

## Young Dutch Fathers and their Resources

*A qualitative analysis investigating what kind of Dutch men become fathers at a relatively young age, what sort of socio-emotional resources they had at their disposal, and how these resources helped them throughout the transition to fatherhood.*

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June 27, 2021

Word count excluding acknowledgements, references, and appendix: 9897

## Abstract

US and UK literature suggests that young fathers consist of a homogeneous group of vulnerable youth. The socio-economic position and broader background of these fathers are often less favourable for providing a stable environment for their children. The Dutch context suggests that there are young fathers with planned pregnancies and favourable socio-economic characteristics too. Until now, it is not known which resources young Dutch fathers have had at their disposal. In this qualitative study, I investigated what kind of men become fathers at a relatively young age, what sort of socio-emotional resources they had at their disposal, and how they helped them throughout the transition to fatherhood. Data was obtained through ten in-depth interviews with young fathers. Results show, in line with US and UK literature, that in the Netherlands, there is a group of young fathers with unplanned pregnancies whose socio-economic characteristics and broader background are less favourable. In addition, two new groups of young fathers were identified: fathers with planned pregnancies with favourable socio-economic characteristics and fathers with unplanned pregnancies who succeeded in obtaining favourable socio-economic characteristics. Young fathers with favourable socio-economic characteristics were mainly receptive to instrumental support, and young fathers with less favourable socio-economic characteristics were mainly receptive to emotional support. Primarily, policymakers should promote help-seeking for support among primarily young fathers with unplanned pregnancies. For all different subgroups of young fathers, they should make support more accessible and adapt it to subgroup specific needs.

*Keywords:* socio-economic resources, socio-emotional resources, support, transition to fatherhood, young fathers

## Acknowledgements

My thesis would have been impossible without the aid and support of my supervisor Prof. dr. (Renske) R Keizer. The weekly meetings, extensive feedback and her motivating words have ensured that I have experienced the thesis process as very pleasant. Next, I would like to thank my second reader Dr. (Jennifer) JA Holland, who provided me with valuable feedback on the thesis proposal. In particular, I want to thank my boyfriend, who was always willing to read my thesis and was supportive in stressful times. And finally, I want to thank all my supportive and loving family, friends, and colleagues.

## Introduction

Since 1965, the standardised life course in the Netherlands has been eroding (Liefbroer & Dykstra, 2000). This implied that social norms have become more flexible, allowing individuals to go through life course transitions, such as living together, getting married and having children, at times that are most suitable for them individually. In addition, erosion of the standardised life course implied that important life course transitions are postponed (Liefbroer & Dykstra, 2000). Most importantly, young people tend to stay longer in the young adult phase because they spend more time in education, and therefore often prolong the time they live in the parental home. They will spend more time in the orientation phase searching for possible partners and other types of relationships, such as a cohabitation without being married (Hiekel, Liefbroer, & Poortman, 2014).

Consequently, in the past couple of decades, we have witnessed the postponement of major life course transitions, in particular that of having children. The average age for a Dutch woman and man to enter parenthood is now respectively 29,9 (Centraal Bureau voor de Statistiek, 2019) and 32,7 years old (Centraal Bureau voor de Statistiek, 2018). Despite this trend, there remains a group of parents who have children at a relatively young age in the Netherlands. Who are these individuals? International (mainly United States and the United Kingdom) literature often sketches the picture of young parents as individuals for whom the pregnancy came as a surprise and for whom the timing of parenthood was not ideal. Is this also true for young parents in the Netherlands? The Netherlands is a country in which contraceptives are readily available and relatively little stigma is attached to abortion (Levels, Need, Nieuwenhuis, Sluiter, & Ultee, 2012). Therefore, might young parents in the Netherlands be a group of individuals who have consciously decided to become young parents?

Becoming a parent generally has a positive connotation, because having children is often associated with greater happiness than distress (Nelson, Kushley, English, Dunn, Lyubomirsky, & 2013). However, parenthood can also be experienced as a period in which parents mainly have feelings of stress, fatigue, fear, worry, and insecurities towards themselves and parenthood (Brannan & Heflinger, 2001; Parfitt & Ayers, 2014). To deal with these insecurities and fears, it can be helpful for parents if they can call on various resources such as financial means and socio-emotional support. Based on US and UK literature, young parents tend to have less access to financial and educational resources (Bunting & McAuley, 2004; Sigle-Rushton, 2005; Xie, Cairns, & Cairns, 2001). Because of poor access to those resources, supportive social networks can play an important role for young parents by offering encouragement and resources during the transition to fatherhood (Thompson, 2016). However, in a country like the Netherlands, where

contraception is readily available and little stigma is attached to abortion, individuals might postpone a pregnancy if they are not ready yet for parenthood. Because of this, young parents may already have access to financial and socio-emotional resources.

Although we know much about the characteristics and resources of young mothers, there is comparatively little on the topic of young fathers. This research will try to fill part of that gap. Current research on young fathers has mainly been conducted in the US and UK. This research is focused on the determinants of becoming a young father and the (adverse) outcomes of being a young father (Xie, et al., 2001; Quinlivan & Condon, 2005; Weinman, Smith, & Buzi, 2002). Entering fatherhood at a relatively young age is mainly described as an adverse turning point in life due to stressful and complex challenges surrounding young parenthood. Given stark differences in the societal context between the United States and the Netherlands, not only in terms of the free availability of contraceptives and attitudes concerning abortion, but also with respect to differences in the availability of a protective welfare system, I question whether results from US studies can be extrapolated to the Dutch context.

The resources young Dutch fathers have at their disposal is still unknown. In the Dutch context, parenthood is more strongly associated with women rather than men (Van Wel & Knijn, 2006). Because of this, society is primarily focused on supporting (young) mothers. Apart from the fact that there is less attention for young fathers, it is probably also more difficult for (young) fathers to ask for help than for (young) mothers. Research shows that men are generally less likely to express anxiety and insecurities than women (Brebner, 2003; Timmers, Fischer, & Manstead, 1998). Because there is little attention for (young) fathers and men are less likely to ask for help, they are more reliant on socio-emotional support from their direct surroundings than (young) mothers. In sum, in this thesis I centralise two questions: (1) *what men become young fathers in the Netherlands?* And (2) *what kind of socio-emotional resources were available to them, and how did these resources help them throughout the transition to fatherhood?*

By focusing on young fathers in the Netherlands, I aim to evoke more attention to, and a better understanding of young fathers. It could provide insights for policymakers and professionals who work with young fathers into which socio-emotional resources are helpful for young fathers and how current support systems for these fathers can be improved.

## Theoretical framework

### Young fathers

In this thesis, young fathers are considered as men who became fathers before the age of 25. As abovementioned, for Dutch men the average age to become a father is relatively high at 32.7 (Centraal Bureau voor de Statistiek, 2018). Fathers who became fathers before the age of 25 are therefore considered as young in this study.

Ideally, researchers want to draw expectations based on both theory and empirical evidence that use a similar age range. In this light, it is important to note that several references are based on studies that focus on adolescent parents (between the ages of 10-19). As I will also explicitly state in the appropriate sections, readers should bear in mind that I am often drawing upon literature based on the population of adolescents, which might make it more difficult to extrapolate these findings to the sample of young fathers. That said, I expect that adolescent parents and young parents might (to some extent) have similar experiences with parenthood because of their relatively young age.

### Young fathers' resources

In this thesis, young fathers' resources will be divided based on socio-economic resources (education, occupation, and income) and socio-emotional resources (support from partner, family, friends, peers, and professionals). First, to find out what kind of men in the Netherlands become fathers at a relatively young age, fathers' socio-economic resources, or socio-economic status (SES) will be examined. The socio-economic status of fathers can illustrate what kind of situation fathers have when becoming fathers. By investigating fathers' economic and social status (Baker, 2014), I expect to see different types of young fathers.

Furthermore, the transition to fatherhood and fatherhood itself can be experienced by fathers as a joyful but at the same time difficult period (Hall, 1995). Some fathers experience differences between the expectations and reality of fatherhood (Hall, 1995), while others feel unprepared at the start of parenthood (Henderson & Brouse, 1991). During the transition to fatherhood, it can therefore be helpful for fathers if they receive instrumental and emotional support from their social surroundings (Morse, Buist, & Durkin, 2000).

### Socio-economic resources

To care for and to maintain children can be quite costly because (future) parents have to buy food, diapers, clothing, and many other items (Mollborn, 2007). Research shows that individuals with economic uncertainty are more inclined to postpone parenthood than individuals with

financial security (Mills, Blossfeld, & Klijzing, 2005). Financial security (or economic capital) can consist of having a stable and good income, a permanent work contract, and owning a house. Did young fathers in my study have sufficient socio-economic resources when they became fathers?

US and UK literature pay particular attention to young fathers for whom fatherhood came as a surprise (Bunting & Mcauley, 2004; Dearden, Hale, & Alvarez, 1992; Sigle-Rushton, 2005; Stouthamer-Loeber & Wei, 1998; Xie, et al., 2001). These studies have a particular focus on the predictors and adverse outcomes of young fatherhood. Results show that young fathers tend to have less favourable SES before entering fatherhood (Sigle-Rushton, 2005; Xie et al., 2001). They are more likely to experience emotional, educational, and employment difficulties (Dearden et al., 1992). They are twice as likely to engage in delinquent behaviour than their peers (Stouhamer-Loeber, 1998). This being said, young fatherhood is fairly stereotypically portrayed in US and UK literature, and the focus is mainly on the negative consequences for young fathers' education and work career.

Young fathers in my thesis may have much more favourable socio-economic circumstances because in the Netherlands, it is easier to postpone a pregnancy until the socio-economic circumstances are sufficient. In addition, the Dutch welfare system provides support to (young) parents through financial subsidies such as child benefit (*kinderbijslag*), child budget (*kindgebonden budget*), childcare allowance (*kinderopvangtoeslag*), special assistance (*bijzondere bijstand*) (Cornelissen, 2019). Moreover, the Dutch education system makes it possible to combine parenthood with education by, for example, part-time schooling. Concerning the different context of the Netherlands, it is questionable whether results from American research can be extrapolated to the Dutch context. Therefore, I will investigate what kind of men become young fathers in the Netherlands concerning their socio-economic resources.

### **Socio-emotional resources**

Socio-emotional resources can be used as a coping mechanism as soon as parents need support during parenthood. This may include various forms of social support: receiving emotional support (emotional), confirmation and appreciation (affirmation), receiving practical support (instrumental), and information (informative) (Letourneau, Stewart, & Barnfather, 2004). According to Du Bois Reymond (2016), young people receive support from bonding and bridging networks. Where bonding networks refer to informal networks such as the partner, family, friends, and peers, bridging networks refer to formal networks such as professionals.

### ***Partner***

According to Morse, Buist, and Durking (2002), the partner can be considered as the primary source of emotional and instrumental support for young fathers. As some babies are born to parents who have no (or no longer) a romantic relationship with each other, it is also essential to incorporate the ex-partner's support.

When (ex)partners have a good relationship with each other, the partner might be a support source during parenthood (Figueiredo et al., 2008). Partner support can be provided on three dimensions: informational (giving advice), emotional (listening, comforting, affirming emotions), and instrumental (helping in childcare and housekeeping) (Brock et al., 2014). Research results by Gillis, Gabriel, Galdiolo, and Roskam (2019) show that fathers experience less stress when receiving more support from their (ex)partner. In other words, partners can be a source of support during parenthood. Nevertheless, is this also true for young fathers?

The transition to parenthood can impose a great deal of strain on the partner relationship because it involves a major rearrangement of the family system as there is a redistribution in labour and household hours (Keizer, Dykstra, & Poortman, 2010). Eventually, the birth of a child can reduce romantic relationship satisfaction (Keizer & Schenk, 2012; Van Scheppingen, Denissen, Chung, Tambs, & Bleidorn, 2018). This might be especially true when parents are younger and relatively less self-conscious in a relationship (Sippola, Buchanan, & Kehoe, 2007). For young parents, it might be difficult to know their own needs and the needs of their (ex) partner. This can make it more difficult to give and receive the proper support. Therefore, this thesis will investigate the role of (ex)partners in supporting fathers during young parenthood.

### ***Extended family***

Extended family can be an essential source of support during parenthood. According to Dykstra et al. (2006), great value is attached to relationships within the extended family in the Netherlands. Despite increasing individualisation, extended family members are shown to provide substantive levels of instrumental and emotional support. Especially between young people and their parents, there is an extensive exchange relationship of instrumental support. According to Terry (1991), fathers find it less difficult to ask for help from family than from non-family. This help can consist of asking for advice, help with caregiving, housekeeping and babysitting. According to Gottlieb and Pancer (1988, as described in Terry, 1992), new parents are more comfortable asking for help from relatives because they are less likely to condemn them for poor parenting skills.

Although little research has been done on the extended family's role in shaping young fathers'

experiences, there is literature on the extended family's role in adolescent motherhood, albeit inconclusive. While some studies indicate that family help is the most crucial form of support for young mothers (Cooley & Unger, 1991; Parish, Hao, & Hogan, 1991; Unger & Wandersman, 1988), other studies indicate that family help can be stressful for new mothers because they are now juxtaposed between being a mother and a child at the same time (Letourneau, Stewart, & Barnfather, 2004).

There is a lack of information about the role of the extended family in supporting young fathers, but the role conflict that adolescent mothers face may also occur in fathers who still live at home with their parents. However, given the older age of young fathers in my sample, most young fathers might no longer live at home and might experience fewer role conflicts than adolescent mothers. Therefore, it may be that, in line with research by Dykstra et al. (2006), young fathers experience substantive support from their extended family. In this study, I will explore the role of extended family in supporting young fathers' during fatherhood.

### *Peers*

In addition to the partner and extended family, peers can play an important role in new parents' lives. In research, peers and friends are considered two different groups, so I will discuss them separately. Peers can be described as people with a *shared* experience (Mead & MacNeil, 2006), and can be met via young fathers' social networks. Peers find themselves in the same situation and may have experienced the same struggles, making it easier to understand each other's situation and provide advice and suggestions (McLeish & Redshaw, 2015; Mead & MacNeil, 2006). According to McLeish and Redshaw (2015), young mothers feel more comfortable asking advice from peers who have the same experiences than asking for help from professionals.

We know little about the role of peers in supporting young fathers' during parenthood. Because the group of young fathers in the Netherlands is relatively small, this can make it difficult for young fathers to come in contact with peers who might be scattered all around the Netherlands. On the other hand, because the group of young fathers is relatively small and therefore quite distinctive, they might find each other more easily online. In this thesis, I will investigate whether young fathers are in contact with peers and what role peers play in supporting young fathers during parenthood.

### *Friends*

In addition to peers, friends might be a source of support for young parents as well. According to Richardson, Barbour, and Bubenzer (1995), adolescent mothers' friends can provide emotional and social support, which even surpasses family support. As a result, adolescent mothers



experience less parenting stress when they are in contact with friends because they remind the mothers of their adolescent life (despite the new role as mothers). However, the results of Richardson et al. (1995) are based on adolescent mothers, a population that may be less mature than the population of young fathers investigated in my thesis. As mentioned above, this difference makes it difficult to extrapolate the findings of adolescent mothers to young fathers. Moreover, research shows that women are more likely to show their insecurities and emotions than men (Brebner, 2003; Timmers, Fischer, & Manstead, 1998) and ask for help (Galdas, Cheater, & Marshall, 2005; McKay, Rutherford, & Cacciola, 1996).

There is an insufficient amount of information on the role of friends during young fatherhood. It might be that young fathers are less inclined to share the trials and tribulations of parenthood with their friends but do receive support from friends by mostly talking or doing things that are unrelated to parenthood (Migliaccio, 2010). On the other hand, fathers might indicate that they experience little support from friends because they are less inclined to ask for help by themselves. In this study, I will investigate what role friends play in supporting young fathers during parenthood.

### *Professionals*

International research on social support given by professionals shows that young fathers often feel ignored and stereotyped by professionals (Allen & Doherty, 1996; Deslauriers, Devault, Groulx, & Sévigny, 2012; Quinton, Pollock, & Golding, 2002). As a result, fathers are less inclined to call on professionals (Allen & Doherty, 1996; Tyrer, Chase, Warwick, & Aggleton, 2005). Until now, little is known about how young Dutch fathers experience the support of professionals. As mentioned earlier, parenting is often associated with the role of the woman rather than that of a man (Deave & Johnson, 2008). According to Goodman (2005), "most of the focus in nursing has been on the mother and infant, neglecting the father during this critical time in family development" (p. 190). Therefore, little guidance or professional support is available to assist (young) fathers (Deave & Johnson, 2008). At the same time, the Netherlands is equipped with a health care system in which midwives and maternity care provide perinatal care. In other words, a well-provided care system is present in the Netherlands with attention for new parents, but at the same time, fathers might not be the primary focus. This begs the question: what role do professionals play in supporting young fathers during parenthood?

### **Methodology**

This study will be conducted qualitatively to gain an in-depth understanding of what men become

young Dutch fathers and how socio-emotional resources have played a role in supporting young fathers during fatherhood.

### **Sample and recruitment**

Three sample criteria have been set for this study. Firstly, the sample solely consists of men who became fathers before the age of 25. Secondly, given the expectation that the characteristics, the experience of fatherhood, and young fathers' resources will differ substantially between biological and non-biological fathers, I solely focused on biological fathers in this thesis. In addition, I had initially envisioned interviewing fathers who were no older than 30 years old. This was successful with all fathers except one who became a father at 23 but was now 31. The age criteria prevented the fathers' responses from being based on vague memories from long ago that may not accurately reflect reality.

Due to COVID-19 crisis and the governments' regulations, the recruitment of respondents mainly took place online. Initially, an attempt was made to reach young fathers through social institutions and programs that may have been in contact with young fathers. These institutions and programs include midwifery practices, institutions that focus on teenage mothers, and programs that focus on people who need extra support in society. Unfortunately, young fathers were not in the picture with these groups, which is an interesting finding in itself, because it shows that social agencies and programs do not always know young fathers. Besides contacting social institutions and programs, I approached fathers who had online blogs and podcasts through the social media platform Instagram. However, I was not successful in recruiting respondents through these channels.

Subsequently, through my network ( $N=2$ ), networks of friends and family ( $N=5$ ), a youth organisation ( $N=2$ ), and the snowball sampling method ( $N=1$ ), ten respondents in total were recruited ( $N=10$ ). Appendix I provides an overview of the respondents. During recruitment, I tried to approach young fathers in an accessible way by sending messages that are not written too formally. This way, I expected fathers to be more willing to participate. To increase the chance of fathers participating in the research, respondents received a gift voucher of 10 euros.

### **Collecting and analysing data**

To gain an in-depth understanding, semi-structured interviews were conducted. Semi-structured interviews have several advantages in the present study. Firstly, it allowed fathers to give answers in their own words and pace. Based on fathers' responses, follow-up questions could be asked by the interviewer. Semi-open interviews allowed for topics to pop up that were unexpected based on the theoretical framework. An interviewer guide with attending concepts and associated

questions ensured that the same topics were discussed during each interview (Bryman, 2016). The interview guide provided a logical order of the subjects but was flexible enough to adjust to the interviewee's direction to the interview. Due to the COVID-19 pandemic, it was not possible to conduct all the interviews in person. Thus, eight interviews were conducted online using Microsoft teams, one by telephone and one interview in person. The interviews lasted an average of 58 minutes.

Thematic analysis was used to analyse the data. The interviews' transcripts were coded according to the predetermined themes described in the theoretical framework. If data could not be encoded under the predefined themes, a new theme was added (Bryman, 2016). According to the constant comparative method, interviews' data was continuously compared and coded by associated themes. Ultimately, the findings were viewed in the light of the literature and investigated for similarities, discrepancies and new outcomes.

### **Ethical and privacy aspects**

Concerning ethical and privacy aspects, Erasmus University of Rotterdam guidelines' were followed. Readers are referred to Appendix II, where a form with ethical and privacy aspects conforming to Erasmus University of Rotterdam guidelines can be found. Appendix III shows the informed consent form that all respondents have signed prior to the interview.

## **Results**

### **What type of men become young fathers?**

Which men in the Netherlands become fathers at a relatively young age? This first sub-question was investigated by focusing on men's socio-economic background. On the one hand, international literature suggests this group consists of fathers with a fairly weak SES, for whom the child's arrival may not have been planned. However, the Dutch context may allow for easier planning for the arrival of a child. In addition, it provides a safety net which may allow young fathers to make the transition to fatherhood in relatively more favorable socio-economic circumstances.

First, my results show that the group of ten fathers I interviewed is not a homogeneous group in terms of their socio-economic characteristics. A clear distinction can be made between three different subgroups: fathers with planned pregnancies who have favourable socio-economic characteristics, fathers with unplanned pregnancies who have favourable socio-economic characteristics, and fathers with unplanned pregnancies who have less favourable socio-economic characteristics.

### ***Fathers with planned pregnancies with favourable socio-economic characteristics***

The group of fathers with planned pregnancies with favourable socio-economic characteristics consists of four fathers. These fathers said they were ready for fatherhood because they met certain preconditions for parenthood, such as having a completed study, a permanent labour contract, a financial buffer, a house, and a stable relationship. A sound financial situation was most important for young fathers with planned pregnancies. Despite being young, when these preconditions were met, fatherhood felt like a logical next step in their lives:

*We were just ready; I gave the child the time and attention to raise it properly. We both had steady jobs and no prospect of going wrong; we had a house, and we were both healthy. (Bob, 23 at childbirth, planned with favourable SES)*

### ***Fathers with unplanned pregnancies with favourable socio-economic characteristics***

The group of fathers with unplanned pregnancies with favourable socio-economic characteristics consists of four fathers as well. The common denominator of these fathers is that they initially did not have the desired socio-economic background, but they possessed the potential to improve their position.

When these fathers heard that their (ex) partner was pregnant, all four fathers were still living at home with their parents, and the majority of them was still studying. Ultimately, this group of fathers succeeded in completing their studies and/or finding a job and a home. One father described his situation as follows:

*When I started at my new job, I was still studying and receiving student loans. At one point I looked at how high my student debt was and I was quite shocked. I do not like being in debt. I do not have any other debts at all and eventually I decided to stop my study financing to see if I could manage without student loans. Looking at it now, I see that I can just manage. (Kyan, 22 at childbirth, unplanned with favourable SES)*

Two fathers told me that, although it was very stressful, they were extra motivated to complete their education. They indicated education as an essential resource for better job opportunities. One father dropped out of school earlier to search for a job, and the other father already had a steady job. Ultimately, the socio-economic status of these fathers became so well-developed during fatherhood that they were able to fulfil the role of breadwinner well.

### ***Fathers with unplanned pregnancies with less favourable socio-economic characteristics***

The last subgroup consists of two fathers with unplanned pregnancies who have less favourable socio-economic characteristics. However, for this last subgroup of fathers the circumstances,

broader than the socio-economic position, were not optimal enough to acquire a better position in the future. One father talked about his situation as follows:

*I lost my mother at a very young age. Since then, I have been living in juvenile institutions, and at 14, I became addicted to hard drugs and alcohol. [ . . . ] I was not working, and I was doing other things to make money. (Thijmen, 16 at childbirth, unplanned with less favourable SES)*

Due to the vulnerable situation of these fathers, they could not take care of their child at the time. As a result, both fathers no longer have contact with their children. Thus, the conditions of this subgroup of fathers is not there to provide a stable environment for their child, even in the near future.

## **Socio-emotional resources**

### ***Partner***

Do young fathers perceive their (ex)partners as a resource of support? And if so, in what way? Literature shows that parenthood can put a strain on the relationship with the (ex)partner. Due to the relatively young age of young fathers, they might be less self-conscious, making it more difficult to maintain a supportive relationship with their partners. When it comes to support from their (ex)partner, my results show a stark contrast between fathers with favourable socio-economic characteristics, irrespective of whether the pregnancy was planned or not, and fathers with unfavourable socio-economic characteristics.

When fathers with favourable socio-economic characteristics, with both planned and unplanned pregnancies, talked about their partner's support, they mainly talked about instrumental support (help with raising children and doing household tasks) and little about emotional support or giving advice:

*I have much respect for what she does because I could not do it on my own. She takes care of the housework and our child all day long. I am also often outside, and then she is just alone with him, and then she takes care of him, and she takes care of the household tasks, so without her, I would have a hard time. (Quirijn, 25 at childbirth, planned with favourable SES)*

In addition, in both subgroups of fathers with favourable socio-economic characteristics, the majority of the respondents talked about the stable relationship they have with their (ex)partner.

The subgroup of fathers with unplanned pregnancies with less favourable socio-economic characteristics was no longer in contact with their ex-partners. The relationship with the ex-partners deteriorated during pregnancy and was already broken off before the baby's birth. Since

then, both fathers were no longer allowed to have contact with (the majority of) their children.

In sum, where partner support can be given on three dimensions (informational, emotional, and instrumental), the two subgroups of fathers with favourable socio-economic resources, both planned and unplanned, mainly talked about instrumental support they received from their (ex)partner. This pattern is in stark contrast with the pattern seen amongst fathers with unplanned pregnancies with less favourable socio-economic characteristics. Fathers in this subgroup appear to have malfunctioning relationships with their ex-partner, and as a result, they experience their ex-partners as a barrier to fatherhood.

### ***Extended family***

What role does the extended family play in supporting young fathers during fatherhood? Literature shows that extended family help is the most essential form of support. However, literature on adolescent mothers shows that family help can be stressful for new mothers because of the juxtaposed role of being a mother and child at the same time. Nevertheless, literature shows that in the Netherlands, much value is attached to relationships within the extended family and that support is exchanged between family members. Based on my results, a dichotomy can be made between the two subgroups of fathers with favourable socio-economic conditions on the one hand and the subgroup of fathers with less favourable socio-economic characteristics on the other hand.

The first two subgroups of young fathers with favourable socio-economic characteristics indicated that their family and in-laws play an essential role in providing support. They mainly received support from their parents and parents-in-law (thus: the grandfathers and grandmothers of the child). Besides the (in-law) parents giving advice, motivation and practical things for the house, young fathers mainly received practical support from (in-law) parents through babysitting:

*My mother comes to us every Wednesday by train to take care of the children. She comes to babysit the children all day long, and my mother-in-law also babysits regularly. (Jan, 22 at childbirth, unplanned with favourable SES)*

In the subgroup of fathers with unplanned pregnancies with less favourable socio-economic characteristics, fathers mentioned receiving support from their parents. However, they informed me that they were actually 'counteracted' by their in-laws. Both fathers had no contact or poor contact with their in-laws. For one of the fathers, the mother-in-law did not want the father to contact his child because he was addicted to drugs at the time. Ultimately, this turned into a conflict, which meant that the father was no longer allowed to have contact with his child:

*The first year, I was not allowed to have any contact with my child because some things happened between my ex-mother-in-law and me. I was not pleased, of course, so I went to*

*see her. And yes, police and judges and things like that came into play then. (Thijmen, 16 at childbirth, unplanned with less favourable SES)*

In sum, young fathers within all three subgroups received support from their parents. Young fathers within all three subgroups mentioned that they experienced their family as a great source of support during parenthood. Among fathers with favourable socio-economic conditions, especially (in-law) parents offered much support by babysitting and giving advice, motivation and equipment when fathers needed it. Within the subgroup of fathers with unplanned pregnancies with less favourable socio-economic conditions, the relationship with the in-laws was not supportive.

### **Peers**

What role do peers play in supporting fathers during young parenthood? Literature shows that young mothers' experience support from peers because they can understand each other's situation. Therefore, it is easier for them to ask peers for advice. Is that true for young fathers as well? To answer that question, the question must first be answered whether young fathers can find each other, given the relatively small number of young fathers in the Netherlands.

Regarding peer support, my results show a different contrast between the three subgroups than we have seen with the other types of support. Pertaining to peer support, my results reveal differences between fathers with planned pregnancies with favourable socio-economic characteristics and fathers with unplanned pregnancies with less favourable characteristics on the one hand, and fathers with unplanned pregnancies with favourable characteristics on the other hand. When fathers of the first two subgroups (planned and unplanned with less favorable characteristics) talked about peers, they indicated that they did not have contact with other young fathers. For example, one father gave the following answer when I asked him if he knew other young fathers:

*I did not know any other young fathers in my area, I was the only young father at the time. (Boaz, 16 at childbirth, unplanned with less favourable SES)*

Although the group is relatively small and unique, which could make it easier to find peers, these young fathers do not easily find each other because they do not know other young fathers in their surrounding networks.

Strikingly, the majority of the subgroup of fathers with unplanned pregnancies with favourable characteristics told me that they do have active contact with peers. In line with the literature on young mothers and peers, two fathers indicated that they found contact with a peer helpful because they can understand each other's situation. Since young fathers are in a similar

situation, they often give each other advice and tips, which supports them:

*I spoke with him a lot about how, for example, your relationship can change and what you should pay attention to [in your relationship], what you should keep paying attention to keep your relationship sound, and what it does to you when you have a child. (Kyan, 22 at childbirth, unplanned with favourable SES)*

However, the third father indicates that he received support from his peer, not by discussing their situation but by spending time together. Fathers helped each other by having a great time helping them forget about their situation and the associated pressure of fatherhood to perform:

*Just spending time with each other, but not so much of going to put our problems on the table and just vent our hearts, or whatever [...] I think we helped each other more through, having a good time together actually and just look for fun [as a distraction] for the pressure you had at that moment. (Hamza, 24 at childbirth, unplanned with favourable SES)*

In sum, in line with the literature on young mothers, the subgroup of young fathers with unplanned pregnancies with favourable socio-economic characteristics experiences support from peers in both an active way by asking each other for advice and in a latent way by not talking about parenthood and having a good time together without being reminded of fatherhood. However, the subgroup of fathers with planned pregnancies with favourable socio-economic characteristics and the subgroup of fathers with unplanned pregnancies with less favourable socio-economic characteristics did not receive support from peers because these subgroups do not know other young fathers in their networks.

### ***Friends***

If, and in what way do young fathers experience support from their friends? On the one hand, literature shows that young adolescent mothers experience much support from their friends because friends remind them of adolescent life. On the other hand, literature shows that men are less likely to show their emotions which might result in young fathers not discussing their insecurities and fears with friends. When it comes to support from friends, my results showed a striking contrast between fathers with planned pregnancies on the one hand, and unplanned pregnancies (regardless of their favourable and unfavourable socio-economic characteristics) on the other hand.

Firstly, fathers in the subgroups of planned pregnancies talked about how their friends knew their partner and knew that they have been in a good relationship and had a great environment to raise a child. Similar to American literature on the role of friends by adolescent



mothers, fathers in these two subgroups indicated that contact with friends reminded them of their young adult life (despite their role of being a father). Fathers reported that they did not talk about parenting with friends, but rather about things that were not related to children and that they enjoyed spending time together:

*I do not talk a lot about parenting when I am with my friends; when we see each other, we talk about other things. (Hugo, 25 at childbirth, planned with favourable SES)*

In addition, my results suggest that the majority of fathers with planned pregnancies saw their friends a little less, but that this did not affect the quality of the relationship with their friends. According to them, little has changed, and contact with friends has remained good:

*So whether I see them every other week or not see them for a long time, we are always just cool with each other. So that does not necessarily change, and everyone is just busy and doing their own thing. So yes, we see each other when we just have time, and if not, then not, but nothing changes between us. (Quirijn, 25 at childbirth, planned with favourable SES)*

In contrast, my results show that friends of fathers within the subgroup of fathers with unplanned pregnancies were initially shocked. Friends expressed their concerns to the father when they heard that their friend was going to be a father. However, after friends recovered from the shock, they started to support the father actively. Within these friendships, parenthood is discussed, friends were asked for advice, and friends wanted to help with everything that came with parenting. For example, these friends offered help by babysitting, giving advice and offering financial support.

*They were people close to my heart, and I really considered them friends. They gave me advice and motivated me [to search for a job]. (Boaz, 16 at childbirth, unplanned with less favourable SES)*

In sum, all fathers, irrespectively of their socio-economic characteristics and whether or not the pregnancy was planned, mentioned to have received support from their friends. However, when it comes to how support of friends is experienced, my results show a stark contrast between fathers with planned and unplanned pregnancies, irrespectively of socio-economic circumstances. On the one hand, the subgroup of fathers with planned pregnancies experienced support from friends in a latent way. By being reminded of young adult life for a moment apart from fatherhood, friends played an important role. On the other hand, the subgroup with unplanned fathers experienced the support of friends more actively by discussing insecurities and fears with friends. As a result, friends provided emotional and instrumental support to fathers.

### ***Professionals***

How do young fathers experience the support of professionals? This was one of the subquestions of my thesis. International research shows that young fathers often feel ignored and stereotyped by professionals. The results may be different in this thesis because the Netherlands has a well-provided perinatal care system for parents. On the other hand, parenting is still mainly associated with women rather than men, so there may be little attention for young fathers within professional support.

Except for two fathers, fathers from all three subgroups indicate that they do not feel *stereotyped* by midwives. In fact, these fathers are highly positive about midwives because they have good empathy for both the father and mother and try to involve young fathers in the pregnancy.

*During the pregnancy, I felt very involved because the midwife was very kind and had much empathy towards the woman and the father. She told me, you have to do this, this is how it is going to happen, don't do this, et cetera. (Jayden, 24 at childbirth, unplanned with favourable SES)*

However, two fathers mention less positive experiences with a doctor and a midwife. These fathers have an unplanned pregnancy as their common denominator. In both cases, respondents felt that professionals drew false conclusions based on prejudices about young parenthood. One of the fathers relates the following about an experience with a doctor:

*He said it was not responsible that we were so young and that we should not have become parents at that age. He also wanted to write a reference that the children should be placed away from us because we were too young. Then I became furious because our children are just doing well, they just play well, they function well. (Koen, 18 at childbirth, unplanned with favourable SES)*

In conclusion, contrary to international literature, most young fathers do not feel stereotyped by midwives. However, two fathers with an unplanned pregnancy had a bad experience with a doctor and a midwife.

## **Discussion & Conclusion**

### **Study's relevance and main findings**

Dutch literature shows that transitions such as getting married and having children are increasingly being postponed. Yet, there is still a substantive group of men in the Netherlands who become fathers at a relatively young age. Surprisingly, however, we knew relatively little about who these men are and what resources they have had at their disposal to deal with parenthood. The present

study aimed to fill this gap in the existing literature by examining what kind of men become young fathers in the Netherlands, what social resources they have access to, and how these resources helped them throughout the transition to fatherhood. Based on US and UK literature, the group of young fathers consists of fathers for whom the pregnancy came as a surprise. Their socio-economic status and broader background made them less able to fulfil the father role. However, the Dutch context made me suspect that it may be easier to plan the arrival of a baby properly. Therefore, I was expecting to see a group of fathers who choose fatherhood at a young age because their socio-economic resources were sufficient to provide a stable environment for a child. My results showed that both of these subgroups were present in the Netherlands, and that there was also a third subgroup of young fathers. This latter group consisted of young fathers for whom the pregnancy was not planned and for whom the socio-economic position was not the most advantageous at first. However, they possessed the potential to improve their socio-economic status. The results also showed that the different subgroups of young fathers experienced the support of their social sources in various ways during fatherhood. Young fathers with favourable socio-economic characteristics were mainly receptive to instrumental support, and young fathers with less favourable socio-economic characteristics were mainly receptive to emotional support.

## **Findings**

In contrast to UK and US research where young fathers are often presented as a homogeneous group of vulnerable youth, in the Netherlands, three distinct subgroups could be identified: 1) young fathers with planned pregnancies with favourable socio-economic characteristics, 2) young fathers with unplanned pregnancies with favourable socio-economic characteristics, and 3) young fathers with unplanned pregnancies with less favourable characteristics. Young fathers with planned pregnancies met particular prerequisites they had set for starting parenthood. The necessary conditions for them were a completed education, a stable relationship, and a sound financial situation. In line with US and UK literature, the majority of fathers with unplanned pregnancies were still in the education phase at that time. In contrast to UK and US literature, that suggests that young fathers are more likely to stop their education early in order to work (Bunting & McAuley, 2004), the findings of this study show that the type of young fathers with unplanned pregnancies are more motivated by the pregnancy to finish their studies. This could be explained by the fact that the Netherlands, as a welfare state, offers more opportunities to combine work and study. For example, Dutch students pay relatively low tuition fees (Vossensteyn & De Jong, 2006) compared to the United States (Marucci, 2013). Therefore, it may be easier for young Dutch fathers to continue studying while parenting. In addition, the Dutch educational system offers

certain flexibility for students, allowing them to change their studies quite easily (Neuvel & Westerhuis, 2013). On the one hand, this makes it relatively easy for young fathers to drop in study level, allowing them to complete their studies while parenting more comfortably. On the other hand, it provides young fathers with the opportunity to advance to a higher field of study that may ultimately lead to better job opportunities.

Regarding the support of the father by the partner and extended family, a dividing line emerged between, on the one hand, fathers with a favourable socio-economic position and, on the other hand, fathers with a less favourable Socio-economic position. This dividing line illustrates that fathers with favourable SES characteristics receive more support from their partner and extended families than fathers with unplanned pregnancies with less favourable socio-economic characteristics. Whereas in the theoretical framework, the focus was mainly on emotional, informational and instrumental support, it is striking that fathers with favourable socioeconomic circumstances received mostly instrumental support from their family and partner. Possible explanations for this can be found in the literature. Previous research shows that gender differences exist in support-seeking behaviour (Matud, Ibañez, Bethencourt, Marrero, & Carballeira, 2003). "Specifically, females seek out, prefer, and are more receptive to emotional support, and males seek out, prefer, and are more receptive to instrumental support" (Wilson, et al., 1999, p. 236). The tendency of males to be more receptive to instrumental support rather than emotional support can possibly be traced back to male socialisation. Male socialisation de-emphasises expressing feelings and focuses to a greater extent on instrumentality which refers to task accomplishment, self-reliance, autonomy, and independence (Olsen & Shultz, 1994). Another possible explanation for the focus on instrumental support may be found in the self-consciousness of young fathers. Due to the young age, it could be difficult for fathers to know what emotional support their "true self" needs and how to express their needs to their significant others (Sippola, et al., 2007).

That fathers with unplanned pregnancies with less favourable socio-economic characteristics experienced less support from their ex-partners and in-law-families can possibly be explained by their lower socio-economic status and broader background. Lower-income couples are more likely to separate, and when they separate, it tends to be at a higher pace than higher-income couples (Lundberg, Pollak, & Stearns, 2016; Rosenfeld & Roesler, 2019). According to Karney and Bradbury (1995), disadvantaged people are more exposed to financial strain and fluctuations in relationship satisfaction. Their relationships with ex-partners are often short and turbulent in nature and end up in break-ups. This is confirmed by my results. The relationships with ex-partners had already broken up during pregnancy. Therefore, the ex-partners played no

role in supporting young fathers during fatherhood. In addition, the fathers did not have a good relationship with the inlaw-families.

Regarding peer support for fathers, I saw another dividing line emerge between on the one hand fathers with planned pregnancies with favourable socioeconomic characteristics and fathers with unplanned pregnancies with less favourable socioeconomic characteristics, and on the other hand young fathers with unplanned pregnancies with favourable socioeconomic characteristics. This suggests that only fathers with unplanned pregnancies with favourable socio-economic characteristics receive support from peers. A possible explanation could be that these fathers - because the pregnancies were unplanned - are more likely to seek "peers", to get help from them during a difficult period (Riessman, 1989). In addition, research shows that income and education are positively related to the size and composition of an individual's social network (Campbell, Marsden, Hurlbert, 1986). On this basis, it can be argued that fathers with unplanned pregnancies and favourable SES have a more extensive network and thus are more likely to know other young fathers than fathers with unplanned pregnancies and less favourable SES. In the case of fathers with planned pregnancies and favourable SES, the pregnancy was a deliberate choice and getting in contact with peers may have felt less necessary because they were already well prepared to become a father.

Furthermore, I recognised a dividing line between fathers with planned pregnancies and fathers with unplanned pregnancies regarding the father's support by friends. This dividing line showed that fathers with planned pregnancies experienced support from their friends by talking about things that are not related to parenthood. This finding also emerged in research on the support of friends among adolescent mothers (Richardson, Barbour, and Bubenzer, 1995). As for these adolescent mothers, contact with friends possibly reminded fathers of their lives before they were parents. Fathers with unplanned pregnancies also experienced support from their friends but in a different way. They did talk with their friends about their fears and uncertainties concerning parenthood. A possible explanation for this finding is that young people who experience a crisis event are more likely to seek help (Barker, Olukoya, & Aggleton, 2005). Previous research has shown that individuals cope better with stressful events when they have friends to whom they can turn for advice, help, and motivation (Schonert-Reichl & Muller, 1996). With all the financial worries involved, an unplanned pregnancy may have caused young fathers with unplanned pregnancies to experience stress. The stress feelings make these fathers more likely to discuss their worries with friends.

Regarding the support of professionals, no clear dividing line emerged between the three different subgroups. The general trend among all fathers was that they felt recognised by

professionals and experienced their support as positive. This contrasts strongly with findings from the UK and the US where young fathers often feel marginalised, stereotyped and ignored by professionals (Allen & Doherty, 1996; Deslauriers et al., 2012; Quinton, et al., 2002). How could it be possible that most fathers in the Netherlands had positive experiences with professionals? A possible explanation can be sought in the well-regulated perinatal care system in the Netherlands. Several explanations can be given for this, but one of them is that there is a week of home care for new parents and the baby after delivery (Mander, 1995). In addition, midwives are subject to more stringent entry requirements and they are better educated than their counterparts in the UK (Mander, 1995). I do not want to presume that professionals with lower education are more likely to stereotype, but professionals with higher education may have a more professional attitude towards young parents.

### **Study's limitations and recommendations**

Some constraints of this thesis should be considered. First, findings have been based on young fathers' recollections about fatherhood. Recollections are viewed through a contemporary lens that may have changed over the years (Bryman, 2016). Therefore, data may have been subject to retrospective reporting biases with possible consequences for the findings' credibility.

Second, my role as a female interviewer could have created a certain distance, as fathers may have felt that I could not properly understand their male experiences because I am a woman. This might have resulted in fathers being cautious about their answers which may have resulted in incomplete data being obtained. Therefore, it is important to recognise my role as a female interviewer and its possible consequences for the trustworthiness of this study's results (Lincoln & Guba, 1985 as described in Bryman, 2016). For follow-up research, I recommend that a man, preferably someone who is also a father, conducts the interviews so that fathers can better identify with the interviewer and possibly give more honest answers.

Moreover, most of the interviews were conducted online due to COVID-19. The online environment may have created an unnatural situation where respondents may have felt uncomfortable and more reluctant to give honest answers. The unnaturalness of giving answers through an online interview may imply that the findings have limited ecological validity.

Furthermore, the recruitment process of this study may have resulted in a sampling bias. The respondents were primarily recruited through my own network or the network of my friends and family. Moreover, fathers in the subgroup with unplanned pregnancies and less favourable characteristics were all recruited through one and the same organisation. Thus, the sample was obtained in a way in which some members of the population had a higher or lower sampling

probability than others. The sampling bias may have affected the results' transferability (Lincoln & Guba, 1985 as described in Bryman, 2016). For follow-up research on young fathers, I recommend designing the sample with as little sampling bias as possible. This can be achieved, for example, by using a community-based recruitment style. Young fathers can be recruited in sports fields, parks, shopping malls, and hair salons (Rhein, et al., 1997; Weinman, et al., 2002).

Ideally, interviews would be conducted until no new insights were obtained. However, due to the limited time of the thesis process, it was impossible to reach the point of theoretical saturation already. As a result, specific patterns may have emerged less or not at all in this study. Now, three types of subgroups of fathers have been discovered, but there may be, for example, another subgroup of fathers that has not been discovered now. More research into this population is needed to get a better understanding of young fathers and how they can possibly be better supported.

### **Study's relevance for policymakers and professionals**

As in previous research, young fathers were presented as a homogenous group; my results show different types of young fathers in the Netherlands. This means that the need for support differs per group. Due to the favourable SES position of fathers with planned pregnancies, they already had the means to provide a stable situation for their children. Therefore, for this group of fathers, extra help from professionals is not needed that much. However, my results show that it would be advisable for professionals to pay more attention to fathers with unplanned pregnancies. These fathers often do not have the most advantageous circumstances, such as having a job, a home and a stable relationship, when they hear that they will become a father.

Based on existing literature, it is known that reaching young people for support can be challenging (Karney, Bradbury, Lavner, 2018). In addition, my thesis showed that young fathers were often not known to social services. Therefore, young fathers must be actively approached and made aware of what help is available to them. I want to recommend municipalities and the government to promote help-seeking among young fathers. This can be done through peer promoters (Finger, 2000 as described in Barker, Olukoya, & Aggleton, 2005), information campaigns, hotlines, information centers (Moch & Stevens, 1999, as described in Barker, Olukoya, & Aggleton, 2005), and online websites.

In addition, the supply side of available support must be more responsive to the needs of young fathers. My results showed that young fathers with less favourable socio-economic characteristics are more receptive to emotional support, and young fathers with unplanned pregnancies who have favourable socio-economic characteristics are more receptive to

instrumental support. Therefore, I would like to recommend that policymakers design support that focuses on both types of support. Emotional support may include relationship counselling because young fathers with less favourable SES characteristics have poorer relationships with their ex-partners. Instrumental support should consist of support in completing an education, finding a job and a home, and dealing with financial matters.

Moreover, my results showed that when fathers are in contact with peers that contact is perceived as valuable. However, fathers with unplanned pregnancies and less favourable SES are not in contact with peers. I, therefore, recommend that municipalities organise events where peers can be connected. Research shows that sports activities can effectively connect young men (Deslauries, et al., 2012). By playing sports, young fathers will be able to receive help from each other while not appearing weak, and they will be able to build bonds with other fathers. "Sport activities allow "them to use a service without making them feel dependent or incompetent" (Deslauries, et al., 2012, p. 69).

In conclusion, in line with US and UK literature, a group of young fathers with unplanned pregnancies for whom the socio-economic characteristics and their broader background are less favourable has been identified. In addition, two new groups of young fathers were identified: fathers with planned pregnancies with favourable socio-economic circumstances and fathers with unplanned pregnancies who succeeded in obtaining a favourable socio-economic status. The three different subgroups of young fathers experienced the support of their social resources differently. Young fathers with favourable socio-economic characteristics were mainly receptive to instrumental support, and young fathers with less favourable socio-economic characteristics were more receptive to emotional support. Policymakers should promote help-seeking for support among primarily young fathers with unplanned pregnancies. They should make support more accessible and adapt it to the needs of the different subgroups of young fathers. Future research can then investigate whether the newly developed support for young fathers is effective and fits the needs of young fathers.



### References

- Allen, W. P., & Doherty, W. J. (1996). The Responsibilities of Fatherhood as Perceived by African American Teenage Fathers. *Families in Society*, 77(3), 142-155.  
<https://doi.org/10.1606/1044-3894.889>
- Baker, E. H. (2014). Socioeconomic Status, Definition. In *The Wiley Blackwell Encyclopedia of Health, Illness, Behavior, and Society*, (pp. 2210-2214).  
<https://doi.org/10.1002/9781118410868.wbehibs395>
- Barker, G., Olukoya, A., & Aggleton, P. (2005). Young People, Social Support and Help-Seeking. *International Journal of Adolescent Medicine and Health*, 17(4), 315-336.  
<https://doi.org/10.1515/ijamh.2005.17.4.315>
- Brannan, A. M., & Heflinger, C. A. (2001). Distinguishing Caregiver Strain from Psychological Distress: Modeling the Relationships Among Child, Family, and Caregiver Variables. *Journal of Child and Family Studies*, 10(4), 405-418.
- Brebner, J. (2003). Gender and Emotions. *Personality and Individual Differences*, 34(3), 387-394. [https://doi.org/10.1016/s0191-8869\(02\)00059-4](https://doi.org/10.1016/s0191-8869(02)00059-4)
- Brock, R. L., O'Hara, M. W., Hart, K. J., McCabe, J. E., Williamson, J. A., Laplante, D. P. Yu. C., & King, S. (2014). Partner Support and Maternal Depression in the Context of the Iowa Floods. *Journal of Family Psychology*, 28(6), 832-843.  
<https://doi.org/10.1037/fam0000027>
- Bryman, A. (2016). *Social Research Methods*. Oxford: Oxford University Press.
- Bunting, L., & Mcauley, C. (2004). Research Review: Teenage Pregnancy and Parenthood: The Role of Fathers. *Child & Family Social Work*, 9(3), 295-303.  
<https://doi.org/10.1111/j.1365-2206.2004.00335.x>
- Centraal Bureau voor de Statistiek. (2019). *Leeftijd moeder bij eerste kind stijgt naar 29,9 jaar*. Retrieved from Centraal Bureau voor de Statistiek: <https://www.cbs.nl/nl-nl/nieuws/2019/19/leeftijd-moeder-bij-eerste-kind-stijgt-naar-29-9-jaar>
- Centraal Bureau voor de Statistiek. (2019). *Leeftijd vader bij geboorte kind stijgt*. Retrieved from <https://www.cbs.nl/nl-nl/nieuws/2019/24/leeftijd-vader-bij-geboorte-kind-stijgt>
- Cooley, M. L., & Unger, D. G. (1991). The Role of Family Support in Determining Developmental Outcomes in Children of Teen Mothers. *Child Psychiatry and Human Development*, 21(3), 217-234. <https://doi.org/10.1007/bf00705907>
- Cornelissen, J. (2019). Heb je kinderen? Dit zijn de toeslagen waar je recht op hebt. *Algemeen Dagblad*. Retrieved 06, 22, 2021, from <https://www.ad.nl/economie/heb-je-kinderen-dit-zijn-de-toeslagen-waar-je-recht-op-hebt~ac510045/>

- Dearden, K., Hale, C., & Alvarez, J. (1992). The Educational Antecedents of Teen Fatherhood. *British Journal of Educational Psychology*, 62(1), 139-147.  
<https://doi.org/10.1111/j.2044-279.1992.tb01007.x>
- Deave, T., & Johnson, D. (2008). The Transition to Parenthood: What Does it Mean for Fathers? *Journal of advanced nursing*, 63(6), 626-633. <https://doi.org/10.1111/j.1365-2648.2008.04748.x>
- Deslauriers, J. M., Devault, A. P., Groulx, A., & Sévigny, R. (2012). Rethinking Services for Young Fathers. *Fathering*, 10(1), 66-90.
- Du Bois-Reymond, M. (2016). Learning Processes in the Transition to Young Parenthood. *Journal of Family Research*, 81-98.
- Dykstra, P. A., Kalmijn, M., Knijn, G., Komter, A., Liefbroer, A., & Mulder, C. (2006). *Family solidarity in the Netherlands*. Dutch University Press.
- Figueiredo, B., Field, T., Diego, M., Hernandez-Reif, M., Deeds, O., & Ascencio, A. (2008). Partner Relationships During the Transition to Parenthood. *Journal of reproductive and infant psychology*, 26(2), 99-107. <https://doi.org/10.1080/02646830701873057>
- Galdas, P. M., Cheater, F., & Marshall, P. (2005). Men and Health Help-Seeking Behaviour: Literature Review. *Journal of Advanced Nursing*, 49(6), 616-623.  
<https://doi.org/10.1111/j.1365-2648.2004.03331.x>
- Gillis, A., Gabriel, B., Galdiolo, S., & Roskam, I. (2019). Partner Support as a Protection Against Distress During the Transition to Parenthood. *Journal of Family Issues*, 40(9), 1107-1125. <https://doi.org/10.1177/0192513x19832933>
- Goodman, J. H. (2005). Becoming an Involved Father of an Infant. *Journal of Obstetric, Gynecologic, & Neonatal Nursing*, 34(2), 190-200.  
<https://doi.org/10.1177/0884217505274581>
- Hall, E. (1995). From Fun and Excitement to Joy and Trouble. An explorative Study of Three Danish Fathers' Experiences around Birth. *Scandinavian Journal of Caring Science*, 9(3), 171-179.
- Henderson, A. D., & Brouse, A. J. (1991). The Experiences of New Fathers During the First 3 Weeks of Life. *Journal of Advanced Nursing*, 16(3), 293-298.  
<https://doi.org/10.1111/j.1365-2648.1991.tb01652.x>
- Hiekel, N., Liefbroer, A. C., & Poortman, A. R. (2014). Understanding Diversity in the Meaning of Cohabitation across Europe. *European Journal of Population*, 30(4), 391-410.  
<https://doi.org/10.1007/s10680-014-9321-1>
- Karney, B. R., & Bradbury, T. N. (1995). The Longitudinal Course of Marital Quality and

- Stability: A Review of Theory, Methods, and Research. *Psychological Bulletin*, 17(4), 3-34. <https://doi.org/10.1037/0033-2909.118.1.3>
- Keizer, R., & Schenk, N. (2012). Becoming a Parent and Relationship Satisfaction: A Longitudinal Dyadic Perspective. *Journal of Marriage and Family*, 74(4), 759-773. <https://doi.org/10.1111/j.1741-3737.2012.00991.x>
- Keizer, R., Dykstra, P. A., & Poortman, A. R. (2010). The Transition to Parenthood and Well-Being: the Impact of Partner Status and Work Hour Transitions. *Journal of Family Psychology*, 24(4), 429-438. <https://doi.org/10.1037/a002041>
- Letourneau, N., Stewart, M., & Barnfather, A. (2004). Adolescent Mothers: Support Needs, Resources, and Support-Education Interventions. *Journal of Adolescent Health*, 6, 509-525.
- Levels, M., Need, A., Nieuwenhuis, R., Sluiter, R., & Ultee, W. (2012). Unintended Pregnancy and Induced Abortion in the Netherlands. *European Sociological Review*, 28(3), 1954–2002.
- Liefbroer, A., & Dykstra, P. A. (2000). *Levenslopen in verandering. Een studie naar ontwikkelingen in de levenslopen van Nederlanders geboren tussen 1900 en 1970*. Den Haag: Sdu Uitgevers.
- Mander, R. (1995). The Relevance of the Dutch System of Maternity Care to the United Kingdom. *Journal of Advanced Nursing*, 22(6), 1023-1026.
- Marucci, P. (2013). The Politics of Student Funding Policies from a Comparative perspective. In D. Heller, & C. Callender, Eds. *Student financing of higher education: A comparative perspective*. (pp. 9-31). Routledge.
- Matud, M. P., Ibañez, I., Bethencourt, J. M., Marrero, R., & Carballeira, M. (2003). Structural Gender Differences in Perceived Social Support. *Personality and Individual Differences*, 35(8), 1919-1929. [https://doi.org/10.1016/s0191-8869\(03\)00041-2](https://doi.org/10.1016/s0191-8869(03)00041-2)
- McKay, J. R., Rutherford, M. J., Cacciola, J. S., Kabasakalian-McKay, R., & Alterman, A. I. (1996). Gender Differences in the Relapse Experiences of Cocaine Patients. *The Journal of nervous and mental disease*, 184(10), 616-622. <https://doi.org/10.1097/00005053-199610000-00006>
- McLeish, J., & Redshaw, M. (2015). Peer support during pregnancy and early parenthood: a qualitative study of models and perceptions. *BMC Pregnancy and Childbirth*, 15(1), 1-14. <https://doi.org/10.1186/s12884-015-0685-y>
- Mead, S., & MacNeil, C. (2004). Peer support: What makes it unique. *International Journal of Psychosocial Rehabilitation*, 10(2), 1-23.

- Mills, M., Blossfeld, H., & Klijzing, E. (2005). Becoming an Adult in Uncertain Times: a 14-country comparison of the losers of globalization. In H. Blossfeld, E. Klijzing, M. Mills, & K. Kurz, *Globalization, Uncertainty and Youth in Society* (pp. 393–411). London: Routledge.
- Mollborn, S. (2007). Making the Best of a Bad Situation: Material resources and teenage parenthood. *Journal of Marriage and Family*, 69(1), 92-104.  
<https://doi.org/10.1111/j.1741-3737.2006.00347.x>
- Morse, C. A., Buist, A., & Durkin, S. (2000). First-time Parenthood: Influences on Pre-and Postnatal Adjustment in Fathers and Mothers. *Journal of psychosomatic obstetrics & gynecology*, 21(2), 109-120. <https://doi.org/10.3109/01674820009075616>
- Nederlands Jeugdinstituut. (2014). *Tienerouders: over hulp aan jonge moeders en vaders*. Retrieved from Fiom: <https://fiom.nl/sites/default/files/files/Tienerouders-over-hulp-aan-jonge-moeders-en-vaders.pdf>
- Nelson, S., Kushlev, K., English, T., Dunn, E., & Lyubomirsky, S. (2013). In Defense of Parenthood: Children are Associated with more Joy than Misery. *Psychological science*, 24(1), 3-10. <https://doi.org/10.1332/204674315x14352353233301>
- Neuvel, J., & Westerhuis, A. (2013). *Stromen en onderstromen in vo, mbo en hbo. Ontwikkelingen in leerlingenstromen door het Nederlandse onderwijsstels.* 's-Hertogenbosch: Expertisecentrum Beroepsonderwijs.
- Olson, D. A., & Shultz, K. S. (1994). Gender Differences in the Dimensionality of Social Support. *Journal of Applied Social Psychology*, 24(14), 1221-1232.  
<https://doi.org/10.1111/j.1559-816.1994.tb00555.x>
- Parfitt, Y., & Ayers, S. (2014). Transition to Parenthood and Mental Health in First-Time Parents. *Infant Mental Health Journal*, 35(3), 263-273.
- Parish, W. L., Hao, L., & Hogan, D. P. (1991). Family Support Networks, Welfare, and Work among Young Mothers. *Journal of Marriage and the Family*, 53, 203-215.  
<https://doi.org/10.2307/353144>
- Quinlivan, J. A., & Condon, J. (2005). Anxiety and Depression in Fathers in Teenage Pregnancy. *Australian & New Zealand Journal of Psychiatry*, 39(10), 915-920.  
<https://doi.org/10.1080/j.1440-1614.2005.01664.x>
- Rhein, L. M., Ginsburg, K. R., Schwarz, D. F., Pinto-Martin, J. A., Zhao, H., Morgan, A. P., & Slap, G. B. (1997). Teen Father Participation in Child Rearing: Family perspectives. *Journal of Adolescent Health*, 21(4), 244-252. [https://doi.org/10.1016/s1054-139x\(97\)00115-8](https://doi.org/10.1016/s1054-139x(97)00115-8)

- Richardson, R. A., Barbour, N. E., & Bubenzer, D. L. (1995). Peer Relationships as a Source of Support for Adolescent Mothers. *Journal of Adolescent Research, 10*(2), 278-290.  
<https://doi.org/10.1177/0743554895102005>
- Riessman, F. (1990). Restructuring help: A Human Services Paradigm for the 1990's. *American Journal of Community Psychology, 18*(2), 221-230. <https://doi.org/10.1007/bf00931302>
- Schonert-Reichl, K. A., & Muller, J. R. (1996). Correlates of Help-seeking in Adolescence. *Journal of Youth and Adolescence, 25*(6), 705-731.
- Sigle-Rushton, W. (2005). Young Fatherhood and Subsequent Disadvantage in the United Kingdom. *Journal of Marriage and Family, 67*(3), 735-753.
- Sippola, L. K., Buchanan, C. M., & Kehoe, S. (2007). Correlates of False Self in Adolescent Romantic Relationships. *Journal of Clinical Child and Adolescent Psychology, 36*(4), 515-521. <https://doi.org/10.1080/15374410701653740>
- Stouthamer-Loeber, M., & Wei, E. H. (1998). The precursors of young fatherhood and its effect on delinquency of teenage males. *Journal of Adolescent Health, 22*(1), 56-65.  
[https://doi.org/10.1016/s1054-139x\(97\)00211-5](https://doi.org/10.1016/s1054-139x(97)00211-5)
- Terry, D. J. (1991). Stress, Coping and Adaptation to New Parenthood. *Journal of Social and Personal Relationships, 8*(4), 527-547. <https://doi.org/10.1177/026540759184005>
- The World Bank. (n.d.). *Adolescent fertility rate (births per 1,000 women ages 15-19)*. Retrieved 04 17, 2021, from <https://data-worldbank-org.eur.idm.oclc.org/indicator/SP.ADO.TFRT>
- Thompson, G. (2016). Meeting the Needs of Adolescent Parents and their Children. *Paediatrics & Child Health, 21*(5), 273-273. <https://doi.org/10.1093/pch/21.5.273>
- Timmers, M., Fischer, A. H., & Manstead, A. S. R. (1998). Gender Differences in Motives for Regulating Emotions. *Personality and Social Psychology Bulletin, 24*(9), 974-985.  
<https://doi.org/10.1177/0146167298249005>
- Tyrer, P., Chase, E., Warwick, I., & Aggleton, P. (2005). 'Dealing With It': Experiences of Young Fathers in and Leaving Care. *British Journal of Social Work, 35*(7), 1107-1121.  
<https://doi.org/10.1093/bjsw/bch221>
- Unger, D. G., & Wandersman, L. P. (1988). The Relation of Family and Partner Support to the Adjustment of Adolescent Mothers. *Child development, 59*, 1056-1060.
- van Scheppingen, M. A., Denissen, J. J. A., Chung, J. M., Tambs, K., & Bleidorn, W. (2017). Self-Esteem and Relationship Satisfaction during the Transition to Motherhood. *The Journal of Personality and Social Psychology, 6*, 973-991.  
<https://doi.org/10.31219/osf.io/xv4np>

- van Wel, F., & Knijn, T. (2006). Transitional Phase or a New Balance? Working and Caring by Mothers with Young Children in the Netherlands. *Journal of Family Issues*, 27(5), 633-651. <https://doi.org/10.1177/0192513x05284858>
- Vossensteyn, H., & De Jong, U. (2006). Student Financing in the Netherlands: a Behavioural Economic Perspective. In P. Teixeira, D. Johnstone, M. Rosa, & H. Vossensteyn, *Cost-sharing and Accessibility in Higher Education: A Fairer Deal?* (pp. 213-239). Dordrecht: Springer.
- Weinman, M., Smith, P., & Buzi, R. (2002). Young Fathers: An Analysis of Risk Behaviors and Service Needs. *Child and Adolescent Social Work Journal*, 19(6), 437-453.
- Wilson, D. K., Kliwer, W., Bayer, L., Jones, D., Welleford, A., Heiney, M., & Sica, D. A. (1999). The Influence of Gender and Emotional versus Instrumental Support on Cardiovascular Reactivity in African-American adolescents. *Annals of Behavioral Medicine*, 21(3), 235-243. <https://doi.org/10.1111/1467-9507.00177>
- Xie, H., Cairns, B. D., & Cairns, R. B. (2001). Predicting Teen Motherhood and Teen fatherhood: Individual Characteristics and Peer Affiliations. *Social Development*, 10(4), 488-511. <https://doi.org/10.1111/1467-9507.00177>

### Appendix I: Overview of Respondents

Respondent	Type of father	Age at childbirth	Age at time of the interview	Number of children	In relationship with mother of child	Recruited via
Quirijn	Planned with favourable SES	25	24	1	Yes	Networks of friends and family
Bob	Planned with favourable SES	23	31	2	Yes	Networks of friends and family
Hugo	Planned with favourable SES	25	28	1	Yes	Researcher's network
Jayden	Planned with favourable SES	24	28	2	Yes	Snowball method
Jan	Unplanned with favourable SES	22	27	3	Yes	Researcher's network
Kyan	Unplanned with favourable SES	22	26	1	No	Networks of friends and family
Koen	Unplanned with favourable SES	18	23	3	Yes	Networks of friends and family
Hamza	Unplanned with favourable SES	24	28	1	Yes	Networks of friends and family
Boaz	Unplanned with less favourable SES	16	29	1	No	Youth organisation
Thijmen	Unplanned with less favourable SES	16	24	3	No	Youth organisation



## **APPENDIX II: CHECKLIST ETHICAL AND PRIVACY ASPECTS OF RESEARCH INSTRUCTION**

This checklist should be completed for every research study that is conducted at the Department of Public Administration and Sociology (DPAS). This checklist should be completed *before* commencing with data collection or approaching participants. Students can complete this checklist with help of their supervisor.

This checklist is a mandatory part of the empirical master's thesis and has to be uploaded along with the research proposal.

The guideline for ethical aspects of research of the Dutch Sociological Association (NSV) can be found on their website ([http://www.nsv-sociologie.nl/?page\\_id=17](http://www.nsv-sociologie.nl/?page_id=17)). If you have doubts about ethical or privacy aspects of your research study, discuss and resolve the matter with your EUR supervisor. If needed and if advised to do so by your supervisor, you can also consult Dr. Jennifer A. Holland, coordinator of the Sociology Master's Thesis program.

### **PART I: GENERAL INFORMATION**

Project title: Master thesis

Name student: Sanne van der Meer (401208sm)

Name supervisor: prof. dr. Keizer

Start date and duration: April - June

Is the research study conducted within DPAS: YES



## PART II: HUMAN SUBJECTS

1. Does your research involve human participants. YES

*If 'NO': skip to part V.*

If 'YES': does the study involve medical or physical research? NO  
*Research that falls under the Medical Research Involving Human Subjects Act (WMO) must first be submitted to [an accredited medical research ethics committee](#) or the Central Committee on Research Involving Human Subjects ([CCMO](#)).*

2. Does your research involve field observations without manipulations that will not involve identification of participants. NO

*If 'YES': skip to part IV.*

3. Research involving completely anonymous data files (secondary data that has been anonymised by someone else). NO

*If 'YES': skip to part IV.*

### PART III: PARTICIPANTS

1. Will information about the nature of the study and about what participants can expect during the study be withheld from them? NO
2. Will any of the participants not be asked for verbal or written 'informed consent,' whereby they agree to participate in the study? NO
3. Will information about the possibility to discontinue the participation at any time be withheld from participants? NO
4. Will the study involve actively deceiving the participants? NO  
*Note: almost all research studies involve some kind of deception of participants. Try to think about what types of deception are ethical or non-ethical (e.g. purpose of the study is not told, coercion is exerted on participants, giving participants the feeling that they harm other people by making certain decisions, etc.).*
5. Does the study involve the risk of causing psychological stress or negative emotions beyond those normally encountered by participants? NO
6. Will information be collected about special categories of data, as defined by the GDPR (e.g. racial or ethnic origin, political opinions, religious or philosophical beliefs, trade union membership, genetic data, biometric data for the purpose of uniquely identifying a person, data concerning mental or physical health, data concerning a person's sex life or sexual orientation)? YES
7. Will the study involve the participation of minors (<18 years old) or other groups that cannot give consent? NO
8. Is the health and/or safety of participants at risk during the study? NO
9. Can participants be identified by the study results or can the confidentiality of the participants' identity not be ensured? NO
10. Are there any other possible ethical issues with regard to this study? NO

**If you have answered 'YES' to any of the previous questions, please indicate below why this issue is unavoidable in this study.**

*I have answered yes on question six because I will ask for some demographic information from the respondent, namely: age of the respondent, relationship status, number of children, educational attainment, age of the respondent when the first child was born, and the respondent's age when the interview takes place. This study deliberately does not ask about*

*income because it is information that may be particularly sensitive to respondents. Besides, Dutch people are generally reluctant to talk about how much they earn.*

**What safeguards are taken to relieve possible adverse consequences of these issues (e.g., informing participants about the study afterwards, extra safety regulations, etc.).**

*The respondents will give their consent to use their data for the research using an informed consent letter. Besides, each interview will start with the informed consent of the interviewee. Moreover, fictitious names for the respondents will be used to ensure that sensitive information from the respondents cannot be traced back to the respondents' identity. This also applies to other information that can be traced back to the respondents (such as places of residence, names of authorities).*

**Are there any unintended circumstances in the study that can cause harm or have negative (emotional) consequences to the participants? Indicate what possible circumstances this could be.**

*I can imagine that respondents can evoke emotions because some questions focus on parenthood, relationships with the (ex) partner, family and friends. These are subjects that can have a specific meaning due to the respondent's experiences.*

*Please attach your informed consent form in Appendix II, if applicable.*

*Continue to part IV.*

## **PART IV: SAMPLE**

### **Where will you collect or obtain your data?**

*Interviews will be conducted online via Microsoft Teams or Zoom.*

### **What is the (anticipated) size of your sample?**

*The aim is to recruit between 10 and 15 respondents.*

### **What is the size of the population from which you will sample?**

*Unfortunately, no recent data is available on how many young fathers are in the Netherlands. However, on January 1st, 2003, there were 450 fathers under the age of 20. The question is how reliable this data is because many young fathers may not have been registered as fathers.*

*Continue to part V.*

## **Part V: Data storage and backup**

### **Where and when will you store your data in the short term, after acquisition?**

*The interview data will be securely stored on Microsoft OneDrive (cloud service) which is secured with SURFconext. The collected data will only be shared with supervisor Prof. Dr. R Keizer. This means that Prof. R Keizer (or strictly speaking, the Erasmus University Rotterdam) is the data owner. Sharing the data with Prof. R Keizer will be done via SURFfilesender. At SURFfilesender, the files are stored in a Dutch database in which encryption provides extra security.*

### **Who is responsible for the immediate day-to-day management, storage and backup of the data arising from your research?**

*I, Sanne van der Meer, am responsible for the day-to-day management, storage, and backup of the research data.*

### **How (frequently) will you back-up your research data for short-term data security?**

*After each interview I will save the recordings to Microsoft OneDrive. Eventually, the transcripts of the interviews will also be stored here.*

### **In case of collecting personal data how will you anonymise the data?**

*Respondents' names will be removed from the recordings and transcripts. Besides, fictitious names for the respondents will be used to ensure that sensitive information from the respondents cannot be traced back to the respondents' identity. This also applies to other information that can be traced back to the respondents (such as places of residence, names of authorities).*

**PART VI: SIGNATURE**

Please note that it is your responsibility to follow the ethical guidelines in the conduct of your study. This includes providing information to participants about the study and ensuring confidentiality in storage and use of personal data. Treat participants respectfully, be on time at appointments, call participants when they have signed up for your study and fulfil promises made to participants.

Furthermore, it is your responsibility that data are authentic, of high quality and properly stored. The principle is always that the supervisor (or strictly speaking the Erasmus University Rotterdam) remains owner of the data, and that the student should therefore hand over all data to the supervisor.

Hereby I declare that the study will be conducted in accordance with the ethical guidelines of the Department of Public Administration and Sociology at Erasmus University Rotterdam. I have answered the questions truthfully.

Name student:

Sanne van der Meer



Date: 08.03.2021

Name (EUR) supervisor:



Date: 17-03-2021

## **APPENDIX III: Informatie- en toestemmingsformulier**

### **Gegevens onderzoeker**

Naam: Sanne van der Meer

E-mail: 401208sm@student.eur.nl

### **Contactgegevens functionaris gegevensbescherming EUR**

E-mail: [privacy@eur.nl](mailto:privacy@eur.nl)

### **Toelichting onderzoeksproject**

Voor het scriptietraject van de master Social Inequalities (Erasmus Universiteit Rotterdam) zal data worden verzameld omtrent jonge vaders en hun ervaringen met het jonge ouderschap.

### **Toestemming betrokkene**

Hierbij geef ik,

(naam betrokkene)

toestemming voor het verzamelen, bewaren en analyseren van de gegevens die op basis van het interview worden verzameld. Dit geldt ook voor gegevens met betrekking tot mijn opleidingsniveau, beroepsstatus, gezinssamenstelling en etnische achtergrond. Ik ben op de hoogte van het feit dat uitsluitend de student (Sanne van der Meer) en de supervisor (prof. dr. R Keizer) van de student toegang hebben tot de verzamelde gegevens en dat deze gegevens maximaal 3 maanden worden bewaard.

### **Rechten betrokkene**

Ik ben mij ervan bewust dat ik inzage heb in mijn eigen gegevens en ik de verwerking van de persoonsgegevens kan laten rectificeren, wissen of beperken. De toestemming om mijn gegevens te gebruiken kan ik op ieder moment intrekken. Door het ondertekenen van dit formulier geef ik aan dat goed is uitgelegd waar dit onderzoek over gaat, waar het toe dient endat ik toestemming geef voor het verwerken van mijn gegevens.

Datum:

Handtekening:

