

of growth, but they appear to offer the promise of more immediate progress toward reduced growth rates than any other proposed or currently feasible program of equivalent cost (or, for that matter, any cost).

9. See J. Rock, *The Time Has Come* (Knopf, New York, 1963), chap. 11; A. F. Guttmacher, *Babies by Choice or by Chance* (Doubleday, New York, 1959), chap. 8.

10. We are indebted to Dorothy Nortman of the Population Council for this observation.

11. R. Freedman, P. K. Whelpton, A. A. Campbell, *Family Planning, Sterility and Population Growth* (McGraw-Hill, New York, 1959).

12. P. K. Whelpton, A. A. Campbell, J. E. Patterson, *Fertility and Family Planning in the United States* (Princeton Univ. Press, Princeton, N.J., 1966).

13. N. B. Ryder and C. F. Westoff, "Relationships among intended, expected, desired and ideal family size: United States, 1965," *Population Res.* (March 1969) (available from the Center for Population Research, National Institute of Child Health and Human Development, Washington, D.C.). Their full statement of the limitations of the "ideal" question follows: "We asked the question to correspond exactly with the wording employed in many previous inquiries, *despite profound reservations about its usefulness*. The question can be interpreted as the respondent's opinion as to what she considers to be ideal for the average American family, or what the average American family considers ideal for themselves. In the second place, the wording prompts the further question, 'Ideal for whom?' That might be answered from the standpoint of the respondent, or of the average American family, or even of the total population—since it must face the consequences of the behavior of the 'average American family.' Thirdly, the question calls for a statistical judgment of the characteristics of the average American family, a judgment probably beyond the reach of most respondents and varying in relation to their own characteristics. In the fourth place, there is ambiguity about the scope of the term 'ideal': Does it mean the ideal parity considering the circumstances as well? Finally, there would seem to be a substantial risk with a question so worded that the respondent thinks she is being asked about the actual average number of children in an American family. In our opinion, the *sole justification for including this question in our inquiry is to explore statistically the validity of this very common but very dubious question* [emphasis added]."

14. Convergence is also demonstrated when actual behavior is examined, rather than attitudes. See C. F. Westoff and N. B. Ryder, in *Fertility and Family Planning: A World View*, S. J. Behrman, L. Corsa, Jr., R. Freedman, Eds. (Univ. of Michigan Press, Ann Arbor, 1969), Tables 13 and 15. In 1960 and 1965, by any measure of socio-economic status, three-fourths to five-sixths of the lowest income groups had used or expected to use some form of fertility control (including relatively ineffective ones). As would be expected of a practice which has diffused down through the class structure, there is a lower level of practice in the lowest groups (which may also be a function of less availability of services).

15. N. B. Ryder and C. F. Westoff, "Fertility planning status of American women, 1965," paper presented before the Population Association of America, April 1968.

16. Unpublished data from the 1965 National Fertility Study, made available by C. F. Westoff.

17. Special tabulation by the Census Bureau of the characteristics of women living in poverty and near-poverty in March 1966.

17a. C. F. Westoff and N. B. Ryder, in *Fertility and Family Planning: A World view*, S. J. Behrman, L. Corsa, Jr., R. Freedman, Eds. (Univ. of Michigan Press, Ann Arbor, 1969).

18. Blake has much to say about the responses of white men and women of lower education and economic status to a poll question. "Do you think birth control pills should be made available free to all women on relief who are of childbearing age?" She ignores the ambiguity of the question, which would appear to require of the respondents judgment on at least four issues: (i) pills; (ii) the public assistance system ("welfare handouts"); (iii) the morals of women on public assistance; and (iv) the distribution of pills without medical supervision. If we were asked the question in this form, our answer would probably also be in the negative: "Not unless the distribution was under medical supervision and the assistance recipient wanted pills."