been the beneficiary of some of the best long term research planning in the history of demography. It is in direct continuity with the five volume Indianapolis Study of the Social and Psychological Factors Affecting Fertility which was itself a monument to team research. The Princeton Study can be said to have been conceived in 1952 at a Milbank Fund Round Table on current fertility by the many distinguished social scientists invited to the Fund's annual conference. Included in the group were many former members of the research team of the Indianapolis Study who formed over the next two years a steering committee to guide the Princeton Study through the problem formulation and study design phases of the project. The quality of the first report reflects the thoughtful guidance and cogent suggestions of these scholars and the many successes and disappointments of the pioneer work in Indianapolis.

Because the first studies of the factors affecting fertility focused largely on completed family size, they did not successfully anticipate the dramatic changes in family size preferences and fertility performance of the war and postwar years. The Princeton Study complements this early work by focusing on families in the midst of the family building process in order to throw light on the processes of family building. The researchers have accordingly singled out one particular parity and birth interval for study, couples having two children only, whose second child was born in September, 1956. The first interviews were held five to seven months after the birth of the second child. In 1960 the couples were again interviewed to ascertain the factors which led some to have added children and others to limit further child bearing for the 3½ year period. The volume I am reviewing contains only the findings from the 1957 interviews.

The study is introduced by a series of chapters on background and objectives, sample design and methodology which are enlivened by wry humor as the choices facing the researchers are reviewed. The costs and expected returns from the strategies adopted are candidly appraised by these seasoned researchers. Their research procedures are described in sufficient detail that replication of the study by others would prove no problem (finances being available, for this is an expensive study). The
dependent variables of the study are painstakingly defined and
the parameters of fertility behavior of the sample clearly speci-
ified including its fecundity, contraceptive practices, birth inter-
vals, preferences as to spacing, and desired family size. A chap-
ter on concepts and hypotheses provides the theoretical context
for the study and a statement of anticipated relationships. Sub-
sequently the success and failure of each of the principal ex-
planatory variables in accounting for the variance in fertility
behavior is allocated a chapter of exposition. The section on
explanation concludes with an elaborate multivariate analysis
of the relative contributions of each of the principal compo-
nents of current fertility behavior.

Although changes occurred in the theoretical model utilized
by the researchers from the earliest planning sessions with the
steering committee to the final research design many of the
original hypotheses survived. In contrast with its predecessor,
the Indianapolis Study, the Princeton Study shows great sensi-
tivity to the issues of theory. To be sure, they found no one all
inclusive theory which would justify a tight systematic model
but appear to have settled for what Lazarsfeld and others have
called an “accounting model” which remains open to any sig-
nificant block of variables that may increase the multiple power
of the model to account for the variance in the dependent vari-
able. They remind us that their framework is heuristic rather
than systematic, that the hypotheses “flow from a variety of
empirical and theoretical sources rather than from one unified
theory and they serve the function of opening up the problem
for exploration in terms of a wide range of variables rather than
of providing a test of a restricted number of hypotheses”
(pp. 166–167). In a summary table (pp. 164–165) giving the
conceptual organization of the independent variables the au-
thors allocate sixty-four variables to four major content areas:
religion, socio-economic status, residence and family and fur-
ther reclassify these as to whether or not they reflect primarily
socio-cultural environment or personal orientations. In gen-
eral, the socio-cultural environment is viewed as setting limits
on the range of other values and behavior with which different
family-size preferences may be compatible; that is, as the set
of social conditions within which and to which the individual
must react. These conditions determine the nature and the magnitude of the "costs" involved if the individuals select the option of a larger family rather than a small one. Foremost among the general assumptions of the model is what may be called the "assumption of compatibility." This states that a particular pattern of fertility performance and control depends on the extent to which having another child (or a certain number of children) is compatible with other life values and interests (p. 167).

The population sampled in order to focus in depth on current reproductive decisions is a highly specialized one—white, born in the continental United States, once-married, still living together and with no early expectation of being separated, living in one of seven great metropolitan areas of 2,000,000 or over, and having had their second birth in September 1956. Altogether 1,165 couples make up the study sample. While recognizing the advantages of such a highly specialized sample for focusing upon the factors playing upon the family in arriving at discrete decisions about changing family size, the disadvantages should also be evident—there can be no comparisons between couples at different stages of the family building process as to their reactions to the same conditions or events, and the range in fertility performance in taking a single parity is reduced to zero. To be sure, the authors still have as dependent variables, preferred family size, preferred spacing practices, birth intervals and contraceptive practice and success.

Findings from the study require 132 tables and defy easy summarization. As highlights it may be noted that religion and religiousness appear most influential in explaining desired family size and fertility planning success. Socio-economic variables are not as closely linked with fertility desires in this study as in its predecessor. The hypotheses about mobility effects are thoroughly explored and are found in the predicted direction but the magnitude of the relationships are extremely small. Similarly, the several personality measures and the measures of internal family structure, account for only a small proportion of the variance in number of children desired.

The authors suggest that multidimensional measures such as religion, urban background, ethnic background, and education,
since they summarize patterns of living instead of a single aspect of interaction or a single attitudinal component, promise to be the best single predictors of fertility. This may indeed be true but what does it profit us to predict if we have no good theoretical purchase on the interrelationships between the predictors and the criterion variables? What interrelationships do these gross situational variables mask which need to be specified and analyzed if we are to understand the dynamics of fertility decisions? The authors write, "Religion may include authority patterns, modes of adjustment, the 'atmosphere' in the family group, orientation toward children, acceptance of traditional familial roles and the like" (p. 298). Yet they do not take the opportunity to make the necessary specifications from their data to check on this provocative interpretation. There is some unfinished work in following up on these interpretations specifying more adequately the interrelationships between the multidimensional measures of religion, residence, ethnic background and education and the intervening variables of value orientations and family organization.

The authors close their report with a tantalizing description of the next phase of the study. The longitudinal design facilitates not only the study of the course of fertility, whether or not to add further children, but also permits the introduction of new variables not clearly foreseen in the first interviews. The publishers might well have included an order form for the next volume on the dust jacket of this report. The high quality of the present publication and the intriguing promise of the second installment would surely produce a large volume of advance orders.

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