Introduction

Over the past 30 years a considerable amount of research has been devoted to examining the voluntarily childless: their characteristics, their prevalence, their motivations, ‘risk factors’, their mental and physical health, their stigmatization, and their responses to stigma. Nevertheless, the voluntarily childless are a relatively understudied population and there are many research gaps in this field. In addition, the debates surrounding voluntary childlessness are ‘dubious discourses’ (Gandolfo 2005). This literature review provides an overview of the central debates on voluntary childlessness and illuminates some of the underlying assumptions of the field.

Voluntary childlessness joins other non-traditional family forms that are debated in academia, mass media, and policy. While childlessness describes a person or couple who does not have children for various personal, biomedical, or situational reasons, voluntary childlessness is characterized by an active choice, commitment, and permanence regarding the decision not to parent (Houseknecht 1987; Park 2002). Those choosing not to have children have been described by a number of different terms including voluntarily childless, intentionally childless, childless by choice, unchilded, non-mother, non-father, without child, and childfree. Due to the ambiguity of some of these terms, this paper utilizes the term ‘voluntary childlessness’.

It is difficult to calculate the rates of voluntary childlessness, because expected and actual childlessness, involuntary and voluntary statuses, would have to be distinguished. Nevertheless, childlessness on the whole has become increasingly common and among ages 18-50 is estimated to range between 15% and 25% in many developed countries (Blackstone & Stewart 2012; Hara 2008; Iwasawa 2004; Merlo & Rowland 2000). The voluntarily childless are an increasing segment of the childless population, though still relatively uncommon (Chancey & Dumais 2009; Park 2005). Interestingly, a growing international ‘childfree’ movement has emerged through social networking to provide support and connect like-minded people (Basten 2009; Park 2005).
The increase in the segment of the population who are voluntarily childless has been accompanied by augmented academic interest in the voluntarily childless (Gillespie 2000). Since Veevers’ 1973 paper — entitled ‘Voluntary Childlessness: A Neglected Area of Family Study’ — described the voluntarily childless as receiving ‘selective inattention’, there has been a considerable amount of research examining voluntary childlessness. This review will discuss the central debates on voluntary childlessness and critically analyse assumptions that are made in this literature. This paper reviews the multifaceted literature on voluntary childlessness and identifies four central debates: (1) who chooses to be childless; (2) why do individuals choose voluntary childlessness; (3) what are the consequences of voluntary childlessness; and (4) stigmatization of this lifestyle and responses to stigma. Research has analysed these debates through sociological, psychological, medical, autobiographical, oral history, and feminist lenses. For each debate, this review will provide an overview of the debate and then critically analyse the implied assumptions of the field. This paper will also identify methodological limitations and considerations for future research in the conclusion.

Who chooses to be childless?

One of the oldest and most enduring debates regarding voluntary childlessness has been a focus on who (i.e. what kind of individual) chooses to be childless. In 1973, Veevers claimed that socio-demographic variables predispose individuals towards parenthood or voluntary childlessness, including birth order, family size, mother’s employment, and perception of parents’ marital happiness. However, Ramu (1984) found that these factors are not related to voluntary childlessness. More recently, Tanturri and Mencarini (2008) reported that women who are voluntarily childless in Italy tend to come from smaller families. In addition, other research that has investigated this question shows that women who live in urban areas and report being less religious are more likely to be voluntarily childless (DeOllos & Kapinus 2002; Heaton et al. 1992; Mosher et al. 1986; Mosher et al. 1992). Arguably, one explanation for the lack of religiosity amongst the voluntarily childless could be because ‘[western] religious norms generally encourage high levels of fertility and traditional values, which can run counter to the values of a family with no children’ (Chancey & Dumais 2009, p. 207).

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Although Ritchey and Stokes (1974) did not find education levels to be associated with voluntary childlessness when accounting for postponed childbearing, other research has reported an association, especially in the case of tertiary education (Abma et al. 1997; Keizer et al. 2008). A commitment to one’s career, either measured directly or inferred from level of education and occupational status, has consistently been associated with voluntary childlessness (Bachu 1999; Park 2002). According to the research, many voluntarily childless women are also highly represented in professional or management occupations (Bachu 1999; Crispell 1993; Cwikel et al. 2006) and have higher incomes (Bachu 1999).

Researchers have also been interested in the personalities of the voluntarily childless. Some findings have concluded that women who are voluntarily childless are more ‘masculine,’ less traditional in their gender roles, and less conventional (Baber & Dreyer 1986; Bram 1984; Callan 1986). Other research has questioned these conclusions and instead found that people choosing lives without children held conventional views about partnerships and parenting (McAllister & Clarke 1998). Interestingly, the Rowntree foundation reports that though highly qualified women are more likely to be voluntarily childless, their career identity is not central to their personal identity or personal fulfilment; instead, early retirement was found to be a popular goal (McAllister & Clarke 1998). These authors thereby conclude that individuals who are voluntarily childless value a general quality of life over a career; this quality of life is said to include a basic level of economic security, good housing, and an egalitarian relationship (McAllister & Clarke 1998).

By critically analysing the debate regarding the demographic characteristics and personalities of voluntarily childless individuals, it becomes clear that the construction of childlessness as a problem is ‘stratified,’ both globally and within societies. As Greil et al. (2011) explain, some groups of women are encouraged to ‘choose’ to have children while others are discouraged. For example, it is salient that family planning programs are being advocated in the developing world, while childlessness, whether voluntary or involuntary, is a neglected topic (van Balen & Gerrits 2001; Bos et al. 2005; Nachtigall 2005). Similarly, within industrialized countries, the fertility of white women or women with higher incomes and education has been encouraged while the fertility of poorer women or women of colour is controlled. For example, in examining coverage of contraceptive and infertility treatments in America, King and Meyer (1997, p.493)
find that ‘poor women have broad access to contraceptive coverage but very little access to infertility treatments, while working-and middle-class women have increasingly broad coverage of infertility treatments but spare coverage of contraceptives’. Furthermore, the lower- and working-class women Bell (2009) interviewed reported being steered away from infertility treatment by medical personnel who tried to dissuade them from getting pregnant.

Examinations of the demographic characteristics of those who are voluntarily childless are underpinned by assumptions about who is ‘fit to reproduce’. As Carey et al. (2009) write: ‘The social group(s) in which voluntary childlessness is growing are those which we would expect to see enjoying the benefits of wider social roles afforded by feminism, better reproductive technology, and a less gender-biased workplace. They are not the groups with which we associate disadvantage, as they are well positioned socially and politically, and enjoy full economic participation (both in terms of production and consumption)’ (p.128). This discrepancy in reproductive freedom should be taken into account in future studies.

Research examining voluntary childlessness has also overwhelmingly neglected men. Further, until recently, studies have focused exclusively on heterosexual women (Blackstone & Stewart 2012). In the future, investigations into the decision to be voluntarily childless should examine participants with different gender, race, ethnicity, social and economic statuses, and sexual orientations.

Why do individuals choose voluntary childlessness?
A second critical debate in the literature is regarding the psychological motivations and sociological circumstances that have inclined an increasing number of individuals to be childless by choice. Notably, Houseknecht (1987) reviewed 47 studies, 29 of which focused on examining the rationale of individuals who do not want to have children. In order of frequency from the most to least frequent response, Houseknecht (1987) found that individuals rationalized their decision not to have children as: freedom from childcare responsibility; greater opportunity for self-fulfilment and spontaneous mobility; more satisfactory marital relationship; women’s career considerations and monetary advantages; concerns about population growth; general dislike of children; early socialization experiences and doubts about parenting abilities; concern about physical aspects of childbirth and recovery; and concern for children given problematic global
conditions. More recent research has found that women report choosing childlessness because they never wanted to parent, or are not in the ‘right’ relationship, or are in a relationship where their partner does not want to have children (Graham et al. 2013). It is becoming increasingly clear that relationship formation is a key factor in shaping childbearing decisions for some individuals.

A gender difference in the motivations for voluntary childlessness has also been explored. Some research has contended that females are more likely than males to present altruistic, collective motives (e.g. concern about population growth, doubts about their ability to parent, or concern for children given world problems), while males are more likely to cite individualistic rationales (e.g. monetary advantages or dislike of children) (Houseknecht 1987). Houseknecht’s (1987, p.376) review further explains that individuals rationalize their decisions to be childless using ‘an acceptable vocabulary of motives previously established by the historical epoch and the social structure in which one lives’. A more recent study by Park (2005) found that women predominantly saw parenting as conflicting with their career and leisure activities and claimed that they lack ‘maternal instinct’ or interest in children. On the other hand, men were more explicit in rejecting reproduction because of their perceived (often financial) sacrifices (Park 2005). More research would be necessary to better understand if men and women have distinct pathways into childlessness, or at least, whether men and women give different justifications that correspond to the social acceptability of their arguments.

In addition, the decision to be voluntarily childless can alter over the life course (Morell 1994). As Ramsay and Letherby (2006) explain, though one of their participants previously defined herself as ‘involuntarily’ childless, she now identifies more closely with the ‘voluntarily’ childless end of the continuum. Furthermore, extenuating circumstances may lead to parenthood, even among the voluntarily childless. For example, though some individuals make the decision to be voluntarily childless, they may enter into a relationship later in life where their partner has children, and they may thereby enter into a parental role at that time (Letherby & Williams 1999). More research is needed to investigate the transformation from deciding to be childless to deciding to become a parent, or visa versa, and the factors that impact this decision.

This debate has not only incorporated the psychological motives and rationales reported by the voluntarily childless literature, but the sociological underpinnings of this choice have also

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been investigated. A central structural cause that is identified as an influence on the decision to parent is the advancement of family planning and reproductive technology, which provides individuals with more control over their fertility (Chancey & Dumais 2009). Furthermore, some explain the cause of increasing voluntary childlessness to be due to the welfare state, which has decreased dependence upon familial structures that traditionally were necessary for support in old age (Park, 2005). Other sociologists point to the role of feminism and changing ideologies regarding women’s roles (Bachu 1999, Park 2005). In addition, Houseknecht (1982) argues that the main determinants of voluntary childlessness are educational level, greater labour force opportunities, and occupational prestige. Still others’ purport that individualism, a stronger focus on having an intimate relationship with one’s partner, and a desire for leisure, consumer goods, travel, spontaneity, and freedom in Western society has contributed to more women choosing childlessness (Park 2005). In future research it would be useful to explore these hypotheses in greater detail.

Many researchers who have examined the motivating factors for voluntary childlessness predominantly have concluded that ‘freedom’ (or ‘autonomy’) on the whole motivates the voluntarily childless; freedom from the pressures and responsibilities that parenting involves and the freedom to pursue self-development and self-fulfilment. However, as the diverse list of reasons presented by Houseknecht (1987) illustrates, there is considerable variation in the pathways that have led to the decision to be voluntarily childless. For example, many nuns, priests and monks choose to be childless for religious reasons and often feel that they can impact the world in a more positive way without having the responsibility of raising children. The choice to be childless is a process that is situated in the context of work, life experiences, personal health, and relationships. The central focus on ‘freedom’ as a motivating factor is problematic because, as will be discussed below, this rhetoric has been used as ammunition for an attack on voluntarily childless women as ‘selfish’, where in fact, a sizeable minority of women do not have children for — or at least portray their decision to be due to — altruistic reasons. The focus upon the overriding narrative of ‘freedom’ as the motivating factor for voluntary childlessness is simplistic and future discussion should more fully investigate the diversity of motivations and their pathway into voluntary childlessness.

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Furthermore, as demonstrated by Basten’s (2009, p. 2) phrasing of this debate — ‘this crucial question: why be childless by choice?’ — there is a focus on investigating why individuals choose not to parent rather than examining why others choose to parent. This highlights an assumption that often seeps into the discussion of voluntary childlessness whereby the decision to be voluntarily childless from the outset is perceived as a ‘deviant’ identity while choosing to parent is perceived as ‘normal’ (Gillespie 2000; Graham et al. 2013). Future studies should be mindful of the possibility of this assumption informing their work, which might render the choice not to parent as ‘abnormal’.

**What are the consequences of voluntary childlessness?**

Another aspect of the voluntary childlessness debate examines whether the consequences of voluntary childlessness are beneficial or detrimental to one’s physical and emotional health. The results of this inquiry have been mixed. While some studies have found no differences in life satisfaction (Callan 1987, Somers 1993), others have found higher satisfaction among voluntarily childless couples (Weiss 1993). Nevertheless, it is common for researchers to assume that childless individuals lack social support and emotional ties later in life and will thereby experience social isolation (Park 2005). However, other studies have contrarily found that the childless elderly do not report less life-satisfaction, or significantly less life-satisfaction, compared to parents (McMullin & Marshall 1996; Park 2005). Notably, one study even found that childless elderly adults experience less stress in their lives compared to elderly adults with children (McMullin & Marshall 1996).

Researchers investigating the consequences of voluntary childlessness have also examined whether voluntarily childless individuals have higher marital satisfaction. Most studies have found higher marital satisfaction overall amongst couples without children. Nevertheless, when examining divorce rates, Bartlett (1995) found divorce rates are highest for parents with children under 16 years of age and lowest for parents with children over 16 years of age, while the rates for childless couples were in the middle range. The mixed conclusions found in this debate are likely due to methodological problems including not differentiating between the voluntarily and involuntarily childless and not explicitly controlling for income and age (Basten 2009). Weiss
specifically examined the voluntarily childless and found increased marital satisfaction among couples that identified as voluntarily childless (Weiss 1993).

Gandolfo (2005), a feminist writer, observes that fiction often depicts the consequences of childlessness to women’s health negatively, as childless women often end up unhappy, committing suicide, or being sent to an asylum. Researchers have examined the association of physical harm with voluntary childlessness. For example, Mettlin (1999) discusses data that found an association between childlessness and breast cancer death. However, Park (2002) and Snitow (1992) are critical of this controversial research and argue that medical information is a weapon used against younger women who are told that to delay motherhood for ‘too long’ or to choose to be childless is to risk becoming infertile, contracting endometriosis, or developing reproductive cancers (Park 2002, p. 23; Snitow 1992).

Arguably, underlying this debate that investigates the consequences of voluntary childlessness is an agenda to problematize voluntary childlessness as detrimental to a woman’s emotional and physical health in order to ‘control’ her body. As noted by Lovell (2011), Foucault explains that power plays a role in virtually all interactions within society and attempts to govern the conduct of others by shaping action through the use of coercion, consent, or persuasion. Accordingly, power is intended to structure the actions of others: ‘an action upon an action, on existing actions or on those which may arise in the present or the future’ (Foucault 1982, p. 789). Following Foucault, we can observe how the threat of physical and emotional sickness is subtly used to persuade women — that is the ‘right kind of women’ as discussed above — to parent. Accordingly, women are dissuaded from choosing to be childless because of the ‘negative’ health consequences of their choice.

Future research that continues to examine consequences of voluntary childlessness should examine the effect of this choice on the lives of other children, families, and communities, rather than exclusively focusing on the health repercussions to voluntarily childless women (Blackstone & Stewart 2012).

Stigma and the responses to criticism
A last central debate regards the stigmatization of the voluntarily childless and their response to criticism. Researchers have examined the enduring social pressure and stigmatization of those

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who are voluntarily childless: ‘[s]tereotypes of the childfree held by the general population have been fairly consistent since the late 1970s, and they tend to be largely negative’ (Chancey & Dumais 2009, p. 208). While the involuntarily childless are often pitted for their circumstances, the voluntarily childless are perceived more negatively, leading researchers to believe that ‘it is not only the process of raising children that makes one socially desirable, but one’s orientation toward the process of raising children’ (Chancey & Dumais 2009, p. 208).

At times, the voluntarily childless are stereotyped favourably, as having greater freedom and autonomy, and for being career-oriented and well-off financially; but, even these traits of freedom and autonomy are often misconstrued: ‘even when a childless woman is envied for her freedom, it is understood to be at the cost of the most intimate and crucial of human relationships’ (Gandolfo 2005, p. 113). More often, the voluntarily childless are seen as less nurturing, socially undesirable, selfish, individualistic, irresponsible, materialistic, and less mature (Carey et al. 2009; Park 2002; Veevers 1974). Others have accused the voluntarily childless as burdening society, free-riding, or cheating the (welfare) system (Burkett 2000). A qualitative study of voluntarily childless women found that they report that their decision is often perceived with disbelief, disregard, and seen as deviant (Gillespie 2000). Interestingly, women who choose childlessness are more stigmatized than men who choose childlessness (Park 2002). In addition, men report greater negative perceptions of the voluntarily childless than women (Koropeckyj-Cox & Pendell 2007). Notably, research has found that when participants compare parents and the childless, respondents associate more positive attributes (e.g. physical attractiveness, resource accruing potential, and emotional stability) with parents (Kemkes 2008).

An emerging aspect of the debate on voluntary childlessness examines the response of the voluntarily childless to the stigma they face. The voluntarily childless have been stigmatized for decades (Chancey & Dumais 2009), but social scientists have only recently begun examining the different approaches taken by the voluntarily childless to preserve a positive self-identity in the face of prejudice and discrimination. For example, some women respond to criticism by pretending infertility or postponement. Park (2002) calls this approach ‘passing’ and provides the example of Rose, a 31-year-old single woman, who explains her strategy:

My friends and I would get together and would always talk about having children, and they would always say, “Oh, I think you’d make a wonderful mother,” and I would say,
“Oh, yeah, someday.” You know, it’s funny because they’re very open and liberal, but I never felt comfortable saying, “I choose not to have them” (p. 32).

Others take an educational role in attempting to dispel negative stereotypes and present a more sensitive picture of voluntarily childless individuals as nurturing to other children, e.g. the ‘good aunt’. Related to this approach is the technique of some who emphasize that their decision not to have children was well thought out or for altruistic motivations. Researchers also discuss the approach of some to ‘condemn the condemners’, i.e. criticizing abusive parenting to which they believe their decision not to parent is superior, criticizing the decision to parent as selfish and unreflective, or interpreting others’ disapproval as envy. In this way, the voluntarily childless redefine their situation and put the pressure on parents to account for their decision to parent (Park 2002).

In critically analysing this debate’s focus on ‘why have the voluntarily childless been stigmatized?’, it becomes apparent that the stigmatization of the voluntarily childless is intertwined with the construction of womanhood as motherhood (Gillespie 2000). In answering Simone de Beauvoir’s (1949) question — ‘what is a woman?’ — the response seemingly remains that ‘women= mother= womb’ (Gandolfo 2005). As Rich (1979, p. 26) explains, ‘a woman’s status as childbearer [is] the test of her womanhood…motherhood [is] the enforced identity’. The construction of womanhood as motherhood has been established through social, political, medical, and religious institutions. In so doing, motherhood has become constructed as a ‘fixed’ and ‘natural’ practice that is central to feminine identity. Importantly, this construction of femininity informs the debate on voluntarily childlessness and the stigma that women experience (Letherby & Williams 1999). Women who choose not to have children challenge dominant constructions of female identity and femininity (Carey et al. 2009; Gillespie 2000; Letherby & Williams 1999). Further, the debate regarding the ways in which women respond to stigmatization can accordingly be seen as the different ways in which women resist this construction of their identity.

This essentialist discourse (i.e. that womanhood is motherhood) is oppressive for all women, whether they choose to have children or not (Gandolfo 2005). Voluntary childlessness, however, offers an opportunity to transgress the cultural image that womanhood equates to motherhood (Gillespie 2000; Huffer 1998). For example, Park (2002) describes the conversation that Ann, a college professor, reportedly had with her doctor when she was 34. The physician

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told Ann that she “really needed to start having children”, to which Ann responded “I told him that we all serve society in different ways. That’s what I told him. And I can serve society in my way” (p. 37). This interaction is layered with gendered and institutionalized power, but nevertheless illustrates how voluntarily childless women can, in their response to stigma, deconstruct the aforementioned conception of womanhood as motherhood. Ann responds to the stigma she faces by explaining that she serves society in her own way as an instructor, researcher, mentor, and role model. In so doing — and as many other women who are voluntarily childless do through their alternative responses — Ann contributes to deconstructing the stereotype that all women want to mother and that womanhood is synonymous with motherhood. It would be useful for future research to also determine the pervasiveness of stigma towards the voluntarily childless and how it may be alleviated.

Conclusion

This paper has reviewed four central debates in the voluntary childlessness literature and discussed the assumptions, underpinnings, and inferences of these inquiries. Firstly, the focus on who is voluntarily childless suggests a bias regarding which segment of the population is encouraged to procreate. Accordingly, childlessness (or family limitation) in the developing world and amongst poorer women in industrial countries is encouraged through the promotion of family planning programs, while more wealthy women are discouraged from being voluntarily childless. Secondly, the discussion about why individuals choose voluntary childlessness from a psychological and sociological perspective reveals an academic emphasis on ‘freedom,’ ‘autonomy,’ and ‘individualism,’ as underlying one’s decisions to be childfree. As discussed, this neglects the diversity of motivations and the many pathways into voluntary childlessness. Further, asking why one chooses childlessness, rather than asking why one chooses to parent, assumes parenting to be the norm and marginalizes a growing number of individuals.

Thirdly, using a Foucauldian lens in examining the debate concerning the consequences of voluntary childlessness illustrates how academic research on this topic has been used to control women’s bodies. Research that dissuades individuals from choosing to be voluntarily childless because of the ‘negative’ health consequences is a form of social control. Lastly, investigations into the stigmatization of those who choose to be childless and their responses illustrate how
womanhood is constructed as motherhood and any other choice is open to stigmatization. Furthermore, the different responses of voluntarily childless women to the stigma they face can be perceived as an attempt to deconstruct this essentialist argument that equates womanhood with motherhood.

This review has also, where applicable, discussed methodological limitations. For example, that a substantial amount of the literature is based on correlations is extremely problematic. Further, especially in the early stages of research into voluntary childlessness, conclusions were drawn that are not directly supported by academic research. Much of the research that has been conducted is a few decades old and new research should be conducted to further validate these findings. In addition, studies do not consistently differentiate the voluntarily and involuntarily childless or control for important variables (e.g. age, income, or diversity of participants). Together these issues have led to mixed results. These methodological problems should be addressed in future research.

This review has not only provided an overview of central debates on voluntary childlessness, but also illuminated some of the underlying assumptions of this literature. The above analysis suggests that further research should address, or at the very least be mindful of: 1. the stratification of reproduction; 2. the diversity of motivations for becoming voluntarily childless; 3. the assumption that parenthood is ‘normal’ and childlessness is ‘deviant’; 4. the conflation of womanhood with motherhood; and 5. the use of research on voluntarily childless women as a means to ‘control’ women’s reproduction.

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1 Some of these terms (e.g. unchilded, non-mother, non-father, without child) do not signify whether childlessness is a choice rather than circumstance. ‘Childfree’ is considered by some to be a more ‘positive’ term for voluntary childlessness (than ‘childless’); however, this term can also be interpreted to mean that children are not welcome as this term signifies ‘emancipation’ (Basten 2009, p.9).

2 Colen (1986) first used the phrase ‘stratified reproduction’, later popularized by Ginsburg and Rapp (1995), to describe how reproduction is structured across social and cultural boundaries, empowering privileged women and disempowering less privileged women to reproduce (Greil et al. 2011).

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