

From demographic transition to sexual revolutions

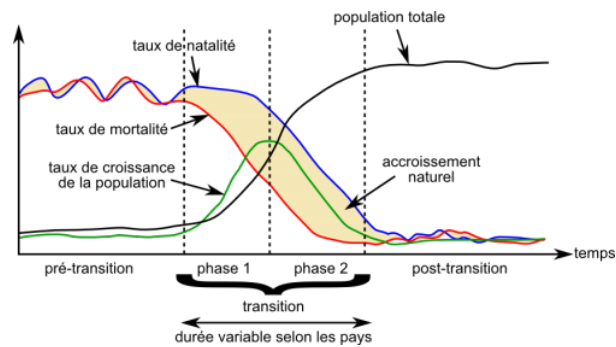
Virginie DE LUCA BARRUSSE

ABSTRACT

Demographic transition has accompanied the transformation of the couple and the family in Europe since the late eighteenth century. The founding element of the family remains marriage, with high marriage rates up to the 1970s, before a decrease in favour of cohabitation. Divorce also became commonplace. Family size shrank and became standardized with the introduction of more effective contraceptive techniques. For all that, norms continue to have considerable influence despite these major evolutions, as demonstrated by opposition to gay marriage, or restrictions to medically-assisted procreation. This resistance to what was called the “sexual revolution” in the late 1960s has instead prompted talk of the modernization of sexuality in the twenty-first century.



Birth control clinic (private archives of Marie Stopes), late 1920.



The demographic transition. Source: Wikimedia Commons <https://goo.gl/6sYoph>



Demonstration for abortion rights in Milan (1975). Source: Wikimedia Commons <https://goo.gl/fqXM07>

The demographic transition: a conceptual framework

The analytical framework for the evolution of populations is that of the demographic transition, which consists of a succession of historic stages:

- the pre-transitional stage (previous demographic model) is marked by a relative balance between high mortality and birth rates. Overall, there are more births than deaths, allowing for a minor increase in population;
- the transitional stage, which takes place in two phases. During the first phase, mortality decreases while the birth rate remains high. The difference between the number of deaths and births increases, which leads to strong natural growth. During the second phase, the birth rate decreases, and the difference between the two rates is

reduced, leading to a lower natural increase;

– the post-transitional stage is marked by a relative balance between low birth and death rates. Overall, births are still higher than deaths, although natural increase, which is still positive, drops to a low level.

Beyond this general framework, the pre- and post-transition birth and death rates, along with more or less steep curves for the rates, vary from one country to another.



The demographic transition. Source: [Wikimedia Commons](#)

In the second half of the eighteenth century, lower death rates spread from Northwestern Europe to Central, Southern, and Eastern Europe, and preceded the decline in the birth rate. As a result, the European population grew from approximately 187 million inhabitants in 1800 to 400 million in 1900, thereby increasing from 22% of the global population to 26%. France was an exception, as the two indicators decreased over the long-term almost simultaneously, considerably limiting demographic growth beginning in the second half of the eighteenth century; this came approximately one hundred years before the rest of Europe, where from 1870 to 1920 the fall in the fertility rate spread from Great Britain to Northern Europe, before extending to Southern and Eastern Europe.

A major evolution of conjugality

In the demographic model of the nineteenth century and Ancien Régime, the founding event of the family was still marriage. Until the early twentieth century, on average only 10% of couples in Western Europe were unmarried. Marriage was therefore the norm, and marriage remained at a high level. It was both a religious and social act which connected two family networks—and even two alliance networks—thereby uniting socially similar individuals. Homogamy remained strong in the nineteenth century, as demonstrated by comparing the social positions of spouses based on the sociodemographic characteristics of their parents. Geographic endogamy decreased during the nineteenth century apace with the transportation revolution. These age-old rules partially endured during the twentieth century, as the choice of a spouse did not entirely break free of networks of alliances and socially determined judgments.

While nuptiality remained high until the early 1970s, it hid a change in the calendar, as the average age of first marriage increased in Europe from 25 to 27.5 years old for men between 1920 and 1970, and from 21 to 24 years old for women. Marriage came later in Western Europe than in Eastern Europe, while the difference in age between spouses decreased. Moreover, beginning in the late nineteenth century the greater value given to sentiment favoured marriages for love rather than marriages of convenience, which nevertheless remained the norm, particularly among better-off social classes. The separation of mismatched couples became conceivable, as states began haltingly to legislate on divorce. In Great Britain, the Matrimonial Causes Act of 1857 made divorce more accessible, while in France the Naquet law of 1884 reestablished divorce, which had been eliminated by the Bourbon Restoration of 1816. It was not well-regarded socially and was seldom requested, and began to increase only during the second half of the twentieth century. Greater recourse to divorce led to more flexible procedures, notably through the introduction of mutual consent in most of Europe. This was the case in the United Kingdom in 1969, Sweden in 1973, Italy and France in 1975 and Portugal in 1977. Since then divorce has become common: in 2014, the divorce rate reached 0.9 per 1,000 in Italy, 1.7 in Poland, 2.5 in the Czech Republic, and 3.4 in Denmark, which has the highest rate in Europe.

From a sexuality of procreation to a sexuality of pleasure

Changes in how marriage was conceived were connected to alterations in sexual behaviour in the context of secularizing societies. The eroticization of conjugality is attested to by less observance of the Christian liturgical

calendar, sexual practices seeking pleasure rather than procreation, and better regulation of births. Confessors in traditionally Catholic countries were fully aware of this, and were concerned that sexuality would escape their control. Reflection on sexuality increasingly became a matter for the medical world, which defined sexual norms and deviance even before the institutionalization of sexology. The second half of the twentieth century saw the emergence of pedagogical efforts to combat ignorance regarding sexuality. School programs, brochures, books, and extracurricular lectures popularized the functioning of sexuality and reproduction for a young audience. Mentalities changed during this period, as sexuality, which had heretofore been solely procreative, was allowed to be recreational. More publications were explicit regarding sexual pleasure, and sexual harmony was considered a condition of conjugal happiness. Since the 1980s and the spread of the AIDS epidemic, there has been a sharp reorientation, with emphasis being placed on the prevention of sexually transmitted diseases through preventive campaigns.

Towards the uniformization of the family model

Over the course of the nineteenth century, family size in Europe fluctuated in accordance with the arrival of the demographic transition. In Western Europe, women born in 1860 had between 4 and 5 children on average: 4.1 in Sweden, 4.6 in the Netherlands, and 5.1 in Italy. France stood out with barely 3 children per woman. For the generation born in 1900, the indicators shrank to the range of 2-2.5 children per woman, notably in Germany, Belgium, Norway, and France. In this century-long trend of falling fertility, the large majority of Europe experienced an exceptional phase of growth from the mid-1940s to the mid-1960s known as the baby boom. The fertility of women born in 1930 was at the highest level of the century. The indicator varied between 2.9 children in Portugal and Slovakia, 2.6 in France, and 2.1 in Hungary and Germany. Overall, the family model tended to become uniform with two or three children, while the protogenetic interval (between marriage and the first birth) and the intergenetic interval (between each successive child) shrank. In 1965 fertility began to decrease, as the baby boom gave way to the baby bust or generation X, a period characterized by a low birth rate. Couples limited the size of their family, as the number of children per woman in 2015 ranged between 1.3 in Spain, 1.4 in Italy and Hungary, 1.7 in Denmark, and close to 2 in Ireland and France.

However relevant they may be in revealing this increasingly uniform model, these indicators say nothing about the conditions and methods used to regulate births; these regulations should be examined to understand how individuals have sought to control family size since the mid-eighteenth century.

The gradual regulation of births

A distinction is generally made between two approaches to regulating births. The first aims to prevent an additional birth once the desired number of children is reached, in the form of permanent contraception, which prevailed during the century of the Enlightenment and continued during the nineteenth century. During the twentieth and twenty-first centuries, this came later, a reflection of rising life expectancy, later menopause age, life choices delaying the birth of the first child, and advances in medically-assisted procreation. The second approach consists of spacing out births through temporary contraception, which led to an extension of intergenetic intervals beginning in the second half of the nineteenth century.

Aside from abstinence and limiting sexual relations—in particular to periods often incorrectly deemed as being infertile—the most widespread albeit unreliable practice for controlling family size was withdrawal (*coitus interruptus*). Women supplemented this masculine practice by taking decoctions or undergoing various procedures or injections, so many “remedies” which were often as ineffective as they were dangerous. A better understanding of menstrual cycles was behind the claims to success made for the method developed by the gynecologists Kyusaku Ogino (1892-1975) and Hermann Knauss (1892-1972) between 1924 and 1929. Despite its limited reliability, the method was accepted by Pope Pius XII in 1951 as the only way of limiting the number of births. The

use of condoms began to spread in the eighteenth century (the term was mentioned by the English magazine *Tatler* in 1709), although they remained expensive. The First World War helped spread them to millions of soldiers, and their price began to fall during the interwar period. In Germany for example, they could be purchased cheaply in vending machines in 1928. Whatever their effectiveness, these practices reflected a desire to control procreation, and in the twentieth century justified medical research that led to the invention of the contraceptive pill in 1951.

The inadequacy of preventive methods resulted in secret abortions, despite the fact that they were dangerous and illegal until the 1970s in most European countries (except for Bolshevik Russia and later the Soviet Union from 1920 to 1936). The secret practice of abortion on a massive scale endangered the lives of many women. The observations of doctors who sometimes noted the death of female patients after an abortion say a great deal about the suffering endured by women, while the abandonment of newborn babies reflects a refusal of undesired children. This was often the act of single women who were the object of public disgrace. It was particularly widespread between 1750 and 1900, when numerous hospitals had foundling wheels (France, Germany, Italy, Spain, Belgium, the United Kingdom, Portugal) to anonymously welcome these newborn babies. Finally, infanticide should not be underestimated. Whether considered as an aggravated circumstance of homicide punishable by death, as it was in France in the sixteenth century (the edict of King Henry II in 1556), or on the contrary the subject of relative indulgence by courts during the nineteenth century, the number of women brought before the courts during this long period numbers in the tens of thousands, for the most part young and single. Beginning in the twentieth century, the effects of education and urbanization, along with reduced social rejection of single mothers and advances in new contraceptive methods, sharply reduced these two practices, but without eliminating them altogether.

During the first half of the twentieth century, fearing a decline that would lead to the disappearance of nations through “depopulation,” pro-natalist and anti-Malthusian policies were adopted. France and Belgium passed laws to this effect. The French law of 1920 considered abortion a crime, and cracked down on “the provocation to abortion and anticonceptual propaganda.” Conversely, in order to limit the fertility of the working classes, England, Germany, the Netherlands, Norway, and Sweden authorized during the interwar period the setting up of “birth control” clinics to accompany couples, and essentially women, in the management of their fertility. They provided sorely-lacking sexual information, along with contraceptive advice.

Eugenics was being debated in Europe during the interwar period. Pushed to the extreme by Nazi Germany, in 1934 it resulted in the forced sterilization of approximately 400,000 people (the ill and mentally deficient), and served as a tool for the racial policies of the Third Reich. Eugenic laws were also adopted by Denmark in 1929, Norway in 1934, Sweden and Finland in 1935, and Estonia in 1937. In Sweden, nearly 60,000 women considered to be deficient or unable to take care of their children were sterilized between 1935 and 1975. These laws were abolished during the 1970s: in Denmark in 1967 and 1973, Finland in 1970, Sweden in 1975 and Norway in 1977. In 2000, the Charter of Fundamental Rights of the European Union banned eugenic practices seeking to select between people.

Struggles surrounding procreation

Formulated before the Great War by a minority of radical women such as Madeleine Pelletier (1874-1939), demands for access to contraception—and even the right to an abortion—began to be asserted from the mid-1950s. Control over fertility was demanded by associations such as *Maternité heureuse* [Happy Motherhood], which was created in France in 1956. Its name-change in 1960 to *Planning familial* [Family Planning] clearly indicates its objective, and reflected a feminist ideological turning point. A similar spirit drove the members of *l'Unione delle donne* founded in Italy in 1945: the director of the association's newspaper, Giuliana dal Pozzo (1922-2013), launched the slogan “Quanti ne vogliamo quando li vogliamo” (“however many we want, whenever

we want”) in 1956. These male and female militants, who were soon joined by sexologists, demanded respect for the desire to have a child, freedom over one’s body, and the right to pleasure dissociated from procreation. These demands prevailed according to differing chronologies. The contraceptive pill was authorized in the FRG and the United Kingdom in 1961 and in the GDR and France in 1967 (although the decree applying it did not take effect until 1972). Abortion was authorized first in a very controlled manner for medical reasons, as in Sweden in 1938, or Denmark in 1939. It was more broadly legalized during the second half of the twentieth century under pressure from second-wave feminism to end the appalling effects of secret practices, initially in Eastern Europe during the 1950s (Hungary in 1953 and Romania in 1957, and later the GDR in 1972) and then in the West in Great Britain in 1967, Denmark in 1973, France in 1975 and Norway in 1978. In 2017 it remains forbidden in Ireland, and is limited to cases of rape or malformation in Poland. On the local level there was resistance to women who sought abortions, notably on the part of doctors declaring themselves to be conscientious objectors.

Beginning in the 1990s, the right to refuse a child was accompanied by demands for the right to medical assistance to have one. Alongside legislation that regulated adoption, medically assisted procreation (MAP) was increasingly offered to couples unable to satisfy their desire to have a child. For instance, children born with the help of MAP represented 2.9% of births in France in 2012. Some countries authorize it for female couples, notably Spain, Great Britain, and the Nordic countries. Gestational surrogacy—recourse to a surrogate mother—is either forbidden (France, Germany, Spain, Switzerland), or authorized for altruistic or lucrative ends (Great Britain, Romania, Russia).

The persistent weight of norms

At the end of the baby boom in the 1960s, sexuality burst into the public sphere with such force that one could speak of “sexual revolution(s).” Demands became more pressing and visible during the 1970s. The intensity of the phenomenon made it a genuine “popular myth.” However, from a demographic perspective, instead of a sexual revolution that suddenly overthrew the established social order, this period was the result of a long and complex process of the “gradual modernization of sexuality.”

Whether one calls it a sexual revolution or not, the modernization of sexuality did not break all taboos, prejudices, and social norms. With regard to procreation, resistance to abortion has not totally disappeared in Europe. For instance, in 2016 Poland stood out by seeking to make all abortion illegal, an attempt which proved to be in vain due to the mobilization of women. Still, the size and constitution of the family are still subject to normative pressure. Having too many or no children, or having them too early or late, lead to forms of social reprobation. The techniques of medically assisted procreation impose intrusive control over the intimacy of couples.

Finally, the heterosexual norm still resists change despite softening stances on the matter, as demonstrated by the vivacity of lesbian, gay, bisexual, transsexual, and queer (LGBTQ) movements, notably since the question of gay marriage spread across Europe in the late twentieth century. The Danes were the first to authorize the contracting of a union between people of the same gender in 1989, followed by the Dutch in 2001. However, these reforms sometimes prompted strong resistance driven by religious and/or political convictions. Despite very strong opposition, “marriage for all” was finally allowed in France in 2013, and the list of countries authorizing it in Western Europe continues to grow. Elsewhere, there is sometimes a preference to postpone the debate, and to institute in place of marriage the recognition of a form of partnership between people of the same sex, as in Germany in 2001, Greece in 2015, or Italy in 2016. In 2017, 13 European countries recognize gay marriage, and 25 recognize civil unions.

BIBLIOGRAPHY

BEAUTHIER, Régine, PIETTE, Valérie, TRUFFIN, Barbara, *La modernisation de la sexualité (xix^e-xx^e siècles)* (Brussels: Éditions de l'Université de Bruxelles, 2010).

EDER, Franz, HALL, Lesley, HEKMA, Gert, *Sexual Cultures in Europe*, volume 1, *National Histories*; volume 2, *Themes in Sexuality* (Manchester: Manchester University Press, 1999).

MCLAREN, Angus, *Twentieth Century Sexuality : A History* (Oxford: Blackwell, 1999).

MONNIER, Alain, *Démographie contemporaine de l'Europe. Évolutions, tendances, défis* (Paris: Armand Colin, 2006).

SHORTER, Edward, *La naissance de la famille moderne* (Paris: Seuil, 1977).

BURGUIÈRE, André, KLAPISCH-ZUBER, Christiane, SEGALIN, Martine, ZONABEND, Françoise, *Histoire de la famille*, Paris, Armand Colin, 1986.

Source URL:

<https://ehne.fr/encyclopedia/themes/gender-and-europe/demographic-transition-sexual-revolutions/demographic-transition-sexual-revolutions>