

The Fragile Families and Child Well-being Study

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INTRODUCTION

Oakland, California is one of twenty cities across the United States in which parents are participating in a study of *Fragile Families and Child Wellbeing*.¹ The study follows a new birth cohort of approximately 5,000 children in an effort to learn more about the fastest growing group of families in the United States today: that comprised of unmarried parents and their children. We use the term *fragile families* to underscore the fact that unmarried parents and their children are families, and to remind the reader that these families have a higher risk of poverty and family dissolution than traditional families. The proportion of children born to unmarried parents has increased dramatically during the past forty years, with close to one third of births now occurring outside of marriage. Despite this trend, very little is known about the resources of and relationships within these families or the ways in which government policies affect the parents' and children's lives. As a consequence, public perceptions are often shaped by unsubstantiated myths about unmarried couples, and policymakers and community leaders must often rely on anecdotal evidence when designing policies and programs. Without adequate information, such programs may not be as effective as intended, and in some cases, they may even unintentionally undermine the stability of these families.

The study addresses four sets of related questions:

- What are the conditions and capabilities of new unmarried parents, especially fathers? How many of these men hold steady jobs? How many want to be involved in raising their children?
- What is the nature of the relationships between unmarried parents? How many of these couples are involved in stable relationships? What proportion expects to marry? What proportion is exposed to high levels of conflict or domestic violence?
- What factors push new unmarried parents together? What factors pull them apart? In particular, how do public policies affect parents' behaviors and living arrangements?
- What are the long-term consequences for parents, children, and society of new welfare regulations, stronger paternity establishment and stricter child support enforcement, and changes in health care and childcare financing and delivery?

To answer these questions, our study follows families from the birth of the child through age four. New mothers are interviewed in person at the hospital within 24 hours of giving birth. Fathers are interviewed either at the hospital or someplace else as soon as possible after the birth. Three annual follow-up interviews will be conducted over the telephone, and the final follow-up interview will include an in-home assessment of the child's school readiness at age four. The data will be representative of non-marital births to parents residing in cities with populations over 200,000. The data will be representative of non-marital births in each of the cities that make up our sample. A comparison group of married parents will also be followed in each city.

The study design has at least three benefits. By gathering data at birth and tracking child development throughout infancy and early childhood, we can distinguish between differences that are present at birth (or shortly thereafter) and those that evolve over time. Following fathers as well

as mothers also allows us to learn more about unmarried fathers and to study the evolution of the parents' relationship from two points of view. Finally, by following children as well as parents, we can relate changes in parental behavior and family environment to fluctuations in the health and development of children.

The time is right to expand our understanding of fragile families. Welfare reform requires mothers to enter the labor force and raises concerns about the affordability and quality of childcare. Child support laws are tougher and raise questions about the rights and responsibilities of non-resident fathers. As mothers reach time limits on welfare, support from fathers will become increasingly important to them. At the same time, the healthcare system is undergoing major restructuring. As many of these policy changes are implemented at the local level, families in different parts of the country are experiencing very different policy environments as well as disparate labor market conditions. The *Fragile Families and Child Wellbeing* study represents a major step toward identifying the individual and joint effects of these changes on some of the most vulnerable families in our country. Because families formed outside of marriage are disproportionately African-American and Hispanic, research on unmarried parents is essential to understanding the health and development of children in these populations. We undertake this effort so that policymakers and program directors can design programs that encourage, rather than undermine, the efforts of new parents to raise healthy children, maintain self-sufficiency, and make productive contributions to their communities.

This inaugural report summarizes what we have learned from our initial analysis of the first wave of data collected in Oakland, California in the spring of 1998.² Three findings stand out.

- Oakland parents in fragile families are committed to each other and to their children at the time of the birth. Almost half of unmarried parents in Oakland live together, and 86 percent are romantically involved. Seventy percent expect to marry. Over eight out of ten Oakland fathers provided financial or other types of support during the pregnancy, and nine of ten mothers plan to put the father's name on their child's birth certificate. The overwhelming majority of mothers want the father to be involved in raising their child. The challenge for policymakers and community leaders is to nourish rather than undermine these commitments.
- Most unmarried parents in Oakland are poorly equipped to support their families financially. The typical father makes less than \$12,500 dollars a year, and the typical mother earns less than \$5,000. About one out of four fathers and two out of five mothers did not work in the previous year. The human capital of both parents is also low. About half of mothers and 40 percent of fathers lack a high school degree. Less than 20 percent have more than a high school degree. Increases in human capital, employment, and earnings are likely to play critical roles in the success or failure of parents in maintaining stable families.
- Most unmarried mothers in Oakland are healthy and bear healthy children. However, about 20 percent of these mothers do not receive prenatal care in the first trimester, and 13 percent give birth to babies below normal weight. Furthermore, about one out of five mothers drinks alcohol, uses drugs, or smokes cigarettes during pregnancy. Improving the healthcare of all mothers during pregnancy should be an important objective of policymakers.

We plan to re-interview both parents one year later to ask about their child's health and development as well as their parenting styles, childcare arrangements, relationships, access to and use of community resources, personal health, and economic wellbeing. Our hope is that the information contained in this report and those that follow will help community leaders and policymakers design programs that meet new parents' needs and thereby strengthen fragile families.

RESULTS

I. PARENTS' CHARACTERISTICS AND CAPABILITIES

We begin by describing the characteristics of new unmarried parents in Oakland to gain a better sense of their needs, capabilities, and constraints. We are particularly interested in their human capital – age, education, work experience, and health status – and their obligations to other children. These indicators can reveal a great deal about parents' ability to support themselves and their new babies. We also are interested in the cultural backgrounds of new parents – ethnicity, religion, and immigrant status – as these are likely to affect access to public and private resources.

Table 1 (see Appendix) presents profiles of mothers and fathers obtained from the baseline interviews in Oakland. As nearly all the mothers we approached in the hospitals agreed to participate in the study, and because we interviewed mothers in both of the city's birthing hospitals, we are confident that our sample is representative of the population of unmarried women giving birth in Oakland.³ We are less confident that our sample of unmarried fathers is representative, as we were able to interview only 75 percent of these men. Compared to the average unmarried father, the men in our sample are more strongly attached to the mothers of their children and are likely to differ in other ways as well. Anticipating this problem, we asked the mothers a few questions about the fathers of their children so that we could compare fathers who participated in the study with those who did not. The information in Table 1 about fathers' age, education, work status, race and ethnicity, and drug and alcohol problems is based on mothers' reports; thus, it characterizes all unmarried fathers in Oakland. The rest of the information in Table 1 (immigration status, religion, number of children, and health status) is based on the self-reports of the 75 percent of fathers who were interviewed. Sample sizes might preclude precise estimates of certain rare events, such as serious drug problems.

Parents' Human Capital

In our Oakland sample, the typical unmarried mother is in her early twenties. Nineteen percent of these mothers are under 20 and 19 percent are over 30. For legal reasons, we did not include mothers under age 18 in our study.⁴ As a consequence, this Oakland sample of unmarried mothers is slightly older than the actual population of new unmarried mothers in Oakland. According to data computed by the National Center for Health Statistics, 30 percent of all births to unmarried mothers in the United States in 1996 were to women under 20, and 10 percent were to women under 18 (Ventura et al. 1997). Applying these figures to Oakland, we estimate that our sample misses about 10 percent of new mothers by virtue of its age restrictions.

The typical unmarried father in Oakland is in his twenties. He is less likely than the mother to be a teenager and more likely to be over thirty. On average, fathers are 2.8 years older than mothers. Recent reports in the popular press have raised concerns about the proportion of teenage mothers who have children with much older men. To investigate this claim, we examined age differences between teen mothers in our sample (ages 18 and 19) and their partners. Nearly 60 percent of teen mothers in Oakland had partners who were within four years of their age, while 20 percent had partners who were eight or more years older. As our sample excludes the very youngest teen mothers – those under age 18 – this figure probably underestimates the true percentage of unmarried mothers with much older partners. Even if half of the “missing” teen mothers had partners eight or more years older, however, the average for all teen mothers in Oakland would still be 30 percent, a figure substantially lower than the numbers reported in the popular press (Males, 1994).

Lack of education is a serious problem for unmarried parents in Oakland. Over half of these mothers lack a high school degree, and fewer than 20 percent have attended college. Although fathers are more likely than mothers to have only a high school degree, overall they have similar levels of education, as most mothers and fathers have a high school degree or less. In today’s world, where advanced training and education are increasingly important for employment and income stability, these numbers do not bode well for the future of these new parents.

Despite a strong economy in Oakland (the unemployment rate was 3.9 percent during the data collection period), 60 percent of the mothers and only 77 percent of the fathers had worked during the past year. According to the Bureau of Labor Statistics, the 1997–98 labor force participation rate for Oakland mothers in female-headed families with children under age six was 63.6 percent. The participation rate for Oakland fathers in male-headed families with children under six was 86.5 percent, which is somewhat lower than the national rate.

According to their own reports, unmarried parents in Oakland appear to be in fairly good health. When asked whether their own health was “excellent, very good, good, fair, or poor,” about 60 percent (59 percent of mothers and 63 percent of fathers) said “very good” or “excellent.” The national averages for these particular age groups are 74 percent for women and 72 percent for men (Benson and Marano, 1998). Because we interviewed the mothers shortly after the birth of their children, we might expect their self-assessed health status to be a little lower than otherwise. On a less positive note, Oakland mothers do not always engage in good health practices. Almost one out of five mothers reported using drugs during her pregnancy and 17 percent reported using alcohol. Six percent of mothers reported that drug or alcohol use is a problem in their lives.⁵ About 24 percent of mothers reported cigarette smoking during pregnancy, which is strongly associated with low birth weight and other poor birth outcomes.

Not surprisingly, the unmarried fathers in Oakland are more likely than the mothers to engage in risky health practices. In particular, they are more likely to use drugs and to smoke cigarettes, and they are much more likely to drink alcohol. According to mothers’ reports, however, these fathers do not have more problems with drugs and alcohol. As most of the data on fathers’ health status and health behavior are based on their own reports, the figures in Table 1 are likely to underestimate the true proportions. We suspect that the fathers who participated in our study have fewer problems with drugs and alcohol than those fathers who did not participate. Because we used

the mothers' responses to arrive at this figure, however, this bias would not affect the estimate for problems with drugs and alcohol.

Cultural and Social Capital

Turning from the individual characteristics to the cultural backgrounds of our new parents, we find that over half of the new unmarried mothers in Oakland are Black, over 30 percent are Hispanic, and the rest are White or "Other," (mostly Asian and American Indian). Our racial and ethnic percentages are somewhat different from those reported by the California Health Department for births in Oakland in 1996, which show a higher proportion of births to Blacks and a lower proportion of births to Hispanics.⁶ The difference between the two sets of figures is probably due to the fact that Black mothers are more likely than Hispanic mothers to be insured by the Kaiser Health Plan, and, therefore, they were more likely to deliver outside of Oakland in 1998 (see endnote 2). The higher figure for Hispanic mothers in 1998 may also reflect trends in immigration. About 30 percent of the Oakland mothers in our sample are immigrants, primarily from Mexico. About half of new parents report their religion as Protestant, and almost three out of ten identify as Catholic. The percentage of parents reporting no religious affiliation is very small – about 10 percent.

II. RELATIONSHIPS WITHIN FRAGILE FAMILIES

The media often present negative stereotypes of unmarried parents, sometimes depicting babies as the products of casual sexual liaisons or depicting mothers as the victims of irresponsible fathers. For policymakers and program directors, reliable information about the nature of parents' relationships is critical for designing effective programs and policies. If, for example, mothers and fathers are truly indifferent to one another, it makes sense to treat them separately. If, on the other hand, they are involved in marriage-like relationships, policies and programs need to treat these parents as such or they may be ineffective or even undermine parents' relationships.

Mother-Father Relationships

Table 2 presents information on the living arrangements, expectations, attitudes about marriage, and sources of conflict between unmarried parents in Oakland. We present information on three groups of mothers – all mothers, mothers for whom a father interview was not completed, and mothers for whom a father interview was completed. By far the most striking finding is the high rate of cohabitation among these parents. About 47 percent of unmarried mothers are living with the fathers of their children at the time of their child's birth, and another 39 percent are romantically involved with the fathers but living apart. Eight percent are "just friends," and only 6 percent have no contact with the fathers. Mothers without a father interview (column 2) are much less likely to be cohabiting and much more likely to report "no contact" with the father than mothers with a father interview (column 3). The difference between columns 2 and 3 confirms our suspicion that the fathers who agreed to be interviewed are much more involved with the mothers than are the fathers who did not complete interviews.

About 70 percent of the unmarried mothers in Oakland believe that their chances of marrying the father are 50 percent or better. When asked if they strongly agree, agree, disagree, or strongly disagree with the statement, *it is better for children if their parents are married*, 70 percent also said they agree or strongly agree. Fathers' responses were even more positive, which is what we would expect from our sample. When we look at unmarried couples for whom we have two interviews in columns 3 and 4 (i.e., the mother and father of the same child were both interviewed), the fathers and mothers seem to be equally pro-marriage. About 82 percent of fathers say their chances of marriage are 50 percent or better (as compared with 80 percent of mothers), and about 76 percent agree or strongly agree that marriage is better for children (as compared with 72 percent of mothers).

There is strong consensus among these unmarried parents about the qualities of a successful marriage. When asked to identify the qualities that are important for a successful marriage, about three quarters of the mothers rated *maturity* and *husband having a steady job* as very important. One half rated *wife having a steady job* as very important. The fathers expressed values similar to those of the mothers, although they rated *maturity* and *husband having a steady job* a little higher and *wife having a steady job* a little lower than mothers did. They also rated *a good sex life* a little higher. Finally, when asked about the level and sources of disagreement in their relationship during the past month, mothers identified *spending time together* and *money* as the major points of contention. Unmarried fathers reported slightly less conflict than the mothers (compare columns 3 and 4), but agreed that time and money were the major sources of conflict.

In sum, the unmarried parents in this Oakland sample have high hopes for their future together. The vast majority view marriage as a positive institution that benefits their children. Steady employment and emotional maturity are widely regarded by both the new mothers and fathers as essential prerequisites for good marital relations.

Paternal Involvement

Questions about the paternal role – how and to what extent a father is and should be involved in his child's life – are at the core of many moral, social, and economic debates. The Fragile Families and Child Wellbeing study investigates several indicators of paternal involvement within fragile families, including whether the parents want the father's name on the birth certificate, whether the child will take the father's surname, whether the father helped the mother during her pregnancy, and whether the mother wants the father to be involved in raising the child. For each of these indicators, both mothers and fathers express high levels of (intent for and interest in) strong paternal involvement.⁷

The numbers in Table 3 will surprise those who believe that unmarried fathers are indifferent to their children. About 83 percent of mothers and 93 percent of fathers indicated that the father contributed financial and other support during the pregnancy. Eighty-nine percent of the mothers and about 96 percent of the fathers indicate both that the father's name will be on the birth certificate and that their child will take the father's surname. Finally, the overwhelming majority of unmarried parents, including mothers who are no longer romantically involved with their children's fathers, *want* the fathers to be involved in their children's lives. Again, fathers' responses to these questions need to be viewed in light of the fact that the unmarried men who participated in our study are probably more committed to the mothers and children than the average unmarried father in Oakland. Even so, the mothers' responses to these questions, which do not reflect a select group of unmarried mothers, indicate very high levels of intended paternal involvement.

From a public policy perspective, these findings are of tremendous import, for they both debunk popular conceptions and provide a foundation for new policy initiatives. Given that mothers *want* the fathers' assistance in raising their children, and given that fathers *want* to be a part of their children's lives, policies and programs should facilitate, build upon, and maintain the commitment that unmarried fathers articulate at the "magic moment" of their children's births.⁸

The *Fragile Families* study seeks to generate a greater understanding of new parents' perceptions of what being a father means as well as the images of fatherhood that shape these perceptions. The results presented in Table 4, which show parents' views about the characteristics of a good father, are especially interesting. When asked to rank the qualities of a good father the majority of unmarried mothers (58 percent) identified *showing love and affection to the child* as the most important quality. Nearly 40 percent of unmarried fathers ranked this quality first as well. Similarly, when asked to name the least important characteristics, the mothers chose *authority, financial support, and direct care*. Again the fathers agreed, although they placed less importance than the mothers on *authority*, and more importance on both *financial support* and *direct care*.

III. PARENTS' ACCESS TO PUBLIC AND PRIVATE RESOURCES

The next section of this report focuses on parents' access to and use of public and private resources. This information is important in determining the needs of unmarried parents, as well as their potential and actual sources of support. It is essential for ensuring that policies and programs complement rather than undermine existing family networks and community support networks.

Unmarried parents rely on multiple sources of income and in-kind support to help raise their children. According to Table 5, mothers' median income was about \$5,000 per year and fathers' was about \$12,500. The figure for fathers in our sample is likely to be somewhat higher than the figure for all unmarried fathers. Compared to the average unmarried father, the men in our sample are more likely to be employed (according to the mothers) and thus to have higher earnings. Mothers *with* a father interview reported that 82 percent of the fathers were employed, whereas mothers *without* a father interview reported that only 59 percent of fathers were employed.

Household income is substantially higher than personal income – about \$15,800 (median) among the mothers and \$21,100 (median) among the fathers – reflecting the fact that almost 50 percent of new unmarried parents are living with a partner, and another 20 percent are living with other adults. Even so, the vast majority of new parents live either below or just barely above the poverty line.⁹ Fifty-six percent of unmarried mothers in Oakland are poor (according to the official poverty line) and another 29 percent are "near poor," with incomes below 200 percent of poverty. Poverty rates are based on total household income. (It is also important to note that the majority of these new parents have other children to support, which is taken into account by the poverty threshold.) Not all unmarried parents in Oakland are in such dire straits, however. Fifteen percent of the mothers and 26 percent of the fathers enjoy relatively comfortable living standards. Again, the figures for the fathers in our sample are likely to be somewhat higher than the figures for all unmarried fathers.

The extended family is an important source of support for new unmarried parents. Nearly all unmarried parents we interviewed in Oakland said there was someone in their family to whom they

could turn for help with financial problems, housing, or childcare. Nearly half of the mothers received financial support from relatives during the past year, 44 percent received help with housing, and 33 percent received free childcare. Although the mothers are more likely than the fathers to rely on relatives, a substantial proportion of the fathers also receive financial support (17 percent) or help with housing (29 percent).

New unmarried parents in Oakland do not appear to have particularly strong ties to their neighborhoods or communities. In general, the longer people live in a neighborhood, the more likely it is that they know their neighbors and will have them available as a source of support. As shown in Table 6, the average mother has lived in her neighborhood for three years and the average father has lived in his neighborhood about 3.6 years. In addition to the length of residence in one's neighborhood, the quality of the neighborhood can also affect the degree of interaction between neighbors, and thus one's potential support from that source. Three quarters of unmarried mothers and nearly 60 percent of unmarried fathers in Oakland characterize their neighborhoods as safe. Another potential source of community support is organized religion. Although 90 percent of the unmarried parents in our sample report having a religious preference, only 21 percent of the mothers and 12 percent of the fathers attend church on a weekly basis.

A substantial proportion of unmarried mothers in this sample rely on government support. During the past year, about 52 percent received welfare or food stamps, 13 percent received other government transfers (unemployment insurance, workmen's compensation, disability, or social security), and 24 percent received housing subsidies. The proportion receiving government assistance is even higher for women who have another child—63 percent of these mothers received welfare or food stamps (figure not shown). As expected, unmarried fathers are much less likely than unmarried mothers to receive government support.

Recent changes in welfare policy have shifted much of the responsibility from the federal government to the individual states, which differ in terms of their eligibility restrictions and work requirements for welfare recipients. Given these changes, it is important that welfare recipients and potential recipients understand the new policies in their respective states. We found that unmarried parents in Oakland are woefully uninformed about the new welfare rules and regulations. Nearly half of the mothers answer they "do not know" how many years a woman can receive welfare in California or how long she can receive benefits before having to work. The fathers are even less knowledgeable than the mothers about new welfare rules. It is difficult to imagine that policies intended to encourage parental responsibility and create disincentives for dependence can be effective if those who are the most likely recipients are not even aware of them.

In contrast, unmarried parents in Oakland are much better informed about the child support system (figures not shown). When asked whether a blood test prove can prove whether a man is the father of a child, 90 percent of the parents answered yes. However, only 37 percent reported receiving information about establishing paternity at the hospital. It is possible that some parents may have received information after we spoke with them and others may not have understood the information presented to them.

IV. HOW ARE THE CHILDREN DOING?

Low birth weight is an important indicator of children's current and future health status. In this Oakland sample of non-marital births, 13 percent of the babies weighed less than 2,500 grams at birth. This figure is considerably higher than both the national and California averages for all births, which are 7.4 percent and 6.1 percent respectively (Vital Statistics 1996; Rand California Statistics 1998).

Fully 95 percent of unmarried mothers in Oakland reported receiving prenatal care in either the first or second trimester. This number is similar to the national average for all pregnancies, which is 94 percent for initiation of prenatal care before the fifth month of pregnancy (Abma et al. 1997). The data on medical insurance coverage during pregnancy shows that Medi-Cal is an important resource for unmarried mothers in Oakland, with 91 percent of unmarried mothers covered by public insurance. One reason so few mothers in our sample were covered by private insurance is that the Kaiser Health Plan sent mothers to Alta Bates Hospital in Berkeley for their deliveries. Not surprisingly, the mothers with private health insurance were more likely to receive prenatal care during the first trimester than were mothers covered by Medi-Cal (94 percent versus 79 percent).

The length of maternity stay in the hospital is another issue that has attracted public attention. Hospital stays for women who deliver have become longer after an outcry against the practice of "drive-through deliveries." A full 72 percent of the mothers said they were ready to go home and did not want to stay in the hospital any longer. This response may reflect the fact that mothers are benefiting from California's recent "Newborns and Mothers Health Protection Act" which requires that health plans providing maternity coverage allow women to stay in the hospital 48 hours for vaginal deliveries and 96 hours for cesarean sections.

Finally, we asked the unmarried mothers who the baby was going to live with as a way of measuring the resources that would be available to the child in the near term. Going home meant very different things for different babies. Fifty percent are expected to live with their mother and father, 27 percent will live with the mother alone, and 20 percent will live with the mother and another adult.¹⁰ These figures are consistent with the high level of commitment between the parents at the time the child is born. A major challenge for policymakers is to develop ways to sustain this initial level of commitment.

ENDNOTES

¹ The other 19 cities, which were selected to represent different policy environments and labor markets, are: Austin, Baltimore, Boston, Chicago, Corpus Christi, Detroit, Indianapolis, Jacksonville, Milwaukee, Nashville, New York, Newark, Norfolk, Philadelphia, Pittsburgh, Richmond, San Antonio, San Jose, and Toledo.

² The Oakland sample contains 325 families (250 unmarried couples plus 75 married couples who serve as a comparison group). Data were collected in Oakland at Summit and Highland hospitals from February 14 through June 15, 1998. All mothers giving birth during this time were approached in the hospitals and asked to participate in the study until both the non-marital and marital quotas were reached. The research design assumes that families of children born in this four-month period are the same as families who have children at other times of the year. Approximately 93 percent of the mothers agreed to participate. Mothers were asked to provide locating information on the fathers, and fathers were contacted either in the hospitals or as soon as possible after the child's birth. Approximately 90 percent of married

fathers and 75 percent of unmarried fathers agreed to participate in the study. The mother's interview lasted about 30 minutes and the father's interview lasted 40 minutes.

³ At the time we conducted the survey, women could go to two hospitals in Oakland to deliver a baby (Highland and Summit). However, before 1998, Kaiser Hospital in Oakland also performed deliveries. At the time of the study, women who were Kaiser patients were taken to Alta Bates Hospital in Berkeley for deliveries. Because Kaiser serves primarily private patients and not Medi-Cal recipients, who tend to have lower incomes, mothers who left Oakland to deliver their babies likely had higher socioeconomic status than mothers who delivered in Oakland.

⁴ In order to interview minor mothers, we would need to gain permission from the baby's maternal grandparent. This extra step would have increased the cost of data collection and, most likely, would have reduced response rates. Young teen mothers are included in a few selected cities where hospitals requested that they be interviewed.

⁵ These numbers probably underestimate the use of drugs and alcohol since mothers may be reluctant to report behaviors that may reflect negatively on their mothering skills.

⁶ The figures for unmarried births from California Vital Statistics indicate that 61 percent of children delivered at Summit and Highland Hospitals in 1997 were born to Black mothers, 19 percent to Hispanic mothers, 5 percent to white mothers, and 14 percent to mothers of other races.

⁷ Putting the father's name on the birth certificate is not the same as establishing legal paternity. However, we view this variable as a good indicator of parents' intentions to establish paternity.

⁸ At the same time, it is important to recognize that some mothers (12 percent) do not want the father involved in raising their child. In the follow-up survey, we will examine whether this may be due to experiences with domestic violence in the past.

⁹ Because our figure does not include mothers who were in the Kaiser Health Plan, the income of the mothers in our sample is likely to be somewhat lower than the income of all Oakland mothers giving birth in 1998.

¹⁰ Note that very few parents who are *not* cohabiting expect to move in together when their baby comes home. This suggests that most parents who intend to live together have already taken this step by the time their child is born.

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APPENDIX OF TABLES
Fragile Families and Child Wellbeing Study
Non Marital Births in Oakland, California

Table 1. Parents' Characteristics and Capabilities ^a

	<u>Mothers</u>	<u>Fathers</u>
Age (%)		
<20	19	9
20-24	34	30
25-29	28	29
30+	19	32
Average Age Difference		2.81 years (5.63) ^b
Education (%)		
Less than high school	52	38
High school only	31	42
Some college	15	18
College +	2	2
Worked Last Year (%)	60	77
Race/Ethnicity (%)		
White Non-Hispanic	3	2
Black Non-Hispanic	54	57
Hispanic	32	33
Other	11	8
Immigrant (%)	30	33
Religious Affiliation (%)		
Protestant	50	40
Catholic	29	31
Other religion	11	13
No religion	10	16
Have Other Children (%)	68	56
Very Good Health (%)	59	63
No Alcohol Use (%)	83	24
No Drug Use (%)	81	74
No Cigarette Use (%)	76	62
Problems with Drugs/Alcohol (%)	6	6
Total Number of Respondents	248	189

^a The information about fathers' age education, work status, race and ethnicity, and drug and alcohol problems is based on mothers' reports. All other father information comes from the self reports of the 75 percent of fathers that were interviewed.

^b Standard deviation in parentheses.

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Table 2. Parents' Relationships and Attitudes About Marriage

	<u>All Mothers</u>	<u>Mothers without Father Interview</u>	<u>Mothers with Father Interview</u>	<u>Fathers</u>
Relationship Status (%)				
Cohabiting	47	14	58	51
Not cohabiting -- romantic	39	51	35	30
Not romantic -- friends	8	12	6	6
Not romantic -- no contact	6	24	1	2
Don't know if cohabiting/romantic	0	0	0	12
Chances of Marriage				
% "50% or greater"	70	39	80	82
Marriage Better for Kids				
% Agree	48	41	50	51
% Strongly agree	22	22	22	25
Successful Marriage (% who said the following are Very Important)				
Friends	21	24	20	17
Husband steady job	73	66	75	89
Wife steady job	54	51	55	45
Same race/ethnicity	20	25	19	14
Good sex	34	39	33	44
Religion	36	36	37	34
Maturity	74	71	75	86
Sources of Conflict (% reporting the following)				
Money	13	8	14	12
Time	16	19	15	11
Sex	8	12	7	5
Pregnancy	8	15	6	3
Drinking/drugs	6	7	5	4
Being faithful	11	15	10	8
Total Number of Respondents	248	59	189	189

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Table 3. Indicators of Father's Involvement with Child

	<u>All Mothers</u>	<u>Mothers without Father Interview</u>	<u>Mothers with Father Interview</u>	<u>Fathers</u>
Father's Name on Birth Certificate (%)	89	67	96	96
Child Will Have Father's Surname (%)	89	72	94	96
Father Contributed During Pregnancy				
% Financial	83	53	92	93
% Other	79	51	88	91
Want Father Involved (%)	92	71	98	100
Total Number of Respondents	248	59	189	189

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Table 4. Parents' Attitudes About Fatherhood

	<u>All Mothers</u>	<u>Mothers without Father Interview</u>	<u>Mothers with Father Interview</u>	<u>Fathers</u>
Defining a "Good Father"				
% Most Important				
Financial support	10	8	11	14
Teacher	17	17	17	26
Direct care	7	8	6	16
Show love	58	59	58	37
Protection	2	2	2	2
Authority	5	2	6	4
% Least Important				
Financial support	27	27	28	18
Teacher	7	10	6	7
Direct care	23	22	24	17
Show love	0	0	1	1
Protection	9	3	11	12
Authority	31	34	30	40
Total Number of Respondents	248	59	189	189

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Table 5. Parents' Access to Resources: Personal, Household and Kin

	<u>Mothers</u>	<u>Fathers</u>
Total Personal Income (median)	\$5,000	\$12,500
Total Household Income (median)	\$15,780	\$21,100
Poverty Status		
<50% of line	16%	12%
50% - 100% of line	40%	25%
100% - 200% of line	29%	37%
200% - 300% of line	11%	12%
300% or more	4%	14%
Kin Resources (% receiving)		
Financial assistance	46	17
Housing assistance	44	29
Childcare assistance	33	
Potential help	92	87
Total Number of Respondents	248	189

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Table 6. Parents' Access to Resources: Neighborhood and Government

	<u>Mothers</u>	<u>Fathers</u>
Neighborhood Resources		
Years in neighborhood (mean)	3.0	3.6
Neighborhood safe (%)	76	59
Weekly religious attendance (%)	21	12
Government Transfers and Services (%)		
Welfare or food stamps	52	7
Other government transfers	13	12
Housing subsidy	24	15
Awareness of Welfare and Child Support Rules (% lacking information)		
Years eligible for welfare	46	68
Work requirements	50	72
Voluntary paternity establishment	60	66
Total Number of Respondents	248	189

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Table 7. Children's Health and Wellbeing

	<u>ALL BIRTHS</u>
	<u>Mothers</u>
Low Birth Weight Baby (%)	13
Initiation of Prenatal Care (%)	
1st trimester	81
2nd trimester	14
3rd trimester	2
No prenatal care	3
Health Insurance (%)	
Medicaid	91
Private	7
Other	2
Enough Time in Hospital (%)	72
Baby's Living Arrangements (%)	
Mother and father	50
Mother and others	20
Mother only	27
Not mother	3
Total Number of Respondents	248
