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Fertility and regional development in Portugal: from the first to the second demographic transition

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Introduction

Portuguese regions are quite different regarding several development indicators, such as educational levels, regional value added *per capita*, purchasing power, and others. The industrialization process followed different models in the northern and southern regions of the country. The persistence of traditional traits – such as the dominance of small scale and family firms, as well as the persistent relevance of informal networks and small localities, characterizes the northern model. This region is also associated with a slow entrance into the sustained fertility decline that characterized the first demographic transition. The South followed the European demographic trends more rapidly. In this presentation we develop the idea that this demographic *delay* was an important factor of disadvantage for regional development in the past. We also sustain that, in contemporary times, a similar effect may be happening, with evidence from the slow entrance of this region into the second demographic transition. The causes and consequences of this delay are scrutinized through original survey data that collected detailed information on vital trajectories of individuals from different localities of the northern region. Attention is centered in the process of youth emancipation and first years of adult life.

Theoretical Framework

The (1st) demographic transition is widely known as a process of change of mortality and fertility levels, which develops through similar (not identical) phases in different countries and regions (Reher, 2010, 2011, 2013; Lesthaegue, 2010). The advanced societies are clearly post transitional and more recent changes in demographic behavior, mainly relating family formation (and dissolution) were included in new theoretical developments, known as the second demographic transition. SDT has been widely associated with the emergency of generations that value more deeply their individual autonomy and personal realization, young women that strive for wide participation in the labor market and social life, and individuals that respond less to the influence of

institutional and social norms (Beck, 1998; Inglehart, 1998, Lesthaeghe, 2010, Reher, 2011; 2013).

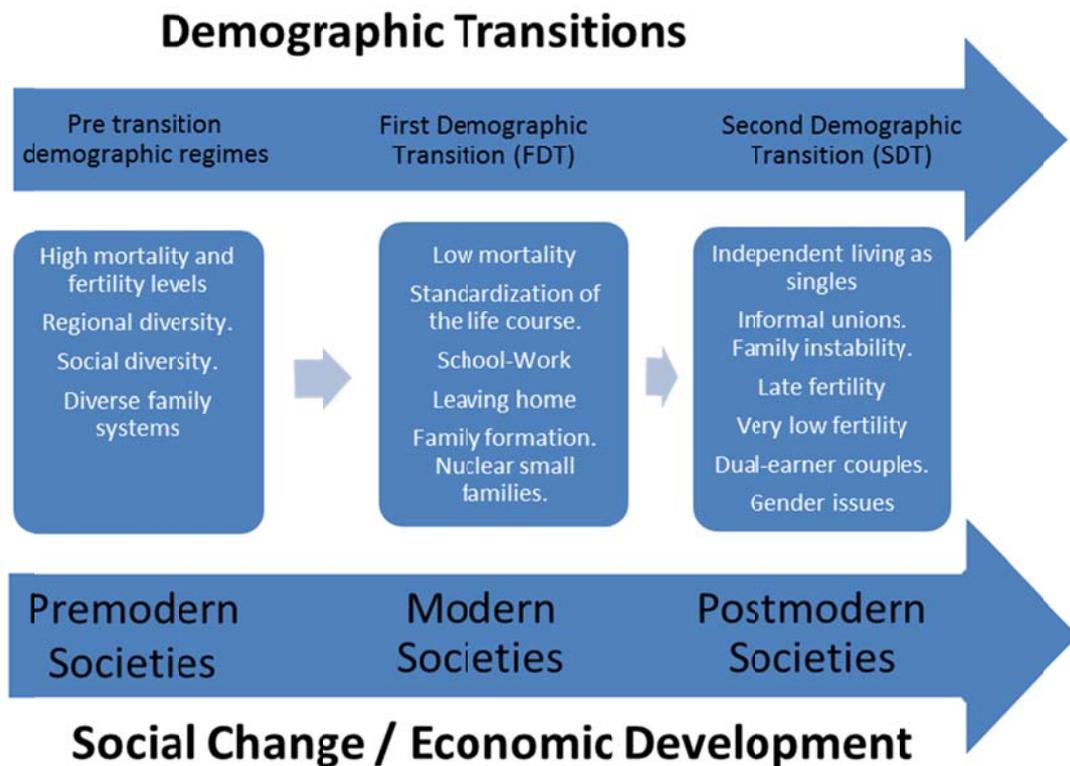


Figure 1. Interconnected dimensions of change – demographic, economic and social

The Mediterranean countries showed a late 1st demographic transition compared to northern Europe, but also a specific model of second demographic transition. In recent decades, postponement of family formation and fertility decline happened, without great interference in the nature of leaving home and family formation transition behaviors, which remained quite conventional. But more recently (2000 onwards) informal unions and/or non-familiar household arrangements are clearly increasing, and postponement of marriage and of first child is reaching even higher values. Mediterranean SDT model is also characterized by a latest-late family formation and a lowest-low fertility level. Familiar strategies to achieve more wellbeing and to ensure offspring with a better life are very centered in reducing fertility levels. Individuals would like to have more children, but they decide not to do so in order to ensure themselves and their child with a better life, and more promising futures. This behavior is consistent with what is

happening in other Mediterranean countries (cf. Billari, 2004; 2008; Iacovou, 2001, 2011).

The sustained and voluntary reduction of fertility was a demographic trend that accompanied regional development in the past (FDT), revealing changes in societal values, in the perceived chances of survival of children, and in the economic opportunities and goals of individuals and families. The northern Portuguese region showed a late entrance into fertility decline when compared to other Portuguese regions (Bandeira, 1996). Nowadays, northwestern families are also being less prone than other regions families to adopt the demographic changes that characterize the second demographic transition. This delay may be connected to regional characteristics that already implied a late entrance of this region in 1st DT, as is suggested to happen in other European regions by Lesthaegue and Neels (2002). To grasp into this hypothesis and to better interpret its implications we have centered our attention in a recent generation, obtaining data relative to their life course during youth and first adult years.

Methodology

Late entrance in FDT, and also in SDT, shows that northern Portuguese region is resistant to change comparatively to other Portuguese regions. In order to understand more deeply the causes and consequences of this delay we have conducted a survey, collecting data at an individual level (n=214, conducted in 2008). This survey allowed collecting data from life course trajectories – main vital transitions during youth and entrance into adulthood, as well as data from familiar and spatial backgrounds. The sample includes male and female individuals, aged 25 to 35, from different localities in the northern region, representing distinct urban-rural categories of habitat. Data was analysed through Multiple Correspondence Analysis (MCA) and Cluster Analysis in order to get to know which different patterns of transition are present. Ordinal Logistic Regression was used in order to provide some explanation for such differentiation.

Results

Our data shows that social and economic modernization is still a process in northern region, mainly when we consider rural locations. Low investment in education and early transition to work life is still common. Getting enough earnings to start a family is a difficult goal even if employment is available. When achieved, marriage is widely celebrated with religious and social events. This pattern of transition (*Traditional*) is more present in rural areas, and in disadvantaged social classes. In deep rural settlements young couples still opt, in certain cases, to live as a couple in the parental home. An intermediate pattern (*Modern*) is associated with family formation postponement and with medium educational levels. Lowest-low fertility has started to emerge as a pattern of family behavior, and is spreading fast. Informal unions are still predominantly urban phenomena, and independent living even more. The typical second demographic traits are clearly present, but concentrated in young adults from urban spaces and better off families (*Innovators*). Cluster analysis has confirmed the relevance of the patterns that emerged from MCA.

Conclusions

Higher levels of development – thought as a measure of a wider access to resources, well-off lives and to lower risks of suffering – are deeply connected to changes in demographic variables such as mortality, fertility and marriage. Our results are consistent with this affirmation, and also reveal that the region is a relevant scale in order to better understand these connections and mechanisms below change. Sociocultural factors, as well as economic structures, create regional demographic patterns.

In this particular case, the northwestern region of Portugal – Minho – shows a structural tendency to resist change. Low urbanization is part of the explanation for this. It is more difficult to ensure wide accessibility to resources and opportunities when population follows a disperse pattern of settlement. The family centrality for individuals is another factor. Individuals invest more on family when they value more familiar proximity and cohesion. But they also depend more on family when public goods and services are less available. In either case, young people show lower tendency to adopt innovations in their vital trajectories. But this comes with a stronger fall of fertility, and brings together

the problems that are known to arise from it: the intense ageing of population and communities with fewer and fewer children, rapidly losing their social and economic sustainability. Policy makers should give more attention to these regional differences, and to their underlying causes, in order to design policies that deliver more precisely what families and individuals need.

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