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Original Article

A Qualitative Investigation into Childbearing Preferences Among Kurdish Women in Erbil

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ABSTRACT

Childbearing is one of the most significant experiences in a woman's life. Childbearing preferences can shape how women deal with important experiences and how the health system plans for pregnant women to meet their expectations. This study aimed to develop a deep understanding of women's preferences regarding childbearing. A qualitative study of 16 women was conducted in Erbil, Kurdistan Region, Iraq, from April to May 2022. The women were aged 20 to 34 and had two or more children. The required data were gathered through in-depth, semistructured interviews with participants. The interviews were recorded and transcribed verbatim. The scripts were analyzed using six standard methodological activities, and the themes were extracted. Analyzing the transcripts revealed a main theme, labeled "big changes in childbearing preferences," indicating a significant shift in the number of children compared to the participants' mothers and grandmothers. This theme had three subthemes: "political situation," "economic uncertainty," and "social awareness," which together significantly influenced childbearing preferences, particularly toward fewer children and less sensitivity to the gender of children. Challenging economic and political conditions influence the observed changes in women's childbearing preferences. While these changes may have positive aspects, further exploration is needed to fully understand their implications. Raising public awareness through targeted programs and social media could help ensure that any shifts in preferences are more intentional and informed, potentially improving outcomes for mothers and children.

Keywords: Childbearing, Childbearing preferences, Lived experience, Erbil.

1 Introduction

A child's overall development is highly affected by a planned family as the best environment [1]. Rapidly growing populations and large families can impede development at national and household levels. Moreover, maternal and childhood morbidity and mortality can rise remarkably due to close child spacing and high parity [2]. All over the world, many women are willing to have longer birth spaces or restrict the number of births; however, particularly in the developing world, their contraception needs are unmet [3,4]. Currently, many women wait to become pregnant until after the age of 35 [5].

The long history of wars, insecurity, challenges with the health system, and recent socioeconomic changes experienced by Iraq make exploring childbearing preferences an essential step for an in-depth understanding of the dynamics of childbearing and fertility [6]. Like other countries in the Middle East, Iraq continues to experience demographic, urban, and economic changes [7]. There are many doubts about what fertility preferences mean in Iraq and the Kurdistan region, and there is very little relevant evidence. Research has shown that reproductive preferences in the Kurdistan Region may be uncertain and unstable, and childbearing preferences change significantly over time [8,9].

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The rate of childbearing in Iraq is still high compared to the rest of the world. With a fertility rate of four, Iraq has the second-highest fertility rate in Western Asia after Yemen [10]. In Iraq, the Kurdistan Region has a lower fertility rate than the national one [11]. In Iraq, a high proportion of mothers who desire to restrict or delay future childbearing think that becoming pregnant soon will not be a problem, which shows uncertainty or triviality about attaining reproductive desires [10]. Previous studies have revealed that preference in Iraq is an important predictive factor of childbearing. Research has shown that when both the husband and wife want another child, more births occur than when neither nor only one wants another child [12].

Over the past three decades, the average marriage age and the age at first childbirth have risen in Iraq and the Kurdistan region, while fertility rates have decreased markedly. This decrease needs a comprehensive policy to adequately address the potential reduction in population growth [13].

A study conducted in Iraq revealed that although women in the Kurdistan region of Iraq have favorable childbearing attitudes, many sociocultural and economic factors push these women to delay their first pregnancy [14]. Beliefs that should be taken into account when developing an intervention can be explained using behavioral theories [15]. Previous research has shown that marital satisfaction, hopefulness, social support, and subjective norms are associated with healthy behavior. However, no research has assessed the relationship between such theoretical factors and childbearing preferences in the Kurdistan region of Iraq [16,17].

Limited research has focused on childbearing preferences among women in the Kurdistan region of Iraq. Due to the complexity of behavioral change, factors related to childbearing preferences should be thoroughly understood to inform effective programs. The present study aimed to assess childbearing preferences among Iraqi Kurdish women living in Erbil. The findings of this study can add to the limited body of knowledge about the determinants of childbearing intentions in the Kurdistan region of Iraq.

2 Materials and Methods

Study design and setting: The present study employed a qualitative method. It was conducted in three primary health care centers in Erbil City, Iraq, in April and May 2022.

Participants: The study population included married women with two or more children aged 20-34 years visiting three local primary health care centers in Erbil city for different purposes. A purposive sampling strategy was used to invite women to participate in the study, including those from different socioeconomic backgrounds, to represent a wide range of opinions on childbearing preferences. When recruiting them for the study, their informed consent was obtained. Of the 30 women invited to the study, 16 agreed to participate (response rate 53.3%). It was decided to stop inviting women to the study after interviewing 16, as this sample size was adequate to ensure saturation, with no new concepts emerging in the final interviews.

Data collection: The women who agreed to participate in the study were invited to an in-depth interview. Each woman was asked whether she would prefer to have the interview at the primary health care center during her visit or by phone at a time convenient to her. The required data were collected through in-depth, semistructured interviews conducted by a female researcher in a place and manner preferred by the women. As a result, ten interviews were conducted in a private room at primary health care centers, and nine were conducted by phone. Each interview lasted around 20-30 minutes. An in-depth interview method was used for data collection rather than a self-completed questionnaire to involve illiterate women or women with low educational levels. The interviews started with general questions such as “How many children have you got?”, “Are your children girls or boys?" and "Do you intend to have more children?" The interviews were continued by asking more direct questions about their childbearing preferences, such as "Have you considered having more children? ", "What factors are important in making this decision?", "If you have more children, would you prefer to have boys or girls?" and "Can you please tell me more about your childbearing preferences?"

Data analysis: The transcripts of the interviews were analyzed using Van Manen's six methodological activities (1990) [18] (see Table 1).

Table 1: Six methodological activities in Van Manen’s method.

#	Van Manen’s Methodical Activities	The Researchers’ Activities
1	Turning to the nature of lived experience	Right after getting married, most couples decide to have children. Childbearing preferences can affect the policies adopted by the government and the health care system. Therefore, referring to women's lived experience of childbearing can be vital for planning and policymaking.
2	Investigating experience as we live it	Women aged 20-34 with two or more children were chosen as the participants.
3	Reflecting on the essential themes that characterize the phenomenon	Thematic analysis was employed.

4	Describing the phenomenon through the art of writing and rewriting	A phenomenological text was created through writing and rewriting techniques.
5	Maintaining a strong and oriented relation to the phenomenon	The themes were discussed concerning the phenomena.
6	Balancing the research context by considering the parts and the whole	The transcripts and the extracted themes were compared and studied closely.

Their accuracy was checked by comparing the translated transcripts with the recorded interviews. The transcripts were broken down into words, phrases, and sentences using holistic, detailed, and selective approaches, and themes reflecting the women's lived experiences were extracted. The transcripts were reread and scrutinized several times to thoroughly understand the participants' lived experiences.

Trustworthiness: Trustworthiness, or the level of soundness or adequacy, can be ensured in a qualitative study by an appropriate description of data analysis and justification of the reliability of the collected data [19,20]. In this study, trustworthiness was ensured by considering expert comments, selecting appropriate times and places for interviewing the women, building rapport to gain the women's trust, and reading the transcripts several times. The researchers' long-term fieldwork also helped ensure reliability.

Ethical considerations: Ethical considerations included obtaining the required approval from the Research Ethics Committee at Hawler Medical University. Moreover, the participants were provided with sufficient information about the study's aim, confidentiality, and data collection methods. Furthermore, the women were allowed to withdraw from the study at any time. Additionally, informed written consent was obtained from participants prior to the study. All gathered data were kept anonymous, and each woman was assigned a unique code (Participant 1, Participant 2). The documents containing the collected data were kept in a secure location to ensure their confidentiality.

3 Results

The main characteristics of the 16 married women who participated in the study are shown in Table 2.

Table 2: Characteristics of the study participants (n=16).

Characteristic	No.	(%)
Age		
20-25	5	(31.3)
26-30	6	(37.5)
31-34	5	(31.3)
Education level		
Illiterate	2	(12.5)
Primary school	3	(18.8)
Secondary school	6	(37.5)
College and above	5	(31.3)
Number of children		
2	7	(43.8)
3	6	(37.5)
4 and more	3	(18.8)
Use of contraception	10	(62.5)
Age at marriage (median) years	27	

Analyzing the interviews led to the interpretation of participants' lived experience as "big changes in childbearing preferences" as the main theme, caused by three factors: "political situation," "economic uncertainty," and "social awareness" as subthemes.

3.1 The main theme: Big changes in childbearing preferences

Interviews with participants revealed that their childbearing preferences differed significantly from those of their mothers and grandmothers. The major change mentioned by almost all participants concerned the number of children they preferred to have. In this regard, Participant 6 said:

> "My grandparents had 12 children, and my parents 8, including me, but I have only two children. Currently, most families have 1 to 2 children, so this change is nationwide."

The participants emphasized that having few children was not acceptable in the past, but now people prefer having few children. In this regard, Participant 10 stated:

> "In the past, having fewer than 5 or 6 children was a shame, but currently, having more than 2 or 3 children is a shame. People's attitude toward the number of children has totally changed."

Another prevalent preference among the participants was about the children's gender. In this regard, most participants reported not caring about the child's gender. They also stated that, unlike before, the families do not insist on having male children, although men are still more willing to have boys than girls. In this regard, Participant 3 said:

> "My elder sister is 45 now. Her first three children were girls, and her husband always insisted on having boys, so they had another child who was, fortunately, a boy. After having that boy, her husband wanted another boy, and now they have three daughters and two sons. I am 32, and I have two girls. Unlike my sister's husband, my husband has never insisted on having boys. I think people's preferences have changed a lot."

For some families, female children are even more preferable over male children. For example, Participant 9 said:

> “I personally prefer girls because they are kinder to their parents and support them more during their old age. My husband also agrees with my idea.”

3.1.1 The first subtheme: Political situation

Analyzing the interviews showed that participants' childbearing preferences were strongly influenced by the world's political situation, particularly in Iraq. In this regard, Participant 7 revealed:

> "Iraq's political situation is not stable at all, and we always expect sudden and big changes in the country. Because of this political instability, you can never have a fixed plan for your life, which is why I prefer not to have more than three children. I am not sure about their future in this country."

The participants stressed that having fewer children helps them better deal with conflicts and insecure situations. In this context, participant 14 said:

> "It is totally clear that people will not have children or many children if they do not feel safe. During the ISIS war, many children were killed or injured. If you have 1 or 2 children, you can easily handle them in case of any probable war, but if you have many, you cannot do much for them."

The participants emphasized that, unlike in the past, politics nowadays plays a significant role in every aspect of life, including the number of children. For example, Participant 16 pointed out:

> "In this country, politics has penetrated every single corner of our lives and affected many things. If, 50 years ago, you told people they needed to consider politics while deciding to have children, they might have laughed at you for many hours, but currently, politics determines the number of your children. That is crazy."

3.1.2 The second subtheme: Economic uncertainty

Participants indicated that the economic situation strongly influenced their childbearing preferences. This point was mostly raised by participants with institute or university degrees. They mentioned that people would rather have fewer children, as many as 2 or 3, so they can afford to raise and educate them well. On this point, Participant 1, who held a university degree, said:

> "Childbearing is not just about having the physical ability to do so; you need to be ready economically and psychologically. The economic situation can remarkably affect people's mental health, so the economy is very important. When you are well off, you can have more children and raise and educate them well."

The participants emphasized that more children were needed in the past to help with the family's economic situation. In contrast, more children are currently becoming an economic burden for the family. In this context, Participant 5 pointed out:

> "In the past, people lived in villages, and most parents were farmers and ranchers, so they needed their children's help with their jobs; therefore, they would have more children. However, now, every child you have needs a different job. That is why people prefer having 1 or 2 children currently."

The participants indicated that the number of children goes in line with the economic situation of the families. For example, Participant 12 mentioned:

> "My brother is quite rich, five years older than me, and has five children. He can afford to raise and feed them well. However, my husband and I are not rich, so we can only have up to 2 children. I am sure we would have 2 or 3 more children if we were richer."

3.1.3 The third subtheme: Social awareness

The final prevalent childbearing preference mentioned by 10 participants out of 16 was their insensitivity to the child's gender. In the past, most families preferred male children over female children, but nowadays, people are less sensitive to this. This change, as pointed out by Participant 8, was attributed to social awareness:

> “In the past, due to a lack of awareness, people preferred having boys over girls. However, currently, people are more aware of social issues because of social media, so they are less sensitive and biased about having boy children."

The participants emphasized that higher awareness about human rights and gender equality plays a role in reducing the bias toward boy children. For example, Participant 11 mentioned:

> “Currently, people are more aware of human rights thanks to the internet and social media. They are less biased toward having boy children. Unlike in the past, both boy and girl children are equally loved and preferred, at least in my family.”

The participants stressed that currently, there is less sensitivity about the gender of children than in the past, and even some families prefer having girls over boys. In this context, Participant 15 said:

> "I personally prefer girl children because they are kinder and more caring about their parents. Girls are also cuter than boys. Anyway, unlike my grandparents and parents, I am not very sensitive about the gender of children."

4 Discussion

Women's childbearing preferences may differ depending on their expectations and experiences. Many women might have concerns about the baby's health or survival during pregnancy or childbirth. Therefore, it is important to respect women's wishes and preferences. The present study showed that most participants were less eager to have children than their mothers and grandmothers. Similar results were reported in a study in Saudi Arabia by Al-Khraif et al. (2020), who pointed out that families are now smaller than in the past [21].

Our results revealed that, in general, the social context and the world's political situation affected participants' childbearing preferences. Participants stated that when people feel unsafe, they will not be eager to have children. Moreover, they said the lack of political and social stability prevents them from having more children. In a similar study by Behjati-Ardakani et al. (2017), it was reported that fertility and childbearing are consistently considered social phenomena, and rationalizing and legitimizing decisions about childbearing and fertility are specified in the societal context. The rationale for decision selection is intertwined with society's cultural, political, social, and economic evolution, such as urbanization, modernization, and community development [22]. Fertility and the number of children are not merely connected with the individual's interpretations of the conditions and the objective and subjective factors surrounding them; they are also associated with other factors, including income, quality of child nurturing, the amount of time parents allocate to their children, and other family factors [23].

As stated by the present study participants, the economic situation significantly affects their childbearing preferences, and those with academic degrees emphasized this point of view more. In our study, participants stated they were less eager to have more than three children, mainly due to dissatisfaction with the economic situation. Research from the Kurdistan Region of Iraq has shown that financial challenges limit women's access to healthy behaviors and decision-making. At the same time, employed individuals may have greater resources and opportunities to make health-related decisions and engage in health-related behaviors [24]. Machiyama et al. (2019) reported that women in low-income countries face a continuous dilemma between the costs of an additional child and the need for a larger family. An additional child in the largely tentative circumstances will further strain the family's finances and the couple's relationship [25]. Mothers who wish to delay childbearing for a long time or do not wish any further children may also have conflicting preferences. These mothers might change their preferences if their husband or husband's family wishes for more children or if the situation changes, such as an improvement in the economic situation. Such considerations indicate that the association between desired future childbearing and subsequent behavior might be weak among slum residents [26,27].

Our results revealed that families were more eager to have sons than girls in the past. However, parents are currently less sensitive to this, mainly because of their awareness of social issues. A review of the related literature showed various results. A similar study by Almond et al. (2013) revealed that son preference is not new in most communities. Sons usually receive special treatment in developing countries, particularly in South Asia [28]. Several factors can influence a preference for sons, such as higher earned income, more employment and income-generating opportunities, poor education, particularly among women, remaining in the family, ensuring security for parents in old age, cultural restrictions on women, and traditional and cultural beliefs. Furthermore, discrimination against female children might increase their mortality rate, which might alter the surviving children's gender composition [29]. Families appraise couples who have sons but continue to pressure women to keep having children until they have a son. Previous studies have shown that the belief that a son will provide for his parents in old age is closely related to the idea that having a son is vital [30]. In another study by Hoq (2020), it was reported that the preference for sons was consistent even with different sociodemographic and economic factors. In terms of religion, Muslim women had higher preferences for sons than non-Muslim women. The preference for sons was highest among women with no education, those not working, and those from rural areas [31].

Knowledge of childbearing preferences may influence planning and policymaking. From the women's perspective, empowering them with knowledge and skills would enable them to make better-informed decisions about their childbearing and birth plans [32]. While the Kurdistan Region of Iraq demonstrates comparatively better progress in addressing women's rights issues than the rest of Iraq, numerous challenges persist, including limited knowledge and awareness of their rights and limited access to support networks or financial independence [33]. From the health system side, knowledge about women's childbearing preferences helps the health system, health managers, and policymakers to address the needs of women in terms of contraception, antenatal care, and reproductive health services.

This study has several limitations that should be acknowledged. First, it employed a qualitative research approach to explore women's preferences regarding childbearing. While this method provided in-depth insights, it may not fully capture the breadth and variability of the topic. Incorporating a mixed-methods approach that combines qualitative and quantitative methods could enhance the study by enabling the identification of new concepts, refining definitions of key variables, and offering a more comprehensive understanding of the determinants of childbearing preferences. Second, the study sample consisted solely of Kurdish women, limiting the generalizability of the findings. Women from other ethnic groups living in Erbil, such as Arabs, Turkmen, and Chaldeans, may hold different beliefs and perspectives on childbearing preferences due to their unique cultural, social, and historical contexts. Future research should include a more diverse sample to ensure that the findings are representative of the broader population and to explore the potential differences among ethnic groups.

Conclusion

The observed changes in women's childbearing preferences, while influenced by challenging economic and political conditions, warrant careful analysis to understand their broader impact. Increased social awareness may have contributed to a gradual reduction in the traditional preference for more children, particularly male children, in some contexts. Continued efforts to raise public awareness through well-designed programs and social media can ensure that these shifts in preferences are more intentional and aligned to enhance the quality of life for mothers, children, and families.

Conflict of interests

The authors declare that they have no conflict of interest.

Author contribution

All the authors contributed equally to conceptualization, design, data collection, data analysis, interpretation of results, and writing and finalizing the manuscript. All authors read and approved the final version of the manuscript.

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