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Post Hoc Justification of Family Size*

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Currently popular approaches to fertility and family size research stress the effect of attitudes, values and motives on fertility-related decisions and actions. In contrast, the effects *of decisions and actions in this aspect of life are accorded little attention. Two natural experiments were performed to show one such effect: the* post hoc *justification of family size intentions and completion. In the first study, women were shown to favor their own family size over others and their relatively positive attitudes were stronger after their family was complete. Justification was also greater for more than two children, and when the costs of children were greater because one required special care and education. In the second study, women whose families had recently experienced an involuntary misfortune (medical or financial), justified their chosen family size more than did women not having a misfortune. All of these findings were predicted from consistency and commitment theories that hypothesize greater self justification when actions are (1) chosen, (2) taken under low external pressure, and (3) relatively costly.*

Even the best intentioned of us can but dimly anticipate how a child will affect our lives. Nonetheless, most models of behavior in fertility and family planning research (e.g., Fishbein, 1972; Triandis, 1972) assume that, and are interpreted as if, having children followed a deliberate decision analysis, including a knowledgeable weighing of costs and benefits. Survey researchers ask people about their childbearing intentions, plans and desires, and about the incentives, attitudes, values or motives that supposedly led to them, as though such a process had taken place and is recoverable (e.g., Hoffman and Hoffman, 1973; Fishbein and Jaccard, 1973). Microeconomists assume a similar stance: fertility actions depend upon a household's demand for children, which is determined by a subjective balancing of "tastes" against prices and income to maximize satisfaction (cf. Easterlin, 1975).

It may be the case that perceived consequences (e.g., incentives, utilities) in some form affect childbearing. For example, people may postpone having another child if the job market is poor and they anticipate an undesirable standard of living (e.g., Easterlin, 1968). But to interpret data as though such actions are thought through before they are taken and further, to ignore the psychological implications of those actions is to be too limited. First, actions – even decisions – can be precipitated by fortuitous environmental or social conditions of which the individual is barely aware, or they may evolve from earlier commitments to a pattern of behavior. Second, attitudes, values, and even perceived incentives or constraints, which seemingly led to an action or decision, might actually have followed from them. Action must be viewed as a potential *cause* of attitudes, perceptions, and other actions, as well as an effect.

One recognizable effect of many actions, decisions, or publicly admitted intentions, is *post hoc* justification, whereby behavior is made to seem more reasonable in the eyes of a person after he or she has become committed to it. Take, for instance, a woman who has accepted a demanding job and postpones childbearing. Having so bound herself to a course of action inconsistent with fertility, she may think less favorably of childbearing. That is, she may become less likely to perceive the benefits of childbearing and more likely to perceive its costs. She may change attitudes about work, marriage, contraception, and social norms so they are consistent with her action; she may marshall arguments in her favor; further, she may become more resistent to social pressure antagonistic to late childbearing.

Demographers and other researchers have long recognized that attitudes or intentions or

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expectations may reflect "rationalization" of prior actions or decisions, but the phenomenon has not been studied as important in its own right (e.g., Hill *et al.*, 1959; Hoffman and Hoffman, 1973; Ryder and Westoff, 1972; Hass, 1974). Moreover, no attention has been given to the conditions under which *post hoc* justification occurs in fertility related behavior. In contrast to this state of affairs stand several theoretical models of how behavior affects attitude, and hundreds of laboratory and field experiments that delineate the conditions under which actions are most likely to be justified. This research makes possible a more detailed examination of the same processes in the fertility domain. The discussion and studies below were intended to do so.

Hypotheses from Consistency Models

The psychological effects of decisions, expectations, and overt actions are neither simple nor completely understood. Nevertheless, psychological consistency models, including dissonance theory (Festinger, 1957), commitment theory (Kiesler, 1971), and equity theory (Walster *et al.*, 1973), have generated hypotheses about the process for which there is empirical support. From these hypotheses, one can infer a number of predictions bearing on the attitudinal and other effects of fertility-related behavior.

One hypothesis is that *the greater the choice or personal responsibility people feel for their actions, the greater their subsequent justification for those actions and their resistence to change.* Cooper (1971), for instance, induced some people to choose working with a partner who eventually caused the pair to fail a task. Others had no choice but to work with him. Those who made a choice later viewed the partner as more attractive. Since in this study (and others), perceived choice or personal responsibility increased *post hoc* justification, it may be that choice in fertility (or its prevention) will do so also. For example, a person who bears an unplanned child should be more likely to view the child as "wanted" if the fault cannot be blamed on a contraceptive defect or other external cause.

Related to the above hypothesis is the proposition that *the lower the pressure to make a decision or to act in a particular way, the greater the probability that people will justify their actions and resist changing them.* High social, economic, or physical pressure to engage in a behavior reduces a person's feeling of responsibility for it; the behavior is justified by the presence of that external pressure. In contrast, low external pressure implies to a person that he or she acted in response to personal volition and commitment. In the latter situation, *post hoc* justification explains to the person why he or she acted in that way. (Of course, it is important here that the persons cannot deny their behavior, or disclaim their decision.)

A study by Doob *et al.* (1969) illustrates the effect of pressure. They cooperated with a chain of discount stores to offer new brands of several household products at an introductory low price in some stores and, simultaneously, at the regular price in other stores. Sales data over some weeks showed that buyers were more likely to continue purchasing these brands if the initial selling price had been high. These data suggest that minimal economic incentives or low social pressure are conducive to *post hoc* justification and to a future pattern of behavior consistent with the earlier commitment. Just enough pressure to induce behavioral commitment should also maximize justification and resistance to change of various fertility-related acts, such as having a particular family size, using contraception, engaging in unprotected intercourse, and postponing childbearing.

A third hypothesis of some interest is that *higher costs of an action (or negative consequences), while they decrease the probability of a behavior, also increase the likelihood that, after committment to action, a person will justify it and resist change.* Kiesler (1971) demonstrated, for example, that women who had signed a petition advocating the dissemination of birth control information in a local high school were more likely to volunteer to work for birth control organizations after they had seen a leaflet attacking birth control. This research suggests at least one prediction: that financial or other costs experienced after commitment to a particular family size may increase, rather than decrease, one's justification of and commitment to that family size.

These three hypotheses, then, suggest some conditions under which behavior related to fertility can affect attitudes, and future

behavior. The two studies reported below were designed to provide an initial test of a few specific predictions, based on these hypotheses, that would not be drawn readily from current models of fertility behavior. The intent here was not to settle any issue, but to attract more attention to behavior-attitude relationships in fertility and family size research.

STUDY I

This study tested three predictions:

(1) Women will justify their own family size (i.e., increase the net favorability of their attitudes about it) after they are committed to it. Commitment, here, was assumed to be a matter of degree; for example, one is more committed after bearing a child than after merely stating an intention to bear a child.

(2) Women with three or more children will justify their family size more than will women with two children. This prediction was based upon the assumption that social pressure to have three or more children is lower than the pressure to have two. With lower social pressure there ought to be greater justification.

(3) Women who experience unusually high costs of having children will justify their family size more than will women who experience average costs. In this study, high costs were operationalized as the birth of an "exceptional" child, who requires special treatment and extra financial commitments.

Method

Mothers of two, three, and four children, one of whom was exceptional, were asked to participate in a "study of women's attitudes." The mothers of exceptional children were chosen from lists of preschool and primary grade school classes held for children with learning disabilities. Mothers of children whose disability was primarily physical, rather than emotional or intellectual, were selected to reduce the possibility that self selection affected the sample. The respondents were recruited using the same methods used to recruit the control group; they were sent a letter asking them to volunteer for a community wide survey of women. However, they did not complete a second portion of the questionnaire given to the control group in the survey. Of 26 mothers to whom letters were sent, 22 agreed to participate. Two were dropped (one because she had just one child and one because she did not complete the questionnaire). The mothers were matched with 20 mothers of normal children according to five criteria: age of mother ($\bar{X}$ = 35.2), husband's occupational status, husband's education, ages ($\bar{X}$ = 9.96) and age range of children. In addition to this group of 20 mothers, questionnaires from another comparison group of 90 women from the larger survey, who did not yet have children, were also examined. Some of the control and extra comparison group completed the questionnaire at an earlier time (up to six months) than in the experimental group, but there were no effects within groups due to time of testing. All of the respondents lived in or near Lawrence, Kansas.

Procedure

Each respondent was assigned randomly to one of several female interviewers who introduced herself and conversed with the subject for a few minutes before saying:

> "As you may know, we've been interviewing women in Lawrence for some time now. We're interested in learning as much as we can about women's attitudes toward themselves and their families, and one way of doing this is to talk to women. I have a few questions I'd like to ask you orally and then I have a questionnaire I'd like you to fill out. Your name will not appear anywhere on these questionnaires, and the information you give us will be treated anonymously. You should feel free to ask any questions you like at any time."

The respondent was then asked for biographical information and the interviewer took notes as she responded.

After the respondent had answered these questions, the interviewer said: "Now I'd like you to fill out this (handing the questionnaire to the respondent) yourself. Please read the instructions and questions carefully." When the respondent had finished, the interviewer sealed the questionnaire in an envelope marked "Confidential." The respondent was debriefed and given the opportunity to ask questions before she was paid $5.00 and thanked for her participation.

Dependent Measure

To measure justifications of family size, separate lists of "good reasons" for family sizes ranging from 0 children to 4 children were presented to the woman, who was asked to check the items she thought were good reasons for having each number of children. The instructions for the first list asked respondents to check those reasons they thought would be good reasons for them to have four or more children (e.g., large families are happy families). The next list asked them to check good reasons for limiting family size to three children (e.g., parents have more time to spend with each other; more able to save for children's education). The rest of the lists were similar: the subjects were to check good reasons for two, one or no children. Each list also included an item at the end, "There are no good reasons."

RESULTS

Effect of the Number of Children

In Table 1 may be found the mean number of reasons checked for having four or more children, and for limiting family size to three, two, one and no children by women who themselves had four, three and two children. The mean number of reasons for each family size checked by all of the women may reflect socially acceptable attitudes, regardless of one's own family size. These means were significantly different according to the analysis of variance at the .001 level ($F = 5.13$, $df = 4/136$) with highest evaluations given to two children.

It was predicted that women would justify their own number of children by checking more good reasons for that number than would women who had different numbers of children. Therefore, of interest is the number of own children x lists interaction. This interaction was significant, ($F = 2.33$, $df = 8/136$ $p < .03$), indicating that women who had four children checked more good reasons for four or more children than did other women, that women who had three children checked more good reasons for limiting family size to three children than did other women, and that women who had two children checked more good reasons for limiting family size to two children than did other women.

Some women in each group said, in responding to the lists, that there were *no* good reasons for having four or more children, and/or for limiting family size to three, two, one, or no children. These data paralleled the results for number of good reasons ($F = 2.87$, $p < .01$). For example, none of the women with four children said there were no good reasons for their own family size, whereas some women with three (30%) and two children (28.51%) did. Three of the women with three children said there were no good reasons for having three. The reason for this lack of justification of their own family size is not clear. They may have been especially self perceptive or, they had not chosen to have

TABLE 1

Mean Number of Good Reasons Endorsed for Different Family Sizes By Women With Four, Three and Two Children

Good reasons to:	Number of Own Children 4 (n = 14)	3 (n = 10)	2 (n = 16)	Total Sample (n = 40)
Have four children	4.00	1.80	1.70	2.68
Limit to three children	3.31	4.00	3.29	3.48
Limit to two children	4.13	5.20	6.57	5.78
Limit to one child	2.56	5.60	3.87	3.03
Have no children	2.13	4.20	3.22	3.64

three children and would therefore not be expected to justify their actual family size.[1]

Attitudes Before and After Commitment

In order to examine the alternative hypothesis that family size justifications are simply the same attitudes held prior to having that family size, data from questionnaires completed by a comparison group of 90 women who did not have any children were analyzed. These women intended to have either no children, one child or two children. Although none were completely undecided, and therefore uncommitted, they should be less likely to justify their chosen family size than women who have already experienced the actual consequences of bearing and raising children.

Table 2 presents an example of the effect of merely intending to have children as compared with the effect of actually having those intended. These data show that women who had intended and had two children were more likely to justify their chosen family size than were women who had none but intended two. Parallel results were found for other appropriate comparisons. For example, women who had and intended no children justified their chosen family size more than did women who had none but intended one or two.

TABLE 2

Mean Number of Good Reasons Endorsed for Different Family Sizes by Women With Two or no Children Who Intend(ed) to Bear Two

	Number of own children	
Good Reasons to:	2 (Intended 2) N = 16	0 (Intend 2) N = 31
Have four children	1.79	2.00
Limit to three children	3.29	3.87
Limit to two children	6.57	6.26
Limit to one child	3.87	4.35
Have no children	3.22	5.00

Note.—Means are significantly different for women who have two children ($F = 4.79$, $p < .01$), but not for women who have no children.

Effect of Having More Than Two Children

Since there is less social pressure to have more than two children than to have two (and higher financial costs), another prediction was made that justification of one's own family size should be greater if one has more than two children than if one has just two. In Table 1, one finds that women with four children checked significantly more good reasons for their own family size than did other women (2.26 more reasons, $p < .01$). While women with two children also checked more good reasons for their family size than did others, the relative difference was less great (1.99 more reasons, n.s.). Overall, women with three children did not justify their family size as much as did those with two children (they gave about 1 reason more for three children than did others, n.s.). This finding is due to the three women not intending three children. With these respondents deleted from analyses, the data showed that women with three children gave as many more reasons than others for their own family size as did women with four children.

Another effect, although slight, of increasing family size was on desires and intentions for more children. In accord with expectations, women with three or four children were more likely to desire and intend another child than were women with just two children. Women with four children intended on average, .13 more and women with three children intended .20 more. They "desired" (wanted) .6 and 1.2 more, respectively. No women with two children intended to have more; they "desired" just .35 more.

Effect of High vs. Average Costs

The analyses included consideration of whether or not a woman had incurred higher than average costs in having children by comparing women who had had an exceptional child with those not having one. The prediction was made that the justification for one's own family size would be greater for those women who had incurred greater costs. The data showed that women in the high cost group justified their own family size more

[1] These three women said they had had more children than they actually intended. One adopted a deceased sister's child; two accidently conceived a third child 10 years after the second was born.

TABLE 3

Mean Number Reasons for Own (and Intended) Number of Children Minus Reasons for Other Numbers of Children Among Women Subject to Average and High Costs of Bearing Children

Measure	Group: Average costs (n = 19)	Group: High costs (n = 18)
Mean good reasons for own minus other numbers of children	+ 2.01	+ 2.49
Mean frequency of "no good reasons" for other numbers of children	1.22	1.78
Total additional children desired (and actually intended)	4 (1)	9 (3)

than did women in the average cost group. That is, the difference between the number of good reasons checked for their own family size and the average number of reasons checked for other family sizes was somewhat greater in the high cost group than in the average cost group ($F = 1.85$, $df = 8/136$, $p = < .07$), and significantly greater ($p < .05$) when the 3 women not intending their family size were deleted from analysis. Costs had a slight effect upon intentions to have more children; there was a tendency for women who had incurred high costs to desire and intend more children than for the women who had incurred average costs.

STUDY II

Since the most conservative test of the *post hoc* justification process is provided by evidence that unanticipated, unselected costs increase positive attitudes towards one's own or intended family size, that hypothesis was tested again in this study. In May, 1975, the following classified advertisement was placed in the city newspaper.

> WANTED: Married women with children at home for questionnaire survey. $4.00 paid. We are continuing our research on the family and are looking for women whose families have experienced a recent misfortune such as a severe illness or job loss due to the economy. Women whose families have not experienced such a misfortune may also participate. Study is under the direction of Dr. _____ . . . . . Questionnaires are mailed to participants and all responses are anonymous and confidential. If you would like to participate, call. . .

The intent of this solicitation was to find a group of women who, through no fault of their own, had experienced unusual family difficulties and then to compare their attitudes about children to a group of women who had not experienced such difficulties. The advertisement was deliberately designed to find women whose misfortune was unrelated to their decision to have children, but had nevertheless increased the costs of doing so.

Method

Questionnaires like the one used in the previous study, but with some questions on "family misfortune" added, were mailed to the first 50 women calling. Of these, 19 questionnaires were returned by women who had clearly experienced an involuntary, externally imposed misfortune. In eight cases, the husband died or was seriously ill. In eleven cases, the husband lost his job because of recession cutbacks or because the employer's

business left town. Twenty-two questionnaires were returned by women who had experienced no misfortune. Two questionnaires were discarded because they were incomplete. The remaining 7 questionnaires were returned by women who had experienced misfortune, but whose difficulties may have been self caused (e.g., being fined for nonpayment of taxes; job loss "for no reason"). These questionnaires were of little interest because of the difficulty of interpretation when groups are self selected.

RESULTS

In Table 4 are described the 41 women who participated in the study. Although similar in age, education, husband's job status (if working), and politics, the two groups were not strictly comparable. Those who had experienced a misfortune had more children than those who had not, and intended a larger complete family size (though not much larger).[2]

[2] This sample was (purposely) very homogeneous with respect to SES, religion, race and other structural variables usually associated with family size. Multivariate analyses showed no effect of these on intended family size in this study. Age was the only non-attitudinal variable associated with family size, but it was not a significant predictor of intentions for more children.

Table 5 describes the results of analyses on these groups. As predicted, those who had experienced a misfortune checked relatively more good reasons for their own family size than did those who had not experienced a misfortune. The difference between groups was larger when the reasons for their intended family size were analyzed.

Since more women in the misfortune group had large families than in the control group, an analysis of variance was performed using the scores of women in each group who had 1 or 2 children. Although the N's were very small, the results were encouraging. That is, the same tendency for women in the misfortune group to justify their own and intended family size was found (F's, respectively, = 2.2 and 3.0, df's = 1/24, p's about .10).

The favorable attitudes toward their family size of women in the misfortune group existed in spite of a clear perception that their costs were high. They recognized that a higher proportion of their income was spent on children (Table 4) and many went to great lengths in the questionnaire to discuss how having children had made dealing with the crisis very difficult. Yet only 7 of the 19 said their family relationships had worsened since the crisis, and even they justified their intended family size more than did the

TABLE 4

Characteristics of Married Women Subject and Not Subject to a Misfortune

Characteristics	Economic/medical misfortune (n = 19)	No misfortune (n = 22)
Current number of children ($\bar{x}$)	2.47	1.45
Intended number of children ($\bar{x}$)	2.66	2.45
Age ($\bar{x}$ yrs)	31.5	26.9
Education ($\bar{x}$ yrs)	13	13
Average prestige rating of employed husband's occupation (Hollingstead scores, where 1 = highest prestige, 7 = lowest prestige)	3.2	3.3
Political preferences (Liberal = 1, Conserv. = 4)	3.0	2.6
Percent income spent on children	37%	18%

TABLE 5

Mean Number Reasons for Current and Intended Number of Children Minus Reasons for Other Numbers of Children Among Parents Subject and Not Subject to Misfortune

	Economic/ Medical Misfortune (n = 19)	No Misfortune (n = 22)	
Mean good reasons for own number of children minus other numbers of children	2.32	.77	$t = 1.46$ $p < .10$
Mean good reasons for intended number of children minus other numbers of children	4.03	1.51	$t = 2.72$ $p < .01$

women in the control group ($\bar{X} = 3.64$). Eight women said their family relationships were better (and justified their intended family size the most of any group, $\bar{X} = 5.38$).

DISCUSSION

The number of women involved in these studies was very small, and the differences were not great. Nevertheless, the results may be provocative since they provide the first specific evidence of *post hoc* justification affecting family size attitudes, and in addition, suggest that favorable attitudes about fertility can be increased by unfavorable circumstances or negative incentives. These points should encourage more caution in interpreting survey data along narrowly "rationalistic" lines. They also suggest further research on the attitudinal and behavioral consequences of personal actions related to fertility. In at least three areas of investigation such research should be of interest: family planning, social norms, and adolescent sexual behavior. In family planning, we ought to know more about the consequences of trying contraception and various incentives to do so. In the area of social norms, we might consider when changes in norms follow, rather than precipitate, changes in behavior. And in the realm of adolescent sexuality, we should know more about the effects of initial commitments to unprotected intercourse and what factors might change them. Clearly, none of this research is inconsistent with research on attitudes and motives causing fertility; it would instead help to specify these processes.

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