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YOUNG MOTHERS' FERTILITY DECISIONS AND IDEAL FAMILY SIZE IN PERI-URBAN INDONESIA

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Abstract

This study addresses the growing demographic transition in peri-urban Indonesia, where changing socio-economic conditions increasingly shape fertility behaviour yet remain underexplored from women's subjective perspectives. It examines how young mothers construct their perceptions of ideal family size and make fertility decisions in Depok Subdistrict, Sleman Regency, Special Region of Yogyakarta. Using a descriptive qualitative approach, the research involved married women aged 20–35 years with one or two children. Data were collected through in-depth interviews in Condongcatur and Maguwoharjo villages and analysed thematically.

Findings indicate that most respondents perceive two children as the ideal family size, driven primarily by economic considerations, aspirations for quality childcare, and the need to balance reproductive and productive roles. Contextual variations arise from gender composition preferences and emotional motivations such as sibling companionship. Fertility decisions are influenced by household economic conditions, educational attainment, employment status, and the perceived function of family planning as a birth-spacing mechanism rather than a family-size determinant. Social pressure from extended families remains limited.

This study contributes novel qualitative evidence on fertility norm internalisation in peri-urban contexts, highlighting how economic rationality increasingly replaces traditional pronatalist influences in shaping reproductive choices. It offers policy-relevant insights for context-sensitive family planning interventions.

Keywords: *young mothers; ideal family size; fertility decisions; family planning; peri-urban Indonesia*

1. Introduction

Fertility refers to the biological ability of an individual to bear children and, in demographic terms, to the number of live births within a population. Fertility also encompasses preferences regarding the number of children within a family and the contraceptive practices adopted by couples. It is profoundly influenced by prevailing social, economic, and cultural factors within a society. In fertility studies, it is essential to understand not only the biological dimensions but also the social aspects that shape decisions regarding the number of children (Bongaarts & Casterline, 2013).

Indonesia's demographic context shows a significant downward trend in fertility in recent decades. Indonesia's Total Fertility Rate (TFR) has declined dramatically from over 5 children per woman in the early 1970s to approximately 2.4–2.6 children per woman of

reproductive age, according to the latest census and Demographic and Health Survey data, reflecting the success of family planning programs and a shift in social values toward desired childbearing (Ekoriano et al., 2025). At the provincial level, the Special Region of Yogyakarta (DIY) recorded a relatively low fertility rate of approximately 1.8 children per woman of reproductive age, lower than the national average (Rahmadewi, R., & Asih, L.,2011). Projection data in Sleman Regency also show a stable TFR below the population replacement rate (≈1.7-1.8 children), indicating internalization of small family norms in the local context (Bappeda Kabupaten Sleman, 2015). In addition, the number of women of reproductive age (15–49 years) in Sleman reached around 278,839 people, with a high proportion of the productive age population in DIY (±68.4%), which shows the significant role of socio-economic and educational aspects in determining fertility preferences (Population and Civil Registration Office of Sleman Regency, 2022).

Generally, the terms desired number of children and ideal number of children are used interchangeably, though they differ slightly in nuance. The desired number of children reflects parents' personal wishes or aspirations concerning how many children they would like to have usually shaped by personal, social, economic, and cultural factors. In contrast, the ideal number of children refers to the socially or culturally defined notion of what constitutes an appropriate or optimal family size. While the former highlights personal preferences, the latter represents broader societal or cultural norms. In this study, both concepts are examined simultaneously covering individual preferences as well as socially constructed ideals regarding family size.

Overall, the ideal number of children is neither fixed nor universal. It is influenced by multiple factors economic, cultural, and social that together shape how families and communities view the notion of an "ideal" family size. Various theories suggest that decisions concerning the number of children are deeply influenced by environmental conditions and social values. Consequently, perceptions of the ideal family size are relative and vary across individuals and communities. With the evolution of government policies promoting family welfare and improving quality of life, many countries have shifted towards smaller family norms typically two children as the standard although this pattern does not apply universally.

The Demographic Transition Theory explains changes in fertility, mortality, and migration patterns associated with modernisation. In this context, fertility decline often occurs alongside social and economic transformations such as increasing urbanisation, rising education levels, and greater employment opportunities for women (Notestein, 1945). The Value of Children Theory posits that parental preferences for family size are influenced by the perceived economic and social value of children. In many societies, children are regarded as valuable resources both as contributors to household labour and as support in old age (Demeny, 1987). This theory also highlights how gender roles influence reproductive decisions, where women often face the dual challenge of balancing reproductive and productive roles. Such shifts in women's roles contribute to changes in fertility patterns (Barker, 2007).

Previous research on fertility in urban and peri-urban settings indicates a transformation in preferences for the number of children. A study by Suryadarma et al. (2014) in Jakarta found that higher levels of female education are associated with lower fertility preferences. Similarly, Setiawan and Pratama (2017) in Yogyakarta reported that economic and educational factors play a significant role in determining family size decisions.

The changing mindset among urban communities regarding family and fertility reflects an ongoing shift in values towards smaller family sizes. In areas such as Depok Subdistrict, Sleman Regency a peri-urban educational hub young mothers face the dual challenge of balancing their reproductive and productive roles. With growing educational attainment, increased health awareness, and

greater female participation in the workforce, fertility preferences tend to decline. Nevertheless, social, cultural, and familial realities continue to shape reproductive decisions.

This study seeks to explore young mothers' perceptions of the ideal number of children and their fertility practices in Depok Subdistrict. The topic is highly relevant in the context of Indonesia's social and health development discourse. In this area, young mothers' perceptions regarding ideal family size and fertility decisions are influenced by multiple factors, including education, economy, culture, and government family planning policies. Previous studies have demonstrated that perceptions of the ideal number of children strongly influence fertility rates (Kurniawan, 2018). In Indonesia, declining fertility rates are often associated with shifting social values and increasing awareness of family quality of life, which shape the number of children couples desire (Hermawan, 2019).

Social and economic factors serve as key determinants of young mothers' decisions regarding family size. On one hand, the desire to ensure a better quality of life for their children motivates smaller family preferences; on the other, economic constraints and career considerations often limit the number of children (Suryanto & Pramono, 2020). With the implementation of Indonesia's family planning programme, societal perceptions of ideal family size have begun to change, though local variations remain, particularly in peri-urban areas like Depok (Yuliana, 2021). Studies have also revealed a gap between government policy and actual practices related to fertility and family size decisions (Dewi & Anwar, 2020). Despite policy efforts to reduce birth rates, some couples continue to desire larger families, influenced by their social and cultural backgrounds.

This study therefore aims to identify and analyse young mothers' perceptions of the ideal number of children and the factors shaping their fertility decisions in Depok Subdistrict, Sleman Regency. Changes in young mothers' perspectives on fertility and family size have significant implications for family planning and socio-economic development. The study offers insights that can inform more effective local family planning policies. By doing so, it contributes to understanding how social perceptions and family planning policies influence fertility patterns in Indonesian society (Rahmawati & Sari, 2022).

This topic also aligns with the Sustainable Development Goals (SDGs), particularly Goal 3: Good Health and Well-being. It is closely related to reproductive health and the well-being of young mothers and their families. Perceptions of the ideal number of children reflect women's awareness of reproductive health, access to family planning services, and informed decision-making in managing healthy family sizes. Reducing unplanned births and supporting effective family planning contribute to better maternal and child health outcomes while preventing the risks associated with high-risk pregnancies.

2. Research Methodology

This study aims to identify and analyse young mothers' perceptions of the ideal number of children within the family and the factors influencing their preferences. Such perceptions are often shaped by a complex interplay of social, cultural, economic, and educational aspects that collectively construct their understanding of what constitutes an ideal family size.

A descriptive qualitative approach was employed to provide a detailed portrayal of the phenomena occurring within the community. The qualitative method enables researchers to gain an in-depth understanding of the perceptions, experiences, and subjective viewpoints of the participants involved. Through a descriptive lens, this study seeks to present a systematic and comprehensive depiction of the observed realities, ensuring that the findings authentically reflect the conditions in the field.

The research was conducted in Depok Subdistrict, Sleman Regency, focusing

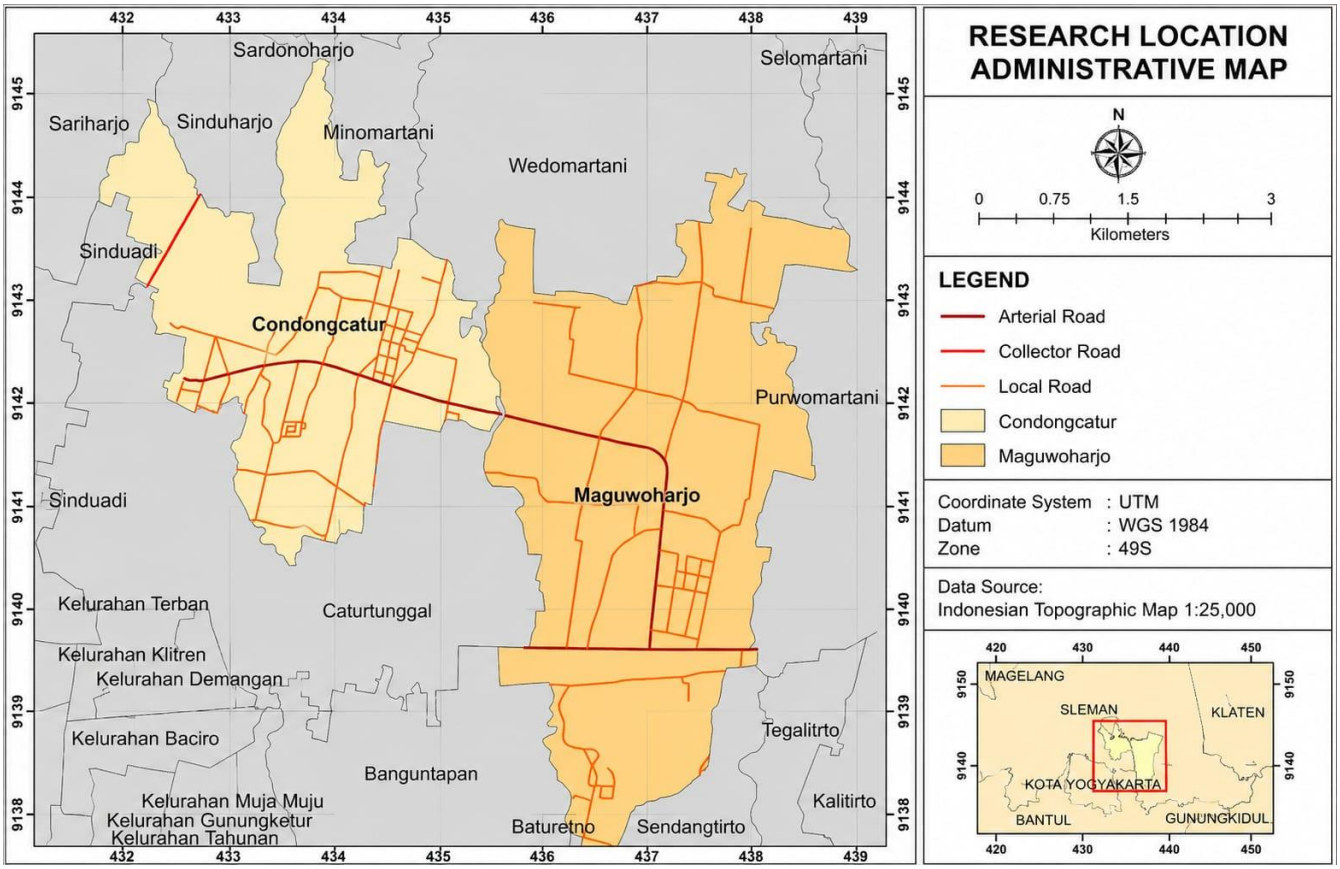

Figure 1. **Research Location Map**

Source: Author, 2025

specifically on the villages of Condongcatur and Maguwoharjo. These locations were selected due to their distinctive social and demographic characteristics, which are relevant to the study's focus on young, married women of reproductive age who have one or two children.

The selection of the research location was based on the consideration that the two villages Condongcatur and Maguwoharjo possess demographic and social characteristics relevant to the study's focus, namely young, married women of reproductive age who already have children. These areas also exhibit diverse social dynamics, allowing for more representative data collection related to the research topic.

In the context of exploring young mothers' perceptions in Depok Subdistrict, the selection of study sites was refined to ensure that the sample accurately represented the population. Depok, as a rapidly developing peri-urban area, demonstrates socio-cultural and economic dynamics highly relevant to this study. The area is recognised as an educational hub and hosts a large population of young mothers navigating the balance between their reproductive and productive roles making it an ideal setting for understanding evolving perceptions of ideal family size and fertility.

In terms of spatial interaction, this refers to how the physical and social spaces within Depok influence young mothers' perceptions. Factors such as proximity to educational centres, access to healthcare services, and the presence of family planning programmes interact with how these women conceptualise the ideal number of children. These spatial interactions create a rich social context that shapes fertility-related decisions.

To ensure validity, participants were required to have lived in Depok for at least one year, ensuring they possessed adequate familiarity with the area's socio-cultural and economic environment. This duration also allowed young mothers to adapt to local conditions that might influence their fertility-related decisions, thereby yielding more reliable and contextually grounded insights.

Data Collection and Participants

This study involved 20 informants, consisting of married young mothers aged 20–35 years who had one or two children and resided in Condongcatur and Maguwoharjo villages, Depok Subdistrict, Sleman Regency. Informants were selected using purposive sampling to capture variations in educational background, employment status, and household economic conditions.

Primary data were obtained through in-depth semi-structured interviews, which were audio-recorded with participants' consent to ensure accuracy and completeness of responses. Each interview lasted approximately 45–90 minutes.

Participants and Sampling Criteria

The study involved young mothers aged 20–35 years who were married and had one to two children. All participants were residents of Condongcatur or Maguwoharjo and had lived there for at least one year. These criteria ensured that participants had sufficient experience interacting with the local social and cultural environment and could provide relevant insights into the topic under investigation.

To achieve representative and diverse perspectives, the following mapping steps were applied:

1. Representation Criteria: Participants were selected to reflect variations in social, cultural, economic, and educational backgrounds. For instance, young mothers with low, medium, and high educational attainment, as well as those working in formal and informal sectors, were included to capture diverse views of ideal family size.

2. Spatial Variation: Sampling considered differences between Condongcatur and Maguwoharjo, as each village possesses unique socio-economic dynamics. This comparison enhanced the depth of understanding regarding local factors shaping perceptions of ideal family size.

3. Experience-Based Mapping: Beyond demographic diversity, participants were mapped according to experience such as first-time mothers compared with those having two children to capture variation in perceptions influenced by motherhood stages.

Bias Mitigation Strategies

To minimise potential bias particularly concerning ideal family size among mothers who already had children several strategies were employed:

1. In-depth Semi-Structured Interviews: This technique enabled open-ended discussions that encouraged participants to express their thoughts freely, avoiding the imposition of pre-existing frameworks or assumptions.

2. Understanding Perceptual Change: Participants were encouraged to reflect on how their perceptions of ideal family size evolved before and after becoming mothers, offering insight into how personal experiences shape reproductive choices.

3. Avoiding Overgeneralisation: The researcher remained cautious not to assume uniformity among young mothers' perceptions. By examining variables such as education, occupation, and socio-economic background, the study identified specific factors influencing fertility-related attitudes.

Research Novelty

To highlight the originality of the study, several aspects distinguish it from previous research:

1. Focus on Young Mothers in Peri-Urban Areas: This study concentrates on Depok Subdistrict, a peri-urban and educational hub with unique social dynamics compared to urban or rural contexts an area rarely examined in prior fertility studies.

2. In-depth Qualitative Approach: Employing a descriptive qualitative method with in-depth interviews allows for a richer exploration of subjective experiences, unlike previous research that predominantly adopted quantitative approaches.

3. Perceptual Change After Marriage and Childbearing: Unlike many studies focusing on pre-marital fertility intentions, this research examines how motherhood experiences reshape perceptions of ideal family size.

4. Spatial Interaction and Fertility Perceptions: This study emphasises how spatial factors such as access to education, employment, and healthcare interact with fertility perceptions, a dimension rarely addressed in earlier literature.

These elements contribute to a more nuanced understanding of fertility decision-making among young mothers in peri-urban Indonesia, offering new insights into the interplay between space, gender, and reproductive behaviour.

Data Collection Techniques

To obtain the necessary data, several techniques were employed:

1. In-depth Interviews: The primary data collection method involved semi-structured interviews designed to explore participants' experiences, perceptions, and personal reflections in depth. Open-ended questions provided flexibility and encouraged natural, detailed responses.

2. Audio Recording and Transcription: All interviews were audio-recorded (with participants' consent) to ensure accuracy and completeness of information. The recordings were subsequently transcribed verbatim to facilitate data analysis.

Data Processing and Analysis

All audio recordings were transcribed verbatim to produce complete qualitative text data. The analysis was conducted manually without qualitative data analysis software such as NVivo or Atlas.ti, following a systematic thematic analysis procedure to maintain analytical rigour.

The analytical steps included:

1. Data familiarisation through repeated reading of transcripts

2. Open coding, identifying meaningful units related to fertility perceptions and decision-making

3. Categorisation of codes into broader conceptual groups

4. Theme development, synthesising patterns across informants

5. Interpretative analysis, linking empirical findings with fertility and family planning theories

To enhance trustworthiness, the study applied triangulation across informants, maintained an audit trail of coding decisions, and conducted member checking with selected participants to confirm the accuracy of interpretations.

The collected data were analysed through a series of interrelated steps data reduction, categorisation, theme extraction, and interpretation:

1. Data Reduction: Irrelevant or non-essential data were excluded to focus on information directly aligned with the study's objectives.

2. Categorisation: Relevant data were grouped into thematic categories based on similarities and recurring patterns identified in the interview transcripts.

3. Theme Extraction: From these categories, broader and more meaningful themes were derived to address the central research questions.

4. Interpretation: Finally, the researcher interpreted the themes in light of relevant theories and literature, providing a deeper understanding of the social phenomena under investigation.

Credibility was ensured through prolonged engagement in the field and iterative data comparison. Dependability and confirmability were strengthened by documenting analytical steps and preserving original transcripts as reference material.

3. Results and Discussion

Young Mothers' Perceptions of the Ideal Number of Children

The main finding from both study locations Maguwoharjo and Condongcatur is the dominance of the "two children are enough" norm. Most respondents emphasised that two children allow families to balance economic stability and quality education, as reflected in statements such as *"Two children is ideal; their needs and education can be fulfilled"* [01CA] and *"Given the current situation, the ideal number of children is two"* [01MH].

This perception illustrates how young mothers prioritise family welfare and educational aspirations within broader socio-economic constraints. Parental education and household income strongly shape these fertility preferences, influencing both desired family size and future-oriented planning (Guntoro & Sholekhah, 2023). Consistent with fertility preference theory, education, employment, economic valuation of children, and women's social roles remain central determinants (Goldstein et al., 2003).

Although two children represent the dominant ideal, minor contextual variations were observed. Some mothers expressed flexibility based on financial capacity (*"one to two children, depending on finances"* [02CA]), while others preferred three children for emotional or relational balance (*"three bring balance"* [06CA]). These nuances indicate that education, economy, and local traditions continue to mediate fertility reasoning (Yashati & Yuliarmi, 2025), underscoring the importance of community-sensitive family planning strategies. Cultural norms remain influential, although their form has shifted. While large families once symbolised social prestige in many societies, contemporary contexts increasingly favour smaller families due to economic pressure and work–life balance concerns (Lesthaeghe, 2010). Gender composition and sibling companionship also shaped decisions. Several mothers expressed a preference for a balanced family (*"one boy and one girl"* [02MH]) or emotional support among siblings (*"they can accompany each other"* [10CA]). In some cases, a third child was pursued to achieve a desired gender (*"to have a daughter"* [08CA]). These motivations demonstrate that fertility decisions are shaped not only by economic logic but also by emotional and relational considerations.

Overall, the two-child ideal reflects the strong internalisation of the small-family norm grounded in economic rationality and quality-of-care priorities. Deviations from this norm ranging from one to three children were primarily driven by financial capacity, emotional well-being, gender balance, and post-childbirth experiences that reshaped parental goals. These patterns confirm that fertility preferences are dynamic, evolving alongside household realities and lived experiences rather than being fixed numerical targets.

Socio-Economic Factors Influencing Fertility Preferences

Socio-economic conditions particularly household income, education, and employment strongly shaped fertility decisions. Economic pressure was the most dominant theme, with respondents consistently linking rising living and education costs to family size limitation, such as *"school costs are rising"* [01MH] and *"our finances support only two children"* [10MH]. Several mothers also connected financial strain with

emotional burden, noting that having more than two children would be *"overwhelming"* [02CA]. Closely related to economic concerns was the emphasis on parenting quality and mental well-being. Many respondents expressed that smaller families allowed for more attentive caregiving, as reflected in statements such as *"with two children, I can care for them optimally"* [03MH] and *"better one quality child than many with unmet needs"* [09CA].

Shifting social norms were evident in reflections on past family sizes, with respondents observing that families previously had many children but now prefer fewer due to economic realities, for example *"in the past people had seven to nine children; now much fewer"* [02MH]. At the same time, social pressure was reported as minimal, with decisions framed as largely autonomous: *"there is no social pressure; the family is free"* [10CA]. Education and career influenced planning for some mothers, who associated higher education with better preparation for childcare costs (*"higher education leads to better planning"* [05CA]), while others viewed fertility decisions as independent of schooling or employment (*"career doesn't affect my decision"* [10CA]). This indicates that education functions more as a planning lens than a universal determinant.

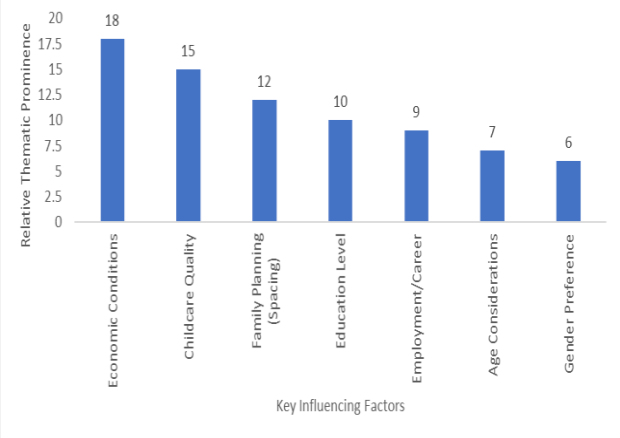

Figure 1. Socio-Economic Factors Influencing Fertility Preferences

Source: Qualitative data processed, 2025

Family planning programmes were widely perceived as helpful for spacing births rather than determining family size. Some respondents credited FP with raising awareness (*"family planning raised my awareness"* [01MH]), whereas others emphasised personal and economic control over fertility choices (*"it's a personal decision"* [01CA]). Method use differed locally, with IUDs and sterilisation more common in Condongcatur and injectables more prevalent in Maguwoharjo. Experiences with side effects and unintended pregnancies during method transitions occasionally reduced confidence in FP effectiveness, reinforcing the view that economic capacity remained more decisive than programme messaging. Life-cycle considerations also shaped decisions, particularly in Maguwoharjo where age was explicitly linked to productivity (*"above thirty is no longer productive"* [10MH]). Overall, interview findings demonstrate that economic pressure and childcare quality form the core drivers of fertility limitation, while education, employment, family planning, and age operate as contextual modifiers rather than primary determinants.

To enhance analytical clarity, Figure 1 summarises the relative prominence of key socio-economic factors influencing fertility preferences based on thematic coding of interview transcripts. Economic conditions and childcare quality emerged as dominant determinants, followed by family planning (as a spacing facilitator), education, employment, age, and gender composition preferences.

Economy as the Main Driver of Birth Limitation

The disparities in contraceptive practices between Maguwoharjo and Condongcatur reflect the strong influence of local economic realities on reproductive strategies. Condongcatur's preference for long-term methods such as IUDs signals a more permanent fertility limitation approach, while Maguwoharjo's reliance on injectables indicates adaptive short-term planning shaped by immediate economic conditions (Purnomo, 2020).

Economic pressure emerged as the central justification for limiting family size. Respondents frequently linked rising education and living costs to the decision to have only one or two children, noting that financial strain also affected emotional well-being, such as *"school costs are rising"* [01MH] and *"more children would be emotionally overwhelming"* [02CA]. A new norm of smaller families was widely recognised, accompanied by minimal social pressure from extended families. Most couples experienced autonomy in fertility decisions, with family members offering only mild spacing advice rather than imposing expectations [03MH; 06CA]. Gender preference remained present but secondary, functioning mainly as a supplementary reason for adjusting family size, particularly in cases of pursuing a balanced family composition, such as having a daughter [08CA].

Education and career shaped fertility planning primarily as tools for informed decision-making rather than as direct determinants. Some mothers associated higher education with better financial planning [05CA], while others viewed employment status as unrelated to family size decisions [10CA]. Family planning was predominantly perceived as an enabling instrument for birth spacing and pregnancy prevention rather than as a determinant of ideal family size. Respondents acknowledged increased awareness through FP programmes [01MH], yet emphasised that fertility targets remained grounded in personal and economic considerations [01CA]. Experiences with contraceptive side effects and unintended pregnancies during method transitions occasionally reduced confidence in FP effectiveness, reinforcing the primacy of economic reasoning in fertility choices [02CA; 07CA]. Life-course considerations, particularly reproductive age and productivity, further influenced decisions in Maguwoharjo, where respondents explicitly

Table 1. Summary of Thematic Findings on Fertility Decision-Making among Young Mothers)

Main Theme	Core Finding	Representative Evidence (Interview Codes)	Theoretical Link
Two-Child Ideal Norm	Strong internalisation of small-family norm (1–2 children preferred)	[01MH], [01CA], [03CA], [10MH]	Demographic Transition Theory
Economic Pressure	Rising education & living costs drive birth limitation	[01MH], [02CA], [10MH], [03CA]	Becker's Economic Theory of Fertility
Childcare Quality & Mental Load	Preference for fewer children to ensure optimal parenting and emotional stability	[03MH], [04CA], [09CA]	Rational Choice Theory
Education & Career	Education promotes planning but not a universal determinant	[05CA], [01CA], [02MH], [10CA]	Human Capital Perspective
Low Social Pressure	Fertility decisions largely autonomous	[10CA], [04MH], [06CA]	Individualisation Thesis
Gender Composition Preference	Secondary motive (e.g., desire for balanced gender)	[02MH], [08CA]	Value of Children Theory
Family Planning (FP) Role	FP facilitates spacing but does not determine family size	[01MH], [05CA], [01CA]	Policy Instrument Perspective
Method Experience & Side Effects	Contraceptive failure & side effects affect confidence	[02CA], [03CA], [07CA], [09MH]	Health Behaviour Framework
Local Variation in Methods	Condongcatur: IUD/sterilisation; Maguwoharjo: injectables	[03CA], [01MH], [09MH]	Context-Sensitive Policy
Age & Life-Course Consideration	Reproductive age linked to economic productivity	[10MH], [09MH]	Life-Course Theory

Source: Qualitative data processed, 2025

linked childbearing capacity to physical and financial readiness [10MH].

To enhance analytical clarity and reduce redundancy in interview excerpts, Table 1 summarises the major themes emerging from the qualitative coding process, linking empirical findings with relevant theoretical frameworks.

Comparative Context Between Study Sites

While both Maguwoharjo and Condongcatur exhibit a strong convergence toward the two-child ideal driven by economic considerations and childcare quality, important contextual differences emerge in how fertility preferences are operationalised in everyday reproductive practices. These differences are particularly evident in contraceptive method choices, life-course considerations, and the relative salience of emotional motivations such as gender composition.

To highlight these site-specific nuances and enhance analytical clarity, Table 2 presents a comparative summary of key dimensions shaping fertility decision-making across the two communities, illustrating both shared patterns and locally mediated variations. This comparison underscores the importance of context-sensitive family planning strategies that align with distinct socio-economic environments rather than relying on uniform policy approaches.

Table 2. Community-Level Differences in Fertility Preferences and Contraceptive Use)

Dimension	Maguwoharjo	Condongcatur
Dominant Ideal	Two children	Two children
Contraceptive Pattern	Injectables, condoms	IUD, sterilisation
Age Consideration	Strongly emphasised	Less explicit
Gender Motive	Moderate	More explicit (third child)
Economic Concern	High	High

Source: Qualitative data processed, 2025

4. Conclusion

The perceptions of young mothers in Maguwoharjo and Condongcatur consistently converge on the two-child ideal, driven by economic considerations and the desire for high-quality parenting. Strong socio-economic factors underpin this preference, including the widespread small-family norm, minimal external social pressure, and the role of family planning as a facilitator of birth spacing rather than a determinant of fertility goals.

Local variations provide important contextual insights for sub-district-level program refinement. Condongcatur demonstrates higher utilisation of long-term contraceptive methods such as IUDs and sterilisation, while Maguwoharjo relies more on short-term methods including injections and condoms, with age considerations playing a more prominent role in method choice.

From a policy perspective, local governments particularly district and sub-district health authorities should adopt differentiated family planning strategies based on community characteristics. Strengthening long-term contraceptive services in Condongcatur and improving counselling on short-term methods and method transition in Maguwoharjo can enhance programme effectiveness. Integrating fertility planning with household economic education and expanding couple-based counselling are also essential for sustaining informed reproductive choices.

A key strength of this study lies in its qualitative approach, which provides in-depth insights into young mothers' subjective perceptions and everyday decision-making processes an aspect often overlooked in predominantly quantitative fertility research in Indonesia. By capturing contextual and emotional dimensions of fertility preferences, the study offers a richer understanding of how socio-economic change is internalised at the household level.

However, several limitations should be acknowledged. The study focuses on a single peri-urban subdistrict, which may limit the

generalisability of findings to other regional contexts. The reliance on self-reported perceptions may also be influenced by social desirability bias, particularly regarding family planning attitudes.

Future research should extend qualitative inquiry across diverse peri-urban and rural-urban transition zones to compare fertility norm formation in different socio-cultural settings. Longitudinal studies would be valuable to examine how fertility intentions evolve over time in response to economic mobility and policy interventions. Additionally, incorporating male perspectives and mixed-method approaches could provide a more comprehensive understanding of household fertility decision-making.

Overall, context-sensitive, participatory, and economically informed family planning policies supported by continued empirical research are essential for sustaining the small-family norm while improving reproductive health outcomes in peri-urban Indonesia.

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