

Family planning in Moscow: values, attitudes, institutes

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Extended abstract

In modern Russia we are seeing a renaissance of traditional values at the level of government policy as well as folding the institutions of family planning in the conventional sense (those are working mainly in the field of education on contraception). We conducted qualitative research on family planning in Moscow to clarify the values, attitudes and opinions of respondents on existing institutes of family planning.

Data and Method: it was taken 49 semi-structured interviews in Moscow region in April-June 2015. Target groups were female respondents 30-40 ages and male respondents 30-50 ages.

Research questions: We raised some questions on value of family and childbirth, on education and employment for women, on religions (in context of family formation). And some issues on attitudes to abortions, to contraceptive use, to contraceptive education and information in mass media, to role of man in reproductive decisions, to number and age of child birth, etc. The research was aimed also to estimate how modern demographic and family policies influence fertility decisions according to respondent's opinion. We were interested in estimation of some new policy measures (f.e., week of silence) and family planning institutes.

Some results (the paper with main results and respondent's quotations is in process).

1) The second demographic transition (D.J.van de Kaa) puts forward the idea that the reason for the fertility decline to the low-replacement level is mainly value-shift from material to post-materialist values (the values of postmodern, self-

realization). This may be due to changes in the institutional environment in which certain institutions in specific ways cause reducing fertility and transformation of family values. Russia is moving towards the second demographic transition (S.Zakharov), but social policy can inhibit the movement. In particular, there may be disagreement between values and attitudes (or respondents' answers about the ideal reproductive behavior) and real reproductive behavior. For example, our one-child respondents talked about the importance of family values and the ideal family with 2-3 children.

2) Family values are quite high among respondents. In the interview in addition to the direct questions we used the concept of associative words to "child", "mother", "family", "father". The answer were mainly positive.

3) A significant portion of the respondents spoke out against the dissemination of information about contraception in the media and contraceptive education. They believed that it would lead to debauchery. In the same time they were against abortion and against a large number of children.

4) The relatively large part of respondents had a negative attitude to modern contraceptive methods, considering them like harmful to health (hormonal pills and spirals).

5) Many respondents have a negative attitude towards abortions, but spoke out against the ban of abortion. Almost all respondents expressed a negative attitude to abortion, but some of them were forced to resort to them. However, the question of the legislative restrictions on the right to abortion on request, their opinion was divided in two. The people for legislative restriction of abortion are men and women beyond childbearing age, women with no experience of family life, the villagers and people with low levels of education.

6) Not all respondents believed that man should take part in the decision of the child's birth in the case of pregnancy. Less than a third of respondents felt it was not necessary, a third part felt it optional.

7) Gender stereotypes still dominate: a woman - the keeper and mother, a man - the breadwinner. But a woman should also work (soviet history of female emancipation and double burden).

8) According to respondents' opinion the modern policies have no influence fertility (small amount of cash benefits, few family-life balance measures).

9) Religion has a positive effect on family values. As a result we found some correlation between family planning and religion. Religion has a positive influence on childbirth. There are some categories, especially affecting fertility, namely, directly religion, social capital of religious people and the ability of religion to reduce the individual sense of uncertainty. Because of their religious attitudes, deeply religious respondents believe that in the case of an unplanned pregnancy, and if there are no conditions for child education or a spouse woman should give birth.

10) There are several types of the family planning organizations in Moscow. These organizations can be both public and private. In nowadays they concentrate their activities on child birth and health more than on contraceptive services. Some examples: Family Planning Centers, Maternity Welfare Centers, Centers for Gender Medicine, Centers for Reproductive Medicine and so on. For example, one of the most common institutes, Maternity Welfare Center, is intended for the prevention and treatment of various diseases of the female body and also for planning pregnancy and preparation for childbirth. In some maternity clinics distribute pamphlets about the dangers of abortion and the patriarchal family values.

11) Respondents stressed a number of problems regarding family planning institutes faced by women. The main problem which causes all the rest is the lack of open and comprehensive information about the quality of services provided. The women point out such disadvantages of public clinics as queues, the lack of proper attention to the patient, insufficient medical equipment, the lack of medicines and dismissive attitude of the staff. Among the private clinics problems there are incompetence of doctors and excessive concern for the reputation of the clinic but

not for the patient. Now we face the fact that women do not place confidence in doctors. This adversely affects both their health and health of children. The study showed that experience of dealing with family planning infrastructure does not affect women's reproductive plans.