

Children in My Life

**Qualitative research on the fertility decisions made by women
from Democratic Republic of Congo in the Netherlands**



Source: www.climbtakeaction.com/Mother_and_Child_DRC.jpg

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Preface

This report is written as the final thesis of the master's degree in Sociology: Arbeids, Organisatie en Management (Labor, Organization and Management) at Erasmus University Rotterdam. This Master's thesis aims to provide explanations for the decisions regarding motherhood made by first and second generation immigrant women from the Democratic Republic of Congo (DRC) in The Netherlands. The empirical findings reported in this report are the outcomes of in-depth interviews with first and the second generation DRC women in the Netherlands. Their names will remain confidential.

It has been a fascinating experience for me to write this thesis. Despite all the difficulties I had during the research and writing process, I learned how to apply many sociological theories into real fieldwork. Furthermore, the interview process taught me how to interact socially with different, interesting people for research purposes.

I would like to thank my thesis supervisor, Dr. Mara Yerkes, for great support, ideas, and comments. Thanks also for the second reader, Prof. Dr. K.G. Tijdens, for all the positive comments. Finally, lots of thanks to all respondents for their contribution to this research.

I hope reader of this thesis will have a pleasant time reading this report as I had a pleasant time writing this report.

Irene Christanti Bandi
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Chapter 1. Introduction

The population of the Netherlands is ageing (Portegijs et al., 2006). Two trends are believed to be the cause of the ageing population in the Netherlands. First of all, as one of the results of the development in the medical technology, the life expectancy of people in the Netherlands has risen significantly from seventy-one years old for men and seventy-five years old for women in 1960, to seventy-eight years old for men and eighty-three years old for women in 2005 (Van Duin, 2008). As a consequence, the number of elderly in the Netherlands has increased dramatically over the last fifty years (De Graaf, 2008). According to long-term prognosis from CBS (Centraal Bureau voor de Statistiek: central institute of the statistic), it is expected that the number of people over the age sixty-five in the Netherlands will increase sharply from 2.3 million in 2010 up to 4 million in 2050 (De Graaf, 2008). It means that in the future the non-active employment population, the population of people over the age of sixty-five, will be high.

On the other hand, fertility in the Netherlands is declining significantly from 235.000 babies per year in 1960 to 185.000 babies per year in 2006 (De Graaf, 2008). A number of social factors, such as secularization, individualization, and emancipation, are believed to be the causes of the declining number of births in the Netherlands (De Graaf, 2008). Furthermore, the total fertility rate in the Netherlands decreased from 3.2 children per woman in 1960 to 1.7 children per woman in 2000 (De Graaf, 2008). CBS expects that the number of births in the Netherlands will continue to decrease in the coming years and the total fertility rate in the long-term will continue to remain low (De Graaf, 2008). For the Dutch labor market, it means that in the future there will be shortage of available workers since the decreasing fertility rate will lead decreasing numbers of the potential active employment population.

Since the number of people over the age of sixty-five is expected to increase, the welfare state's spending for the pension fund, social security, and health care services for the elderly is expected to grow as well (Gilbert, 2002). In the Netherlands, public expenditure on the pension fund is financed through a contribution plan, which is paid for by taxes from employers and employees (Ter Rele & Habets, n.d.). Additionally, this contribution plan partly finances the social security costs and health care service costs for the elderly (Sociaal-Economische Raad, 2001). Due to the ageing of the population and decrease in the active employment population as a result of declining fertility rates, this contribution plan has been

under pressure (Ter Rele & Habets, n.d.). Government income from taxes continues to decrease while expenditure for social security keeps increasing.

As one of the solutions to this problem, the Dutch government has intensified efforts to increase women's labor market participation (Van der Valk & Boelens, 2004). The main goal of this action is to encourage women to work more hours since the majority of women in the Netherlands work in part-time job, commonly twenty-four to thirty-four hours a week (Van der Valk & Boelens, 2004). As women's labor market participation has increased, it is expected that the taxes that women pay from their income will lighten the government's burden of the social security costs (Portegijs et al., 2006).

However, as regards to motherhood, having children might be a barrier to women's labor market participation (Hooghiemstra & Zuijlen, 2005). In the Netherlands, the majority of women with young children, four to twelve years old, work twenty-four to twenty-seven hours a week, while the majority of women who do not have children work thirty-two to forty-hours a week (Van der Valk & Boelens, 2004). This information suggests that woman's labor market participation is influenced by their decisions regarding fertility and vice versa. These decisions include: whether or not they want to have children, how many children they want to have, and at what age they want to have children (Van der Valk & Boelens, 2004).

One specific group of women has received special attention from the Dutch government is immigrant women. It appears that immigrant women have more problems integrating into the Dutch labor market, when compared to Dutch women (Van Gent & Van Waveren, 2008). The difficulties in entering the labor market faced by this group are mainly caused by a lack of Dutch language skills, low education background, and limited networks in the labor market (Van Gent & Van Waveren, 2008).

Furthermore, the Dutch government is more interested in promoting women's labor market participation to non-Western immigrant women than to Western immigrant women as labor market participation of non-Western women appears to be lower than Western women (Van Gent & Van Waveren, 2008). The fact that non-Western women on average have more children than Western women is suspected to be one of the causes of less labor market participation (Alders, 2003). Results from a study by Boekhoorn and de Jong (2008) show that the chance of stopping work or working less after the birth of the first child is higher in

non-Western women. Their labor market participation continues to decrease after the birth of subsequent children (Portegijs et al., 2006).

It appears from the studies mentioned above that non-Western immigrant women have the greatest issue with entering the Dutch labor market. Given that the government is trying to improve the labor market participation of non-Western immigrant women and that their labor market participation is suspected to be influenced by their decisions regarding motherhood, it is important that the government possess the knowledge about this group's views regarding their fertility because each decision non-Western women make could affect their labor market participation (Boekhoorn & De Jong, 2008). Possessing the knowledge about non-Western women's views regarding their fertility enables the government to anticipate undesirable situation in case the decisions made have negative consequences to family or social welfare (Boekhoorn & De Jong, 2008). For example, labor market participation of non-Western women is lower than Dutch women or Western-women and this situation is considered as an undesirable situation (Van Gent & Van Waveren, 2008). Since the great number of children that non-Western women have is expected to be one of the reasons why their labor market participation is low, possessing the knowledge about non-Western women's view regarding motherhood enables the government to choose which policy is the best in order to help these women combine job and childcare responsibility, therefore improving their labor market participation (Boekhoorn & De Jong, 2008).

A number of studies have addressed the issue of fertility among Non-western immigrant women. Results of these studies provide significant information to the government. In 2008, E-Quality published a book with the title "Gezinnen van de toekomst. Cijfers en trends" (Families of the future. Figures and trends). This report presents information regarding the development of Dutch and immigrant families, especially non-Western families. In 2005, the NGR (Nederlandse Gezinraad : Council of the Dutch family) released a publication called "Allochtonen gezinnen. Feiten en cijfers" (Immigrant families. Facts and figures). This publication outlines family characteristics of non-Westerners in The Netherlands. In the same year NiNsee, working together with the Dutch Ministry of Justice, published the results of research on teenage motherhood among Antillean girls in The Netherlands (NinNsee, 2005). Other reports on the decisions regarding motherhood of non-Western women in the Netherlands often come from CBS (Centraal Bureau voor de Statistiek: central institute of the statistic) and SCP (Sociaal en Cultureel Planbureau: institute of the social and cultural plan).

One of the important reports from CBS and SCP is the “Emancipation monitor”, which reports on the progress of the emancipation process in the Netherlands focusing on education, work and income, work and care responsibility, violence against women, and social decision making.

The above-mentioned reports offer valuable information concerning fertility among non-Western women in the Netherlands, especially in the four largest immigrant groups: Turkish, Moroccans, Surinamers, and Antilleans. Data presented in each report contributes a great deal to the government’s formulation of policy. Interestingly, in almost every report, the data concerning non-Westerners is presented by generation: the first and the second generation. From these reports, it appears that there are differences in the decisions regarding fertility between the first and second generations of non-Western women. First generation women have more children than the second generation women (Boekhoorn & De Jong, 2008), and first generation women on average are younger than second generation women when they have their first child (Distelbrink, Hooghiemstra, & Smit, 2005). Additionally, the chance of teenage motherhood is greater among first generation girls than second generation girls (Distelbrink, Hooghiemstra, & Smit, 2005).

Despite the useful information that these reports provided, there is an information gap. Although it is important to understand the reasoning behind the decisions regarding fertility as it helps the government to choose which policy is best in order to alter unwanted situations (Boekhoorn & De Jong, 2008), explanations for the differences in the decisions regarding fertility between the first and second generations of non-Western women are lacking. If policy regarding women’s labor market participation among the first and second generations of non-Western women is to be effective, then it is important to investigate explanations for the differences in the decisions regarding fertility between the first and the second generation of non-Western women. For this reason, this research will investigate explanations for the differences in the decisions regarding fertility between the generations. Results from this research will contribute new knowledge concerning fertility decisions among non-Western women in the Netherlands.

Furthermore, most of the research on immigrant women’s labor market participation in the Netherlands and decisions surrounding motherhood has focused on the four largest non-Western immigrant groups, yet there are other minor immigrant groups that deserve more

attention due to their growing population. One example is the growing group of immigrants from Democratic Republic of Congo (DRC). In the Netherlands, immigrant women from the DRC belong to the group of non-Westerners. This group has been chosen as the target group of this research as they are also part of the Dutch population and their population in the Netherlands has increased sharply over the last ten years (CBS, 2008). Hence, the main attention of this research is given to the following central question: “Is there a difference in fertility decisions among the first and the second generations of immigrant women from the DRC in the Netherlands and if so why?”

Chapter 2. Research questions

The purpose of this research is to determine the explanatory variables for the decisions regarding fertility among the first and second generation of immigrant women from the DRC in the Netherlands. As mentioned in the previous chapter, the central research question is formulated as follows:

Is there a difference in fertility decisions among the first and the second generation of immigrant women from the DRC in the Netherlands? If so why?

By addressing the following sub-questions, the central question will be answered:

1. Which factors influence women's fertility decisions?
2. To what extent do these factors apply to DRC women?
3. To what extent do first and second generation DRC women differ in this respect?

The topic concerning fertility decisions is here made up of three kinds of decisions: whether a woman wants to have children, how many children a woman wants to have, and at what age a woman wants to have children. These three decisions are considered to be important since according to Miller (1992), research indicates that fertility motivations undergo three steps in a psychological sequence before they are translated into action. First, the intentions of having children come into consideration, followed by the thoughts of preference for a certain number of children (Miller, 1992). The intention of having children and the preference for a certain number of children finally leads to the consideration of certain child-timing (Miller, 1992). Further discussion regarding relationship between attitude, intention and behavior will be elucidated in chapter three.

As indicated before, the target group in this research includes the first and the second generation of immigrant women from the DRC in the Netherlands. To clarify which women belong to the first generation and second generation, the definitions of the first and second generation of immigrants according to Distelbrink, Hooghiemstra and Smit (2005) is used. According to Distelbrink, Hooghiemstra and Smit, the first generation immigrant is someone who was born outside the Netherlands and immigrated to the Netherlands at the age of or after the age of sixteen. The second generation is someone who was born in the Netherlands to parent(s) who were born outside the Netherlands, or someone who was born outside the

Netherlands and immigrated to the Netherlands before the age of six. In this research, these definitions of the first and the second generation immigrant is used.

The central question of this research will be answered in three steps. The first step is to describe which factors generally influence women's decisions regarding their fertility, in particular the decisions regarding having children, number of children, and timing of childbirth. This step will be done by doing literature research regarding motherhood.

In the second step, investigation goes further into how first and second generation DRC women experience the decision-making process of having children with regards to these factors. This investigation will be done by conducting in-depth interview with DRC women. Subsequently, it will be analyzed at which point fertility decisions made by the first and the second generation DRC women in this respect differ.

Lastly, in the third step, conclusions will be drawn from the results of the previous two steps and these will be used to answer the central question of this research. These three steps will be discussed in more detail in the methodological chapter.

Chapter 3. Theoretical framework

Fertility behavior is based on certain factors (Schoen et al., 1997). From how Schoen et al. view fertility behavior, it seems that the decision of becoming a mother is a choice that influenced by certain socio-economic factors. Nevertheless, becoming a mother is not always been a choice that women can make among several options. In the past, becoming a mother was considered an experience that happens naturally. In the next paragraph, in order to show that the process of entering motherhood has changed from “nature” to “choice”, the discussion on the introduction of contraception technology will be elucidated. Given that this research views fertility decisions as choices that women make based on certain factors, the discussion on the contraception technology will be followed by theoretical discussion with regards to the sociological factors that influence decisions concerning fertility and how these factors lead to certain fertility behavior.

3.1. Transition in the process of entering motherhood

In traditional societies, to the beginning of the 20th century, entering motherhood was simply a natural result of sexual activity after marriage (Bledsoe, 1996). Having children at that time was determined by biological factors, such as the maturity of reproductive organs, the action of conception, and the timing of menopause (Bledsoe, 1996). However, since the introduction of contraception, having children has become a conscious choice that women can make (Bledsoe, 1996). With contraceptive technology, women can decide whether they want to have children, at what age they want to have children, and how many children they want to have (Bledsoe, 1996). Results of the research show that contraception technology is not only effective in controlling family size, but is also effective in preventing abortion for unwanted pregnancies (Bledsoe, 1996). Obviously, the use of contraceptive technology contributes to the transition from “uncontrolled” to “controlled” human reproduction (Bledsoe, 1996).

3.2. Factors influencing fertility decisions

The decision-making process of entering motherhood includes, but is not limited to, many factors, such as demographic, social, economic, cultural, psychological, and biological factors. Despite many possible factors, four socio-economic factors are discussed in this

chapter: psychological, cultural, economic, and women's educational background. The discussion is limited to these four factors because according to many social scientists, based on the results of the sociological and psychological studies that have been done in European countries, they are the primary factors that contribute to the decision-making process of entering motherhood (Basu, 1993; Eldering, 2005; Boekhoorn & de Jong, 2008; Fokkema & Esveldt, 2008; Schoen, et al., Van der Lippe, 2008).

3.2.1. Psychological factors

Based on the results of socio-psychological studies, psychological factors appear to have strong influences on the fertility decisions made by male and female, and mainly on the decision of whether to have children (Van der Lippe, 2008). However, this chapter will only discuss fertility decisions made by women as motherhood is the topic for this thesis. As the decision of entering motherhood is one of the focuses in this research, it is important to take the psychological factors into account. According to Miller, psychological motivations of entering motherhood are built up mostly from personality traits, which are nurturance (taking care of others) and affiliation (enjoying being with others) (as cited in Van der Lippe, 2008, p.5). Some women consider having children an intrinsic value that cannot be substituted by other life-values, such as money, career, or hobbies (Bachrach, 2001). Since having children is viewed as life-fulfillment, these psychological factors might have positive effect on fertility decision which leads to high fertility rates (Bachrach, 2001; Van der Lippe, 2008). The way women considered the value of having children as a center of life-fulfillment is seen as a "modern" view (Bachrach, 2001).

Bachrach (2001) says, based on the research, in either Western or non-Western countries, this modern view is still common. However, there are more women who accept a "postmodern" view of fertility in Western countries than in non-Western countries (Bachrach, 2001). Women who accept a postmodern view of fertility usually put higher value on personal freedom and quality of life derived from material assets above the value of children (Bachrach, 2001). This postmodern view is believed to be one of the reasons of the declining fertility in Western countries (Bachrach, 2001).

According to Hotz, Klerman, and Willis (as cited in Gustafsson et al., 2002, p.10), the value of having children also contributes to the timing of birth. Woman who assumes that a child always bring positive value to her may prefer an early birth since she can then enjoy more time with her child (Gustafsson et al., 2002).

3.2.2. Cultural factors

Another factor that also has a strong influence on fertility decisions is culture (Basu, 1993). Two studies, the World Fertility Survey and the Princeton European Fertility project, confirm that culture is often found as an essential factor in fertility behavior (Basu, 1993). In order to fully understand how culture can influence the decisions regarding fertility we need to understand what culture is. What is culture? There is no one exact definition for culture. Experts from different disciplines have their own definitions. According to Harris, an anthropologist, culture is a pattern of behavior which is learned and thought in a certain social group (as cited in Eldering, 2005, p.49). Keesing, a linguist and also an anthropologist, defines culture as knowledge which belongs to members of a certain society (as cited in Eldering, 2005, p.49). Two social theorists of archeology and ethnography, Kroeber and Kluckhohn, have more than 150 definitions of culture in many categories (as cited in Eldering, 2005, p.49).

Despite the many definitions of culture, experts agree that culture is learned, belongs to a certain group in society, and affects a person's attitude (Eldering, 2005), including how a person makes decisions concerning having children. Culture is not an instant knowledge that everybody has immediately after birth. In the growing-up phase, children learn the culture of the society to which they belong. This process is called enculturation (Eldering, 2005). In this process children learn from their parents about who they are, in what kind of society they are living, and how they must behave according to certain values and norms (Eldering, 2005). Therefore, Kloos also defines culture as inherited knowledge because it is taught from one generation to the next (as cited in Eldering, 2005, p.51). The enculturation process is similar to the socialization process discussed by Durkheim. Each person, according to Durkheim, is a product of their society (as cited in Macionis & Plummer, 2005, p.91-94). It means that any kind of behavior or model that characterizes a particular society converts a person into a functioning member of that society through the learning process (as cited in Macionis &

Plummer, 2005, p.91-94). As a result, a person will behave according to the values and norms of that society (as cited in Macionis & Plummer, 2005, p.91-94).

Tenneke, an anthropologist, emphasizes that culture in general is adapted to the condition of society, which means that a new culture will be produced when the old no longer agrees with the new social condition (as cited in Eldering, 2005, p.50). Buiks implies that culture is not static (as cited in Dialektopoulos, 2003, p.53). The culture of a person will develop according to the environment in which the individual lives. When it comes to the matter of cultural development in the life of immigrants, it is possible that the immigrants will adapt to the host culture, the culture of the country where they are immigrants (Van Rooij et al., 2006). However, it does not mean that the immigrants will lose their whole ethnic identity (Dialektopoulos, 2003). A situation where two different cultures meet, similar to what the immigrants experience when they are confronted with the host culture, is called acculturation (Eldering, 2005). When acculturation takes place, there is a big chance that a new culture will be produced (Eldering, 2005). Erikson says that it is common for immigrants to intentionally or unintentionally adapt to the values and norms of the host society (as cited in Dialektopoulos, 2003, p.57). The process of adaptation usually happens in order to survive in the new society (Dialektopoulos, 2003).

With regards to fertility decisions, the decisions that immigrant women make might not only be influenced by the culture of origin, which is the culture of the country she is coming from, but also influenced by the host culture (Van Rooij et al., 2006). In 2005, a study was conducted on the influence of the Dutch culture on fertility motives of involuntary childless Turkish immigrants in the Netherlands (Van Rooij et al., 2006). Results of this study show that fertility motives of Turkish women who are less adapted to the Dutch culture are different from fertility motives of Dutch women. However, some similarities in fertility motives between Turkish and Dutch women are found in Turkish women who are more adapted to the Dutch culture. These findings suggest that fertility motives are indeed dynamic and they can be influenced by the culture where an individual lives (Van Rooij et al., 2006).

Related to how the immigrants adapt to the host culture, the first generation immigrant is expected to have stronger feelings about their culture of origin than the second generation (Eldering, 2005). Lotty Eldering, professor of intercultural pedagogy at the University of Leiden (the Netherlands), has conducted a twenty-five year study on the social life of

immigrant families in the Netherlands (Eldering, 2005). This study investigates the influence of both the culture of origin and the Dutch culture in the life of immigrants in the Netherlands (Eldering, 2005). Results of this study show that the parenting style of the first generation parents is strongly influenced by the culture of origin. Findings of the study also suggest that the parenting style of non-Western immigrants is different to the parenting style of Western immigrants. The first generation parents from non-Western countries usually try to place themselves as role models in the lives of their children (Eldering, 2005). The role model is influenced by ethnic norms and values (Eldering, 2005). By acting as role models, parents expect that their children will always take their ethnic culture into consideration in the making of decisions, such as social life, marriage, or any decision regarding their fertility (Eldering, 2005).

The second generation immigrant tends to be different to the first generation in the ways they are adapting to the host culture (Eldering, 2005). The second generation immigrant grows up from a young age in the country to which their parents immigrated. They learn the local language faster than their parents. Due to their intense interaction with the local society outside of their family, they learn faster how to live and act according to the host values and norms (Eldering, 2005). Thus, the second generation of immigrants from the non-Western family who live in a Western country might act more according to Western values and norms (Van Rooij et al., 2006). Therefore, the host culture might reflect more on fertility decisions which the second generation women make than the first generation women make (Van Rooij et al., 2006).

3.2.3. Economic factors

Economic factors also contribute to the decision-making process of entering motherhood, the timing of childbirth and the number of children. Results from a longitudinal study show that interdependency culture is often found between family members in the same generation and different generations of non-Westerners (Eldering, 2005). What Eldering meant by interdependency culture is that family members of non-Westerners tend to be dependent on each other emotionally and economically (Eldering, 2005). One example is that children of the non-Western families are obliged to support their parents economically when they have reached adulthood, especially when their parents cannot support themselves due to age.

Therefore, having children, especially many children, is considered as a guarantee for a stable financial life in their old age for many non-Westerners (Eldering, 2005).

Western people, both male and female, tend to have different economical views regarding the presence of children in their lives (Fokkema & Esveldt, 2008). Firstly, raising children is costly. Costs of raising children include direct cost, such as the cost of childcare, and opportunity cost, such as the possibility of reduced income due to time dedicated to motherhood (Klein & Eckhard, 2007). According to Klein and Eckhard (2007), both the value of children and the cost of raising children play parts in shaping fertility behavior. In this matter, for most Western women, the desire to enter motherhood because children's emotional value is stronger than the cost of children. Western women expect that children give more psychological gain than economical gain (Fokkema & Esveldt, 2008).

Secondly, due to the decent income from their job and developments in government social security support in Western countries, Western parent(s) feel that it is unnecessary to count on financial help from their children (Fokkema & Esveldt, 2008; Eldering, 2005). Thus, the economic reason to have many children as a guarantee for their old age is decreasing in importance. This phenomenon is believed to be one of the reasons for the decreasing numbers of children per women in Western countries, such as European countries, (Fokkema & Esveldt, 2008; Eldering, 2005).

Concerning timing of entering motherhood, especially on the subject of postponing birth, the economic theoretical literature provides two main explanations (Gustafsson et al., 2002). The first explanation is the consumption-smoothing motive which implies that the best time to have children is the time when income in the household is high so that despite child costs, other consumptions are still affordable (Gustafsson et al., 2002). Postponing motherhood for this reason is usually caused by the fact that income typically increases with an increase in age (Gustafsson et al., 2002). The second explanation is the woman's career-planning motives which explain that postponement of birth occurs because of the woman's desire to build a career before having children (Gustafsson et al., 2002).

3.2.4. Women's educational background

Another major sociological factor which accounts for decisions regarding fertility is women's educational background (Boekhoorn & de Jong, 2008; Fokkema & Esveldt, 2008). According to Doorten and Struijs, the decreasing number of children in modern society is one of the consequences of higher education levels of women (as cited in Boekhoorn & de Jong, 2008, p.35). Hence, Doorten and Struijs mention that high education levels of women have a big effect on the decisions to postpone entering motherhood (as cited in Boekhoorn & de Jong, 2008, p.35). Two main explanations for this are: first, finishing higher education is time consuming and secondly, women with a high education background typically have a higher desire for self development (De Meester et al., 2005). To support this idea, Doorten and Struijs name the following behaviors, typically found in highly educated women, displayed by those who want to postpone having children (Boekhoorn & de Jong, 2008).

First of all, Doorten and Struijs suggest that the higher the education level people have, the higher the income they can earn (Boekhoorn & de Jong, 2008). This means that once they stop working to take care of children, they have to sacrifice their income (Boekhoorn & de Jong, 2008). In this case women have a greater chance of losing their income than men since the likelihood that women stop working once they have children is greater (Boekhoorn & de Jong, 2008). In modern society, where women are higher educated than in the past, education is considered as a life investment (Boekhoorn & de Jong, 2008). To avoid losing their life investment and income, women often prefer to postpone having children (Boekhoorn & de Jong, 2008).

Second of all, many women, especially highly educated women with successful careers, have difficulty in managing their careers and household responsibilities at the same time (Boekhoorn & de Jong, 2008). Doorten and Struijs add to this by saying that from the career perspective it is better for a woman to focus on her job first (as cited in Boekhoorn & de Jong, 2008, p.35). Focusing on a career is very important for women, especially in their first year so that their position in the organization can be strengthened (Boekhoorn & de Jong, 2008). That is why postponing having children seems to be a good option for them (Boekhoorn & de Jong, 2008). Portegijs agrees with Doorten and Struijs' opinion about women, children, and careers. According to Portegijs, in modern society where women are more likely to participate in the labor market, women tend to postpone having children due to the difficulty in

combining career and the task of taking care of the family (as cited in Boekhoorn & de Jong, 2008, p.36). It is obvious that there is strong relation between fertility decisions and women's careers. However, this research will not discuss this relationship as it is not the focus of this study.

Another behavior that is typically found in highly educated women, as reported by the RVZ (de Raad voor de Volksgezondheid: the council of the citizen's health), is that they tend to look for life security first before deciding to take responsibility of having children. What they mean by life security is a stable relationship, a good job with a decent salary, a house, or other stable activities (Boekhoorn & de Jong, 2008).

Furthermore, in this study, women's education level will be differentiated into three levels based on the Dutch education system, which are mbo, hbo, and university.

3.3. Relationship between attitudes-behavior

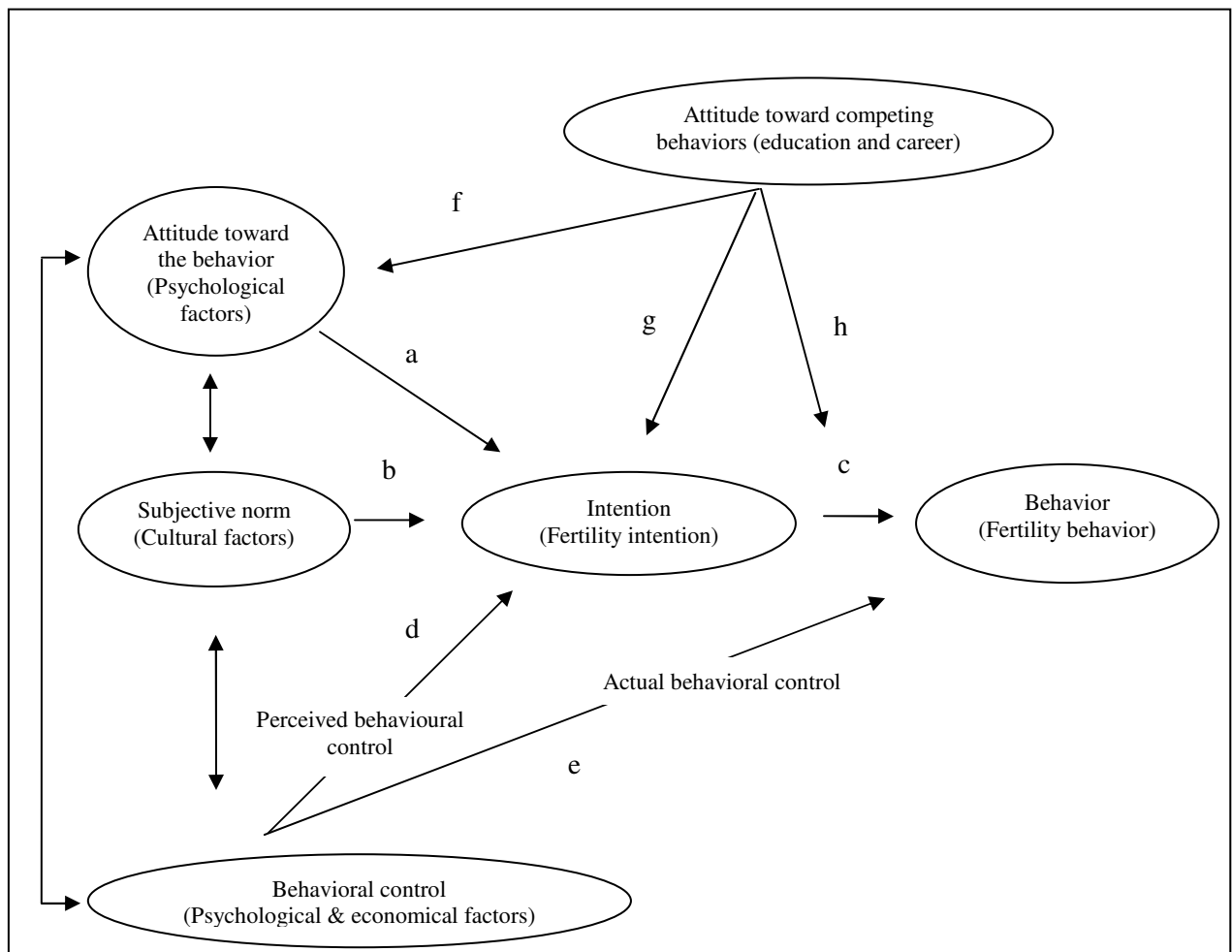
As mentioned before, the four factors above are the primary factors that often contribute to the decision-making process of fertility behavior. In this decision-making process, individual attitudes are an essential mechanism that affects individual behavior (Barber, 2001). Many social scientists, such as La Pierre, Ajzen, Fishbein, Bagozzi, and Wright have interest in the relationship between attitudes and behavior (as cited in Barber, 2008, p.101). One of the well-known theories regarding the relationship between attitudes and behavior is the preference theory by Catherine Hakim (1998).

The preference theory attempts to predict or explain the choices that women make between lifestyle centered on work and lifestyle centered on family (Hakim, 1998). Hakim contends that individual attitudes and preferences are good predictors of behavior. Despite the fact that the preference theory is an interesting theory in predicting or explaining attitudes-behavior relationship, this theory is not relevant to this research. This is because the preference theory views individual behavior as the only relevant factor that influences one's choices, while many other social scientists argue that individual choices may also be influenced by other factors, such as education, age, culture, and others (Van Rooij, 2006; Eldering, 2005; Fokkema & Esveldt, 2008; Boekhoorn & de Jong, 2008; Ajzen & Fishbein, 2001). Hakim's

preference theory is not used in this research since this research has its focus not only on individual behaviors as influencing factors on women’s fertility decisions, but also focuses on the psychological, cultural, and economic factors.

However, another social- psychological theory called the theory of reasoned action and behavior by Ajzen and Fishbein (as cited in Barber, 2001, p.102-105) is applicable in this research as a framework in explaining or predicting women’s fertility behavior. This theory is relevant to this study as it takes psychological, cultural, economic factors and women’s educational background into account in explaining or predicting women’s fertility behavior.

Figure 1. The theory of reasoned action and behavior by Ajzen en Fishbein applied to the subject of this research: fertility decisions made by DRC women in the Netherlands.



Source: as cited in Barber, 2001, p. 103

The theory of reasoned action and behavior has been used in many studies from various domains such as the study of environmental concern by Schultz and Oskamp in 1996, the study of drug use by Grube and Morgan in 1990, the study of weight loss by Netemeyer, Burton, and Johnston in 1991, and the study of exits from homelessness by Wright in 1998 (as cited in Barber, 2001, p.102).

As mentioned earlier, this research has its attention on four influenced factors that affect women's fertility behavior, which are psychological, cultural, economic, and women's educational background and their labor market participation. In the theory framework, presented in figure 1, attitude toward a certain behavior and subjective norm (social pressure) predicts intentions, and intentions predict behavior. Ajzen defines an attitude as a disposition to react to a person, an object, or event (as cited in Barber, 2001, p.102). Furthermore, subjective norm is defined as rules and expectations of a particular society that guides behavior of individuals as it's members (Macionis & Plummer, 2005).

Psychological factors, according to Ajzen & Fishbein, may influence one's attitudes toward a particular behavior, for example, a woman with negative attitudes toward children may postpone the timing of entering motherhood or may decide not to have children at all. Cultural factors in this research may then act as a subjective norm, for example, a woman may choose to have a certain number of children as it is custom according to her culture.

According to Ajzen and Fishbein individuals do not always choose or able to do certain actions that are coherent with their attitudes (as cited in Barber, 2001, p.103). Structural, external, and environmental factors appear to be important factors that determine whether individuals are able to reach their goals (as cited in Barber, 2001, p.103). Therefore, in the theory of reasoned action and behavior, Ajzen adds behavioral control that affects the link between intentions and behavior. The behavioral control is then divided into two kinds of behavioral control, which are perceived behavioral control and actual behavioral control.

Arrow d from figure 1 represents perceived behavioral control, which is an individual's confidence to perform certain behaviors. Subsequently, perceived behavioral control affects an individual's intention. For example, a woman who believes that pregnancy after the age of thirty is dangerous to a baby's health may decide to enter motherhood before she reaches thirty.

Arrow e represents actual behavioral control that affects an individual's behavior. Actual behavioral control is actual factors that may influence the reality, whether an individual's intentions may or may not turn into a real action. For example, a woman who wishes to have five children in reality has only two children due to the financial difficulties in raising children. Furthermore, psychological and economical factors may have an influence on both the perceived and actual behavioral control.

Other influenced components in this framework are attitudes toward competing alternative behaviors. These components may influence the link between attitude and behavior in three ways: through attitudes, through intentions, and through behavioral control. In this research, women's educational backgrounds and their preference for entering the labor market are considered as attitudes toward competing alternative behavior. For example, research by Thornton, Axinn, and Teachman in 1995 has shown that women with high education levels and successful careers are more likely delay childbirth (as cited in Barber, 2001, p.103).

In chapter five, it will be discussed in detail how the theory of reasoned action and behavior predicts or explain fertility decisions made by the first and the second generation DRC women. Those fertility decisions include the decisions of entering motherhood, timing of childbirth, and number of children.

3.4. Chapter conclusion

Since the introduction of contraception technology, fertility decisions have become a conscious choice that women can make based on certain factors (Bledsoe, 1996). Theoretically, this research view fertility decisions as choices that women make based on socio-economic factors: psychological, cultural, economic, and women's educational background. The theoretical discussion is limited to these four factors as according to many social scientists, based on the results of the socio-psychological studies that mainly has been done in European countries, they are the primary factors that often contribute to the decision-making process of having children (Basu, 1993; Eldering, 2005; Boekhoorn & de Jong, 2008; Fokkema & Esveldt, 2008; Bachrach, 2001; Schoen, et al., Van der Lippe, 2008).

It is expected that fertility decisions that DRC women made can be mainly explained by these four socio-economic factors. Furthermore, the theory of reasoned action and behavior by Ajzen and Fishbein will be used as a theoretical framework to explain or predict how exactly these four socio-economic factors affect the fertility decisions that DRC women made. Those fertility decisions include the decisions concerning entering motherhood, timing of childbirth, and number of children.

Chapter 4. Research methodology & data

4.1. Research methodology

In this research, two main methods are used. The first research method is desk-research, in which secondary data is collected from existing publications (Babbie, 2004). Desk-research is performed since existing information concerning topic of the thesis topic seems to be useful as a support in the whole process of the research. According to Babbie (2004), exploring what other researchers may have written about a specific issue might help the next researcher designing a research, such as choosing a specific topic amongst on area of interest, defining the purpose of the research, formulating research questions , creating a theoretical framework, and so forth (Babbie, 2004).

As mentioned before, the main research question in this research is “Is there a difference in fertility decisions among first and second generation immigrant women from the DRC in the Netherlands and if so why?” This research question will be answered by addressing the following sub questions: which factors influence women’s fertility decisions? To what extent do these factors apply to DRC women? To what extent do first and second generation DRC women differ in this respect?

The desk-research in this process is done to provide answers for the first sub-question of the research, which describe which factors generally influence women’s decisions regarding their fertility, in particular the decisions regarding entering motherhood, number of children, and timing of childbirth. Results of the desk-research in this step form theoretical framework which are present in the third chapter of this report.

The second research method is in-depth interviews. Fertility decisions that woman make are individual choices (Boekhoorn & De Jong, 2008) that may also be influenced by the choices of the partner. However, since this study only focuses on the women’s fertility decisions on the individual level, the influence of a partner’s preference will not be discussed. Furthermore, in-depth interview is chosen for this research since it appears to be a good method for explanatory study, especially when the subject of the study concerns individual experience (Babbie, 2004). Moreover, Braster (2000) also mentioned that in-depth interviews

are typically characterized by interview questions that will correspond with respondent's situations and tempo. As the interview questions correspond with respondent's situation and tempo, it is expected that the respondent will feel comfortable in expressing their answers. As a result, better and deeper information will be obtained. For these reasons, in-depth interview is preferable for data collection in this research.

As mentioned earlier, the targeted respondents for the interviews are the first and the second generation of immigrant women from DRC in the Netherlands. These respondents are recruited from private networks, such as: friends and attendants of community activities, by using snowball sampling whereby suggestion for other potential respondents may be found from a respondent interviewed. According to Babbie (2004), this is a good method when the potential respondents are difficult to locate since they belong to a special group, in this case DRC women. In the process of gathering respondents, equal distribution over the first and the second generation DRC women is taken into account.

To increase the chance that more people will participate in this research, each potential respondent was personally approached, told what the research was about, and asked whether she wanted to participate in the research.

Gathering respondents was the most challenging part in this fieldwork since suitable respondents who were willing to participate in this research were difficult to find. Women from the first generation were easier to find than women from the second generation. This is probably because the number of DRC adult women from the second generation is much less than DRC adult women from the first generation. CBS recorded that in 2008 there were 2.078 DRC women in the Netherlands, aged fifteen to seventy, while the number of DRC women with the same age range from the second generation was 294. This huge difference in numbers between the first and the second generation exists due to the fact that most DRC immigrants came to the Netherlands following 1990's and their population in the Netherlands has sharply increased since 1996 (Ministerie van Justitie, Directie Coördinatie Integratiebeleid Minderheden, 2006). Therefore, most of the second generation of DRC immigrants in the Netherlands are still at a very young age, which makes them unsuitable as a respondent for this research. For that reason, it was also hard to find women only with children as respondents. Thus, respondents were not limited to women with children, but were expanded to include women from both generations who could talk about their fertility decisions.

Though the interviews generally went well, difficulties did occur. The first difficulty was finding participation from the first generation women. Although the first generation women were easier to find than the second generation women, it was more difficult to ask participation from the first generation women than from the second generation women. The biggest issue was the topic of the research is too sensitive for many women from the first generation even though this was an anonymous research.

The second difficulty occurred during the interview. Some of the respondents, mostly the first generation women, were not fully open in expressing information at the beginning of the interview. Nevertheless, this problem was solved by using tips from Weiss (1995). Weiss mentioned that the respondent may show hesitation during the interview when the questions are sensitive to the respondent. To avoid this problem, it is better to start with general questions regarding relevant subjects that the respondent has interest in (Weiss, 1995). Once the respondent shows more confidence on the subject, the conversation may then continue into deeper matter (Weiss, 1995). When the awkwardness occurred at the beginning of the interview, questions regarding fertility condition in DRC and how the respondent feels about that subject were asked. Respondents who at first seemed to be hesitating in sharing their experiences concerning fertility behaviour were really enthusiastic about sharing information about their country. When information given was consequently related to the questions regarding their own experiences, they had full confidence in sharing their experiences.

Although the goal of the interview was already explained at the time participation of the respondents was asked, the explanation was given one more time before the interview started. The respondent was also informed that her name would remain confidential. Ensuring that the respondent is aware of the goals of the interview and that their confidentiality will be fully respected are good methods in building a relationship between the respondent and the interviewer (Weiss, 1995). Once trust is built between the respondent and the interviewer, it is expected that the respondent will show his or her confidence in expressing information (Weiss, 1995).

For the interviews, open-ended questions, which characterize the non-structured interviews, are used. Open-ended questions are considered to be the most suitable type of question for this research because firstly, they do not require the respondent to choose one answer from among several designed answers (Braster, 2000). Therefore, the respondent has freedom to

express her answers (Braster, 2000). Secondly, open-ended questions use global interview questions instead of specific questions, which enable the interviewer to elaborate the questions based on the given answers. Thus, it is expected that better information can be gained from the interviews (Braster, 2000).

Hence, during the interview, the following basic questions were asked:

- Where were you born?
- When did you come to the Netherlands?
- What is the highest education level you have completed?
- Are you single? Married? Living with your partner?
- Questions regarding the economic conditions of the respondent
- How many children do you have?
- How old were you when you had your first, second, or any subsequent child?

The basic questions above focus on the respondent's background. They determined whether the respondent is considered as the first or second generation, the place of birth and how long the respondent has lived in the Netherlands. Respondent's education background, number of children, age when she had her children, and other questions regarding the respondent's economic situation were asked in order to analyze the pattern of fertility decisions made by the respondents from different generations. The interview questions were aimed towards three main issues, which are: entering motherhood, timing of births, and number of children. Furthermore, during the interview, the following areas were kept in mind:

- Respondent's view over the Dutch culture concerning parenthood
- Respondent's view over their culture of origin concerning parenthood
- Respondent's view over the importance of preserving the culture of origin concerning parenthood
- Respondent's view on the importance of children as a source of life-fulfillment (nurturance, affiliation, autonomy)
- Respondent's view on the importance of economic value of children
- The importance of respondent's career compared to parenthood

4.2. Empirical data

For this qualitative research, thirteen interviews were conducted. The interviews were carried out with seven respondents from the first generation and six respondents from the second generation. Profiles of the respondents are presented in Table 1. As respondent's backgrounds may affect their decision regarding fertility, Table 1 consists of respondents' relevant information, such as age, marital status, education background, number of children, respondent's employment status, and employment status of partner of the respondents. The variation in respondent's profiles, such as education level, marital status, employment status, and number of children, is an effect of the snowball method that is used to gather respondents.

Table 1. Profile of the respondents

<i>First generation</i>								
Respondent number	Age	Marital status	Education background	Number of children	Respondent		Respondent's partner	
					Employment status	working hours/week	Employment status	working hours/week
1	51	Divorced	Hbo	3	Employed	40	N.A.	N.A.
2	26	Single	Hbo	None	Internship	32	N.A.	N.A.
3	31	Divorced	Hbo	1	Employed	36	N.A.	N.A.
4	39	Single	Mbo	2	Unemployed	N.A.	N.A.	N.A.
5	30	Married	Mbo	2	Employed	32	Employed	40
6	22	Married	Hbo	None	Student	N.A.	Employed	40
7	55	Divorced	Hbo	3	Employed	Variable	N.A.	N.A.
<i>Second generation</i>								
Respondent Number	Age	Marital status	Education background	Number of children	Respondent		Respondent's Partner	
					Employment status	working hours/week	Working/not working	working hours/week
8	24	Married	Hbo	1	Employed + student	24 working hours + 1 day school	Entrepreneur	40
9	22	Single	University	None	Employed + student	Variable working hours + 4 days school	N.A.	N.A.
10	24	Single	Hbo	None	Student	N.A.	N.A.	N.A.
11	25	Engaged	Mbo	2	Unemployed	N.A.	Employed	40
12	27	Living together	Hbo	1	Employed	15	Employed	40
13	24	Engaged	Hbo	None	Employed + student	Variable working hours + 4 days school	Employed	40

Thirteen interviews are considered sufficient for this research since saturation is reached after interviews with thirteen respondents have been done. Furthermore, there is no new information gained after the sixth interview with the first generation and the fifth interview with the second generation.

Interviews were carried out in Dutch as it was the preferred language of the respondents. Given that this thesis is written in English, the statements from the respondents in chapter five are translated in English. However, the original version of the statements can be found in the appendix at the end of this thesis.

The duration of each interview was approximately forty five to sixty minutes. Most of the interview took place at the respondent's house. All interviews were tape recorded so that attention could be given more to what respondent said than being busy writing down the information. Transcripts of the interviews are then made to make the process of data analysis in the next step easier.

Chapter 5. Discussion on findings

As mentioned in the research question chapter, the topic concerning fertility decisions in this thesis is made up of three kinds of decisions: the decision concerning entering motherhood, timing of childbirth, and number of children. Therefore, the discussion of findings from the interviews, along with the statements that respondents gave, will be categorized in this chapter based on those three types of decisions.

5.1. Entering motherhood

From Table 1, in chapter 4, we can see that some of the respondents have children and some of them do not have children. When a question concerning planning of having children was asked, all respondents from both generations mention that they wish(ed) for children in their life. Psychological factors appear to be the strongest reason that the presence of children is desired by the respondents.

5.1.1. Psychological factor: experience motherhood

Most of the respondents, especially respondents from the first generation put high value on having their own children as it allow them to experience motherhood.

“I want my own child. I want someone that belongs to me. I think that is what lots of women want. Having children, I want to feel that. I want to become a mother, feel someone calling me mother. It is so beautiful. You cannot get that feeling from anything else. A child is someone that really belongs to you.” (Respondent 2, first generation).

“My father and my mother have children. I want to have a child to because my child is really a child of myself. I cannot say that my brother’s child is mine. I want my own child. They are not my children. I really want to have my own child.” (Respondent 4, first generation).

Moreover, respondents from both generations believe that having their own children is a unique experience since they see children not only as a result of the relationship between them

and their life partner, but they also see children as a transformation of themselves or partner in the form of another human figure.

“I think if you love somebody, you will want to have something beautiful together. That for me is a child. It is something to prove our love. We see that through our children. You can see yourself in your children. If I see my children, I can see their father. If their father is not around, I will see my son and I will think that you (the father) are here but in another way. If your husband says that he (the son) has your mouth, he has your nose, that makes me happy.” (Respondent 5, first generation).

“If you are married, you bring someone (a child) into the world together (with husband). I think that is beautiful. And you can take care of him or her. That is your responsibility. Bring children into the world, raise them until they become good persons.” (Respondent 9, second generation.)

As it is reflected from the statements that respondents gave, psychological factors appear to be dominant factor that influence their decision on having children. Sentimental value that makes respondents from both generations wish to have children confirms Bachrach's theory (2001) on the intrinsic value of having children which cannot be substitute by other life-experiences. The way respondents see children as a beautiful result from their relationship with their life partner and as a life-fulfilment of being a mother makes the presence of children cannot be substituted by other objects in life.

Differences in opinion occur between the first and the second generation when a question regarding acceptance of women who voluntarily do not wish to have children was asked. Most respondents from the first generation strongly reject the idea that women may voluntarily decide not to have children, while most respondents from the second generation accept this idea. Respondents from the first generation believe that women biologically have the responsibility to bring a child into the world.

“We exist in the world to continue the reproduction cycle. You do not need to have many children. One could be enough, or two, or three. But if you say that you do not want children at all, you are a woman, you have a uterus. If you do not have that, you had to be born as a

man. You are not born as a woman for nothing. I think some women have to consider that seriously.” (Respondent 5, first generation).

“If someone (woman) does not want to have children and they wish to do something else, that is their right. That is possible but I cannot understand why women do not wish to have children. That is a natural process. That has to be done!” (Respondent 7, first generation).

On the other side, most respondents from the second generation accept the idea that women can choose not to have children since they believe that having children is a matter of personal choice based on certain reasons.

“I think everybody has the freedom to choose what they want and what they do not want. You can decide what you want. I think there should be reasons that make them do so. Maybe they experience something that makes them choose not to have children.” (Respondent 13, second generation).

“I think that everybody can make decision for their own body. You can choose not to have children. There is nothing wrong with that.” (Respondent 10, second generation.)

The rejection of the first generation respondents might come from the learned concept on what happen in DRC. It is uncommon that women in DRC may choose to remain childless since a woman who is unable to give birth to children is subject to pity and mockery (Bertrand & Brown, 1992). In DRC, infertility due to any reason, even a biological problem, may not be tolerated by society (Bertrand & Brown, 1992). Rather, it is common in DRC to associate infertility with a curse on a woman for her past deeds (Bertrand & Brown, 1992). Therefore, most women in DRC do not see childlessness as an option. It can be seen from the respondents' responses that their acceptance on childless women is influenced by the concept of infertility in DRC.

“Women who choose not to have children do not exist according to Africans' culture. That is a natural process. That must happen. That is a natural happening for women. If no children are born, people will think right away that it is that woman's fault. That woman is probably not able to give birth.” (Respondent 7, first generation).

“That they (women in DRC) choose not to have children voluntarily? No...no...I never see that.” (Respondent 5, first generation.)

It is mentioned in the earlier chapter that the first generation immigrants, according to Eldering (2005), tend to have strong feelings regarding their culture of origin. Culture is learned and affects a person’s attitude (Eldering, 2005). This theory from Eldering reflects on the view of the first generation respondents regarding acceptance of women who remain childless voluntarily. It looks like the first generation respondents have learned the idea that childbirth is a natural process that women must experience from the concept of what happen in DRC. Respondents from the first generation seem to hold this idea strongly and therefore it makes them reject the idea that woman may voluntarily remain childless.

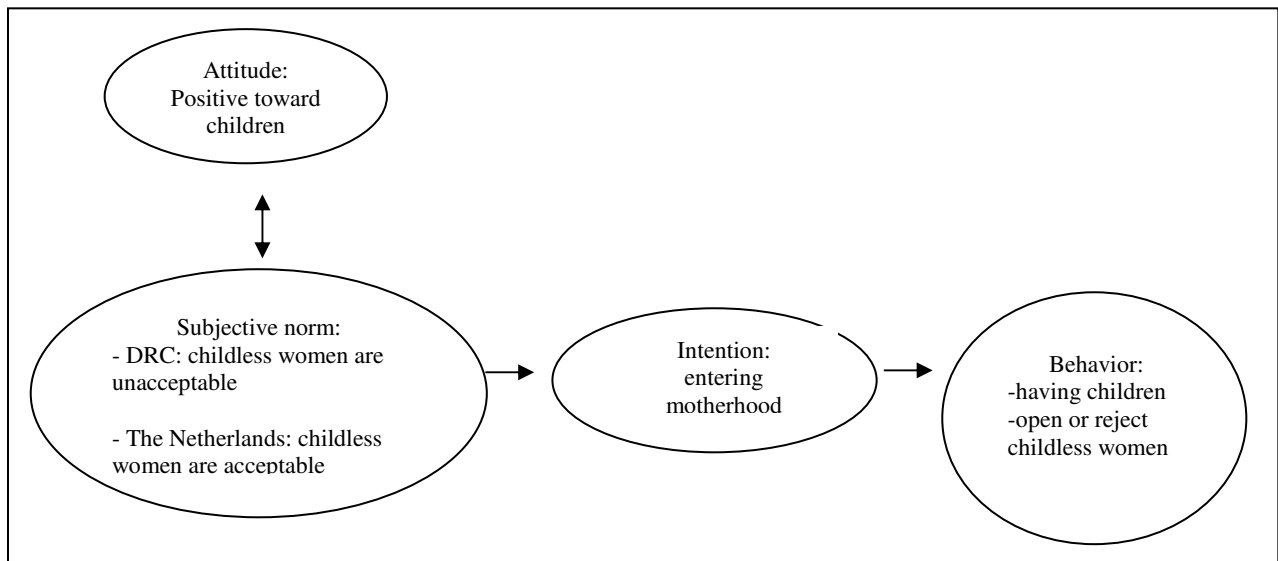
The second generation’s openness on the idea of women remaining childless voluntarily may be related to the adaptation theory suggested by Van Rooij (2006) and Eldering (2005), which is the second generation immigrants might act more according to the value and norms of the host country seeing that they have grown up in the host country since an early age. The reason why the second generation respondents are open to this idea may be because they have lived in the Netherlands since an early age and therefore they act more according to the Netherlands’ norms, where the idea of childless women is commonly accepted. As Bachrach (2001) conclude, based on the research, it is more common for people in Western countries, such as the Netherlands, than in non-Western countries to choose personal freedom and quality of life which can be derived from things other than children.

5.1.2. Theory of reason action and planned behaviour: entering motherhood

It was discussed in Chapter Three that a certain behaviour and subjective norm, according to the theory of reasoned action and planned behaviour by Fishbein and Ajzen, predicts or explains individual intention, and individual intention predicts or explains individual behaviour (see figure 1 in chapter 3). Thus, applying the decision that DRC women made concerning entering motherhood on the theory of reasoned action and planned behaviour (see figure 2), it can be seen that respondents from both generations have positive attitudes toward children. Respondent’s positive attitudes towards children lead to positive intentions, which is entering motherhood. The intention of entering motherhood is for some respondents translated

into real action, which is having children. Bachrach's theory on the way people view children as a life-fulfilment having positive effect on fertility decision is once again confirmed. Furthermore, norms of the society where the respondents grew up, which acts as a subjective norm, lead to whether the respondents reject or accept the idea of women remaining childless voluntarily.

Figure 2. Theory of reason action and planned behavior applied on the decisions of entering motherhood made by the first and the second generation respondents



5.2. Timing of childbirth

One of the topics regarding timing of childbirth during the interviews was the respondent's view on the ideal age to start having children. In this topic, education, psychological factors, economic factors, and knowledge of health during pregnancy turn out to have the most influence on the respondent's fertility behavior in regards to the timing of childbirth.

5.2.1. Education and economical factor: life stability

From what respondents said, it appears that the ideal age to start having children is different between the first and the second generation. Most of the first generation prefers to have their first child at age twenty-five to thirty. Meanwhile, half of the respondents from the second generation wish to give birth to their first child at age twenty to twenty-five and the other half of the second generation wish to have their first child at age twenty-five to thirty.

During the interviews, the importance of having good life stability before bringing a child into their life was brought up by respondents from both generations. Possessing decent a education background appears to be one of the requirements for life stability for all respondents. Other than education, life stability for them is having a stable financial situation, good relationship, steady job, etc. In relation to this, respondents from the first generation mentioned that twenty-five to thirty is the ideal age for them to have their first child since women at that age, according to them, must have life stability already in their lives.

“I think that you have to create stability first so that you can give stability to your children. You must have plenty of time, love, and all the things that children need. For example, I’m finished now with school, I have a job, and I’m working. I have a good financial situation and good partner of course, then you can do that (having child).” (Respondent 2, first generation).

“A good age for me is first you have to finish your school. Get a diploma (university diploma). Then, you can have a child. You have nothing for your life without a diploma. In Europe, you must have a diploma, then you can find work. I think that you have to take care yourself first, then your child. If you unable to take care of yourself, you cannot take care your child.” (Respondent 4, first generation).

While the first generation respondents see that women should have their child once life stability is created, which is signaled not only by finishing a high level of education, but also having a steady job and good relationship, half of the respondents from the second generation see that women may have their first child once they finish their education. According to half of respondents from the second generation it is unnecessary to have a high education, such as a masters degree, to start with having children. This explain why the ideal age to start having children for the second generation respondents is lower than the ideal age of the first generation respondents.

“I think it is fine that you get married and have children at age twenty, but it must be under the condition that you have good future and independent. As a mother, you don’t have to have graduated from university. You can make clothes or something else to show that you are an active person.” (Respondent 11, second generation).

“I think twenty-four is a perfect age. If you are doing well at your school, you will be able to finish your bachelor at age 24 or even younger. You have at least the base. Then, if you have a good relationship, I really think that it is a good time to have children.” (Respondent 8, second generation).

It can be seen from their statements that respondents from the first and the second generation define life stability differently. Respondents from the first generation define life stability as not only having a high education, but also possessing a steady job, which then enables them to have a stable financial situation so that they can afford the expenses of raising a child. This preference verifies Gustafsson’s theory (2002) on the consumption-smoothing motive of having children. As it is implied by Gustafsson, postponing parenthood seems to be rational for many people as the best time to have children should be at the time when income in the household is high so that despite the costs of children, other consumptions are still affordable. Gustafsson (2002) also mentioned that postponing parenthood for this motive is usually caused by the fact that income profiles typically go along with increases in age. It takes time for a woman to finish her education and find a steady job. Gustafsson’s theory explains why respondents from the first generation consider twenty-five to thirty as a reasonable age to start having children.

Meanwhile, respondents from the second generation define good life stability as having a stable relationship and finishing a decent education, which is according to half of them it is unnecessary to associate a decent education with a masters or university level. Possessing steady job before starting to have children does not appear to be one of the requirements. It means that they need less time to build life stability before they have their first child. For that reason, it seems to be logical that half of the respondents from the second generation consider twenty to twenty-five as the most ideal age to start having children.

The differences in the definition of life stability valued by respondents from the first and the second generation is one of the interesting findings of this research. At first glance, it is expected that the second generation respondents may prefer an older age to have their first child than the first generation respondents. This is because it is expected at first that women from younger generations, especially the ones who live in a modern society such as the Netherlands, as reported by Portegijs, tend to postpone motherhood since they like to participate more in the labor market (as cited in Boekhoorn & de Jong, 2008, p.36). However,

findings in this research show a different case. The reason why the first generation respondents have more requirements for life stability maybe derived from their immigration motives, which are achieving a better life than they had in their homeland (Lindenfeld, 2002). This may explain why respondents from the first generation wish(ed) to finish a high education, find a steady job, and have a stable financial situation before starting to have children. Generally, it is tougher and therefore it takes more time for the first generation immigrants than the second generation to settle their lives in the host country. It is because the first generation immigrants first have to learn the host language, adapt with the local society, and pursue other things. As Dialektopoulos (2003) stated, the process of adaptation usually happens in order to survive in the new society.

“We came here. We are immigrants. You might have Dutch passport, but it doesn’t say everything. You will still be seen as an immigrant. And as an immigrant, you have to fight hard for yourselves. You really have to do your best to be somebody. You don’t need to be a president, but you must do something for your future.” (Respondent 6, first generation).

Unlike the first generation immigrants, the second generation immigrants have lived in the Netherlands since an early age. The fact that since the beginning they have lived in the Netherlands, where social security is good, may generate the feeling that it is unnecessary to fight as hard as their parents did to create stability in life, especially to create a stable financial condition.

“I think I’m lucky. The Dutch government will help you if you have difficulties (financial difficulties). I’m not sure, but I don’t think it (cost of children) will be that hard” (Respondent 9, second generation).

How life stability is defined by respondents from two generations affects their view as well on the acceptance of pregnancy at young age. When respondents’ opinion were asked regarding women who have their first child at age twenty, interesting differences in opinion are found between the first and the second generation respondents. While the half of the respondents from the second generation accept the idea that a woman may choose to have her first child before age twenty, all respondents from the first generation reject the idea that a woman may choose to have her first child at such a young age. The first generation respondents do not accept this idea since according to them women under twenty could not have finished their

education yet, while, as mentioned before, respondents put high value on good education for future purpose.

“If you have children at a young age, it is more difficult to go on with your life because youth means that you have not done much with your life yet. For example: education and career. Once you are married and have children, you don’t have the chance anymore to do things for yourself. You must always be there for your husband. You must always be there for your children.” (Respondent 1, first generation).

In contrast, half of the respondents from the second generation think that the idea of women having their children before age 20 can be positive as these women will be able to enjoy longer time in motherhood, watching their children and their grandchildren grow. However, they also mentioned that this must be under the condition that these women should be emotionally mature enough to take care of their children.

“I think that the younger the better since you will have more time with your child. But of course you must be mature enough. There is an eighteen year old girl who gets married and raises children. Everything turns out to be fine. So, everything depends on how mature you are. But I think you should start with children at a young age.” (Respondent 12, second generation).

The fact that respondents from the first generation consider being highly educated as one of the keys to having a stable financial situation explains their rejection of pregnancy under the age of twenty. Taking into consideration that finishing a decent education and having a steady job are their requirements before starting to have children, their rejection of the idea of young pregnancy is logical given that a twenty year old girl would not have possess all these requirements yet.

The second generation’s openness on pregnancy before age twenty comes from their perception that a girl can reach her emotional maturity at any age. Emotional maturity seems to be more important than financial stability for having children for the second generation respondents. This could also be one of the results of their feeling that they can count on the state’s social arrangement for the financial matter of raising children. In this case, fertility behaviour of respondents from the second generation is a reflection from what Klein and

Eckhard (Fokkema & Esveldt, 2008) have suggested, which is psychological aspects in western society have more influence on the fertility behavior than economical aspects. Moreover, the psychological aspects may strengthen their positive view on children, which then contribute to their openness on young pregnancy. As mentioned by Gustafsoon (2002), a person who assumes that a child always bring positive value to parents may prefer early birth since he or she can then enjoy longer times with his or her child.

Last but not least, respondents' views on the importance of education affect their consideration on the time interval between childbirths. According to respondents from both generations, the best time interval between childbirths is one to two years. Even though respondents from both generations have the same opinion concerning the time interval, the most common reason for their preference is different. Respondents from the first generation prefer to have a short time interval between childbirths so that they can pursue other thing for themselves after giving birth to a certain number of children.

"I hope that in 2 years I can start with a new child (after the first child). Then I will have time to give my attention to my first child before the dividing the attention with my second child. And if I'm finished with giving birth, I can optimize my self. I can go further with things for my self. You know, then the kids are already grown up. If every time I have to wait 4 years or mores, and for 3 children, that means a total of 15 years before I'm done with giving birth. When I see things like that, I prefer to have another child in two years. Then I can further my own interests, for example my career." (Respondent 2, first generation.).

For the second generation respondents it is preferable to have a short time interval between childbirths as they wish to have children of almost the same age so that they can enjoy childhood together:

"I prefer that my children have almost the same age so that they can play together." (Respondent 13, second generation).

The first generation's motives for a short time interval between childbirths may generate from their ambition of being a highly educated woman. Education may be considered by them as a life investment and therefore they may want to use it to maximize themselves as soon as their ambition of becoming a mother is fulfilled. This is similar with what De Meester (2005) has

said that people with higher education backgrounds typically have higher desire for self development as he or she see education as a life investment.

Respondents from the second generation would like to have short time interval so that their children will have almost similar ages and therefore be able to play better together. We can see that their motive is derived from a practical view. Although respondents from the second generation also consider education as an important asset in their life, education seems to have less influence on their decision concerning the time interval between childbirths. This could be one of the results from their lack of concern regarding the financial burden of raising children. Less concern on the financial burden may result in less ambition to pursue a job with a higher income. It means, related to what Doorten and Struijs (Boekhoorn & de Jong, 2008) have suggested that being highly educated is often associated with high earnings. Less ambition to have a higher income may result in less ambition of being higher educated. Finally, linked to the consideration of achieving a high education as a life investment, less ambition of being highly educated may result in less ambition of self development.

5.2.2. Health concern during pregnancy

Despite dissimilarities in views regarding timing of childbirth between respondents from the two generations, two similarities are found between respondents from the first and the second generation. First is the similarity regarding acceptance on pregnancy over age thirty. Most respondents from both generations do not accept the idea of having children above age thirty. A common reason mentioned for this is fears of the health risk of being pregnant at age above thirty:

“I’m thinking of the health risk if women start trying to have children at older age. Some women may not able to have children because they start trying at an older age. A maximum age of 30 is a good time to have children. Otherwise you may have problem at older age.”
(Respondent 7, first generation).

“You will develop health risk at a particular moment. I think if you are pregnant after you are thirty or thirty-five, you will have a higher risk. So, no. I prefer not to wait until I’m thirty.”
(Respondent 13, second generation).

5.2.3. Psychological factor: role of partner in raising children

The second similarity is regarding timing of their first pregnancy in reality. Research shows that the majority of respondents had their first child or have the chance to have their first child at the ideal age they mentioned. The most common reason for the rest of the respondents whose plans to have their first child appear to be unfulfilled is the absence of a husband or partner at the time they have reached their ideal age. All respondents from both generations said that they do not wish to have children without the presence of a husband or partner:

“I’m a religious person. I want to get married first. To get married, you have to find a good partner. Then, I will start having children. I absolutely do not want to raise children by myself. I want to raise children with my partner. I think it is important that children have a father and mother.” (Respondent 2, first generation).

“That’s why I said that it is important to find a good partner before you have children. He is the one who can help you. If I’m not around for example, I can trust him. I can leave her (daughter) with her father.” (Respondent 11, second generation).

5.2.4. Theory of reason action and planned behavior: timing of childbirth

It can be seen from the results of the interviews above that respondents from each generation behave differently or have their own preferences regarding the timing of childbirth. Hence, these behavior or preferences can be explained or predicted by using Fishbein and Ajzen’s theory of reasoned action and planned behavior. As discussed in chapter three, Fishbein and Ajzen mention that attitude toward a certain behavior and subjective norm predict or explain individual intention and individual intention predict or explain individual behavior. However, since individuals are not always able to perform a certain action that is coherent with his or her attitudes or intention, Fishbein and Ajzen add perceived and actual behavioral control that affects the link between intention and behavior. Furthermore, attitudes toward competing behavior, according to Fishbein and Ajzen, also influence the link between attitude, intention, and behavior.

Figure 3. Theory of reason action and planned behavior applied to the decisions regarding timing of childbirth made by the first generation respondents

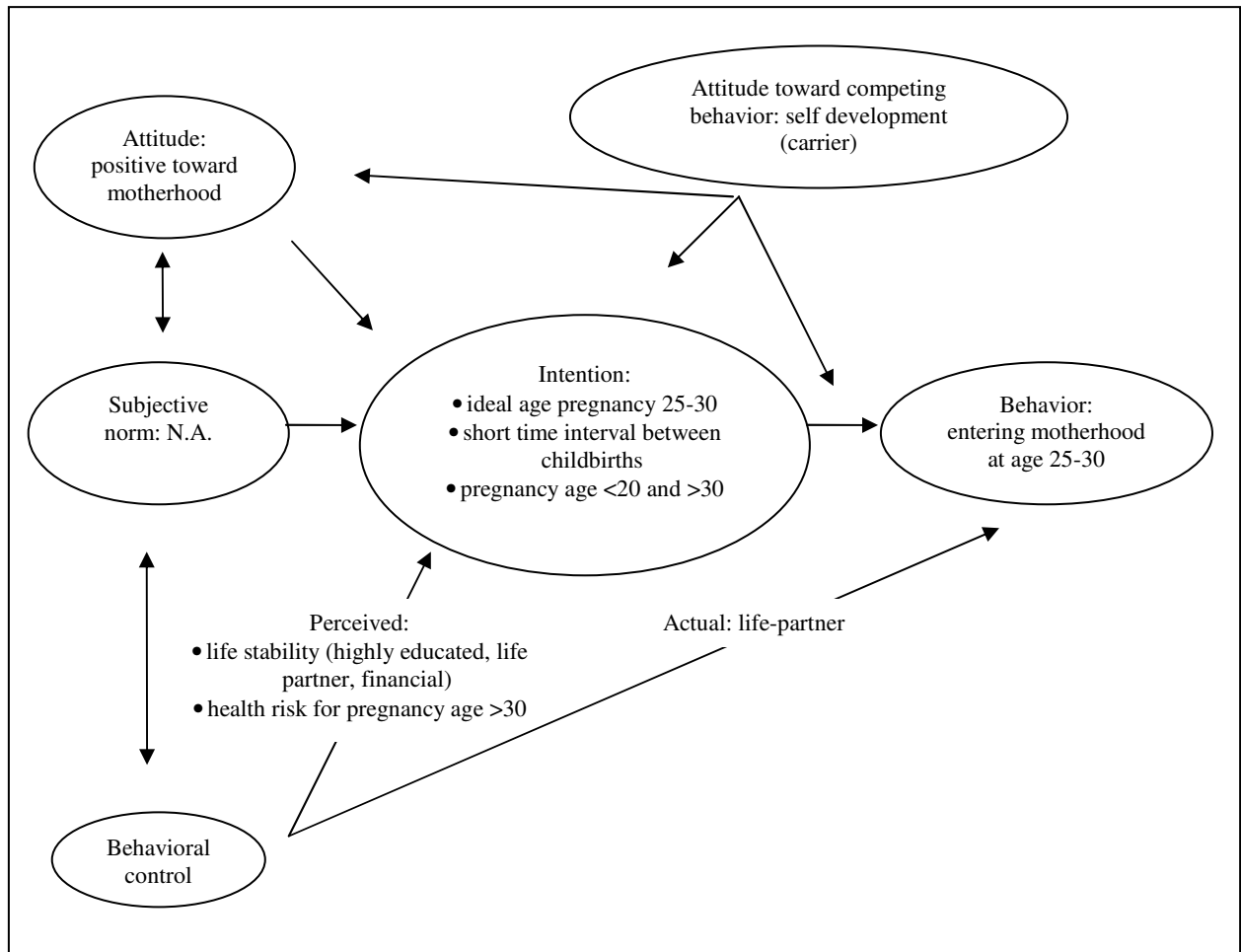
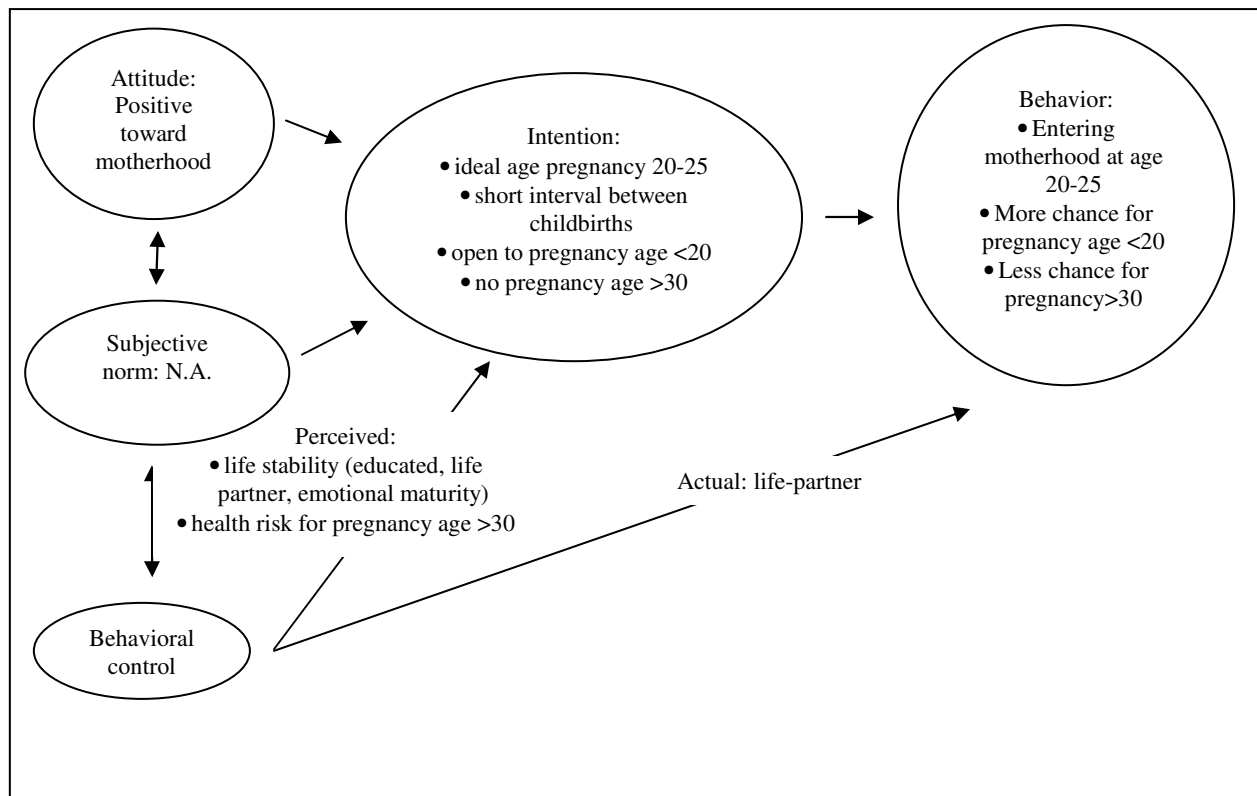


Figure 3 describe how the theory of reason action and planned behavior explain the decisions regarding timing of childbirth made by the first generation respondents. As mentioned before, the first generation respondents have positive attitude toward entering motherhood. This attitude is subsequently coupled with certain behavioral controls that influence their intention and behavior toward childbearing. In this case, fear of health risk for pregnancy after age thirty and ambition for creating life stability before entering motherhood, which are being highly educated, in a stable relationship, having a steady job and stable financial condition, act as perceived behavioral controls for the first generation respondents. Self development, which is by respondents often associated with career, appears to act as an attitude toward alternative behavior. In this case, there are no cultural factors that act as subjective norms influence the decisions regarding timing of birth. Thus, their attitude toward entering motherhood, along with their perceptions that function as perceived behavioral controls and their attitude toward self development, built certain intentions regarding entering motherhood.

The intentions are entering motherhood at the ideal age of twenty-five to thirty, having short time interval between childbirths, rejecting the idea of pregnancy before age twenty and pregnancy after age thirty. These intentions, in reality, are reflected on the behavior regarding timing of childbirth for most of the first generation respondents. Furthermore, there is a difference between perceived and actual behavior control for some first generation respondents in regards to the timing of having children. Some first generation respondents state that they wished to have children at an earlier age, but this was inhibited by the absence of a life partner with whom they could have children.

Additionally, figure 4 describe how theory of reason action and planned behavior explain the decisions regarding timing of childbirth made by the second generation respondents. The same as the first generation respondents, there are no cultural factors that act as subjective norms influence the decisions regarding timing of birth made by the second generation respondents. However, as Fishbein and Ajzen mentioned, attitude and behavioral control affects individual intention and behavior. Creating life stability before entering motherhood which according to the second generation respondents are: finishing decent education, reaching emotional maturity and having a stable relationship, along with fear of health risk for pregnancy above the age of thirty, function as behavioral controls. These behavioral controls, together with their positive attitude toward entering motherhood, form their intentions concerning timing of childbirth. Their intentions, as discussed before, are entering motherhood at the ideal age of twenty to twenty-five, having short time interval between childbirths, open to the idea of young motherhood, and rejecting the idea of pregnancy after age thirty. These intentions are reflected on the behavior of some respondents from the second generation. Furthermore, those intentions also predict behavior of respondents from the second generation who do not yet have children, which are more chance of entering motherhood before age twenty-five, more chance of short time interval between childbirths, and less chance of pregnancy after age thirty.

Figure 4. Theory of reason action and planned behavior applied to the decisions regarding timing of childbirth made by the second generation respondents



5.3. The number of children

From the information that the respondents gave during the interview, cultural and economical factors seems to have the most influence on their decisions regarding the number of children. Their statements also indicate that there are many similarities in view concerning the number of children between the first and second generation.

5.3.1. Cultural and economic factor: family size

The first similarity is that most of the respondents from both generations mentioned that they prefer to have three to four children. The most frequent reason mentioned by respondents is that the respondents themselves are not used to the idea of having a small family since they are also coming from family with more than 3 children. However, respondents do not wish to have more than 4 children since raising children is costly and they want to be able to give what their children need.

“When you have too many children, you cannot give everything they deserve. If you have ten children, you must raise them and feed them. You cannot feed them all as much as they need. They cannot go to school because parents cannot afford it. Therefore, I decided to stay with what I have now. We decided to stay with four children, and I myself was raised in a house with five children.” (Respondent 1, first generation).

“My parents have three (three children). So I want the same.” (Respondent 8, second generation).

“I just want my children to get everything they need. Realistically, you have to take your income into account. I think it’s enough for three children. Then, they can go on holiday...you know... they can do whatever they want to do without financial worry.” (Respondent 13, second generation).

Preference made by the first generation respondents concerning number of children is influenced by their feeling of being grown up in a family with many children in DRC. It seems that respondents viewed their experience of being raised and surrounded by many brothers or sisters as a positive experience which makes them want their children to experience the same thing. Additionally, by taking financial consideration into account, respondents did not wish to have more than four children.

When respondents from the second generation were asked about the reason of having as many children as their parents have, which were three to four children, they have difficulty in forming their answer. However, by using Eldering’s theory on the subject of the parenting style of the first generation immigrant, the explanation for the second generation’s intention regarding number of children might be able to be formed. As mentioned in the theoretical chapter, Eldering (2005) says that the first generation parents from non-Western countries usually try to place themselves as role models in the lives of their children. The process of being a role model is usually influenced by ethnic norms and values (Eldering, 2005). This parenting style might also be experienced by the second generation respondents. As respondents from the second generation intentionally or unintentionally see their parents as a role model, they may also consider what their parents’ experiences, such as having three to four children, as an option for themselves.

Although three to four children is the most ideal number of children for the respondents from both generations, most of the respondents in reality do not have that many children or do not have that many children yet as they wished. The main reason for the first generation respondents is the absence of a partner due to divorce, while the main reason for respondents from the second generation is the absence of a stable relationship.

Furthermore, DRC culture influences the respondents' view regarding the acceptance of having one or two children. In DRC, a person is recognized as a member of a clan (Bertrand & Brown, 1992). Having many children is seen as fulfilling their moral responsibility to strengthen their clan (Bertrand & Brown, 1992). Therefore, given that an individual is only part of a clan, limiting family size to lower than four or five children will be seen as a selfish deed (Bertrand & Brown, 1992). The idea that a great number of children is desirable to strengthen a clan is reflected on the total fertility rate per woman in DRC. It is recorded that total fertility rate in DRC in 2007 was 6.7 (UNICEF, 2009). This rate is significantly higher in comparison to total fertility rate in the Netherlands. Total fertility rate in the Netherlands at the same year was 1.7 (CBS statline)

Almost all respondents from both generations mentioned that they do not wish to have only 1 or two children. Apparently, respondents from the first generation have strong feeling about family tradition in DRC. As it is common in DRC for a woman to have more than five children, respondents feel that having only one or two children does not suit their lifestyle as a DRC woman, even though they live in the Netherlands.

“In Congo I have 2 brothers and 2 sisters. For me, I do not want more than four children. I think two children are too few. I think it should be between three and four children.” (Respondent 6, first generation).

“Here (in the Netherlands), people only have one or two children. That is not our culture. We want more children.” (Respondent 4, first generation).

While the acceptance of having one or two children is rejected by respondents from the first generation due to their feeling to DRC tradition regarding the number of children, respondents from the second generation would like to have more than two children since they enjoy the presence of children around them.

“I don’t understand why you only want to have one or two children .I think children are really fun. I think one or two children are not enough.” (Respondent 9, second generation).

Still on the subject of number of children, the number of children in DRC is often associated with family’s economic security. The majority of parents in DRC expect that in the future their children will help them economically, especially at their old age (Bertrand & Brown, 1992). That means that the more children they have, the more economic guarantee they can get (Bertrand & Brown, 1992).

Related to what happen in DRC, respondents were asked during the interview what their economic expectation was from having children. Unlike what most parents in DRC expect, most of respondents from both generations express strongly that they do not expect their children to help them economically. Respondents think that it is unnecessary to financially depend on children due to decent social arrangement in the Netherlands.

“They don’t have retirement funds in Africa. So, I can understand why they expecting help from their children. But here in Europe, we have lots of opportunity that make us able to save for ourselves. You have retirement funds. So, for me, it is unnecessary because I built here my own retirement funds. It should come from the children themselves whether they want to help me or not.” (Respondent 5, first generation).

“I am strong enough to make preparations for my own future. I’m going to work here and build my own retirement funds. I don’t think I will be dependent on my children.” (Respondent 11, second generation).

Those statements from the respondents prove the hypothesis made by Fokkema and Esveldt (2008), and Eldering (2005) on the subject of economic consideration in having children. Fokkema, Esveldt, and Eldering mentioned that parents in western countries often feel unnecessary to count on financial help from their children due to the decent income from their job and developments in government social security.

Moreover, their feeling is strengthen by strong nurturing character towards their children, which Miller believe to be one of the motives that make woman want to enter motherhood (as cited in Van Der Lippe, 2008, p.5). This strong nurturing character can be seen on their

opinion that it is ok for children to depend on parents as long as they need. However, it is wrong for parents to depend on children. Therefore, they believe that maintaining good financial condition is their own responsibility, not the child's responsibility.

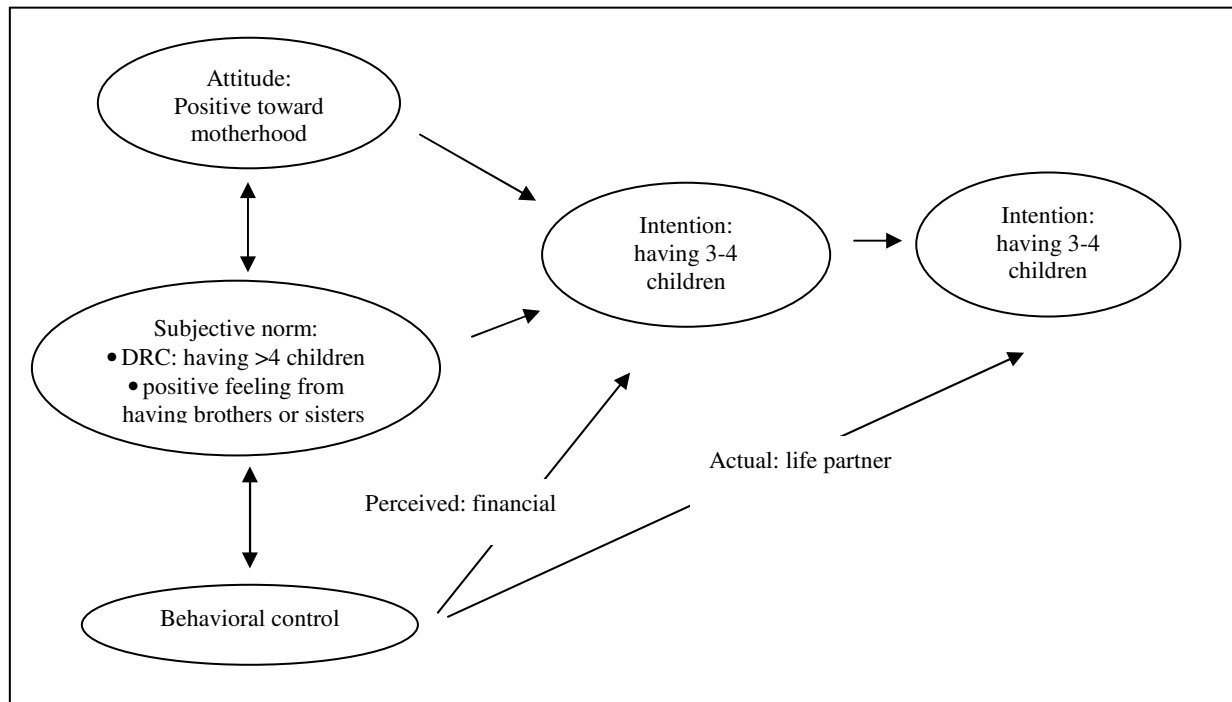
“I wouldn't mind if my child depended on me even if he or she has already grown up. No matter what, he or she is my child, my baby, and I think that I should take care of him or her...not the other way around.”(Respondent 6, first generation).

“It should be the parents' responsibility to the child, not child's responsibility to parents. That's wrong. For me, if I have a child, I will take care my child. Even if the child is married, I will still take care my child because he or she is my child. Even if the child has a job already, I still have the responsibility of being a parent. I would not expect my child to buy a house for me. I will buy a house for myself and I will buy a house for my child so that my child can give a house for his or her child. It is from generation to generation. It should not be from younger generation to older generation. Older generation must make sure that the new generations are able to make a good start for their lives, and that generation takes care of the next generation. That way you can make progression.”(Respondent 13, second generation).

5.3.2. Theory of reason action and planned behavior: number of children

By using Fishbein and Ajzen's theory of reasoned action and planned behavior to explain respondents' preference on the number of children (see figure 5), it can be seen that the positive feeling from having many brothers or sisters and DRC culture regarding number of children in this case function as a subjective norm. It is common in DRC for a woman to have more than three children, and it influences the intention of the respondents to have at least three children. Financial considerations which function as a perceived behavior limit their intention of having no more than four children. In addition, the absence of a life partner appears to act as an actual behavior control that make some of respondents to not want to have as many children as they wished.

Figure 5. Theory of reason action and planned behavior applied on the decisions regarding number of children made by the first and the second generation respondents



5.4. Chapter conclusion

In this chapter, the motives given by first and second generation DRC women for their decisions concerning their fertility are clarified. The fertility decisions that are discussed include the decisions of entering motherhood, the timing of childbirth, and the number of children wanted. Findings from the interviews show that these three stages of fertility decisions are indeed influenced by socio-economic factors. These findings provide answer to the second research sub-question, which is what extent those socio-economic factors apply to the fertility decisions that DRC women made. On the subject of entering motherhood, psychological factors, which is the respondent's desire to experience motherhood, appears to be the strongest reason of having children. Meanwhile, these are four factors that are dominant in regards to the timing of childbirth: Education and economical factor (life stability), health concern during pregnancy, and cultural and economical factor (desirable family size). Furthermore, cultural and economical factors concerning the desirable family size affect their decisions regarding the number of children.

Results of the interviews also show that there are similarities and differences between first and second generation respondents. These similarities and differences answer the third

research sub-questions, which is to what extent the first and the second generation DRC women differ in the respect of their fertility decisions that are influenced by socio-economic factors. The most important similarities are found on their strong desire to have children, their rejection to the idea of having children at the age above thirty, the fact that they were able to give birth to their first child at the ideal age they mentioned, their preference to have three to four children, their rejection to the idea of having only one or two children, and lastly, the fact that they do not have as many as they wished. In contrast, first and second generation respondents demonstrate differences in the acceptance of the idea that women may voluntarily remain childless, preference for the ideal age of having their first child, the openness to the idea of teenage pregnancy, and their motives for short time interval between childbirths.

These findings will be discussed in more detail in the following, conclusion chapter.

Chapter 6. Conclusion

6.1. Answers for the research questions

The Netherlands' population is ageing. For the Dutch labor market, it means that in the future there will be a shortage of potential active employment population. As one of the solutions to this problem, the Dutch government has intensified efforts to increase women's labor market participation. With regards to promoting women's labor market participation, the Dutch government has focused on immigrant women, especially the non-Westerner, as it appears that immigrant women have more problems integrating into the Dutch labor market, in comparison to Dutch women. Immigrant women from Democratic Republic of Congo (DRC) have been chosen as the target group of this research as their population in the Netherlands has increased sharply over the last ten years.

Given that the majority of women are naturally inclined towards motherhood, having children might become a barrier to their labor market participation. For that reason, this research analyzes fertility decisions made by DRC women in the Netherlands, especially concerning the decision of entering motherhood, timing of childbirth, and the number of children. Hence, central question of the research is formulated as follows: **“Is there a difference in fertility decisions among the first and the second generation of immigrant women from the DRC in the Netherlands. If so why?”**

The central question will be answered by addressing the following sub-questions:

1. Which factors influence women's fertility decisions?
2. To what extent do these factors apply to DRC women?
3. To what extent do the first and the second generation DRC women differ in this respect?

First of all, theoretical references are used to give answers to the first sub-question. According to social scientists, based on the results of the research that has been done in the European countries, there are four primary factors that often contribute to the decision-making process concerning fertility behavior. The four factors are psychological, cultural, economic, and women's educational background.

To what extent these factors apply to DRC women is then investigated through in-depth interviews with seven respondents from the first generation and six respondents from the second generation. Based on the result of the interviews, it can be seen that psychological factors, which is respondent's view regarding life stability, appears to be the strongest influence to the decision making process of entering motherhood. Besides the influence of the decisions regarding entering motherhood, educational background and economical factors (life stability), psychological factor (role of partner in raising children), and health concern, turn out to have a strong influence on the respondent's decisions regarding timing of childbirth. Additionally, respondent's decisions concerning the number of children are mostly influenced by cultural and economical factors regarding a desirable family size.

Furthermore, to answer the third sub-question, results of the interviews are categorized into two groups, which are a group of the first generation and a group of the second generation. As the results of the interviews are analyzed, similarities and differences are found on the fertility decisions between the first and the second generation respondents.

There is one similarity and one difference found on the subject of entering motherhood between the first and the second generation respondents. Similarity is found when respondents from both generations mentioned that they have the intention of having children in their life. This intention is mainly derived from the desire to experience motherhood and from the love expressed between respondents and their life partner. Meanwhile, the difference is found on the acceptance that women may voluntarily choose not to have children. Most respondents from the first generation strongly reject the idea that women may voluntarily decide not to have children, while most respondents from the second generation accept this idea. Respondents from the first generation believe that women biologically have the responsibility to bring a child into the world. On the other side, respondents from the second generation believe that having children is a matter of personal choice based on certain reasons.

On the topic of the timing of childbirth, there are three differences and two similarities found between respondents from the first and the second generations. The first difference is that most of the first generation respondents prefer to have their first child at age twenty-five to thirty, while half of the respondents from the second generation wish to give birth to their first child at age twenty to twenty-five. It appears that respondents from both generations would like to have life stability first before entering motherhood. However, how life stability is

differently defined by respondents from two different generations create differences in the timing of entering motherhood. Moreover, how life stability defined differently by respondents create the second and the third difference. The second dissimilarity is found in the acceptance of young pregnancy. All respondents from the first generation reject the idea that woman may choose to have first child before age twenty since girls at that age, according to them, should be still busy with their education. However, half of respondents from the second generation accept the idea that woman may choose to have her first child at such young age since according to them the most important requirement to entering motherhood is maturity which should not be associated with age. The third difference concerns the time interval between childbirths. Respondents from the first generation prefer to have short time interval between their children so that they can pursue other things for themselves after being done with giving birth to a certain number of children. Unlike the first generation, respondents from the second generation would like to have short time interval so that their children are almost similar in age and therefore they can play better together.

The two similarities found in the subject of the timing of childbirth is firstly, most of the respondents from both generations do not accept the idea of having children above the age of thirty due to the fear of health risks of being pregnant at such an older age. Secondly, research shows the majority of the respondents had their first child or had the chance to have their first child at the ideal age they mentioned. Absence of a life partner is the most common reason for the rest of respondents who their plan to have their first child appears to be unfulfilled.

In regards to the topic of the number of children, there are three similarities found between respondents from the two generations. The first similarity is that most of the respondents from both generations mentioned is that they prefer to have three to four children since they are not use to idea of having a small family. This is the same as it is custom in DRC to have a house full of many children. The same reason brought up the second similarity between them, which is almost all of them reject the idea of having only one or two children. The third similarity is the unfulfilled desire to have as many children as it is wished. Although three to four children are the most ideal number of children for the respondents from both generations, most of the respondents in reality do not have many children or do not have that many children yet as they wished due to the absence of a life partner. Furthermore, there is no difference found in the subject of number of children.

Finally, to answer the main question of this research, Fishbein and Ajzen's theory of reasoned action and planned behavior is used to form explanations for similarities and differences that are found in the fertility decisions made by respondents from the first and the second generation. On the subject of the intention of entering motherhood, research shows that respondents from both generations have a positive attitude toward children. This positive attitude leads respondents to positive intentions of having children, and finally, as it can be seen, the majority of respondents have children, this intention is made into real action. Additionally, norms of the society where the respondents grew up, acts as a subjective norm that influence whether respondents reject or open the idea of women may remain childless voluntarily. In this case, the first generation reject this idea, while the second generation is open to this idea.

In regards to the timing of childbirth, theory of reasoned action and planned behavior explain the intention and behavior of the respondents as follows. Fear of health risk for pregnancy after age thirty, ambition to create life stability before entering motherhood, and self development, function as behavioral control for the first generation respondents. Their positive attitude toward children, coupled with certain behavioral controls, influence their intention regarding timing of childbirth, which are entering motherhood at the ideal age of twenty-five to thirty, having short time interval between childbirths, rejecting the idea of pregnancy before age twenty and pregnancy after age thirty. These intentions turned out to be reality for most of respondents. However, absence of a life partner that functions as actual behavior control that explains the unfulfilled intentions for some respondents.

For the second generation, factors that function as behavioral controls are fear of health risk for pregnancy above the age of thirty and ambition to creating life stability before entering motherhood. These behavioral controls, together with their positive attitude toward entering motherhood, form their intentions concerning timing of childbirth. Their intentions are entering motherhood at the ideal age of twenty to twenty-five, having short time interval between childbirths, open to the idea of young motherhood, and rejecting the idea of pregnancy after age thirty. These intentions are reflected on the behavior of some respondents from the second generation. Furthermore, those intentions predict the behavior of respondents from the second generation who not yet have children, which have more of a chance to enter motherhood before age twenty-five, more chance of short time interval between childbirths, and less chance of pregnancy after age thirty.

Lastly, on the subject of the number of children, DRC culture regarding number of children and positive feeling from having brothers or sisters in this case function as a subjective norm. This subjective norm influences the intention of the respondents to have at least three children. Financial considerations which function as a perceived behavior limit their intention of having no more than four children. Additionally, the absence of a life partner appears to act as an actual behavior control that makes some of the respondents not have as many children as they wished.

6.2. Discussion and recommendation

Results of the research shows that DRC women in the Netherlands prefer to have fewer children compare to women in DRC. However, the number of children they want is still higher compared to Dutch TFR (Total Fertility Rates). It is mentioned in the introduction chapter of this thesis that women's fertility decisions may affect their labor market participation. In regards to the Dutch government efforts to increase labor market participation of non-western immigrant women, there are two main concerns that need to have extra attention.

The first concern is that the second generation respondents seem to have less interest in joining Dutch labor market before entering motherhood. Surprisingly, the first generation respondents consider a steady job as a requirement before entering motherhood. As the second generation firstly prefers to enter motherhood, the chance that they join labor market after giving birth will be smaller. Boekhoorn and de Jong (2008) states that the chance of stopping work or working less after the birth of the first child is higher in non-Western women. Their labor market participation continues to decrease after the birth of subsequent children (Portegijs et al., 2006). The second concern is the openness of the second generation respondents to teenage pregnancy. Teenage pregnancy is undesirable since it affects negatively to the welfare of mother and child itself.

Therefore, if policy regarding non western women's labor market, especially in the case of DRC women, is to be effective, then it is important to give more attention as well to the second generation as the second generation appears to have more issues regarding motherhood and labor market participation than the first generation.

Policy recommendation in this thesis is made based on the results of research that has been done on a micro level. Thus, results of this research should not be generalized to the whole population of DRC women in the Netherlands. Further investigations are open to formulate better policy recommendation for this group.

Appendix

1. Ik wil mijn eigen kind. Ik wil iets van mij. Ik denk dat heel veel vrouwen willen dat. Echt kinderen hebben...Ik wil dat voelen. Ik wil moeder worden. Iemand die ik mama noemt. Het is zo prachtig. Dat kunt je niet...je kan nergens krijgen dat gevoel...mensen die van jou is.
2. Mijn vader mijn moeder hebben kinderen. Ik wil ook kind omdat mijn kind is echt kind van mijn zelf. Ik kan niet zeggen kind van mijn broer mijn kind. Ik wil mijn zelf. Ze zijn niet mijn kind. Ik wil echt mijn kind hebben.
3. Ik denk van als je van iemand houdt, dat jullie toch wil iets mooi met elkaar moeten hebben. En voor mij het is een kind. Om onze liefde te bewijzen, we zien dat via onze kinderen. Je ziet van jezelf aan de kinderen. Als ik aan mij kinderen kijk, ik zie wel van hun vader. Als zijn vader er niet is, ik kijk naar mijn zoon dan denk ik van oh...je is er toch wel op een andere manier. Als jou man zegt: hij heeft jou mond..hij heeft jou neus, dat maak me blij.
4. Als je getrouwd ben, zet je iets in de wereld samen. Ik vind dat het mooi is. En daar kan je zorgen. Daar heb je verantwoordelijk voor. Het is jou taak, kinderen brengen in de wereld, hun groot brengen tot een goede mens. Dat is de idee dat je iets voortplant. Ik vind het wel belangrijk.
5. We zijn in de wereld om....zegt maar...voort te planten. Je hoeft niet veel te krijgen, maar eentje kan wel genoeg zijn of 2 of 3. Maar zegt het dat ik helemaal geen kinderen wil...want je ben toch een vrouw. Je heb baarmoeder. Als je niet was, zou je man zijn. Je ben niet voor niks als vrouw geboren. Dus ja, ik denk sommige vrouwen moeten wel daar goed nadenken.
6. Als iemand geen kinderen willen, wil iets doen, dan is het haar rechten. Dat kan maar ik kan niet begrijpen waarom vrouwen geen kinderen willen hebben. Dat is normale natuur proces. Dat moet toch!

7. Ik vind iedereen vrij is om te willen of niet te willen. Je kunt beslissen wat je wilt. Ik denk dat er reden is dat ze zo is. Misschien dat ze iets mee gemaakt hebben dat het inhouden ze om kinderen te hebben.
8. Ik denk dat het keuze is voor iedereen dat je zelf kan uit moet maken voor jou lichaam. Je zou dan principe kunt kiezen om geen kinderen te krijgen. Het is helemaal niet mis mee, hoor
9. De vrouwen kiezen om geen kinderen te krijgen qua Afrikaanse cultuur bestaat niet. Dat is toch natuur proces. Dat moet toch. Dat hoort zo bij vrouwen. Als er worden geen kinderen geboren, mensen denken direct dat is door de vrouw. De vrouw kunnen misschien geen kinderen krijgen.
10. Of ze vrijwillige geen kinderen willen? Nee...nee....ik heb dat nooit gezien.
11. Ik vind dat je eerst stabiliteit moet creëren zodat je kinderen beetje stabiliteit kan geven. Je moet natuurlijk heel veel tijd hebben, en liefde. Alle dingen die kinderen moet krijgen. Bijvoorbeeld, nu heb ik mijn studie af, nu ik heb mijn werk, ik werk, qua geld zit het goed, en met partner natuurlijk, dan kunt je dat wel doen.
12. Voor mij goede leeftijd is eerst moet klaar voor school, diploma hebben, daarna je kan kind krijgen. Zonder diploma heb je niks voor jou leven. In Europa moet je diploma hebben, dan kan je werk zoeken. Ik vind moet eerst denken naar jou dan naar de kind. Als je voor jou zelf je denk niet, je kan niet zorgen voor jou kind.
13. Ik vind goed op jou 20 trouwen en kinderen hebben, maar wel op voorwaarden dat je goede toekomst hebben, zelfstandig kan worden. Je als moeder hoeft niet altijd universiteit te zijn. Kleren maken of anderen dingen. Gewoon klein beetje te laten zien gewoon dat je actief ben.
14. Ik vind 24 gewoon hele perfecte leeftijd. In principe als je gewoon netjes naar school gaat, als 24 ben, dan ben klaar met jou bachelor. Zoals kan nog jonger zijn in principe. In principe de basis heb. Als je dan een relatie heb, ik vind echt dat je op goede tijd ben want dan ga je kinderen krijgen.

15. We komen hier. We zijn buitenlanders. Natuurlijk heb je misschien Nederlandse pasport, maar dat zegt helemaal niks. Je wordt altijd gezien als buitenlanders en als buitenlanders moet je heel vroeg knoppen voor jou zelf. Je moet gewoon echte heel goed doen om iemand te worden. Je hoeft perse president te worden, maar je moet gewoon iets kunnen vinden dat jou help om beetje toekomst te hebben.
16. ik denk dat ik geluk heb. De Nederlandse staat help je wel als je daarover moeilijk heb. Ik weet het niet, maar ik denk het niet dat het erg moeilijk is.
17. Als je jong kinderen krijgen, het is moeilijker om verder te gaan met eigen leven want jong betekent dat nog niet zoveel gedaan met jou leven. Studie, carrière bijvoorbeeld. En een maal getrouwd en kinderen krijgen heb je de kans niet meer om alle dingen te doen voor jou zelf. Je moet altijd er zijn voor jou man. Je moet altijd er zijn voor de kinderen.
18. Zelf vind ik hoe vroeger hoe beter omdat heb je meer tijd met jou kind. Maar je moet natuurlijk volwassen ben. Er is een meisje van 18 jaar die gaat trouwen, gewoon kinderen opvoeden....alles gaat prima. Dus ligt er aan hoe volwassen ben je. Maar zelf vind ik wel dat je kinderen jong moet nemen.
19. ik hoop in 2 jaar kan ik beginnen met nieuwe kind. Dan heb ik de tijd eerst om aandacht te geven aan mijn eerste kind zegt maar, daarna pas aandacht gaan delen met tweede kind. En als al klaar met bevallen, kan ik echt mijn zelf vol inzetten. Dan kan ik verder met mijn eigen dingen. Weet je....dan kinderen al groeien. Als ik elke 4 jaar of paar jaar moet gaan wachten, daarna 3 kinderen...dan binnen 15 jaar of zo....dan ben ik pas klaar met bevallen. Als ik zo bekijk, dan ben ik liever binnen 2 jaar voor andere kind, dan kan ik verder gaan met mijn eigen dingen, carrière bijvoorbeeld.
20. ik wil liever dat mijn kinderen gewoon een beetje zelfde leeftijd hebben. En dat ze samen kunnen spelen.
21. Ik denk aan gezondheid risico als vrouwen op latere leeftijden proberen aan kinderen beginnen. Sommige vrouwen zonder kinderen gebleven doordat ze gingen later . Tot

de 30^{ste} is een goede moment om kinderen te krijgen. Want anders later leeftijd wordt een probleem.

22. Op het gegeven moment heb je gezondheid risico. Volgens mij na jou 30ste of 35^{ste} heb je dan hoger risico als je zwanger ben. Dus nee. Ik zou dan niet wachten totdat ik 30^{ste} ben.
23. Ik ben gelovig. Ik wil eerst trouwen. Om te trouwen moet je een goede partner vinden. En ga ik beginnen met kinderen krijgen. Ik wil een kind absoluut niet alleen opvoeden. Ik wil met mijn partner kinderen opvoeden. Ik vind belangrijk kinderen vader en moeder hebben.
24. Daarom zeg ik een goede partner vinden voordat je kinderen hebben is belangrijk. Hij is degene die kan helpen. Als je bijvoorbeeld er niet ben, dan kan je hem vertrouwen, dan kan ik haar bij haar vader te verlaten.
25. Wanneer je te veel kinderen krijg je kan niet allemaal de zorg bieden die ze verdienen. Want als je tien kinderen heb, moet je alle kinderen kunnen opvoeden en kunnen voeden ook. En de voeden lukte meestal niet. Ze kunnen niet kinderen allemaal eten geven zoals dat moet. En ook alle kinderen kunnen ook niet naar school doordat de ouders niet zo financieel. Dus vandaar dat ik eigenlijk zoals nu gebleven. We zijn met 4 gebleven, en ik ben zelf opgegroeid met vijf kinderen in het huis.
26. Mijn ouders hebben ook 3. Dus ik doe mee gewoon
27. Ik wil gewoon mijn kinderen alles krijgen wat ze willen hebben en realistisch gezien met jou salaris moet je ook schieten. Dat rekenen, ik vind dat genoeg om 3 kinderen te hebben. Dat ze vakantie kunnen gaan...weet je wel...krijgen wat ze willen doen zonder financieel zorg te hebben.
28. ik heb zelf 2 broers en 2 zussen. Voor mij in iedere gevaal niet meer dan 4 kinderen. 2 kinderen vind ik te weinig. Ik denk moet gewoon tussen 3 en 4 zijn.

29. Hier mensen hebben alleen maar 1 of 2...normaal. Onze cultuur niet. We willen meer kinderen.
30. Ik zou niet weten waarom je 1 of 2 kinderen willen nemen, terwijl tenminste ik vind kinderen heel leuk. 1 of 2 kinderen op een voor vele manier dat vind ik niet genoeg.
31. In Afrika hebben ze geen pensioen. Dus het is wel begrijpen dat ze verwachten kinderen hun te helpen. Maar hier in Europa, kijk we hebben heel veel uitkomst dat je kan sparen voor je zelf. Je heb pensioen. Dus voor mij hoeft dat niet per se want ik heb hier pensioen opgebouwd. Dat moet echt van de kind zelf komen.
32. Ik ben nu sterk genoeg om mij leven of mijn toekomst goed te voorbereiden. Ik ga hier werken, dan ga ik pensioen opbouwen. Ik denk niet dat ik afhankelijk zou zijn aan mijn kinderen.
33. Ik zou niet erg vind als mijn kind tot groot afhankelijk van mij. Hoe dan ga hij blijft mijn kind, blijft mijn baby en ik vind dat ik voor hem of voor haar moet zorgen. Niet andersom.
34. Verantwoordelijk gaat tegen de ouders tegen het kind, niet de kind tegen de ouders. Het is omgekeerd. Dus van mij het is van heb ik een kind dan zorg ik voor de kind. Ook als de kind al getrouwd is zorg ik nog steeds mijn kind want het blijft mijn kind. Ook als ze al werk ik blijf nog steeds verantwoordelijk als ouders. Ik ga niet verwachten dat mijn kind een huis voor mij gaat kopen. Ik ga zelf mijn eigen huis kopen en ik ga huis kopen voor mijn kind zodat dat ze ook huis geeft aan hun kind. Want het is van generatie naar generatie. Het kan niet van generatie verplichtten te doen voor de oudere generatie. De oude generatie moet zorgen dat de nieuwe generatie gewoon normaal kan starten. En die zorg voor de andere generatie. Zo komt je vooruit.

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¹ Zaire is the former name of Democratic Republic of Congo.

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