

ΠΑΝΕΠΙΣΤΗΜΙΟ ΘΕΣΣΑΛΙΑΣ
ΤΜΗΜΑ ΜΗΧΑΝΙΚΩΝ ΧΩΡΟΤΑΞΙΑΣ, ΠΟΛΕΟΔΟΜΙΑΣ & ΠΕΡΙΦΕΡΕΙΑΚΗΣ ΑΝΑΠΤΥΞΗΣ
ΕΡΓΑΣΤΗΡΙΟ ΔΗΜΟΓΡΑΦΙΚΩΝ ΚΑΙ ΚΟΙΝΩΝΙΚΩΝ ΑΝΑΛΥΣΕΩΝ

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program in Kosovo and Metohija?**

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Année 2001, vol. 4

Σειρά Δημογραφικών Εργασιών για τα Βαλκάνια
Démographie des Balkans Balkan Demographic Papers

Réseau Démobalk

Δίκτυο Démobalk

Demobalk Network

IS THERE A BASIS FOR IMPLEMENTING A FAMILY PLANNING PROGRAM IN KOSOVO AND METOHIJA?

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The transition of fertility in Kosovo and Metohija took place late and is spreading at a slow pace. Although there are indications that the transition began during the 1920s and 1930s, recent data show that, even if it began during the 1930s, it was suspended and returned to the pre-transition level until the late 1960s. The years to follow were characterized by a slow decline in fertility. Today, despite an indisputable fall in the total fertility rate in the region, the rate of change and the value of a little over 3.00, as is anticipated, are unfavorable. First of all, the rate is still high, so that its level enables a relatively long period of fast population growth. Moreover, it is at least twice as high as in other regions in Yugoslavia and the highest in Europe.

We have little information about family planning in Kosovo and Metohija. The complex deterministic system of high reproduction norms and obstacles to the promotion of family planning has not been studied in a systematic and interdisciplinary way. Our knowledge about the reproduction and replacement of the population in Kosovo and Metohija is based almost exclusively on the census records (the last census for the whole region was conducted in 1981), vital statistics (reliable data are available up to 1989 inclusive), two representative surveys (conducted in 1970 and 1976) and a number of scientific papers which are based on the above sources or partial data. This fact already shows clearly that the available data and, thus, our knowledge are insufficient, especially because both surveys were mostly general in character.

The dual model of reproduction norms implying numerous variants as well as the fact that the average number of children per family in Kosovo and Metohija is higher than what would be considered ideal, points to the collective impact of two types of factors, the modern and the traditional ones. Namely, although this region recorded a considerable social and economic development, it was slowed down to a great extent by the demographic factor, too. In addition, research shows that, in comparison with other regions in Yugoslavia, the indicators of the levels of economic development and education of the population have crossed that threshold which should have encouraged a faster change in fertility. So, the net reproduction rate in Montenegro was lower by about 25% than that in Kosovo and Metohija, the level of economic development being equal. At the same time, in Vojvodina and Central Serbia this rate was lower by about 50% (Matkovic, 1994). These results confirm the great significance of sociological, anthropological and cultural factors, and possibly those with political contents, at the deterministic basis of fertility in this region.

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There is no doubt that the persistence of traditional customs and institutions, which co-exist with modern consciousness and modern social processes, contributes to the declining influence of social and economic development on fertility. Conservative consciousness and traditional reproduction norms exert a very effective influence due to the subordinated status and role of woman in the family, pressure exerted by the authority in the family and local public opinion, despite the fact that the basic traditional motives for high fertility have lost their significance. These include high infant and child mortality and the economic significance of a large number of children in rural households. Thus, forcing her to be dependent on a man, imposing parenthood as her only role in life, as well as the restriction of her autonomy and mobility are the major elements of the status of a woman, which contribute to high fertility.

The strong influence of traditional institutions is shown clearly by a high share of illegitimate births (12.8% in 1989). Namely, a part of the Albanian population practices only common-law marriage, which is recognized by the local Islamic community, thus ignoring the law on the equalization of male and female descendants in their hereditary right. The other example includes the views of women on the size of the family. In the early 1970s already, their ideal and desirable number of children was smaller than the actual number of children (Todorovic, 1976/1977).

In contrast to other regions, there are considerable differences in fertility among social groups in Kosovo and Metohija. The avant-garde role in the adoption of a modern type of reproduction is played by higher social strata, urban population and more educated and economically independent women. However, the share of these social groups is low and has no greater influence on the fertility level.

In addition to a social one, there is also an ethnic differentiation of fertility. The Albanian, Muslim and Turkish population is characterized by higher fertility than other population groups in the region. The interdependence of social and economic development and a change in fertility is related to its reflection through the consciousness and customs of ethnic groups, differing in their traits and openness to change. The implicit explanation is that Muslim culture contains the elements that prevent a fall in fertility, even if many development conditions have been met. One of the possible explanations should be sought in the fact that contradictory and regressive reactions of the population occur when the modernization process is not initiated by a community's system, but penetrates from outside.

The case of Kosovo and Metohija points to the significance of changing reproductive consciousness on an individual level, as well as on the level of efficient social institutions. Namely, a change in the demographic regime is not only the inevitable result of modernization, but also a social option in the process of modernization, since the way to prepare a society for changes conducive to modernization is to gain control over fertility (Livi Bacci, 1984). However, the social and economic development of Kosovo and Metohija was not accompanied by a family planning programme, which would support the ambiguous, insufficiently developed and suppressed ideas about a small family and, would prepare the population for faster modernization.

Is there a basis for implementing the family planning programme or, in other words, for speeding up the transition of the fertility in Kosovo and Metohija? In February 1998, the Demographic Research Centre conducted a pilot survey based on the sample of 116 women from the major ethnic groups, who delivered their children at the Clinic-Hospital Centre in Priština, General Hospital in Prizren and the out-patient maternity home at Suva Reka. Despite the methodological restrictions of this sample relating to the size and choice of the observed units, it should be noted that the satisfactory structure of the basic social and demographic characteristics of the respondents was obtained by making a comparison with vital statistics for 1989 and 1994. In that sense, the processing of the data collected by the survey can have an exploratory character.

The interview was conducted one day after delivery in the mother's native language. It was based on the questionnaire, which contained open and confidential questions. Many of them are relevant to population policy, because they enable the evaluation of the elements of its basis or, in other words, the pace in the implementation of specific measures consistent with the development level of women's needs in the reproductive behavior of a specific population.

- 1) The long-standing trend of fast population growth is a clear demographic problem of Kosovo and Metohija and an underlying reason for the limiting influence of the demographic factor on social and economic development. However, the majority of the respondents is not informed about the population trend in this region over the past decades. More than a half of them (54.3%) answered to this question with "I do not know"; 6% holds that the number of inhabitants is constant in time, and 4.3% even believes that it is declining. Only every third respondent (35.3%) was familiar with the actual population trend in Kosovo and Metohija.
- 2) Apart from showing that the women are not informed about the demographic factor, this study has consistently pointed out that there is no awareness of population problems, let alone widespread sensitivity to them. Thus, almost every second woman (47.4%) regards the expected increase in the number of inhabitants in Kosovo and Metohija in the near future as acceptable. Every fifth respondent (19.8%) was neutral in that respect, while every fourth woman (25.0%) does not know how to evaluate this population trend. Only nine women (7.8%) consider the inevitable population growth in the future as unacceptable.
- 3) Insensitivity to population problems is also displayed by the low ranking of population policy in the sphere of fertility on the scale of social priorities. Every second woman regards a decrease in the number of births as a very important (24.1%) or important (25.0%) social issue that should be resolved. In the list of problems, only the status of old people and care for them were regarded by the respondents as an important issue to a somewhat lesser degree (41.4%). Only a decrease in the number of births is noticeably preceded by the priorities that clearly require economic support, i.e. the solving of poverty and housing problems, health and education problems which, apart from investments, may anticipate a change of the political situation, or the improvement of the status of women in the family and society, or the struggle against crime, which anticipate a change of the overall social climate. The mentioned aims are

regarded by 80% of the respondents as very important or important priorities that need intervention (except from the problem of crime, where their share is somewhat lower, 71.6%).

- 4) In evaluating the importance of specific life values, the respondents were almost unanimous in considering a happy family life as a very important value (94.0%), while none of them stated that it was unimportant. Likewise, satisfaction with one's life was considered by 79.3% of the respondents as a very important value, while only 1.7% considered it to be unimportant. Since these values are both traditional and modern, the prevalence of a specified value profile could not be revealed. However, the views specific for a modern value profile were largely evaluated as unimportant. Thus, 49.1% of the respondents holds that it is not important to be employed and the same view is held by 45.7% of them regarding the sharing of the housework and care for children with their husbands. The fact that this value profile is characterized by the essential traditional elements is also proved by a greater agreement on the way of life which is based on one's religious norms (this value is considered by 69.2% of the respondents as very important and only by 6.9% as unimportant) than on the aspiration to have enough money (which is very important for 44.8% of the respondents each and indifferent for 10.3%).
- 5) The prevalent influence of traditional elements on the value system of the respondents is also confirmed by their answers concerning the number of children with which it would be possible to acquire the values considered by them as very important or insignificant. Namely, they opt mostly for three or four children regardless of the value in question. However, some specifics can still be observed. So, the respondents' hold that their employment anticipates the least number of children - 2.8 on the average, as contrasted to living according to one's religious norms, which anticipates the greatest number of children - 3.7 on the average.
- 6) The respondents display a significant absence of differentiation in the choice of values that are linked to children and are characteristic in making a distinction between the traditional and modern motivation basis of parenthood. On the one hand, the respondents fully agree with the views concerning individual psychological (emotional) values. Thus, even 96.6% agrees with the view that they could not be happy without children and 80.2% with the view that they are never lonely with children, the opposite views are held by only 1.7% and 3.4% of the respondents respectively. Still, there is also a significant degree of acceptance of the views which point to a fatalistic attitude toward children, utility values and the responsibility to one's family group. Thus, the view about children as God's will is absolutely acceptable for 78.2% and non-acceptable for only 9.5% of the respondents; 63.8% agrees with the expectations that the children will be their support in old age, and only 6% has an opposite view. Most of them agree with the views that the help of their children is needed for work in the home or in the farm and that they have an obligation towards their husband's family to have children (57.8% and 65.5% respectively). In comparison with other views, there is a somewhat higher share of the respondents expressing their disagreement (18.1% and 21.6% respectively). The highest and somewhat more significant degree of non-acceptance was recorded with respect to the

view on the obligation of childbearing towards one's own people (40.5%), which points to a more significant transition of the traditional understanding of the social community as a biological category.

- 7) In accordance with the assessments of universal life values and the values linked to the birth of children, the majority of the respondents (37.1%) regard the family with three children as ideal. They are followed by the respondents regarding the family with four children as ideal (24.1%), and there is also an almost equal number of those who regard the model with two children as ideal (21.5%). In answering the question concerning the ideal number of children, none of the respondents opted for one child; 4.3% opted for more than five children and 14.9% could not define their view on this issue. On the average, the ideal number of children for the respondents who gave a numerical answer is 3.2.
- 8) The average ideal number of children of 3.2, which was given by the respondents, is higher than the actual number of children per respondent on the average, i.e. 2.9. However, with their answers to the question how many more children they wish to have, the respondents have shown that their intended reproductive behavior will not be consistent with the expressed norm. Namely, they want to have a greater number of children than the ideal one: the average expected number of children is 3.6, because the respondents intend to have more children, i.e. 0.7 on the average.
- 9) Out of the total number of the respondents, 41.4% do not wish to have any more children, while 12.1% could not give a definite answer to this question. The most frequent reason is that they already have enough children (51.6%). The majority of the respondents with five or more children (82.4%) do not wish to have any more children; such an answer was given by 50.0% of the respondents with three or four children, while the smallest number of women who do not wish to have any more children is among the respondents with one or two children, 24.6%. In the list of reasons, social and economic reasons (21%) were followed by health reasons (11.3%) and others (3.2%).
- 10) The practice of family planning in modern society refers not only to the number of children that will be born, but also to significant changes in birth planning and actual births during the reproductive period. The study of these elements shows that the majority of respondents accept modern characteristics. Namely, more than one-third of the respondents (37.3%) among those who stated that they would have more children or gave an ambiguous answer (a total of 67 respondents) wishes to finish with reproduction up to 30 years of age, and 35.8% in the age of 31-35 years. Only 4 respondents (6.0%) opted for the age between 36 and 40; two respondents hold that they will bear children as long as they can, without setting the age limit, while 19.1% had no point of view. Likewise, 51.5% of the respondents plans an interval of 2 to 4 years, to which one should add 8.8% of the respondents planning an interval of 4 or more years. Other respondents regarded shorter intervals as desirable, which are characteristic of a more

traditional form of reproductive behavior, while 23.5% opts for an interval of one to two years, and 4.4% for an interval of up to one year.

- 11) Seriousness in the approach to family planning is reflected in the practice of applying adequate and reliable contraceptive methods and the steadiness of decisions. Therefore, the respondents, who had expressed their wish not to have any more children, or who had displayed uncertainty about childbearing in the future, were asked what they would do in the case of pregnancy. The majority of them (out of a total of 63) answered that they would deliver a child (53.2%), thus confirming the prevalence of traditional rationality in the approach to family planning, which is characterized by passivity and inertness; 17.7% of the respondents would probably opt for an abortion, while 29.0% would certainly opt for this solution.
- 12) The necessary psychosocial variable for the acceptance of contraception, as well as for its continuous and efficient practicing is the knowledge concerning birth control. Without entering into a more detailed analysis of the level of this knowledge, since the population has little experience with contraception, only the picture concerning the familiarization of women with contraceptive methods and devices was provided. Almost all women (94.8%) are familiar with coitus interruptus as a kind of prevention against pregnancy. This confirms the inclusion of coitus interruptus in the value system. Likewise, a large number of women heard about modern contraceptives. So, 88.8% of women knows about the IUD and two-thirds (71.6%) about pills. A much smaller number of women heard about classical methods of contraception. Only every second woman (55.2%) heard about the rhythm method, which is spread in open populations as part of collective experience. This study also confirmed the results obtained in a number of traditional communities that women are poorly informed about the existence of the condom. Namely, every second woman has heard about the condom (50.9%), although there is a rather intensive media promotion of this device in AIDS control. There is an even smaller number of women who has heard about spermicides (26.8%). Only every fourth woman (23.3%) has heard about the diaphragm. It is important to note that the majority of women is open to new knowledge about contraception (75%).
- 13) The extent to which there is an actual need for new knowledge about contraception is also shown by the results concerning the women's attitude towards the application of contraceptives in the future. Namely, the great majority of women (92.2%) wishes to protect themselves from an undesirable pregnancy in the future by applying a contraceptive method or device. However, the choice of the birth control method in terms of efficiency is most frequently wrong. Reliance on coitus interruptus, the rhythm method or their combination is prevalent in the future plans (coitus interruptus 58.9%, the rhythm method 3.7% and the combination of coitus interruptus and the rhythm method 4.7%). A little more than one-fourth of the respondents (27.1%) wishes to prevent an undesirable pregnancy in the future by applying an efficient and modern contraceptive, whereby 86.2% prefers the IUD and only 13.8% opted for pills.

- 14) The question concerning the approach of men to contraception is of such a nature that it should have to be posed to them personally. Being unable to do that, we tried indirectly, through the respondents, to learn about the views of their husbands on this issue. A little more than two-fifths of the respondents (41.4%) stated that they did not talk about contraception with their husbands. Considering other answers, a failure to initiate or accept the talk about such an important issue is, above all, the projection of the clear decision of their partners. Namely, every second woman (52.6%) talked with her husband about contraception, but he considered it to be “his problem”. Five respondents (4.3%) stated that their husbands directly resisted the application of methods and devices. Only one woman said that her husband considered that prevention against pregnancy should be her problem, while one respondent said that her partner was indifferent towards the application of contraceptives.
- 15) The total psychological burden with an abortion is almost twice as heavy as the total psychological burden with contraception. Within the scope of this summary, it should also be noted that the components of a psychological burden differ in importance. The harmful effect on health and the experience of an induced abortion (whether expected or actual) as something unpleasant have a much greater influence on the formation of a psychological burden with an abortion. The religious component holds the third place. Complicated application and experiencing an abortion as the cause of conflict with the partner are the components of a lower psychological value. On the other hand, the harmful effect on health is a much more significant component, which exerts influence on the formation of a psychological burden with contraception. The sequence of other components is as follows: “unpleasant experience”, religious dilemma over this option, conflict with the partner and, finally, complicated application.
- 16) Only two-thirds of the respondents (66.3%) have had a live birth as the only result of conception in their reproductive history. Almost one-fourth of women have had an experience with a spontaneous abortion and/or stillbirth. Also, two women (1.7%) mentioned both spontaneous and induced abortions in their reproductive history. The remaining 7.8% of women mentioned a live birth and induced abortion as the results of all conceptions.
- 17) Almost every third woman (31.6%) was pregnant for the first time before 19 years of age. However, the behavior of the majority of the respondents is different. Namely, almost every second woman (49.1%) had her first pregnancy between 20 and 25 years of age. Even every fifth woman (19.3%) had her first pregnancy after 25 years of age. Bearing in mind these results, it can be concluded that a rise in the average age of women at the time of their first pregnancy is becoming the characteristic of population fertility in Kosovo and Metohija. The analysis of the respondents’ reproductive history shows that the average interval between successive pregnancies is most frequently short. For about 80.0% of women, the average interval between two pregnancies is shorter than three years (46.1% up to 24 months and 35.3% between 25 months and 3 years).

- 18) Every eighth woman (12.1%) experienced the death of her infant or child in the first years of age. Four respondents experienced the death of even two children and one the death of three. Infant and child deaths are frequently the result of the applied reproductive model.
- 19) Every tenth respondent (9.5%) has had an experience with an induced abortion. Only one woman had two induced abortions in her reproductive history. About 60% of induced abortions took place in the first trimester of pregnancy. At the time of the abortion, seven out of eleven women had already one or two children. Only one woman terminated her first pregnancy.
- 20) Research shows that an induced abortion is the result of one's option for an abortion as a form of birth control, or the prevention of pregnancy by inefficient contraception. Namely, every second woman did not even try to prevent pregnancy that had to be intentionally terminated. Coitus interruptus was almost the only contraception method. Only one pregnancy was the result of an inefficient IUD.
- 21) Coitus interruptus prevails in the structure of the applied methods and devices. Every second respondent (50.9%) has had an experience with this kind of birth control. One-third (35.6%) relies occasionally on this inefficient method, while the rest of them regards it as a long-standing choice – it was practiced for more than a year-. According to the frequency with which it was mentioned, the IUD holds the second place. Every fourteenth woman (6.9%) applied the IUD. As a rule, experience with this contraceptive device is also a long-term one. It was used 1-3 years (37.5% of women) or over three years (every second woman). Experiences with other contraceptive devices and methods are rare. Thus, only every twentieth woman (5.2%) mentioned the rhythm method. Only 2.6% used pills. An insignificant number of women has had an experience with the condom (3.4%) and spermicides (0.9%). Not one woman mentioned using the diaphragm.

An analysis of these results points not only to the prevalence of the traditional reproductive behavior and status of women, but also to the process of their transformation. A higher degree of modification and breaking of the traditional frame is also observed in the case of value judgments and desirable situations. However, as far as value judgments are concerned, one can observe differences in the degree of openness to change, which are much more evident in more general views than in the views concerning the elements which are close to the respondents' experience in life. Naturally, this also contributes to a specified degree of inconsistency and ambivalence in the answers of the respondents, which is characteristic of transition situations and is also inevitably reflected in contradictions in their behavior.

Thus, on the one hand, over 80% of the respondents recognizes the significance of changing the social status of women as the social aim that should be pursued. On the other hand, almost one half of the respondents regards their employment status or sharing the housework or care for children with their husbands as insignificant. One can also observe contradictions in the views on reproduction and in reproductive behavior. This is especially reflected in the fact that the majority

of the respondents will have more children than would be ideal in their opinion. This points to their submission to the inertia of the prevalent behavior, under conditions of a slow change of the woman's traditional status in the family, determined largely by her reproductive function or, in other words, to a painstaking and slow penetration of critical consciousness into the perception of one's own status.

The very norm of an ideal number of children is still relatively high and determined by the characteristics of the motivation basis of parenthood. Thus, one can observe the presence of traditional elements, relatively low level of the perception of the economic and psychological cost of a child and a considerable significance of the economic value of a child in a utilitarian sense. However, one can observe a slow movement towards attributing greater importance to individual psychological values. Since they are also a component of the traditional motivation basis of parenthood, they are still predominantly in the service of rationalization of the birth of a greater number of children due to the prevalence of other factors.

Since changes in reproductive behavior concern not only the number of children that will be born, but also the birth dynamics during the reproductive period or, in other words, the practice of family planning, one can also observe a discrepancy in the behavior and views in this respect. Thus, despite the dissemination of information on efficient and modern contraceptives, as well as a significant degree of openness to new contraceptive knowledge and the wish to practice contraception in the future or, in other words, not to have any more children, one can observe the prevalence of the traditional form of birth control, coitus interruptus, both empirically and normatively. Naturally, this confirms the deep-rooted subordinate status of a woman and her submission to the will of her husband in all spheres of decision-making and activity. Therefore, the respondents were divided into two almost equal groups, i.e. those who do not speak about contraception with their husbands and those who do but accept the husband's view that it is his business. As a result, there is a marked discrepancy between the norms of the desirable inter-birth interval and the hitherto experience, as well as a high probability that they will have more children in the case of unplanned pregnancy despite their decision to terminate childbearing. Remaining in the closed circle of an inability to plan one's own family contributes to a still higher share of spontaneous abortions and stillbirths.

However, one should point to significant shifts in relation to the traditional type of behavior. First, the process of transformation of the relevant views and the level of information was consistently in all dimensions under consideration (life values, children, contraception). This confirms the correctness of the transition of fertility, that is, the prevalence of transformation of views as a vital prerequisite for a change of behavior. Likewise, a comparison of the value of an ideal number of children and its ratio to the expected number of children (since it was not possible to follow the actual number of children at the end of the reproductive period) obtained by a pilot survey with the results of previous studies, points out that the observed process of transformation of the normative sphere is accompanied to a greater extent by changes in reproductive behavior, that is, by readiness to do that. This points indirectly to a more significant degree of openness to change, which can also

be encouraged. Namely, in the earlier studies (1970 and 1976), the ideal number of children was considerably lower than the actual one at the end of the reproductive period by more than two children, while in this research the difference of the whole sample is 0.4.

In this regard, it should be noted that almost every third woman with two children and about 40% of women with three children do not wish to have any more children, primarily because, in their view, they have enough children. This confirms the increasing need for family planning. Likewise, almost one-third of the respondents wish to prevent an undesirable pregnancy in the future by applying efficient and modern contraceptives (over 85% prefers the IUD). Considering the fact that over 90% of the respondents intends to practice contraception in the future, the data on a substantial psychological burden with contraception, which is twice as low as the burden with an abortion, are relevant for perceiving the certainty of such behavior.

It is evident that the respondents with defined attitudes experience contraception as the proper solution of their dilemma over the kind of birth control. This study points out that the dissemination of knowledge, supported with medical arguments concerning the actual effect of modern contraceptive devices and methods, should be an important component of a family planning programme. First, as a clear potential for the further reduction in the psychological cost of contraception by changing the view that every form of contraception is harmful to health and unpleasant. Second, as a basis for the formation of correct views, bearing in mind that a large number of women has no attitude on it at all (between 15 and 34 women, depending on the observed component of the psychological cost). Third, coitus interruptus is a preventive measure applied by the majority of women. As a rule, their experience is a long-standing one and this contraceptive method is most frequently included in the future plans of women. A large number of men also opts for coitus interruptus as a form of birth control.

The achieved results are a confirmation of the extent to which the woman needs some advice on birth control immediately after delivery. Most of the respondents recognize the need for prevention against an undesirable pregnancy. Thus, women should talk with a doctor about all relevant issues before becoming passive and entering the cycle of waiting, submission and fatalism, or taking the wrong road by relying on inefficient contraceptive methods. This is especially so, because one must expect slow changes in the sexual education and views of their partners.

The need for a specific family planning programme is also confirmed by the fact that every second respondent considers a reduction in the number of births as a very important or simple important social issue that should be resolved. In a demographic sense, the existence of the need for changing the status of women in Kosovo and Metohija is important. The need for changing the status of women – regardless of whether an individual identification of that need means the beginning of active or even passive resistance – is certainly one of the preconditions for a change in woman's reproductive behavior, involving a more intensive limitation of births. Therefore, the implementation of the family planning programme – which would take women out of a defensive position, promote their responsibility and encourage them to communicate with their partners,

while at the same time presenting new ideas and roles in modern culture - would not only be meaningful but would also be given full support.

The fact that the respondents are inadequately informed about the demographic situation in Kosovo and Metohija, as well as their inability to evaluate the population trend are less significant, because in all populations – regardless of reproductive behavior – there is a noticeable discrepancy in understanding and observing the interrelationship and interdependence of the number of births at the macro-social and micro-individual levels. An individual does not sufficiently understand the interrelationships of fertility, numerous social and economic functions of the population, region development as a whole and of individual behavior. Hence there is a scope for population education. However, in relation to an individual perception and evaluation of the increasing population trend, there is a clear shift towards recognizing an excessive number of births as a social problem.

All these findings point to a gradual formation of a positive basis as an essential element of the demographic climate for implementing the family planning programme and other adequate measures of population policy. On the one hand, this would facilitate the satisfaction of the existing needs and would speed up the process of their transformation in the sphere of women's reproductive behavior and status, especially thanks to the accompanying educational facilities. In other words, in accordance with the established development level of the respondents' needs, there is a most urgent need for implementing the family planning programme which would also speed up the transformation of the economic and psychological costs of parenthood as well as the social role of a woman, thus enhancing the significance of other population policy measures.

Bibliography:

BARDWICK, Judith (1971). *Psychology of Woman*, New York: Harper and Row.

BLAGOJEVIC, Marina (1995). "Svakodnevnica iz zenske perspektive: samozrtvovanje i beg u privatnost" ["Daily Routine from a Woman's Viewpoint: Self-sacrifice and the Flight to Privacy"], Bolcic (ed.) *Drustvene promene i svakodnevni zivot: Srbija pocetkom devedesetih*, Beograd: Institut za socioloska istrazivanja Filozofskog fakulteta.

BONGAARTS, John (1991). "The KAP-Gap and the Unmet Need for Contra-ception", *The Population Council, Working Papers*, New York, Number 23.

BREZNIK, Dusan (ed.) (1980). *Fertility and Family Planning in Yugoslavia*, Belgrade: Demographic Research Centre - Institute of Social Sciences.

BULATAO, Rodolfo (1980). "The transition in the Value of Children and the Fertility Transition", Hohn Charlotte & Rainer Meckensen (eds.) *Determinants of Fertility Trends, Theories Re-Examined*, Liege: IUSSP, Ordina Editions.

CLELAND, Johan & Chris SCOTT (1987). *World Fertility Survey*, International Statistical Institute, Oxford University Press.

- CLIQUET, Robert & R. SCHOENMAECKERS (1976). *From Incidental to Planned Parenthood*, Leiden: Interuniversity Demographic Institute, Population and Family Study Centre.
- COALE, Ansley (1967). "The Voluntary Control of Human Fertility", *Proceedings of the American Philosophical Society*, Vol. 11, No. 3.
- EISENSTANDT, Samuel (1973) *Tradition, Change and Modernity*, New York University Press.
- FAWCETT, James (1970). *Psychology and Population*, New York :The Population Council.
- GIDDENS, Antony (1991). *Modernity and Self-Identity: Self and Society in the Late Modern Age*, Cambridge: Polity.
- HODZIC, A. (1986). "Vrednosne orijentacije društvenih grupa" ["Value Orientations of Social Groups"], *Revija za sociologiju*,1-4.
- HOHN, Charlotte & Rainer MACKENSEN (ed.) (1980). *Determinants of Fertility Trends: Theories re-examined*, Liege: IUSSP, Ordina editions.
- HOLL, Kelvin & Lindzi GARDNER (1983). *Teorije licnosti*, Beograd: Nolit.
- HUDSON Rosen, Raye (1981). "Pregnancy resolution decisions: A Review and Appraisal of Research", *The Childbearing Decision - Fertility Attitudes and Behavior*, London: Sage Publications.
- INSTITUT ZA NOVIJU ISTORIJU (1994). *Srbija u modernizacijskim procesima* [*Serbia in Modernization Processes*], Beograd: Institut za noviju istoriju.
- KAPOR-STANULOVIC, Nila, (1985). *Psihologija roditeljstva* [The Psychology of Parenthood], Beograd: Nolit.
- LERNER, Daniel (1956). *The Passing of Traditional Society*, The Free Press of Glencoe III.
- LIVI-BACCI, Massimo, (1984) "On the revolution of fertility patterns in Europe", in *Population and societal outlook*, Field, S. & Lestheaghe, R. (eds.), Bruxelles:Agora Demography, Fondation Roi Baudouin.
- MATKOVIC, Gordana (1994) *Demografski cinioci i ponuda radne snage* [*Demographic Factors and Labour Supply*], Beograd: Ekonomski institut.
- McKAY, Jennifer (ed.) (1984). *Adolescent Fertility*, London: IPPF.
- MILIC, Andjelika (ed.) (1988). *Radjanje moderne porodice* [*The Birth of Modern Family*], Beograd: Zavod za udzbenike i nastavna sredstva.
- NAG, Mony (1983). "Fertility Response to Modernization", *Fertility and Family*, Proceedings of the Expert Group on Fertility and Family, New Delhi: United Nations.
- PALOMBA, Rosela & Hein MOORS (1993). *Attitudes towards Family Formation and Population - Related Policies in Europe: A Cross-Cultural Perspectives* (unpublished document).
- PAPIC, Zarana & Lydia SKLEVICKY (eds.) (1983). *Antropologija zene* [*The Anthropology of Woman*], Beograd: Prosveta.
- PARKERS Alan & Jean COLE (ed.) (1979). *Fertility in middle age*, International Planned Parenthood Federation, Cambridge: Galton Foundation.
- POTTS, Malkom (1979). *Society and fertility*, Plymouth: Mcdonald and Evans.
- RABIN, A. (1965). "Motivation for Parenthood", J. Projective Techn. and Personality Assesment, cit. by Kapor-Stanulovic, Nila (1985) *Psihologija roditeljstva* (Beograd: Nolit).

- ROKEACH, Milton (1973). *The Nature of Human Values*, New York: The Free Press; London: Collier Macmillan Publishers.
- RRAPI, Djerdj (1995). *Savremene albanske zadružne porodice na Kosovu [Modern Albanian Extended Families in Kosovo]*, Beograd: Institut za socioloska istrazivanja Filozofskog fakulteta.
- RASEVIC, Mirjana (ed.) (1998). *Zena i radjanje na Kosovu i Metohiji [Woman and Childbearing in Kosovo and Metohija]*, Beograd: Centar za demografska istrazivanja Instituta drustvenih nauka.
- SEGAL, Sheldon, Amy TSUI & Susan ROGERS (ed.) (1989). *Demographic and Programmatic Consequences of Contraceptive Innovations*, New York: Plenum Press.
- TAVES, Ellen (1981). *But why did not she use birth control*, Planned Parenthood of Rochester, New York.
- TIETZE, Sarah & Richard LINCOLN (ed.) (1987). *Fertility Regulation and the Public Health*, New York: Springer-Verlang.
- TODOROVIC, Gordana (1976/977) "Stavovi stanovnistva o velicini porodice i o abortusu" ["*The Views of the Population on the Size of the Family and an Abortion*"], *Stanovnistvo*, 3-4/1-4.
- TRUSSEL, James & Kathryn KOST, (1987). "Contraceptive Failure: A Critical Review of the Literature", *Studies in Family Planning*, Vol. 18, No. 5.