

**Title VIII Research Scholar Program
Final Report**

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Research Abstract

After the collapse of the Soviet Union, Russia entered a period often described as “demographic crisis,” in which death rates from nearly all causes rose significantly as birth rates dropped. The population shrank each year from 1991 until 2008. However, since 2008, the birth rate has grown year-on-year. This growth is often attributed to the Russian government’s introduction in 2006 of a suite of pro-natalist policies, as well as to more general economic recovery. At the same time, the shape of childbearing over the lifecourse has begun to change – a first birth in one’s early twenties was a near-universal norm among late-Soviet women, but since the late 1990s, the mean age at first birth has gradually risen toward the European norm of the late twenties, while mean age at second and later births has not risen substantially.

My research uses mixed quantitative and qualitative methods to investigate the changing level and shape of childbearing in the Russian Federation, with two goals: first, to develop a richer and less static understanding of Russian society and social change in the post-Soviet era,

particularly in the areas of gender, the family, and population discourse; and second, to allow the unique post-Soviet Russian context to contribute more fully to social demographic theories of fertility change in the developed world. The qualitative component of this research includes in-depth interviews with Russian women of childbearing age, to explore their fertility histories, intentions and plans, as well as their perspectives on the economic, medical, and social conditions of childbearing and parenting in contemporary Russia.

Research Goals

The first goal of my dissertation is to develop a richer and less static understanding of Russian society and social change in the post-Soviet era, particularly in the areas of gender, the family, and population discourse. Previous work in these areas has examined the rise of neo-traditional models of gender and family and their intersection with Soviet models (see, e.g., Ashwin, 2000; Kay, 2007; Rotkirch et al., 2007, Zdravomyslova, 2010), and my goal is to extend this work by considering more deeply the role of state population/pro-natalist policy, the rise in the state endorsement of the Russian Orthodox Church and its perspectives on fertility and family life, and changes to the medical system and medical knowledge in the application of these models to daily life and in their transformation.

A second goal of this research is to allow the unique post-Soviet Russian context to contribute more fully to social demographic theories of fertility change in the developed world, advance our understanding of fertility trends, and particularly the determinants of fertility postponement and fertility recuperation, in low-fertility societies. (A low-fertility society is one in which the total fertility rate (TFR) is at or below the replacement rate of 2.1 children per woman.) The demographic literature on these phenomena is extensive, but regional differences

in fertility trends are often explained away by the broadest of generalizations, and Eastern Europe and the former Soviet Union in particular are often mentioned as an aside, an exception to or delayed example of trends in Europe more broadly. I believe that the details of the post-Soviet case can be used more constructively in refining our broader understanding of the social and economic determinants of fertility behavior in the developed world.

My work focuses on Taganrog for two reasons. First, the experiences of Russians outside St. Petersburg, Moscow, and Central Russia remain understudied, particularly in the qualitative social science literature. With a population of about 250,000, Taganrog is a mid-sized city; about 40% of Russians – including 23% who live in cities of a million or more – live in cities larger than Taganrog, while the remaining 60% live in less populous cities or rural areas. The second-largest city in Rostov Oblast, Taganrog is an important commercial port and manufacturing center for the Russian South. While there is, of course, no such thing as an “average” city, these features make Taganrog a good example of a certain kind of Russian daily life. In fact, Taganrog has for this reason been the site for an ongoing set of Russian sociological and economic field studies spanning the 1960s to the present day (see, e.g., Rimashevskaya, 2009).

The second, more practical reason is that I am familiar with Taganrog; I lived there for a year after college on a Fulbright English Teaching Assistantship grant. Returning to a familiar place where I still had many contacts seemed like the best way to efficiently use the single semester I had available for fieldwork – especially given accounts in other scholars’ work of the difficulty of obtaining interviews with strangers in larger cities (see Parsons, 2014).

My primary goal for this research trip was to conduct in-depth oral interviews with women of childbearing age, with the goal of analyzing them as the qualitative component of my

dissertation. Given the short duration of the trip, my initial goal was 22 interviews; however, I was able to collect interviews more quickly than anticipated (see “Research Activities” section below), and I adjusted this goal upward to 30 at the time of my mid-grant evaluation. My aim was to collect interviews with a diverse group of women, including women of different ages, socioeconomic statuses, marital statuses, numbers of children, experiences with infertility, ethnicities, etc.

Research Activities

The main research activity I engaged in during the grant period was oral interviewing. I completed 41 individual oral interviews with women of childbearing age, ranging from age 20 to age 45, median age 31.5, mean age 31.6. Most interviews lasted around 45 minutes, though they ranged from as short as 15 minutes to nearly 2 hours in length. All were audio-recorded and have been or are being transcribed to text, which will allow for both traditional, close reading-based qualitative analysis and for analysis using newer computer-assisted statistical methods such as topic modeling.

Eleven interviewees had never been married (three of these were either formally or informally engaged), twenty were in a first marriage (legal or common-law), and ten had been divorced at least once; of these, two were divorced from a first marriage and had not remarried, six were divorced from a first marriage and currently in a second marriage, and two were twice-divorced and had not remarried. Sixteen had never had a birth (one of these was pregnant at the time of interview), nine had had one birth, fifteen had had two births, and one had had three. Not all participants identified their ethnicities, but of those who did, most identified as ethnically Russian, Ukrainian, or a mix of the two, sometimes mentioning Cossack roots. One interviewee

was from the Korean diaspora in Uzbekistan, two were Armenian, one was of mixed North Caucasian descent, and one identified as part-Jewish. Three interviewees had a middle professional education, which typically consists of nine or ten years of general schooling followed by three or four years of specialized professional training. Seven were currently studying for their bachelor's degrees. The remainder (31) had completed at least a bachelor's degree or the older five-year specialist degree. All had spent most or all of their lives in Russia, and all spoke Russian with native fluency.

Initial interviewees were prior contacts – colleagues and former students from my time in Taganrog ten years ago on the Fulbright English Teaching Assistant program. Subsequent interview contacts were gathered via snowball sampling, as these initial contacts suggested friends, colleagues, neighbors and relatives to interview. Snowball sampling has its limitations, and in this case it almost certainly made my sample less educationally and socioeconomically diverse than it might have been, but it was also enormously useful – I found that potential interviewees who were contacted by a trusted friend or colleague were far more likely to agree to an interview than those I reached out to myself. I contacted new acquaintances on my own through various avenues, including a prenatal yoga class I was attending, an internet forum for local parents, and friends and acquaintances I made in day-to-day life. However, only a small handful of interviews came of these contacts, and the majority of my participants can be described as somehow connected to one of three networks – employees of my host institution and their friends and families, alumni of my host institution, and English teaching professionals and their adult students.

The most disappointing aspect of my sample was my inability to reach women of lower socioeconomic and educational status. When asking interviewees to suggest further contacts, I mentioned that I was actively seeking women who fit this demographic profile, but most stated that they did not have close enough relationships with anyone with less education to feel comfortable inviting them for an interview. On two different occasions, interviewees who worked in higher education contacted colleagues who taught at “middle professional” institutions – a medical training college for nurses and midwives, and a metallurgical college – to inquire about spreading word with their alumni, but both were rebuffed. Ultimately, this means that I will be performing an analysis of a slightly more specific subset of women than I initially planned – highly educated women in a mid-sized provincial city. This does not make the analysis itself less worthwhile, but it requires careful thought about what my findings represent in the broader Russian context and how this group differs from others along several axes. In Rostov Oblast, as in Russia as a whole, the share of the adult, working population with higher education is around 30%; the share with higher or middle professional education is 56% in Rostov Oblast and 57.5% in Russia as a whole (Klyachko, 2016).

The interviews themselves were composed of a set of questions that varied somewhat with the interests and life situation of the interviewee. Typically, I started by asking women with a partner and/or children to begin by describing their own family; for those who were unpartnered and childless, the interview began with questions about their family of origin. From the information given about the number and spacing of children, discussion of ideal and desired number and spacing usually followed, and then questions on appropriate timing of childbirth in a woman’s lifecourse. Further questions touched on women’s experiences with gynecological and

obstetric care, their perceptions of what counts as “early” and “late” childbearing and the risks of each, family structure and economic or childcare support, and gender dynamics within the family. All interviewees were asked if they had heard the phrase demographic crisis and whether they could describe what it meant. This often led to in-depth discussion of family policies and specifically the maternity capital policy, which grants a one-time, limited-use payment of approximately 400,000 rubles (about one year’s average salary) to mothers of second or higher-order children. Finally, interviewees were asked about birth control practices – either their own preferred practices, those of others in their social circle, or the advice they had received from medical professionals. Because the interviews were open-ended, this script varied, but most of the interviews touched on most of these research topics in some way.

In addition to the initial plan of collecting interviews, I was unexpectedly able to use the trip to gather a wealth of material on a project that was being implemented at the institute that hosted me. As part of a grant from the Russian Orthodox Church, the psychology faculty had opened a center called “Сохрани мне жизнь” (“Preserve my life”) dedicated to anti-abortion education and counseling, as well as assistance for pregnant women in difficult situations. As part of my research, I collected and documented the literature and educational materials available at the center, photographed the center itself, attended center events, and interviewed three institute staff involved in the project, including two women who were regularly conducting anti-abortion counseling at the local abortion clinic. This additional research activity was completely unexpected, but a fortunate opportunity, as the Russian Orthodox Church’s current anti-abortion work, and the discourses around it, fit very well into my research interest in the impact of resurgent traditionalism, pro-natalism, and discourse of crisis on Russian fertility and policy.

Finally, I gathered ethnographic data during the trip. I spent a great deal of time with friends and their families. Because I myself was pregnant during this fieldwork, I was also able to experience local obstetric care firsthand, attend a prenatal yoga class three times a week, and participate deeply in the kinds of conversations that newly pregnant women have with their more experienced friends and acquaintances and among themselves – trading advice and sympathy, and experiencing the types of care directed toward pregnant women. Toward the end of the trip, as my condition became more visible, I was able to participate in and observe life as a visibly pregnant woman in the community. I took regular field notes, which I anticipate using to inform and supplement the interview analysis, which remains the centerpiece of my dissertation.

Research Findings

Findings described here are preliminary, as interviews are still being analyzed, and a close reading of their themes will undoubtedly lead to more nuanced conclusions. Overall, my preliminary observations can be summarized by saying that stated attitudes have changed markedly since the early post-Soviet era, with greater changes observed in younger interviewees, but that behaviors have changed less. In particular, flexibility around the timing of childbearing and increased awareness of contraceptive methods did not appear to lead, respectively, to substantial childbearing delays or to increased use of modern methods of contraception within marriage. Additionally, widespread media coverage of themes of demographic crisis and population implosion are acknowledged by many women, but most do not identify with these concerns in daily life, instead seeing birth rates and family life in Taganrog as having improved over the past few decades as life has become “more normal.”

Maternal age at birth and health

Norms of early childbirth – in both the medical establishment and popular opinion – were strong even fifteen years ago, when a first birth at age 28 or later qualified the mother for “advanced maternal age” (*starorodyashchaya*) status and special medical treatment, possibly including a strongly advised or mandatory delivery by cesarean section (Gabriel, 2003). These norms appear to have weakened substantially. In terms of relations with the health system, one respondent reported being treated as of advanced maternal age (*starorodyashchaya*) for her first birth in 2017 at age 29, albeit with relatively few consequences in terms of medical interventions. Others of a similar age did not report such interactions. An older respondent, who gave birth to her third child in 2017 at age 39 – which is considered advanced maternal age in the United States (where this category begins at age 35) – reported that she never once heard the term *starorodyashchaya* during her pregnancy, although she was told to treat the pregnancy as if it were her first, because she last gave birth over ten years ago and her body had “forgotten” how to handle pregnancy. In general, respondents expressed surprise or uncertainty at the idea that medical workers might scold them for waiting too long to give birth, acknowledging that this certainly happened in the past, but that today the attitude is that such things are none of the doctor’s business.

Many respondents cited people they know giving birth at ages 38-40, but instances of birth after 40 were seldom mentioned. Respondents were divided on whether giving birth after 40 is, in principle, a wise choice; those who were not in favor of it usually cited fears about inability to provide for the child in the long term due to retirement, illness, and Russia’s pattern of relatively early death, rather than fears about the pregnancy itself – although some also

mentioned the rising risk of genetic problems in the fetus after age 40. Those who were not opposed to the idea usually cited age 45 or 50, or “until it’s no longer possible,” as the upper age limit of childbearing.

In spite of this flexibility in attitudes about the appropriate time to have a child, younger, childless respondents almost universally reported wanting to have their first birth in their mid-twenties. The two respondents who were exceptions to this rule – both married, without children, and in their late 20s – both reported that they had visited a doctor to ensure that their reproductive health was intact and it was safe for them to continue to wait to have children; one specified that she had had an ultrasound of her ovaries, likely a follicle count. Few others mentioned concerns about declining fertility with age; instead, fertility seems to be viewed as an effect of one’s holistic health state, and attitudes such as “if you relax, it will happen” surfaced more commonly. Specific concerns about fertility often surfaced in relation to the body’s “hormonal background level” (*gormonal’ny fon*), which could be disrupted by diet, hormonal birth control, or abortion – a finding that I anticipate examining further.

Demographic crisis, finances, and family assistance

Interviewees were universally aware of “demographic crisis” as a problem Russia had experienced, but most situated it in the 1990s and early 2000s, and expressed little concern over (and often outright optimism about) current fertility levels. At the same time, recognition that the government is actively promoting fertility was also near-universal, with over 90% of interviewees spontaneously mentioning the maternity capital program. Among respondents who were eligible for maternity capital, usage rates were high – in Taganrog, where a small home in the city center can be purchased for three to four million rubles, the program’s one-time payment

of around 400,000 rubles is enough to dramatically increase a family's ability to move into a larger apartment or a single-family home, and indeed, this is what most women who had accessed maternity capital reported using the payment for. However, the opinion that maternity capital is insufficient as a family support measure was also widespread – many viewed it as helpful, but insufficient to change the fertility goals of middle-class parents, and expressed concern that it would instead encourage socially undesirable fertility, e.g. among those in poverty or who already have too many children.

Previous research has found that low wages and the widespread practice of paying a large part of workers' salaries unofficially have rendered maternity leave payments, which are calculated as a fraction of official salary, essentially useless (Utrata, 2015). However, my respondents did not report this experience. Many reported that without the support of a spouse's salary, their maternity leave would have been much shorter, and those who did not have this support, or who reported that it was inadequate in providing for their family, did go back to work earlier. But for the most part, most women expressed satisfaction with the leave provisions they received. In line with previous work on women's perception of gender norms and gender equality in Russia and the lack of need for Western-style feminism, my respondents reported feeling free to take leave from their employment without fear of pressure, discrimination, or retribution.

Family Planning, Contraception, and Abortion

Participants' approaches to family planning were varied and broadly followed a generational pattern; several older respondents (ages 38-45) had only unplanned pregnancies, or a first unplanned and a subsequent planned pregnancy, while younger respondents had more

typically planned their birth timing and spacing, or successfully avoided unwanted pregnancy until the present moment. This was not universal, however; “untimed” (that is, not planned, but also not actively avoided) first pregnancies were also not uncommon among younger participants. Younger participants with one child indicated that they put significant effort into the timing of the second pregnancy. Several interviewees stated that their ideal child spacing was 5 years or more, because they preferred to stay home for the first three years, send their children to nursery school when they returned to work, and to only have a second child when they had spent some time in the labor force and their first child was approaching school age.

Although Russia is well-known for its high abortion rate and “abortion culture,” mention of abortion in interviews was uncommon and seemed to fall under a bit of a politeness taboo. As such, I consider my results on abortion indicative not of behavior, but of dominant discourses among the educated middle class. Participants almost universally cited abortion as something that happens to other women; though rarely overtly framed as morally wrong, it was often presented as the least desirable option for managing fertility, either because it is “sad” to have to do or because of potential medical risks. Several older participants, having brought up the subject of abortion, immediately qualified it with, “Thank God, I have never had to have one.” Though logically counterintuitive, women who get many abortions were often presented as the same type of women who have excess births and make excessive or improper use of government family benefits – careless with their fertility, uneducated, impoverished. The similarities to the “welfare queen” narrative in the U.S. context are an interesting possible point of departure for further exploration of this phenomenon.

The exception to this was one younger participant, who was the daughter of a midwife, now in her 60s, who was trained and spent her early career working within the Soviet medical system. This interviewee (the daughter) expressed surprise and confusion at the question of how women prevent pregnancy after their first birth; it eventually became clear that she considered it normal to manage later births exclusively through abortion.

Modern methods of contraception (the pill and the IUD) were frequently mentioned as available, but undesirable – particularly the pill. Specific concerns given about the pill were tied to its ability to upset the body’s normal hormonal equilibrium, causing weight gain or, ultimately, infertility. Women who had used the pill spoke of the need to take breaks to allow the body to recalibrate; most participants said they used condoms, withdrawal, or a calendar method instead.

Policy Implications and Recommendations

Perhaps the most important implication of this research for the United States foreign policy community lies in developing a better understanding of Russian demographic trends. The well-known and relatively severe demographic effects of the collapse of the Soviet Union, combined with the Russian government’s own persistent demographic discourse, has perpetuated the idea, both in the U.S. and in Russia, that Russian demography today is unique or uniquely problematic, that Russian birth rates are especially low or especially at risk of another large 90s-style crash, that Russian women do not desire or plan to have more than one child, etc. My research counters this narrative, showing that Russian fertility patterns are broadly similar to past European patterns and that the main fertility challenges Russia faces – increasing postponement of childbearing, economic and employment concerns that depress women’s fertility intentions,

and to some extent unplanned or unintended childbearing – are similar to those facing other developed countries. While the two-child family norm I encountered in my interviews remains widespread throughout the developed world, one major difference between Russia and much of the rest of Europe is that voluntary childlessness remains extremely uncommon in Russia; until and unless this changes, policies that help more women who are already committed to childbearing to attain their desired family size will, on average, be more effective at raising fertility in Russia than in other European countries.

Further policy implications of this research are related to pro-natalist and pro-family politics and policies. First, I found that large one-time payments to families such as the maternity capital program are broadly popular, and appear to have an effect on the timing of second and later births, even if most people do not feel that these policies influenced their own fertility choices or believe that they raise the birth rate *per se*. The Russian government’s decision to extend this program to 2022 seems likely to continue to mitigate the fertility-depressing effects of birth postponement.

Second, my data gives preliminary evidence that Russia’s exceptionally long maternity leave – one and a half years at partial pay and a further one and a half years unpaid – may influence women’s child spacing choices. As mean age at first birth rises, this norm of long spacing between children may affect women’s ability to realize their childbearing goals. The Russian government may find it more effective to transition to policies that allow for more continuous female labor force participation by encouraging mothers to outsource child care – e.g., by providing subsidized nurseries that can be used during infancy and toddlerhood, which were common from the 1960s into the ‘90s, but are currently a rarity. Previous research from

other countries has indicated that this tactic is more effective at allowing women to reach their childbearing goals than policies that encourage very long breaks from the labor market (Salles, Rossier, & Brachet, 2010). This would also be more equitable, as only some women can afford to take the full three years of leave – many of my interviewees who worked in higher education did so by earning under the table as private tutors – and others must find alternative private care, often via relatives, if they are obliged to return to work before their children reach preschool age.

It is unlikely that this finding will be directly relevant to the U.S. domestic policy community in the short term, as we remain one of the only countries to provide no nationally mandated parental leave. However, similarities in U.S. and Russian fertility patterns – relatively high total fertility, early first birth, and low childlessness compared to other developed countries – may make certain aspects of the Russian policy context a useful example, either positive or negative, for the U.S.

Co-Curricular Activity

In October, I was invited to take part in, and discuss my research at, a roundtable entitled “Human Prenatal Development: The Orthodox and Psychological View,” held as part of TMEI’s anti-abortion project described above. I chose to present a brief review of the demographic literature on the determinants of the large decrease in the abortion rate in both the U.S. and Russia over the last 30 years. It was very kindly received, although my assertion of the importance of contraceptive access in reducing abortion led to a lively discussion among other attendees of the ways contraception also leads to demographic crisis. For me, the roundtable was an opportunity for invaluable firsthand observation of the discourse of demographic and moral

decay in contemporary Russia – a discourse that remains very present in the media, but was almost entirely absent from my interviews.

Also in October, I was extremely fortunate to have a productive meeting with two of Russia’s leading demographers at the Higher School of Economics in Moscow, Olga Isupova and Sergei Zakharov. They provided invaluable feedback on my project, suggested expansions to my interview questions, and recommended several important works of Soviet and Russian social science literature with which I was previously unfamiliar, including the longitudinal sociological and economic surveys of Taganrog mentioned above.

Despite Taganrog’s small size, my stay intersected with the visits of two American Fulbright scholars – Frederick Lorenz, a short-term visiting scholar at Taganrog Management and Economics Institute, and David Erben, who was visiting Southern Federal University for the semester. I interacted with both of them extensively. As a former Fulbright English teaching assistant, I was also invited to speak to several university English classes, both at TMEI and at the local pedagogical institute, over the course of my stay.

Finally, I began work on a co-authored paper with one of my main contacts and closest friends in Taganrog, a media studies scholar. In this paper, we analyze trends in teenage pregnancy and its depiction in Russian popular media, particularly television. We find that, although teenage pregnancy is on the decline in Russia and is generally stigmatized in popular culture, television programs of the last ten years frequently depict it in a positive light, as a difficult situation that will ultimately bring joy to the mother’s life and allow her to realize her potential as a mature and caring woman. Frequently, one of the major sources of conflict in teen pregnancy plots is adults’ – and particularly the protagonist’s own mother’s – insistence that she

terminate the pregnancy, which stops only with a doctor's medical opinion that an abortion will cause irreparable damage to the girl's fertility, psyche, or both. These depictions make use of both late Soviet and neo-traditionalist discourses of gender and fertility to present motherhood, even in imperfect circumstances, as an uncomplicated social and personal good, and those who would stand in its way as perverse, anti-social, and selfish.

Plans for Future Research Agenda/ Presentations and Publications

This research will form a large part of my dissertation. In addition to inclusion in the dissertation and publication of dissertation chapters in academic journals, I plan to present results of this research at the Association of Slavic, East European, and Eurasian Studies annual meeting in 2018 and at the Population Association of America annual meeting in 2019. I have also been invited to participate in a roundtable at ASEEEES about language learning for social science fieldwork in Russia. Additionally, I recently spoke via Skype with students in a graduate-level course on health and population in Eurasia at Georgetown University, taught by Dr. Judy Twigg, about my research experience and preliminary findings. Future research directions include a study of voluntary childlessness in the U.S. and in Russia and further work on the Russian anti-abortion movement.

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