

If Not Now, When? Women's Views of Childbearing in Ukrainian Cities During Russia's Full-Scale Invasion

Abstract

Prior literature on fertility during war has examined high-fertility settings using quantitative data collected mainly after the cessation of fighting, thereby overlooking the cognitive processes behind reproductive behavior rooted in cultural contexts. We focus on Ukraine, where a full-scale war has erupted against the backdrop of low fertility and demographic crisis. We conducted 22 in-depth, semi-structured virtual interviews and three focus groups with women of reproductive age residing in three large Ukrainian cities who have either no children or one child. We apply the framework of *cultural schema* to analyze how previously formed assumptions about childbearing inform reproductive thinking under conditions of ongoing war. We find that fertility-related thought processes during war are more complex and ambiguous than prior research suggests. While safety concerns, economic hardship, and separation from partners predictably discourage pregnancies and births, uncertainty about the war's duration and a sense of life's fragility can motivate pro-birth rhetoric. Ambiguity in reproductive thinking manifests through openness to childbearing if pregnancy occurs, despite a reluctance to actively plan for it.

Introduction

How do people think about childbearing during wartime, particularly when fertility levels prior to war are already extremely low? While research on fertility during wartime focuses on high-fertility societies, Ukraine presents a unique case where a full-scale war has erupted against a backdrop of decades-long low fertility and demographic crisis. Previous scholarship on fertility

during war has primarily relied on quantitative data (e.g., Lindstrom and Bernahu 1999; Agadjanian and Prata 2002; Cetorelli 2014; Castro Torres and Urdinola 2019; Torrisi 2020) collected after the conflict or during its acute phase, with theories about the mechanisms underlying the observed effect developed retrospectively. While these studies have enhanced understanding of macro-level effects, their methodology does not illuminate the cognitive processes behind reproductive decision-making during war. Observed aggregate fertility rates during wartime, however, result from the decisions of thousands of women (and men) facing potentially complex, ambiguous imperatives posed by armed conflict. These decisions are informed not only by the conditions of war, but also by pre-existing norms, assumptions, and aspirations related to childbearing, some of which are specific to the cultural context in which the conflict takes place.

The limited research on the ideational aspects of childbearing during wartime (e.g., Fargues 2000) lacks a systematic framework for situating such thought processes in cultural contexts. Qualitative data collected during wartime is more suitable than survey data for illuminating different ways that perceptions of war disrupt and reorganize prevailing pre-conflict assumptions, attitudes, and perspectives surrounding childbearing in a society. Therefore, we conducted 22 in-depth semi-structured interviews in April 2023 and three focus groups in December 2023 (all via Zoom) with Ukrainian 18–39-year-old women living in Ukraine’s three largest cities. Although it is important to understand men’s views of childbearing, we focused on women. It can be difficult to recruit Ukrainian men for studies, because many of them are either serving in the military or hiding from the authorities to avoid conscription. We only interviewed women with no children or one child, because in Ukraine they are far more likely to consider having children in the future than women with two or more children.

To analyze our data, we employ the *cultural schema* framework from the sociology of culture (Sewell 1992; DiMaggio 1997; Boutyline and Soter 2021) to understand how the complex and variegated system of attitudes, norms, and expectations related to childbearing interact with experiences and perceptions of wartime to inform individual orientations and decisions. Our interviews demonstrate heterogeneity and inconsistency in childbearing-related thinking, revealing greater complexity and ambiguity than the prior research tends to suggest. On the one hand, war fosters fear and causes trauma, economic hardships, and separation from partners, which can motivate women to delay or forgo pregnancy. On the other hand, uncertainty about the war's duration and an enhanced sense of life's fragility, coupled with conservative baseline attitudes toward childbearing, can inspire a desire to have a child despite the dangers and challenges. Women can thus simultaneously hold both negative and positive ideas about having children during war and change their opinion, for example, in case of unplanned pregnancies within stable partnerships.

Literature Review

Ukraine's fertility context and Russia's invasion

Ukraine's fertility has remained low since it plummeted after the collapse of the Soviet Union, with the total fertility rate (TFR) reaching a global low of 1.1 in 2001 (Perelli-Harris 2005, 2008). As a result, the country experienced a sharp population decline (Chuiko 2001; Steshenko 2001), prompting the government to introduce childbirth payments and maternity leave policies in 2005 to encourage higher birth rates, but the resulting gains were undermined by the armed conflict in Donbas, the COVID-19 pandemic, and Russia's full-scale invasion.

In 2014, after the Euromaidan protest movement ousted pro-Kremlin president Viktor Yanukovich, Russia reacted by forcibly seizing, then annexing Crimea, and starting an armed rebellion by separatists in the eastern Donbas region. Despite a 2015 ceasefire, the conflict continued to simmer, hindering Ukraine's economic development, provoking humanitarian crises in the affected territories, and burdening the country with mass internal displacement (Perelli-Harris et al. 2023). Ukraine's birth rates resumed their decline in 2014, and by 2019 Ukraine's TFR was 1.23 (Perelli-Harris 2023).

On February 24, 2022, Russia launched its full-scale invasion of Ukraine, and since then, the entire country has endured devastating destruction and immense human suffering. Russia has launched thousands of attack drones and missiles at Ukraine, targeting residential buildings and critical infrastructure, including hospitals, heating and power systems, ports, and agricultural facilities. Over three years of war, the United Nations has documented at least 12,910 civilian deaths and 30,700 injuries, while noting that actual figures are likely higher due to underreporting in occupied areas (UN HRMMU 2025). More than 200,000 residential buildings have been destroyed (New Voice of Ukraine 2025), internal displacement reached 3.6 million people, and nearly 7 million Ukrainian refugees—mostly women and children—are living abroad (UNHCR 2025). The invasion has had a catastrophic effect on Ukraine's economy: GDP contracted by 29% and inflation reached 26.6% in 2022 (Samoiliuk 2025). By March 2025, poverty had increased by 1.8 million people (World Bank 2025), while war-related labor shortages and persistent infrastructural damage remain critical obstacles to economic stabilization.

After the start of the full-scale war, monthly births fell to 16,000 from 23,000 before the invasion (Opendatabot 2023). Estimates of the TFR in 2023 have ranged from 0.71 (Perelli-Harris 2023)

to 1.0 (UN 2024). Ukraine's population, which has fallen from 52 million in 1993 to 42 million by the beginning of 2022, is predicted to decline by an additional 10 million over the next 30 years under the most optimistic scenarios. (Libanova 2024)

In contrast to most other low-fertility contexts, Ukraine's low TFRs result from most women having relatively early first births, then delaying or foregoing second births (Zeman et al. 2018). Ukraine has long featured widespread norms identifying childbearing as essential to womanhood and the concept of family, and a common belief that the prime age for pregnancy is one's early twenties, for physiological, economic, and environmental reasons (Perelli-Harris 2005). Over the past decades, however, women's mean age at first birth has increased from around age 22 in the early 1990s to 25 in the 2010s (Human Fertility Database 2025), suggesting changing norms about early fertility, but still a tendency to have births before age 25. In the Soviet and early post-Soviet period, modern methods of contraception were limited, and abortion was frequently used, but due to fears of abortion leading to infertility, it was usually only used for higher-order pregnancies (Perelli-Harris 2005). Recently, modern contraception has become widely available, and attitudes towards abortion have changed. According to the 2020 World Values Survey, only 20% of respondents think that abortion can always be justified, while 58% think the opposite (Musiyezdov 2020).

One of the main reasons Ukrainians have curtailed fertility is due to economic uncertainty and a general decline in living standards. In prior qualitative studies, Ukrainians opined that couples should not have children unless they have sufficient economic means to support them, particularly second and higher-order births (Perelli-Harris et al. 2024). Lack of government benefits, social support, and the degradation of medical facilities and public services have all discouraged

couples from having more than one child (Perelli-Harris and Hilevych 2023). In addition, Ukrainians have expressed concerns about environmental pollutants which impact health and lead to infertility (Perelli-Harris and Hilevych 2023, Wesolowski 2013).

Effects of armed conflict on fertility

War can affect fertility in highly variable ways (Lindstrom and Bernahu 1999, Agadjanian and Prata 2002, Randall 2005, Khawaja and Randall 2006, De Walque 2006, Yucesahin and Ozgur 2008, Woldemicael 2008, Jayaraman et. al 2009, Urdal and Che 2013, Cetorelli 2014, Torche and Shwed 2015, Castro Torres and Urdinola 2019, Kraehnert et al. 2019, Torrissi 2020). Scholars have suggested economic, social, and socio-psychological explanations for why war can suppress fertility. Forced displacement, trauma, housing shortages, spousal separation, and intensified economic and physical insecurity may result in lower fertility due to poorer health outcomes, decreased sexual activity, or deliberate postponement or avoidance of childbearing (Lindstrom and Berhanu 1999, Hill 2004, Jayaraman et al. 2009, Agadjanian 2018, Perelli-Harris et al. 2024). War-induced crises in health infrastructure and food insecurity can lead to malnutrition, which negatively impacts fecundability (Herp et al. 2003, Hill 2004).

However, other factors linked to armed conflict may increase fertility. Inaccessibility of contraception, sexual violence, and population responses to higher mortality rates can drive a surge in births during war (Yucesahin and Ozgur 2008; Jayaraman et al. 2009; Staveteig 2011; Castro Torres & Urdinola 2019). Women may pursue pregnancy to offset actual or anticipated child losses during armed conflict (Verwimp and van Bavel 2005; Torrissi 2020). Armed conflict can strengthen conservative values (Cetorelli 2014) and fuel pro-natalist discourse (Fargues 2000; Khawaja and Randall 2006).

While these studies have undoubtedly contributed to a general understanding of which combinations of factors can lead to particular fertility outcomes during armed conflict, their quantitative analyses only infer the mechanisms behind these effects, based on data collected after the most traumatic phases of the conflict had ended. As such, they are unable to capture the actual cognitive, micro-level processes that shape aggregate outcomes and within which meaningful paradoxes and ambiguities are hidden. At the same time, the ongoing war is likely plunging individuals into a state of fear and uncertainty about the future, in which decision-making likely differs significantly from that during temporary and localized life hardships.

Research on fertility under conditions of uncertainty suggests that, on the one hand, it can foster pessimism and fear about the future, thereby discouraging pregnancies (Perelli-Harris et al., 2024). On the other hand, couples may have children as a strategy to cope with trauma by adding a positive perspective to their lives (Cohan and Cole 2002; Carta et al. 2012), or because of intensified sexual activity resulting from increased emotional support needs (Cohan and Cole 2002). Even in risky circumstances parenthood can be a strategy to reduce uncertainty (Friedman et al. 1994). Children can provide a sense of direction, meaning, and identity when one's life is out of control (Edin and Kefalas 2011) or when one faces existential uncertainty (Trinitapoli and Yeatman 2011). These competing responses to uncertainty highlight potential complexity of individuals' motivations during armed conflict: while considering intensified difficulties related to parenthood or potential loss of a child, individuals may prioritize creating stability, meaning, and connection in their lives, even in the face of adversity.

Cultural schemas

Some of the analyses above acknowledge the role of perceptions and attitudes. For example, Fargues (2000) argues that pro-natalist ideas took root among both Israelis and Palestinians as fertility was weaponized conceptually by both sides during their decades-long conflict, accounting for persistently high fertility among Palestinians. Others suggest that political and historical idiosyncrasies (Randall 2005, Khawaja and Randall 2006), conflict-induced shifts towards traditional values (Cetorelli 2014), and exposure to high mortality (Castro Torres and Urdinola 2019) can influence fertility during war. While these studies offer some contextual awareness, they fall short of providing a systematic framework for incorporating the cultural dimension of wartime fertility—aside from the inherent limitations of survey-based research discussed earlier. The alternative we propose is to examine the reasoning behind childbearing to develop culturally attuned scholarship on wartime fertility.

Culture, the “semiotic dimension of human social practice” (Sewell 2023: 48), influences behavior through cultural *schemas* (Sewell 1992, DiMaggio 1997), heterogeneous and often inconsistent socially shared representations of objects and events that “provide default assumptions about their characteristics, relationships, and entailments under conditions of incomplete information” (DiMaggio 1997: 269). Schemas are activated in automatic and deliberative cognitive processes as individuals work through various types of problems (DiMaggio 1997, Vaisey 2009, Boutyline and Soter 2021). In automatic cognition, which is fast, unreflective, and “commonsensical,” schemas reduce the mental effort needed to solve familiar problems and are typically used in routine situations requiring responses to stimuli without deliberate thought. However, when action requires focus and careful decision-making (e.g., childbearing), or when automatically ac-

tivated schemas fail to adequately respond to new circumstances—such as the disruptive consequences of war—deliberative cognition, which is slower and involves conscious reflection and articulation, takes over (DiMaggio 1997).

Demographers have incorporated cultural schema in fertility research (Johnson-Hanks et al. 2011, Bachrach & Morgan 2013, Rackin & Bachrach 2016, Shepherd & Marshall 2018). For example, Bachrach and Morgan (2013) proposed that fertility intentions and behavior result from the interaction between shared schemas and mental processes influenced by a set of circumstances. Applying these insights, we argue that fertility decisions during armed conflict are shaped not only by exposure to conflict, social status, and other conventional demographic variables, but also by the interaction between prevailing cultural schemas around childbearing and experiences and perceptions of war, its challenges, implications and duration.

Disruptive circumstances (like war) help reveal fragmentation and inconsistency within the beliefs, attitudes, and typifications constituted by cultural schemas (DiMaggio 1997), which may contradict one another, while still offering a “toolkit” (Swidler 1986) for crafting strategies of action appropriate to new contexts. For instance, as discussed above, many Ukrainians regard childbearing as a normative goal of a family, but also as contingent on financial stability and a lasting partnership (Perelli-Harris et al 2024). While these conditions may be met in peacetime, war—by threatening lives and livelihoods—challenges the ability to meet these goals. The “ticking clock” schema may compound this tension, especially for women without children, forcing them into difficult decisions. Finally, women who decide to postpone pregnancy until “better times” but become pregnant unintentionally face a choice between fulfilling in wartime what

may be perceived as her “female duty” or resorting to a stigmatized (Musiyezdov 2020) and potentially harmful abortion. The patterns through which individuals navigate previously internalized fertility-related cultural schemas during wartime reflect the cognitive trajectories that underlie the macro-level effects of war on fertility.

Data and Method

To examine how conditions linked to the armed conflict interact with pre-existing cultural norms about childbearing, we collected qualitative data in the form of virtual interviews and focus groups (all by Zoom), which we analyze using the cultural schema framework. Our interviews are not representative of Ukrainian women and only represent two points in time, however they reveal real patterns of response with respect to partnerships and childbearing during war. In April 2023 we interviewed 22 informants, aged 18 to 39, with one child or none living in Kyiv or Kharkiv. The interviews lasted, on average, one hour and were conducted in the informant's language of choice (thirteen interviews in Russian, nine in Ukrainian). In December 2023 we conducted three focus groups (each about two hours) in Kyiv, Kharkiv, and Odesa with women of the same age and number of children. Participants were recruited by the Kyiv International Institute of Sociology using a database of individuals, who had previously agreed to take part in sociological research, and were provided modest compensation for participation. Data collection procedures followed a protocol ensuring the protection of human subjects approved by the University of Wisconsin IRB.

Both Kyiv, Ukraine’s centrally located capital, and Kharkiv, near its North-Eastern border with Russia, were threatened by invading forces early in the full-scale invasion. Although neither city was occupied, both cities have experienced frequent missile and drone attacks. Odesa, Ukraine’s

third largest city, is located on the Black Sea coast and has also been regularly subjected to missile attacks. All participants remained in their pre-invasion place of residence, aside from one who left the country immediately following Russia's invasion but subsequently returned. Two had been internally displaced from the Donbas region during the war that began in 2014. Five reported having partners on the front lines, and eleven reported having relatives who were either killed due to the war, missing, or located in occupied territories.

In the interviews, we asked informants how the war had shaped their own and their friends' and family members' romantic relationships; their recent actions and plans regarding marriage, divorce, separation, and pregnancy; and visions of Ukraine's future. To identify the cultural schemas shaping informants' views on childbearing during the war, we asked women about the ideal age to become a mother and number of children, as well as factors that would influence their reproductive decisions in peacetime. We listened for statements of axiomatic beliefs or associations—such as 'children are the very definition of family', 'a mother shouldn't be too old', etc. —recurring across interviews.

To analyze the data we identified key concepts and then searched for common themes and patterns emerging from participants' narratives. In April 2023, we reached saturation (Small 2009)—the point at which additional interviews yielded only redundant information—with our interviews, and thus turned to focus groups to explore the social dynamics around the same topics and how these are shaped by interaction and peer influence. The group setting did not reveal any new thematic patterns, but it encouraged participants to express more encompassing views, often demonstrating an appreciation for opposing perspectives or their simultaneous relevance to their own thinking.

Findings

Cultural Schemas

In line with prior qualitative studies from before the war (Perelli-Harris et al 2024, Perelli-Harris 2005), four general cultural schemas emerged from our interviews.

Schema 1: Children are a “must-have”. Almost all informants, either deliberately or indirectly, expressed the idea that having children is the obvious goal of a family – something taken as “common sense”. For example, 38-year-old Kateryna from Kharkiv, who lives with her husband and their 15-year-old son, explained why she wants more children: “Well, you know, we live for the continuation of our lineage, of course. That’s why our children are the most important thing in life.” (I5-Kh) Polina, a 19-year-old student from Kharkiv with no partner or children, noted that for many couples, children are “already a logical progression in their relationship, as they have been together for a long time, and they already live together. If everything suits them, they can start having children, you know.” (III-Kh) Anastasia, a PhD working in education in Kyiv, is married and wants to have children but has hesitated due to the hardships of war, noted that military wives manage to conceive during soldiers’ vacations: “not necessarily to leave a legacy—I don't think that's the primary concern now—but in my view, the main purpose of a family is procreation.” (II5-Ky)

Schema 2: Necessary preconditions for having children: relationship and financial stability

Nearly all our interviewees said that both a strong relationship, often marriage, and financial stability are essential for childbearing. Asked about the ideal age for childbirth, Alyona, 31, from

Kharkiv—a biochemist before the war and now a volunteer awaiting her partner's return from the front—said the most important thing for having children is a reliable partner, “who will be there for you. Someone who is reliable and will help you in every way. That is, if you have a reliable man and you are sure of him, you can be unemployed, but he will provide funds for you.” (I4-Kh) Asked about the ideal age for having a child, Yana, 23, from Kyiv, married and the mother of a son born in 2022, used a motif that Perelli-Harris et al. (2024) reported from focus groups conducted with Ukrainians in 2021: “you must be fully aware, ‘standing firmly on your feet,’ basically... Well, at least having, I don't know, housing, some kind of financial stability. Having your husband around, of course.” (I21-Ky)

Schema 3: Time is running out. Our informants differ in their assessments of the optimal and maximum age to give birth; however, most expressed a sense of time running out, fear of becoming an “old mother,” and a perceived health-related age limit for childbearing. Childless bank worker Anna, 25, residing with her partner in Kyiv explained her view of an ideal time for giving birth: “Later [having children] will be harder, both the childbirth itself, and in principle, I don't want to be a full-fledged adult mother, ‘Old’, you know... [smiling].” (I16-Ky) Svitlana from Kharkiv, 37, married with a 16-year-old son, elaborated on her past concerns about potentially feeling “too old” for her child:

So, I guess [my husband and I] lived two years for ourselves, and were like, it's probably time to have a baby. Because we were neither young, nor old. Still, it's better to be a beautiful young mother than a ‘grandmother’. Something in the middle between a grandmother and a mother. Well, somehow, I wanted to fit in, that the child was not embarrassed of me. So that you could walk beside him and be perceived as a young person. To

understand [the kid's] conversations a little bit. (I9-Kh)

While discussing the various war-induced problems that hold women back, some informants mentioned age-related pressure. Nadiya, 35, from Kyiv—fully employed, married, and without children—said she had just one possible motivation to have a child during the invasion:

I'm at an age where I should do this. If at 30 I thought I had until 35, now I'm reading, researching information, and I understand that it's not just me. Okay—I have to give birth, but I also have a husband who is three years older than me, and even if he hasn't done a sperm analysis and all those things, I understand that with age, chances decrease. So, the only motivation could be that it's either now or there won't be such an opportunity in the future. (I13-Ky)

Schema 4: stigma around abortion. In line with general attitudes opposed to abortion (Musiyezdov 2020), participants widely regarded abortion as an intimate and unpleasant topic, and an undesirable choice. Olena, a 35-year-old accountant from Kyiv, married with a 12-year-old son, said no one talked about abortion, and she did not want to hear about it, and yet was sure that women continued to get abortions during the war. When asked about abortions within her circles, Olga, 29, a web-designer from Kyiv, married with an 8-year-old daughter, said abortions were “quite personal information, and not everyone wants to share it.” (I22-Ky) 35-year-old Liza from Kyiv, who had a 5-year-old son, shared how she convinced her friend not to go through with an abortion she had planned due to the war:

And [a friend], initially told me, ‘Liza, I don't want this, why did I get pregnant? Why do I need all of this?’ She started to panic when she was already one month pregnant, and

she shared it with me, and I said, ‘Just don't even think about doing something bad.’ I mean an abortion. I told her not to even consider it. She said, ‘What should I do, what if this war drags on?’ I said, ‘Believe. You need to believe in everything, believe only in the good.’ (I14-Ky)

Only one informant, Yulia, 32, married with a 7-year-old son, openly mentioned that she knew some women who had abortions since Russia’s invasion. At her job in a Kyiv beauty salon female clients often confided to her things they wouldn’t share with friends. Since the topic of abortion is generally avoided, this schema emerged tacitly. However, it can be assumed that the stigma around abortion functions alongside the other three schemas, which are explicitly or implicitly activated along the themes we outline in the next sections.

Main Themes

The full-scale invasion of Ukraine produced conflicting narratives among our interviewees, both discouraging (theme 1) and promoting childbearing (theme 2). The intersection of these opposing discourses creates ambiguities about childbearing (theme 3). These conflicting narratives arise from the interplay between individuals' lived experiences of war and reproductive cultural schemas characteristic of Ukrainian society.

Theme 1: Avoiding or terminating pregnancies due to war-induced stress and hardship: ‘Oh God, what do we do?’

Safety concerns and economic constraints as enduring sources of stress and anxiety

Due to the ongoing war, many of our interviewees linked childbearing during war with huge risks for physical and economic well-being that led women to delay or terminate pregnancies. Some reported health issues resulting from the associated stress, whose harmful implications for pregnancy Olga explained:

You worry about what will happen next, when things will settle down, and you can't stop worrying about it. Stress has a negative impact, especially in terms of pregnancy. What if you experience severe stress that leads to a miscarriage? It's a very tough situation. So, you want to feel safe, that everything is genuinely fine, and you can plan your pregnancy calmly, carry it to term, give birth to your child, and enjoy time with them without fear of having to hide or run due to impending danger. (I22-Ky)

Svitlana experienced regular shelling after she and her family returned to Kharkiv, having spent the initial months of the full-scale war in a village with relatives. She expressed amazement at women who were unafraid to give birth under such conditions, sharing her bewilderment at their 'ease':

Because they didn't fear for themselves, well... Again, there were active combat operations. You give birth, shots are fired, something lands nearby. Or there's a hospital, and you need to go there. That's all. Well, you can't just hide... I remember when we arrived back in Kharkiv in the fall, we used to run to the basement during every alarm, we were afraid. We were constantly running. At 11 o'clock in the evening, they would start shelling, and we would watch the clock, like, '11:01.' The first explosion somewhere, and we all rushed to the basement. But how were they [who gave birth] not afraid?! How did

they not think about it? What if there's shelling, and I'm about to give birth, then what?!"

(I9-Kh)

As mentioned above, similar anxieties led to abortions within the social circles of Yulia, the beauty specialist from Kyiv. Alongside persisting safety concerns, she highlighted the possible destruction of birth facilities as an additional significant risk that discourages women from giving birth:

I have several acquaintances and one client who had an abortion because they were afraid to give birth at this time. They, along with their partner, whether it's a boyfriend or a husband, agreed that they were not ready to take on the responsibility, and they were scared, so they decided to have an abortion (...) [It's scary] both giving birth and carrying a pregnancy because they saw news of maternity hospitals being bombed, or people losing their lives. Even though we have great air defense, and I absolutely adore our Ukrainian Armed Forces, we are not completely immune to such incidents. Therefore, women, not the majority but many women I know, had abortions because they were scared – scared of carrying a pregnancy, scared of giving birth, scared for their own future. You don't understand what the future holds for you in a situation like this, and bringing a child into this world seemed frightening to them. *(I19-Ky)*

For many informants, economic hardships caused by the war were a significant source of anxiety and uncertainty about the future, discouraging families from having children. Kateryna lost her trading business in Kharkiv due to the war and now works as a salesperson. Her husband is currently unemployed, and fear of conscription hinders his efforts to find a job. For Kateryna, reluctance to have a second child, which she deeply desires, is rooted in both her fear of violence and

the uncertainty of their economic situation: “Well, it is the *war*, and the fact that [my husband] doesn't have a job personally. I'm the one working for now, and then maybe I'll stop working. But how will he support the family?” (I5-Kh)

Victoria, 22, lives in Kyiv and currently works as an office manager in a consulting firm. At the onset of the full-scale war, she and her partner lost their jobs in film production and relocated to western Ukraine to seek safety and job opportunities. Financial insecurity, coupled with the potential inaccessibility of healthcare facilities, made the idea of having a child frightening:

When I left [to western Ukraine], as I mentioned, I didn't have my period for a couple of months. When my husband and I discussed it, he was very worried that I might be pregnant. There was no opportunity to check because the nearest hospital was about 30 kilometers away. The nearest pharmacy was far as well. We could only guess. He was so concerned, so nervous, and said, 'Oh God, what do we do?' What if I have to give birth in the basement? There won't be any access to hospitals or doctors. There's no work, and it's very expensive. The war certainly holds us back. (I18-Ky)

Echoing Svitlana, she expressed perplexity at those who have children in these circumstances: “I don't understand this enthusiasm for [giving birth]. It's really terrifying. Right now, you never know if you'll have a job tomorrow or if someone will attack you, or if you'll have to give birth in a basement. I don't really know what drives them to such extremes.” (I18-Ky)

Similarly, heightened stress, including economic concerns, deterred 26-year-old Alina from having another child. Currently on maternity leave to care for her child born in 2021, Alina lived in

Kyiv with her husband, who was employed. Alina believed that a “conscientious” approach to parenthood meant postponing during war.

[I]f we already have one child, thank God, then the moment of having another child is definitely postponed. Because...well, because of the war, of course. This whole situation with earning money. Again, from this situation, both women and men lose their health. Because on a moral...on some mental level, it's very difficult to cope with all of this. And children: first of all, they consider your condition very much. Of course, it all gets transmitted a lot. So, for example, what I observe in my environment, it seems to me that people who don't plan and have children very easily and simply, those are some unfortunate cases. And if we talk about conscientious people, then I'm sure that most will postpone this moment until better times. And when these better times will come, nobody knows, and nobody can tell you when they will come. (FG1-Ky)

Although generally stigmatized, abortion could be a last resort to avoid giving birth for those who became pregnant unexpectedly during the war. For example, although Olena from Kyiv was initially reluctant to discuss abortions, she later recalled an acquaintance's daughter had had one in March 2022 because “she had a child under the age of one and she was simply afraid to have a second,” (I23-Ky) due to the war and her husband's related job loss.

Separation from partners

The decision to delay pregnancy may also be related to the separation of partners, who may be serving in the military, hiding from conscription, or caring for homes or elderly relatives while women move to safer areas with children. Some husbands want to postpone childbearing while

living apart, because they want to be fully present in their family's life. Alyona's husband, serving at the front, encouraged her to wait:

Well, I would like to have a child. But again, my husband says no. [He says:] "We won't do anything right now, especially not get pregnant, because everything needs to be done only after victory. I want to see your belly grow, so we can measure whose is bigger. (...) I want to observe it myself. How he develops, how he grows, to see him walking. How he is inside there, and so on." He says, "I don't want you to do everything alone." (*I4-Kh*)

The fear that the war might leave children without a father also leads some couples to postpone children. Karina, a 35-year-old florist from Kyiv, whose husband was also at the front, recounted conversations with him:

Well, you see, since my husband is far away and we see each other maybe once a year—especially now, almost never—my husband and I discussed this topic. Yes, my husband deserves it; from him, you can have two or three children. We have one daughter, she's 8 now. And my husband said to me last time, 'you know, I'm just afraid that I won't come back, and you'll be left alone with two children. And I don't think that someone else's children will be needed later. Well, I mean, they won't be loved the way I would love them'. So, I don't know, maybe that's right. Just like, really, parents love their own children, a stranger might not necessarily be able to love them. (*FGI-Ky*)

Some women who already had one child emphasized the difficulties related to a second birth and how challenges associated with caring for two children without the father around increase emotional and even physical strain on women. Daria, 33, married, working as an accountant in real estate in Odesa:

It's unstable, scary. I live on the 18th floor of an 18-story building.¹ How can I run with two children [in case of a missile attack]? My child is 4.5 years old. I can't wake him up every night and run with him to the [underground] parking lot. And if a second baby is born, then what? Running around parking lots with little ones? No. And God forbid we need to leave [the city]. How do I get into a car with two children, how, what? No. (FG3-Od)

Traumatic experience of losing a child due to the war

Khrystyna, 34, is on maternity leave and studying to become a neuropsychologist. She lives with her 3-year-old son in Kyiv while her partner is at the front. Having already lost a newborn in the early days of the war, she wants to avoid another pregnancy while fighting continues:

I lost a newborn child due to certain moments of the war. Let's say I've already gone through it, almost a year has passed. This year, my parents fell ill due to all the complications of the war. So, I don't see anything better because of this war. I want it to end, I want our boys to come back... (*starts crying*). (...) Let's say, despite the war, for some reason, I

¹ The significance of residing on a high floor is magnified by frequent blackouts due to Russian attacks on power facilities, which render elevators inoperable and often prevent water from reaching above the lowest floors of a building. So, Daria here reflects on the challenge, known to many Ukrainians in large Ukrainian cities, of bringing two children down and then up 18 flights of stairs, due to air raid sirens on top of the many other reasons one would like to take one's children out of the apartment.

wouldn't say that the war pushed us, well, we just wanted a second child already. But circumstances led to us losing it. This year, I was honestly very unhappy about losing the child, and all these circumstances are adding up. There's fear, who knows what. I'm a bit like Alina, not ready. Let me at least take care of this child. And the second... It's a constant worry. (*FGI-Ky*)

In sum, overwhelming stress associated with physical and financial insecurity, as well as partner separation and even child loss, coursed through discussions about delaying or terminating pregnancies. Women feared lack of security for their children, either during pregnancy or after birth, and families' limited capacity to provide care. Separation of partners matters because both partners should engage emotionally and practically in raising their children, and it especially poses emotional and physical constraints for women who already have one child. Cultural schema 2, which emphasizes the precondition of a complete and financially stable family for parenthood, clearly shapes these narratives. Additionally, trauma from losing a child due to the war can heighten caution and deter future pregnancies.

Theme 2: Narratives that promote childbearing: If not now, when?

Living for today

As discussed above, our interviewees expressed fear, stress, and an increased sense of life's fragility; however, counterintuitively, this new awareness also brought out maternal instincts and a desire to accelerate the transition to motherhood. Oleksandra—26, currently unemployed, childless, living in Kharkiv with her husband (an online free-lance worker)—recounted the emergence of an instinctive desire to have a child:

I caught myself thinking about it about six months ago—how I suddenly wanted children! Well, it's probably on the level of instincts, I suppose. (...) [S]ome people might be afraid that they haven't done it earlier, like... how to say it, both being a mom and the war going on already, and it's uncertain what will happen, and... many haven't fulfilled themselves as mothers. (I7-Kh)

For Yana, who recently gave birth herself, the uncertainty had paradoxically created a sense that now is “the right time,” leading to an increase in pregnancies within her circle:

Many people have somehow started to view pregnancy more positively. Because if earlier, girls were somewhat afraid of it, they would postpone it, thinking it wasn't the right time yet, now it seems that everyone has started striving to get pregnant as soon as possible. (...) Well, as I mentioned, nobody knows what will happen tomorrow. The girls already believe it's time. (I21-Ky)

Already the mother of a teenager, Olena felt her values shift with the onset of the war, prompting her to set aside career ambitions in favor of expanding her family:

I want to give life to one more person. This is my dream, which I promised to myself after February 24th². (...) I believe that if God gives it to me, it will happen now. I won't wait for victory. (...) [In 2014] we were planning to have a second child. But then, somehow, we got caught up in our careers. I had a good job, and he did too. And somehow, our careers and routines took over. After the 24th, I realized that all material possessions

² Russia's full-scale invasion began on February 24, 2022.

are just nonsense. Honestly, it's true. I told myself - work can wait, so can a career. It's not waiting for us at home. At home, there are living people waiting for us. You know, as Leo Tolstoy said, 'Happy is he who is happy at home.' (I23-Ky)

Separation of partners due to their military service can also lead to pro-birth thinking. In contrast to the discussions about the disadvantages of raising a child without a husband, Oleksandra emphasizes the desire for someone to remain after him:

Many military wives get pregnant, a lot of them. Because I also think, well, there might be something like this: What if he doesn't come back? At least, if there's a child, it's his continuation. I think people might have these kinds of thoughts. And many think, why not now? What if tomorrow we are completely cut off, and we'll never have the opportunity to give birth? I think many people think like that (*smiled*). (I7-Kh)

Tetyana, 21, a medical lab nurse in Kharkiv, lives with her partner and his mother, described her friend's desire to continue the family lineage in the face of her partner's possible death in combat:

He's currently near Bakhmut³, he rarely comes home. And they need to have a family, there should be descendants. That's how it is, despite everything. (...) Well, again, I don't want to repeat myself, but nobody knows what will happen later. I mean, everyone is living for today. And no one is putting off anything for tomorrow or later. (I8-Kh)

³ A settlement in eastern Ukraine where fierce fighting took place at the time of the interview.

Some husbands on the front lines prioritize experiencing parenthood amidst the uncertainty of life. Yevhenia, 28, displaced from Donetsk after the 2014 invasion and now living in Kyiv with her partner, described how servicemen see their children's future as the very reason they are shedding blood:

[A]ll of my friends, however it may sound now, they all gave birth during the war. They used to be afraid to have children before. Their husbands are on the front line. (...) I asked them how come they were previously afraid to give birth, and now there's such a boom. They said, 'we understand that there may not be a next time'. They say, 'it's either now or never'. (...) When the men were rotating for a certain period, they said 'we understand that after us, someone will remain who will remember us and for whom we have something to fight for and live for'. (FGI-Ky)

We must live on

Routinization of war-induced hardships and uncertainty about when the war will end led some to plan or encourage childbearing. For many of our interviewees, new births represented a desired and long-awaited manifestation of life continuing despite the war. Lyudmyla from Kyiv, 36 and currently pregnant, describes how others react to her pregnancy:

Overall, it's positive. They offer support. Only once did I encounter a situation where a man condemned me and recommended that I leave the country. His opinion was that I should flee. However, generally speaking, people around us, especially our women, provide support and encouragement, wishing us luck. You can see that people smile, they are happy that life goes on and that children continue to be born. (FGI-Ky)

She also shared impressions from online communication with other would-be moms:

Being in the maternity chat room, I see many girls who plan to give birth or have already given birth, and I see from their messages how many girls are having children, not their first or second. They plan, they want it. And the war isn't something that stops them. On the contrary, for some reason, they said they want it. *If not now, when?* And the war could indeed be very prolonged. So, have a kid! (FGI-Ky)

In line with the theory that children help women cope with uncontrollable circumstances by creating meaning and contributing to their sense of identity, Lyudmyla noted that children motivate future-oriented thoughts:

[My pregnancy] was not planned, but perhaps such changes provide an impetus to think about the future. Despite our worries and the fact that this [war] won't end soon. But it gives such a stimulus, a push, to think about tomorrow. We still need to think about it, plan at least a little. Because, well, life can be long. We must not give up and still believe in the future and gradually create it here. (FGI-Ky)

Tetyana viewed childbirth as a way to return to 'normal' life:

We must continue to live, we must reproduce and in no way stand still. (...) On the fifth floor of our hospital there is a women's consultation, I see these mummies with bellies, all of them are happy, all of them are content. (...) People simply want to continue living, despite all this negativity. They simply try to somehow distance themselves from all this. (I8-Kh)

Some interviewees viewed the arrival of children in their circles as unrelated to the war, seeing it instead as a natural part of life. This perspective was shared by 20-year-old Feodosia, a student from Kyiv, who had no plans to have children in the near future:

Because in any case, everyone wants to have children, and the war doesn't affect, like, human instincts maybe. And it can actually bring families and people closer, if there's a child. And it might bring some joy to life as well. So, maybe that's why [people give birth these days]. (I17-Ky)

Such sentiments go hand in hand with the recognition of ongoing dangers and challenges. Sometimes the same statement contained both anxieties about childbirth during war and pro-birth arguments, especially during the focus groups. Initially agreeing that it is rational to postpone pregnancy plans during war, Yevhenia continued:

But on the other hand, none of us is immune to the fact that no one knows exactly when it will all end. You know, it's like the syndrome of postponed life. Everything for later, when better times come. Well, listen, you will never save up the amount of money you need for a child. Because prices are constantly rising. You're always putting something off. But if you consciously choose to be parents, then your attitude is completely different. (FG1-Ky)

Rita, 19, who worked as a leader of a children's choir in Kharkiv, was not ready to have children but knew many couples who gave birth during the war. For them, she believed, the war became a “catalyst” that “led to a reevaluation of values. They thought that there would be no ‘perfect’ time. There's no such thing as the perfect hour—exactly when the time will be right. So, if you

want a child, you can have one anytime” (FG2-Kh). Immediately after describing her trauma at losing a child and her consequent reluctance to have another, Khrystyna expressed joy about acquaintances’ pending births:

Currently, where I temporarily reside, many girls are giving birth. They are giving birth during the war. I am very happy about this. I love it when, let's say, women are not afraid, and families are not afraid to create a little happiness. Not just one, but second and third. And talking to moms who bring us little children, yes, 1.5-year-olds to these classes, and two-year-olds. They still have babies who have just appeared. They say, “*if not now, when?*” Who knows how long this war will last. Well, no one knows when it will end. And the family should be larger, stronger, well, so that there are more Ukrainians... (FG1-Ky)

Reviving the nation?

Like Khrystyna, others also framed having children as a patriotic act that would help preserve the nation. Currently pregnant Hanna from Kharkiv, 26, whose husband was at the front stated:

It's about families: we need to revive the nation (...), we need to have children. I know that there are a lot of pregnant women now, a lot indeed. And we need to revive. We won't give in, because Russia says we should all perish. They say, 'These Ukrainians should be killed even in the womb.' But we won't let that happen. (I2-Kh)

Hanna later mentioned a Telegram chat for pregnant women she had joined, where discussions about increasing the Ukrainian population were very common. Several interviewees also noted

Ukraine's demographic crisis was exacerbated by the growing number of war casualties and emigres. 39-year-old Inna from Kharkiv, who has a 15-year-old son and is not currently in a relationship, works as a nanny, advanced a patriotic pro-natalist argument:

So many young guys and girls are being taken from us by this terrible war. That's why no, there must be a [new] generation, we must have children, children are always a good thing. (...) [I]f a family (...) wants a child, and it happens during these times, even during wartime, it shouldn't be an obstacle. (...) It will increase our population. Only they should be born in Ukraine, here, in our country, Ukraine. They shouldn't leave; nobody should take them away (*laughs*)⁴. (I3-Kh)

Anastasia, who, like many, was ambiguous about her own reproductive plans, brought up the economic prosperity of the country as a motivation to deliver future specialists:

I believe that people are indeed having children, and that's wonderful. Because so many people have left our country for other countries, and it's uncertain how many will return, or if they'll return at all. To save and rebuild our country, we need people who will boost our economy, who... will go to school, to university, and who will later work. (I15-Ky)

Yet Anastasia then clarified that she does not think such patriotic motives are decisive for women contemplating pregnancy during the war: "I don't think people have children specifically to improve the demographic situation in the country... Well, no one really sets out with the goal

⁴ Although Inna laughs, she likely refers here to the fact that since the full-scale invasion Russia has kidnapped an estimated 19000 Ukrainian children and deported them to Russia to be re-educated as Russian citizens (see Raymond and Howarth 2025).

of doing it, to be honest. But it does indirectly, at least, have an impact on the demographic situation.” (*I15-Ky*)

Thus, patriotic sentiments may operate less by truly inspiring women than by justifying a personal desire to have a child in unsettled times. This is hinted at by Hanna, who just after talking about reviving the nation, revealed she had encountered criticism for getting pregnant during the war for reasons similar to those we discussed under theme 1:

I see a lot of people who are outraged by this—they don't understand why [we give birth during war]. Well, we're not asking for your money. We're not taking anything from your pocket. It's us who will be supporting our own child, spending money on them. And why it hurts our people so much, I don't know. ‘Where [will you] give birth?’, ‘it's not the right time for that now’, ‘why do it, have a child under these conditions?’ And then there will be a lot more [problems] after the war. Well, where to? And when? By the time I give birth, I will be 26. My husband will be 29. So, when? Well, the war has been going on for over a year now. So, what are we waiting for? (*I2-Kh*)

Hanna's prior deployment of patriotic pro-natalist discourse hints that national pride may legitimate individual decisions to have a child during war against criticisms, though here she ultimately activates other pro-childbearing schemas—the “clock is ticking” and “children-are-a-must”—both of which justify asking the rhetorical question: if not now, when? Thus, we caution against interpreting declarations of patriotic motives as evidence that they truly inspire women to have children during wartime (though we cannot rule it out). We suspect that patriotic arguments are utilized to counter criticisms based on the “necessary precondition” schema of a seemingly irrational decision to procreate despite war-induced risks.

Theme 3: Ambiguity: If God grants us a child...

Many participants discussed arguments both for and against having children during war, acknowledging that war produces financial stress and psychological trauma that discourage childbearing, while also arguing the necessity of, in effect, seizing the day, living in the moment, and having children now, before it's too late. These seemingly contradictory discourses illustrate how cognitive processes do not always unspool in straight, orderly narrative threads, but can weave in and out of different thoughts and expressions, yielding ambiguity. For example, Karina, whose husband was serving at the front, described how she struggled with thinking about having another child:

[U]nfortunately, having children right now, well, for me it's just... well, if God grants us a child, of course I will give birth. That won't be a problem. But consciously deciding to go for it now, I can't bear it. Firstly, I'm always on edge. Secondly, I always think about my husband. And thirdly, well, we already have one child. I need to dedicate time. Well, somehow, I'm living for two now. I am both a father and a mother to my daughter. Therefore, I am simply not capable emotionally of giving proper attention to another child right now. So, for me, if a second child happens, and I get pregnant, then yes, I will give birth. But actively wanting it and working towards it, no, unfortunately not. (*FGI-Ky*)

Anastasia stopped planning pregnancy when the war erupted, but she would be happy to conceive as she still aspires to motherhood:

It was the time leading up to the defense of my dissertation, and I really wanted to become a mother before that, around 2022 or early 2023. But after the full-scale invasion,

my plans changed dramatically. At this moment, if it happens, I will be very happy. I will be very grateful because I would like to experience the feelings of motherhood. But as of now, we don't have a strong desire to actively track ovulation or plan it all out. (*I15-Ky*)

Tetyana, on the other hand, was currently trying to get pregnant. She believed that if a woman conceived from a supportive partner, she should keep the child because all the hardships were manageable:

Fear, anxiety about not being able to carry a child, again due to all stresses. Fear of uncertainty, of what happens next. Women wonder whether they'll be able to give birth or raise the child. Will their husband stay with them, or whoever the partner is? I think it is simply fear that drives this all. (...) Well, as you say, if there was support [from a partner], then probably a woman would not have such thoughts. Well, I think so. Because if God gives you a child, then you will manage all troubles anyway ... all troubles that may arise. (*I8-Kh*)

Liza's narrative, too, supports the idea that women should not terminate pregnancy despite the war-induced risks, if it is conceived "in love":

I was planning to, but thanks to having an IUD in place, I still said no. I won't remove anything for now. Because I want everything to be calm. So that my nervous system is calm. So that my child is calm, and so on. So that everything is as I planned with my husband. But should a pregnancy happen, right—if it happens by chance, unexpectedly, like

with my closest friend (well, it happened), then sorry. Keep the pregnancy. Keep it, because no matter what, if you love someone, you want this child. And the only reason is the war? Well, it happened, you got pregnant. Just hold on, we'll all help. (I14-Ky)

Beauty specialist Yulia maintained that in her circles, some people did choose to take advantage of the opportunity for parenthood, as the desired pregnancy occurred only after the full-scale invasion:

Even surprisingly, among my acquaintances, there are people who, on the contrary, said, "Well, it hadn't worked out [earlier], but then, bam, I got pregnant [during the war]. What should we do? No, this is a long-awaited pregnancy; on the contrary, we will give birth." (I19-Ky)

Some interviewees noted that pregnancy instilled a sense of calm and acceptance in women's minds, prompting them to reassess their ability to meet the challenges of the war. Valeria, 35, from Kharkiv, a married mother of a 9-year-old daughter, believed the decision to have children during wartime depends on whether partners can support one another emotionally and physically. However, she also sees pregnancy itself as a source of inner strength to handle the adversities of the uncertain times.

I think it all depends on the relationships within the family; or if the husband is really at the front, then yes, it will be very difficult to be alone with a child. It's a psychological state, with the child constantly in your arms. No help, no parents nearby. Friends also, they won't be with you constantly. And you're alone, all alone. Well, it's very difficult. I believe that, of course, it's better when your husband is by your side, supporting you in

this. He'll somehow... so that you can rest a little from the child, get a couple of hours of sleep. Because it's very difficult alone, very. But if you get pregnant, then all the problems are resolved (*smiles*). Because a child is happiness, it's joy. When the child arrives, you already know how to solve these problems. When there's no child, you think, oh, this is very hard, this is very problematic. But when the child appears, well, everything falls into place. For us women, Ukrainian women, it's all manageable, I think. If there's a desire. (*FG2-Kh*)

Khrystyna, who had lost her newborn second child due to the war, also pointed to the sense of optimism one gains during pregnancy:

[W]hen you're pregnant, you somehow see things differently, think differently, you notice everything. You become more calm, thoughtful. Yes, there's a war, but nothing terrible, we'll get through it now. Just like I did with my child. But things didn't work out as planned. (*FG1-Ky*)

Initial ambiguity and transition to pro-birth thinking is reflected in Lyudmyla's statement, who was currently pregnant:

Well, my situation was such that I didn't plan to get pregnant during the war. I understood that it wasn't the right time and there were risks. Although, being in a relationship, I also understood that I had factors against me, like my age and health situation. I could wait until the war ended and never experience the joy of motherhood. On the other hand, there's the war and understanding the risks. But when it happened, even though it wasn't planned, you're already an adult and even with the war, you're psychologically strong. If

you survive the beginning of the war, especially those first 2-3 months, then you can probably handle everything. And now I understand that it's a gift. Because in this state, you're still calmer. You think about the future. You don't think about the war every minute. You have different priorities, and that helps you keep going. (*FGI-Ky*)

Therefore, aggregate level fertility measures during the war may conceal ambiguity in the decision-making. Many interviewees were not planning or actively trying to get pregnant due to the acknowledged risks, but considered childbirth necessary if pregnancy did occur, in line with the schemas of the importance of parenthood, looming age limits and the undesirability of abortions. The state of pregnancy itself can often provide positive reassessment of circumstances and change one's thinking to pro-birth.

Conclusion

The ongoing full-scale war in Ukraine has brought new challenges for the Ukrainian population, which was already struggling with a fertility crisis exacerbated by the conflict in the Donbas and COVID-19 pandemic. However, this war has also provided an opportunity to deepen the study of wartime fertility, moving beyond retrospective theorizing and instead engaging with the lived experiences and thought processes of individuals. In addition to addressing gaps resulting from the dominant focus of prior studies on high-fertility societies, we argue that existing studies overlook the fact that war doesn't occur in a vacuum — it enters the ideational environment shaped by pre-existing cultural schemas that influence fertility decision-making in peacetime. The way these schemas interact with the wartime context — the patterns of reasoning they produce — is what points to the new fertility strategies individuals develop under conditions of ongoing war. Our paper shows that these strategies — as they appear in how people talk about them — are

more diverse and open-ended than what quantitative research tends to capture. By disrupting the normal course of life, the dangers and uncertainties of war compel individuals to draw selectively from an internally inconsistent set of cultural schemas about childbearing, which can result in counterintuitive cognitive paths or persistent ambiguities. One of the key advantages of a qualitative study in the context of war is that we can examine these patterns directly, rather than theorize about possible motivations retrospectively and without contextual grounding. The alternative we propose, then, is to study how people reason about childbearing in order to make statistical analyses more culturally sensitive and, ultimately, more accurate.

To guide our analysis, we identified four context-specific cultural schemas recognized in existing research and widely instrumentalized in the reasoning of our informants. The activation of these schemas in our interviews reveals three overarching patterns of how the war in Ukraine shapes women's reproductive thinking. The schema that childbearing requires a stable relationship and financial security is activated in reflections on the reluctance to have children during the war. Besides immediate safety concerns, many informants emphasized economic hardships, as well as being away from or potentially losing a partner, as sources of stress incompatible with healthy pregnancies, early child development, and adequate caregiving.

Alongside this expected reasoning, however, the awareness of life's fragility fosters a desire to experience the joy of parenthood before the opportunity is lost. The rationales behind this include the need to continue one's lineage, to preserve a "part" of a beloved partner in the event of their death, or simply to act on instinct. Additionally, uncertainty about when the war will end motivates people to pursue a "normal" life, to create meaning, and to sustain hope—by expand-

ing their own families or witnessing this expansion within their social circles. This counterintuitive pro-birth rhetoric openly draws on the schema of having children as an inherent life purpose, while also subtly invoking the “ticking clock” schema, which emphasizes the risks of becoming an “older mother” or losing the chance to parent due to declining health. Some respondents referenced patriotic rhetoric, suggesting that Ukrainian babies are needed to “revive the nation.”

However, we found insufficient evidence to support nationalist sentiment as an independent motive. Rather, references to the demographic crisis and national renewal appeared to function as rhetorical tools that women used to reconcile the tension between their desire to reproduce and the realities of war.

In addition to invoking two competing discourses, the inconsistency of schemas also gives rise to ambiguity, in which pregnancy is neither actively planned nor deliberately avoided but rather left to fate (similar to postponement narratives in Lebano and Jamieson 2020). In such cases, the schema “abortion is bad” — particularly when the pregnancy involves a beloved partner — comes into play, encouraging individuals to carry an unplanned pregnancy to term. Besides, some testimonies suggest that pregnancy itself can foster a more optimistic outlook, boosting confidence in one's ability to overcome challenges of war and thereby shifting reasoning in favor of childbearing. In other words, individuals may hold both negative and positive views on pregnancy simultaneously and may change their opinions over time — an important nuance often overlooked in quantitative analyses that assume a strictly binary logic.

Our research has two major limitations. First, including men, women from rural areas, families with multiple children, and Ukrainian refugees would have allowed for a more comprehensive

and nuanced reconstruction of the ideational landscape in which the war unfolds, and reproductive decisions are made. Second, we are unable to assess how widespread the schema-related considerations we identified are within the broader population, or to what extent particular schemas predict actual reproductive behavior. However, our aim is not to provide evidence supporting specific mechanisms behind the war's impact on fertility, as previously theorized. Rather, our contribution lies in drawing attention to the ways in which the universe of meanings that people attach to their reproductive behavior becomes relevant—variably, inconsistently, ambiguously, yet meaningfully—when a society is experiencing an armed conflict.

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