**DISSERTATION PROPOSAL**

1. **SCIENTIFIC BACKGROUND**

The fertility behavior of immigrants is considered an important indicator of their degree of social integration in their adopted countries (De Valk & Milewski, 2011). In the Western European context, the focus is often on immigrants who comes from high-fertility countries to low fertility countries in Europe. The fertility patterns of immigrants in Europe have been studied for many years in research focusing on the effect of the migration process itself and their degree of adaptation to the new environment. However, research on the descendants of immigrants is still in the early stages. Only now are there sufficient cohorts of second-generation women, who are reaching the end of their reproductive years, thus allowing a thorough investigation of their complete family and fertility behavior (Andersson et.al., 2017). The majority of existing studies show that the descendants of immigrants have, on the one hand, higher levels of fertility than the native population, but lower levels than their immigrant parents, on the other (Dubuc, 2012; Milewski, 2007). Consequently, these observed fertility patterns point toward some degree of intergenerational convergence and adaptation to the norms of the receiving country.

The massive immigration flows from less developed countries to Western Europe have led to a greater attention, among both politicians and the native European population at large, on immigration’s social, economic, and political impact. The immigration issue has reached the top of the list of concerns among European citizens (at the EU level: Eurobarometer, 2019), with evidence supporting the claim that societal heterogeneity negatively affects public support for welfare state redistribution and immigrants’ inclusion in such programs (Mau & Burkhardt, 2019). The issue of the welfare dependency of immigrants compared to natives and the amount of welfare services and other social benefits that immigrants consume is at the heart of this debate. Specifically, the debate focuses on the extent to which immigrants, as compared to natives, have access to non-contributory social protection schemes, which directly draw their resources from the general fiscal budget; studies have shown that the higher relative probability that immigrants will be dependent on non-contributory schemes diminishes when controlled for age, gender, education, and family size (Conte & Mazza, 2019). The higher the degree of immigrants’ integration, in terms of fertility, family behavior, and socioeconomic status, the less they will depend on public funds.

The welfare state, which originated in Europe, was created in order to design a cohesive economic, social, political, and cultural system, and to address related challenges in the new industrial environment (Van Kersbergen, 2016). Despite these common origins and shared goals, different European welfare regimes have substantial differences. In his typology, Esping-Andersen (1990) describes three welfare state models: conservative, social democratic, and liberal. The models differ mainly in the quality of social rights and the perception of the roles of the state, the market, and the family in social provision. Distinguishing between the characteristics of the various welfare regimes is important here in order to analyze each receiving country. This relates both to the policies that directly and indirectly affect family and fertility decision making and behavior, and the degree of immigrants’ inclusion in general welfare programs, alongside targeted immigrant integration schemes.

The integration process of Turkish immigrants in European countries has been the focus of many studies. Not only is this the largest immigrant population in Western Europe, but Turkey’s culture and traditions around family norms also provide fertile ground for comparative analysis. While many studies in the European context have focused on the comparison of immigrants’ descendants to their native counterparts, their parents, or other immigrant groups in the same receiving country, the proposed study is designed to reveal how second-generation Turkish immigrants differ in their complete fertility patterns in different destination countries, each with its own unique welfare state. Using the 2020 Generations and Gender Survey, this project will examine the complete fertility histories of cohorts of second-generation Turkish immigrants in Austria, Belgium, France, Germany, the Netherlands, and Sweden. Specifically, the project will assess the effects of both the intergenerational cultural transmission of fertility and family norms and the framework in which migrant descendants grew up. This multicountry comparative study will shed light not only on the fertility patterns of immigrants of same origin in different environments, but also on the effect of different welfare regimes and policies on the integration of immigrants and their descendants. The following sections will describe the context and theoretical background of this proposed study.

* 1. **Turkish Immigrants and their Descendants in Europe**

Some 2.5 million Turkish-born migrants live in Western Europe, and they constitute the largest modern immigrant group in the area. With the inclusion of second- and third-generation descendants who were born outside Turkey, it is estimated that 4.6 million people with Turkish ancestry live in Western European countries today (De Bel-Air, 2016). Post World-War II Turkish immigration was formally initiated with the signing of the bilateral labor agreement between West Germany and Turkey in 1961. According to that agreement, Turkish *Gastarbeiter* (guest workers) were granted a two-year work visa in order to prevent them from staying permanently in Germany. The Turkish government encouraged low-skilled workers to emigrate in order to ease the economic pressure in the country and in the hopes that they would return to Turkey with new skills and qualifications to fill the ranks of skilled workers (Aydin, 2016). During the 1960s, other European countries also adopted the German-Turkish scheme, with Austria, Belgium, and the Netherlands signing agreements with Turkey in 1964, France in 1965, and Sweden in 1967.

Many of the Turkish guest workers managed to stay and settle in their destination country. With the European economic and oil crisis of 1973, which saw the end of the recruitment of immigrants, the second-wave immigration of Turkish family reunification throughout Europe began. The Turkish immigrant population was low skilled and came mainly from rural areas in Turkey, and settled in industrial cities. The observed socioeconomic differences between the native population and Turkish immigrants were due to the compositional characteristics of the immigrant group, the gap between the development levels of Turkey and the receiving country, and the negative effects of the migration process. Although the educational gap has decreased over time, research has shown that second-generation Turkish immigrants in several European countries are still highly underrepresented in higher education as compared to natives and other immigrant groups (Crul & Vermeulen, 2003).

In addition to socioeconomic differences, the demographic background of the immigrant population differed from that of the destination country. While in most Western European countries the total fertility rate (TFR) was well below 3 during the 1960s and below the replacement rate during the 1970s and 1980s, at that time, Turkey has only started the fertility decline stage of its demographic transition, recording a TFR above 6 in 1960 and a steady decline since, to 2.05 in 2019 (Le Goff & Forney, 2006 ; World Bank 2018). Although in recent decades Turkey has progressed significantly in terms of the demographic transition, and even reduced demographic gaps with Western Europe, compared to their Western-European counterparts, Turkish women still marry at younger ages and out-of-wedlock births and childlessness remain rare phenomena (Balbo et al., 2013 ; Yavuz 2008).

* 1. **Fertility of Immigrants and their Descendants**

Modern international migration has become, in recent years, a topic of great interest to both demographers and policy makers. In the European context, most of the cases under investigation are of mass immigration flows from countries with higher fertility rates to Western-European countries that have recorded lower fertility rates for decades. Consequently, with the natural increase of immigrant populations and their descendants in the destination countries, migration has become one of the main forces driving both demographic changes (Coleman, 2006) and broader social changes within each country. Accordingly, the demographic and social impact of immigrants in the country of destination have been found to be even more dramatic when their fertility rates are relatively higher, alongside other childbearing patterns that differ from those of receiving society (Sobotka, 2008).

Until recently, research on the fertility patterns of immigrants have mainly focused on the first generation of migrants in the European context (Milewski, 2011). Now, when female cohorts of second-generation immigrants in European countries are close to or have reached the end of their reproductive ages, researchers are increasingly interested in investigating the childbearing patterns of the descendants of immigrants.

There are some theoretical differences that need to be taken into consideration when examining first-generation immigrants, on the one hand, and the second generation, on the other. While first generation immigrants’ fertility patterns and related decisions are affected by the migration process itself, their descendants, who were born in the country of destination, are mainly influenced by that environment. Thus, the fertility behavior of the second generation is influenced by mainstream society, or, alternately, by a dominant sub-culture ethnic group (Kulu et al., 2017).

 Traditionally, research on the process of integration into the receiving society was viewed through the prism of the classic assimilation theory developed in the North American context and other “old” mass migration receiving countries. According to the assimilation hypothesis, immigrants are expected to gradually become part of mainstream society as ethnical and cultural distinctions fade. This process is viewed as inevitable and accelerating over the generations (Alba & Nee, 1997). According to more recent approaches, however, the assimilation process is perceived as more diverse and influenced by each immigrant group’s unique characteristics (Milewski, 2011).

Thus more a nuanced theory was proposed to investigate immigrants’ integration process. The *adaptation hypothesis* offers an alternative explanation for the observed convergence of immigrants fertility levels to those of the receiving society (Krapf & Wolf, 2015). This theory holds that immigrants’ adaptation to fertility norms is influenced by micro-economic decisions of the real costs of childbearing and raising children in the new economic environment (Becker, 1991), decisions based on the receiving country’s welfare policies, job perspectives and other economic factors (Sobotka, 2008). At the same time, the adoption of new ideals and norms related to the family ﻿can facilitate the adjustment of migrants’ fertility patterns to that of the receiving society (ibid, 2008). For second-generation immigrants, the absorption of the ideals of mainstream society is an ongoing process, which begins in early childhood with the first exposure to the majority population and through the formation of social contacts and meaningful interactions.

A complementary theory, the *socialization hypothesis*, seeks to explain the mechanisms behind observed differences in fertility behavior among immigrants, their descendants, and the native population. This hypothesis derives from classical socialization theory (Parsons, 1955), which assumes that social values and norms are transmitted from one generation to the other primarily by meaningful others in one’s childhood. Parents are perceived to be responsible for the early development of their children’s attitudes and values before they engage in any other significant social contact. Gender roles and family values are transmitted from parents to children by example (Barber, 2001) and by parents expressing their own attitudes (Cunningham, 2001). Accordingly, immigrants’ fertility patterns are mainly shaped by the influence of meaningful family members and the communities in which they were raised in the country of origin. The theory posits that if the descendants of immigrants, who were born in the country of destination, show significant differences in family and fertility behavior from the native population, it is due to the influence of their parents from the dominant immigrant group who are conveying their own cultural background.

Socioeconomic status also influences an individual’s fertility decision making and patterns. Alongside demographic characteristics, it has been found that education constitutes an influential determinant in fertility outcomes, while the influence of employment status differs between education groups (Lappegard & Ronsen, 2005; Kreyenfeld & Andersson, 2014). Overall, immigrant groups are often perceived to have different demographic and socioeconomic compositions than the native society, which are mainly shaped by the process of immigration and the character of the country of origin. The *composition hypothesis* proposes an addition explanation for observed differences between second-generation immigrants and their native counterparts. If fertility differences disappear after controlling for all relevant socioeconomic and demographic variables, the cultural socialization hypothesis is ruled out and an alternative explanation must be sought. Compositional characteristics have been proven to be important factor even when comparing the transition to motherhood and family formation among descendants of the same migrant group in different receiving countries, (Milewski, 2011).

* 1. **Fertility and Family-Labor Market Policies: The Role of the Destination Country**

Scholars acknowledge the influence of the receiving country’s welfare regime and its policies regarding fertility and the family-labor market relationship on the fertility behavior of both natives (Andersson et al., 2014; Luci-Greulich & Thevenon, 2013) and immigrants (Amuedo-Dorantes et.al., 2016) in a developed economy context. Different policy domains—parental leave, maternal employment, child care, and birth-grants—have been found to influence fertility patterns and couples’ reproduction decisions.

 The impact of family cash-related policies on fertility has been widely investigated. In general, studies have concluded that there is a significant positive correlation between such policies and fertility. Cash dispensation for births and childcare allowances both positively influence the probability of having a first child in a specific country case (Laroque & Salanie, 2004; ﻿D’Addio & Mira d’Ercole, 2005; Vikat, 2004). Other related financial aid policies, such as maternal and parental leave, have been found to be strongly correlated to fertility outcomes. Arguably, the duration of parental leave entitlement for women or both parents, which supports family income after childbirth, has a positive effect on fertility (Luci-Greulich & Thevenon, 2013). In the Scandinavian context, where gender equality­ with regard to parental leave is the overall norm (although different schemes prevail in each country), paternal leave has a ﻿positive association with continued childbearing (Duvander et. Al., 2010).

 Women’s increasing participation in the labor market also has implications on a country’s fertility levels; studies have shown that the policy and social context determines whether the effect is positive or negative (Andersson et al., 2014). Childcare policy is another scheme that has a large influence on couples’ fertility decision making. Both childcare availability and cost are found to be positively associated with the probability of having a child (Del Boca et.al., 2003) and parity progression for all birth orders (Diprete et.al., 2003) across European countries.

 National and welfare contexts have proven to be crucial in determining fertility patterns and family decision making. Accordingly, immigrants and their descendants are influenced by the extent of their inclusion or exclusion from such social schemes and by the norms that are embraced as consequence of these policies. When investigating the integration process through fertility behavior, it is important to take into consideration the degree of entitlement to social policies and the environment in which immigrants’ descendants were raised.

* 1. **Second- Generation Immigrants’ Fertility in Europe**

Studies investigating the fertility patterns of the descendants of migrants from high to low fertility countries have, on the whole, either compared them to their native counterparts, or to both their immigrant parents and the native population. The comparison was undertaken in order to examine the competing theories discussed above, alongside the socioeconomic and demographic compositional effect.

The majority of studies have examined fertility by birth order, focusing on the analysis of a single-country case. There is considerable evidence that, when examining first birth behavior and early parenthood, there is almost a uniform narrative. In most cases, the descendants of immigrant have recorded the same, or even lower, first birth risks compared to their native counterparts (Andersson & Persson, 2015; Kulu & Hannemann, 2016; Gonzalez-Ferrer & Castro-Martin, 2015; Guarin & Bernardi, 2015; Andersson et.al., 2017). If the convergence degree varied between immigrant groups, these differences disappeared after controlling for compositional socioeconomic variables (Pailhé, 2015). While first birth risk findings support the adaptation hypothesis, higher birth risk results varied between cases. For second birth risk, some second-generation immigrant groups have shown consistently lower rates (Andersson & Persson, 2015; Pailhé, 2015), while, in some cases, the descendants of immigrants had a higher likelihood of having a second child compared to the native population (Kulu & Hannemann, 2016; Gonzalez-Ferrer & Castro-Martin, 2015). Although, until recently, the number of incidents of third birth risk among immigrants’ descendants in Europe was still low, studies have recorded a higher likelihood of having a third child among immigrant groups (Kulu & Hannemann, 2016; Kulu et al., 2017; Andersson & Persson, 2015), thus providing some support to the socialization hypothesis.

Thus most research has concluded that there is a dynamic relationship between the two competing theories. On the one hand, immigrants’ descendants adapt to the fertility and family norms of the receiving country with regard to the postponement of childbearing, even including the second child. On the other hand, the observed fertility behavior of the second generation also provides support for the socialization hypothesis. Compared to the native population, immigrants’ higher probability of forming a bigger family is part of the intergenerational transmission of fertility norms. These conclusions strongly support the claim that any comparison of fertility patterns between immigrant groups and native populations should also examine birth order. In addition, although the composition effect may not entirely explain the differences in fertility behavior between migrant descendants and natives (e.g., Kulu & Hannemann, 2016 for high birth order), the inclusion of such socioeconomic and demographic indicators is of great importance when considering the fertility differences between groups (Milewski, 2007, 2011; Scott & Stanfors, 2011).

Ultimately, the fertility differences between natives and Turkish population may have converged to a certain extent over the generations (e.g., Kulu et al., 2017), but the degree of difference was mainly examined within a single-country context. The differences between Turkish descendants in different environments have been discussed before, but only in terms of the transition to motherhood (Milewski, 2011) and not in terms of higher birth orders and complete fertility histories. Thus, the key questions here are whether the fertility patterns of second-generation Turkish immigrant women differ across countries for all birth orders, and if so, whether the degree of fertility convergence is similar among the same origin groups in different countries, compared to their relevant native counterparts.

1. **RESEARCH OBJECTIVES AND EXPECTED SIGNIFICANCE**

The above literature review suggests that, while the integration of Turkish immigrants and their descendants, in terms of their fertility patterns, has been examined in various ways, it has yet to be discussed in the context of different destination welfare states and from the perspective of complete fertility. This proposed study draws from new data containing cohorts of second-generation Turkish women immigrants who are now reaching the end of their reproductive years.

The proposed project will assess whether second-generation Turkish immigrants should be considered as one ethnic group with the same family and fertility patterns across different countries, and, if not, whether they integrate to the same degree under different regimes. In other words, the overarching objective of this project is to examine the role of welfare systems in shaping immigrants’ integration processes and fertility patterns.

**Objective I: Assess the fertility patterns of second-generation immigrants from the same country of origin in different receiving societies.**

1. Origin culture socialization or adaptation to the receiving country: What is the effect of the country of residence compared to that of socialization to the origin cultural on fertility patterns (measured by the relative risk of childbearing for all birth orders) for the descendants of immigrants?
2. Composition differences: Do demographic and socioeconomic composition differences also explain fertility differences between descendants of immigrants of the same origin in different countries of destination?

**Objective II: Assess whether the degree of integration, in terms of fertility behavior, differs between countries of destination for the same immigrant origin group.**

Different country and welfare policies: To what extant do second-generation immigrants of the same origin resemble their native counterparts in terms of fertility patterns in each investigated country of destination?

The proposed study provides a basis for constructing a theory of immigrant integration and public policy design. Studying the complete fertility patterns of migrant descendants can provide us with a more accurate picture of their social integration. The results will demonstrate the power of socialization processes and adaptation on shaping individual decision making. Moreover, the results have the potential to shed light on the effectiveness of inclusion efforts in each investigated society, welfare states that are constantly pursuing a balance between providing social protection, encouraging economic growth, and addressing new demographic challenges. Such an understanding of the background forces at play will provide important information for policy makers across Western Europe seeking to reduce social inequalities.

1. **DETAILED DESCRIPTION OF THE PROPOSED RESEARCH**
	1. **Working Hypothesis**
2. Both adaptation to the patterns of the country of destination and origin-culture socialization determine the fertility and family behavior of second-generation immigrants. However, this study assumes that the adaptation to host society patterns and norms are more important in determining fertility outcomes. Thus significant differences between Turkish descendant groups should be observed, even after controlling for socioeconomic and demographic variables.
3. Socioeconomic and demographic composition explains some of the fertility differences between the second-generation groups, as immigration process vary in each destination. Consequently, fertility differences, if they exist, should converge to some extent after controlling for women’s demographic and socioeconomic characteristics.
4. The country of destination determines the degree of fertility adaptation and convergence. The type of welfare regime, social policies, and immigrants’ degree of inclusion in these schemes are of great importance in dictating the degree of integration and fertility adaptation.
	1. **Research Design and Methods**
		1. **Data and Variables**

The main data source is the 2020 Generations and Gender Programme (GGP). The new 2020 GGP survey is a comprehensive source of demographic data on European countries, which allows cross-country comparability using advanced micro-level data. It will have an average of 10,000 respondents aged 18-79 per country, making possible the study of the descendants of Turkish immigrants, as they constitute the largest minority group in the investigated countries.

The proposed study will focus on women. The analysis will include all women who were born in the target countries and who have one or two Turkish-born parents. It will also include the same number of non-migrant women in each country to serve as the study’s comparison group. As Turkish immigrants settled mainly in cities, the comparison groups will also be from urban backgrounds. Relying on previous GGP surveys, the countries under investigation will be Austria, Belgium, France, Germany, the Netherlands, and Sweden. These countries are known to be the main countries for Turkish immigrants during the 1960s, and thus have the largest numbers of descendants of Turkish immigrant. Therefore, in these countries, sufficient cohorts of women who have reached the end of their reproductive years will be available for this study.

 The data contains information regarding the socioeconomic status and demographic background of each subject. This relevant information will serve as the control variables in the proposed study, as described above in the theoretical background. The socioeconomic covariates are *level of* *education* (ISCED categories) and *employment status* coded as activity status. The respective demographic covariates are *age of respondent*, *birth cohort*, *marital status*, *number of siblings*, and *religiosity* (on a scale of 1-10 from “not religious” to “very religious”). The data provides detailed and complete fertility histories for all women, including number of biological children and their age, and year and month of birth.

* + 1. **Methods**

Using the data, the study will analyze the transition from childlessness to motherhood (first birth), from first birth to second, from second to third, and, if the data allows, also higher birth orders. In order to reach the research objective, the study will first conduct a non-parametric analysis using the Kaplan-Meier estimator. Then, it will apply an event-history analysis using the Cox proportional hazard model, while adding the relevant covariates to the regression models. In order to reach the first objective, the study will create two models of the relative risks of childbirth by country of destination, one for the descendants of Turkish immigrants and a second for the native comparison groups. For all birth orders, the model will control for socioeconomic and demographic sets of covariates, adding them one by one in order to assess the compositional differences. In order to reach the second objective, I will apply the same method within each destination country, comparing the relative risks of childbirth between each Turkish descendant group and their native counterparts, and measuring the differences of risks for all birth orders.

**Potential Supervisors:**

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