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Personality is differentially associated with planned and non-planned pregnancies

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ABSTRACT

Recent studies have linked personality with family formation and having children. We studied whether personality traits are differentially associated with planned versus non-planned pregnancies. The participants were 8336 men and women from the 1958 British birth cohort study, with personality assessed in adulthood using the Five Factor Model. Planned pregnancies were more likely in women with high agreeableness and low openness to experience, and in men with high extraversion, high emotional stability, high conscientiousness, and low openness to experience. Non-planned pregnancies were more likely in women with high extraversion, low emotional stability, and low conscientiousness, and in men with high extraversion and low agreeableness. These results indicate that personality is associated with fertility differences via different pathways of fertility planning.

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1. Introduction

In recent decades, fertility trends in developed countries have shifted towards smaller families and later onset of childbearing (Leridon, 2005). At the same time, pathways to parenthood have become increasingly heterogeneous, with higher variance in the numbers of children, and with some people reproducing early and some postponing it even further (Rendall, Ekert-Jaffe, Joshi, Lynch, & Mougin, 2009). These changes probably have multiple causes, including economic costs of children, women's increased labour participation, and the availability and use of effective contraception – factors that are strongly associated with the degree of family planning. The psychological basis of reproductive behaviour and family planning underlying these demographic trends is poorly understood. Recent studies have reported associations between personality traits and fertility, but very little is known about the psychological and social factors that account for these associations. The present study extends this line of psychological research by examining whether personality traits of the Five Factor Model are differently associated with planned versus non-planned pregnancies in a large sample of British women and men.

Theoretical models of fertility behaviour often assume that childbearing in modern industrialised societies is strongly determined by rational decision-making that proceeds from initial fertility values and motivations via intentions to actual childbearing (Johnson-Hanks, 2008). Fertility motivations and intentions have

been shown to predict actual childbearing (Hutteman, Bleidorn, Penke, & Denissen, in press; Miller, Rodgers, & Pasta, 2010), and quantitative genetic studies suggest that fertility motivations and completed family size may have some common genetic basis (Miller, Bard, Pasta, & Rodgers, 2010), supporting the role of intentions in determining later childbearing.

However, the relationship between fertility intentions and actualised fertility is far from perfect (e.g., Morgan & Rackin, 2010). On the one hand, the average number of children in Western countries is consistently lower than the number of children people report they intend or would want to have (Bongaarts, 2002). On the other hand, at beginning of the 21st century worldwide, more than two in five pregnancies were estimated to be unintended, that is, mistimed or unwanted (Singh, Sedgh, & Hussain, 2010). Unintended or unplanned pregnancies and births have received considerable attention in research on child development. Unintended pregnancies often lead to induced abortions or, in the case of unintended births, may have negative effects on mother's psychosocial well-being and prenatal health behaviour (Humbert et al., 2011), mother-child-relationships (Barber, Axinn, & Thornton, 1999), child's emotional and cognitive development (Baydar, 1995), and on family dynamics more generally (Barber & East, 2011). Unintended pregnancies occur more frequently in younger, low income, less educated and ethnic minority groups (Christensen, Perry, Le, & Ahmed, 2011; Finer & Zolna, 2011), but psychological data addressing the determinants of unplanned pregnancies are scarce.

Personality has recently been shown to be associated with fertility differences. Extraversion and related traits (e.g., leadership and sociability) have been associated with higher probability of parenthood and having subsequent children among both sexes in

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Senegalese, Dutch, Finnish, and American samples (Alvergne, Jokela, & Lummaa, 2010; Dijkstra & Barelds, 2009; Jokela, Alvergne, Pollet, & Lummaa, 2011; Jokela & Keltikangas-Järvinen, 2009; Jokela, Kivimäki, Elovainio, Keltikangas-Järvinen, 2009), although these associations were not observed in two studies with smaller samples (Mealey & Segal, 1993; Nettle, 2005). Neuroticism and related traits (e.g., harm avoidance and negative emotionality) have been associated with lower probability of parenthood and fewer number of children in Finnish, American, and German samples (Jokela et al., 2009; Jokela, Hintsala, Hintsanen, & Keltikangas-Järvinen, 2010; Jokela et al., 2011; Reis, Doernbecher, & von der Lippe, 2011), although this association has not been consistently observed in all studies (Alvergne et al., 2010; Dijkstra & Barelds, 2009). Other important personality traits have been studied less. Agreeableness has been shown to correlate with higher number of children, and this association appears to be more consistent in women than in men (Dijkstra & Barelds, 2009; Jokela et al., 2011). Conscientiousness and its temperamental counterpart persistence have been found to be associated with both higher (Dijkstra & Barelds, 2009) and lower number of children, especially in women (Jokela et al., 2010, 2011), suggesting that this personality dimension may involve both positive and negative associations with fertility that are differently measured by different personality scales. Finally, openness to experience was not associated with reproductive success in Senegalese men (Alvergne et al., 2010) or in Dutch women (Dijkstra & Barelds, 2009), but was associated with lower number of children in both sexes in two American samples (Jokela et al., 2011).

Personality traits may contribute to having planned and non-planned pregnancies via different pathways, including sexual behaviour and long-term planning. Several studies have shown that personality is related to mating and sexual behaviour. Individuals with low agreeableness and low conscientiousness are more likely to engage in risky sexual behaviours including multiple sexual partners, lack of contraception, and casual sex with strangers (Hoyle, Fejfar, & Miller, 2000; Miller et al., 2004; Schmitt & Shackelford, 2008; Trobst, Herbst, Masters, & Costa, 2002; Turchik, Garske, Probst, & Irvin, 2010), which increases the probability of unplanned pregnancies (e.g., Hoyle et al., 2000). High extraversion and sensation seeking tendencies have also been associated with sexual risk behaviour (Desrichard & Denarie, 2005; Hoyle et al., 2000; Nettle, 2005; Schmitt & Shackelford, 2008; Turchik et al., 2010), although this has not been observed in all studies (Fontaine, 1994; McCown, 1993; Trobst et al., 2002). The results for neuroticism have been inconsistent (Hoyle et al., 2000; Miller et al., 2004; Trobst et al., 2002; Turchik et al., 2010). With some exceptions (Schmitt & Shackelford, 2008), openness to experience has not been associated with sexual risk behaviour (Hoyle et al., 2000; Miller et al., 2004; Trobst et al., 2002; Turchik et al., 2010). In one previous study with a fairly small sample ($n = 118$ couples), unplanned pregnancies were more common in women with high neuroticism, low agreeableness and low conscientiousness (Bouchard, 2005).

Certain personality traits may favour long-term family planning and compliant contraceptive use. For example, highly conscientious individuals may be more likely to have long-term plans for their future. This might become expressed as a positive association between conscientiousness and planned pregnancies, especially later in adulthood, and a negative one between conscientiousness and non-planned pregnancies. People with high agreeableness and high conscientiousness invest more heavily in personal relationships than those low on these traits (Ahmetoglu, Swami, & Chamorro-Premuzic, 2010). One could therefore expect these traits to be associated particularly with having planned children. Furthermore, openness to experience is strongly associated with academic motivations and achievement (e.g., Komarraju, Karau, &

Schmeck, 2009), and educational ambitions and pursuing a career often postpone the transition to parenthood, especially in women (Liefbroer, 2009). Individuals with high openness to experience also tend to have non-traditional social values not favouring parenthood (Roccas, Sagiv, Schwartz, & Knafo, 2002). High openness to experience might therefore contribute to a lower probability of having planned children and postponing planned childbearing in particular.

Including the planning status of pregnancies in studies of personality and fertility should provide additional information on how and why specific personality traits become associated with fertility differences. Associations with planned pregnancies would indicate more premeditated psychosocial pathways to parenthood, whereas associations with non-planned pregnancies would suggest a more prominent role for unintended consequences of behaviours. Furthermore, the assessment of planned versus non-planned births may allow one to evaluate how much the influence of personality on fertility is dependent on contraceptive methods provided by modern environments – assuming that the degree of family planning has increased over history with efficient contraception and postponement of parenthood after marriage.

We set out to elaborate the associations between the Five Factor Model (FFM) personality traits and reproductive outcomes in a nationally representative large dataset from the UK, addressing three issues in particular. First, we investigated how personality is associated with the probability of becoming pregnant (or conceiving a pregnancy) irrespective of the planning status and outcome of the pregnancy. Second, we examined the effects of personality traits separately for planned and non-planned pregnancies. By focusing on pregnancies rather than births we get a more accurate picture on the behaviours leading to pregnancies, as birth rates can be affected by abortions and miscarriages. Third, we examined the associations between personality traits and total number of children (planned or non-planned) over the reproductive age of individuals. By examining these associations by age, it is possible to investigate in more detail whether specific personality traits are more important for fertility behaviour in some stages of life than in others. It should be noted at the outset that in the present study personality was assessed in adulthood after the participants had already had their children, which may introduce bias due to parenthood influencing personality development.

Based on previous studies of personality, mating, and fertility behaviour, we hypothesised that (i) extraversion, emotional stability, and agreeableness (particularly in women) would be positively associated with the total number of children; that (ii) conscientiousness and agreeableness would be negatively and extraversion positively associated with the probability of non-planned pregnancies; and that (iii) agreeableness and conscientiousness would be positively, and openness to experience negatively associated with the probability of planned pregnancies.

2. Material and methods

2.1. Participants

The participants were from the nationally representative 1958 British birth cohort study (also known as the British National Child Development Study) (Atherton, Fuller, Shepherd, Strachan, & Power, 2008; Power & Elliott, 2006). The original participants were 17,634 individuals born in England, Wales, and Scotland during one week in March 1958. Data have been collected in several follow-up phases. Written informed consent was obtained from the parents for childhood measurements and ethical approval for the study was obtained from the South East Multi-Centre Research Ethics Committee. The analytic sample of the present study

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