Research on fertility desire and influencing factors of women of childbearing age based on Bongaarts's low fertility theory model

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Keywords: comprehensive three children, women of childbearing age, fertility desire, influencing factors

Abstract: OBJECTIVE: To explore the influencing factors of fertility desire of women of childbearing age under the background of universal three-child policy, and put forward suggestions and countermeasures to improve fertility rate. METHODS: A total of 1352 women of childbearing age aged 15-49 years in the 2018 China General Social Survey (CGSS) data were selected. Descriptive statistics and multiple linear regression models were used to analyze the influencing factors of fertility willingness. RESULTS: Different household registrations, different education levels, different income levels, different occupations, different marital status and happiness levels, and ideal child gender have statistically significant effects on fertility attitudes of women of childbearing age (P < 0.05). CONCLUSION: Under the implementation of the ' comprehensive three-child ' policy, the actual number of fertility intentions is higher than the ideal number of births, and the relevant influencing factors are analyzed. The state and society should recognize the development problems brought by the current low fertility level.

1. Introduction

According to the seventh census data of China's National Bureau of Statistics, China's population growth slowed down from 2010 to 2020, with an average annual growth rate of 0.53 %, down 0.04 percentage points from the previous 10 years. In 2020, the total fertility rate of women of childbearing age in China is 1.3, which is already at a low level.^[1]In 2022, China's population experienced its first negative growth in nearly 61 years, and the total fertility rate fell below 1.1. The trend of aging, low birth rate and non-marriage has accelerated, and the fertility accumulation effect has subsided. Some scholars believe that China has fallen into the " low fertility trap " and is shifting from the demographic dividend period to the population burden period. In response to the continued decline in fertility, the state has continuously adjusted and optimized its fertility policy. From ' two children alone ' to ' two children in all ' to ' three children in all ', fertility restrictions have been gradually relaxed, but the expected population explosion has not come because of the encouragement policy. How to fully mobilize the fertility desire of women of childbearing age, so as to improve the fertility level and alleviate the population problem has become a hot topic in academic research.

Women are not only the main body of fertility, but also an important human resource. At present, with the continuous development of higher education, women have gradually become an important force in social development and are active in various workplaces. For professional women, employment and fertility have become an inevitable choice problem because fertility squeezes employment time and space. According to a survey conducted by the Beijing Women's Federation, only 42.8 % of women said they would like to have a second child, 26.4 % said they would not have a second child, and 30.8 % said they did not want to have a second child.^[2]The fertility desire of the second child is still so low. It can be seen that the implementation of the three-child policy at this stage cannot effectively improve the fertility desire of women of childbearing age. In order to

promote the development of China's population, we should not put the policy into practice, grasp the changing trend of fertility desire and fertility behavior of women of childbearing age, and deeply explore the reasons and influencing factors behind it, so as to improve the fertility support policy and create a friendly fertility environment, which is very important in the context of low fertility level.

2. Literature Review

Compared with China, the West faces demographic transition and low fertility earlier, so there has been a lot of literature on the causes and influencing factors of low fertility. However, due to the particularity of China's development path, it is quite different from the West.Western traditional theories cannot fully explain the process, characteristics, internal motivation, external influencing factors and transformation mechanism of China's demographic transition.^[3]In view of the current situation of low fertility level in China, domestic scholars mainly studied the implementation effect of fertility support policy and the driving factors of fertility decline.

2.1 Research on the Implementation Effect of Fertility Policy

At present, there are two main views on the implementation effect of China's fertility policy. First, the fertility policy has not achieved the expected results. Mu Guangzong (2018) believes that the adjustment of fertility policy releases a limited positive effect, but it cannot reverse the endogenous low fertility trend that has quietly formed;^[4]zhong Xiaohua (2016) conducted a study based on the survey data of fertility desire in Guangdong Province, and found that the comprehensive two-child ' policy has a limited impact on the fertility desire of urban ' double non ' couples, and the implementation of the policy may bring the risk of fertility imbalance;^[5]chen Youhua et al. (2021) believe that the fertility accumulation effect caused by the centralized release of the policy potential energy accumulated by the adjustment of fertility policy has long subsided, the effect of the ' comprehensive two-child ' policy is not obvious, and the policy-based compensatory fertility is only temporary.^[6]Second, the birth encouragement policy has achieved remarkable results. Zhai Zhenwu et al. (2014) believed that the universal two-child policy would cause a sharp increase in the annual birth population, and the total fertility rate of women reached about 4.5, which could effectively improve the population structure and alleviate the aging crisis.^[7]Some scholars believe that the effect of the ' comprehensive two-child ' policy cannot be accurately predicted due to the influence of the census data underreporting, but it dispels people's doubts about whether the loose fertility policy will cause fertility accumulation, and provides sufficient experience support for the introduction of the ' comprehensive three-child ' policy.

2.2 Study on the Driving Factors of Fertility Decline

The decline in the trend of low fertility level in China is the result of multiple factors. For economic factors, the decline in fertility rate is the result of macroeconomic development and personal economic pressure. At the macro level, Qian Xuefeng et al. (2014) believe that China's opening to the outside world has spawned the rapid development of labor-intensive industries, which in turn has released a large number of rural surplus labor, and a large number of rural female labor force has begun to enter the labor market, resulting in rural family fertility decisions. Affected, China's fertility rate has declined rapidly;^[8]ji Fujun (2014) found that the impact of economic growth on fertility will change with the degree of economic development through empirical research. In the lower stage of economic development, there is a significant negative correlation between the two, but after the level of economic development reaches a certain level, there will be a U-shaped change;^[9]zhong Shuiying (2022) believes that there is a significant ' anti-J ' relationship between economic development and fertility rate. It is not a "golden rule" that economic growth leads to a decline in fertility.^[10]At the micro level, the increase in childcare costs and housing pressure has become an important factor in the decline in fertility. The economic cost of having children, the cost of education and the time cost of taking care of children are all practical obstacles to family fertility decision-making. Liu Na et al. (2021) found that the economic cost of childrearing in China is relatively high, and the marginal cost of child-rearing in two-child families is higher than that in one-child families, which constrains people's fertility willingness and behavior. ^[11]At the same time, Hu Pei et al. (2020) believe that rising house prices have changed family budget constraints and generally significantly delayed the time of the first birth of the family.^[12]Li Mingyan and Fu Chonghui proposed that people's fertility desire is positively correlated with housing area.^[13]

In view of social factors, Wang Guangzhou and Hu Yaoling (2022), from the perspective of women of childbearing age, believe that the level of education is negatively correlated with the level of fertility. The rapid increase in the proportion of women of childbearing age with higher education and the rapid increase in their unmarried proportion lead to a decline in fertility;^[14]su Jinqing et al. (2017) proposed that population mobility under the background of new urbanization will affect the marriage and fertility choices of young people of childbearing age, change the fertility concept of floating population, lead to the separation of husband and wife, and reduce the fertility rate;^[15]yang Hualei et al. (2018) found through model deduction that, compared with the weakening of family pension and the crowding out of fertility level by reemployment after retirement, delayed retirement can improve family pension and fertility level, while China has not fully implemented the policy of delayed retirement.^[16]Combined with the background of the times, Ning (2021) believed that the COVID-19 epidemic increased the uncertainty of life and concerns about hospital delivery, further reducing the willingness of residents to give birth.^[1]

In view of cultural factors, the change of traditional fertility concept is an important factor leading to China's low fertility trap. Li Zhi and Lan Qingqing (2017) proposed that the one-child policy has led to the historical fracture of the traditional population fertility culture, which is mainly reflected in the criticism of the traditional fertility concept, especially the " more children and more happiness. " ^[17]Zhai Zhenwu et al. (2023) believed that new media accelerated the spread of new marriage and childbearing concepts, promoted the formation of low-fertility culture and the spread of ' parenting anxiety '.^[3]

In recent years, domestic scholars have gradually shifted their research direction to professional women as the main body of fertility, and studied the problem of female fertility decision-making in the workplace. Xue Jiliang et al. (2021) found that female labor participation has a significant negative impact on fertility levels. The labor supply of female spouses has a significant negative impact on the fertility rate of the first child, while the annual per capita income of the family has a negative impact on the fertility rate of the second child and the career development of women will also be affected by fertility. The drive of women's personal aspirations and their pursuit of career development will reduce fertility.^[18]Luo Haoyu et al. (2019) found through research that on the basis that women already face employment discrimination, childbirth can bring invisible job search pressure to women.^[19]Based on the theory of maternal punishment, Wei Ruxin et al. (2022) pointed out that the three-child fertility policy highlights the contradiction between fertility and occupation, which will aggravate the worries of maternal punishment for professional women in China, and propose to break the dilemma of maternal punishment for fertility and enhance fertility inclusion.^[20]

2.3 Literature Summary

To sum up, domestic scholars have made a comprehensive study on the current situation, causes and influencing factors of low fertility level in China. However, after summarizing, it is found that the academic research on the influencing factors of low fertility lacks integrity and systematicness. At present, it is characterized by fragmentation and one-sidedness, and a complete influencing factor system has not been constructed. There are few studies on the relationship between the influencing factors. Some scholars have neglected the changes in the primary and secondary factors caused by the changes in the macro-fertility environment during the research process, and lack the times. Due to the late introduction of the ' comprehensive three-child ' policy and the rapid updating of fertility support policies in various regions, scholars cannot obtain accurate statistical data in time. Relevant research in the academic community is still focused on exploring the implementation of the ' comprehensive two-child ' policy. There is a gap in the research on the implementation effect of new policies such as ' comprehensive three-child '. At the same time, the academic community lacks high-level research on the fertility desire and fertility behavior of professional women under the background of low fertility rate, and pays insufficient attention to the group of professional women.

3. Research Design

3.1 Theoretical Analysis Ideas

Different from the classical Bongoz fertility theory model, the new low fertility theory model no longer uses natural fertility as the base, but uses the number of desired births as the base to estimate TFR. Morgan explained and further analyzed this theory. Morgan formulated this model as: $TFR = Fc \times Fg \times Fi \times Fr \times Ft \times Fu \times IFS$, where Fc is competition, Fg is gender preference, Fi is infecundity, Fr is replacement effect, Ft is tempo effect, Fu is unwanted fetility. IFS is the intended family size. Among them, the factors Fu (unwanted fertility), Fg (children's gender preference) and Fr (surrogate births due to disability and death of children born before) usually have the effect of improving the actual fertility level, while the factors Ft (period progress effect of delaying fertility), Fi (primary and secondary infertility) and Fc (competitive effect of abandoning the original fertility in pursuit of other life goals) will have an inhibitory effect on the actual fertility level.Model of influencing factors based on Bongoz's low fertility theory, see figure 1.



Fig.1 Model of influencing factors based on Bongoz's low fertility theory

3.2 Data Sources

The data of this study are derived from the 2018 China General Social Survey (CGSS) [The China Survey and Data Center of Renmin University of China is responsible for the implementation of the earliest national, comprehensive and continuous academic survey project in China]. For more information about this data, please log in to http://cgss.ruc.edu.cn/xmjs/xmgk.htm.

A survey was conducted on individuals in 125 counties (districts), 500 streets (townships, towns), 1,000 neighborhood (village) committees and 10,000 households across the country. By regularly and systematically collecting data on all aspects of Chinese people and Chinese society, the long-term trend of social change is summarized. In this study, 1352 valid samples were obtained from women of childbearing age aged 15-49 years in 2018.

3.3 Index Selection And Analysis Methods

By intending the number of children as the number of children intended to be born, gender preference is the gender ratio of the desired children, and the corresponding question is ' If there are no policy restrictions, how many children do you want to have ? " The comment on this question is ' according to the actual situation of the individual number of children intended. No matter whether you have given birth to a child or not, no matter how many children you have given birth to before, you plan to give birth to a total of several children. How many boys, how many girls ? The economic status of the family reflects the impact of economic conditions on the number of willing

children. The corresponding question in the questionnaire is ' What is the total household income of your family in 2017 '; the household registration situation reflects the influence of the location of the household registration on the concept of fertility. The corresponding question is ' Your current household registration place is ', and the annotation of the question is 'Agricultural household and non-agricultural household '; the education level of women of childbearing age and the occupational status reflect the influence of knowledge level on fertility concept. The corresponding problem is ' your current highest education level is '; through, marital status, marital happiness, their own health status reflects the family environment, physical condition of women of childbearing age fertility attitude, the corresponding question is ' in general, do you think your life is happy ? You think your current physical health is.'

Statistical analysis using spss27.0 software for data analysis, descriptive statistics of relevant variables; the empirical analysis of this paper uses multiple linear regression model to study the factors affecting the fertility desire of women of childbearing age.

Model set where $z = a0 + a1X1 + a2X2 + a3X3 + a4X4 + a5X5 + a6X6 + a7X7 + a8X8 + a9X9 + \epsilon$. X1 represents the household registration nature of women of childbearing age, X2 represents the age of women of childbearing age, X3 represents the education level of women of childbearing age, X4 represents the occupation of women of childbearing age, X5 represents the health of women of childbearing age, X6 represents the total family income of women of childbearing age, X7 represents the gender preference of women of childbearing age, X8 represents the marital status of women of childbearing age, X9 represents the happiness of women of childbearing age, and ϵ represents the residual term.

4. Results and Discussion

4.1 Sample Basic Situation

variable		Total (proportion)	variable		Total (proportion)
census	agricultural registered residences	622(46%)		Very unhappy	9(0.7%)
register	Non-agricultural household registration	730(54%)	Hannings of	relatively unhappy	52(3.8%)
	18-29	335(24.8%)	marriage	Not happy or not happy.	200(14.8%)
Age (years)	30-39	497(36.8%)		relatively happy	854(63.2%)
	40-49	520(38.5%)		Very happy	237(17.5%)
	Primary school and below	182(13.5%)		Very unhealthy	6(0.4%)
	junior high	338(25%)		Less healthy	62(4.6%)
standard of culture	High school or technical secondary school	271(20%)	health degree	general	251(18.6%)
	college for professional training	212(15.7%)		Healthier	645(47.7%)
	bachelor degree and above	349(25.8%)		Very healthy	388(28.7%)
	far below average	32 (2.4%)		unmarried	259(19.2%)
incomo	below average	376(27.8%)	marital status	married	1049(77.6%)
situation	average	832(61.5%)		divorced	44(3.3%)
situation	Above average	111(8.2%)		0	267(19.7%)
	much higher than average	1 (0.1%)	gender preference	1	1020(75.4%)
	party and government organizations	35 (2.6%)	(son)	2	63(4.7%)
	enterprise	657 (48.6%)		3	2(0.1%)
	institution unit	193 (14.3%)		0	226(16.7%)
occupation	Social organizations, residents / village committees	36 (2.7%)	gender preference (daughter)	1	1041(77%)
	No unit / self-employment	431(31.9%)		2 3	84(6.2%) 1(0.1%)

Table 1 Sample basic situation.

In the valid sample, the agricultural household registration population accounts for 46 %, and the

non-agricultural household registration population accounts for 54 %; the largest proportion of people in the 30-49 age group reached 75.2 %, and the majority of the respondents were married and happily married; in terms of occupation, the number of people working in enterprises is the largest, reaching nearly half (48.5 %); the income situation is concentrated on the average level of 61.5 %, and the education level is relatively balanced. In terms of fertility desire, most respondents preferred one son (75.4 %) or one daughter (77 %). The results are shown in Table 1.

4.2 Influencing Factors of Fertility Desire

According to the results of single factor analysis, the age, household registration, education level, income level, occupation, marital status, marital happiness, health level and gender preference of women of childbearing age were taken as independent variables and assigned (see table 2). Multiple linear regression analysis was carried out with the number of children born by women of childbearing age as the dependent variable. The results showed that the household registration, income level, education level, occupation, health level, marital status and gender preference of rural empty nesters were the main influencing factors of fertility intention (P < 0.05), which could explain 98.8 % of the total variation. See Table 3 for details.

independent variable	assignment
census register	agricultural household registration =1, non-agricultural household registration =2
age bracket	18-29=1, 30-39=2, 40-49=3
	primary school and below =1, junior high school =2, high school or secondary school =3, college =4, undergraduate and above =5
standard of culture	
income situation	is far below average = 1, below average = 2, average = 3, above average = 4, far above average = 5
occupation	party and government organizations =1, enterprise =2, institution unit =3, social organization, neighborhood / village committee =4, no unit or self-employment =5
marital status	unmarried = 1, married = 2, divorced = 3
happiness of marriage	very unhappy = 1, relatively unhappy = 2, Not happy or not happy. = 3, relatively happy = 4, very happy = 5
gender preference (son) gender preference (daughter)	original value input

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Table	2	Inde	pendent	variable	assignment
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Table 3 Linear regression analysis	of influencing factors	of fertility	desire of w	omen of childb	earing
	age.				

independent variable		Beta	F	independent variable		Beta	F
Household registration (agricultural household registration as the standard)	Non- agricultural household registration	-0.012	0.040	The degree of happiness (based on very unhappy)	very unhappy	0.002	0.003
Education level (based on primary school and below)	junior high	-0.008	0.200		relatively unhappy	0.034	0.020
	High school or technical secondary school	-0.008	0.037		relatively happy	0.065	0.046
	college for professional training	-0.012	0.042		very happy	0.067	0.031
	bachelor degree and above	-0.015	0.049	Health status (by very	Less unhealthy	0.009	0.661

	below average	0.033	0.001	unhealthy	general	-0.004	0.896
Income level	average	0.053	0.001	standards)	Healthier	0.009	0.827
(well below	above average	0.062	0.033		Very healthy	0.004	0.894
average)	far above average	0.036	0.623	Marital status (unmarried as	married	-0.002	0.730
	enterprise	-0.001	0.941	the standard)	divorced	0.001	0.935
Occupation	institution unit	0.001	0.149		son	0.697	0.000
(based on party and government organs)	social organization	-0.001	0.849	gender	daughter	0.706	0.000
	no unit or self- employment	-0.002	0.921	preference			

4.2.1 Census Register

The results of variance analysis show that there are statistically significant differences in fertility desire among women of childbearing age with different household registration. The results are shown in Table 4. The main performance is that agricultural women are more willing to have children than non-agricultural women, and rural residents are more willing to have children than urban residents. It can be speculated that the backward traditional ideas in rural areas still exist, such as: raising children for old age, passing on the family line, many children with high status, not giving birth to sons and so on. Secondly, compared with urban areas, rural areas have lower opportunity cost, time cost and economic cost of raising children. Considering the cost of raising children. Tables must appear inside the designated margins.

fertility desire	census register	mean value	standard deviation	F(Sig.)	post hoc comparison
	agricultural registered residences	1.79	0.582		Non-agricultural
	Non- agricultural household registration	1.67	0.601	2.498(0.001)	registration <agricultural registered residences</agricultural

Table 4 Variance analysis of household registration factors.

4.2.2 Educational Level

According to statistics, the regression coefficients of education level (based on primary school and below) are negative, and women with higher education are more inclined to ' have fewer children ' or even not have children. The results are shown in Table 5.According to the hypothesis of value consciousness, education level includes personal values, and the social and cultural environment in which they live affects the fertility concept of women of childbearing age. Under the reinforcement of individualism values, highly educated women may be more concerned about career and educational achievements, while highly educated families are more inclined to the concept of small families, that is, they do not want to have too many children, because they pay more attention to the family's economic and educational resources allocation.

fertility	standard of culture	mean	standard	F(Sig.)	post hoc comparison
desire		value	deviation		
	primary school and	1.97	0.643	10.244(0.001)	primary school and below > junior high
	below				school > high school or secondary
	junior high school	1.81	0.676		school > college > undergraduate and
	high school or	1.75	0.711		above
	secondary school				
	college	1.69	0.720		
	undergraduate and	1.59	0.701		
	above				

Table 5 Variance analysis of educational level factors

4.2.3 Income Level

Variance analysis was performed with income level as grouping variable and fertility desire of women of childbearing age as detection variable. The results of variance analysis show that there are statistically significant differences in fertility desire among women of childbearing age with different income levels. After multiple comparisons, it can be seen that women of childbearing age whose income is below the average and average are significantly higher than those whose income is far below the average.

Parenting is a very expensive and lifelong commitment, and the trend of shrinking family size is more common in high-income countries. Nowadays, the cost of educating children is far different from the past. A child's monthly expenses such as food, clothing, housing, education and training, medical and health care, and interest cultivation account for nearly half of the monthly income for ordinary families. Parents pay more financial and energy in their children's education, which directly affects the social fertility desire. The " double reduction " policy implemented today and the strict regulation of extracurricular training and other measures also prove this point.See Table 6 for details.

fertility desire	income level	mean value	standard deviation	F(Sig.)	post hoc comparison
	far below average	1.41	0.911	4.225(0.02)	far below
	below average	1.77	0.728		average <below< td=""></below<>
	average	1.76	0.678		average
	Above average	1.65	0.669		far below
	much higher than average	0	0		average <average much higher than average<far below<br="">average</far></average

Table 6 Variance analysis of income level factors

4.2.4 Occupation

According to statistical data analysis, the fertility desire of respondents who work in enterprises, social groups and without units or self-employment is low. See Table 7 for details. According to the socio-economic hypothesis, most parents want to pursue their own careers outside the family and find space for self-development. This means that only less time can be spent on children. Reducing the number of children is an important step to solve the tension between work and family.

fertility	occupation	mean	standard	F(Sig.)	post hoc comparison
desire		value	deviation		
	party and government	1.74	0.505		enterprise <
	organizations				institution unit <
	enterprise	1.69	0.724		social organization
	institution unit	1.71	0.660	3.998(0.003)	< party and
	social organization	1.61	0.728		government organ <
	no unit or self-employment	1.85	0.685		no unit or self- employment

Table 7 Variance analysis of occupational factors

The golden period of female fertility and the golden period of career development are highly overlapped. The contradiction between fertility time and workplace development directly leads to the increase of female fertility cost. In the conflict between the enterprise's pursuit of profit maximization and the non-socialization of women's fertility costs, on the one hand, enterprises will try their best to suggest, imply or even force professional women of childbearing age to postpone their fertility plans for work content, and choose late marriage and late childbearing. On the other hand, the relatively weak position of women in the workplace makes some professional women fear the consequences of marriage and childbirth, and worry about the impact on their career prospects. Under the above concerns, some professional women of childbearing age who are more inclined to develop themselves in the new era are willing to choose late marriage and late childbirth or

unmarried infertility, which is more conducive to the realization of personal value; some occupations with higher requirements for career development coherence, such as scholars, researchers, are more likely to choose less fertility and no fertility.

4.2.5 Marital Status and Happiness

According to the survey data, the overall quality of marriage is positively correlated with fertility desire, and the correlation coefficient shows that the happier the marriage, the stronger the willingness to give birth. See Table 8 for details. The relationship between husband and wife is the core of family relations. On the premise that both husband and wife raise children together, the harmony of husband and wife's married life and the consideration of children's future physical and mental health are important factors affecting the fertility attitude of professional women. From the perspective of sensibility and the hypothesis of gender division of labor in the family, happy marriage and ideal intimacy have become the psychological pillars of female fertility. Men assume corresponding and more responsibilities and obligations in the process of raising children can reduce women's concerns about fertility. It can be seen that marriage and family life can help to improve the intention of multi-child fertility, and can also promote the transformation of multi-child fertility intention into the behavior of having a second child.^[21]

fertility desire	Marital happiness	mean value	standard deviation	F(Sig.)	post hoc comparison
	Very unhappy	1.56	0.527	1.413(0.004)	Very
	relatively unhappy	1.62	0.932		unhappy <relatively unhappy<not happy="" or<="" td=""></not></relatively
	Not happy or not happy	1.70	0.738		not happy <very happy<relatively< td=""></relatively<></very
	relatively happy	1.78	0.682		happy
	Very happy	1.71	0.684		

Table 8 Variance analysis of marital happiness factors

5. Policy Recommendations

5.1 Increase National Policy Support, Build Supporting Public Policy Service System

5.1.1 Increase Economic and Financial Support and Reduce Family Fertility Costs

The study found that fertility policy is no longer a key factor in determining people's fertility desire, and higher and higher fertility costs have largely become an important reason for preventing families from having two children.

According to local conditions, combined with the actual situation in the region to provide fertility allowances, childcare subsidies and so on. Including: the implementation of family parenting subsidies related to the number of children, such as: before the child is three years old, give birth to a second child in the region, and provide a certain amount of money for the three-child family; provide housing subsidies to families with many children, and give preferential housing purchases to families with many children. For example, give the government a one-time subsidy when purchasing a house, or a price subsidy per square meter of commercial housing, give priority to the choice of household type, reduce the bank loan interest rate when purchasing a house for families with many children, and ensure the basic housing conditions for women of childbearing age to have many children; to give a certain number of years of personal income tax relief adjustment to the two-child and three-child families, and so on, the most effective measures to reduce the fertility pressure of the childbearing age group, directly stimulate the fertility attitude of professional women of childbearing age, and eliminate the worries of women having more children.

5.1.2 Improve Public Service Support And Balance The Supply Of Basic Service Resources

To remind the government to do a good job in the planning and distribution of educational

resources, first of all, establish a comprehensive child protection system and a perfect child care service system, supervise and investigate the charging standards and service levels of private early education institutions, and strengthen the training of child care service personnel; build inclusive early education institutions, reduce the entry threshold of preschool education, and narrow the resource gap between public and private kindergartens. Secondly, strengthen the training of teachers, improve the teaching quality of teachers, assist poor areas to obtain better educational resources, realize students ' nearby enrollment, standardize the management of off-campus training institutions, and reduce family pressure. Implement the tuition reduction policy so that more children can enjoy fair educational opportunities. Finally, the school takes on the responsibility of cultivating students ' expertise, schools can provide various interest classes for students to choose, which is conducive to reducing the economic expenditure of families for cultivating children, while ensuring the overall development of children and reducing the concerns of families of childbearing age about the future education cost of children.

Maternal and child health care, maternal examination, postpartum recovery, and other issues are still the concerns of women of childbearing age. Maternal and child health care medical institutions are an important part of medical and health services and the quality of life of the population. Reduce the risk of fertility, strengthen the treatment of high-risk and critically ill pregnant women, do a good job in maternal and child health care plan, establish and improve the referral network of maternal acute and severe diseases, unblock the green channel of first aid, and improve the specialized service ability and medical quality level of maternal and child health care medical institutions. Strengthen the training of talents in gynecology, obstetrics, pediatrics, midwifery, etc., do a good job in risk assessment and health examination of elderly pregnant women, increase obstetric beds, and strengthen the equipment and emergency equipment accordingly. Provide more detailed and safe services for pregnant women and protect the reproductive health of women of childbearing age.

Improve the construction of an inclusive pension service system and develop a multi-level and multi-pillar pension insurance system. Providing old-age security for the elderly can reduce the pension burden of young people to a certain extent, so as to enhance their fertility desire. First of all, the government provides pension insurance support for families with two or three children, and reduces the rate of individual contributions to pension insurance. Secondly, support the construction of a comprehensive pension insurance system, encourage employers and social forces to assume social pension responsibilities. Finally, accelerate the introduction of social pension services, increase their pensions for the elderly with reduced mobility, and share pension responsibilities through communities and townships, establish an elderly activity center, and provide more high-quality activity selection and care services for the elderly. Reduce the economic cost of supporting the elderly for couples of childbearing age, and have more time and energy to take care of children or choose to reproduce.

5.2 Strengthen the Protection of Women's Rights, Improve the protection System of Women's Rights

It is hoped that the government will play the role of ' tangible hand ', reward enterprises that employ marriage-age women in policy, promote the retention of marriage-age women, subsidize the social insurance paid by enterprises for female employees on maternity leave, encourage enterprises to formulate measures conducive to employees ' balance of family and work relations, promote the convergence of the cost of employing male and female employees, fundamentally solve the problem of unfair employment of female employees, narrow the employment gap between men and women, avoid employment discrimination, and ensure equal employment and promotion opportunities for women of childbearing age.

Gradually improve the social status of women, create a good atmosphere to protect women's reproductive rights, advocate care and respect for pregnant women in the whole society, emphasize humanistic care, and enhance the fertility desire of women of childbearing age.

5.3 Promote the Concept of Healthy Parenting and Increase Family Support

Raising children is the common responsibility of both husband and wife. The government can consider extending the maternity leave moderately, especially through male parental leave, promoting fathers to participate in the parenting process, and effectively balancing the ' family balance' of women's excessive parenting responsibilities. Relevant government departments, mainstream media and community organizations have stepped up publicity efforts to promote the family concept of joint parenting between husband and wife. Actively promoting the balance of family and career relations is a problem that both men and women should face and learn. Letting both husband and wife participate in the process of childrearing is conducive to both sides ' transposition thinking in daily life. It can not only reduce the physical and mental burden of women, but also make children feel the warmth of the family and the warmth of the family. Secondly, the loss of personal time due to childbirth is an unacceptable fact for some professional women. At this time, it is more important for men to have more sense of responsibility and energy to participate in childrearing, thereby reducing women's childrearing burden, easing family conflicts, and improving gender relations.

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