time or another. There immediately arose a whole host of problems connected with this decline in fertility; problems of the social and economic effect of an ageing population, inquiries into the possibility of obtaining migrants from overseas sources to fill the 'blank files' left by the dearth of children, and so on."⁴⁴ As his contribution to the new geographical interest in human resources, Andrews mapped out the child-woman ratios in New South Wales. He stressed the importance of the disappearance of pioneering conditions, of occupational change, and of urbanization in the decline of fertility, noting the inverse correlation between the child-woman ratio and the size of town. But the main emphasis of his speech was upon the urgent need for social research in the field to establish the reasons for fertility decline as a basis for the formation of a "national policy for the conservation of population".

It was during this period that the Economic News, the monthly bulletin of the Queensland Bureau of Industry, under the editorship of Colin Clark became a major source of technical analysis of Australian and world fertility data.⁴⁵ The articles in the Economic News were always very brief but they often presented data not otherwise available and showed a grasp of demographic method not to be found elsewhere in Australian publications with the exception of the Economic Record.⁴⁶

During the war Australasian interest in fertility ran high. Fears of invasion made the public very conscious of the limited size of the Australian population in comparison with the vast area of the continent to be defended. In war time the immigration issue faded into the background and in any case it had been constantly stressed that the sources of immigrants were rapidly drying up as a result of declining fertility in Europe.⁴⁷ In 1941 C. Gostelow explained the principle of "Net Reproduction Rates" and their implications for Australia to the Actuarial Society: a departure from the normal concerns of that society which illustrates the interest felt at that time both in the actual levels of fertility and the methods for measuring them.⁴⁸ In 1942, in an article with the mournfully familiar title, "Australia's Population Problem", G.F. McCleary reviewed the history of fertility decline in Australia since the trial of the publisher of Mrs. Besant's Law of Population in 1888.⁴⁹ He stressed the fact that from 1861 to 1936 population increase due directly to immigration only represented 23 per cent of total population increase and that therefore fertility was of paramount importance. "We know now" he concluded, "that declining fertility is as characteristic of new as of old countries ... it is characteristic generally of the modern development of western civilization ... Various solutions have been put forward, but it seems that what is chiefly needed is more research into the causes and consequences of the decline and a much wider appreciation of the momentous issues involved."

In 1943 G.R. Bruns published a paper on "Wartime Fertility and the Future Population of Australia", pointing out the revival of interest in population issues during the war and updating Wolstenholme and Downing's projections made seven years earlier.⁵⁰ He noted as Wolstenholme had done, that net reproduction rates were very sensitive to recent marriage rates and referred to a paper in which E.P. Neale had suggested a remedy for this situation.⁵¹ Bruns was one of the first commentators to accept that "the previous declining trend (of fertility) may have been arrested

or reversed". "It is likely that the marriage and baby boom, despite absence of men, will maintain fertility while war lasts. Then there will be a post-war boom in marriages and births ... It must be expected because of the births which have been delayed and as a psychological reaction from the general strain of war-time dislocation ... whether the rate does steady, rise or fall after 1950, will depend on whether the long term decline is steadied, reversed or reasserted, after the reaction from war is complete ... it takes generations for a stable population of regular and constant age and sex composition to develop from a steady reproduction rate. Before that time even if wars and trade cycles have been outlawed, fertility will almost certainly have changed."

In the following year P.H. Karmel published a paper introducing a new measure: the "index of current marriage - fertility" which was designed to remove the influence of fluctuations in marriage rates from the fertility index.⁵² "The rise in the crude birth rate and the gross reproduction rate since 1934", he explained, "has led some people to believe that the trend of fertility in Australia has turned upward and that demographers have, over the past ten years been more pessimistic than the situation warranted. However, changes in these rates for any particular year are largely determined by the numbers of marriages which have taken place in the previous few years. The most fertile sectors of the female population are those women who have been married for less than five or six years". His hypothesis was that the current high gross reproduction rate reflected the high rate of recent marriages and would prove to be purely temporary. To test this theory a gross reproduction rate only for married women was unsatisfactory as it would take no account of duration of marriage.⁵³ He proposed instead to construct an index of current marriage-fertility in which "legitimate births in each year classified according to duration of marriage, are expressed as the number per 1,000 marriages from which they could have sprung. The index is the aggregate of these figures for each duration of marriage. For any year it measures the number of children which might be expected under the fertility conditions of that year, if 1,000 marriages had taken place in every past year." Calculations of this index for the past twenty years showed that the index had fallen some 20 per cent from 1923 to 1932 and a further 10 per cent from 1933 to 1942. Karmel therefore argued that despite great economic changes the rise in the birth and gross reproduction rates since 1934 were solely due to the rise in the marriage rate. Karmel's index has not passed into general demographic usage, although Clark and Dyne did apply the index to Queensland and New Zealand data, and even introduced an allowance for age at marriage by calculating the index separately for women by five year age groups at marriage.⁵⁴ The chief reason why the "index of current marriage-fertility" subsequently stagnated was that in one sense it controlled for too much. Its conception was based on the assumption that any rise in marriage rates could only be a temporary aberration; it implied that in the long term reproduction rates were dependent on family size alone. The future was to show that a greater proportion of women marrying and marrying younger could have a dramatic effect upon reproduction rates and thus Karmel's formula slipped into oblivion.

Governmental interest in fertility was a major feature of the war years. In Britain the government appointed a Royal Commission to enquire into the causes of the declining birth-rate. In Australia the Federal Government introduced a national scheme of child endowment, set up an Interdepartmental Working Committee on the Declining Birth-Rate, and

supported the National Health and Medical Research Council in its investigations into the decline in the birth-rate. The Working Committee was never a public body and although a considerable number of papers on aspects of fertility, ranging from interstate fertility differentials and net reproduction rates corrected for duration of marriage to abortion and the size of family and food consumption standards, were presented to it, these were never published individually.⁵⁵

The most significant of the resolutions and reports published by the National Health and Medical Research Council were: the Resolution on the Decline in the Birth-Rate of 1944⁵⁶; the Memorandum on Some Aspects of Decline in the Birth-Rate and Future of Population in Australia prepared by the Interdepartmental Working Committee; Statements Made by Women Themselves in Response to a Public Invitation to State Their Reasons for Limiting Their Families⁵⁷; and A Survey of the Pregnancies of 2,000 Australian Women with Special Reference to (a) the effect of the use of contraceptives; (b) the incidence of pregnancies terminating in other than live births.⁵⁸ The Memorandum, based on the papers presented to the Working Committee, gave a clear outline of the existing situation, utilizing the techniques of analysis recently introduced by Karmel and others, but continued to predict that "the growth of the population of Australia will dwindle very rapidly after 1950". The "Statements Made by the Women Themselves" and the "Survey of Pregnancies" both testify to the Council's unwillingness to consider asking women face to face whether or why they restricted their fertility. This reluctance is remarkable since the Indianapolis Survey of 1941 had already asked such questions of a sample of the general public and the British Royal Commission had commissioned a survey of women hospital patients. However, social surveys of any kind were extremely rare in Australia at this date (the first Gallup poll on ideal family size in Australia was not held until 1947)⁵⁹ and the Council obviously felt very daring broaching the subject of contraception in any form. In this respect it is remarkable how little progress had been made since the Royal Commission on the Decline in the Birth-Rate of 1904. The one academic social survey to have touched on questions of fertility had been carried out in Melbourne in 1942 by W. Prest of the Faculty of Commerce at Melbourne University, who had investigated the relationship between family size and income.⁶⁰ The information obtained by the Medical Research Council was representative only of women who were sufficiently motivated to write to them, or of women who had seen doctors who had co-operated in the survey of 2,000 pregnancies. The survey of doctors' patients did however suggest that some sixty per cent of this group were willing to admit to the use of contraceptives, whilst eleven per cent admitted to induced abortions, a third of which had been self-induced. Very little followed from the Council's Reports and Recommendations. This was partly because the resources to implement them were unavailable during the war, and after the war all the effort was put into stimulating immigration. It was also due to the fact that what the Council was really recommending in the long run was an economic revival, and this had already occurred with the coming of the war so that the Council's gloomy prediction that "it is clear, beyond any doubt, that the birth-rate is falling steadily, that the general rate of fall is such that, if present conditions continue, no hope of a recovery and subsequent continued rise can be justified", was outdated even before it was made.⁶¹

In New Zealand during the war, writing on fertility was largely

confined to alarmist amateurs who presented a wealth of detail which nevertheless represented only one part of the overall picture.⁶² Immediately after the war however the Government published the "Report of the Dominion Population Committee" and G.N. Calvert's projections of The Future Population of New Zealand. Although both looked forward to a period of stronger growth, each substantially underestimated future replacement rates of the European population whilst appreciating to the full the growth potential implied by the continuance of high Maori fertility rates in conditions of declining mortality.⁶³

V.H. Wallace's study Women and Children First was also published in 1946.⁶⁴ As Wallace himself pointed out "the contributors to the literature on Australia's population problems have been almost exclusively economists, geographers, statisticians, climatologists and agriculturalists. The medical and sociological aspects of the subject have not yet been very fully investigated". Wallace, a medical man who had long been active in various birth control movements in Victoria, attempted to fill the gap. His book has the weaknesses of an amateur study, but it represented a concerted attempt to look at the sociological factors affecting fertility and to answer the question, "Why do people limit the size of their families?" The case histories selected from the five hundred and thirty women patients whom he interviewed, and told in their own words still constitute an unique record.

In 1947 the Institute of Actuaries introduced a new syllabus requiring aspiring actuaries to have a knowledge of "the principles of the various fertility indices in common use, their computation and limitations". Lecturing on this theme, G.N. Pollard explained how he had first become interested in demography when attending a series of meetings of young economists in Sydney in 1940: "No one in Sydney at that time was making a special study of that field and these economists were at a loss to know where to take (sic) for solution to some theoretical problems which had arisen."⁶⁵ This paper contains an interesting discussion of the weaknesses inherent in the indices of Karmel and of Clark and Dyne, which had further stimulated interest in fertility measures in Australia. In the following year Pollard put forward his own index in the Rhodes Prize Essay on "The Measurement of Reproductivity."⁶⁶ This new index was a "joint reproduction rate" calculated from the probability that a male would have a female child and that a female would have a male child. This index was intended to obviate the difficulties created by the fact that male and female reproduction rates for the same population differ. Pollard suggested that this rate could be calculated as a refinement upon the Clark-Dyne female index, if the data were available in an appropriate form, to provide the best absolute measure of reproductivity, although the female index would provide adequate relative figures for comparisons over time. The most interesting aspect of this paper however was the discussion which it provoked. Closing the discussion W. Perks pointed out that although the concept of a joint rate was internally consistent it could lead to unrealistic results in populations with abnormal sex ratios resulting from war or migration. His main objection however was to the taking over of the life-table technique and the technique of standardized death-rates into the fertility field, because fertility was not simply a function of age but also of duration of marriage and current parity. He was "convinced that the only satisfactory way of studying reproductivity was in generations, and it was desirable to obtain samples of the population year by year for say,

quinquennial ages of adult males and females ... It was possible to learn a good deal about reproductivity by taking quite small samples - a matter of a few thousands each year", and asking them about their reproductive intentions. Reproductivity was "essentially a generation idea, and all the troubles ... arose out of attempts to measure a generation concept by means of (fertility) data taken over a short period ... that attempt was doomed to failure."⁶⁷

The future indeed was to be with generational measures but in the meantime Australasian writers continued their interest in reproduction rates. Thus in 1948 Karmel published "An Analysis of the Sources and Magnitudes of Inconsistencies between Male and Female Net Reproduction Rates in Actual Populations" without fully acknowledging the criticism that there was no reason why male and female rates should be the same.⁶⁸ In the same year Clark and Dyne proposed a "true nuptiality rate" which would take into account variations in the age composition of the female population, and also changes in the number of women married and in the proportion of marriages of various durations.⁶⁹ From their calculations they deduced that "true fertility started its upswing in 1938 rather than in 1942." Karmel returned to the index of "current marital fertility" in 1949, still doubting that there had been "any permanent increase in fertility over the past fifteen years" but willing to concede that the best measures of fertility were cohort measures.⁷⁰ As to the reasons for changes in fertility Karmel noted that after 1942 there had been a striking increase in the fertility of marriages of over ten years duration. "Marriages of these durations would have been well-established from pre-war years. It seems likely that this rise was due to economic conditions. With full employment and high money incomes on the one hand and restricted avenues of expenditure on the other, expenditure on the bearing and rearing of children must have been felt less onerous. It is generally agreed that the cost of raising children has been a major factor in the spread of the practice of family limitation. But it must be emphasized that it is not the cost itself which is important, but rather the comparison of the satisfaction of having children and of having the other things which could be obtained at the same cost. ... The fact that fertility in the later durations fell between 1946 and 1947 is some confirmation of this view, for 1947 was the first year in which consumer expenditure became much less restricted."

In 1948 W.D. Borrie, Australasia's first demographer to be appointed to an academic post as such, published a series of chapters on fertility in his Population Trends and Policies.⁷¹ These chapters provided a useful synopsis of the broad outline of the history of Australian fertility and of the current position.

The 1950s was a most productive decade for Australasian fertility research. The war was past and the height of the depression was twenty years distant; the time had come to analyse the true effects of the depression upon fertility and a number of new techniques were available for such an analysis. R.J. Linford opened the decade with an article on "Interstate Differentials in Human Fertility in Australia". He noted that "notwithstanding the notable advances made in the measurement of human fertility in Australia during recent years, the measurement of fertility in the Australian States, regarded individually, has not shown any progress."⁷² Linford was able to demonstrate that the interstate

fertility differentials which could be shown to have survived for some two-thirds of a century could not be accounted for by different age distributions or by different proportions marrying but the available statistics did not allow him to say on what the differentials did in fact depend.⁷³

In "Recent Trends in Australian Fertility" Linford discussed the concept of a "borrowing from the future of births which, under different economic and social conditions would have been produced at a later period in marriage."⁷⁴ He showed that both the gross reproduction rate and the index of current marriage-fertility would both tend to overstate the true level of fertility when births were being "borrowed" and to understate it while the consequential "lull" was occurring. Thus the only really satisfactory method of measuring the level of fertility was to follow through the experience of the various cohorts of marriages. This procedure would not allow of the summary in one index of the level of fertility in a particular year, but it was preferable to have no index rather than one which might be under or overstated to an undetermined extent. He presented a table of confinements per thousand marriages by year and duration of marriage from 1926-27 to 1946-47 noting the remarkable stability in the total issue of the various marriage cohorts at the higher durations of marriage. He concluded that "notwithstanding the decline in the various indexes of fertility that occurred during the 1930s, there is, in fact, no real basis for the assertion that marriage fertility has fallen over the past twenty years"; births had been postponed not omitted. One child families and large families had become fewer with each new cohort but this trend had been offset by the increasing popularity of two and three child families. In the same issue of the Economic Record, S.W. Caffin adopted another cohort approach. He examined the average total issue per family of married women past the age of reproduction from death records. He was able to show that although the average had fallen considerably (from 6.03 in 1897 to 3.29 in 1937) it had never in fact fallen below replacement level.⁷⁵

In 1950 J. Bourgeois-Pichat had published a book explaining a new method of forecasting the rate of reproduction making allowances for both the age at which child-bearing customarily ceases and births resulting from ante-nuptial conceptions.⁷⁶ By 1951 E.A. Boulton had further applied this measure to Australian data to show that "the decline in average family size which characterized the last sixty years seems to have been definitely arrested."⁷⁷ Another new fertility measure, which appeared at this time only to be rapidly forgotten, was also proposed in the Economic News.⁷⁸ The method consisted of applying English 1939 fertility rates by age at marriage and duration of marriage to data of numbers of married women in a certain country, classified by age and duration in a particular year, to find the computed number of births in the year. This was then compared with the actual number of births in that year to obtain a ratio. To convert the ratio to a measure of reproductivity for the particular country it was to be multiplied by the English reproductivity rate of 1939. The chief interest of this curious paper lies in its assumption that the trend towards earlier marriage in Australia must have reached an absolute limit.

From time to time the excellence of Australian fertility data and the wide variety of forms in which it is available have led overseas

demographers to base seminal papers introducing new methods of analysis upon Australian data. One such paper on "Fertility According to Size of Family" was published by L. Henry in 1954.⁷⁹ Henry pointed out that in "natural" communities two factors were of importance in relation to fertility: marital status and the mother's age, but that once voluntary limitation of births became widespread then a third equally important factor, the size of the existing family, entered into the picture. It was for that reason that it was necessary to calculate for each year the probability of having a further child for women of each parity. Having done this he was able to show for the Australian data the remarkable extent of the fluctuations in these probabilities especially in the case of childless or small families. He also demonstrated that 1927 was the pivotal year in which the probabilities began to fall really sharply, ⁸⁰ although childless or one child families were not affected until 1930.

In 1955 C. Clark addressed the Manchester Statistical Society on "Population Trends".⁸¹ Declaring the obsolescence of the gross and net reproduction rates, he pointed out that statisticians should have been able to predict a priori that, even for a population of unchanged age structure, a sudden change in the proportions marrying within the course of a few years (as had happened with the war, notably in the United States) may completely upset these rates. As a result of this weakness, demographers' attention had turned away from the problem of adjusting for age of mother towards the problem of adjusting for duration of marriage, hence Karmel's index, followed by the Clark-Dyne index which had brought the age of mothers as well as the duration of marriage back into account. This was followed by Bourgeois-Pichat's study of the "mu coefficient". Then P.K. Whelpton developed "cohort fertility" analysis in the United States, that is taking a cohort of women born in any particular period, and tracing their subsequent history through succeeding census records and annual birth registrations.⁸² Then followed Henry's "probability of aggrandisement". What Clark himself proposed was a simplified method of analysis borrowing features from both Henry and Whelpton, which enabled him to predict the expected total offspring from cohorts of women born in different quinquennia from Census tables and birth registrations by fitting a constant curve, at least for women aged thirty and over.

New Zealand demographers also participated in the general interest in the cohort approach and in 1958 E.G. Jacoby, who had worked with F.W. Notestein at the Office of Population Research at Princeton, published "A Fertility Analysis of New Zealand Marriage Cohorts".⁸³ Jacoby calculated duration-specific fertility rates and parity progression ratios (i.e. Henry's "probabilities of aggrandisement"). He postulated that "(a) women forming a (marriage) cohort whose initial size is reduced by postponement will experience not only higher fertility generally but higher parity progression ratios, and (b) a cohort whose size is increased either by previously postponed marriages being made up or by anticipation will experience lower fertility" and his calculations bore out this hypothesis. He also showed that in New Zealand both world wars had reduced the size of new marriage cohorts to a greater extent than the depression. His segmental analysis to evaluate changes in the timing of births spread over the whole reproductive history of marriage cohorts served to illuminate the effect at different points in cohort history of postponements and making-up as variations in trends. It also suggested that the war and post-war lowering of the age at marriage combined with family planning had led to a longer interval between marriage and first births. In a further paper on "Some

Demographic Observations on First Order Births in the Light of the Cohort Approach" published in 1961, Jacoby argued that taken together the size of marriage cohorts at their formation and the interval between marriage and first birth should provide early yet reliable pointers to ultimate completed fertility of cohorts.⁸⁴ He maintained that, unlike net reproduction rates, these two measures enabled one to distinguish between long and short-term fluctuations in fertility.

Another sign of the revival of interest in New Zealand fertility was W. Rosenberg's paper on "The Relationship between Size of Families and Incomes in New Zealand", based upon income tax returns and an independent inquiry by the New Zealand Department of Health.⁸⁵ Both sources showed that the largest families were to be found in the highest and lowest income groups, the most "restrained" group being the middle group. Rosenberg's explanation of this phenomenon was that New Zealand was unusual in that a large proportion of those with high incomes were farmers living in rural areas and sharing the generally high-fertility of those areas.

The 1950s also saw the emergence of a number of sociological studies of Australian society which introduced the demography of the Australian family to the general reader. Thus W.D. Borrie contributed chapters on "The Family" and "Australian Family Structure: Demographic Observations" to two such works.⁸⁶

A feature of the 1960s was the growth in the appreciation of the difficulties of making realistic population projections without the knowledge of future fertility trends which could only be obtained through social surveys and not through the examination of past trends. Thus Fallon and Kaufmann's paper on "Population Projections" presented a number of methods of projecting future fertility from past trends largely to show that, in the absence of social survey data, there was no national basis on which to choose between the different results obtained.⁸⁷

Prior to 1964 the few studies of differential fertility in Australia had been based on the somewhat limited data available in the census tabulations. In 1964 L.H. Day published a paper on "Fertility Differentials Among Catholics in Australia" based on a special set of cross-tabulations of the characteristics of a 20 per cent random sample of wives enumerated in the census of 1954.⁸⁸ Day was able to show a pronounced decline in median issue among Catholic women born in Australia, a decline that was common to metropolitan, other urban and rural Catholics alike, but was most pronounced among the metropolitan Catholics. The median issue of Catholics born in Australia, Britain and Italy was very close although there had formerly been marked differentials, those born in the Netherlands still had outstandingly high fertility, more than double that of the Polish-born, the nationality group with the lowest median issue of all. Day's paper succeeded in showing consistent differentials in median issue and distribution of family size amongst Catholics living in Australia but it raised a number of questions as to the causation of these differentials which could only have been answered by a social survey.

In 1964 K.G. Basavarajappa submitted a doctoral thesis on "Trends in Fertility in Australia, 1911-1961".⁸⁹ This thesis presented a full exposition of the cohort methods of analysis as applied to Australian fertility data. Summarizing some of his findings in a paper for the 1965 World Population Conference, Basavarajappa commented "An examination of trends in fertility during 1911-1961 on the basis of rates specific for

age as well as duration of marriage showed that for the first three age groups 15-19, 20-24 and 25-29 within each age group, the rates at lower durations have remained at high levels and even exceeded their 1911 level in 1961, whereas the rates for other age groups at corresponding durations were considerably below those of 1911 in 1961. Also, it was found that the higher the age and the duration, the further the level of its fertility rate in 1961 fell below that of 1911. The similarity of trends in the rates for females of the same group of durations but of different ages, indicated that the age as a determinant of fertility, even allowing for a tendency for fecundity to be reduced as age advanced, was seen to be not as significant as duration of marriage in Australia where rational control over fertility is an accomplished fact. In the absence of direct field surveys to study the changes in the reproductive behaviour of women, this study has shown that the basic registration and census data could yield more refined measures with which to add something to previous knowledge in this field. In fact the changes in fertility rates specific for age as well as for duration of marriage suggested that the limitation of ultimate family size was much more effective in recent years than in earlier years. They further indicated a growing tendency among couples marrying in recent years to plan their families from the outset."⁹⁰ Had the thesis included more social commentary it would have provided a full survey of fertility trends in Australia, as it was it constituted the skeleton without the flesh.

In their efforts to identify factors influencing changes in average family size demographers and sociologists had long considered variants of the "social capillarity" theory, advanced by A. Pomont in the late nineteenth century, which hypothesised that aspirations for and effort toward climbing the social ladder would result in a restriction of family size. In Social Mobility and Controlled Fertility: Family Origins and Structure of the Australian Academic Elite, H.Y. Tien devoted a whole book to examining a number of permutations of the theory that social mobility affects fertility.⁹¹ Tien's data were derived from questionnaires completed by 479 academics employed in two Australian universities, a number reduced to 126 for most of the study because of necessary controls and further divided between those married 1920-39, and therefore affected by the depression, and those married subsequently. Although Tien's book provides an excellent survey of the relevant literature combined with a critical evaluation of the various social mobility-fertility hypotheses, the size of his sample made it impossible for him firmly to establish any original findings. Neither marriage cohort showed any consistent relationship between intergenerational mobility and fertility, although there was a slight relationship between mobility and delay of the first birth subsequent to marriage. Perhaps in choosing professional academics, Tien had chosen the wrong group for a study of the effect of mobility upon fertility, because, as the biographies he collected showed, most of his sample did not marry until after they had already achieved mobility in attaining university qualifications or employment, and promotion within the academic hierarchy is not generally held to be dependent upon family size.⁹² Another weakness of the book was that it relied exclusively on data drawn from the survey and presented no background data on differential fertility by social class or occupation to provide a perspective. Having decided to centre his research upon a survey, it was unfortunate that Tien should have used a mailed questionnaire with all the restrictions on the questions which could be asked implied by that decision. In the

light of what was to come perhaps the most remarkable feature of the whole survey was the fact that Tien at no time asked his respondents whether they had in fact controlled their fertility. The publication, also in 1965, of Madge Dawson's survey of married women graduates bears witness to contemporary interest in the fertility of the intellectual elite.⁹³ Although she had only asked a very limited number of questions on fertility, her findings were at least related to a sample of 1070 women.

In examining "Differentials in Age of Women at Completion of Childbearing in Australia", L.H. Day made the point that studies of differential fertility need not be restricted exclusively to studies of differentials in completed family size.⁹⁴ This study was based on the same 20 per cent sample of the 1954 Census returns which Day had used in his study of "Fertility Differentials among Catholics"⁹⁵, together with the assumptions that no children were born to women aged 45 or older and that a mother has finished childbearing when she has had no child for nine or more years. From this material Day was able to show that half of all mothers had completed their childbearing by the age of 34; three-quarters by the age of 38; and nine-tenths by the age of 40. Within this total there were consistent differentials by religion, residence and nativity: non-Catholic mothers finished childbearing at younger ages than did Catholic mothers; metropolitan mothers at younger ages than "other urban" or "rural" mothers; foreign-born at younger ages than Australian-born. These group differences were found to result from differences in fertility not from differences in either age at commencement of childbearing or intervals between successive births. In fact, in most instances, the pattern of these other two variables was such as to reduce the differentials occasioned by the differences in fertility. This study provides an excellent example of a confirmation from the data of what might have been expected on a priori grounds; it was nevertheless necessary that such confirmation should have been sought.

In 1966 G.N. and A.H. Pollard presented a survey of "Fertility in Australia", using what had become the conventional armoury of techniques of analysis including Henry's "probabilities of aggrandisement" which they referred to as parity progression rates.⁹⁶ They also presented a unique table of "Parity Progression Rates by Age for New South Wales, 1964". Justifying this new creation the authors explained that they considered that "with the development of family planning, fertility should be measured in terms of mother's age and parity. In deciding whether to add a further child to the family, age of mother is of prime importance for physiological reasons and number of previous births is the most important personal factor in deciding whether the family is to be increased, assuming that this is physiologically possible." In discussing recent trends the authors noted that 1961 had been a peak year for fertility and that since that time, although marriages were still increasing, age-specific and marriage duration fertility rates had both fallen. Both the authors and those discussing the paper attributed a considerable proportion of the fall in fertility to the general introduction of the contraceptive pill in Australia in 1961.⁹⁷ A more balanced outlook was presented by a paper on "Pills and Populations" which pointed out that although the pill was playing an important role it was "essentially as an instrument, not as a causative agent".⁹⁸

From the mid-1960s in both Australia and New Zealand geographers had shown an increasing interest in population growth and fertility and it was in this context that L.D.B. Heenan published his study of the

"Rural-Urban Distribution of Fertility in South Island, New Zealand" and M.G.A. Wilson included a chapter on "Differential Fertility" in his text-book of Population Geography.⁹⁹ Heenan pointed out that there had been an appreciable narrowing of rural-urban, inter-rural, and inter-urban fertility differentials whilst at the same time, within the larger metropolitan areas, a major contrast between the downtown pattern of low fertility and the outlying residential districts of high fertility had emerged. Both papers served to show that geographers could profit greatly from the availability of detailed fertility data for smaller areas than the census tabulations now cover, and from a closer acquaintance with the techniques of formal demography.

1967 saw two of Australia's female demographers debating "Australia's Birth Rate in Perspective".¹⁰⁰ Both were agreed however that "what needs investigation is not why the birth rate has fallen since 1961, but why it was so high in 1961, both amongst marriages of each duration and women of all ages. Once this peak had occurred, it might have been expected that fewer children would be born subsequently to the marriages which had experienced these high rates especially when the birth rates at early durations of marriage had been increasing gradually for some years". However the aftermath of this heaping was not the complete explanation for the decline in the birth rate since women aged 25 in 1966 had had fewer children than women aged 25 in 1961, and women aged 30 had had fewer third, fourth and fifth children.

The close of the 1960s witnessed a revival of interest in New Zealand fertility rates with the publication of three papers on the subject in two years. G.P. Braae, an economist, presented a somewhat pedestrian survey of birth rates, introducing the ratio between legitimate births and married females aged 15-45 as a "'corrected' propensity to have children".¹⁰¹ Miriam Gilson, a sociologist with some demographic training, provided a general survey of "Population Growth in Post-War New Zealand", with some discussion of possible future trends and the social implications of population growth.¹⁰² And K.G. Basavarajappa, a formal demographer, provided a full analysis of recent trends and patterns of fertility.¹⁰³ Basavarajappa showed that the birth rates per 1000 married females of specified ages and durations of marriage generally attained their post-war maxima in 1946-47 and then declined. Whilst this declining trend was a brief one for females of younger ages and shorter durations of marriage, it continued for females of older ages and longer durations. Since 1961 the rates for all (younger and older) women had declined markedly. Many people believed that this decline in annual fertility, especially amongst the young and recently married, heralded a decline in the total fertility of cohorts who had yet to complete their childbearing. However, an examination of the cumulative fertility of cohorts marrying since 1936 showed that the total fertility of cohorts who had completed their childbearing varied between a narrow range of 2500-3000 and that the cumulative fertility up to 5 or 10 years of marriage duration of later cohorts was considerably higher than that of earlier cohorts.¹⁰⁴ These facts suggested that the total fertility of the cohorts who had yet to complete their fertility would not be far outside the limits of 2500 and 3000.

The late 1960s also witnessed the return of a form of fertility study last popular in the 1920s, that of pre-marital pregnancies and ex-nuptial births. In New Zealand this took the form of Governmental concern "to ascertain the precise extent of the problem of illegitimacy in New Zealand" as a prelude to social and legislative action.¹⁰⁵ In Australia

the concentration of the shadowy area of pre-marital conceptions was much greater and the debate showed a marked tendency to degenerate into an argument over the level of immorality within the Australian community. However the debate did produce some interesting statistical analysis.¹⁰⁷

By the close of the 1960s Australasian analysis of fertility trends had achieved a high degree of sophistication. In 1969 W.D. Borrie published a general study of the fall in the birth rate in Australia in relation to the age composition of the female population and the age incidence of marriage, the timing of births, the size of completed family and the overall effect of these variables.¹⁰⁸ One of his interesting findings related to childless marriages: he found that 19 per cent of marriages contracted between 1920 and 1921 had no issue during the first five years. The proportion rose steadily through the depression until the figure reached almost 30 per cent in 1939-40. After the war it dropped again to about 22 per cent for the marriages of 1947-48, remained between 20 and 23 per cent until 1953 and thereafter began to decline sharply. Only 17 per cent of the marriages of 1959-60 remained childless after 5 years - the lowest proportion for at least forty years. He also found that only for marriages of durations above fifteen years did the fertility of the most recent cohorts begin to fall noticeably below that of the marriages of the early 1920s. The recent decline in the fertility of young married women was largely due to some caution between marriage and first birth, particularly in the first two years.

A little publicized paper on the "Measurement of Reproduction and Fertility of the Developed Countries" by C. Clark and E. Csocsau de Varailja appeared in 1970.¹⁰⁹ The authors weighed the reasoning behind the three methods currently available for estimating the complete reproductive performance of a generation on the basis only of information currently available: the extrapolation of the sigmoid relationships of cohort fertility¹¹⁰; the method of probability of aggrandisement developed by L. Henry; and the Clark-Dyne formula for summing marriage-duration - age-specific fertilities. The authors felt that Henry's assumption that parents may, within a very short period, drastically change their intentions about ultimate number of offspring was more realistic than the "cohort fertility" assumption that parents, considered collectively at any rate, have in mind ultimate objectives about bearing first, second, third, or higher sequence children, and furthermore have made a fairly determinate distribution of these intentions through time. Thus although cohort patterns might be disturbed by war or economic depression delaying marriage or child-bearing, all such frustrated intentions are expected to be quickly fulfilled as soon as the crisis is over. Having calculated probabilities of aggrandisement and net reproduction rates for a number of countries, including Australia and New Zealand, by a modified form of Henry's method, the authors concluded that a major indicator was the changes in the probability of having a third child. It appeared that this was the coefficient in which changes had occurred most readily, and that this was the factor which reflected and characterised the alterations in the trends of fertility at least in countries where family limitation was widespread.

K.G. Basavarajappa's paper on "The Influence of Fluctuations in Economic Conditions on Fertility and Marriage Rates, Australia" provided another excellent example of the sophisticated techniques of analysis being applied to Australian data.¹¹¹ Incidentally it also provided ample proof of the hardness of demographic data when contrasted with the

inexactitude of economic indicators. Basavarajappa succeeded in showing that the movements in age-specific marriage and age-duration of marriage-specific confinement rates during the interwar years were very closely associated with the movements in economic conditions. Subsequent to the war, however, it appeared that economic fluctuations had not been strong enough to have any visible influence on annual fluctuations in fertility rates. Elsie Jones and Geraldine Spencer both published papers on long term trends in fertility in Australasia in 1971.¹¹²

Taken together these papers of the turn of the decade show that the problems of analysing what has happened to fertility in the past have been largely solved. The problem of predicting what will happen to fertility in the future remains. This period also saw the beginnings of a new approach to this problem of prediction in Australasia, through the use of social surveys to ask women how many children they intended to have.

In the early days social surveys in New Zealand had an extremely chequered career. In 1937 New Zealand's first Labour Government established a Bureau of Social Science Research whose work was to be "the co-ordinating of the activities of research bodies or individuals working in the fields of social sciences so that the utmost benefit will be realized for their efforts, the stimulation of interest in the social sciences, the development in the community of an appreciation of their significance, and the undertaking of investigations by the Bureau itself to assist Government by providing the necessary factual basis for policy measures of a social nature."¹¹³ The first report, on the standard of living of dairy farmers was published in 1940. Shocked by the revelations of poverty still existing under a Labour Government which had guaranteed living standards to farmers, the Prime Minister forbade the publication of the other surveys in progress and took steps to see that the Social Science Research Bureau was abolished. After this very inauspicious experiment in government support for social research, such research was left to the universities, none of which had sociology departments,¹¹⁴ and to independent bodies such as the New Zealand Council for Educational Research, which was financed by the Carnegie Corporation.

It was in this context that the first social survey in New Zealand with a major interest in fertility was carried out by a private association of interested women: The Society for Research on Women in New Zealand.¹¹⁵ This survey consisted of a general study of a total sample of 5,400 women between the ages of 16 and 60 living in the four main urban centres of New Zealand. The results of this study were published in 1972, but the main importance of the study was less in the results it produced than in the precedent it established and in the training it provided to create a body of experienced research workers which had previously been grievously lacking in New Zealand.¹¹⁶

In Australia social science research has had a less traumatic history than in New Zealand. Nevertheless it was not until 1970 that the first two fertility and fertility control survey projects, in the tradition of the Growth of American Families Surveys, were set in motion. This was despite the fact that government and demographers alike had recognized the desirability of such surveys since the time of the establishment of the Interdepartmental Working Committee on the Decline of the Birthrate in 1944. However, prior to 1970 both the expertise and the financial backing necessary for such large-scale surveys had been lacking.

The survey under the direction of the members of the Demography

Department of Macquarie University, and financed by the Australian Research Grants Committee, because of its concentration upon the study of birth intervals and the development of new techniques of demographic analysis, required a large sample and was therefore restricted by considerations of cost to a four page, census type questionnaire.¹¹⁷ A private survey firm was used to interview some 10,000 ever-married females under the age of 55 living in urban centres with a population of at least 2,000 in New South Wales. At the time of writing the published work from this survey was restricted to the first 1,283 questionnaires to be fully processed and was intended to indicate the type of information that will eventually be available rather than to provide representative results.

The survey carried out by members of the Demography Department of the Australian National University and financed with the assistance of the Commonwealth Population Enquiry and the Ford and Rockefeller Foundations' Programme in Support of Social Science and Legal Research on Population Policy was intended to cover as many aspects of fertility and fertility control as possible within the scope of a single interview. After an investigation of the problems of a nation wide survey it became plain that this would be impossible with the resources available and so it was decided to concentrate upon the Melbourne Metropolitan Area. A pilot survey of Queanbeyan, an atypical New South Wales country town, covering approximately one in eleven of the town's eligible women was carried out in early 1970. Some results from this small but representative survey are presented in the essays below. The full survey of a sample of 5,398 dwelling units in Melbourne designed by the Commonwealth Bureau of Census and Statistics, was carried out in August-December 1971. Some 2,652 eligible women were interviewed in over twenty languages in interviews averaging two hours in length. The eligible were defined as all once-married women under 60 years of age still living with their husbands in order to yield a population at almost continuous risk of conception and to include an age span wide enough to secure worthwhile retrospective data for the analysis of past trends in family planning. The interview covered all topics usually found in fertility and KAP surveys with additional emphases given to questions on aspects of oral contraception, changes in contraceptive practice over time, the desire at each family size level for an additional "marginal child", the effect of female employment on fertility and fertility control, the life cycle of families as children are born, reared, educated, employed and leave home, special questions to be used in constructing psycho-social indices to relate to fertility and fertility control practices, the potential impact of monetary and other incentives on changing fertility levels, the effect of the concept of zero population growth and ideas about and reactions to population and migration change (included at the request of the Australian National Population Enquiry). Special emphasis was placed upon a study of the characteristics of non-respondents. By March 1973 four papers relating to this survey had been published covering a general review of the methodology and KAP findings of the survey, attitudes towards abortion, the evolution of family planning in Australia, and attitudes towards confidentiality and privacy.¹¹⁸

With these two major fertility studies and the papers of demographic analysis published at the turn of the decade fertility studies in Australasia had come of age.

Footnotes

1. The International Bibliography of Research in Marriage and the Family 1900-1964, (Eds. J. Aldous and R. Hill, University of Minnesota, 1967) contains 36 entries relating to Australia, 19 of which are solely concerned with Aborigines.
2. R.P. Hargreaves and L.D.B. Heenan, eds., An Annotated Bibliography of New Zealand Population, Dunedin, 1972.
3. D.A. Hansen and R.S. King, "Sociology and Social Research in New Zealand", Sociology and Social Research, 50:36-46, 1965.
4. J.C. Caldwell and M. Cameron, "Demography in the Universities of Australia and New Guinea", Second Asian Population Conference, Tokyo, 1-13 November, 1972; R. Thompson, "Sociology in New Zealand", Sociology and Social Research, 51:503-8, 1967.
5. F.B. Horner, "Some Statistical Anniversaries", Bulletin of the Statistical Society of New South Wales, 16:1-3, 1956; H. Belshaw, "Obituary: Dr. Edward Percy Neale", Economic Record: 98-99, 1961.
6. H.J. Fallding, "Aspects of Australian Family Structure: a field Study of a Sample of Urban Families", Ph.D. Thesis, Australian National University, Canberra, 1956, 2 vols. pp.ix + 543.
7. R.R. Kuczynski, The Measurement of Population Growth, London, 1935, p.145.
8. cf. T. Borthwick, A Contribution to the Demography of South Australia, London, 1891.
9. cf. G.H. Knibbs, "On the Influence of Infant Mortality on Birthrate", Journal and Proceedings of the Royal Society of New South Wales, 42:238-50, 1908; "The Human Sex-Ratio and the Reduction of Masculinity through Large Families", ibid, 59:212-22, 1925; "Protogenesis and Ex-Nuptial Natalivity in Australia", ibid, 61:73-144, 1927; "Rigorous Analysis of the Phenomena of Multiple Births", ibid, 61:190-217, 1927.
10. G.H. Knibbs, Census of the Commonwealth of Australia, 1911, Appendix A: "The Mathematical Theory of Population, of its Character and Fluctuations, and of Factors which influence them, being an examination of the general scheme of Statistical Representation with deductions of the necessary formulae; the whole being applied to the data of the Australian Census of 1911, and to the elucidation of Australian Population statistics generally", Melbourne, 1911, pp.466.
11. Comment of Horace Secrist, Publications of the American Statistical Association, 16:156-7, 1918-19.
12. G.H. Knibbs, The Shadow of the World's Future, or The Earth's Population Possibilities and the Consequences of the Present Rate of Increase of the Earth's Inhabitants, Chicago, 1928.
13. N. Hicks, "Evidence and Contemporary Opinion about the Peopling of Australia, 1890-1911", Ph.D. Thesis, Australian National University, 1971, pp.292.

14. C.D.W. Goodwin, "Population Studies", pp.397-454 in his Economic Enquiry in Australia, Duke University Commonwealth-Studies Center, 1966. The few early New Zealand Studies are cited in Hargreaves and Heenan op.cit.
15. T.A. Coghlan, The Decline of the Birth-Rate of New South Wales and Other Phenomena of Childbirth: An Essay in Statistics, Sydney, 1903. cf. Childbirth in New South Wales: A Study in Statistics, Sydney, 1900. Both works were published by the N.S.W. Government Printer.
16. E.P. Neale, "A New Zealand Study in Natality", Journal of the American Statistical Association: 454-67, 1924.
17. G.H. Knibbs, "Protogenesis and Ex-Nuptial Natality in Australia", Journal and Proceedings of the Royal Society of New South Wales, 62:73-114, 1928; E.P. Neale, "A New Zealand Study in Sex Delinquency", New Zealand Journal of Science and Technology, 7:19-24, 1924.
18. P.D. Phillips and G.L. Wood, The Peopling of Australia, Melbourne, 1928, republished London, 1968.
19. Ibid., Chapters 5 and 11.
20. G. Simpson, Melbourne District Nursing Society Midwifery Service, Melbourne, 1952, cyclostyled.
21. W.A. Chapple, "Fertility of the Unfit", Transactions of the Intercolonial Medical Congress of Australasia, Fifth Session, 1899, Brisbane, 1901, 474-82; cf. W.A. Chapple, The Fertility of the Unfit, Melbourne, 1903, pp.127.
22. cf. W.J. Brown, "Economic Welfare and Racial Vitality", Economic Record, 3: 15-34, 1927. Brown, of the Industrial Court Adelaide, argued that the unfit should be segregated so they could not breed, but also added "if you make the really poor less poor they will breed less".
23. B.M. Giles-Bernadelli, "The Decline of Intelligence in New Zealand", Population Studies, 4: 200-8, 1950.
24. C.H. Wickens, "Vitality of White Races in Low Latitudes", Economic Record, 3:117-26, 1927; E. Huntington, "Natural Selection and Climate in Northern Australia", Economic Record 5:185-201, 1929.
25. R.W. Cilento, "The White Settlement of Tropical Australia", Chapter 9 of P.D. Phillips and G.L. Wood, eds., The Peopling of Australia, 1928, for example contains figures on fertility in Queensland from a special sample survey possibly the first such survey in Australia. cf. A. Brienl, "A Comparative Statistical Inquiry into the Prevalence of Disease, Death Rates, Infantile Mortality and Birth Rates in Queensland", M.J.A. 2:173-84, Sept. 1921.
26. P.D. Phillips et al., eds., The Peopling of Australia: Further Studies, Melbourne, 1933, p.10.
27. R.R. Kuczynski, The Measurement of Population Growth: Methods and Results, London, 1935.
28. J. Bostock and L.J. Nye, Whither Away? A Study of Race Psychology and the Factors Leading to Australia's National Decline, Sydney, 1934; a similar Jeremiad relating to New Zealand but with a variety of statistics drawn from the Census is A.E. Mander's To Alarm New Zealand, Wellington, 1936.

29. "The Australian Population: Growth or Decline?", Bank of New South Wales Circular, 6(1):1-8, February 1936.
30. Adelaide Advertiser, 21st April 1936.
31. W.H. Wolstenholme, "The Future of the Australian Population", Economic Record, 12:193-213, December 1936. The fertility section in F.W. Eggleston and G. Packer eds., The Growth of the Australian Population, Melbourne, 1937, is largely based upon Wolstenholme's calculations but presents a much more optimistic picture.
32. E. Charles, "The Changing Structure of the Family in Australia", Economica, May 1937, reprinted in L. Hogben, Political Arithmetic, A Symposium of Population Studies, London, 1938.
33. S.H. Wolstenholme, "Should We Arrest the Falling Birth-Rate?", Australian Quarterly, 9(2):51-57, 1937.
34. cf. Sir Walter Kinnear's Report on Insurance for Health and Pensions quoted in "Population", Economic News, 6(9):1+4, 1937.
35. R.R. Kuczynski, "Childless Marriages", Sociological Review, 30(2): 120-44, April 1938.
36. In "Childless Marriages" he showed that there were many more childless women aged 60 to 70 in the 1921 Census than there had been childless women aged 50-60 in the 1911 Census. Similarly in "The Analysis of Vital Statistics: II Birth and Death Statistics", (Economica, 5(19): 289-315, 1938) he studied the difference between the number of registered and actual births for each month 1911-1920 showing that whilst registered births peaked in 1912 (due to the introduction of Maternity Allowances) actual births peaked in 1914.
37. H.F. Dorn and A.J. McDowell, "The Relationship of Fertility and Longevity", American Sociological Review, 4(2):234-46, 1939.
38. A.O. Powys, "Data for the Problem of Evolution in Man", Biometrika, 1:30-49, 1901-2.
39. In between 1921 and 1971 the New Zealand Census did not include a fertility question.
40. "Is a Stationary Population Imminent?", Journal of Commerce, 15 May 1936; S. Odell, "Have We a Population Problem?", New Zealand To-day and To-morrow, W.E.A. Discussion Course, Wellington, 1937.
41. New Zealand Five Million Club, After the First 100 Years: The Causes and Consequences of a Declining Population: Report of the Birth-Rate Committee, Wellington, 1939.
42. C. Clark, "Fertility, Income and Paternal Age", Eugenics Review, 31(2):121, 1939.
43. cf. "Differential Fertility", Economic News, 9(8):1940, which gives data for dependency by income for Queensland and for dependency by age and income for New Zealand.
44. D.J. Andrews, "Address at the Annual General Meeting", The Australian Geographer, 3(7):3-14, 1939. For a summary of these discussions cf. W.D. Forsyth, "Australia's Changing Population", Australian Quarterly: 45-53, 1939.
45. cf. "Fertile Areas", Economic News, 8(8):1+4, 1939; "Differential Fertility", Economic News, 9(8):1+4, 1940.

46. For a popular exposition of the available data on differential fertility by religion, occupation and rural-urban residence cf. A.E. Mander, Alarming Australia. Unpopular Pamphlets No.3, Sydney, 1938, revised edition Sydney, 1943.
47. A thesis culminating in the publication of W.D. Forsyth's The Myth the Open Spaces, 1943.
48. C. Gostelow, "Net Reproduction Rates", Transactions of the Actuarial Society 4:1, 1941.
49. G.F. McCleary, "Australia's Population Problem", Milbank Memorial Fund Quarterly, 20(1):23-34, 1942.
50. G.R. Bruns, "Wartime Fertility and the Future Population of Australia", Economic Record, 19:185-202, 1943; cf. S.H. Wolstenholme, "The Future of the Australian Population", Economic Record 12:193-213, 1936 and R.I. Downing, "Forecasting the Age Distribution of the Future Population", Economic Record, 12(22):94-9, 1936. Wolstenholme had died prior to the publication of these revisions.
51. E.P. Neale, "Population Prospects and Problems in New Zealand", Economic Record Supplement 15:82-94, 1939.
52. P.H. Karmel, "Fertility and Marriages - Australia 1933-42", Economic Record, 20:74-80, 1944.
53. In any case the age distribution of women according to conjugal condition was only available for Census years in Australia.
54. C. Clark and R.E. Dyne, "Applications and Extensions of the Karmel Formulae for Reproductivity", Economic Record, 22:23-39, 1946.
55. For a full listing of the surviving papers in the possession of Professor W.D. Borrie, Director of the Research School of Social Sciences of the Australian National University, a member of the Committee, see entry no.D142 of the bibliography. The Committee included representatives of the Department of Post-war Reconstruction, the Department of Labour and National Service and the Bureau of Census and Statistics.
56. Report of the National Health and Medical Research Council 17th Session, Canberra 24 and 25 May 1944.
57. Ibid., 18th Session.
58. Ibid., 19th Session. Canberra 22 and 23 May 1945.
59. Australian Gallup Polls, Australian Public Opinion Polls, Nos.426-35, May-June 1947. The results of the poll showed that 46 per cent of Australians thought that four was the ideal number of children, whereas in England and the United States three was the most popular choice.
60. Quoted in W.D. Borrie, "The Social Basis of a Population Policy", Australian Quarterly, 16(4):50-63, 1944.
61. Report of the 17th Session, op.cit., p.8.
62. cf. C.E. Hercus, Women and National Survival, Christchurch, 1940, pp.20; H.I. Sinclair, Population: New Zealand's Problem, Dunedin, 1944, pp.189.
63. Report of the Dominion Population Committee, A.J.H.R. (I.17), 1946, pp.136; G.N. Calvert, The Future Population of New Zealand, Wellington, Treasury Department, 1946, pp.162.

64. V.H. Wallace, Women and Children First: An Outline of a Population Policy for Australia, Melbourne, 1946, pp.360.
65. A.H. Pollard, "The Principles and Limitations of Fertility Indices", Transactions of the Actuarial Society of Australasia, 6:9-23, 1947.
66. A.H. Pollard, "The Measurement of Reproductivity", Journal of the Institute of Actuaries, 74:288-318, 1948. Discussion, 319-37.
67. Ibid., pp.327-8.
68. P.H. Karmel, "An Analysis of the Sources and Magnitudes of Inconsistencies between Male and Female Net Reproduction Rates in Actual Populations", Population Studies, 2(2):240-73, 1948.
69. "Marital Fertility", Economic News, 17(1-3):1-5, 1948.
70. P.H. Karmel, "Population Replacement - Australia 1947", Economic Record, 25:83-8, 1949. In 1947 J. Hajnal had already given some data relating to Australia on size of family by cohort relating yearly fertility rates to the number already born to the marriages in question (J. Hajnal, "The Analysis of Birth Statistics in the Light of the Recent International Recovery of the Birth Rate", Population Studies, 1(2):137-64, 1947).
71. W.D. Borrie, Population Trends and Policies: A Study in Australian and World Demography, Sydney, 1948, Chapters 6-9: "Fertility Patterns and the Future", "Family Structure in Australia", "Differentials in Fertility" and "The Fertility of Immigrants".
72. R.J. Linford, "Interstate Differentials in Human Fertility in Australia", Economic Record, 26:87-97, 1950. He cited the "adjusted nuptio-reproduction rate" devised by the Commonwealth Statistician (vide Report of the National Health and Medical Research Council, 18th Session op.cit. p.19) and Karmel's "index of current marriage-fertility" together with Clark and Dyne's refinements as examples of these advances.
73. Though the data he presented would suggest that the degree of urbanization may have been a major factor.
74. R.J. Linford, "Recent Trends in Australian Fertility", Economic Record, 27:41-51, 1951.
75. S.W. Caffin, "Completed Families", Economic Record, 27:77-80, 1951.
76. J. Bourgeois-Pichat, Mémoire de la Fécondité des Populations, Paris, 1950. This work included some analysis of the excellent Australian data. Bourgeois-Pichat maintained that for a given age at marriage, subsequent fertility could be treated as a parabolic function of duration, and the large cumbersome table of specific fertilities by age and marital duration could be represented by two, or three coefficients, only one of which (entitled the mu coefficient by him) showed any high degree of variability. However this method introduces a considerable bias if ages at marriage change.
77. E.A. Boulton, "Measurement of Fecundity", Economic News, 20(10):1-5, 1951.
78. "Comparative Marital Fertility", Economic News, 20(1):1-4, 1951.
79. L. Henry, "Fertility According to Size of Family", Population Bulletin of the United Nations, 4:8-20, 1954. Thanks to Sir George Knibbs Australia has had full figures since 1907, of births classified by age of mother, duration of marriage, and number of previous children; corrections for immigration however are extremely difficult to calculate.

80. Immigration and marriage rates also dropped sharply after 1927 suggesting that even before the economic crisis occurred, the Australian population experienced a period of uncertainty, which as a reaction, led to a postponement of births.
81. C. Clark, Population Trends: A paper presented at the Manchester Statistical Society, 14 December 1955, Manchester, 1956.
82. In the United States, owing to embarrassment at premarital conceptions, duration of marriage at time of birth was not recorded.
83. E.G. Jacoby, "A Fertility Analysis of New Zealand Marriage Cohorts", Population Studies, 12:18-39, 1958. Jacoby's analysis was based on annual vital statistics, since the New Zealand Population Censuses, after 1921, gave no information on duration of marriage or on order of birth, whilst information on number of children was restricted to dependent children under the age of 16. Since 1913 live legitimate births had been recorded annually in New Zealand by birth order and by age of mother and duration of marriage in separate tables, by single years.
84. E.G. Jacoby, "Some Demographic Observations on First Order Births in the Light of the Cohort Approach", Economic Record, 37:308-319, 1961.
85. W. Rosenberg, "The Relationship Between Size of Families and Incomes in New Zealand, 1949-50 to 1953-54", Economic Record, 34:260-4, 1958.
86. W.D. Borrie, "The Family", Chapter 2 of G. Caiger, ed., The Australian Way of Life, London 1953; W.D. Borrie, "Australian Family Structure: Demographic Observations", Chapter 1 of A.P. Elkin, ed., Marriage and the Family in Australia, Sydney, 1957.
87. T.J. Fallon and P.A.A. Kaufmann, "Population Projections", Transactions of the Actuarial Society of Australia and New Zealand, 12:45-71, 1960.
88. L.H. Day, "Fertility Differentials Among Catholics in Australia", Milbank Memorial Fund Quarterly, 42(2):57-83, 1964. For Day's subsequent thought on this subject cf. "Natality and Ethnocentrism: Some Relationships Suggested by an Analysis of Catholic-Protestant Differentials", Population Studies, 22(1):27-50, 1968.
89. K.G. Basavarajappa, "Trends in Fertility in Australia, 1911-1961", Ph.D. Thesis, Australian National University, Canberra, May 1964.
90. K.G. Basavarajappa, "Trends in Age-Duration-Specific-Fertility Rates in Australia, 1911-1961", United Nations World Population Conference, Belgrade, 1965, vol.II, p.249.
91. H.Y. Tien, Social Mobility and Controlled Fertility: Family Origins and Structure of the Australian Academic Elite, Canberra and Connecticut 1965, pp.224. This book was based on research carried out in 1957 and presented in a thesis submitted in 1960.
92. Tien never made sufficiently clear the distinction between career mobility and intergenerational mobility.
93. M. Dawson, Graduate and Married: A Report on a Survey of One Thousand and Seventy Married Women Graduates of the University of Sydney, Sydney 1965, pp.232.
94. L.H. Day, "Differentials in Age of Women at Completion of Childbearing in Australia", Population Studies, 28(3):251-264, 1965. For a study of American experience cf. L.H. Day, "Age of Women at Completion of Childbearing", Public Health Reports, June 1958.

95. See note 88.
96. G.N. and A.H. Pollard, "Fertility in Australia", Transactions of the Institute of Actuaries of Australia and New Zealand, 17:19-48, 1966.
97. The dramatic effect of the pill on the birth-rate had already become a popular theme of press comment. cf. Sydney Morning Herald, 24th and 31st May 1966.
98. W.D. Borrie, "Pills and Populations", Current Affairs Bulletin, 40(1); 3-16, 1967.
99. L.D.B. Heenan, "Rural-Urban Distribution of Fertility in South Island, New Zealand", Annals of the Association of American Geographers, 57: 713-35, 1967; M.G.A. Wilson, Population Geography, Melbourne, 1968, pp.170. cf. E.N. Hall, "Fertility and Size of Settlement in New Zealand", M.A. Thesis, Department of Geography, University of Auckland, 1969, pp.59.
100. N. McArthur, "Australia's Birth Rate in Perspective", Economic Record, 43:57-64, 1967; G. Spencer, "Australia's Birth Rate in Perspective: - A Comment", Economic Record, 44:108-12, 1968.
101. G.P. Braae, "Birth Rates in New Zealand 1945-65", New Zealand Economic Papers, 1-3, 5-10, 1968.
102. M. Gilson, "Population Growth in Post-War New Zealand", Chapter 2 of J. Forster, ed., Social Process in New Zealand: Readings in Sociology, Auckland, 1969.
103. K.G. Basavarajappa, "Recent Trends and Patterns of Non-Maori Fertility in New Zealand", Journal of Biosocial Science, 1:101-8, 1969.
104. Ranging from 13 to 40% higher.
105. New Zealand Department of Statistics, "Ex-Nuptial Births: Demographic Influences on the Statistics", Monthly Abstract of Statistics Supplement Jan. 1967; E.A. Missen, Chairman, Inter-departmental Report on Ex-Nuptial Births, Wellington, 1969; A. Sears, "Trends in Illegitimacy", New Zealand Social Worker, 5(2):15-21, 1969.
106. The status of illegitimacy was removed from New Zealand law in 1969.
107. K.G. Basavarajappa, "Pre-Marital Pregnancies and Ex-Nuptial Births in Australia, 1911-66", Australian and New Zealand Journal of Sociology, 4(2):126-45, 1968; G. Spencer, "Pre-Marital Pregnancies and Ex-Nuptial Births in Australia, 1911-66 - A Comment", Australian and New Zealand Journal of Sociology, 5(2):121-7, 1969. For some of the answers to the sociological issues raised in the debate which could not be settled by the statistics, cf. N. Shanmugam and C. Wood, "Unwed Mothers - A Study of 100 Girls in Melbourne, Victoria", Australian and New Zealand Journal of Sociology, 6(1):51-55, 1970.
108. W.D. Borrie, "Recent Trends and Patterns in Fertility in Australia", Journal of Biosocial Science, 1:57-70, 1969.
109. C. Clark and E. Csocsau de Varailja, Measurement of Reproduction and Fertility of the Developed Countries, Institute of Agricultural Economics, University of Oxford, 1970, pp.41.
110. Although this method was based upon techniques of analysis developed by Whelpton he himself was extremely reluctant to make such extrapolations.

111. K.G. Basavarajappa, "The Influence Fluctuations in Economic Conditions on Fertility and Marriage Rates, Australia, 1920-21 to 1937-38 and 1946-47 to 1966-67", Population Studies, 25(1):39-53, 1971.
112. E.F. Jones, "Fertility Decline in Australia and New Zealand, 1861-1936", Population Index, 37(4):301-25, 1971; G. Spencer, "Fertility Trends in Australia", Demography, 8(2):247-259, 1971.
113. D.G. Sullivan, the Minister responsible, quoted in R. Thompson, "Sociology in New Zealand", Sociology and Social Research, 51: 503-8, 1967.
114. Sociology, beyond an introductory first year stage was not taught in New Zealand until the mid 1960s.
115. cf. M. Shields, "The Society for Research on Women - A Case Study", Paper prepared for Workshop on the Sociology of Organizations S.A.A.N.Z. Conference, Brisbane, May 1971.
116. Society for Research on Women in New Zealand, Urban Women, Dunedin, 1972. The Society has also published a study of The Unmarried Mother - Problems Involved in Keeping her Child, Wellington, 1970, which has a much wider scope than its title would suggest.
117. A.H. Pollard, F. Yusuf, and G.N. Pollard, "Survey of Family Formation in Australia", paper submitted to the Institute of Actuaries of Australia and New Zealand, November 1972. In November, 1972 some 6,000 interviews had been completed.
118. J.C. Caldwell, C. Young, H. Ware, D. Lavis and A.T. Davis, "Australia: Knowledge, Attitudes and Practice of Family Planning in Melbourne, 1971", Studies in Family Planning, 4(3):49-59, 1973; J.C. Caldwell and H. Ware, "Australian Attitudes Towards Abortion: Survey Evidence", in Abortion: Repeal or Reform, ed. N. Haines, Australian National University Centre for Continuing Education, Canberra, 1971; J.C. Caldwell and H. Ware, "The Evolution of Family Planning in Australia", Population Studies, 27(1), 1973; H. Ware and J.C. Caldwell, "Confidentiality, Privacy and Sensitivity in Household Surveys", Australian Journal of Statistics, 14(3), 1973.

SECTION A: BIBLIOGRAPHIES, GOVERNMENT DOCUMENTS AND MAJOR PERIODICALS

This section includes: a. Bibliographies, b. Government publications, both Australian and New Zealand, which provide relevant information for studies such as those listed in this bibliography, and c. Major periodicals dealing with fertility and family formation.

a. Bibliographies

- A1 AMERICAN GEOGRAPHICAL SOCIETY Current Geographical Publications, New York. Ten issues per year.
- A2 ASSOCIATION DE GÉOGRAPHES FRANÇAIS et al. Bibliographie Géographique Internationale: Bibliographie Annuelle, Paris.
- A3 AUSTRALIA-COMMONWEALTH PARLIAMENTARY LIBRARY "Select bibliography on child endowment or family allowances", March 1941. Copy in the Australian National Library.
- A4 AUSTRALIAN INSTITUTE OF ABORIGINAL STUDIES A comprehensive annotated bibliography on Aborigines in the form of a card index is kept at the Institute of Aboriginal Studies, Canberra.
- A5 BORRIE W.D. and PACKER D.R.G. The Assimilation of Immigrants in Australia and New Zealand, Canberra, 1953.
- A6 BOWMAN R.G. "A walkabout down under: recent geographical literature on Australia and New Zealand", Geographical Review, 38(2):250-70, Apr. 1948. Section on population.
- A7 BREESE G. Urban Australia and New Zealand: a Selected Bibliography, Monticello, Illinois, 1969. Council of Planning Librarians, Exchange Bibliographies 89 and 90.
- A8 BUXTON P.M. Children in Institutions, Research Service Bibliographies, State Library of South Australia, series 4(128), 1970. 534 references, supplement to Morgan J.R.
- A9 CARR M. "New Zealand population statistics", New Zealand Geography, 25:211-14, 1969. Discusses present-day census and vital statistics as primary sources of population data in New Zealand.
- A10 CRAIG B.F. Arnhem Land Peninsular Region: including Bathurst and Melville Islands, Australian Institute of Aboriginal Studies, Canberra, 1966. Occasional Papers in Aboriginal Studies No.8; Australian Institute of Aboriginal Studies, Bibliography Series no.1.

- A11 CRAIG B.F. Cape York, Australian Institute of Aboriginal Studies, Canberra, 1967. Occasional Papers in Aboriginal Studies no.9; Australian Institute of Aboriginal Studies, Bibliography Series no.2.
- A12 DONOVAN J.W. Bibliography of the Epidemiology of New Zealand and its Island Territories, Wellington, 1969, pp.94. Department of Health, Special Report no.33. Contains information on mortality. Maoris treated separately.
- A13 ELDRIDGE H.T. The Materials of Demography: a Selected and Annotated Bibliography, International Union for the Scientific Study of Population and the Population Association of America, New York, 1959, pp.222.
- A14 ELLIS A. and DOORBAR R.R. "Bibliography, classified, of articles, books and pamphlets on sex, love, marriage and family relations published during 1950", Marriage and Family Living, 13:71-86, 1951.
- A15 ELLIS A. and DOORBAR R.R. "Classified bibliography on sex, love, marriage and family relations", Marriage and Family Living, 15:156-75, 1953.
- A16 ELLIS A. "1953 classified bibliography on marriage and family relations", Marriage and Family Living, 16:145-61, 254-63, 1954.
- A17 FINCH J.H. Guidance in Family Affairs: A Selective list of Books in the Public Library of South Australia, Research Service Bibliographies, State Library of South Australia, Series 4(42) 1965. 151 references covering adolescence, marriage, parent-child relations and sex education.
- A18 FINLAYSON J. Historical Statistics of Australia: a Select List of Official Sources, Canberra, Department of Economic History, Research School of Social Sciences, Australian National University, 1970, pp.55. Includes serials published by the Commonwealth Bureau of Census and Statistics, State offices prior to their amalgamation with the Commonwealth Bureau of Census and Statistics, and colonial predecessors whose serials were continued by State Statistical offices.
- A19 FRANCE CENTRE DE DOCUMENTATION, C.N.R.S. Bulletin Signalétique Sciences Humaines, Paris. A quarterly publication.
- A20 GALE F. "A changing Aboriginal population", pp.65-88 in Settlement and Encounter: Geographical Studies Presented to Sir Grenfell Price, eds. F. Gale and G.H. Lawton, Melbourne, 1969.

- A21 GREENWAY J. Bibliography of the Australian Aborigines and the Native Peoples of Torres Strait to 1959, Sydney 1963.
- A22 GUIART J.,
HERRY F.,
HEYUM R.,
and
PANOFF C. Oceania - I à XXXIV (1930-1964), Serie: Bibliographies Analytiques-I, Paris, 1966.
455 Australian Aborigine entries.
- A23 GUNTON E.J. Aborigines in the Northern Territory of Australia, Research Service Bibliographies, State Library of South Australia, Series 4(10), 1964.
- A24 GUNTON E.J. Education of Australian Aborigines, Research Service Bibliographies, State Library of South Australia, Series 4(27), 1964. 114 references, also published as Aboriginal Schools Bulletin, Education Department of South Australia, no.2, 1964.
- A25 HANSEN D.A. and KING R.J.R. "Sociology and social research in New Zealand", Sociology and Social Research, 50:36-46, 1966.
- A26 HARDIE B.G. A Bibliography of New Zealand Economics and Economic History, Auckland University College, Feb. 1953, pp.49. Population pp.11-13.
- A27 HARGREAVES R.P. and HEENAN L.D.B. An Annotated Bibliography of New Zealand Population, Dunedin, 1972, pp.230.
- A28 HOLMES F.W. and CAREY R.H. A Preliminary Bibliography of New Zealand Economics and Economic History, Victoria University of Wellington, Wellington, 1967, pp.158. Various studies on aspects of New Zealand.
- A29 INSTITUTE OF POPULATION STUDIES "Bibliography: checklist of current government serial publications containing vital or migration statistics", Population Index, 34(4):481-512, Oct./Dec. 1968.
- A30 INTERNATIONAL COMMITTEE FOR SOCIAL SCIENCES DOCUMENTATION International Bibliography of Social and Cultural Anthropology, Paris. An annual publication.
- A31 INTERNATIONAL COMMITTEE FOR SOCIAL SCIENCES DOCUMENTATION International Bibliography of Sociology, Paris. Produced annually.
- A32 JAMIESON D.G. Supplement, 1955-1962, Wellington, 1963, to the Union List of Theses of the University of New Zealand, 1910-1954, Wellington, 1956.

- A33 JENKINS D.L. Union List of Theses of the University of New Zealand, 1910-1954, Wellington, 1956. Supplements 1963, 1969.
- A34 KETLEY A.M.L. Assimilation of Migrants in Australia including selected references to Immigration, Research Service Bibliographies, State Library of South Australia, Series 4 (52), 1965. 118 references.
- A35 LANCASTER H.O. Bibliography of Vital Statistics in Australia and New Zealand, Sydney, 1964. Appeared in Australian Journal of Statistics, 6(2):33-99, 1964. Mainly mortality statistics.
- A36 LOVETT B.H. Education of Australian Aborigines, Research Service Bibliographies, State Library of South Australia, Series 4 (89), 1967. 120 references, supplement to Gunton E.J.
- A37 McARTHUR N. Genetics of Twinning: a Critical Summary of the Literature, Canberra, 1953, pp.49. Australian National University Social Science Monograph No.1.
- A38 MITCHELL LIBRARY Dictionary Catalogue of Printed Books, Mitchell Library, Sydney, 1968, 38 vols. Supplement no.1, 1970.
- A39 MOGEY J. "Sociology of marriage and family behaviour 1957-1968: a trend report and bibliography", Current Sociology, 17(1-3):1-364, 1969.
- A40 MOODIE P.M. and PEDERSEN E.B. The Health of Australian Aborigines: an Annotated Bibliography, Sydney University, School of Public Health and Tropical Medicine, Canberra, 1971. Commonwealth Department of Health Service Publication No.8.
- A41 MORGAN J.R. Institutional Care of Children, Research Service Bibliographies, State Library of South Australia, Series 4 (110), 1968. 156 references.
- A42 MORRISON P.S. A Preliminary Bibliography of New Zealand Urban Studies, Department of Geography, Massey University, Palmerston North, 1971.
- A43 MURDOCH A. "Bibliography of selected periodical articles on Australian economic subjects published in English outside Australia 1946-62", Economic Record, 40: 200-13, 1964. Population 208-10.
- A44 NATIONAL LIBRARY OF AUSTRALIA Australian National Bibliography, Canberra, started 1961.

- A45 NATIONAL LIBRARY OF AUSTRALIA apais: Australian Public Affairs Information Service: a subject index to current literature, Canberra. Issued monthly since July 1945. Contains information on articles both in Australia and overseas on Australian affairs.
- A46 NATIONAL LIBRARY OF AUSTRALIA Checklist of Serial Publications of the Commonwealth of Australia: Extract from the Union Catalogue of Periodicals in the Social Sciences and Humanities, Canberra, June 1962.
- A47 NEALE E.P. Guide to New Zealand Official Statistics, 3rd edition, Wellington, 1955, pp.195.
- A48 NEW ZEALAND DEPARTMENT OF STATISTICS Statistical Publications 1840-1960, Wellington, 1961, pp.66. A listing of government sources of population and other statistics.
- A49 NEW ZEALAND DEPARTMENT OF STATISTICS Catalogue of New Zealand Statistics, Wellington, 1962, pp.90. Includes population and vital statistics and tables of working life.
- A50 NEW ZEALAND DEPARTMENT OF STATISTICS Catalogue of New Zealand Statistics, Wellington, 1966, pp.156. A catalogue of current government and non-government publications. The first edition was published in 1962.
- A51 NEW ZEALAND NATIONAL LIBRARY Index to New Zealand Periodicals, Wellington. Up to 1955, published by the New Zealand Library Association. This publication first appeared in 1940. It lists articles published in New Zealand periodicals as well as articles on New Zealand published in selected overseas journals. Relevant headings are Population, Immigration and Emigration, Maoris, and Mortality.
- A52 OFFICE OF POPULATION RESEARCH PRINCETON UNIVERSITY Population Index, Princeton: Office of Population Research, Woodrow Wilson School of Public and International Affairs, and the Population Association of America. Starting in 1935, this quarterly publication attempts to index all published material on population.
- A53 OFFICE OF POPULATION RESEARCH PRINCETON UNIVERSITY Population Index Bibliography: Cumulated 1935-1968: Author Index, Boston, Mass., 1971. 4 volumes.
- A54 OFFICE OF POPULATION RESEARCH PRINCETON UNIVERSITY Population Index Bibliography: Cumulated 1935-1968: Geographical Index, Boston, Mass., 1971. Vol. 3, 1935-1954 Australia pp.393-416, New Zealand pp.433-44. Vol. 5, 1954-1968 Australia pp.673-85, New Zealand pp.690-5.

- A55 PODSTOLSKI J.H. A Bibliography of Non-British Immigration to New Zealand, Wellington, National Library School, 1955.
- A56 POPULATION COUNCIL Current Publications In Population/Family Planning. Started April 1969.
- A57 PRICE C.A. ed. Australian Immigration: a Bibliography and Digest, Canberra, Australian National University, 1966, pp.120. See also 1970 supplementary edition, which includes an author index to both bibliographies.
- A58 PRICE C.A. ed. Australian Immigration: a Bibliography and Digest, Number 2, 1970, Australian National University, 1971, pp.198. Author index to 1966 and 1971 editions.
- A59 PUBLIC LIBRARY OF SOUTH AUSTRALIA Employment of Women in Australia, Research Service Bibliographies, Series 4, no.64, Adelaide, March 1966. Compiled by I. Yates.
- A60 PUBLIC LIBRARY OF SOUTH AUSTRALIA Guidance in Family Affairs: a selective list of books in the Public Library of South Australia, Research Service Bibliographies, Series 4, no.42, Adelaide, May 1956.
- A61 PUBLIC LIBRARY OF SOUTH AUSTRALIA Women - their Place in Society: a List of Books in the Public Library of South Australia, Research Service Bibliographies, Series 3, list 1, June 1961.
- A62 REPRODUCTION RESEARCH INFORMATION SERVICE Bibliography of Reproduction, Cambridge. Appears monthly.
- A63 SCHLESINGER B. The One Parent Family: Perspectives and Annotated Bibliography, Toronto, 1969.
- A64 SIMON POPULATION TRUST Bibliography of Family Planning and Population, Simon Population Trust, 141 Newmarket Road, Cambridge, England. Volume 1, no.1 was published in July 1972 and issues appear bimonthly.
- A65 SOCIAL SCIENCE RESEARCH COUNCIL OF AUSTRALIA Australian Social Science Abstracts. There were two issues per annum from March 1946 until November 1954. The Committee on Research in the Social Sciences, Australian National Research Council were responsible for this service until 1952, when the Social Science Research Council of Australia took over.
- A66 SOCIAL SCIENCE RESEARCH COUNCIL OF AUSTRALIA Bibliography of research in the Social Sciences in Australia, 1954-7, Canberra, 1958.

- A67 SOCIOLOGICAL ABSTRACTS Sociological Abstracts. Six issues per annum of this series have appeared since 1953. It is co-sponsored by the American Sociological Association, the Eastern Sociological Society, The International Sociological Association and the Midwest Sociological Society.
- A68 SWIFT C.G. Supplement, 1963-1967, Wellington, 1969, to the Union List of Theses of the University of New Zealand, 1910-1954, Wellington, 1956.
- A69 THOMPSON R. "Sociology in New Zealand", Sociology and Social Research, 51, 503-8, July 1967.
- A70 TRLIN A.D. "A bibliography of immigrants and immigration in New Zealand", pp.196-200 in Immigrants in New Zealand, eds. K.W. Thomson and A.D. Trlin, Palmerston North, 1970.
- A71 UNITED STATES - BUREAU OF THE CENSUS Foreign Statistical Publications: Accession List, Washington.
- A72 UNITED STATES - NATIONAL LIBRARY OF MEDICINE Current Catalog Cumulative Listings, Washington.
- A73 UNIVERSITY OF EAST ANGLIA Geographical Abstracts, Norwich. Produced bi-monthly.
- A74 UNIVERSITY OF TASMANIA LIBRARY Union List of Higher Degree Theses in Australian University Libraries: Cumulative Edition to 1965, Hobart, 1967. See also Supplement, 1966-1968, Hobart, 1971.
- A75 YATES I. Employment of Women in Australia including selected references to equal pay for women, Research Service Bibliographies, State Library of South Australia, Series 4, (64), 1966. 197 references.
- A76 ZELINSKY W. A Bibliographic Guide to Population Geography, Chicago, 1962, pp.257. Univ. of Chicago, Department of Geography Research Paper, No.80. 2563 items. Australia, pp.231-3; New Zealand, pp.233-4.

b. Government publications

These include censuses and other regular government publications, whether national or state. The New Zealand materials follow those for Australia

(1) Australia

The Commonwealth Bureau of Census and Statistics is the authority concerned with the compilation, analysis and publication of statistics on family formation and fertility in Australia.

The major sources from which these statistics are compiled are the continuous registers of births, deaths and marriages maintained by State and Territory registrars, court records of divorces, and the population censuses conducted by the Bureau.

The Bureau's principal publications in this field are Demography, a letter press publication issued annually from 1911 to 1966, and biennially since 1967, separate annual bulletins on Births, Marriages and Divorce, and bulletins and volumes on the Census of the Commonwealth of Australia published after each census. Other publications include projections of the population of Australia and its States and Territories, annual estimates of the age distribution of the population of each State and Territory, annual estimates of the populations of local government areas, and quarterly estimates of population and vital events. Consolidations of age specific period and generation fertility and marriage rates are published from time to time.

Statistics of the total number of births, deaths and marriages are available from the 1860s and of divorces from the 1890s. Extensive tabulations have been published for Australia in respect of births, deaths and marriages from the 1910s and of divorces from the 1950s. For births these include particulars of age of mother and, for nuptial births, age of father, duration of marriage and number of previous issue to existing marriage. Statistics of marriage include age and marital status at marriage; and of divorce, age, duration of marriage and number of children.

A question on the number of children born to the existing marriage was asked at the State conducted censuses of 1901 in New South Wales and Victoria and at every Commonwealth census from 1911 to 1971, except in 1933. In 1911 all ever married males and females were asked to state the number of children born to previous marriages. Results were tabulated for widowed and divorced as well as those currently married. In 1971 the inquiry was again widened to include previous marriages of females. Other census data, such as marital status, duration of marriage and the household composition, can be of assistance in studies of family formation and structure. Since 1966, the censuses have included detailed family analyses.

The Bureau of Census and Statistics conducts household-type sample surveys which occasionally contain questions on such topics as working mothers and child care.

The research activities of the Bureau are chiefly related to the compilation of statistics. Occasional publication of the results of Bureau research is made in papers prepared for scientific meetings, or for limited circulation, or in Australian or international journals.

Censuses of Australia

The first census taken in Australia was in the colony of New South Wales in 1828. Thereafter, each of the six colonies took censuses at various times. On 7 April 1861, five of the colonies (New South Wales,

Queensland, South Australia, Tasmania and Victoria) conducted their censuses on the same date. In 1881, 1891 and 1901 all six took their censuses on the same day, although they were still published separately. The first Commonwealth Census was taken in 1911.

- A77 COMMONWEALTH BUREAU OF CENSUS AND STATISTICS Census, 1921. Vol.I: Part I ages, II Birthplaces, III Nationality, V Race, VIII Conjugal Condition, X-XVI Particulars relating to population in Local Government Areas by states and territories. Vol.II: Part XVII Occupations (including unemployment), XVIII-XXIV Particulars relating to dwellings in Local Government Areas by states and territories, XXV Dwellings.
- A78 COMMONWEALTH BUREAU OF CENSUS AND STATISTICS Census, 1933. Three volumes (contents approximately as for 1921 Census) plus Australian Life Tables, 1932-4, and Australian Joint Life Tables, 1932-4.
- A79 COMMONWEALTH BUREAU OF CENSUS AND STATISTICS Census, 1947. Three volumes, plus Statistician's Report and Australian Life Tables, 1946-48.
- A80 COMMONWEALTH BUREAU OF CENSUS AND STATISTICS Census, 1954. Eight volumes. Vols.I-VI Population and Dwellings in states, Local Government Areas, localities and cross-classifications; Vol.VII Territories; Vol.VIII Australia: cross-classifications of the characteristics of population and of dwellings; population and occupied dwellings in localities; Statistician's Report; Australian Life Tables, 1953-1955.
- A81 COMMONWEALTH BUREAU OF CENSUS AND STATISTICS Census, 1961. Eight volumes (contents as for 1954 Census) with Statistician's Report and Australian Life Tables, 1960-62.
- A82 COMMONWEALTH BUREAU OF CENSUS AND STATISTICS Census, 1966. Vol.1, Population: Single Characteristics: Part 1 Age, 2 Marital Status, 3 Birthplace, 4 Nationality, 8 Occupational Status, 9 Industry, 10 Occupation, 11 Race. Vol.2, Population: Related Characteristics: Part 1 Growth and Distribution of the Population,* 2 Demographic Data,* 3 The Overseas-born, 4 The Work-force, 5 Families and Households.* Vol.3, Housing.* Vol.4, Population and Dwellings in Local Government Areas: Parts 1-7, states and territories. Vol.5, Population and Dwellings in Localities: Parts 1-7, states and territories, Part 8 Australia.

(*Denotes that this has not yet been published).

A83 COMMONWEALTH BUREAU
OF CENSUS AND
STATISTICS

Census, 1971. So far field-count statements have been issued for the 1971 census: 1 Population, states and territories, 2 Population, principal urban centres, 3 New South Wales, 4 Victoria, 5 Queensland, 6 South Australia, 7 Western Australia, 8 Tasmania, 9 Northern Territory and Australian Capital Territory, 10 Population, Commonwealth Electoral Divisions. (Ref. nos. 2.71-2.80).

The publication programme for the 1971 Census comprises a series of 14 bulletins. Relevant here are: 1 Summary of Population, 2 Summary of Dwellings, 3 Demographic Characteristics, 4 Birthplace, 5 Labour Force, 6 Population and Dwellings in Local Government Areas and Urban Centres, 7 Characteristics of the Population and Dwellings, Local Government Areas, 8 Characteristics of the Population and Dwellings, Commonwealth Electoral Divisions, 9 Aboriginal Population, 10 Families and Households, 11 Fertility, 12 Geographic Distribution, 14 Catalogue of 1971 Census Tabulations. Bulletins 1-6 consist of a series of separate parts for each state and territory and one for Australia. In Bulletin 6, the Northern Territory is included with the Australian Capital Territory, There is no Australian part to Bulletin 7 and Bulletins 8-14 consist only of an Australian part.

Special Aboriginal censuses

In conjunction with the Commonwealth Census of 1921, an effort was made to estimate the total Aboriginal population in cooperation with the Statisticians and Protectors of Aborigines in each State. It was subsequently decided that a joint Aboriginal census should be taken every year, to ascertain "their numbers and the extent to which they enter into the economic life of Australia", and censuses were taken annually from 1924 to 1941, when they were suspended for the duration. The 1933 Aboriginal census was used to estimate the total Aboriginal population at the time of the 1933 Commonwealth census. An attempt was made to re-establish the annual census in 1944, but the results that year were incomplete and some states opposed the continuation of the special census because of the cost. Consequently it was resolved that they be undertaken only when a census of the general population was performed. This was done in 1947, 1954, 1961 and 1966, although far less detail was obtained than had been the case with the annual censuses. In 1966, for the first time, it was concluded that Aborigines had in fact been fully enumerated at the general population census.

Details of the Aboriginal population are to be found in the Commonwealth Yearbooks and in the Statistician's Reports for the Commonwealth Censuses usually in the form of totals by state. Summaries of the results of the annual Aboriginal censuses were also published by the Commonwealth and some state offices of the Census Bureau, and are held by the Bureau's library in Canberra.

- A84 COMMONWEALTH BUREAU OF CENSUS AND STATISTICS Census Bulletin No.24: Summary Relating to Full-Blood Aborigines, 1933 Census.
- A85 COMMONWEALTH BUREAU OF CENSUS AND STATISTICS Special Statement - full-blood Aborigines, Canberra, 1967, pp.2. Preliminary results of 1966 Census. Details by state as against figures obtained in 1961.
- A86 COMMONWEALTH BUREAU OF CENSUS AND STATISTICS The Aboriginal Population: Revised Statement, Canberra, 1967. Revised results of the 1966 Census.
- A87 COMMONWEALTH BUREAU OF CENSUS AND STATISTICS The Aboriginal Population of Australia: Summary of Characteristics, Canberra, 1969. Further results of the 1966 Census.

For other publications relating to Aboriginal censuses, see below under Publications of other Government and Official Departments.

Other publications of the Commonwealth Bureau of Census and Statistics

- A88 COMMONWEALTH BUREAU OF CENSUS AND STATISTICS Australia - Intercensal Age Distribution of the Population. These have been prepared for the following intervals: 1921-27, 1928-33, 1933-47, 1947-54, 1954-61, 1961-66. Note that no census was taken in 1927-28.
- A89 COMMONWEALTH BUREAU OF CENSUS AND STATISTICS Births: Ref. No.4.4. An annual publication. Various tabulations for states and territories and for Australia, including sex of child, age of parents, nuptiality, single and multiple confinements, birthplace of parents and occupation of father. Age specific birth rates and total fertility for Australia and gross and net reproduction rates for Australia.
- A90 COMMONWEALTH BUREAU OF CENSUS AND STATISTICS Causes of Death: Ref. No.4.7. An annual publication, the first of which appeared in 1963. Previous to this, the information was included as part of the bulletin Demography. Maternal mortality and deaths of children (1) under 4 weeks of age and (2) under one year of age, by cause and sex, for states and territories.
- A91 COMMONWEALTH BUREAU OF CENSUS AND STATISTICS Commonwealth of Australia - Official Year Book. Number 1 in this series was published in 1908. Chapters on Population, Vital Statistics, Housing and Building, Labour, Wages and Prices, Welfare Services, Employment and Unemployment.

- A92 COMMONWEALTH BUREAU OF CENSUS AND STATISTICS Cumulative Fertility: Women Born 1893 to 1953, issued April 1970. This paper supersedes Cumulative Fertility Rates 1908-1965 issued June 1967.
- A93 COMMONWEALTH BUREAU OF CENSUS AND STATISTICS Deaths: Ref. No.4.8. Preliminary death statistics appear as Deaths (Preliminary), Ref. No. 4.19, as soon as figures are available. The annual publication appears later. Information includes infant and maternal mortality, including deaths following abortions, for states and territories and Australia.
- A94 COMMONWEALTH BUREAU OF CENSUS AND STATISTICS Demography, Ref. No.4.9. This annual bulletin containing demographic statistics for Australia was first produced in 1907 as the Population and Vital Statistics Bulletin; in 1922 it became the Vital Statistics Bulletin and in 1938 it became Demography, which has since remained unchanged. It includes sections on Population, Marriages, Divorce, Births, Deaths (Total and Infant), a Statistical Summary for States and Territories and Life Tables. Since 1963, Causes of Death have been excluded - they are published separately.
- A95 COMMONWEALTH BUREAU OF CENSUS AND STATISTICS Divorce, Ref. No.13.1. An annual report. Quarterly bulletins, Ref. No.13.2, are produced in March, June, Sept. and Dec. which are then aggregated into the yearly figures with further cross-tabulations. Tabulations are mainly for Australia, including sex of petitioner, ages and number of children of the marriage, age of parties at the time of marriage and dissolution, number of times the parties have previously been divorced.
- A96 COMMONWEALTH BUREAU OF CENSUS AND STATISTICS Estimated Age Distribution of the Population: States and Territories of Australia, Ref. No.4.15. Produced annually on 30 June. Data for Males, Females and Persons.
- A97 COMMONWEALTH BUREAU OF CENSUS AND STATISTICS Estimated Population: States and Territories (Preliminary), Ref. No.4.16. Produced quarterly in advance of the quarterly Summary of Vital and Population Statistics, Ref. No.4.11.
- A98 COMMONWEALTH BUREAU OF CENSUS AND STATISTICS The Labour Force, Ref. No.6.20. A quarterly publication based upon a regular sample survey of the Australian population.
- A99 COMMONWEALTH BUREAU OF CENSUS AND STATISTICS Marriages, Ref. No.4.10. Marriage statistics are given for both States and Territories and for Australia. Information includes ages of brides and grooms, previous marital status, birthplaces, occupation of grooms and first marriage rates.

- A100 COMMONWEALTH BUREAU OF CENSUS AND STATISTICS Population: Canberra City District. Ref. No.4.17. Produced quarterly at the end of March, June, September and December.
- A101 COMMONWEALTH BUREAU OF CENSUS AND STATISTICS Population Estimates: Capital Cities and Principal Cities and Towns, Ref. No.4.18. Produced annually on 30 June.
- A102 COMMONWEALTH BUREAU OF CENSUS AND STATISTICS Projections of the Population of Australia, States and Territories, 1972 to 2001 (1970 Base Year). Ref. No.4.13. This series of projections supersedes projections issued by the Bureau in Feb. 1965.
- A103 COMMONWEALTH BUREAU OF CENSUS AND STATISTICS Quarterly Summary of Australian Statistics. Issued in March, June, Sept. and Dec. since Dec. 1917. Relevant sections are Population and Vital Statistics; Employment and Unemployment; Social Statistics.
- A104 COMMONWEALTH BUREAU OF CENSUS AND STATISTICS Summary of Vital and Population Statistics. Ref. No.4.11. A quarterly publication. Originally it started as the Monthly Australian Demographic Review in January 1951, then the Australian Demographic Review at the end of 1956. It was issued as needed, i.e. quarterly for summaries of population and vital statistics, and other occasional issues for annual statistics e.g. births. At the beginning of 1969 it became the Summary of Vital and Population Statistics, and the annual statistics which had previously been included were issued separately. This publication is issued before the Quarterly Summary of Australian Statistics.
- Publications of the Commonwealth Bureau of Census and Statistics - State and Territory Offices. Including data on Aborigines.
- A105 COMMONWEALTH BUREAU OF CENSUS AND STATISTICS - AUSTRALIAN CAPITAL TERRITORY Australian Capital Territory - Statistical Summary. This publication has been issued annually since 1963. There are sections on Population and Dwellings; Labour, Wages and Prices; and Social Statistics.
- A106 COMMONWEALTH BUREAU OF CENSUS AND STATISTICS - NEW SOUTH WALES OFFICE The Official Yearbook of New South Wales. This edition started in 1904-5 and is produced annually in parts. The relevant sections are: Part III Population and Vital Statistics; IV Food, Prices, Retail Trade and Labour; VIII Social Condition.

- A107 COMMONWEALTH BUREAU OF CENSUS AND STATISTICS - NEW SOUTH WALES OFFICE New South Wales: Statistical Register. An annual publication since 1849 and produced in parts. Those to consult are "Population and Vital Statistics" and "Social Condition".
- A108 COMMONWEALTH BUREAU OF CENSUS AND STATISTICS - NEW SOUTH WALES OFFICE New South Wales: Statistical Bulletin. This quarterly bulletin contains sections on Population, Migration and Vital statistics; Employment; and Social Condition.
- A109 COMMONWEALTH BUREAU OF CENSUS AND STATISTICS - NORTHERN TERRITORY OFFICE Northern Territory Statistical Summary. This annual publication began in 1960 and it provides information on Population and Dwellings and on Social Statistics.
- A110 COMMONWEALTH BUREAU OF CENSUS AND STATISTICS - QUEENSLAND OFFICE Queensland Year Book. This annual publication which started in 1937 contains sections on Population and Health; Social Services; and Employment.
- A111 COMMONWEALTH BUREAU OF CENSUS AND STATISTICS - QUEENSLAND OFFICE Statistics of Queensland. First produced in 1860, these statistics are issued annually in parts, the relevant ones are:- Part A. Population and Vital Statistics; G. Social Statistics.
- A112 COMMONWEALTH BUREAU OF CENSUS AND STATISTICS - SOUTH AUSTRALIA OFFICE South Australian Year Book. The first in this series was produced in 1966. There are sections on Population; Social Environment; and Employment.
- A113 COMMONWEALTH BUREAU OF CENSUS AND STATISTICS - SOUTH AUSTRALIA OFFICE Statistical Register of South Australia. An annual publication since 1854. Parts include Social Statistics; Demography; and Statistical Summary.
- A114 COMMONWEALTH BUREAU OF CENSUS AND STATISTICS - SOUTH AUSTRALIA OFFICE Quarterly Abstract of South Australian Statistics. This quarterly publication contains sections on Population and Demography; Social Statistics; and Employment and Wages.

- A115 COMMONWEALTH BUREAU OF CENSUS AND STATISTICS - TASMANIA OFFICE Tasmanian Year Book. This series started in 1967. Relevant chapters are Demography; Social Welfare and Health Services; Labour, Prices and Wages.
- A116 COMMONWEALTH BUREAU OF CENSUS AND STATISTICS - TASMANIA OFFICE Statistics of the State of Tasmania. An annual publication commencing 1923-24 and continuing until 1967-68. The various parts are now published separately, the relevant ones being Demography, Labour, Wages and Prices; and Social Statistics.
- A117 COMMONWEALTH BUREAU OF CENSUS AND STATISTICS - VICTORIA OFFICE Victorian Year Book. Relevant chapters are Demography; Industrial Conditions; Employment and Prices; Social Conditions.
- A118 COMMONWEALTH BUREAU OF CENSUS AND STATISTICS - VICTORIA OFFICE Demographic Statistics. First issued in 1961, this annual publication contains Population, Marriages, Divorce, Births and Deaths statistics.
- A119 COMMONWEALTH BUREAU OF CENSUS AND STATISTICS - VICTORIA OFFICE Divorce Statistics. The first issue of this annual publication was in 1945.
- A120 COMMONWEALTH BUREAU OF CENSUS AND STATISTICS - VICTORIA OFFICE Estimated Age Distribution of the Population of Victoria. This has been produced annually since 1958.
- A121 COMMONWEALTH BUREAU OF CENSUS AND STATISTICS - VICTORIA OFFICE Estimated Population and Dwellings by local Government Areas. An annual publication since 1955.
- A122 COMMONWEALTH BUREAU OF CENSUS AND STATISTICS - VICTORIA OFFICE Hospital Morbidity Statistics. These annual statistics were first published for 1957 to 1959.
- A123 COMMONWEALTH BUREAU OF CENSUS AND STATISTICS - VICTORIA OFFICE Victorian Monthly Statistical Review. The first issue of this monthly bulletin was in 1960. It provides monthly and quarterly statistics for Population and Vital statistics; Employment and Unemployment.

- A124 COMMONWEALTH BUREAU OF CENSUS AND STATISTICS - WESTERN AUSTRALIA OFFICE Western Australia Year Book. Number 1 in this series started in 1957. Occasional yearbooks were produced before this date.
- A125 COMMONWEALTH BUREAU OF CENSUS AND STATISTICS - WESTERN AUSTRALIA OFFICE Statistical Register of Western Australia. An annual publication since 1896. Part I, Population and Vital Statistics. Part IX, Hospitals and Charitable Institutions. Part XII Retail Prices, Wages, Employment and Miscellaneous.
- A126 COMMONWEALTH BUREAU OF CENSUS AND STATISTICS - WESTERN AUSTRALIA OFFICE Western Australia: Divorce. An annual publication.
- A127 COMMONWEALTH BUREAU OF CENSUS AND STATISTICS - WESTERN AUSTRALIA OFFICE Quarterly Statistical Abstract. This quarterly publication contains a section on Population and Vital Statistics.
- A128 COMMONWEALTH BUREAU OF CENSUS AND STATISTICS - WESTERN AUSTRALIA OFFICE Monthly Statistical Summary. Population and Vital Statistics are given in this publication.

Publications of other Government and Official Departments.

- A129 COMMONWEALTH DEPARTMENT OF IMMIGRATION News Releases. These appear irregularly. Occasionally topics relevant to family and fertility occur.
- A130 COMMONWEALTH DEPARTMENT OF LABOUR AND NATIONAL SERVICE News Releases. Irregular press statements relevant to family and fertility.
- A131 COMMONWEALTH DEPARTMENT OF SOCIAL SERVICES Press Statements. These appear irregularly on current topics, e.g. child endowment.

- A132 DEPARTMENT OF HEALTH - VICTORIA CONSULTATIVE COUNCIL ON MATERNAL AND PERINATAL MORTALITY Annual Report under the title: Survey of Perinatal Deaths in Victoria.
- A133 THE HOUSING COMMISSION - NEW SOUTH WALES Annual Report. Provides details of family structure in the State.
- A134 THE HOUSING COMMISSION - NORTHERN TERRITORY Annual Report. Details are given of family structure in the Territory.
- A135 NEW SOUTH WALES - ABORIGINES PROTECTION BOARD Report. An annual report from 1883 until 1938/39. Includes annual population figures for fullblood and mixed blood natives, employment and welfare.
- A136 NEW SOUTH WALES - ABORIGINES WELFARE BOARD Report. An annual report from 1939/40 onwards. Includes population figures, employment, welfare.
- A137 NEW SOUTH WALES - DEPARTMENT OF CHILD WELFARE AND SOCIAL WELFARE - DIRECTORATE OF ABORIGINAL WELFARE Report. These started in 1970.
- A138 NORTHERN TERRITORY ADMINISTRATION - WELFARE BRANCH Annual Report. First produced in 1958, this report has sections on Child, Family and Community Welfare; and on Aboriginal Advancement.
- A139 NORTHERN TERRITORY ADMINISTRATION - WELFARE BRANCH Population Statistics and Estimates of Future Growth for Various Missions and Districts. Also fertility for some. Groote Eylandt, 1961; Methodist Overseas Mission, Elcho Island, 1963; Methodist Overseas Mission, Milingimbi, 1963; Mom Yirkala, 1961; Northwest Arnhem Land Survey, 1961; Port Keats, 1961; Areyonga, 1961; Hermannsburg Mission, 1961; Rose River, 1961.
- A140 QUEENSLAND - HOME SECRETARY'S DEPARTMENT - ABORIGINAL SUB-DEPARTMENT Reports. These were produced from 1918 to 1938.

- A141 QUEENSLAND DEPARTMENT OF HEALTH AND HOME AFFAIRS - SUB-DEPARTMENT OF ABORIGINALS Report. Prepared annually from 1935-38. Statistics on population, health and employment.
- A142 QUEENSLAND - DEPARTMENT OF HEALTH AND HOME AFFAIRS Report of the director of Native Affairs. Produced annually from 1939-1965. Gives population statistics, health, employment.
- A143 QUEENSLAND - ABORIGINAL AND ISLAND AFFAIRS Annual Report of the Director. Starting with the year ending 30th June 1966. Includes population statistics, health, housing, employment.
- A144 SOUTH AUSTRALIA - ABORIGINES DEPARTMENT Reports of the Chief Protector of Aborigines. Started in 1938/39.
- A145 SOUTH AUSTRALIA - ABORIGINES PROTECTION BOARD Reports. These have been prepared for 1946 to 1962.
- A146 SOUTH AUSTRALIA - DEPARTMENT OF ABORIGINAL AFFAIRS ABORIGINAL AFFAIRS BOARD Reports. These have been produced since 1962. Include estimated population, housing, employment.
- A147 VICTORIA - THE SOCIAL WELFARE DEPARTMENT Annual Report. Reports are given on the Family Welfare Division and the Youth Welfare Division. Topics included are Foster Care; Adoption and Family Counselling.
- A148 VICTORIA - ABORIGINES WELFARE BOARD Reports. These have been produced from 1958 to 1967.
- A149 VICTORIA - MINISTRY OF ABORIGINAL AFFAIRS Reports. These started in 1969.
- A150 WESTERN AUSTRALIA ABORIGINES DEPARTMENT Reports of the Chief Protector of Aborigines. These were prepared from 1908-1936.
- A151 WESTERN AUSTRALIA NATIVE AFFAIRS DEPARTMENT Reports of the Commissioner of Native Affairs. These were produced from 1937-1958.
- A152 WESTERN AUSTRALIA NATIVE WELFARE DEPARTMENT - COMMISSIONER OF NATIVE AFFAIRS Reports. These have been prepared for 1959 to 1968.

(2) New Zealand

The preparation and publication of statistics on fertility and related subjects in New Zealand are primarily the concern of the Department of Statistics. The Department's principal annual publication is the "Report on Vital Statistics", which contains detailed statistical analyses of births and still-births, according to sex, marital status of mother, age of mother, parity and duration of marriage; and of marriages, according to age of bride and groom, marital status (single, widowed, divorced) at marriage and birth place. The majority of these tabulations date back to the early years of the present century. Data on divorces are contained in the annual report "Statistics of Justice". Statistics of registrations of births, still-births, infant deaths and marriages are some of the continuing quarterly and annual statistical series published in the "Monthly Abstract of Statistics".

Moreover, the Department of Statistics prepares projections of births (as a part of its general population projections) and projections of net family formation. Since 1950, the Department of Education has also prepared a series of fertility projections for the purpose of projecting school enrolments. The assumptions underlying these latter projections are derived in the light of past trends in fertility, while the Department of Statistics' projections have been based on the general assumption that age and marital status specific birth rates will remain constant at given levels - although a recent departure from this procedure has been made.

A question on fertility was introduced at the 1911 Census of Population and repeated in the Censuses of 1916 and 1921, while a similar question was included in the 1971 Census of Population and Dwellings, conducted recently.

In 1911, 1916 and 1921 the question was limited to the fertility of existing marriages. The 1971 question nominally investigated the lifetime fertility of ever-married women, although this was restricted to existing marriages because of public opposition just before the census was held. The scope of the question, limitations of data and the major features of results obtained are described in the general reports of the various Censuses of Population concerned.

Statistics on households provide some important, though indirect, information on family size. Such statistics have been obtained at four Censuses of Population and Dwellings, viz. 1921, 1926, 1966 and 1971.

In addition, the Department of Statistics has also undertaken studies on special demographic topics. These include two studies on the pattern of widowhood and the remarriage of widows in New Zealand. These studies are based on the remarriage and mortality experience of widows during 1955-7 and 1965-7, and describe the effects of age, and duration of widowhood, on the expected length of widowhood and the probability of remarriage.

The incidence of ex-nuptial births in New Zealand increased markedly during the 1960s. As an aid to informed public discussion of the trend reports were prepared:

- (1) Ex-nuptial births - Demographic influence on Statistics (prepared

by the Department of Statistics), examines the individual roles of various demographic variables in the rise in the proportion of ex-nuptial births to all births during the 4-years 1962-5. These observations are elaborated upon in the

- (2) 'Inter-departmental Report on Ex-nuptial Births'. A joint effort of five government departments, viz. Education, Health, Justice, Maori and Island Affairs and Statistics, this report also deals with certain social aspects of the question and describes the Maori-European differentials in ex-nuptial births during 1962-7, drawing attention to the uncertainties surrounding Maori data, notably the prevalence of Common-law marriages among Maoris.

Censuses of New Zealand. The 1931 census was not taken due to the economic recession.

- A153 DEPARTMENT OF STATISTICS Census, 1921. General Report. Part I Population, II Ages, IX Conjugal Condition, X Fertility, XI Orphanhood, XII Dependency, XIV Households. Appendix A Maori Census.
- A154 DEPARTMENT OF STATISTICS Census, 1926. Vol. I Geographical Distribution, III Ages, IV Conjugal Conditions, V Orphan and Dependent Children, VI Race Aliens, VII Native-born and Foreign-born, IX Industrial and Occupational Distribution, X Unemployment from Sickness and other Causes, XI Incomes, XII Families and Households, XIV Maori and Half-caste Population, XVII General Report.
- A155 DEPARTMENT OF STATISTICS Census, 1936. Vol. I Increase and Location of Population, III Maoris, IV Ages and Marital Status, V Orphan and Dependent Children, VII Birthplaces, IX Race, X Industries and Occupations, XI Unemployment, XII Incomes, XIII Dwellings and Households. General Report (not completed due to war conditions). Appendix D Life Tables.
- A156 DEPARTMENT OF STATISTICS Census, 1945. In lieu of 1941 and 1946 censuses. Vol. I Increase and Location of Population, III Maori Census, IV Ages and Marital Status, V Dependent Children, VII Birthplaces and Duration of Residence of Overseas-born, VIII Race, IX Industries and Occupations, X Incomes, XI Dwellings and Households.
- A157 DEPARTMENT OF STATISTICS Census, 1951. Vol. I Increase and Location of Population, II Ages and Marital Status, IV Industries, Occupations and Incomes, VI Maori Census, VII Dwellings and Households, VIII General Report. Appendix B Life Tables 1950-52 and Value of Annuities.

- A158 DEPARTMENT OF STATISTICS Census, 1956. Vol. I Increase and Location of Population, II Ages and Marital Status, IV Industries and Occupations, V Incomes, VII Race, VIII Maori Population and Dwellings, IX Dwellings and Households, X General Report. Appendix B Life Tables 1955-57 and Value of Annuities.
- A159 DEPARTMENT OF STATISTICS Census, 1961. Vol. 1 Increase and Location of Population, 2 Ages and Marital Status, 4 Industries and Occupations, 5 Incomes, 8 Maori Population and Dwellings, 9 Dwellings and Households, 10 General Report with title, "New Zealand People, 1961". Appendix B New Zealand Life Tables.
- A160 DEPARTMENT OF STATISTICS Census, 1966. Vol. 1 Increase and Location of Population, 2 Ages and Marital Status, 4 Industries and Occupations, 5 Incomes, 7 Race, 8 Maori Population and Dwellings, 9B Households, 10 General Report. Life Tables and Life Annuity Tables.
- A161 DEPARTMENT OF STATISTICS Census, 1971. Provisional Results: Census of Population and Dwellings. Life Tables and Life Annuity Tables, 1965-7.

Other publications of government departments in New Zealand.

- A162 DEPARTMENT OF EDUCATION Revised School Enrolment Projections: Expected Births 1966-1974, Wellington, Aug. 1966. Mimeographed.
- A163 DEPARTMENT OF HEALTH Medical Statistics Report. This report started as an annual publication in 1948. It is produced annually in three sections but only two are relevant: Part I Mortality and demographic data. Part III Hospital and selected morbidity data.
- A164 DEPARTMENT OF STATISTICS New Zealand Official Yearbook. This book has been produced annually since 1893. It contains information on population, vital statistics, public health and social welfare.
- A165 DEPARTMENT OF STATISTICS Population, Migration and Building. This annual statistical report has been produced under various names since 1921.
- A166 DEPARTMENT OF STATISTICS Report on the Justice Statistics, Wellington. Annual, first published in 1921.
- A167 DEPARTMENT OF STATISTICS Vital Statistics. This annual statistical report has been produced since 1921. It contains sections on Births, Deaths, Marriages and Divorces.

- A168 DEPARTMENT OF STATISTICS Monthly Abstract of Statistics. This monthly bulletin which started in 1914 provides population and vital statistics information as well as annual statistics for divorce in the "Monthly Notes". Supplements and Special Supplements are produced with the Abstract but these are listed separately under relevant headings. Population and Labour force projections first appeared as a supplement to the June 1958 Monthly Abstract of Statistics, and have subsequently been revised at annual intervals as indicated in Tables 3 and 4 of the June issue.
- A169 DEPARTMENT OF STATISTICS New Zealand Life Tables (Maori), Wellington, 1953. Special Supplement to the Monthly Abstract of Statistics, Nov. 1953. New Zealand Life Tables (Non Maori), Wellington, 1953. Special Supplement to the Monthly Abstract of Statistics, July 1953.
- A170 DEPARTMENT OF STATISTICS Population Projections: Non-Maori, Wellington, 1953. Supplement to the Monthly Abstract of Statistics, Nov. 1953. Population Projections: New Zealand (including Maori), Wellington, 1953. Supplement to the Monthly Abstract of Statistics, Dec. 1953.
- A171 DEPARTMENT OF STATISTICS Study of Population Age Structures, Wellington, 1964. Supplement to the Monthly Abstract of Statistics, Jan. 1964.
- A172 DEPARTMENT OF STATISTICS Projection of Net Family Formation 1965-75, supplement to Monthly Abstract of Statistics, Sept. 1965.
- A173 DEPARTMENT OF STATISTICS New Zealand Population and Labour Force Projections 1965-1990, Wellington, Nov. 1965.
- A174 DEPARTMENT OF STATISTICS New Zealand Population and Labour Force Projections 1968-2000, Wellington, Dec. 1968.
- A175 HOUSE OF REPRESENTATIVES Appendix to the Journal of the House of Representatives of New Zealand, School Enrolment Projections for the years 1959-72, Session 1959, Vol. II, E-2. Fertility projections.
- A176 HOUSE OF REPRESENTATIVES Appendix to the Journal of the House of Representatives of New Zealand, School and University Enrolment Projections for the years 1967-1980, Session 1969, E-2. Fertility projections.

c. Journals

- A177 Australian and New Zealand Journal of Medicine, formerly the Australasian Annals of Medicine. A quarterly journal which has appeared under this name since 1971.
- A178 Australian and New Zealand Journal of Sociology. Issued since 1965, by the Sociological Association of Australia and New Zealand; this journal contains many articles relevant to the bibliography. Two issues per year.
- A179 Australian Geographer. The official journal of the New South Wales Geographical Society which started in 1929. Two issues per year.
- A180 Australian Institute of Aboriginal Studies Newsletter. Starting in 1963 this newsletter has been produced approximately twice a year by the Australian Institute of Aboriginal Studies, Canberra. A bibliography of recent additions to the card index (see section Aa) kept at the Institute is contained in each newsletter.
- A181 Australian Journal of Social Work. A quarterly journal produced by the Australian Association of Social Workers. First issue was in 1947.
- A182 Australian Law Journal. A monthly journal, which started in 1927 and which is produced by the Law Book Co., 301-5 Kent Street, Sydney 2000.
- A183 Australian Quarterly. This quarterly journal produced by the Australian Institute of Political Science, Sydney, started in 1929.
- A184 Australian Social Issues formerly Australian Journal of Social Issues. Starting in 1961, this journal has had three issues each year. It is produced by the Australian Council of Social Service. Contained in each issue is "Journal Abstracts" which are relevant to Australian social issues.
- A185 Australian Women's Digest. A monthly journal published in Sydney by the United Association of Women from 1944 to 1948.
- A186 Bulletin. This weekly started in 1880 and is published in Sydney. Popular articles.
- A187 Current Affairs Bulletin. This fortnightly bulletin which started in 1947 is produced by the Department of Adult Education, University of Sydney. Each issue contains one article only of current interest.
- A188 Dawn. Starting in 1952, this monthly journal was produced by the Aborigines' Welfare Board, New South Wales, Sydney. Much information is given including the demography and employment of Aborigines. It became New Dawn: a Magazine for the Aboriginal people of New South Wales in 1970, produced by the Department of Child Welfare and Social Welfare, New South Wales.

- A189 Demography. An international journal which started in 1964. It is issued quarterly by the Population Association of America, Chicago. Occasional articles are relevant to Australia and New Zealand.
- A190 Economic News. The Commonwealth Bureau of Census and Statistics, Queensland Office, Brisbane, produced this quarterly from 1932-1956. For many years edited by Colin Clark.
- A191 Economic Record. The Economic Society of Australia and New Zealand have produced this quarterly since 1925. Articles have been produced regularly on population and the birth rate.
- A192 Eugenics Review. The quarterly journal of the Eugenics Society, Edinburgh, from 1909-1968. It contains abstracts of articles relevant to eugenics. It was replaced by the Journal of Biosocial Science in 1969.
- A193 Journal of Biosocial Science. A relatively new journal devoted to biological aspects of sociology. It has been produced quarterly for the Galton Foundation, Oxford since 1969. It supersedes Eugenics Review.
- A194 Journal of Marriage and the Family. This quarterly journal which began in 1939, is produced by the National Council of Family Relations, Minneapolis, Minn.
- A195 Journal of Societal Issues. The Cairnmillar Institute in Melbourne first produced this journal in 1964. There are two issues each year.
- A196 Journal of the Polynesian Society: a Quarterly Study of the Peoples of the Pacific Area. The official journal of the Polynesian Society, Wellington, which has been issued since 1892. Despite the name, articles on Australian Aborigines appear occasionally, as well as more frequently on Maoris.
- A197 Medical Journal of Australia. The official journal of the Australian Medical Association, it has been issued weekly since 1913. Frequent articles relevant to this bibliography.
- A198 Milbank Memorial Fund Quarterly. Quarterly from 1923, devoted to "articles of interest to the field of public health, defined broadly enough to include problems of population". Latterly less concerned with demography.
- A199 New Zealand Geographer. The journal of the New Zealand Geographical Society, Christchurch. Two issues each year have appeared since 1945.
- A200 New Zealand Medical Journal. The official journal of the Medical Association of New Zealand. Weekly since 1900/01.
- A201 Oceania: a Journal Devoted to the Study of the Native Peoples of Australia, New Guinea and the Islands of the Pacific. This quarterly journal has been published by the University of Sydney since 1930.

- A202 Pacific Viewpoint. The Department of Geography at the Victoria University of Wellington has issued this journal twice per year since 1960.
- A203 Personnel Practice Bulletin. A bulletin issued by the Commonwealth Department of Labour and National Service, Australia. It has appeared quarterly since 1945. There are frequent articles about women in the workforce.
- A204 Population Index. This quarterly bibliography was started in 1935 by the Office of Population Research, Princeton University and by the Population Association of America, Inc.; "Current Items" also contains full length articles.
- A205 Population Studies. An international journal produced quarterly by the Population Investigation Committee, London School of Economics. The first issue was in 1947. Occasional articles relevant to Australia and New Zealand.
- A206 Social Survey. Printed and published monthly in Australia by the Institute of Social Order, Belloc House, 12 Sackville Street, Kew, Victoria.
- A207 Transactions of the Institute of Actuaries of Australia and New Zealand. The annual publication of the Institute of Actuaries of Australia and New Zealand. From 1897-1918, it was the official publication of the Actuarial Society of New South Wales; from 1919-59, the Actuarial Society of Australasia; from 1960-62, the Actuarial Society of Australia and New Zealand; and from 1963 as above.

SECTION B: GENERAL POPULATION STUDIES

This section consists of general population studies relevant to fertility and family formation. Certain non-technical articles and books have been included as examples of public attitudes. Items such as population projections, age distribution estimates, etc., which appear regularly, are found in Section A, under the appropriate government departments. The references are divided into subsections: a. Australia and b. New Zealand; they are further subdivided into (1) General (2) Immigrants and (3) Minority groups. It should be noted that much of interest for (2) and (3) will be found in works listed under (1). Articles which refer to both Australia and New Zealand are found under Australia. Within the subsections, the items are arranged by year of publication.

a. Australia

(1) General

- B1 KNIBBS G.H. "Characteristics of the development of the population of Australia and the effect of the war thereupon", Yearbook of the Commonwealth of Australia, 13:1126-8, 1920.
- B2 KNIBBS G.H. "Legislation relating to registration of births, deaths and marriages and legitimation of children", Yearbook of the Commonwealth of Australia, 13:212-55, 1920.
- B3 HUNTINGTON E. West of the Pacific, New York, 1925. Concerned with optimum population.
- B4 KNIBBS G.H. "The growth of human populations and the laws of their increase", Metron, 5(3):147-62, 1925.
- B5 WICKENS C.H. "Australian population: its nature and growth", Economic Record, 1:1-16, 1925.
- B6 EAST E.M. Mankind at the Crossroads, New York, 1926. Concerned with optimum population.
- B7 KNIBBS G.H. "The laws of growth of a population: part I", Journal of the American Statistical Association, 21:382-98, 1926.
- B8 BRIGDEN J.B. "Population: the world and Australia", in Pitt Cobbett Essays and Addresses, Second Series, Hobart, Workers' Education Association of Tasmania, 1927, pp.7-12.
- B9 BRUCE S.M. Premier's Conference Report, 1927. Especially pp.33-4.
- B10 KNIBBS G.H. "The laws of growth of a population: part II", Journal of the American Statistical Association, 22:49-59, 1927.

- B11 KNIBBS G.H. The Shadow of the World's Future, London, 1928, pp.131.
- B12 PHILLIPS P.D. and WOOD G.L. The Peopling of Australia, Melbourne, 1928. Revised edition, 1968.
- B13 WICKENS C.H. "Australian population: its nature and growth", Chap. II of The Peopling of Australia, eds. P.D. Phillips and G.L. Wood, Melbourne, 1928.
- B14 BELZ M.H. "Theories of population and their application to Australia", Economic Record, 5:253-62, 1929. Concerned with optimum population, and fitting logistic curves to the growth of the populations of Australia, New South Wales and Tasmania.
- B15 WICKENS C.H. "Population", Yearbook of the Commonwealth of Australia, 22:886-937, 1929.
- B16 WOOD G.L. "Population policy in the light of the depression", Australian Quarterly, 2:41-9, 1930.
- B17 CILENTO R.W. "The value of the medical services in relation to problems of depopulation", Medical Journal of Australia, 2:480, 1932.
- B18 EXLEY H.J. "Population trends in Australia", Economic Record, 9:91-5, June 1933. Discusses misleading features of natural increase and predicts a stable population not exceeding 8½ millions.
- B19 MAULDON F.R.E. "Statistics of the nation's growth and vitality", Chap. 4 of his The Use and Abuse of Statistics: With Special Reference to Australian Economic and Social Statistics in Peace and War, Perth, 1933, revised edition 1944.
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SECTION C: LOCAL POPULATION STUDIES

This section is divided into a. Australian and b. New Zealand local population studies, with subsections entitled (1) General and (2) Special groups, such as Aborigines, Maoris, immigrants, adolescents, etc. Refer to Section A for periodic government publications.

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SECTION D: FERTILITY

This section contains the following subsections: a. General Fertility, b. Differential Fertility, and c. Local Fertility Studies. Articles on the declining birthrate in the earlier part of this century have been included here. Refer to Section A for periodic government publications.

a. General fertility

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- D47 CUTHBERT G. "Filling the empty cradles", Chap. 3 of A White Australia: Australia's Population Problem, ed. W.D. Borrie, 1947, pp.88-114 and discussion, pp.114-35.
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ASSOCIATION New Zealand Must Populate or Perish, Christchurch, 1947, pp.20.

- D49 HAJNAL J. "The analysis of birth statistics in the light of the recent international recovery of the birth rate", Population Studies, 1(2):137-64, Sept. 1947. Study of the changes in the proportion of women married and of the distribution of married women by duration of marriage; also size of family by cohort relating yearly fertility rates to the number already born to the marriages in question. Comparing German and Australian data.
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- D51 POLLARD A.H. "The principles and limitations of fertility indices", Transactions of the Actuarial Society of Australasia, 6:9-24, 1947.
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- D61 KARMEL P.H. "Population replacement: Australia 1947", Economic Record, 25(49):83-8, Dec. 1949. Extension of Karmel, 1944 q.v. Compares index of current marriage fertility with the net reproduction rate for each year.
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SECTION E: BIRTH CONTROL

This section contains the following subsections: a. General, b. Family Planning organisations, c. Oral Contraception, and d. Sterilization.

a. General

- E1 NEW ZEALAND MEDICAL JOURNAL "Birth control", N.Z.M.J., 21:341-2, 1922.
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- E8 FENNELLY P. The Dangers of Birth Control, Melbourne, 1933, pp.38. Lectures delivered in the Adelaide Town Hall, Mar. 27th. 1933.
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- E10 SIMPSON J.J. Birth Control for the Workers Imperative, Melbourne, 28 July 1934, pp.16. On the theme "Birth control for the workers is only a humane act and justice to the unborn".
- E11 VICTORIAN PARLIAMENT Debates on The Victorian Police Offences (Contraceptives) Bill 1935. Legislative Assembly: 2, 10 and 17 Oct. Legislative Council: 23 Oct., and 6 Dec. This Act, since removed to the Summary Offences Act (Victoria) 1966, prohibits the advertising of contraceptives.

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- E22 MacPHERSON M. and PARSONS I. "A survey of the pregnancies of 2,000 Australian women, with special reference to: (a) the effect of the use of contraceptives; (b) the incidence of pregnancies terminating in other organ live births", pp.21-5 in Report of the Nineteenth Session of the National Health and Medical Research Council..., Canberra, 1945.
- E23 WALLACE V.H. "Would the complete prohibition of the manufacture and sale of contraceptives raise the birth-rate?", Chap. 6 of his Women and Children First: An Outline of a Population Policy for Australia, Melbourne, 1946.
- E24 MEARS E. "Human fertility: some modern aspects of sub-fertility and contraception", New Zealand Medical Journal, 49:384-93, Aug. 1950. Discussion of the advantages and disadvantages of available contraceptive methods.
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- E32 INGLIS K.S. "The Australian Catholic community", pp.7-32 in Catholics and the Free Society: an Australian Symposium, Melbourne, 1961. Discusses the gap between Catholic dogma and practice in relation to birth-control, mixed marriage and divorce in Australia.
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- E34 LLOYD-GREEN L. "Family planning", Chap. 24 in The Family Today: Its Role in Personal and Social Adjustment, ed. A. Stoller, Melbourne, 1962.
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- E37 NEW SOUTH WALES HUMANIST SOCIETY Report on Contraception, prepared by the Subcommittee on Sex, Marriage and Divorce and presented to the Society, December, 1963, pp.8. Gives sales estimates and breakdown of the cost of oral contraceptives.
- E38 AUSTRALIAN AND NEW ZEALAND ASSOCIATION FOR THE ADVANCEMENT OF SCIENCE Symposium on the Control of Human Fertility in Australia, convened and chaired by Dr W.K. Whitten and presented to Section 'O' Pharmaceutical Science, 1964 Congress. Some of the papers published in the Medical Journal of Australia Jan. 16, 1965, are listed individually in this bibliography.
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- E44 JOHNSTON S.W. "Control of human fertility in Australia: law and policy", Medical Journal of Australia 1: 73-6, 1965, reprinted in Journal of Societal Issues, 1(2):48-59, Winter 1965.
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- E83 THE REVIEW "Young Liberals and contraception", The Review, 2(12), 8 Jan. 1972.
- E84 TILLOTT S.M. "Planned reproduction", paper given at "New Zealand Countryside in 1980", The Population Conference, Victoria University of Wellington, 18-19 Aug. 1972, pp.3.
- E85 SAMUEL P. "The furtive pill-pushers", The Bulletin, 94, (4798):20-1, 18 Mar. 1972. Article about an ANU students' paper publishing advertisements for contraceptives and the law.
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b. Family planning organisations

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- E94 LOWE G. "Family Planning Association of New Zealand", pp.193-4 of Population and World Resources in Relation to the Family, Fourth International Conference on Planned Parenthood, 17-22 August 1953, Stockholm, London, 1954. History starting with the formation of the Sex, Hygiene and Birth Regulation Society in 1935.
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- E96 RACIAL HYGIENE ASSOCIATION OF AUSTRALIA Bulletin. Started in Dec. 1959 and issued quarterly until it became Family Planning Association of Australia Bulletin in May 1961. Prior to 1959 a Monthly Bulletin appeared irregularly.
- E97 FAMILY PLANNING ASSOCIATION OF AUSTRALIA The Family Planning News, the official organ of the Family Planning Association of Australia, Sydney, which started in 1964.
- E98 NEW ZEALAND FAMILY PLANNING ASSOCIATION Choice, magazine of the New Zealand Family Planning Association Inc. First edition in 1963. Since 1964 it has been issued quarterly.

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- E102 CHESSELL D. and PATERSON D. Planning Families: an Exploratory Study of the Attitudes and Reactions of Women attending the Brotherhood of St. Laurence Family Planning Clinic, Melbourne, March 1970.
- E103 VICTORIAN COUNCIL OF SOCIAL SERVICE Trends in Family Planning, Melbourne, Sept. 1971. Contents: Wilmot E. "Family Planning Services in Victoria"; Wilhelm D.L. "Family Planning in New South Wales"; Betheras G. "Trends in Family Planning in Victoria". Gives full details of the services currently available in Victoria and New South Wales.
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c. Oral contraception

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- E109 GOLDIE A. "A doctor answers the critics of the Pill: interview with J.W. Goldzieher", Woman's Day, (444):4-5, 21 June 1965.
- E110 MARTIN L. "Future possibilities for oral contraception in Australia", Medical Journal of Australia, 1: 77-9, 1965.
- E111 NEW ZEALAND ECONOMIST AND TAX PAYER "'The Pill' makes birth-rate sick", New Zealand Economist and Taxpayer, 27(1):3, 1965. Decline in the birthrate between 1960 and 1964 consequent upon the introduction of oral contraceptives.
- E112 PLANT G.L. "Production and quality control of an oral contraceptive", Medical Journal of Australia, 1: 70-3, 1965.
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- E114 SMIBERT J. "Classification of oral contraceptives", Medical Journal of Australia, 1:162, 1965. Lists contraceptive pills available in Australia.
- E115 SMIBERT J. "The Pill: its place in history", Medical Journal of Australia, 2:468-9, 11 Sept. 1965.
- E116 CURRENT AFFAIRS BULLETIN "Pills and populations", C.A.B., 40(1):3-16, 5 June 1967.
- E117 JONES G.W. and MAULDIN W.P. "Use of oral contraceptives with special reference to developing countries", Studies in Family Planning, (24):1-12, Dec. 1967. Gives an estimate of the number of women using oral contraceptives in Australia and New Zealand.
- E118 PRESTON Y. "The case for a cut in tax and margins", Australian Financial Review: 2, 5 Apr. 1967.

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- E127 CAREY H.M. "Principles of oral contraception: 1. Mode of Action of Oral Contraceptives", Medical Journal of Australia, 2:1184-6, 1971.
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- E130 DANIEL W. "A Catholic Pill?", Australasian Catholic Record, 48:25-32, 1971.
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- E133 ROBINSON M.B. "The Pill stages a comeback", Bulletin, 93:36-7, Mar. 1971.
- E134 WALLACE M.R. "Oral contraceptives and severe hypertension", Australian and New Zealand Journal of Medicine, 1(1):49-52, Feb. 1971.
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SECTION G: MARRIAGE

All aspects of marriage are included in this section. Refer to Section A for periodic government publications relating to marriage.

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SECTION H: MARITAL AND FAMILIAL BREAKDOWN

This section brings together all aspects of marital and familial breakdown. It is divided into the following sections: a. Divorce and Marital Disharmony, b. Deserted Wives and Broken Families, and c. Widowhood. Refer to Section A for periodic government publications.

a. Divorce and marital disharmony

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SECTION I: EXTRA-MARITAL SEXUAL BEHAVIOUR AND BIRTHS

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SECTION K: WOMEN

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a. General

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SECTION L: THE FAMILY

This section has been divided into the following subsections: a. The Australian Family, b. The New Zealand Family, c. The Aboriginal Family, d. The Maori Family, e. The Immigrant Family, f. The Special Family, and g. Artificial Family Formation. Note that entries included in subsection f. are relevant to other subsections and have not been duplicated. See K (b) for references relating to married women's employment.

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SECTION M: MATERNAL AND CHILD MORTALITY

This section includes a. General mortality, b. Child mortality and c. Maternal mortality. Readers should also note the bibliographies listed in Section A, especially those of H.O. Lancaster for Australian and New Zealand vital statistics and of J.W. Donovan for the epidemiology of New Zealand.

a. General mortality

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II. THE QUEANBEYAN SURVEY

THE UNIVERSITY OF CHICAGO

THE QUEANBEYAN SURVEY OF FAMILY FORMATION

A survey of married women in Queanbeyan was undertaken in January - March, 1971, primarily as a pilot survey for the much larger Melbourne survey of family formation to be carried out in the second half of the year. Nevertheless, although the number of respondents in Melbourne was to be ten times that in Queanbeyan, the small size of the latter centre meant a sampling fraction of one in ten in comparison with less than one in a hundred. Therefore, a substantial proportion of all eligible persons in Queanbeyan was interviewed and the survey has a value in its own right. However, small cell size does mean that only a limited range of associations between variables can be established.

Queanbeyan was in 1971 a town of about 15,000 persons. Although classified as a New South Wales country town, it is in fact a predominantly working-class dormitory area for Canberra. Its occupational, educational and national-origin patterns can only be understood in this light. Comparatively few persons have completed secondary education or have white-collar jobs; a considerable fraction was born in Southern Europe.

The sample was an areally stratified sample of street blocks, each with a random starting point and an interval between houses proportional to size so as to make the sample self-weighting.

The eligible respondents were once-married women under 60 years of age and still living with their husbands. Approximately 70 per cent of all addresses had at least one such woman and very few had more than one.

The refusal rate was very low at 7 per cent. Part of this was involuntary refusal because of the failure to find a Macedonian interpreter.

The questionnaire enquired about family formation, fertility restriction, the life cycle of the family and the settlement of immigrants.

The analysis and the following papers are based on the 247 completed questionnaires.

THE GIBBERIAN SURVEY OF FAMILY FORMATION

A survey of married women in Gibberian was conducted in January - March, 1971, primarily as a pilot survey for the larger Melbourne survey of family formation to be carried out in the second half of the year. Gibberian, although the name of the town in Melbourne was to be the focus, was to be a comparison of the latter centre with a similar formation of one in the north-western area in a rural area. Gibberian, a geographical population of all eligible persons in Gibberian was interviewed and the survey was in the own right. However, while the data from only a limited range of characteristics between variables can be obtained.

Gibberian was in 1971 a town of about 15,000 persons. Although classified as a New South Wales country town it is geographically a working-class district with Gibberian. In Gibberian, educational and national origin patterns can also be obtained in the light. Comparatively few persons have completed secondary education in Gibberian. A considerable fraction of the population is white-collar jobs.

The results were an overall statistical sample of Gibberian, with a number of variables and an interval between houses proportionate to the size of the sample.

The eligible respondents were non-resident women under 65 years of age and still living with their husbands approximately 70 per cent of all Gibberian had at least one such woman and very few had none.

The national rate was very low at 4 per cent. Gibberian was accordingly reduced because of the failure to find a Gibberian house.

The questionnaire enquired about family formation, fertility, restriction, the life cycle of the family and the settlement of Gibberian.

The analysis and the following report are based on the 1971 completed questionnaire.

FAMILY SIZE NORMS

J.C. Caldwell

Over the last century the Australian population has extended an increased control over its fertility, and average family size has, in consequence, declined. In a society, where a large proportion of the population practises contraception and attempts to plan family size, family size norms are of considerable social and demographic significance. Queanbeyan is such a society: four-fifths of the respondents approved of at least some method of family planning (including rhythm); those practising family planning at the time of the survey or prior to their current pregnancy numbered over three-fifths of all respondents and five-sixths of those believing themselves to be still fertile; about half claimed to have planned the number of their children.

The norms

It is difficult to construct questions determining such norms which are not affected by the family size already achieved, a considerable drawback if family size is already large and if some of its size can be attributed to unplanned pregnancies. The two questions employed in Queanbeyan, and set out in Table 1, are variations of two which seem to have proved most successful.¹

Table 1

Measures of Family Norms: Responses to Questions

- (A) "Generally speaking, what do you think is the ideal number of children for a couple, living in Australia, to have; that is about the right number of children for most people?"
- (B) "If you were able to start married life all over again, and if it were somehow possible to prevent pregnancy when you wished, and to become pregnant just when you wanted to, how many children would you want to have altogether? How about your husband, how many would he want?"

(a) Distribution of responses

Family size norms Responses to A Responses to B:
respondent Responses to B:
respondents' reports
on their husbands

	<u>No.</u>	<u>%</u>	<u>No.</u>	<u>%</u>	<u>No.</u>	<u>%</u>
0	2	1	6	2	11	4
1	1	(0.4)	5	2	3	1
2	49	20	64	26	60	24
2 or 3	9	4	-c	-c	-c	-c
3	67	27	66	27	57	23
3 or 4	14	6	-c	-c	-c	-c
4	91	37	77	32	68	28
4 or 5	1	(0.4)	-c	-c	-c	-c
5	4	2	9	4	7	3
5 or 6	1	(0.4)	-c	-c	-c	-c
6	2	1	8	3	14	6
7+	0	0	1	(0.4)	2	1
Depends on various circumstances, or don't know or no response	6	2	11	4	25	10
<u>Totals</u>	<u>247</u>	<u>100</u>	<u>247</u>	<u>100</u>	<u>247</u>	<u>100</u>

2-4 ^a	231	94	207	84	185	75
	<u>Median^b = 2.9</u>		<u>Median^b = 2.7</u>		<u>Median^b = 2.6</u>	
	<u>Mean^b = 3.2</u>		<u>Mean^b = 3.1</u>		<u>Mean^b = 3.1</u>	

Note: a includes 4 or 5
b restricted to those giving numerical answers
c distributed during coding to the numbers immediately above and below

(b) Cumulated distribution of numerical responses

Family size norms^a Responses to A Responses to B:
respondents Responses to B:
respondents
reports on their
husbands

	<u>No.</u>	<u>%</u>	<u>No.</u>	<u>%</u>	<u>No.</u>	<u>%</u>
0	2	1	6	3	11	5
1	3	1	11	4	14	6
2	57	24	75	32	74	33
3	135	56	141	60	131	59
4	234	97	218	93	199	90
5	239	99	227	96	206	93
6	241	100	235	99	220	99
7+	-	-	236	100	222	100

Note: a responses giving two sizes equally distributed between the sizes; numerical responses only (including percentage distributions).

The two measures of the respondents themselves yield broadly comparable results. Nearly all respondents tend to provide numerical, and unqualified answers to such questions, and presumably think of desired family size in such terms. There is an extraordinary consensus on family norms in much of western society and Queanbeyan exemplifies this: of those providing numerical answers for ideal family size (see comments below on "starting all over again"); fewer than one in twenty gave answers outside the 2-4 child range, and the medians for all types of question lie between 2½ and 3 children. The agreement that families should be small is brought out clearly by the cumulated responses showing that up to three-fifths of parents favour families of three or fewer children and nearly all four or fewer.

The two questions did, however, yield an important difference between the pattern of respondents' answers. The "starting all over again" approach yielded a higher proportion of answers favouring 5 or more children,² apparently because of a reluctance to disown children already born. More importantly, it also yielded a larger proportion of 0-2 child families,³ not, it would seem, because of a reluctance to disown sub-fecundity, but because of an awareness of personal financial or other difficulties or alternative patterns of potential expenditure. Therefore, the real norms in Queanbeyan might well average around three children per completed family. Perhaps all that can be said about the reports on husbands' views is that the great majority of wives believe that they share the same family size norms with their husbands; fewer than one-tenth claimed not to know their husbands' views.

(Percentage distribution)

Number of children	Percentage
0-1	10
2	35
3	30
4	15
5 or more	10

(Percentage distribution)

Number of children	Percentage
0-1	15
2	40
3	25
4	15
5 or more	5

(Percentage distribution)

Number of children	Percentage
0-1	10
2	30
3	35
4	15
5 or more	10

(Percentage distribution)

Number of children	Percentage
0-1	15
2	35
3	30
4	15
5 or more	5

Factors influencing the norms

Even with a survey as small in total number of respondents as that of Queanbeyan, three characteristics of the respondents could be shown to influence family size norms. These (shown in Table 2 for "Ideal Family Size") were the size of the family from which the respondent had come, the size of the family the respondent had already established (or, more exactly, her parity, which in a few cases had been reduced by child mortality), and the extent of her education.

Table 2

The Association between Certain Characteristics
of the Respondents and their stated Ideal Family
Size^a

	<u>Ideal family size</u>			
	<u>0-3</u>	<u>4+</u>	<u>All sizes</u>	
(a) Parental family size:				
(numerical distribution)	0-3	52	22	74
	4+	90	75	165
(percentage distribution)	0-3	70%	30%	100%
	4+	55%	45%	100%
	<u>Association significant at 5%</u>			
(b) Parity:				
(numerical distribution)	0-3	90	56	146
	4+	17	28	45
(percentage distribution)	0-3	62%	38%	100%
	4+	38%	62%	100%
	<u>Association significant at 5%</u>			
(c) Education:				
(numerical distribution)(duration)	0-11			
	years	104	82	186
	12+			
	years	35	15	50
(percentage distribution)	0-11			
	years	56%	44%	100%
	12+			
	years	70%	35%	100%
	<u>Association significant at 5%</u>			

Note: ^a restricted to respondents providing numerical answers and other required data.

There is a clear association with parity, although it is possible to debate whether ideal family size is more affected by family size already achieved or whether the main factor is the effect on family size of norms already held; one is tempted to give greater weight to the former proposition.

It says much for both conditioning and for the extent to which human beings find reasons for approving of the situation in which they find themselves that almost half of the respondents from large families wanted themselves to have large families compared with fewer than one-third from smaller families with such a desire. This observation was confirmed by the responses to the question, "What do you think about the size of the family in which you grew up?" Only 18 per cent disapproved of the size of that family (it might be noted that secular decline in fertility in Australia ceased some forty years ago and hence, for the majority of the respondents, there is no demographic reason why the parental family should have been larger than their own).

Education, as measured either by highest level reached or by duration is clearly negatively associated with family size norms: respondents with less than five years of full-time education averaged an ideal family size of 3.5 children, with 5-7 years one of 3.2, with 8-10 years one of 3.1, and with 11 or more years one of 2.8.

No relationship, perhaps partly because of the small size of the sample, could be demonstrated between ideal family size and the respondents' social class either as measured by occupation of husband or father, size of community or origin, or religion.

The upper limit for acceptable family size

With the achievement of the small family, and near consensus on its size, it is permissible to enquire how firmly the upper limit is placed. The results of this investigation, which cannot be equated with that into the single best or ideal size, appear in Table 3. The significant finding is that two-fifths of all respondents regard any family size above four children as too large, and two-thirds any size above five.

Table 3

Ceilings for Family Norms: Responses to the Question,
"Generally speaking, how many children would there have to
be in a family before you/your husband would say there were
too many?"

<u>Number of children</u>	<u>Number that would make the family too large</u>				<u>Cumulated responses giving maximum permissible size of families^a</u>			
	<u>Respondents</u>		<u>Husbands' reported views</u>		<u>Respondents</u>		<u>Husbands' reported views</u>	
	<u>No.</u>	<u>%</u>	<u>No.</u>	<u>%</u>	<u>No.</u>	<u>%</u>	<u>No.</u>	<u>%</u>
0	0	0	0	0	0	0	3	1
1	0	0	3	1	0	0	7	3
2	0	0	4	2	2	1	19	8
3	2	1	12	5	32	13	52	21
4	30	12	33	13	100	40	107	43
5	68	27	55	22	166	67	160	65
6	66	27	53	22	192	78	174	71
7	26	11	14	6	216	88	198	81
8+	24	10	24	10	-	-	-	-
Non-numerical responses	24	10	25	10	-	-	-	-
Don't know, No response	7	2	23	9	-	-	-	-
Totals	247	100	247	100				

Note: ^a these are cumulated responses to one number below those of the previous surveys (i.e. a respondent who says that "five" is too many is treated as saying that "four" is the highest number which should not be described as "too many").

Factors influencing family size norms

One would assume that the factors leading to the large degree of agreement on the 2-4 child family would be that the advantages to the respondents of small families outweighed the disadvantages, while the opposite was the case with large families. In Table 4 the many and varied responses to four questions on these matters are summarised according to type.

Table 4

Advantages and Disadvantages of Small and Large Families^a

	<u>Given as first response</u>		<u>Given among first three responses</u>	
	<u>No.</u>	<u>% of respondents</u>	<u>No.</u>	<u>% of respondents</u>
<u>(a) Advantages of small family</u>				
(i) economic ^b - to parents (or unspecified)	71	29	154	62
- specifically to children	78	32	128	52
(ii) social - to parents (or unspecified)	25	10	88	36
- specifically to children	61	25	61	25
<u>Total advantages to parents</u>	96	39	242	98
<u>Total advantages to children</u>	139	57	189	77
<u>(b) Disadvantages of small family</u>				
(ii) social - to parents (or unspecified)	21	9	26	11
- specifically to children	96	39	153	62
<u>(c) Advantages of large family</u>				
(i) economic - to parents (or unspecified)	13	5	30	12
- specifically to children	0	0	0	0
(ii) social - to parents (or unspecified)	52	21	95	38
- specifically to children	118	48	217	88
<u>Total advantages to parents</u>	65	26	125	51
<u>Total advantages to children</u>	118	48	247	100
<u>(d) Disadvantages of a large family</u>				
(i) economic - to parents (or unspecified)	128	52	208	84
- specifically to children	59	24	118	48
(ii) social - to parents (or unspecified)	11	4	45	18
- specifically to children	12	5	41	17
<u>Total disadvantages to parents</u>	139	56	253	102
<u>Total disadvantages to children</u>	71	29	159	65

Table 4 continued

Note: a the small family was defined as three or fewer children and the large family as four or more.

The viewpoint of the society is clear enough. The advantages of the small family are predominantly economic and accrue to both parents and children. Conversely, the disadvantages of the large family are overwhelmingly economic and affect parents (at least in the first place) to a much greater degree than they do children. On the other hand, the disadvantages of the small family are felt to be entirely social and to be borne to a large degree by the children.

Several points are noteworthy. Perhaps the most important is the emphasis given to the needs of children. Demographic theory has tended to picture parents deciding on family size according to the pressures on their own pockets, ways of life and so on. In fact a substantial majority of responses to these questions was given in terms of the advantages or disadvantages to children; demographic theory may have to take into account the child-conscious family. Alternatively there may be some degree of rationalizing in explaining wishes in terms of what is good for the children rather than the parents. The case against the small family and in favour of the large one is very much argued in terms of the well-being of children, but there is an interesting dichotomy in the reasons given: approximately half the reasons given were in terms of the social deprivation suffered by the child in the small family while the other half were in terms of damage to his or her personality or character - spoiltness, selfishness, inability to make friends and so on. Finally, it might be noted that in Queanbeyan, and perhaps all Australian urban areas, the greatest single economic problem of the large family is the difficulty it experiences in keeping its children in fulltime education.

Factors influencing family building

It is arguable that family size is determined less by concepts of ultimate size than by the probability at any given time of increasing family size. This could be regarded as the concept of the marginal child. Thus the real case for and against the large family may be the arguments set out in Table 5 for and against adding an incremental child at any specified time.

Table 5

The Case For and Against Adding One More Child to the Family during the One-year period ahead

<u>(a) Pregnancy status</u>				
	<u>No.</u>	<u>%</u>		
Definitely pregnant	28	11		
All other respondents	219	89		
<u>(b) Desire of non-pregnant for motherhood within the coming year</u>				
	<u>No.</u>	<u>% of all respondents</u>	<u>% of non-pregnant respondents</u>	
Would like to have a baby	53	21	24	
All other non-pregnant respondents	166	68	76	
<u>(c) Desire of pregnant to become pregnant immediately before this event</u>				
	<u>No.</u>	<u>% of all respondents</u>	<u>% of pregnant respondents</u>	
Definitely desired to become pregnant	17	7	61	
All other pregnant respondents	11	4	39	
<u>(d) Responses to the question: (non-pregnant) "What would be the advantages of having another baby within the next year?"; (pregnant) "What are the advantages of being pregnant now?"</u>				
	<u>Given as first response</u>		<u>Given among first three responses</u>	
	<u>No.</u>	<u>% of respondents</u>	<u>No.</u>	<u>% of respondents</u>
Social - to parents (or unspecified)	76	31	116	47
- specifically to children	33	13	50	20
<u>(e) Responses to the question: (non-pregnant) "What would be the disadvantages of having another baby within the next year?"; (pregnant) "What are the disadvantages of being pregnant now?"</u>				
<u>(i) economic - to parents</u>				
(or unspecified)	80	32	44	18
- specifically to children	0	0	0	0
<u>(ii) social - to parents</u>				
(or unspecified)	105	43	179	72
- specifically to children	1	(0.4)	5	2
<u>Total disadvantages to parents</u>	185	75	223	90
<u>Total disadvantages to children</u>	1	(0.4)	5	2

Table 5 reasserts the significance of some of the assumptions in demographic theory. When deciding to have another child or not, parental considerations outweigh those primarily in the interest of the children by well over two to one when favouring pregnancy and by an overwhelming amount when being averse to pregnancy (in line, in the latter case, with the view that children gain the most from being in a large family). However, in the "affluent society" the parental case against the addition of another child at any given time is based more often on social than economic grounds.

The advantages of an existing or imminent pregnancy is predominantly that of the baby as a consumption good: "I just love babies", "another baby would make the home happier", "the children would like another baby in the house". The case against comes in three forms, which, in order of importance, are: "We couldn't afford it at present", "I am too old now to begin with another child", "I have enough to do as it is".

Summary

In determining likely family size, the measurement of family size norms may be slightly better done by concentrating on the situation of the respondents themselves than on their views of the whole community. It is possible that in Queanbeyan the "starting all over again" question yielded the more reliable results; certainly it yielded the lower figures. Perhaps the best indicator both of likely family size and of the reasons for family formation can be built up by examining the marginal likelihood of having another child at any given time and constructing a series of probabilities by age and perhaps marriage duration.

The "real" family norms in Queanbeyan probably average around 3.0 children for the completed family with almost half the women actually wanting less than about 2½. It is tempting to regard this as perhaps slightly above what might be expected in the country's larger metropolitan areas and below the more rural areas, and fairly typical of the country as a whole. A completed family size of 2.6 children was roughly the experience of Australian women who were 50 years old in 1970 (main reproductive period during the 1940s); it was probably lower than will be experienced by women 30-45 at that date, but may be close to that of women still in their twenties.⁴ Such a completed family size would if the population age structure stabilized settle down to an annual growth rate of about 0.6 per cent with total population (given no migration) doubling every 120 years. Nevertheless, a stationary population would be achieved only by a reduction of completed family size to around 2.1 children; therefore, it is salutary to realize that only about one-third of Queanbeyan respondents would have, if they "started all over again", two or fewer children. It is true that there is some evidence that average family size norms may fall with rising levels of female education, and that the large family may become even rarer as fewer potential parents are reared in such families.

Perhaps the most striking aspect of the findings is the near-consensus on families of 2-4 children, with two-thirds of respondents

regarding the five-child family not merely as not "ideal" but as positively "too large". The degree to which our society is child-centred in its family decisions should not be underestimated. Nevertheless, the critical decisions about whether to have another child at any given time is still made predominantly according to the convenience and needs of the parents. However, in a society where real want is becoming ever more remote, the decisions are likely to be made more on such grounds as the inconvenience of large numbers of children as on the difficulty of supporting them.

Footnotes

1. These have been incorporated in the International Union for the Scientific Study of Population - United Nations model questionnaire as Questions 40 and 36 respectively (see United Nations Department of Economic and Social Affairs, Population Studies, No. 45, Variables and Questionnaire for Comparative Fertility Surveys, New York, 1970).
2. Statistically significant at 5%.
3. Statistically significant at 5%.
4. Geraldine M. Spencer, "Fertility Trends in Australia", Demography, VIII, 2, p.255.

FERTILITY CONTROL

Donald R. Lavis

Introduction

This report presents data from the Queanbeyan Survey on the current and recent use of contraception, on the protection against pregnancy so afforded and on attitudes to family planning. In any population of married women identifiable subgroups will vary in the likelihood that a member of that group will be found employing a contraceptive technique. Obviously, if a woman is already pregnant or knows herself to be sterile, she is unlikely to be practising contraception. Women over 45 years required to be treated separately as many are subfecund or sterile. Other groups, such as Catholic women of orthodox conviction, may be influenced against the employment of mechanical or chemical contraceptives. Even a woman who has decided to employ a means of fertility control has a choice of methods which vary widely in their efficacy.

The question employed overcame the difficulty with women currently pregnant by asking the method used, if any, before the current pregnancy. Hence the methods reported represent either current usage or that of the recent past. The actual question used was: "What is the main method or methods which you are currently using (or were using before you became pregnant)?" The statement in parentheses might tend to overestimate the "nothing used" category if the couple had stopped using contraception some time before becoming pregnant. This difficulty was removed from the questionnaire for the major survey in Melbourne by the use of a more elaborate scheme of several questions employing dates and histories.

Unfortunately, it is very difficult to obtain accurate information about sterile or subfecund women. Added to the fact that subfecund women may not realize their condition for some time, if at all, is the reluctance of many women both to discover such a condition in themselves and to report it to an interviewer. A short structured interview conducted in a somewhat impersonal atmosphere runs the risk of rapport being destroyed if the interviewer probes too deeply into personal matters of such emotional significance. Thus some under-reporting is almost certain in these data.

A series of questions during the interview attempted to determine if the respondent had any reason to believe that she could not conceive and also to record what reasons she had for this belief. Any woman who reported an accident, injury or operation likely to produce sterility or whose doctor had informed her that she was sterile was selected out of the group considered at risk to use contraception and such women are shown separately as a proportion of all women in the following tables and charts. In addition to these women who are definitely sterile, there must have been considerably more subfecund and sterile women, such as those who had never practised contraception and yet had never become pregnant, but these women have not been identified for the purposes of this analysis.¹

Any woman who had reached her forty-fifth birthday was excluded completely from the analysis. While many of these women would not yet have reached the menopause, this cut-off age is convenient for comparison with census statistics and other research. Australian women of this age contribute only 0.1 per cent of all births.² One should not infer, though, that women about to reach the menopause or even beyond it do not practise contraception. But since the question employed asked for the method of contraception used at present or before the last pregnancy many older women reported the use of a method which they had not employed for some considerable time. Thus no satisfactory analysis of the current contraceptive usage of older women was possible.

Oral contraception

For some time it has been believed that the use of oral contraceptives by Australian women may be the world's highest.³ Through the use of a retrospective time series, the history of the acceptance of orals has been plotted for the United States (Ryder and Westoff, 1966) and Canada (Allingham, Balakrishnan and Kantner, 1970)⁴. The use of orals increased slowly at first, with only about four per cent of married women using the pill by the end of 1963 in Canada and the U.S., though it had been licensed for use since 1960. However, acceptance of the method accelerated remarkably producing an "all married women under 45" use rate of 16 per cent and 20 per cent by late 1965 for the United States and Canada respectively.

Table 1

Methods of Contraception Currently Used or Used before
Last Pregnancy by Married Women under 45 years^a

	<u>Number</u>	<u>Per cent</u>
Orals	91	47.4
Rhythm	18	9.4
I.U.D.	11	5.1
Withdrawal	4	2.1
Condom	4	2.1
Diaphragm	3	1.5
Sterile	24	12.5
Nothing used	37	19.3
Total	192	100.0

a

One woman in the sample reported the combined use of the condom with rhythm and another withdrawal with rhythm. They were classified under rhythm. There was no reported usage of jelly alone, suppositories, or aerosol spermicides as the main method used currently.

The Australian rate was thought to be even higher. By late 1967 the rate for Canada was over 30 per cent.⁵ By 1971, 47.4 per cent of all married women in our Queenbeyan sample under 45 years were currently employing the oral contraceptive. If sterile women are removed from the base, the current use rate was 54 per cent of all women under 45 years of age.

No other single method amounted to more than a fifth of this usage. The next most popular method was rhythm at 9.4 per cent; its use was confined largely to more religious Catholic women as can be seen from examination of the first four columns of Chart 1 and Tables 2 and 3.⁶

Table 2

Methods of contraception currently used or used before last pregnancy by religion, married women under 45 years

<u>Religion</u>	<u>Catholic</u>		<u>Non-Catholic</u>	
	<u>Number</u>	<u>Per cent</u>	<u>Number</u>	<u>Per cent</u>
Orals	17	28.8	73	55.3
Rhythm	12	20.3	6	4.5
I.U.D.	3	5.1	8	6.1
Withdrawal	1	1.7	3	2.3
Condom	1	1.7	3	2.3
Diaphragm	0	0.0	3	2.3
Sterile	10	17.0	14	10.6
Nothing Used	18	25.4	20	16.6
Total	59	100.0	132	100.0

The I.U.D. is the next most popular method, being used by almost six per cent of all women.⁷ All other traditional methods combined accounted for less than six per cent of all women under 45 years as the main method used. Certainly some of these methods would be relied upon from time to time (especially withdrawal) when the preferred method was not available or temporarily inadvisable for various reasons.

Table 3

Methods of contraception currently used or used before last pregnancy by religiousness, married women under 45 years

<u>Religiousness</u>	<u>High</u>		<u>Low</u>	
	<u>Number</u>	<u>Per cent</u>	<u>Number</u>	<u>Per cent</u>
Orals	39	34.5	52	65.8
Rhythm	16	14.2	2	2.5
I.U.D.	7	6.2	4	5.1
Withdrawal	4	3.5	0	0.0
Condom	4	3.5	0	0.0
Diaphragm	3	2.7	0	0.0
Sterile	16	14.2	8	10.1
Nothing Used	24	21.2	13	16.5
Total	113	100.0	79	100.0

Differentials by religion, religiousness, age and nativity

Religious preference has consistently been found to be an important, if not the best, single indicator of the number of children a couple desires.⁸ Knowledge that the Roman Catholic Church opposes most techniques of family planning would lead one to expect a lower incidence of use of both appliance and chemical means amongst this group. This is indeed the case for the Catholic women in our sample who confine themselves almost exclusively to the use of orals and rhythm. Current use of rhythm as a main method of contraception accounted for 20.3 per cent of Catholic women under 45. Still, orals are even more popular amongst this group with almost half as many again using pills as rhythm (see Table 2). It is noteworthy that a higher level of sterility was reported amongst Catholics than non-Catholics. While a higher incidence of sterility could result in some degree through a higher exposure to complications associated with childbirth (average family size being larger for Catholics), it is more likely that Catholic women are to a greater extent aware of infecundity since they practise contraception less.⁹ Noteworthy is the considerably higher proportion of Catholics who were currently employing no means to reduce fertility.¹⁰

If religious denomination is ignored and degree of religiousness alone, measured on an attitudinal basis,¹¹ is used to divide the population, the use of rhythm can be seen to be very small indeed amongst those who considered the teachings of their church as less important or irrelevant. This group would appear to be the most determined of all groups to plan their families. The highest use rates for orals were found among these women. When they did not employ the oral, they chose another highly efficient means of fertility control - the I.U.D. Fully 97 per cent of this group who were using any method were using either the pill or the I.U.D., while traditional appliance methods were not reported in a single case.

Age of the wife was an important contributing factor in the decision to use oral contraceptives. While proportions using other methods were almost the same for both groups, there is a marked dichotomy between those under and over 30 in use of oral contraceptives (see Chart 1 and Table 4).

Table 4

Methods of contraception currently used or used before
last pregnancy by age, married women under 45 years

<u>Age</u>	<u>Under 30</u>		<u>30-44</u>	
	<u>Number</u>	<u>Per cent</u>	<u>Number</u>	<u>Per cent</u>
Orals	71	64.0	20	24.7
Rhythm	9	8.1	9	11.1
I.U.D.	6	5.4	5	6.2
Withdrawal	3	2.7	1	1.2
Condom	2	1.8	2	2.5
Diaphragm	1	0.9	2	2.5
Sterile	3	2.7	21	25.9
Nothing Used	16	14.4	21	25.9
Total	111	100.0	81	100.0

Many over 30 years are sterile (26 per cent). If this were not the case, perhaps more would be using orals or the I.U.D. On the other hand, many of the "nothing used currently" group amongst those under 30 were likely planning a pregnancy or at least had not had all the children they wanted eventually. With use rates for effective means of fertility control as high as this data shows them to be among younger women, it is probable that there will be a greater degree of intent in the planning of families in the future.

A breakdown by birthplace was possible only in terms of foreign-born/native-born due to the small number of foreign-born in the sample. Foreign-born women are more likely than the native-born to prefer the condom, rhythm and withdrawal, traditional methods and popular in Europe. The native-born usage of orals was four times as high as that of the foreign-born, and all users of the I.U.D. were Australian-born. Most important of all, perhaps, is the finding that foreign-born women are four times as likely to use no method of family planning as are the native-born.

Table 5

Methods of contraception currently used or used before last pregnancy by nativity, married women under 45 years

<u>Nativity</u>	<u>Native-born</u>		<u>Foreign-born</u>	
	<u>Number</u>	<u>Per cent</u>	<u>Number</u>	<u>Per cent</u>
Orals	84	58.4	7	14.9
Rhythm	14	9.7	3	6.4
I.U.D.	11	7.6	0	0.0
Withdrawal	1	0.7	3	6.4
Condom	0	0.0	4	8.5
Diaphragm	3	2.1	0	0.0
Sterile	14	9.7	10	21.3
Nothing Used	17	11.8	20	42.5
Total	144	100.0	47	100.0

Table 6

Methods of contraception currently used or used before last pregnancy by education, married women under 45 years

<u>Education*</u>	<u>High</u>		<u>Medium</u>		<u>Low</u>	
	<u>Number</u>	<u>Per cent</u>	<u>Number</u>	<u>Per cent</u>	<u>Number</u>	<u>Per cent</u>
Orals	11	42.3	40	60.6	40	40.4
Rhythm	3	11.5	5	7.6	10	10.1
I.U.D.	0	0.0	4	6.1	7	7.1
Withdrawal	0	0.0	1	1.5	3	3.0
Condom	1	3.9	1	1.5	2	2.0
Diaphragm	2	7.7	0	0.0	1	1.0
Sterile	2	7.7	6	9.1	15	15.2
Nothing Used	7	26.9	9	13.6	21	21.2
Total	26	100.0	66	100.0	99	100.0

* Low = less than intermediate certificate, Medium = intermediate certificate, High = leaving certificate or above.

The factor of education has a U-shaped relationship to current use of orals. It has been found elsewhere that Catholic school education, especially past matriculation, produces greater orthodoxy with regard to family size (Westoff et al. 1963: 94-107). While it is tempting to interpret these data as conforming to the findings of other research, the small number of women in the group with high education (leaving certificate or better) is really too small for anything but an arbitrary interpretation. It is interesting to note, however, that use of the diaphragm is confined in our sample almost exclusively to women with a leaving certificate or better and that the I.U.D. was not chosen by this group at all.

Contraceptive efficacy

A main purpose of this report is to show the extent of protection against unwanted pregnancy for various segments of the population. The recent shift to widespread acceptance of oral anovulents has produced the possibility of an entirely new pattern from that which existed in the past when only a small minority of couples were in a position to be "number and spacing" planners.¹² Use-effectiveness of contraceptive techniques, as opposed to theoretical-effectiveness, was unimpressive before the advent of orals and the I.U.D. Failure rates per hundred woman-years over an exposure period of one year, of more traditional methods is shown in Table 7. Oral anovulents have a use-effectiveness failure rate of under one, and the I.U.D. between two and six, depending mainly upon the type of device.

Table 7

<u>Method</u>	<u>Failure Rate</u>
Condom	13.8
Diaphragm	14.4
Withdrawal	16.8
Rhythm	38.5
Douche	40.8

Source : Westoff et al., (1961)

All the methods listed above require high motivation and consistent use. This probably accounts for most of the rather high failure rates for theoretically effective methods such as the condom and diaphragm.

"The risk of pregnancy resulting from a single unprotected coitus, taken at random during the intermenstruum, is of the order of 2-4 per cent. If only half the couples in a population 'take a chance' once a month, on the average, a failure rate between 12 and 24 per 100 woman-years of contraceptive practice will result from this factor alone."
(Tietze, C., 1960:485)

The very high failure rate of rhythm means that the emphasis must shift to abstinence if a very large family or crowding of births is to be avoided.

The form of Charts 1 and 2 permits a comparison of the degree of risk of pregnancy by subgroup of married women. The high-risk group must include rhythm users as well as those who use nothing since as many as 38 in a 100 of rhythm users can be expected to become pregnant within the space of a year. The charts show decreasing effectiveness of contraceptive means from the base line. These data indicate that foreign-born women, Catholics, older women and women of high religious conviction are the most exposed, in that order. The least exposed and those who tend to use very effective means when they do use contraception, are women who consider that the teachings of religion are of little importance or irrelevant in guiding their lives.

Chart 2
Chart 1

Methods of Contraception Currently Used or Used Before Last Pregnancy by Religion, Attitude Religiousness and Age, Married Women Under 45 Years, Queanbeyan, 1971.

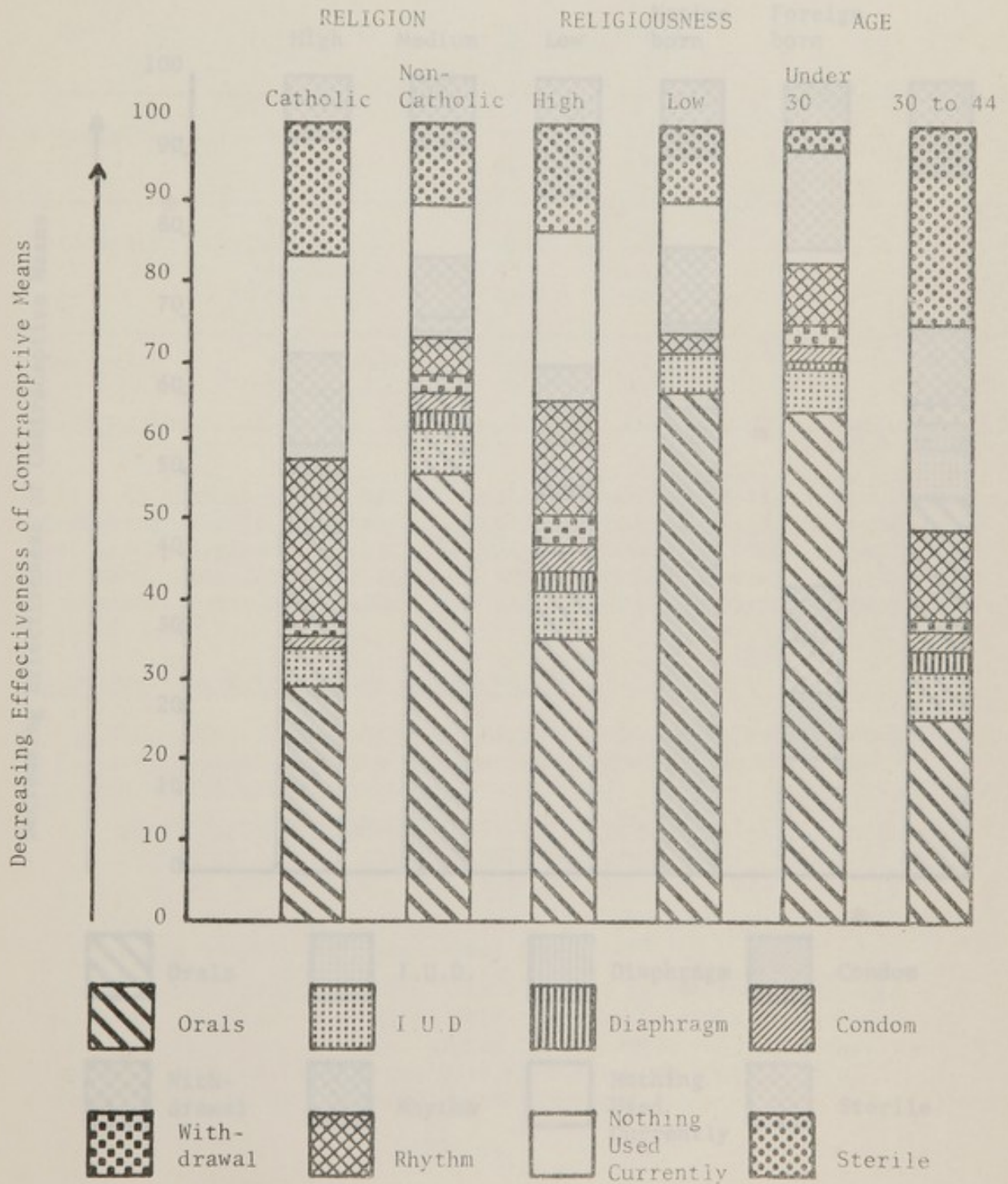


Table 1

The results of the survey of the religious beliefs of the population of the USSR are presented in Table 1. The data show that the majority of the population are believers, and that the majority of believers are members of the Russian Orthodox Church. The percentage of believers has increased in the past few years, and this is due to the fact that the majority of the population are members of the Russian Orthodox Church. The percentage of believers has increased in the past few years, and this is due to the fact that the majority of the population are members of the Russian Orthodox Church.

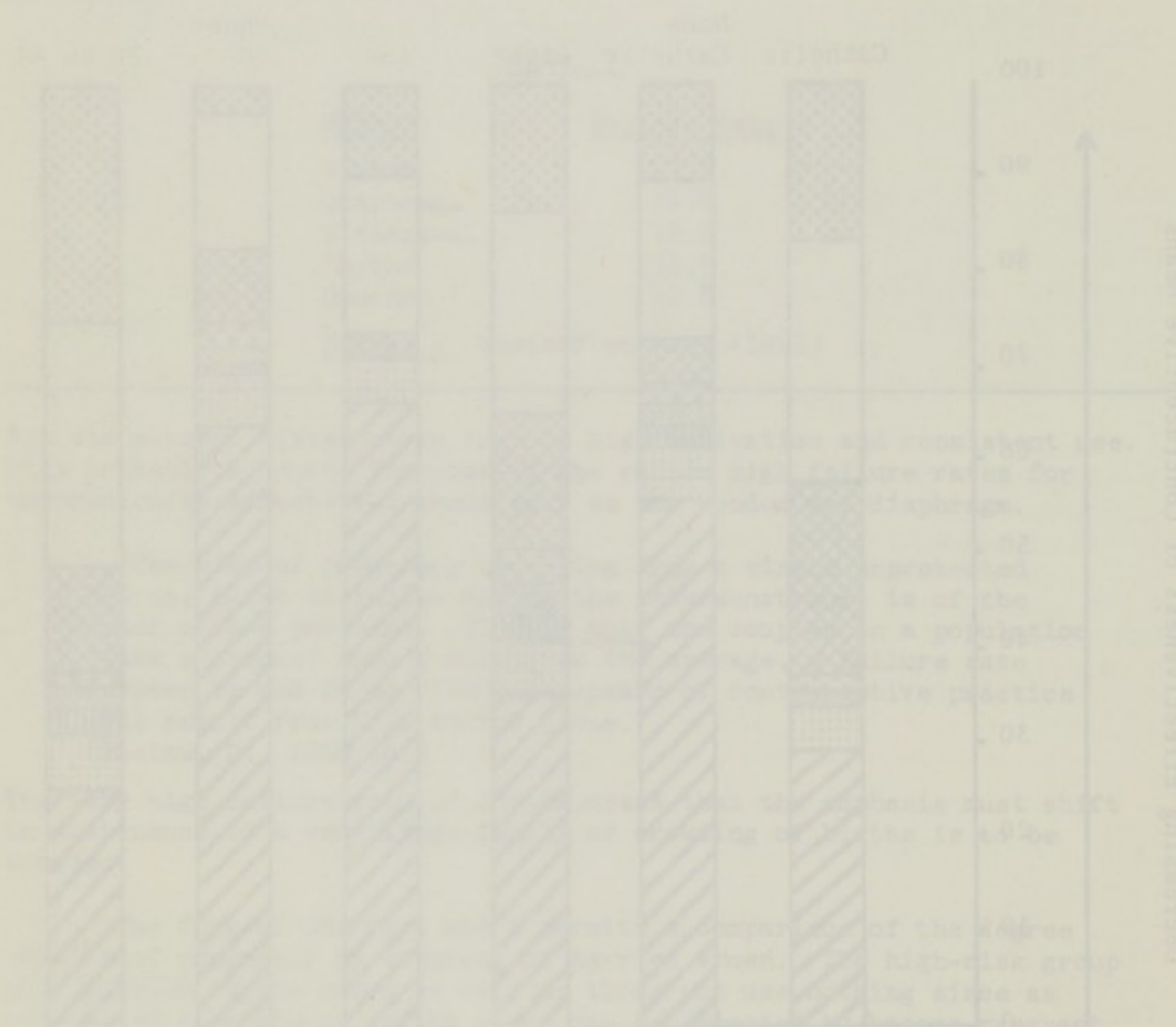


Table 1. Percentage of the population belonging to various religious groups in the USSR, 1946-1970. The data show that the majority of the population are believers, and that the majority of believers are members of the Russian Orthodox Church. The percentage of believers has increased in the past few years, and this is due to the fact that the majority of the population are members of the Russian Orthodox Church.

Chart 2

Methods of Contraception Currently Used or
Used Before Last Pregnancy by Education and
Nativity, Married Women Under 45 Years,
Queanbeyan, 1971.

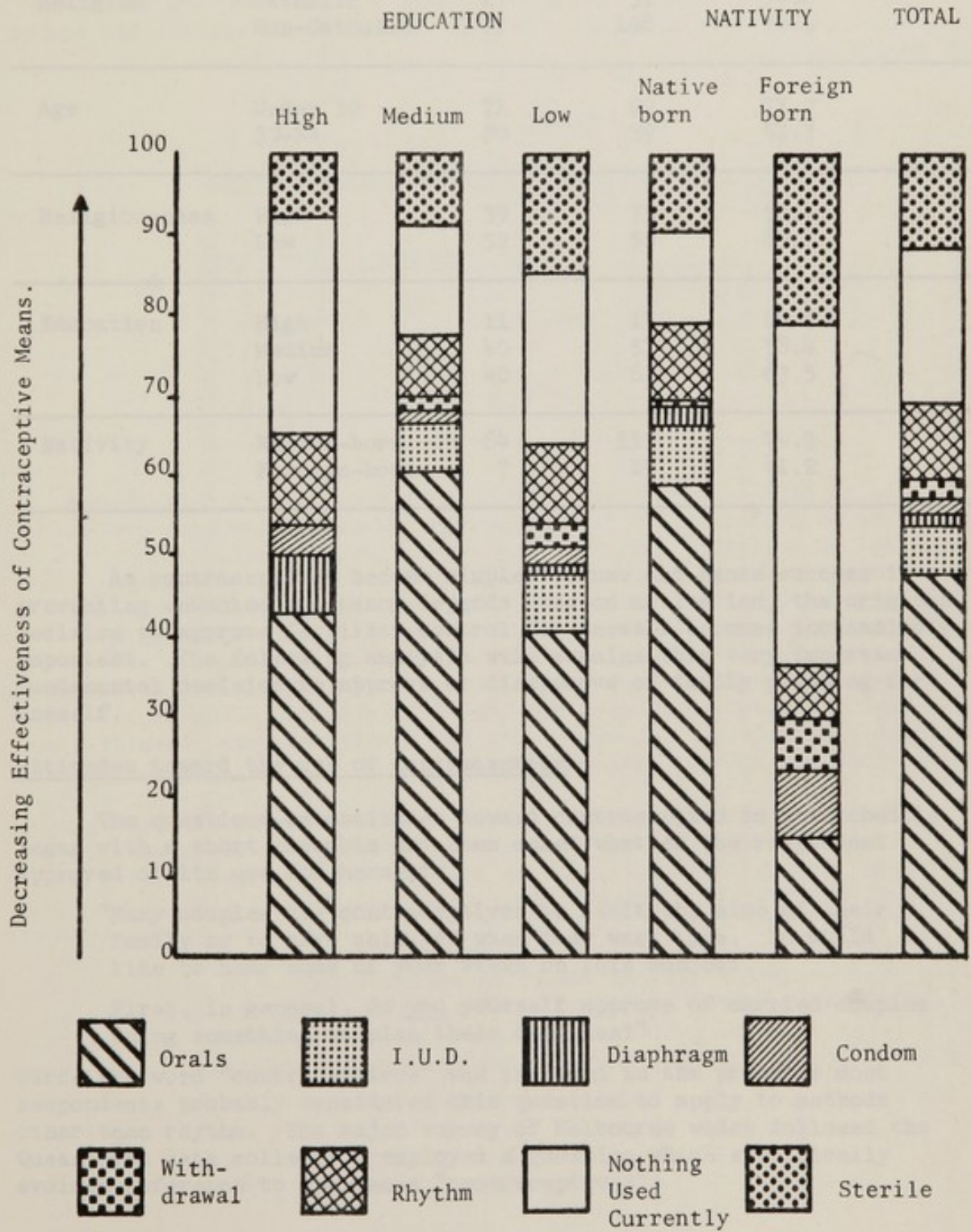


Chart 2

Methods of Contraception Currently Used or Used Before Last Pregnancy by Education and Nativity, Married Women Under 45 Years, Queensbury, 1971

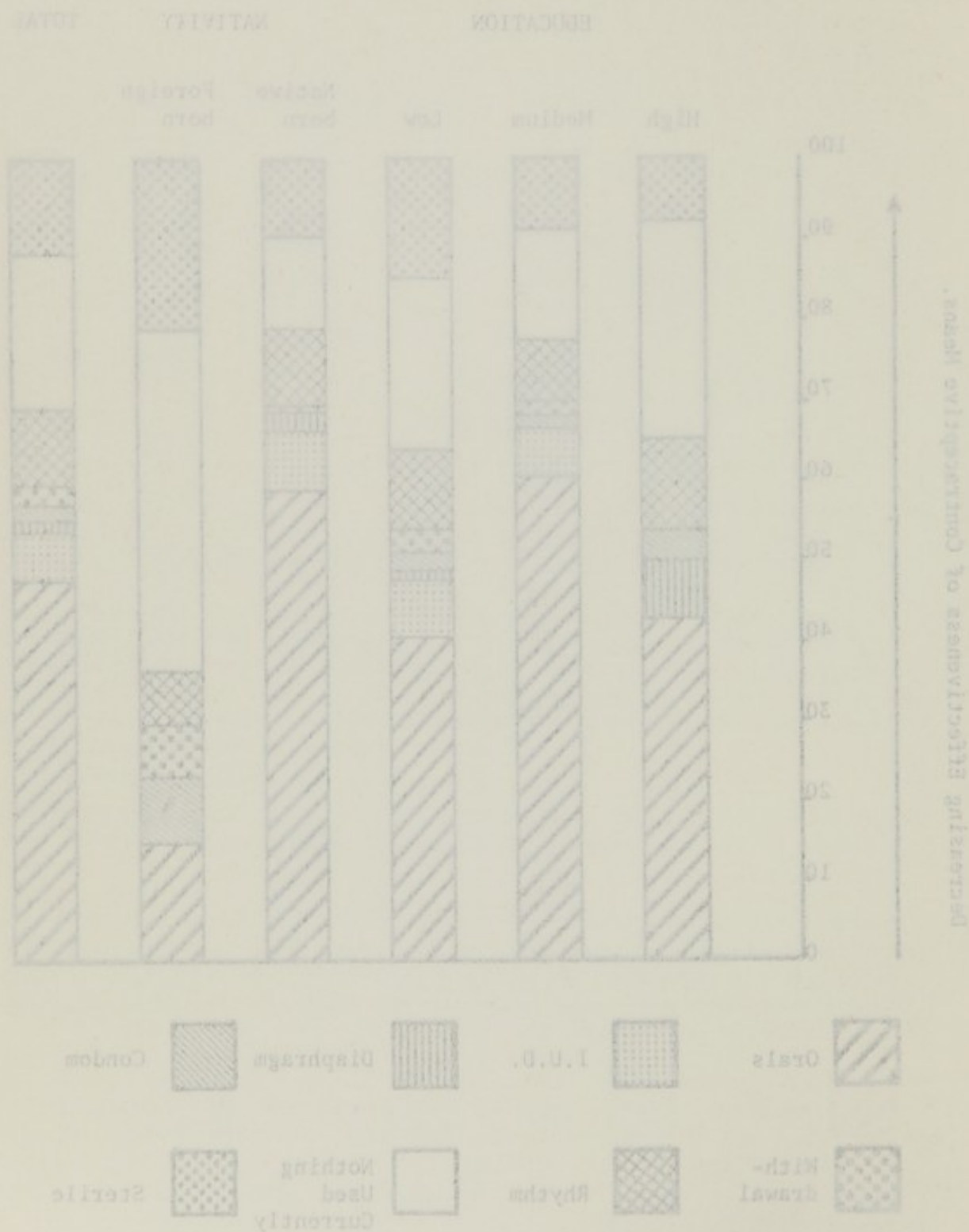


Table 8

Usage of oral contraception by married women under 45 as a proportion of those who use some method of contraception, including rhythm

		<u>Oral users</u>	<u>Total</u>	<u>Per cent oral users</u>
Religion	Catholic	17	31	54.8
	Non-Catholic	73	198	74.5
Age	Under 30	71	92	77.2
	30-44	20	39	51.3
Religiousness	High	39	73	53.4
	Low	52	58	89.7
Education	High	11	17	64.7
	Medium	40	51	78.4
	Low	40	63	63.5
Nativity	Native-born	84	113	74.3
	Foreign-born	7	17	41.2

As contraceptives become simpler to use and hence success in preventing unwanted pregnancy depends less on motivation, the original decision to approve fertility control for oneself becomes increasingly important. The following analysis will examine this very important fundamental decision to approve or disapprove of family planning for oneself.

Attitudes toward the use of contraception

The questions on attitudes toward contraception in the schedule began with a short preamble and then asked whether the respondent approved of its use for herself:

"Many couples use contraceptives to limit the size of their family or to have children when they want them. We would like to hear some of your views on this subject.

First, in general, do you yourself approve of married couples doing something to plan their families?"

Since the word "contraceptives" was included in the preamble most respondents probably considered this question to apply to methods other than rhythm. The major survey of Melbourne which followed the Queanbeyan data collection employed a question which specifically avoided reference to appliance "contraceptives".

Hence the findings of that survey will not be strictly comparable to these results. However, the question as stated above provides an interesting analysis. Qualified answers were allowed for in the coding but only one qualification, "all right for others", was precoded on the questionnaire midway between "approval" and "disapproval". As a result, no other qualifications were received. The breakdown amongst all respondents in the study is presented in Table 9. It is clear from this information that the overwhelming majority of women in Queanbeyan either approve for themselves or at least would not want others to be restricted from using contraceptives. Amongst the nine per cent who are listed as disapproving are many Catholics who would nevertheless approve the use of the rhythm method.

Table 9

Approval of family planning, married women
18-61 years of age

	Number	Per cent
Approve	195	79.0
"All right for others"	25	10.6
Disapprove	23	9.3
No response	4	1.7
Total	247	100.0

In an effort to discover which groups consistently disapproved of the use of contraception for themselves the categories were cross-classified by religion, age, nativity, education, and attitude religiousness. All the above variables are related to approval at significant levels. A measure of strength of relationship, Goodman's and Kruskal's tau, was employed to give a measure of predictability for the dependent variable given knowledge of the independent. Unfortunately, the small sample size permitted only a minimum of categories to be employed without reducing expected cell sizes to below ten.¹³ All respondents who did not approve of use for themselves were classified as disapproving for the purposes of the analysis.

The relationships between approval and the above mentioned variables is presented in Table 10. The proportion approving decreases some 20 per cent as age increases indicating that younger women are more likely to approve of the use of contraceptives. Ryder and Westoff (1971:100) found little variation by age on a similar question. Their results for approval were 86 per cent and 83 per cent, respectively, for those under 30 and 30-44. The younger women represent the attitude likely to prevail on the subject in the future. Education shows a U-shaped relationship with a medium level of education resulting in 91 per cent approval. Australian-born women are much more likely to approve than the foreign-born.

Table 10

Wife's approval of family planning by selected characteristics

	Age			Religion		Education ^a			Nativity		Religiosity ^b	
	Under 30	30-44	Over 44	Cath-olic	Non-Cath-olic	Low	Medium	High	Aust. born	Foreign born	High	Low

Approve for self	No. 99	59	37	195	49	145	194	97	71	26	194	155	40	195	111	83	194
	Per cent ^c	89.2	74.7	69.8	57.6	92.4	72.9	91.0	83.9	87.6	61.5				73.0	92.2	
Dis-approve for self	No. 12	20	16	48	36	12	48	36	7	5	48	22	25	47	41	7	48
	Per cent ^c	10.8	25.3	30.2	42.4	7.6	27.1	9.0	16.1	12.4	38.5				27.0	7.8	
Total	No. 111	79	53	243	85	157	242	133	78	31	242	177	65	242	152	90	242
	df=2	p<.01	x ² =10.78	tau=.044	df=1	x ² =39.63	tau=.173	df=2	p<.01	x ² =10.43	tau=.043	df=1	x ² =18.96	tau=.085	df=1	x ² =11.92	tau=.05

^a Low = less than intermediate certificate
 Medium = intermediate certificate obtained
 High = leaving certificate or above - contains some who have tertiary technical training without leaving

^b as defined in the text

^c column percentages

Religion, as might be expected, accounts for the greatest variation. A full 90 per cent of non-Catholics approve of contraception in contrast to some 58 per cent of Catholics. However, since the official position of the Catholic Church remains against contraceptive practice other than rhythm, this figure would seem to reflect considerable Catholic non-conformity. An examination of methods employed in the previous section indicates that many Catholics are opting for use of the pill, presumably showing that controversy amongst some church officials about whether the pill may be considered as fundamentally a regulator of the menstrual cycle has led many to make the decision to use the pill for "medical reasons only". Taken by itself, the measure of religiousness employed shows that it is the more devout who are much more likely to disapprove.

Table 11

Approval of family planning by religion,
age controlled

Age	Religion	Catholics		Non-Catholics		Total
		No.	%	No.	%	
Under 30	Approve	20	66.7	78	97.5	98
	Disapprove	10	33.3	2	2.5	12
	Total	30	100.0	80	100.0	110
30-44	Approve	15	51.7	44	88.0	59
	Disapprove	14	48.3	6	12.0	20
	Total	29	100.0	50	100.0	79
Over 44	Approve	14	53.9	23	85.2	37
	Disapprove	12	46.1	4	14.8	16
	Total	26	100.0	27	100.0	53

Under 30:	df=1	$x^2=18.29$	$p<.001$	tau=.194
30-44:	df=1	$x^2=10.93$	$p<.001$	tau=.162
Over 44:	df=1	$x^2=4.78$	$p<.05$	tau=.117

Table 12

Approval of family planning by religion,
religiousness controlled

Religiousness	Religion	Catholic		Non-Catholic		Total
		No.	%	No.	%	
High	Approve	35	53.0	76	88.4	111
	Disapprove	31	47.0	10	11.6	41
	Total	66	100.0	86	100.0	152
Low	Approve	14	73.7	68	97.1	82
	Disapprove	5	26.3	2	2.9	7

High: $df=1$ $x^2=21.92$ $p<.001$ $\tau=.156$

Low : $df=1$ $x^2= 8.34$ $p<.01$ $\tau=.128$

The relationship with religion, when age is controlled, is shown in Table 11. Firstly, the Catholic/non-Catholic difference holds for all age groups and there is a highly significant difference amongst those under 44. But, even though age is itself directly related to approval, increase in age weakens the relationship by religion as age increases. Further, when age is tabulated against approval/disapproval, with religion held constant, a significant relationship no longer remains. This is partly explained in terms of the reduction of cell size. Further, when one examines the proportions who disapprove across all three age categories (Table 11) it would appear that disapproval increases with age amongst both Catholic and non-Catholics, and hence the reason for the weakened relationship with religion as age increases. It would appear that both religion and age are independent variables with religion being much the stronger of the two. The fact that the tau value from Table 10 (for religion cross-classified without control of age) is about equal in magnitude to that for the younger women in Table 11 confirms this conclusion.

When degree of religiousness is controlled as religion is cross-classified against approval/disapproval the strength of the relationship appears weaker for those of lower religiousness (Table 12). This is the result of higher levels of approval amongst those of lower religiousness amongst both Catholics and non-Catholics. However, an examination of the top half of Table 12 shows clearly that Catholics of high religious conviction are much more likely to disapprove than non-Catholics of any type.

Table 13

Approval of family planning by religion,
education controlled

<u>Education</u>	<u>Religion</u>	<u>Catholics</u>		<u>Non-Catholics</u>		<u>Total</u>
		<u>No.</u>	<u>%</u>	<u>No.</u>	<u>%</u>	
Low	Approve	30	52.6	67	88.2	97
	Disapprove	27	47.4	9	11.8	36
	Total	57	100.0	76	100.0	133
Medium	Approve	13	72.2	57	96.6	70
	Disapprove	5	27.8	2	3.4	7
	Total	18	100.0	59	100.0	77
High	Approve	6	60.0	20	95.2	26
	Disapprove	4	40.0	1	4.8	5
	Total	10	100.0	21	100.0	31

Low:	df=1	$x^2=19.06$	$p<.001$	tau=.157
Medium:	df=1	$x^2= 7.19$	$p<.01$	tau=.129
High:	df=1	$x^2= 3.89$	$p<.05$	tau=.201

The small cell sizes make an interpretation of the relationship by religion, while education is controlled, of doubtful value; a further complication is that there appears to be a non-linear relationship between education and approval. At any rate the strong relationship by religion holds for all categories of education but education cannot sustain a relationship on its own when religion is controlled, possibly the result of reduced cell sizes and a weak or non-linear relationship amongst Catholics.

Table 14

Approval of family planning by nativity,
religiousness controlled

<u>Religiousness</u>		<u>Native-born</u>		<u>Foreign-born</u>		<u>Total</u>
		<u>No.</u>	<u>%</u>	<u>No.</u>	<u>%</u>	
High	Approve	87	81.3	24	53.3	111
	Disapprove	20	18.7	21	46.7	41
	Total	107	100.0	45	100.0	152
Low	Approve	68	97.1	15	79.0	83
	Disapprove	2	2.9	4	21.0	6
	Total	70	100.0	19	100.0	89

High:	df=1	$x^2=11.21$	$p<.001$	tau=.083
Low :	df=1	$x^2= 5.24$	$p<.05$	tau=.008

Table 15

Approval of family planning by nativity,
age controlled

Age		Native-born		Foreign-born		Total
		No.	%	No.	%	
Under 30	Approve	85	95.5	14	66.7	99
	Disapprove	4	4.5	7	33.3	11
	Total	89	100.0	21	100.0	110
30-44	Approve	46	83.6	13	54.2	59
	Disapprove	9	16.4	11	45.8	20
	Total	55	100.0	24	100.0	79
Over 44	Approve	24	72.7	13	65.0	37
	Disapprove	9	27.3	7	35.0	16
	Total	33	100.0	20	100.0	53

Under 30:	df=1	$x^2=12.66$	$p<.001$	tau=.143
30-44:	df=1	$x^2=6.195$	$p<.02$	tau=.097
Over 44:	not significant			

Table 16

Approval of family planning by nativity,
education controlled

Education		Native-born		Foreign-born		Total
		No.	%	No.	%	
Low	Approve	70	82.4	27	57.5	97
	Disapprove	15	17.6	20	42.5	35
	Total	85	100.0	47	100.0	132
Medium	Approve	62	91.2	9	90.0	71
	Disapprove	6	8.8	1	10.0	7
	Total	68	100.0	10	100.0	78
High	Approve	22	95.7	4	50.0	26
	Disapprove	1	4.4	4	50.0	5
	Total	23	100.0	8	100.0	31

Low:	df=1	$x^2=8.40$	$p<.01$	tau=.073
Medium:	not significant			
High:	df=1	$x^2=6.08$	$p<.02$	tau=.295

The relationship of approval of family planning to the foreign-born/native-born dichotomy is an interesting and important one. It seems to hold up when religiousness is controlled (Table 14), being stronger for those of higher religious conviction; and when age is controlled (Table 15), except for older women, possibly the result of cultural assimilation; and when education is held constant (Table 16), except for the middle level of education. But it can be seen that the relationship of approval to nativity is one which to a large extent involves religion through interaction. It has been shown that the relationship between religion and approval is highly significant and that it remains strong even when age, education and degree of attitude religiousness are controlled in turn. The effect of using nativity as a control is shown in Table 17. It is apparent that amongst the native-born the relationship with religion is much weaker. Much of the strong relationship had been contributed by the foreign-born women. Fully 62 per cent of Catholic foreign-born women disapprove of family planning (they represent about 14 per cent of all women and about 60 per cent of Catholic women in our sample).

When nativity is cross-classified against approval, while religion is held constant, the relationship by the foreign-born/native-born dichotomy is not significant amongst non-Catholics. While religion operates to produce significant differentials for both the foreign-born and the native-born, it would appear that religion intervenes between nativity and approval to produce a relationship only through interaction effects.¹⁴ To some extent, first generation native-born Catholics are likely to be influenced by their mothers, producing ethnic differences amongst the native-born as well.

Table 17

Approval of family planning by religion,
nativity controlled

Nativity	Religion	Catholic		Non-Catholic		Total
		No.	%	No.	%	
Native-born	Approve	36	72.0	118	93.7	154
	Disapprove	14	28.0	8	6.3	22
	Total	50	100.0	126	100.0	176
Foreign-born	Approve	13	38.2	27	87.1	40
	Disapprove	21	61.8	4	12.9	25
	Total	34	100.0	31	100.0	65

Native-born:	df=1	$x^2=13.43$	$p<.001$	tau=.087
Foreign-born:	df=1	$x^2=18.2$	$p<.001$	tau=.253

Table 18

Approval of family planning by nativity,
religion controlled

Religion	Nativity	Native-born		Foreign-born		Total
		No.	%	No.	%	
Catholic	Approve	36	72.0	13	38.2	49
	Disapprove	14	28.0	21	61.8	35
	Total	50	100.0	34	100.0	84
Non-Catholic	Approve	118	93.7	27	87.1	145
	Disapprove	8	6.3	4	12.9	12
	Total	126	100.0	31	100.0	157

Catholic:	df=1	$x^2=8.15$	$p<.01$	tau=.113
Non-Catholic:	not significant			

Conclusion

Data from a relatively small but carefully controlled sample of married women in a small town was analysed in order to portray the incidence of use of various methods of contraception. Refinements on the basis of age, sterility status and current pregnancy were employed in order to make estimates of pregnancy risk for all married women and for various subgroups in the population.

The shift to the use of a relatively new and highly effective method - oral contraception - was found to have taken place amongst all subgroups of the population studied. Use of orals accounts for 69 per cent of all methods used currently or before the last pregnancy. Fully 47 per cent of all women (including the sterile) under 45 years of age are currently employing orals, a rate which is probably the world's highest. Use of rhythm, mainly by Catholic women, is the next most prevalent followed by the I.U.D., at 9.4 per cent and 5.7 per cent respectively of all women under 45. More traditional methods such as the condom, diaphragm and withdrawal are altogether used as the main method by less than six per cent of all women. Younger women, non-Catholics, the native-born and women of low religious conviction all prefer orals to a greater extent than their respective counterparts.

When efficacy of means is considered, it is clear that Catholic and foreign-born women are much more exposed to pregnancy than other groups. Older women are less well protected than those under 30 and an attitude of religious conviction results in greater pregnancy risk. The effect of education is unclear but seems to result in increased protection up to a medium level of education and thereafter has less influence.

The overwhelming majority of women in our sample approve of the

principle of family planning through contraception at least in so far as they would not want restriction on its use by others. Age and degree of religiousness seem to be directly but weakly related to approval of family planning while the effect of education is unclear. The Catholic/non-Catholic difference in approval of family planning holds for all categories of all control variables employed but it is severely weakened amongst the native-born, foreign-born Catholics being the most orthodox in their views. The foreign-born/native-born difference does not hold for non-Catholics. Religion is an intervening variable producing a nativity difference through interaction.

The crude birthrate for Australia, as for a number of other developed countries, has dropped by over a third in the last decade. A substantial part of the explanation was the smaller number of women in the reproductive range. Part of the drop was also the result of changes in cohort timing of births. In addition there has been speculation over what part "the pill" may have played in the recent reduction of births (Borrie, W.D. 1969).

It is significant that an examination of age-specific fertility, from census data, indicates that the reduction has been across all age groups except those 15-19,¹⁵ and is not inconsistent with an interpretation in terms of broad structural and normative changes with regard to family building, occurring across the whole nation. Although it should be observed that the recent reduction does not approximate the low rates obtained during the last economic depression, when the pill was not available, the oral would certainly provide a ready means whereby changes in desired family size could be effected, and there could be considerable reduction in fertility resulting from the elimination of "unwanted" births alone. Informal observation and these data indicate a trend towards increased secularisation and a more relaxed attitude to contraception. Those who consider the teachings of religion to be less important in guiding their lives show an increased tendency to endorse family planning and are the least exposed to pregnancy risk of all groups in this sample.

In the past, use-effectiveness of contraceptive means was low mainly because motivation had to be high and consistent if each child was to come only when specifically planned. Family planning in the past was probably characterised mainly by a degree of successful spacing. When a couple had as many children as wanted, motivation to prevent further births was increased and fecundity impairments came to the rescue in many cases. However, the recent widespread adoption of orals is likely to produce more intended pregnancies and real planning in the future. While these data cannot directly link use of orals to the recent fertility decline, it is not unreasonable to postulate that cohorts now under 30, a group exhibiting high protection against pregnancy through use of highly efficient contraceptive means, may well delay births to the point where other competing incentives, such as the desire for early home ownership, more consumer goods, meeting time payment instalments and achieving emancipation and a career for the wife, may well rule out the additional child which the couple might otherwise have had.

Footnotes

1. Ryder, N.B. and Westoff, C.F. (1971:127) report subfecundity levels for the women in their 1965 study as 13 per cent for those under 30 and 39 per cent for those 30-44.
2. Commonwealth Bureau of Census and Statistics, Births:1970, Canberra 1971, p.7.
3. Jones, G.W. and Mauldin, W.P. (1967:2) estimate from reports of manufacturers and import records that, as of July 1967, 34 per cent of married women 15-44 years were using orals in Australia.
4. A similar history and study of concomitant fertility change will be possible from the Melbourne data.
5. Similar data is not yet available for the U.S. but the 1970 National Fertility Study should provide up-to-date information.
6. Cross-classification was carried out for these variables, but the data has not been presented since cells are small. While differences are small overall, religiousness does seem to contribute to use of rhythm amongst Catholics.
7. This method has been available since about 1964. Ryder and Westoff (1967:2) report use rates in late 1965 at 1.3 per cent for white women and 2.8 per cent for non-whites.
8. Westoff, Potter and Sagi (1963) report that Catholic women use contraception less and want larger families than any other religious denomination.
9. The larger survey in Melbourne is more detailed in its attempt to delineate the proportions sterile and subfecund and to obtain reasons why a respondent thinks she is sterile.
10. There may be some under-reporting due to reticence amongst Catholics to admit to use of methods other than rhythm, especially withdrawal.
11. The actual item employed: "In guiding your life, would you say that the teachings of religion were:
 1. Very important
 2. Quite important
 3. Guidelines only
 4. Not relevant"
12. See Westoff et al., 1963, pp. 232-6 for a description of overall planning in the U.S. before orals.
13. Correction for continuity was used in the few cases where this occurred.
14. Interaction here is understood as variation in the dependent variable resulting from variation in the independent only when certain conditions are met by a third intervening variable.
15. The fertility rate of those 15-19 has been rising for some time but the contribution of this group to total births is small.

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LIFE CYCLE OF THE FAMILY

Christabel M. Young

Introduction

The concept of the "life cycle of the family", originally employed in a simplified form by rural sociologists during the 1930s in their studies of American farming families, and refined during the late 1940s and subsequently, has been described by Bogue as "one of the major contributions of demography to the study of family life".

Some data about the events in the family life cycle such as age at marriage, age at birth of first child, and number of children, can be obtained from statistics of registrations of vital events and census tabulations. However, because of the difficulty in linking the various sets of information to describe the experience of either birth cohorts or marriage cohorts of women, and the narrow range of events which such information necessarily must cover, any analysis of the life cycle from such data is considerably limited.

Use of survey data containing detailed information about the incidence of all the major demographic events throughout each respondent's marriage not only permits a cohort approach to the study of the life cycle of the family but also enables a deeper analysis of the interaction of various events in the life cycle.

Obviously because of the small sample of 247 respondents used in the Queanbeyan pre-test, for some parts of the analysis it is feasible to subdivide the sample into only a few birth cohorts or marriage cohorts, and some of the more detailed analysis can only be used to describe the experience of all respondents in the sample. Nevertheless, the results do summarize the life cycles of the families of the respondents (i.e. once-married, currently-married women aged under 60 years living in Queanbeyan), and also serve as an introduction to the fuller analysis which will emerge from the data from the main survey.

Data collected in the Queanbeyan pre-test which is relevant to the study of the life cycle of the family include statistics relating to the past - the respondent's age at marriage, her pregnancy history including her age at having her last child, and the ages at which her children become independent and leave home, and statistics relating to the future - how many children the respondent expects to have, and at what age she expects to complete her childbearing. The combination of these variables constitutes a statistical description of the major events affecting the size and structure of each respondent's family throughout her marriage.

The pattern of these events can be influenced by many variables,

notably the birth year of the respondent and the respondent's year of marriage, and the effect of these two variables is considered in this paper. Because of the small number in this sample (247 respondents) it is not feasible to consider groups subdivided by both birth year and year of marriage, nor to study the effect of other variables which could also be expected to influence the life cycle of events in the family, such as country of birth, religion, socio-economic status, use of contraception, etc. The more refined analysis which will incorporate a study of the effect of these additional factors must be left until the data from the main survey of approximately 2,500 respondents are available.

Demographic characteristics of the respondents and their families

The distribution of the respondents according to five-year groups of birth years is shown in the first part of Table 1. For the purpose of the survey, a woman eligible for an interview was defined to be aged between 15 and 60 years, once married, and currently living with her husband. However the distribution of women in the sample within this age range is quite different from the distribution of all married women in New South Wales within the same age range as recorded at the 1966 Census. The Queanbeyan sample contains about twice the proportion of women aged between 15 and 24 years compared with the distribution for all New South Wales, about two-thirds the proportion of women aged between 40 and 49 years, and about one-half the proportion aged between 50 and 59 years. The average age of the respondents was about 33½ years. The unusually high proportion of the respondents born since 1945 probably occurs partly because Queanbeyan, with its close association with Canberra, the rapidly growing national capital of Australia, is especially attractive to young adults. In addition, the possibility of some mis-statement of birth year should not be discounted.

The second part of Table 1 shows the distribution of the respondents according to their date of marriage. As would be expected from such a young population, nearly 40% of the women had married after 1964, and the average duration of marriage for all women is about 12 years. If the year of occurrence of marriage is considered, the most common dates are 1968, 1969 and 1970. Approximately the same numbers of respondents were married in each group of five years between 1940 and 1964, and the numbers fall steeply for the earlier years.

The third part of the table indicates the distribution of the respondents' children by birth years. The average age of the children is about 12 years; about one-half are of school age or teenagers, while the rest are almost equally divided into children below school age and children aged 20 years or over.

The distribution of the number of liveborn children among the 247 families is shown in the last part of Table 1. One-, two-, and three-child families are the most common, and the average number of liveborn children per respondent is 2.2. However this distribution does not entirely represent completed families; if the data on expected children and current pregnancies are also considered the results suggest that nearly 5% of the respondents will have no children, 3-child families will be most common (about 1/3), and that nearly 80% of families will have 2, 3 or 4 children. The average expected completed family size is almost 3 children.

Table 1

Demographic Characteristics of the Respondents

<u>Birth year</u>	<u>Number of respondents</u>	<u>Date of marriage</u>	<u>Number of respondents</u>	<u>Number of respondents' liveborn children</u>	<u>Number of families</u>	<u>Birth year of children</u>	<u>Number of children</u>
1910-14	6	1930-34	3	0	48	1930-34	2
1915-19	12	1935-39	10	1	54	1935-39	14
1920-24	28	1940-44	15	2	42	1940-44	26
1925-29	24	1945-49	34	3	56	1945-49	60
1930-34	24	1950-54	23	4	18	1950-54	74
1935-39	32	1955-59	27	5	16	1955-59	107
1940-44	33	1960-64	34	6	9	1960-64	109
1945-49	60	1965-69	61	7	2	1965-69	104
1950-54	28	1970+	36	8+	2	1970+	42
		No inf.	4			No inf.	8
<u>Total</u>	247	<u>Total</u>	247	<u>Total</u>	247	<u>Total</u>	546

Experience of birth year cohorts

Table 2 outlines some of the demographic history and expectations relating to the respondents in the Queanbeyan survey for four birth year cohorts of women - those born before 1925, during 1925-34, 1935-44 and during or since 1945.

There is some slight evidence of a decline in the average age at marriage and average age at having the first child for each more recent birth year group. However the sudden drop between the figures for the 1935-44 and 1945-54 birth year cohorts is probably due mainly to the incomplete experience of the 1945-54 birth year cohort rather than to differences between the ultimate experience of these two cohorts. Because women born between 1945 and 1954 were at the time of the survey aged between 17 and 26 years, additional members of this cohort are likely to marry, and, furthermore, even among those who have married, nearly one-half have yet to have their first child. The closeness of the average age at marriage and average age at having the first child for the 1935-44 birth cohort is partly explained by the fact that only 91% of these women have had their first child.

The figures giving the proportions of women who have had their last child are indisputable for those past the childbearing ages, i.e., women born before 1924, but are based on claims about completion of childbearing for the younger cohorts, and so are less reliable. The figures regarding the expected number of children are subject to the same reservations. However, the trend in these two sets of figures is probably sufficiently reliable to indicate the different stages in family building that the four birth cohorts have attained.

The next set of figures indicates what the final completed family size can be expected to be for the four cohorts. There appears to be little difference in total numbers expected altogether. More detailed information suggests that the relatively large value for the women born in 1935-44 is due to the experience of those born in 1935-39, while the value for women born before 1925 is deflated by a low average completed family size for the 1920-24 birth year cohort. These variations may be due to the small sample or to real differences which may exist between these groups of women. It is also possible that the experience of the 1920-24 birth year cohort may have been affected by postponement of marriage and child-bearing due to the Second World War.

The third part of Table 2 gives some data concerning the effect of children leaving home on the size of the family. Respondents born before 1925 have an average of less than half of their surviving children still at home, while all those born since 1935 have the entire family still present. It is interesting to observe that, because the ultimate expected family sizes of the 1925-34 and 1935-44 birth year cohorts are approximately the same, and the average number of children who have left home for the 1925-34 birth year cohort is similar to the average number of children expected by the 1935-44 birth year cohort, at the time of the survey these two cohorts had approximately the same average number of children at home.

Table 2

Events in the Respondents' Family Life Cycle

<u>Event</u>	<u>Birth year of respondents</u>			
	<u>Before 1925</u>	<u>1925-34</u>	<u>1935-44</u>	<u>After 1944</u>
Average age at marriage (years)	23.5	23.0	22.2	20.6
Average age at birth of 1st child (years)	25.5	24.7	22.6	20.7
Proportion who have had their first child (%)	98	94	91	57
Proportion who have had their last child (%)	100	85	55	18
Average number of surviving children	3.24	3.00	2.52	0.82
Proportion pregnant	0	0.02	0.11	0.20
Average additional expected number of children	0	0.04	0.59	1.92
Average ultimate size of family	3.24	3.06	3.12	2.94
Average number of children who have left home	1.80	0.46	0	0
Proportion of surviving children who have left home	0.55	0.15	0	0
Number of surviving children remaining at home	1.44	2.54	2.52	0.82

Structure of families - life cycle categories

If the life cycle of the family is considered as beginning with marriage, then proceeding with the building-up of the family with each birth, the gradual ageing of each child, and then the decline in the family as the children leave home, it can be seen that the function and status of a family depend not only on the number of children in the family but also on the ages of the children. In particular, the mother's responsibilities and the allocation of her time between domestic and outside activities is largely a function of the ages, or stage of development that each of her children has reached. It is generally recognized that a child passes through several important stages of development, each of which has associated with it unique roles for the child and its parents. In the study of families it is common to divide the child's development into infancy, early childhood, later childhood, teenager, young adult, and leaving home. "Leaving home" is used here in the sense of a child leaving home to follow an independent existence outside the home, and to some extent, away from parental responsibility. Accordingly, leaving home does not include the death of a child or the adoption out of a child when very young; events such as these are treated as merely a loss of a child from the family.

It is useful to be able to allocate each family at a given time into a category which describes the developmental status of the children. This is commonly done in terms of the status of the oldest child, or, for more refined analyses, in terms of both the oldest and youngest child. For this analysis the age ranges used for the various stages of development of the children are the same as those used by Rodgers in his work on family life cycle categories.

The distribution of the respondents' families according to the age of the oldest child and the category, at least one child left home, is shown in the last row of Table 3. Similarly, the distribution of the families according to the same age grouping for the youngest child at home, and, in addition, the category, all children left home, is shown in the extreme right-hand column of the table, while the body of the table indicates the distribution according to the ages of the youngest and oldest children, or the leaving home status of children in the family. Once a child has left home, the families are no longer classified according to the age of the oldest child at home.

Because in this sample only 55% of the families have the oldest and youngest children in the same age groups (i.e. the diagonal elements in the table), the classification of families according to the ages of the youngest and oldest children provides additional information about the structure of the family, and is an advantage for any refined analysis of the life cycle.

It is interesting to note that the most common categories in which the families from the Queanbeyan sample occur are, in order of frequency, those which have no children, all children aged 0-2 years, all children aged 6-12 years, teenagers in families where children have left home, youngest child aged 0-2 years and oldest aged 3-5 years, and youngest child aged 6-12 years and oldest aged 13-19 years.

Respondents in the survey with a given birth year appear to fall into a few major categories of family structure. Thus, it is found that the majority of families of respondents born before 1925 consist of teenage children with older children left home, or with all children left home. For respondents born between 1925 and 1934 the majority of families have youngest children aged 6-19 years, and the oldest children teenagers or left home, while for respondents born between 1935 and 1944 the majority have the youngest child aged 0-5 years and oldest child aged 6-19 years. Finally, the majority of respondents born since 1944 have either no children or all children in infancy.

Table 3

Distribution of Families According to the Ages of the Youngest and Oldest Surviving Children, or Leaving Home Status of the Children

<u>Youngest child at home (age in years)</u>	<u>Oldest child at home (age in years)</u>						<u>At least one child left home</u>	<u>Total</u>
	<u>No children</u>	<u>0-2</u>	<u>3-5</u>	<u>6-12</u>	<u>13-19</u>	<u>20+</u>		
No children	51	-	-	-	-	-	-	51
0-2	-	42	16	11	3	-	2	74
3-5	-	-	4	11	6	-	4	25
6-12	-	-	-	18	15	2	11	46
13-19	-	-	-	-	7	8	17	32
20+	-	-	-	-	-	2	6	8
All children left home	-	-	-	-	-	-	11	11
Total	51	42	20	40	31	12	51	247

The data for Queanbeyan also suggest that the probability of a respondent being pregnant or expecting another child (apart from any current pregnancy) depends on the life cycle category of her family. Thus the probability is greatest when she has no children, has all her children aged 0-2 years, or has her oldest child aged 3-5 and the youngest 0-2 years.

A very detailed analysis of the relationship between expected children and the life cycle categories is not possible because of the size of the sample, but the figures do suggest that both the pregnancy status of the women in the sample and their expectation of additional children is more strongly influenced by the age of the oldest child rather than by the age of the youngest child.

Comparisons of the respondents with their mothers

Some information was collected about the respondent's mother to enable a few basic comparisons to be made between the life cycle events for the two groups of women. The birth year ranges of the respondents and their mothers overlap, but, even though the two groups do not represent two distinct birth cohorts, it can be argued that, provided the respondents are representative of their mothers' children insofar as position in the family is concerned, then the average experience within each group represents the experience of women born a generation apart.

Table 4 shows the observed and expected distributions of the respondents' position in their mothers' families according to the number of the mothers' children. A X^2 test indicates that the expected and observed distributions are not significantly different ($p > 0.50$), and this suggests that the respondents are not atypical of their mothers' children with regard to order of birth.

Table 5 shows the average ages of marriage, birth of 1st child, and actual or expected ages of having last child for the respondents and their mothers. The average numbers of years between each of these events are also shown.

There appears to be very little difference between the experience of the two generations except in the average age at which the women have their last child. Regardless of whether the sum of the actual and expected experience, or merely the actual experience of the respondents is considered, their last child is born, on average, when they are more than four years younger than their mothers were.

Table 4

Comparison of the Observed and Expected Distribution
of the Respondent's Position in Her Mother's Family

<u>Position in the family</u>	<u>Observed</u>	<u>Distribution</u>	<u>Expected</u>
1	73		68
2	61		60
3	35		42
4	24		30
5	18		19
6	13		12
7	11		7
8 or 8+	12		9
Total	247		247

Table 5

Comparison of Events in the Life-Cycles of the
Respondents and their Mothers

<u>Event</u>	<u>Respondents (years)</u>	<u>Mothers (years)</u>
Average age at marriage	22.0	22.2
Average age at birth of 1st child	23.3	23.9
Average age at birth of last child	31.0 ^a	35.4
Average age gap between marriage and birth of 1st child	1.3	1.7
Average age gap between birth of 1st and last children	7.7 ^b	11.5
Average age gap between marriage and birth of last child	9.0	13.2

Notes

- ^a The figure of 31.0 represents the combination of actual and expected experience. If only actual experience is considered, the figure is 30.9 years.
- ^b The figure 7.7 is derived from the combination of actual and expected ages at completing childbearing and actual ages at commencing childbearing. However, the same figure is obtained when the age gap is derived only from experience of women who have completed their childbearing.

The difference between the generations is further illustrated in Figure 1. This shows the cumulated percentages at each age of the respondents and their mothers who have married, had their first child, and had or expected to have their last child. Again the striking difference between the ages at which childbearing is completed or expected to be completed is evident.

Children leaving home

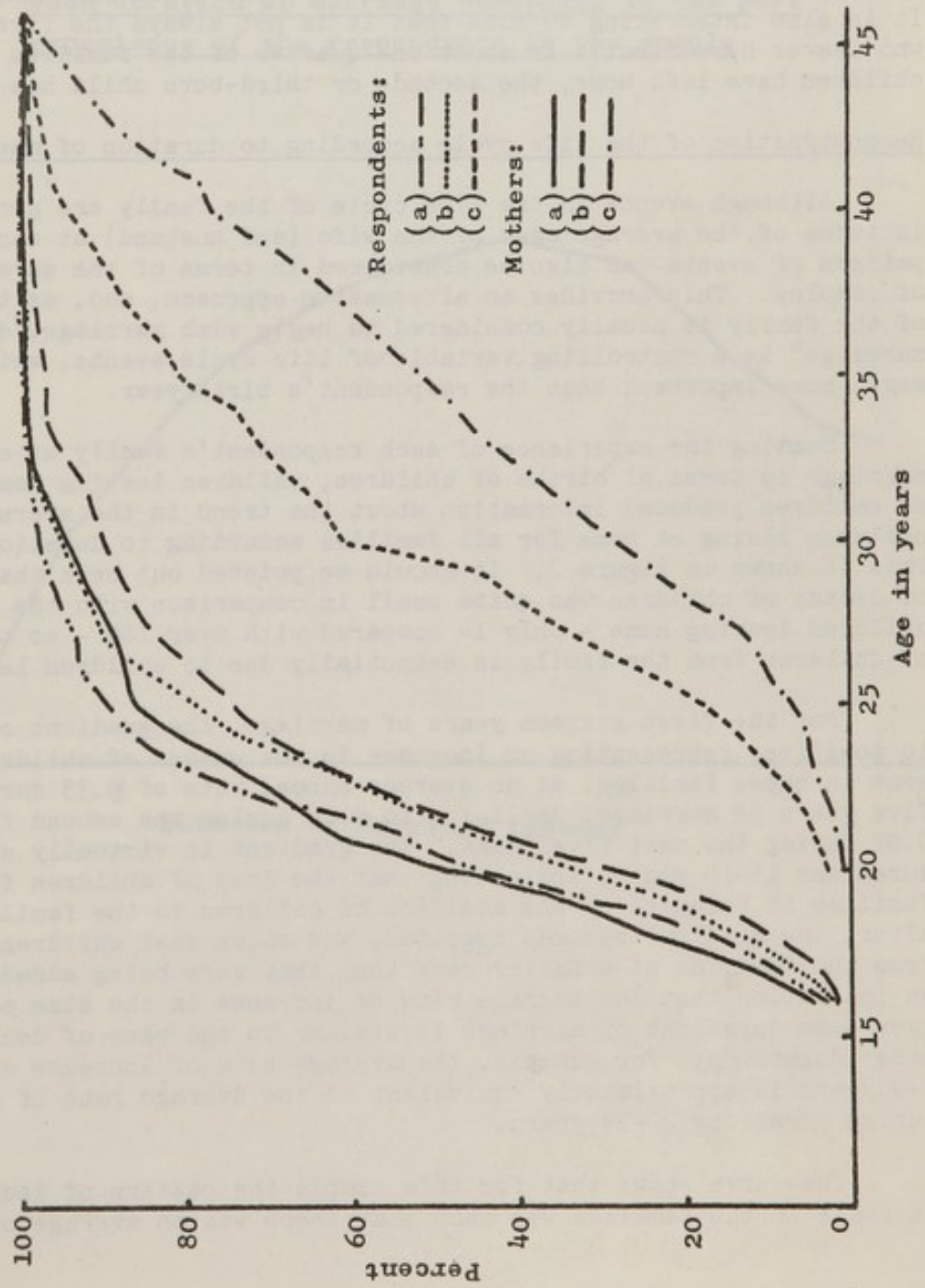
From the point of view of studying the family life cycle, structure of the family and the trend in family size, the event of a child's leaving home is as important as the event of that child's birth. Slightly less than 1/5 of the children of the respondents in the Queanbeyan survey had left home, and 80% of these left home between the ages of 17 and 23 years. The distribution is positively skewed with a peak at 18 years and a mean of 20.1 years. The main reasons given for leaving home were marriage in 68% of cases, followed by work (including National Service) in 17% of the cases, travel or a wish to be independent in 9%, and education in 6%.

Interesting differences between sons and daughters in both reasons for, and proportions leaving home occur in the data from the Queanbeyan survey. Although virtually all the children born before 1945 have left home, for children born during 1945-49, 96% of daughters have left home but only 60% of sons, while for children born during 1950-54, the corresponding figures are 56% for daughters and only 10% for sons. Altogether, among the children born before 1955, 43% of the sons and 81% of the daughters have left home, and marriage is given as the reason for leaving home for 77% of the daughters who have left home but for only 50% of the sons.

When the reason for leaving home is not marriage, the experience of the sons and daughters is quite similar. There were 19 sons and 16 daughters who left home for reasons other than marriage, at an average age of 18.8 years for the sons and 18.5 years for the daughters. However, when the reason for leaving home is marriage it is found that only 19 sons but 50 daughters left home because of this, and that the average age at leaving home in this case was 23.0 years for sons and 20.1 years for daughters.

Thus differences in patterns of leaving home for sons and daughters in the Queanbeyan sample occur because a higher proportion of the daughters have married compared with the sons, and they have married at much earlier ages than the sons. However the ages at which the children leave home is also influenced by the proportion who leave home for reasons other than marriage. There is also evidence that the oldest children from large families leave home at younger ages than the oldest children from small families, suggesting that pressure of numbers is another influence on a child's leaving home. Another aspect in the differences between the behaviour of sons and daughters is that, among the children that have married, a higher proportion of the sons have married after leaving home compared with the daughters - the ratios being 37% for the sons and 15% for the daughters. No children born in the five-year groups since 1950-54 have married, but among the children born up to and including 1950-54, one-third of the sons had married

Figure 1: Cumulated percentages of the respondents and their mothers who (a) marry, (b) have their first child, and (c) have their last child (or expect to have their last child) by a given age



compared with just over three-quarters of the daughters.

Analysis of information about the current pregnancy status of the respondent, the number of additional children she expects, and the number of her children who have left home suggests that there is virtually no overlap between the building-up stage of the family and the stage of decline in family size when the children start leaving home. Nearly all the respondents who have some or all of their children left home are neither pregnant nor expect any more children. This is confirmed by a study of the number of years between the birth of the last child and the first event of a child leaving home. In only 3 of the 48 families where one or more children have left home did the first child to leave home do so before the last child was born, and the average number of years between the birth of the last child and the first event of a child leaving home was 9 years. It is also interesting to note that it is not always the first-born child who leaves home first; in about one-quarter of the families in which children have left home, the second- or third-born child has gone first.

Reconstruction of the life cycle according to duration of marriage

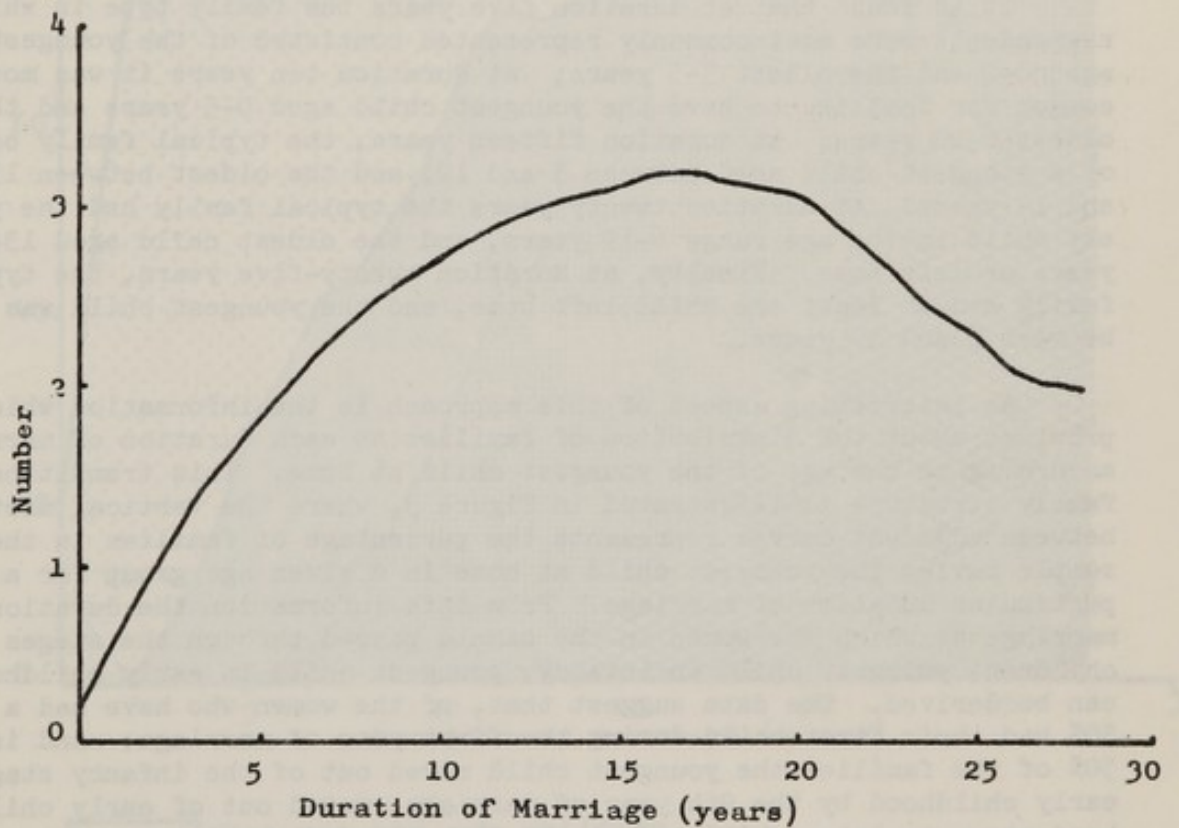
Although events in the life cycle of the family are generally traced in terms of the average ages of the wife (and husband) at each event, the pattern of events can also be considered in terms of the duration of marriage of couples. This provides an alternative approach, and, as the life cycle of the family is usually considered to begin with marriage, "duration of marriage" is a controlling variable of life cycle events, which is, in some ways, more important than the respondent's birth year.

Summing the experience of each respondent's family at each year of marriage in terms of births of children, children leaving home and deaths of children produced information about the trend in the average number of children living at home for all families according to duration of marriage. This is shown in Figure 2. It should be pointed out here that the number of deaths of children was quite small in comparison with the number of children leaving home - only 14 compared with over 100 - so that the loss of children from the family is essentially due to children leaving home.

For the first sixteen years of marriage, the gradient of the curve is positive, representing an increase in the number of children living at home in these families, at an average annual rate of 0.33 during the first five years of marriage, declining to 0.18 during the second five years, and 0.07 during the next five years. The gradient is virtually stationary over durations 15-19 years, indicating that the loss of children from the families is balanced by the addition of children to the families. Thereafter, the gradient becomes negative, and shows that children were lost from the families at a faster rate than they were being added. There is an indication that the average rate of increase in the size of the families over some durations of marriage is similar to the rate of decrease over other durations; for example, the average rate of increase during durations 5-9 years is approximately equivalent to the average rate of decrease during durations 20-24 years.

The curve shows that for this sample the pattern of increase and decrease in the families was such that there was an average of one child

Figure 2: Average number of children living at home at each duration of marriage according to the past experience of the respondents in the sample



living at home after two years of marriage, two children after six years, and three children after fourteen years. Then, after the peak in the curve at durations sixteen and seventeen years, there was again an average of three children at home at duration twenty years, and two children at home at duration twenty-seven years. According to the experience of the respondents in this sample, the increase from an average of two to three children living at home took slightly longer than the decrease in the average from three to two children.

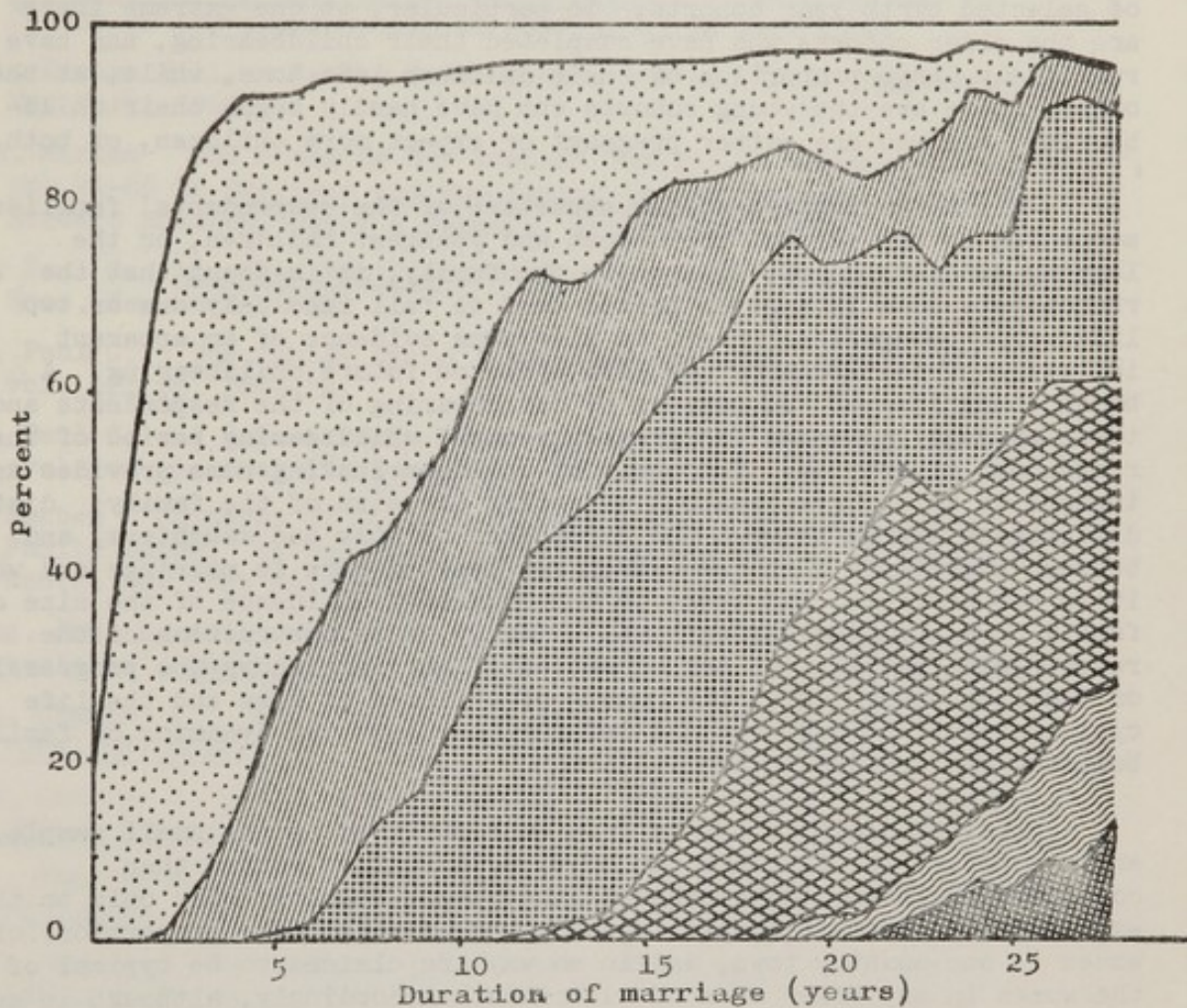
Reconstruction of the life cycle categories for each of the respondents at each year of their marriage, and summing the experience of all respondents through marriage provides information about the progression through life cycle stages by duration of marriage for the Queanbeyan sample. This analysis is based on the grouping of the children's ages suggested by Rodgers in his life cycle analysis.

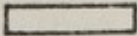
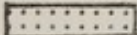
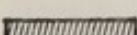
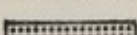
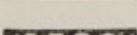
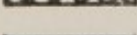
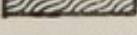
It is found that at duration five years the family type in which the respondents were most commonly represented consisted of the youngest child aged 0-2 and the oldest 3-5 years; at duration ten years it was most common for families to have the youngest child aged 0-5 years and the oldest 6-12 years; at duration fifteen years, the typical family consisted of a youngest child aged between 3 and 12, and the oldest between 13 and 19 years. At duration twenty years the typical family had the youngest child in the age range 6-19 years, and the oldest child aged 13-19 years or left home. Finally, at duration twenty-five years, the typical family had at least one child left home, and the youngest child was aged between 6 and 19 years.

An interesting aspect of this approach is the information which it provides about the distribution of families at each duration of marriage according to the age of the youngest child at home. This transition in family structure is illustrated in Figure 3, where the vertical distance between adjacent curves represents the percentage of families in the sample having the youngest child at home in a given age group for a particular duration of marriage. From this information the duration of marriage at which the women in the sample passed through the stages of no children, youngest child in infancy, youngest child in early childhood etc. can be derived. The data suggest that, of the women who have had a child, 50% had their first child during the first year of marriage; and in 50% of the families the youngest child moved out of the infancy stage to early childhood by the 9th year of marriage, moved out of early childhood stage to later childhood by the 14th year of marriage, and moved into the teenager stage by the 22nd year of marriage.

This analysis indicates that on average the women in the sample became free of the full-time care of their children only after 14 years of marriage, or taking the average age at marriage as 22 years, then, according to the experience of the women in the Queanbeyan sample, a woman would be 36 years old before she could actively pursue her interests outside the home.

Figure 3: Percentage distribution of families according to the age of the youngest child at home for each duration of marriage, based on the past experience of the respondents in the sample



-  Not yet had any children
-  Youngest child at home aged 0-2 years
-  Youngest child at home aged 3-5 years
-  Youngest child at home aged 6-12 years
-  Youngest child at home aged 13-19 years
-  Youngest child at home aged 20+ years
-  All children left home

Summary

This study has provided information about the life cycle of families of a sample of women living in Queanbeyan. Investigation of the demographic characteristics of the respondents and their families reveals the relatively young population that the respondents represent and also indicates that, although the average number of children per respondent is now 2.2, it may be expected to be around 3 when their families are completed. Some comments are given about the differing experiences of selected birth year cohorts; in particular, at one extreme there are the older cohorts who have completed their childbearing, and have a relatively large proportion of their children left home, while, at the other, there are the young cohorts who have hardly begun their childbearing, and who are either pregnant or expect more children, or both.

In the examination of the structure of the respondents' families according to the ages of the oldest and youngest children, or the leaving home status of children in the family, it is found that the respondents born in a given period tend to fall into only one or two life cycle categories. There is also some evidence of an apparent influence of the stage of the life cycle on future childbearing. A brief comparison of the pattern of childbearing of the respondents and their mothers indicates the greatly reduced childbearing period of the respondent generation. The study of children leaving home provides an insight to an important aspect affecting the size of the family; distinct differences emerge between the experience of sons and daughters, and between experience when the reason for leaving home is marriage and when it is not marriage, and there is the suggested influence of the size of family on a child's leaving home. Finally, a reconstruction of the respondents' families at each duration of marriage shows the progression of families according to the number of children at home and the life cycle categories, and provides information about the dynamics of family building and decline in family size.

Detailed analysis of the data is restricted by the small sample, and, therefore the findings can only be indicative rather than conclusive. It should be stressed that these results refer only to the experience of a small sample (though a relatively large proportion) of women in one country town, and in no way are claimed to be typical of the women in any wider area of Australia. Accordingly, although in some cases conclusions drawn about trends in the results may later be found to be applicable to the families of a different sample of women, the present observations are intended to describe only those families covered in this sample.

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KNOWLEDGE AND PRACTICE OF CONTRACEPTION

Helen Ware

In Australia today it is often assumed that the knowledge and means of effective birth control are within easy reach of all married women. This is seen as due to the much publicised advent of the contraceptive pill, in spite of the legal ban on contraceptive advertising and the almost total lack of family planning clinics outside the state capitals. This paper presents evidence of the contraceptive knowledge and past practice of a close to one in ten sample of the wives in one somewhat atypical New South Wales country town, which has a high proportion of immigrants and close links with the national capital.

The extent of contraceptive knowledge

The respondents were asked whether they knew anything about five major methods of contraception: rhythm, the diaphragm, the I.U.D., the condom and the pill. Since we were interested in knowledge of the methods themselves rather than in familiarity with particular terms, the interviewers were provided with a card listing a wide variety of popular synonyms and even brand names to show to hesitant respondents, together with instructions on how to explain the nature of the methods in the simplest language possible, so that all the women who had any knowledge of the methods could be identified.

Levels of awareness of some form of contraception were very high. Only two women, both Italian born, claimed never to have heard of any form of contraception, all but five of the respondents had some knowledge of the contraceptive pill.¹ Just over half of the wives interviewed had heard of at least four of the five methods specifically queried. However, as Table 1 shows, there were marked differentials in the extent of contraceptive knowledge. Older women past the age of childbearing were the least well informed; whilst the wives aged thirty to forty-four, who had mostly completed their families but were still fertile, were the best informed.² Only 28 per cent of Roman Catholics had heard of all five methods compared with 40 per cent of members of other denominations and 50 per cent of those claiming no religious affiliations.

Native born Australians were better informed than the migrants, especially those from southern Europe. Whereas a third of the southern European migrants had only heard of one method, i.e. the pill, only four per cent of the Australian born had only heard of one method and 84 per cent had heard of at least three methods. Knowledge rose markedly with increasing length of formal education: both of the women who had not heard of any method of contraception had less than five years of schooling; only 53 per cent of those with less than ten years at school knew of at least four methods as compared with 70 per cent of those with

Table 1

Number of the five main contraceptive methods known by age, religion, nativity, education, parity, husband's occupation, and contraceptive usage^a

		None		1		2		3		4		5	
		No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
<u>Age</u>	Under 30	0	0	6	5	17	15	15	14	29	26	44	40
	30-44	2	2	9	11	14	5	10	13	21	27	33	42
	45+	0	0	9	17	11	21	10	19	10	19	13	24
<u>Religion</u>	None	0	0	3	14	2	9	2	9	4	18	11	50
	Catholic	2	2	13	15	7	8	16	19	23	27	24	28
	Other	0	0	8	6	23	17	17	13	33	24	55	40
<u>Nativity</u>	Australian	0	0	7	4	20	11	27	15	47	26	77	43
	Southern European	2	7	9	31	4	14	3	10	6	21	5	17
	Other	0	0	8	22	8	22	5	14	7	19	8	22
<u>Years of education</u>	0-5	2	8	6	25	7	29	3	13	4	17	2	8
	6-9	0	0	12	13	11	13	11	13	19	22	34	39
	10-12	0	0	6	5	13	11	18	15	36	30	46	39
	13+	0	0	0	0	1	8	3	23	1	8	8	61
<u>Level of education</u>	Primary only	2	4	13	23	10	18	9	16	9	16	13	23
	Some secondary	0	0	10	6	16	10	21	14	45	29	63	41
	Leaving +	0	0	1	3	6	19	5	15	6	19	14	44
<u>Parity</u>	No children	0	0	1	2	5	11	6	13	13	28	22	47
	1-3 children	1	1	17	11	24	16	21	14	38	25	49	33
	4+ children	1	2	6	13	3	6	8	17	9	20	19	41
<u>Husband's occupation</u>	White collar	0	0	1	2	5	10	8	15	11	21	27	2
	Craftsman/Foreman	2	2	13	16	12	14	11	13	26	31	19	23
	Other	0	0	10	9	15	14	16	15	23	21	44	41
<u>Ever used contraception</u>	No	2	4	19	38	11	22	4	8	7	14	7	14
	Yes	0	0	5	3	21	11	31	16	53	27	63	43
<u>Total</u>		2	1	24	10	32	13	35	14	60	25	90	37

Note :

^a. n = 243 as 4 respondents did not answer this question.

ten or more years of schooling. Some 68 per cent of those with some secondary education, in contrast with 39 per cent of those with primary education only, had some knowledge of four or more of the methods. Over half of the wives of men in white-collar occupations had some knowledge of all five methods as compared with 23 per cent of the wives of craftsmen and foremen; however, the wives of semi-skilled and unskilled labourers were better informed (41 per cent had knowledge of all five methods) possibly because they were more likely to have discussed such matters with their female friends and neighbours. Women who have themselves used some form of contraception are more likely to be aware of the existence of a number of methods: 38 per cent of non-users as compared with 3 per cent of users have only heard of one method, almost invariably the pill.

Obviously all of these factors are not independent of one another. The southern European migrants compose a less well-educated, largely Catholic group, markedly less aware of the available methods of contraception than the better-educated Australian born non-Catholics. Any educational campaign in Queanbeyan to increase awareness of the contraceptive options available would certainly need to concentrate upon the educationally less privileged groups, and upon the southern European migrants in particular. Rejection of contraception is often related to ignorance; women who have learnt only of the pill through mass media items stressing its dangers reject all family planning, unaware that other means of contraception are available.

Knowledge of individual methods

No other method was as widely known as the pill; whereas 98 per cent of the wives knew something of the pill only 75 per cent knew of rhythm, 68 per cent of the condom, 62 per cent of the diaphragm and 60 per cent of the I.U.D. Whilst the two most recent innovations, the pill and the I.U.D., were best known to the youngest wives, all other methods were best known to the group of wives aged thirty to forty-four who are strongly motivated to an interest in contraception by the fact that although they have usually achieved their desired family size they have still some years of fertility before them. The older women were formerly equally strongly motivated but at that time contraception was less openly discussed than it has been since the introduction of the pill and the recent relaxation of some of the mass media constraints on discussing the subject. It is noteworthy that the older women are the only group to know more of the two major mechanical methods which preceded the pill (the diaphragm and the condom) than of rhythm; again only 40 per cent of the older women knew anything of the I.U.D., a new contraceptive development which has been little publicized in the mass media. The wives who have yet to bear children are most likely to be aware of the individual contraceptive methods; this reflects the youth of this group together with their greater sophistication in avoiding pregnancy before or immediately after marriage. Women with four or more children are more likely to be aware of, and to have sampled, rhythm; this reflects the fact that, among women with large families, there is a high proportion of Catholics and other women who accept the less effective contraceptive methods for religious or cultural reasons. Interest in less effective contraceptive methods is a characteristic directly linked to the desire for a large family at the

time of marriage; that the women with larger families are more likely to know of the diaphragm is simply a reflection of the age structure of this group.

In every case the Australian born wives were the most knowledgeable about the methods of contraception and the southern European born wives were the least aware of the methods. At least two thirds of the Australian born wives knew something about each of the methods, a reflection of the more extended formal education received by this group and also of the extent to which the native born discuss contraception amongst themselves. The southern European born wives are handicapped both by their comparative lack of education and by their difficulties in understanding English. The language problem cut them off to some extent from the mass media and from gossiping with women other than those of their own language groups, who have been traditionally disinclined to discuss such matters. Catholics are the least likely to know of any contraceptive methods except rhythm, the method favoured and, in Australia, taught by their church.³ However, the rhythm method is almost as well known among non-Catholics as it is among Catholics. Catholic ignorance of the diaphragm is understandable since this was the method favoured by the institutionalized family planning movement and the medical profession but very little publicized except amongst those who had already shown some interest in mechanical contraception. The even greater Catholic unawareness of the I.U.D. reflects the singular lack of mass media publicity given to this method in marked contrast with the attention drawn to the pill.

Table 2

Percentages of women who have some knowledge of five contraceptive methods by age, religion, nativity, education, parity and husband's occupation and income

	Rhythm	Diaphragm	I.U.D.	Condom	Pill
Total sample	75	62	60	68	98
<u>Age</u>					
Under 30	73	65	71	71	99
30-44	82	68	58	73	95
45+	47	51	40	57	100
<u>Religion</u>					
None	75	62	62	62	100
Catholic	76	54	50	65	95
Other	74	68	65	72	99
<u>Nativity</u>					
Australian	84	72	68	72	100
Southern European	50	32	38	50	86
Other	54	45	38	67	97
<u>Education (years)</u>					
0-6	48	26	22	48	78
7-9	69	66	56	68	100
10-12	83	64	68	71	100
13+	92	92	77	92	100
<u>Level of education</u>					
Primary only	56	45	36	36	93
Some secondary	80	68	69	71	99
Leaving +	84	68	58	81	100
<u>Parity</u>					
No children	84	69	69	71	96
1-3 children	72	59	60	68	99
4+ children	77	70	43	67	97
<u>Husband's Occupation</u>					
White collar	83	70	74	78	98
Other	72	60	56	79	98
<u>Husband's income</u>					
Under \$4,000	70	55	53	65	97
\$4,000+	78	68	65	71	99

Table 3

Percentages of women who have some knowledge of five contraceptive methods by nativity, religion and religious practice

	<u>Catholic</u>		<u>Non-Catholic</u>	
	<u>Australian born</u>	<u>Other</u>	<u>Australian born</u>	<u>Other</u>
	<u>Non-practising^a</u>	<u>Practising</u>	<u>Non-practising^a</u>	<u>Practising</u>
Rhythm	84	94	80	91
Diaphragm	74	68	73	63
I.U.D.	63	58	71	78
Condom	74	74	72	78
Pill	100	100	100	100

Note:

- a. Women who had not attended a religious service in the month prior to the survey were classified as 'non-practising'.

As Table 3 shows, Catholic unawareness of the contraceptive methods is to be found more amongst the immigrants than amongst the native-born, and more amongst the practising Catholics than amongst those who no longer attend church services regularly. However, rhythm is the one method better known to practising Catholics; this is evidence of the stress placed upon this method by the Catholic church, especially in Australia. It should however be noted that, irrespective of religious denomination, those who attend religious services regularly are more likely to know something about rhythm than those who do not; the idea of avoidance of pregnancy by sexual restraint would appear to have some attractions for most practising Christians in Queanbeyan. Although the numbers are very small and any conclusions drawn from Table 3 must necessarily be tentative, it would seem clear that the greater ignorance of the immigrants is not entirely due to the higher proportion of Catholics amongst them (although 28 per cent of the Australian-born as opposed to 52 per cent of the immigrants are Catholics) for the non-Catholic immigrants, despite the presence of a considerable proportion of well-informed British migrants amongst them, are almost as ill-informed as the Catholic migrants. The explanation of the generally lower level of contraceptive knowledge amongst the migrants lies more in their general lack of education than in their religious background.

Knowledge of all five methods of contraception rises steadily and consistently with increasing length of formal education. (The one exception, the marginally greater knowledge of the diaphragm amongst women with 7-9 years of education than amongst women with 10-12 years, probably reflects the greater knowledge of the diaphragm amongst the older women who were educated when it was customary to leave school at a younger age). It is remarkable that no method except the pill is known to even half of those with less than seven years formal education (none of them Australian born) whereas there is no method which is not known to at least half of those with seven or more years education. If level of education attained is examined instead of length of education a very similar picture emerges. Those with primary education only show a marked lack of knowledge of all methods except the pill, whilst those with leaving certificates or equivalent or higher qualifications are the best informed. The one anomaly is the lack of knowledge of the I.U.D. amongst the better educated. It is possible that this is simply a random variation (given that there are only thirty-one women in this group); or it may be that these women come from a class whose doctors feel that they are capable of remembering to take the pill and therefore do not need a more permanent method. The wives of men in white collar occupations are more likely to know about each of the methods than the wives of blue collar workers; the one exception is the condom, a theme of working class wedding jokes rarely mentioned in middle class conversation, which is equally well known to both groups of wives. In Queanbeyan, wives of husbands earning four thousand dollars a year or more are better informed about each of the five methods than the wives of husbands who earn less than this pivotal sum. Both of these differentials reflect the fact that the wives of husbands with higher status occupations and higher incomes are more likely to be better educated, Australian-born, and non-Catholic than the wives of less fortunately circumstanced husbands.

The overall picture would suggest that the I.U.D. is the contraceptive method which stands most in need of further publicity, given the need

for an acceptable alternative to the pill. The group with the greatest need of further contraceptive knowledge includes precisely those women who are already underprivileged in other ways: the less well educated, poorer and usually immigrant wives.

Sources of knowledge of contraception

In a country where the advertising of contraceptives to the general public is illegal we were especially interested to discover how the wives had learnt about contraception. To this end we asked the respondents where they had first heard of the individual methods known to them. It can immediately be seen from Table 4 that the contraceptive pill is unique in that first knowledge of it came in more than half of all cases through public sources: the mass media or books and pamphlets. No other form of contraception has received such effective publicity through the mass media; 36 per cent of the knowledgeable wives had first heard of the pill through television, radio or newspapers or a combination of the three, whereas only 5 per cent had first heard of rhythm or the I.U.D. through these channels and only 1 per cent of the diaphragm or the condom.⁴ It would appear that the pill is the most widely known form of contraception in Australia precisely because it is the one method to be considered both respectable and newsworthy by the mass media. Not since 1888 when Windeyer's judgment in Ex Parte Collins declared access to contraceptive information to be a right of married couples had birth control received such publicity in Australia as it has since the introduction of the pill in 1960. It is interesting but fruitless to speculate how much more widely known the other modern contraceptive, the I.U.D., might have been had it received similar publicity.

The information channels for each method of contraception tend to be highly idiosyncratic. The one method which husbands introduce to their wives is, naturally enough, the condom; almost a quarter of the knowledgeable wives first learnt of this method through their spouses.⁵ Knowledge of the condom obviously spreads very largely through folk channels: only 5 per cent of wives heard of the condom through their doctors, but 43 per cent had been told of its existence by neighbours or friends, in many cases through wedding jokes or actual half-joking gifts of condoms. Rhythm is understandably the one method taught by church literature; 24 per cent of the wives who knew about rhythm had learnt about it through such reading material or through books and pamphlets which they could not identify with certainty as having been church inspired but which they believed to have been so inspired. A few Catholics did state that they had first heard of the pill through denunciations of it in Catholic newspapers or on Vatican radio. In general Catholics learn about contraception through the same informational channels as the remainder of the population. However all the wives who had learnt of rhythm from their husbands were Catholics, as were all the wives, bar one, who had learnt of any method of contraception through specifically church literature.

Rhythm is the method most commonly taught by mother to daughter or by one female relative to another; many girls learn whilst still young that there are "safe days" without learning how to calculate them. It could be hypothesised that this teaching of rhythm by one female relative to another was the reflection of the desire of Catholic women to teach to younger co-religionists the one method of contraception sanctioned by their

Table 4

Sources of knowledge of five methods of contraception

	<u>Rhythm</u>		<u>Diaphragm</u>		<u>I.U.D.</u>		<u>Condom</u>		<u>Pill</u>	
	No.	%	No.	%	No.	%	No.	%	No.	%
Doctor	13	8	28	19	24	17	8	5	28	13
Nurse	0	0	2	2	0	0	0	0	0	0
Mother or Mother in law	15	9	10	7	5	4	5	3	9	4
Other female relatives	20	12	14	10	17	12	3	2	11	5
Male relatives	1	1	3	2	3	2	4	3	2	1
Neighbours and friends	45	26	47	32	51	37	67	43	47	21
Mass Media (T.V., Radio, Newspapers)	9	5	2	1	7	5	1	1	80	36
Books and pamphlets	38	21	22	15	17	12	14	9	30	13
Church Literature	5	3	0	0	0	0	0	0	2	1
Magazines	0	0	1	1	2	2	2	1	4	2
Training courses	19	11	14	10	13	9	15	10	8	3.5
Husband	5	3	2	2	0	0	35	23	1	0.5
<u>Total^a</u>	170	99	145	101	139	100	154	100	223	100

Note:

- a. These totals represent the number of women who had heard of the individual methods and could remember where they had first heard of the method.

church; however in Queanbeyan learning about rhythm from female relatives was equally common amongst non-Catholics and Catholics alike (although only Catholics had learnt of rhythm from male relatives). It would therefore seem probable that the teaching of rhythm by female relatives is more commonplace than the teaching of any other contraceptive method because such teaching naturally fits into an explanation of the nature of the menstrual cycle; discussion of other contraceptive methods is generally more sex linked and more embarrassing.

Doctors are the major source of first knowledge of the diaphragm (for 19 per cent of the knowledgeable) and the I.U.D. (for 17 per cent) after the ubiquitous friends and neighbours (32 per cent and 37 per cent).

The Queanbeyan data strongly suggest that how well a method is known depends on the channels through which knowledge of the method is generally diffused. A sophisticated method which requires medical co-operation before it can be used will only gradually become known unless it is publicized by the mass media. The pill is the one "medical" method to be almost universally known because it is the one method to have received major publicity in the Australian mass media. The I.U.D. and the diaphragm are the least well-known of the major contraceptive methods apparently because they are "medical" methods which have not had mass publicity; the diaphragm is somewhat more widely known because it had been available over a longer period of time than the I.U.D. In time knowledge of new methods will diffuse through the network of the friends, relatives and neighbours of those who have sampled the method, but even that process will be hastened by public discussion of the method in the mass media making the subject topical. The case of the pill would also suggest that the diffusion of knowledge of a new method of contraception will be hastened to the extent that its name is free from embarrassing connotations and its operation can be discussed without reference to sexual organs or intercourse.

The general picture which emerges is of a town where the major source of knowledge of every major method of contraception, excepting the pill, was casual conversation with friends and neighbours. Contraception, long denied public discussion by law and social custom, is talked about over back-fences and cups of tea in strictly personal terms. The majority of wives have heard something about at least four methods of contraception but the source of their knowledge has been largely the stories of their friends and relations and their information is very often misinformation. The articles which have appeared in the women's magazines have done little to dispel folk-beliefs as to the frequency with which women taking the pill become pregnant or the tendency of the I.U.D. to wander round inside the body. One of the things which most impressed our interviewers was the number of folk-tales, often with remarkably little apparent basis in fact, circulating in Queanbeyan especially amongst the New Australians and the less privileged of the native-born.

In order to gauge the extent to which women had had access to expert advice on contraception we asked all respondents whether they had ever discussed contraception with a doctor or a nurse: 74 per cent of the respondents had had such a discussion, almost invariably with a doctor. Since some 70 per cent of the women had at some time used some form of contraception which requires medical supervision or fitting this proportion is not surprising (55 per cent had used the pill, 12 per cent the diaphragm and 7 per cent the I.U.D. - some women had used more than one of these methods). Discussion with a doctor did not necessarily imply detailed coverage of the subject: 68 per cent of the women who had taken the pill had not had any other method mentioned to them by the doctor who first prescribed the pill.

It can be seen (Table 5) that whether the respondents were categorized by age, education or birthplace, or by their husbands' occupations or incomes in every case Catholics were less likely to have discussed contraception with a doctor than their non-Catholic counterparts. There was a steep age gradient in the likelihood of such discussion reflecting the high pill-usage of the younger women and the reliance of the older women on traditional and

non-appliance methods which did not necessitate consultation with a doctor. The older women now past the menopause, the immigrants, especially the southern European born, the poorly educated, and the wives of the semi-skilled or unskilled were all markedly less likely to have discussed contraception with a doctor than the remainder of the wives. Neither the wife's current occupational status nor the husband's income as crudely dichotomised in the table would appear to be immediately related to the likelihood of her having discussed contraception with a doctor. Taking all women together, where the women had had five or more children she was less likely to have discussed contraception with a doctor than if she had fewer children; however amongst Catholics (though the numbers are very small) this relationship was reversed, and the women with large families were more likely to have discussed contraception with their doctors. A plausible explanation for this could be that doctors are reluctant to broach the subject with Catholic patients until they are really overburdened with children.

The mothers of native born Australians now aged thirty-seven to forty-two had the lowest marital fertility in Australian history.⁶ How far then is it the case that the daughters of the women who were contraceptors then are contraceptors now? How often is contraceptive behaviour passed on from mother to daughter? Less than a tenth of the respondents who knew of the rhythm method named their mothers as their original source of information, and with other forms of contraception the proportion was even lower than nine per cent. No wife named her father as the original source of her contraceptive information. Still the possibility remained that, although the wives had first heard of the contraceptive methods through a variety of non-parental sources, they had subsequently learnt more about these methods from their parents and had then adopted their contraceptive habits.

We asked all respondents if they knew whether their parents used any form of contraception. More than half of the respondents simply did not know whether their parents had used contraception or not (52 per cent of the 238 respondents who answered the question). Those most likely to know were post-menopausal Catholics who were convinced that their parents had not even used rhythm (the size of their families of origin would tend to confirm this belief). Those least likely to know were the better educated non-Catholics who tended to come from homes where contraception was a tabooed topic although the family size remained small as a result of birth control or sub-fecundity. However, on the whole, sectional differences were small; approximately half of the population did not know whether they had come into the world as a result of planning or by chance.

Of those who knew, 40 per cent confirmed that their parents had used some form of contraception while the remaining 60 per cent affirmed that they knew that their parents had never used contraception. Yet, even of the forty-six women who knew that their parents had used contraception, only thirty-four knew what their parents had used (rhythm 6, diaphragm 7, jelly 2, condom 5, douching 3, pill - sometimes preceded by other methods - 9, I.U.D. 2). The fact that almost a third of the women who knew what

Table 5

Percentages of women who had talked about contraception with a medically trained person by religion and by age, nativity, education, parity and husband's occupation and income^a.

	<u>Catholic</u>	<u>Non-Catholic</u>
<u>Age</u> Under 30	73	91
30-44	71	84
45+	34	48
<u>Nativity</u> Australian	74	87
Southern European	15	50
Other	55	58
<u>Years of Education</u> 0 - 5	31	55
6 - 9	55	78
10+	77	86
<u>Parity</u> No children	57	85
1 - 4 children	59	81
5+ children	69	77
<u>Husband's Occupation</u> White collar	75	87
Craftsman/Foreman	53	78
Other	59	59
<u>Husband's Income</u> Under \$4,000	62	83
\$4,000+	63	81

Note :

- a. n = 240 as seven women did not answer the question as to whether they had ever discussed contraception with a doctor or nurse.

method of contraception their parents had used knew that their mothers had taken the pill reflects the vast respectability of this method of contraception when compared with all others.

The numbers are too small to be significant, but, of the forty-six women who knew that their parents had used contraception, all but two had used it themselves, whilst, of the sixty-eight who knew that their parents had eschewed contraception, only fifty had used it themselves.

Non-contraceptors

Some 21 per cent of the couples represented in the Queanbeyan sample claimed never to have used any form of contraception.⁷ Given that the knowledge and availability of at least some forms of contraception are widespread in Queanbeyan, whether an individual couple has ever used contraception depends firstly upon the demographic factors which influence their perception of the need to postpone or avoid pregnancy: their fecundity, the interval since marriage or the last child, the number of their children, the ages of the parents and so forth; and secondly upon the social and cultural factors which influence both their personal demographic targets and the acceptability or otherwise of contraception to them. Obviously the two types of factors are closely interlinked, in a rapidly changing society age is both a demographic and a social variable.

Cultural factors

The three principal cultural factors related to the avoidance of contraception in Queanbeyan are religion, nativity and education. These factors are all interrelated as immigrants are more likely to be Catholics and to have had less formal education, and even amongst the native born the Catholics have had less education than the non-Catholics.

Whereas 34 per cent of Catholics have never used any form of contraception, only 15 per cent of non-Catholics have done nothing to restrict their fertility. That this religious differential is a very complex compound of a number of other differentials can be seen from the fact that within our sample practising Catholics (defined as those who had attended mass at least once in the month prior to the survey) were more likely to have used some form of contraception than non-practising Catholics; 33 per cent of the former having eschewed birth control in contrast with 41 per cent of the latter. This apparent anomaly is resolved when it is realised that only 11 per cent of the immigrant Catholics, who are the least likely to have used birth control, are practising Catholics within the above definition. If only Australian born Catholics are taken into account, then 22 per cent of practising Catholics have never used contraception, as compared with 16 per cent of non-practising Catholics. Although the numbers on which these percentages are based are inevitably small, this example does serve to show the necessity to control by nativity before drawing conclusions in an Australian context as to the effect of religion upon contraceptive practice. Just over half of all Catholic immigrants have never used birth control. A major reason for this very low usage rate is

undoubtedly the relative lack of education amongst this group: nearly 40 per cent of these migrants have had less than seven years of formal education, in contrast with only 11 per cent of the whole sample.

Immigrants, irrespective of their religion, are less likely to have practised birth control than the native born, even than native born Catholics. Of the Australian born non-Catholics only 9 per cent have never used any form of birth control. Much of the resistance to contraception is related to the fact that half of all immigrants are Catholics, and 30 per cent have had less than seven years of formal education. However there is also a distinctive group of older women from Germany and Eastern Europe who have been extremely resistant to birth control.

Contraceptive usage rises directly with education amongst both immigrants and native born, and amongst Catholics and non-Catholics. This is apparently because all contraceptive practice requires a certain degree of sophistication both to have the habit of thinking in terms of planning for the future and also not to be discouraged by the mechanical difficulties associated with the procuring or the use of all of the currently available methods.

Women with more than four children are marginally less likely to have used contraception than those with smaller families; after the event it is almost impossible to determine whether these women have had larger families because they eschewed contraception or whether they eschewed contraception because they wanted larger families. All that can be said is that women who have never used contraception have larger family ideals than the sample as a whole; thus, whilst a majority of the total sample consider two or three children to be ideal, more than two thirds of the non-contraceptors consider three or four children to be ideal for the average Australian couple.

In as much as levels of contraceptive usage change over time with changing social mores, both age and date of marriage can be regarded as social factors in the acceptance of contraception. If age were simply a demographic factor one would expect ever-usage rates to rise constantly with increasing experience and exposure to child-bearing. In fertility surveys the reverse is generally found to be the case except amongst the very youngest groups. Thus in Queanbeyan 41 per cent of those born prior to 1930 had never used contraception as compared with 18 per cent of those born during the 1930s, and 10 per cent of those born in the 1940s; amongst those born in the 1950s the rate rises to 18 per cent again, but many of these non-users intend to use contraception in the future. The steepness of the rise in the proportion of non-users reflects the extent to which the proportion of Australian-born wives decreases regularly in each ten-year birth cohort from the youngest until the very oldest cohort is reached. In the oldest cohort of women born prior to 1920 only five per cent of the respondents are immigrants and the proportion who have never used contraception is only 22 per cent, little higher than that to be found amongst women born in the 1930s. In sharp contrast, more than half of the women born in the 1920s are immigrants and some 48 per cent of this group have never used contraception. Rates of ever-usage by marriage cohorts are even more influenced by varying proportions of immigrants in

Table 6

Percentages of women who have never used contraception
by age, parity, education, religious practice and nativity

<u>Age</u>	born before 1920	28
	born 1920-29	46
	born 1930-39	18
	born 1940-49	10
	born 1950+	18
<u>Parity</u>	No children	25
	1-3 children	20
	4+ children	23
<u>Education</u>	0-6 years	40
	7-9 years	31
	10+ years	12
<u>Religious practice</u>	Practising Catholics	33
	Non-practising Catholics	29
	Practising non-Catholics	25
	Non-practising non-Catholics	16
<u>Nativity</u>	Australian born Catholic	20
	Australian born non-Catholic	9
	Immigrant Catholic	54
	Immigrant non-Catholic	34
	Southern European	37

the cohorts to the point where, of the cohort married in 1945 to 1949, 57 per cent are migrants and only 40 per cent have ever used contraception.

It could be argued that some of the cultural differentials discussed above reflect differentials in willingness to admit to the use of contraception rather than real differentials in rates of contraceptive usage but the demographic evidence presented below would suggest that this is unlikely to have been the case to any great extent in Queanbeyan.

Demographic factors

Although contraceptive practice within marriage represents the norm in Queanbeyan, it is not universal: some couples use contraception from the start of their marriages or earlier, others postpone contraception until they feel the need to space the arrival of children or to avoid further pregnancies once their maximum acceptable family size has been attained. Amongst the latter group there will inevitably be some couples who, failing to have as many children as they want, discover that they have no need of contraception. Catholics or other groups who are reluctant to use contraception are more likely to be found amongst those who have never used birth control in part because they may completely reject birth control, but also in part because, through delaying the adoption of contraception, they are more likely to discover fertility impairments which obviate the need for contraception. Table 7 sets out the fertility status of the fifty-three non-contraceptors in our sample. Just over a quarter of the non-contraceptors are still in the process of family building. When asked about future contraceptive usage all of these women, with the exception of two who had married late and doubted their ability to attain the number of children they desired, said that they could envisage using contraception in the future. The newly married most commonly intended to start contraception after the birth of the first child; those in mid-family building intended to start once they had completed their families.

The major demographic reason for never having used contraception was infecundity or subfecundity. Some 43 per cent of the non-contraceptors had found themselves to be definitely infecund before they had succeeded in having as many children as they wanted. Of the infecund non-contraceptors 26 per cent had had remedial operations (usually for cancer) which had rendered them sterile; the remainder suffered from a variety of disabilities the majority of which had been confirmed by a doctor as preventing them from having further children. The two women who claimed never to have attempted to avoid pregnancy and yet to be fully fertile despite having survived at least five years since the birth of the last child without a further pregnancy may have been unwittingly subfecund. However since both were somewhat antagonised by the questions relating to the use of non-appliance methods of contraception, it would seem more probable that they were using such methods but were not willing to say so. Both said that they had sexual intercourse with their husbands several times a week so the problem was apparently not one of unacknowledged abstinence. The four women who had had extensive intervals between pregnancies, ranging from nine to fifteen years, apparently all had had minor fecundity impairments which had subsequently cleared, for all had been trying to become pregnant or vaguely letting things drift after the last pregnancy prior to the gap until the passage of time convinced them that they were infecund.

Abstinence was only considered to be a contraceptive method if the reason for abstention was chiefly the desire to avoid pregnancy. However the practice of abstinence, for whatever reason, does obviate the necessity for contraception as effectively as sterility. One Italian wife had only spent three out of her thirteen years of married life living with her husband, while during the remainder of her marriage her husband had been in Australia whilst she remained in Italy; she had borne three children before the separation and intended to start her family building anew after it.

Table 7

Fertility Status of Non-Contraceptors(a) Still Family Building = 14

Recently married, yet to start family, will probably use contraception in the future	8
In the process of family building, intend to use contraception, once family completed	4
Married late, still family building	2

(b) Definitely Sub-fecund = 23

Infecund, never pregnant	4
1 pregnancy, now infecund	5
2 pregnancies, now infecund	7
3 or more pregnancies, now infecund	7

(c) Of Doubtful Fecundity = 6

Claim never to have avoided conception, and to be fully fertile, yet have gone at least five years since last pregnancy	2
Claim never to have avoided conception, but one gap of at least nine years between pregnancies	4

(d) Fully Fecund = 10

6-12 pregnancies, no long gaps between pregnancies	5
4-5 pregnancies, subsequent abstinence from mixed motives	4
3 pregnancies followed by ten year marital separation due to migration	<u>1</u>

53

A more common pattern was that in which couples, who had attained relatively large families, with a minimum of four children, subsequently either renounced sexual intercourse altogether or so attenuated the frequency of intercourse as to make conception, even without conscious use of the rhythm method, unlikely. The motives for such abstinence were mixed: in one case the husband's illness made abstinence desirable from both a health and a financial point of view; in other cases the wives were worn out from child-bearing and rearing and had little desire for sexual intercourse, and were also influenced by the general feeling amongst working class wives that sexual intercourse beyond a certain age is unseemly, especially once the wife herself has become a grandmother or is of an age to be so.

There were only five wives in the whole sample who were fully fertile and had never done anything to lessen the chance of their becoming pregnant. One of these wives however was about to have her tubes tied. Thus only four wives, or less than two per cent of the sample, remain to represent the once traditional norm of unrestricted fertility. Two of these wives were Catholics, one Polish, the other Australian; the others were both Australian Anglicans. All four wives said that if they were starting a family now they would have fewer children; all commented that families of seven or more children have become an anachronism under modern financial and urban pressures. As one mother born in 1917 in a New South Wales country town said, "We had seven children because my parents had just let the babies come, so we did the same, thinking it was our duty to have children. But now families should be smaller. It was different when we had children, but nowadays no-one should be allowed to have seven children because there are too many people in the world already". The contraceptive frontier has almost closed; in future, with the possible exception of some of the migrants, all fecund couples in Queanbeyan will probably use some form of contraception at some stage during their lives.

A comparison with the United States

Data from the 1970 National Fertility Study in the United States show that the proportion of all married couples where the wife is under forty-five who have never used birth control is almost identical in the United States and in Queanbeyan, being 16 per cent in both cases (see Table 8). In the American sample the fraction who were at risk of unintentional pregnancy but who had "never used contraception for social or psychological reasons" was under four per cent, while in Queanbeyan the fraction was equally low, less than two per cent.

However there is a much steeper gradient in the decline of ever-usage rates with age. In Queanbeyan there were two and a half times as many women aged thirty to forty-four who had never used contraception as there were women under thirty; in the United States non-contraceptors were less than twice as common amongst the older group as they were among the younger group. For the United States separate figures are available for the two races: white non-usage rates are only two-thirds of black non-usage rates, but the differences between the two age groups within the two races are very similar. If, for contrast, the non-usage rates for the native born and the immigrants in Queanbeyan are examined, a much greater differential appears; non-usage rates for native-born women under

Table 8

Percentage of married couples who have never used contraception
Queanbeyan 1971, U.S.A. 1965 and 1970

<u>Queanbeyan 1971</u>	<u>Total Sample</u>	<u>Australian-born</u>	<u>Immigrants</u>
All under 45.	16.2	9.8	33.3
Under 30	9.9	4.4	30.0
30-44	25.0	19.2	35.7
45+	39.3	23.5	68.2
Total	21.5	12.4	51.7

<u>U.S.A. 1965</u>	<u>Total Sample</u>	<u>White</u>	<u>Black</u>
All under 45	17.1	16.0	24.3
Under 30	15.2	14.8	15.7
30-44	18.3	17.0	31.4

<u>U.S.A. 1970</u>	<u>Total Sample</u>	<u>White</u>	<u>Black</u>
All under 45	15.9	14.9	25.2
Under 30	11.7	11.1	18.4
30-44	19.6	18.3	30.8

the age of forty-five are less than a third of those of the immigrants in the same age group. From the Queanbeyan figures it would appear that immigrants, and especially those now over the age of forty-four, have not been integrated to the point of adopting the birth control levels of the host society.

The timing of the commencement of contraception

a. In relation to marriage

Contraception follows closely upon marriage for Queanbeyan wives; although only four per cent of the respondents reported that they had commenced contraception in the years prior to their marriage, 38 per cent had begun contraception in the year of their marriage, and a further nine per cent had done so in the following year.⁹ Before five years had elapsed since their marriages, 66 per cent of all Queanbeyan wives had begun to use contraception, and 84 per cent of all those who were to use contraception prior to the date of the survey had already begun to do so.

Table 9 shows the timing of the adoption of contraception by the succeeding marriage cohorts. Although the numbers are small, it can be seen that the tendency to start contraception ever earlier in marriage has been steadily increasing, and amongst the most recently married women contraception prior to marriage is no longer completely disfavoured. However, as the parities of the respondents would suggest, even amongst the women who have been married for more than twenty years, late adoption of contraception was never common and the adoption of contraception within the first decade of marriage represented the norm for the majority of wives. For the 1950-59 and the 1960-64 marriage cohorts, adoption of contraception within the first five years of marriage had become the norm for half and two-thirds of the couples respectively. Of those married since 1964 more than 80 per cent have adopted contraception within one year after marriage, so there is little room left for further moves towards the earlier adoption of contraception within marriage, although the adoption of contraception prior to marriage may continue to become increasingly common. This is one reason why the analysis of contraceptive usage by marriage cohorts may well become increasingly unrealistic in the future.

b. In relation to childbirth

It has already been observed that 42 per cent of the Queanbeyan couples began contraception before or in the same calendar year as their marriage. If the conception of the first child is taken as the cut off point then the proportion who began to use contraception before they commenced family building is again 42 per cent (the exact correspondence is a coincidence, for although the majority of couples in one category also qualify for the other, the membership of the two groups is not identical). A further 17 per cent of couples commenced contraception in order to ensure a pause between the arrival of the first child and the second. Since all but five of the wives in the sample wanted to have at least two children, it can be seen that a minimum of 57 per cent of the Queanbeyan couples (or 73 per cent of the contracepting couples) had originally begun using contraception for spacing purposes before they had attained their desired family size.

Table 9

Percentages of marriage cohorts adopting contraception by the time elapsed since marriage

Time of adoption of contraception

	<u>Before marriage</u>	<u>Same year as marriage</u>	<u>1 year after marriage</u>	<u>2-4 years after marriage</u>	<u>5-9 years after marriage</u>	<u>10+ years after marriage</u>	<u>Never</u>	<u>Total</u>
Married prior to 1950 n = 63	0	21	5	14	10	6	44	100
Married 1950-59 n = 51	0	20	10	21	21	10	18	100
Married 1960-64 n = 34	0	32	6	32	12	3	15	100
Married 1965-69 n = 62	8	55	18	10	0	-	10	101
Married 1970-71 n = 37	11	70	5	-	-	-	14	100

Once the two child family is achieved some couples intend to have further children whilst others, having completed their families, are aiming for total prevention rather than the spacing of births. Examining individually the situation and desires of each couple who started birth control after the birth of the second child, it was found that just over half (i.e. twelve out of twenty-three couples) did so for spacing purposes whilst the remainder intended to have no more children. However, of the twenty-seven couples who first used contraception after the birth of the third or subsequent children only three couples first used birth control for spacing rather than for bringing a halt to the process of family building.

Thus taking the sample as a whole it can be seen that 65 per cent of all couples, or 82 per cent of all those couples who had used contraception, had started using birth control for spacing purposes before they had attained the number of children they wanted. There are obvious practical reasons for this, firstly in terms of the desire to avoid childbirth immediately after marriage or immediately after the arrival of a baby and secondly in terms of the desire to ensure contraceptive competence before the point was reached where a further pregnancy would represent an undesired addition to the family rather than merely a wanted child arriving somewhat earlier than had been planned.

The delay aimed at or achieved is often not very prolonged: only 15 per cent of the wives with children had intentionally delayed the commencement of their first pregnancies for more than a year after marriage. The reasons given for delaying the first pregnancy, in order of importance, were the desire for time for the marriage to settle down; the desire to wait until the couple had a home of their own; the desire to save up for the baby's needs; the desire to wait until the husband was no longer tied up with national service or work away from home; and the wife's desire to go on working for a while because she enjoyed her job. Although the enjoyment of paid employment for its own sake amongst newly married wives in Queanbeyan wives is very limited, in many cases the fulfilment of the desire to save up for the deposit on a house or for the coming of a baby necessitates the wife's keeping her job and hence leads to the practice of contraception by the couple. Of the wives who had used contraception to delay their first pregnancy, 70 per cent had been employed during the period between marriage and the birth of the first child, as compared with only 21 per cent of those who had not used contraception during this period.

The stage of the life-cycle at which couples begin using contraception is related to the same cultural factors as the overall usage or non-usage of contraception. Whereas 44 per cent of non-Catholic couples had commenced using contraception before the conception of the first child, only 35 per cent of Catholic couples had done so. The nativity differential is much more marked than the religious differential, 50 per cent of the native born as compared to only 15 per cent of the immigrants had begun to use contraception prior to the birth of the first child.

Patterns of contraceptive use

Some 45 per cent of all the Queanbeyan couples who have ever used contraception have only sampled one method of birth control, 30 per cent have used two methods and the remaining 25 per cent have used at least three different methods of birth control. The great majority of couples who have only used one method have only used the pill; women who have only taken the pill constitute 28 per cent of all the contraceptors in the Queanbeyan sample. As one would expect with a method only introduced in 1960, the women whose sole contraceptive experience had been with the pill tend to be young, three-quarters of these women are twenty-six or younger. Indeed just less than half of all wives born since 1944 are contraceptors who have only used the pill.

The only other methods to have a significant number of devotees who have never used any other method are rhythm and withdrawal. A quarter of all Australian born Catholics have only used rhythm or a combination of rhythm with longer periods of complete abstinence from sexual relations. If rhythm, withdrawal, abstinence and douching are taken together to represent the "natural" methods of contraception then 15 per cent of all contraceptors, 23 per cent of immigrant contraceptors and 30 per cent of Catholic contraceptors have only used "natural" contraceptive methods; all other contraceptors have used at least one form of mechanical, chemical or hormonal contraceptive.

Some 77 per cent of all couples who have used two or more methods of contraception have used the pill. Many of these couples started using contraception before the pill was available in Australia, but others are couples who started contraception with the pill but have used other methods during the yearly "month off the pill" prescribed by the majority of Queanbeyan doctors. Some 8 per cent of the Queanbeyan wives who had taken the pill had subsequently transferred to using the I.U.D. as their permanent contraceptive method.

Methods ever used

Some 79 per cent of all the Queanbeyan couples in our sample had used at least one contraceptive method; whilst 34 per cent of couples have only tried one method, 25 per cent had used two methods, and a further 20 per cent had experimented with three or more methods. By far the most popular method, especially amongst those couples who had only used one method, was the contraceptive pill which had been taken by 55 per cent of all the Queanbeyan wives, and by 76 per cent of those born since 1939. No one other method had achieved half this popularity; all the "natural" methods taken together only just equalled the oral contraceptives in acceptability as measured by usage rates. Rhythm used by 22 per cent of wives and withdrawal used by 21 per cent of husbands, together with prolonged abstinence for contraceptive purposes and douching, used by 5 and 6 per cent of couples respectively, constitute a pool of "natural" methods which appeal to those couples who feel that the use of contraceptives as such constitutes an unwarrantable interference with nature. The three mechanical methods available prior to the introduction of the oral contraceptives at the opening of the 1960s: the diaphragm, the condom and the spermicidal jellies and foams have each been used by approximately 13 per cent of all couples in the sample. The

other contraceptive innovation of the early 1960s, the plastic intra-uterine devices, had been used by only 7 per cent of the wives; but amongst the wives now in their thirties, and therefore likely to want to avoid rather than space pregnancies, this proportion had reached 14 per cent and was apparently still increasing.

To a large extent the differing usage rates of the individual methods can be explained by the intrinsic qualities of the methods. Given that the three qualities which the respondents most appreciated in the methods which they were currently using were reliability in the prevention of pregnancy, ease of use, and an absence of inaesthetic qualities, it is not surprising that the pill which is the most effective method, easy to use, unmessy and with a method of administration not linked to either the time or the organs of sexual intercourse, should be the one method which has been used by a majority of all Queanbeyan couples. However there is no one perfect contraceptive acceptable to all couples wishing to limit their fertility, 57 per cent of those currently using methods other than the pill feared their unreliability, and 33 per cent of those using the pill feared its side-effects. The mass media publicity of the pill discussed above has served to make this method all but universally known in Queanbeyan but it has also made women who have never tried it very conscious of its possible ill-effects, so much so that a third of all those using methods other than the pill cite as their principal advantage the fact that, unlike the pill, they have no side-effects.

Differentials in use of the various contraceptives

The fact that there are marked differentials in the usage rates of the individual contraceptive methods in Queanbeyan reflects the varied group emphases in the determination of contraceptive acceptability and also the differential availability in physical or psychological terms of the various methods. The pill, for example, was not available when the oldest women in the sample were at the height of their reproductive powers, and it is even now less within the reach of those who are apprehensive of contact with bureaucracy, especially in relation to such a delicate topic as birth control, or who simply cannot find a doctor who understands their language, than to the more confident, better educated, native born.

The most marked differentials in contraceptive usage are religious differentials; not only is it the case that whereas 85 per cent of non-Catholics have used some form of birth control method, only 66 per cent of Catholics have done so, but Catholics also have distinctive preferences as between the available methods. Rhythm and abstinence are the only two contraceptive methods which have been more commonly used by Catholics; all other methods are considerably more popular with non-Catholics than with Catholics. A third of all Catholics with ten or more years of education and a third of all Australian born Catholics have used rhythm; considering the emphasis placed upon this method by the Catholic church in Australia these ever-usage rates are surprisingly low. Half of all better educated Catholics but only 44 per cent of Australian born Catholics have ever used the pill. Amongst native born non-Catholics 77 per cent of women have taken the pill but amongst non-Catholic immigrants the proportion who have used the pill only reaches 29 per cent. Catholic immigrants, immigrants born in southern Europe and Catholics with less than ten years education

Table 10

Percentages of women who have used certain contraceptive methods by nativity and religion

	<u>Australian-born</u>		<u>Immigrants</u>		<u>Southern European born</u>	
	<u>Non-Catholic</u>	<u>Catholic</u>	<u>Non-Catholic</u>	<u>Catholic</u>	<u>Catholic</u>	<u>Non-Catholic</u>
	n = 126	n = 50	n = 35	n = 36	n = 36	n = 30
Ever used any method	91	80	63	47	47	57
Abstinence	4	8	0	11	11	10
Rhythm	18	32	11	28	28	23
Withdrawal	24	12	17	25	25	33
Condom	13	8	14	14	14	13
Spermicides	18	12	0	6	6	7
Douching	7	8	0	6	6	7
Diaphragm	17	10	3	3	3	3
Pill	77	44	29	22	22	20
I.U.D.	10	6	3	3	3	3

irrespective of nativity all show usage levels for the pill of less than 25 per cent. These very low usage rates reflect the general fatalism and distrust of "interfering with nature" by taking medicine when one is not ill felt by these groups more than specific religious objections to the pill.

Withdrawal is the contraceptive method of the southern European born, having been used by more than half of all southern European born contraceptors. It is also the most popular method after the pill amongst non-Catholics, whether native born or immigrants, equalling rhythm in popularity amongst non-Catholics with ten or more years of education. It should also be noted that a quarter of all immigrant Catholics have used withdrawal, a proportion little lower than that of those who have used rhythm.

As Table 11 shows, the only methods to show consistent trends in usage levels by education where there are no controls for nativity or religion are the condom, use of which declines steadily with increasing education, and the two modern contraceptives, the pill and the I.U.D., use of which rises steadily with education.

All methods of contraception except the pill have been used by a greater proportion of the middle aged women born from 1925 to 1939 than of the younger or older women. The younger women have had less time in which to experiment with contraception, but a more important factor is the devotion of this group to the pill; 41 per cent of these younger women have never used any method other than the pill. There may possibly have been some under reporting of usage of individual methods of contraception by the older women but the major reasons for the lower usage rates amongst this group are the fact that birth control was genuinely less widespread when these women were at the peak of their fertility, and also that this group contains a high proportion of immigrants who have never used any form of contraception. It is of interest to note that the spermicides which are the one method to have been used most extensively by the oldest women reached the height of their popularity in Australia in the 1940s.¹⁰

The pill is the one method to have been used to a greater extent by the childless than by those with families; all other methods have usage rates which rise as parity increases. It might appear to be somewhat anomalous that there is a direct relationship between parity and usage rates for the individual contraceptive methods but not between parity and ever-use of any form of contraception, nor between age and usage rates for the individual methods. The reason for this, however, is that as the size of their families increase women who are already using contraception somewhat unsuccessfully experiment with an ever greater number of different contraceptive methods.

When the sample is dichotomised between those wives whose husbands earned at least four thousand dollars a year and those who did not, the majority of methods can be seen to have been used to a greater extent by those with higher incomes. The differences between the usage rates for abstinence and douching, the last resorts of those who are desperate to avoid pregnancy by "natural" methods, are insignificant. The I.U.D. however would appear to be a method prescribed to the less affluent by doctors aware of the expense and difficulty of remembering the pill for

Table 11

Percentages of women who have used various methods of contraception by age, parity, education and husbands' occupation and income

	Abstinence n = 13	Rhythm n = 54	Withdrawal n = 51	Condom n = 29	Spermicides n = 34	Douching n = 15	Diaphragm n = 28	Pill n = 137	I.U.D. n = 17
All respondents	5	22	21	12	14	6	11	55	7
Age born 1910-24	7	20	15	15	22	9	9	24	0
born 1925-39	10	29	24	15	18	11	23	43	11
born 1940+	2	18	21	10	6	2	6	76	7
Parity 0	0	10	8	2	6	0	0	71	2
1-3	5	21	23	12	15	4	14	55	7
4+	10	35	25	25	25	19	17	42	13
Education 0-6 years	4	22	15	15	7	7	0	15	0
7-9 years	6	20	26	13	15	9	14	45	5
10+ years	5	23	18	12	13	4	13	70	10
Husband's income Under \$4,000	6	17	17	12	10	7	4	54	10
\$4,000+	5	24	23	14	17	5	17	59	5
Husband's occupation White collar	4	30	11	11	17	2	22	70	7
Craftsman/Foreman	6	18	18	7	19	0	10	49	2
Semi or unskilled	5	21	27	17	13	13	8	53	10
Whether wife had discussed contraception with a doctor Yes	7	25	23	15	13	8	16	74	10
No	0	16	16	8	6	2	1	6	0

indigent mothers of large families.

All methods of birth control had been used to a greater extent by women who had discussed contraception with a doctor. This reflects the fact that the women who had never used any form of contraception had not discussed the topic with a doctor. However, it is interesting to note that those contraceptors who had not had professional advice had restricted their contraceptive practice almost entirely to the use of rhythm and withdrawal. There were also four women who claimed to have been given the pill by doctors who made no attempt to discuss the method with them.

Conclusion

The basic picture which emerges from the Queanbeyan survey is that of a society in which knowledge and use of contraception are widespread especially amongst the younger married couples, but in which there are pockets of ignorance and excess fertility. Of the Queanbeyan wives who had children, less than a third had successfully planned both the number and timing of all their children whilst at the other extreme just over a sixth had had at least one child which they would have preferred to avoid. The less well educated and the immigrants, especially those from southern Europe, form an underprivileged group who are further handicapped by their lack of effective contraceptive knowledge. Unless something is done to help these groups the differentials within the society are likely to increase.

Footnotes

1. All figures in this section refer to a total of 243 respondents as 4 of the original respondents did not answer the knowledge questions owing to interpreting difficulties.
2. It could be argued that those who appeared less well-informed were in reality simply more embarrassed at discussing contraception. However, with the possible exception of some of the migrant wives, this would not appear to have been the case. Thus the condom, the most embarrassing of the five methods to discuss as it has no polite name in popular usage, was the most commonly recognised method after the pill and rhythm often with mumbled comments such as "oh, the thing the man wears" or "French letters", giggle.
3. c.f. Father F. Richards, Family Planning the Natural Way: Temperature and Symptoms Method, Melbourne, 1972.
4. All percentages quoted in this section are calculated from the total number of women who knew of the method and who could remember where they had first heard of it.
5. We did not ask about sources of information about withdrawal but this is undoubtedly another folk method, knowledge of which is chiefly spread by husbands and friends.

6. c.f. K.G. Basavarajappa, Trends in Fertility in Australia 1911-1961, Ph.D. thesis, Australian National University, May 1964.
7. All respondents were asked whether they or their husbands had ever done anything which reduced the likelihood of pregnancy and also whether they had ever used nine listed methods of contraception.
8. C.F. Westoff, "The Modernization of United States Contraceptive Practice", Family Planning Perspectives, July/August, 1972.
9. Since we only asked the respondents for the year in which they commenced contraception (except in the case of the pill) all comments in this section refer to calendar years, not exact twelve month time periods after marriage.
10. c.f. Evidence before a Select Committee of the House of Assembly on the Police Offences (Contraceptives) Bill 1940, Tasmanian House of Assembly, 1941.



