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**CHILDBEARING IN COHABITING UNIONS:
RACIAL AND ETHNIC DIFFERENCES**

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CHILDBEARING IN COHABITING UNIONS: RACIAL AND ETHNIC DIFFERENCES

Context: Cohabitation provides a two-parent family context outside of marriage to have and raise children. Yet we know little about the conditions under which cohabitators decide to have children.

Methods: The National Survey of Family Growth provides detailed cohabitation as well as fertility histories. This project employs life table techniques, event history analyses and logistic regression.

Results: Childbearing within cohabitation is much more common for Hispanic women than White or African American women. Among women who become pregnant while cohabiting, Hispanics are more likely to remain cohabiting with their partner when their child is born than women belonging to other racial and ethnic groups. More importantly, children born during cohabitation to Hispanic women are less likely to be mistimed than those to women of other racial and ethnic groups.

Conclusions: These results suggest that cohabitation more often acts as an acceptable arena for family building among Hispanic than White or African American women. Clearly cohabitation does not maintain the same place in the American family system for all racial and ethnic groups

CHILDBEARING IN COHABITING UNIONS: RACIAL AND ETHNIC DIFFERENCES

Cohabitation provides a two-parent family context outside of marriage to have and raise children. Fertility during cohabitation accounts for almost all of the recent increases in nonmarital childbearing and one in eight children born in the early 1990s were born into cohabiting families (Bumpass and Lu 2000). We nevertheless know little about the conditions under which cohabitators decide to have children and whether fertility during cohabitation is a planned event. An analysis of fertility within cohabiting unions may consequently contribute to our understanding of the position of cohabitation in the American family system, as well as provide an explanation for recent trends in fertility among unmarried women.

While there is a large body of research focusing on racial-ethnic differences in fertility generally, there has been almost no research focusing on such differences in cohabiting unions. As a result, most of the literature on cohabitation essentially treats cohabitation as uniform across subgroups (but see Raley 1996; Loomis and Landale 1994; Manning and Landale 1996). Many socioeconomic characteristics, such as income and education (e.g., McLanahan and Casper 1995; Mare and Winship 1991; Wilson 1997), that may influence the behavior of cohabitators differ among racial and ethnic groups. The pattern of racial and ethnic differences in fertility during cohabitation may indicate whether and how cohabitation functions differently for each group (Landale and Fennelly 1992).

This paper is the first study to explicitly assess racial-ethnic differences in fertility of American cohabiting couples. This paper has two central goals. First, I determine whether

there are racial and ethnic differences in the timing of childbearing within cohabiting unions and I examine the extent to which socioeconomic factors account for these differences. Second, I evaluate the general hypothesis that there are racial-ethnic differences in the extent to which cohabitation is considered an “acceptable” family form for childbearing. I do so by analyzing which pregnant cohabitants give birth to their child while cohabiting and drawing on information about the reported timing status of conceptions and births during cohabitation. Understanding the context of childbearing during cohabitation will provide insight into the potential implications of cohabitation for children’s lives. This paper draws on the most recently collected nationally representative fertility data, the National Survey of Family Growth.

BACKGROUND AND CURRENT INVESTIGATION

Cohabitation has become a family form experienced by a near majority of Americans. Almost half of young adults in the United States report having ever cohabited (Bumpass and Lu 2000). According to estimates from the U.S. Census Bureau in 1998 over four million households consisted of cohabiting couples and the numbers have increased dramatically in recent years (U.S. Bureau of the Census 1998). Furthermore, cohabitation has become the most common route into marriage, half (53%) of first marriages in the early 1990s were preceded by cohabitation (Bumpass and Lu 2000).

Minority groups are more likely to select cohabitation as their first union, supporting in part the contention that cohabitation is selective of the more disadvantaged and is in part a response to economic constraints. Almost half of Puerto Ricans cohabited as their first union (Landale and Forste 1991) and cohabitation is a more common first union choice among Blacks than Whites (Clarkberg 1999; Loomis and Landale 1994; Willis and Michael 1994). As a result,

the racial gap in union formation is diminished when considering both cohabitation and marriage rather than just marriage (Bumpass et al. 1991; Raley 1996). Even though minority groups have worse economic prospects than Whites, racial and ethnic differences in union formation persist having controlled for economic status (Clarkberg 1999; Manning and Smock 1995; Raley 1996; Willis and Michael 1994).

What is perhaps less well understood in the literature about cohabitation is that it is increasingly a setting for family formation. Cohabiting unions with children present are arguably one of the fastest growing family forms in the United States; since 1990 there has been a 70% increase in the number of cohabiting households with children (U.S. Bureau of the Census 1998). Researchers have reported that cohabitation is a family form that will be experienced by increasing numbers of children (Bumpass and Raley, 1995; Bumpass and Lu 2000; Graefe and Lichter, 1999; Manning and Lichter 1996; U.S. Bureau of the Census 1998). Some children will be born into cohabiting families while others will experience cohabitation by living with their mother's cohabiting partner (akin to stepfamilies). The exact estimates vary but somewhere between one-quarter and one-half of children in the United States can expect to spend some time living in a cohabiting parent family (Bumpass and Lu 2000; Graefe and Lichter 1999). At the same time there have been dramatic increases in the percentage of children born into cohabiting unions; 12 percent of children born in the early 1990s were born to cohabiting mothers and this represents a 100% increase from levels reported ten years prior (Bumpass and Lu 2000).

Children are more often present in minority cohabiting families than white families. McLanahan and Casper (1995) report that in 1990 two-thirds of Black, 70% of Hispanic and only one-third (35%) of white cohabiting households headed by individuals in their early thirties

had children present. Similarly, greater proportions of minority women gave birth during cohabitation than white women. Bumpass and Lu (2000) find that in the early 1990s one-tenth of white children were born to cohabiting women, in contrast to nearly two-tenths of Black (17%) and Hispanic (18%) children.

The bulk of prior research examining childbearing in cohabiting families has focused on comparisons of the fertility of married or unmarried women to cohabiting women (Bachrach 1987; Brown 2000; Bumpass and Lu 1998; Loomis and Landale 1995, Manning and Landale 1996; Musick 1999). These comparisons provide insight into the potential differences in the family building functions of each union type. Cohabiting women are generally less likely to have children than married women (Loomis and Landale 1994). The fertility of married and cohabiting Black women is more similar than the fertility patterns of married and cohabiting white women.

On the other hand, cohabiting women are more likely to have children than their never-married counterparts living alone (Bachrach 1987; Manning and Landale 1996; Musick 1999). The effect of cohabitation on unmarried childbearing is significantly greater for Puerto Rican than Black or white women (Manning and Landale 1996). Musick (1999) differentiates between planned and unplanned births to unmarried women and finds that cohabitation increases the hazard of both planned and unplanned births among both Blacks and whites and increases only the hazard of planned childbearing among Hispanics. These results suggest that the contribution of cohabitation to unmarried childbearing differs according to race and ethnicity. Bivariate results show that the racial and ethnic gap in childbearing is substantially larger among unmarried women not living with a cohabiting partner than unmarried cohabiting women

(Bumpass and Lu 2000).

Yet scant attention has been paid to the fertility behavior of only cohabitators. We know little about the characteristics of individuals who have children in cohabiting unions and the planning status of children conceived or born into cohabiting unions. The scope of other investigations has been limited to documenting bivariate differentials (e.g., Bumpass and Lu 2000), restricted to other countries (e.g., Wu 1996), or focused on comparisons to single or married women (e.g., Loomis and Landale 1994; Manning and Landale 1996). Childbearing within cohabitation is important because it may represent an important distinction in the meaning of cohabitation. For instance, Puerto Rican women differentiate between types of informal unions based largely on their fertility behavior while cohabiting (Landale and Fennelly 1992). Women who had children during cohabitation categorized their union as a marriage while women who had no children regarded their unions simply as cohabitation. Thus, women who chose to have children within cohabiting unions may be cohabiting for a different set of reasons than women who do not have children. An analysis of the characteristics of women who decide to have children while cohabiting may reveal that cohabitation operates differently for subgroups of women. Furthermore, understanding who has children during cohabitation contributes to work on the implications of cohabitation for children and adults. This paper builds on previous research by explicitly examining racial and ethnic differences in childbearing among cohabitators and includes controls for key mediating factors such as socioeconomic circumstances.

CURRENT INVESTIGATION

The overriding hypothesis is that cohabitation is a more acceptable context for childbearing for minority women than majority White women. The “acceptability” of

cohabitation for childbearing is measured in three manners: 1) cohabiting women's childbearing behavior; 2) the odds of remaining in cohabiting unions once a pregnancy occurs; and 3) views about the timing status of fertility during cohabitation.

Minority women may decide to have children in cohabiting unions partly because of their disadvantaged position in the marriage market or cultural differences in the meaning of cohabitation. Empirical evidence indicates that the gap in fertility between married and cohabiting women is smaller among socioeconomically disadvantaged and minority women than advantaged white women (Loomis and Landale 1994). Thus, I expect that childbearing within cohabitation may be more common among minority women even when controlling for their socioeconomic status. Specifically, based on differences in approval for cohabitation (Oropesa 1996) Hispanic women may have the highest odds of having children while cohabiting. If this is the case, then in terms of childbearing cohabitation does not function the same for all racial and ethnic groups.

Women who become pregnant during cohabitation may decide that cohabitation is not an appropriate place for raising children and subsequently marry their partner so their child is born into a formal marriage or separate from their partner and raise their child alone. Raley (1999) reports that about two-fifths of pregnant cohabiting women are still cohabiting at the time their child is born. Prior work indicates that the effect of cohabitation on the odds unmarried pregnant women marry before the birth of their child differs among racial and ethnic groups (Manning and Landale 1996). Among unmarried pregnant women cohabitation deters marriage for Puerto Ricans, has no effect on marriage for Blacks and is associated with increased odds of marriage for Whites (Manning and Landale 1996). This paper shifts the focus from all unmarried women

to unmarried women living in cohabiting unions and examines racial and ethnic differences in the likelihood that pregnant cohabiting women remain cohabiting once their child is born. Based on previous studies it is expected that a pregnancy will hasten the transition out of cohabitation into marriage for whites and separation for Blacks (Manning 1993; Manning and Landale 1996). If a pregnancy is associated with continuation of a cohabiting union (not marriage or separation), then cohabitation can be viewed as operating as an acceptable arena for childrearing.

A third indication of how women feel about childbearing during cohabitation is whether childbearing is intended. The intention status of births has been largely ignored in research on cohabitation and fertility (see Musick 1999). An important exception is Musick (1999) who examines all unmarried women and reports that cohabitation increases the hazard of intended nonmarital childbearing more than unintended childbearing and the effect is significant among only Black and Hispanic women. Among cohabiting women intended childbearing may occur more often to minority disadvantaged women who view cohabitation as an acceptable family setting to build a family. Distinguishing between intended and unintended births is important because it informs us about whether and how cohabitation is a desired family form for childbearing.

DATA AND METHODS

I draw on a recently collected, large, nationally representative data source, the National Survey of Family Growth (NSFG). The data for Cycle 5 of the NSFG were collected in 1995 and include 10,847 women of reproductive age (15-44). The NSFG data are valuable because they include birth, pregnancy, marriage, cohabitation, employment, and education histories. In addition, the NSFG contains information about the wantedness and planning status of all births.

The NSFG data collected in 1995 include complete cohabitation histories for the first time. No other data source has such high quality data on *both* fertility behavior and cohabitation experiences.

The analytic sample is restricted in two ways resulting in a final sample of 2,716 women. First, the analyses are restricted to women's fertility and cohabitation experiences prior to first marriage. Most (82%) women who cohabited did so while never married. Furthermore, the majority (80%) of children born in cohabiting unions were born to women who had never been married. In addition, the analyses in this paper will focus on first cohabitations because the vast majority of women who cohabited prior to marriage cohabited with only one partner. Second, the analytic sample is restricted to women who have cohabited since 1980 and were less than age 30 when they started cohabiting. This period and age restriction is necessary because of the upper age limit of the NSFG; women over age 35 in 1980 were not included in the 1995 interview because they were older than the upper age limit of 44.

The first set of analyses are based primarily on life table techniques and event history methods. I rely on life tables to estimate the proportion of women who had a child at each cohabitation duration. Separate estimates are provided for the mother's race/ethnicity. Event history models are employed to determine the timing of births or conception within cohabitation. Cox proportional hazard techniques are used to estimate the multivariate models. An advantage of this estimation technique is that it does not require specifying a particular probability distribution (Allison 1984). The event history analyses are based on person-months; individuals either have a birth (or conception resulting in live birth) or are censored by interview or termination of the union (marriage or separation).

The central focus of this paper is on decisions that lead to family building so the analyses are restricted to live births. The timing of motherhood within cohabitation is measured at two time points: conception and birth. In the NSFG respondents were asked directly about both the date of conception and the date of birth. It is important to present findings for both the timing of conceptions and births because decisions about marriage and dissolving the union determine whether or not a child is born within cohabitation. Thus, I estimate models that show separately who becomes pregnant with a child during cohabitation and who gives birth to a child during cohabitation. In addition, using logistic regression I estimate the odds that the first child conceived during cohabitation is born into that cohabiting union. Pregnancies reported to end in abortion are not considered in these analyses, presumably they represent women who had the lowest desires for childbearing during cohabitation.

The next set of analyses predict intention status of first birth or conception in cohabiting unions. Drawing on the above analytic sample, the analyses here are limited to 561 women who gave birth to a child during cohabitation and 657 women who conceived a child during cohabitation. Logistic regression models are used to evaluate the effects of covariates on the intended status of cohabiting births and conceptions. Intended (or planning) status is derived from several questions. Women who discontinued using contraception and who had not wanted to become pregnant were asked if they wanted to have a baby at some time. Those women who wanted a baby were asked the question, "Would you say you became pregnant too soon, at about the right time, or later than you wanted?" Women are classified into two categories: unintended (too early or unwanted) and intended (right time, don't care, or too late). Very few births are classified as too late and existing research typically combines them with intended births. Births

that are classified as occurring too late are quite likely to be more like births that occurred “on time” than those that occurred “too early.” Several different terms are used in the literature to refer to unintended childbearing and I use the terms used in *Best Intentions* (Brown and Eisenberg 1995).

The analytic strategy is to first present a zero-order model with our primary independent variable, race and ethnicity. Then a second model is presented that includes all the other covariates. Using log likelihood ratio tests it is established whether the covariates add to the fit of the model. It is also discerned whether the effects of race and ethnicity can be explained by the socioeconomic control variables.

Table 1 presents the distribution of the independent variables for the total sample and the sample of women who conceived a child during cohabitation. The distribution of the variables for the total sample are discussed below. The focal independent variables in the fertility analyses are race and ethnicity. Sample size limitations permit the classification of the following four groups: Hispanics, African Americans, non-Hispanic Whites, and other. Most (72%) of the sample is non-Hispanic white, ten percent Hispanic, 14% African American and 4% belong to some other racial or ethnic group. Unfortunately small sample sizes do not warrant Hispanics to be separated into subgroups, such as Puerto Rican, Mexican-American, and Cuban. Only 54 Puerto Rican cohabiting women are included in the sample, the resulting Hispanic sample consists primarily of Mexican-Americans. Some differences among Hispanics are noted in the bivariate results section but otherwise Hispanic ethnic groups are combined together. Multivariate results do not differ when Puerto Ricans are excluded from the Hispanic category. The results that refer to the “other” race and ethnic category are not discussed because the

sample size is quite small and includes many different racial and ethnic groups.

The variables measuring socioeconomic disadvantage are education and employment status at the start of cohabitation. Lower levels of socioeconomic status are expected to be associated with increased hazards of childbearing during cohabitation. Education is coded into a four category variable: less than 12 years, 12 years, 13-15 years, and 16 or more years of education. The median level of education at the start of cohabiting was 12 years and one-quarter of the sample has less than a high school degree and 15% has a college degree. Wu (1996) reports that higher levels of education are associated with lower fertility rates in cohabiting unions in Canada. Employment status is categorized into full-time, part-time, and not employed. Over two-thirds of the sample was employed at the start of cohabitation and most women were employed full-time. Income is typically an important component of socioeconomic status, but we are unable to include this measure due to the lack of retrospective earnings reports.

The remaining independent variables included in analyses serve largely as control variables. Measures of the respondent's background include family structure at age 14 and religiosity while growing up. The majority (61%) of the sample lived with two biological parents at age 14, 18% lived in a single-parent family, and 15% lived in step-families. Respondents who grew up in two biological parent families are expected to have lower odds of having children during cohabitation than women who grew up in other family types. The variable measuring religiosity while growing up is based on five categories measuring frequency of attending religious services, and the mean value is the category defined as one to three times per month. Women who were raised in religious families may be less likely to have children in cohabiting unions than women who had a less religious upbringing. The fertility prior to the

start of cohabitation is included because unmarried women who had children prior to cohabitation may be more likely to have children while cohabiting. Although Wu (1996) reports no effect of prior fertility on the timing of fertility within Canadian cohabiting unions. The majority of the sample entered cohabitation childless; one-fifth of the sample had conceived a live birth before starting to cohabit and 14% had given birth to a child before cohabitation. The effects of age and period are measured using two variables: age at start of cohabitation and year of cohabitation. The average age at the start of a first cohabiting union was 21. The sample is roughly equally divided among the five year intervals measuring the year that the union began. I expect that younger cohabiting women may be more likely to have children than older women and women who have formed cohabiting unions more recently will be more likely to have children than women who entered unions in the early 1980s.

RESULTS

Cohabitation and Childbearing

Figure 1 presents life-table estimates of the cumulative percent of women entering motherhood during cohabitation at each cohabitation duration. These estimates are more informative than observed prevalence rates because they account for the variation in the duration of exposure. White cohabiting women are slowest to make the transition to motherhood in cohabitation. Hispanic women make the transition to motherhood in cohabitation faster and at greater levels than other women, and African American women enter motherhood more slowly than Hispanics but most closely mirror Hispanic levels. These differences are somewhat greater when conceptions and not births are considered.

Most women had only one child during cohabitation, but approximately one-fifth of

women who became mothers during cohabitation gave birth to two or more children while cohabiting (results not shown). What is perhaps most striking is that these levels of childbearing occurred in unions of relatively short duration, 22 months on average. Women who chose to have more than one child in cohabitation may view cohabiting unions differently than other women. Among women who gave birth during cohabitation one-third of Hispanic women gave birth to two or more children, while only one-quarter of African-American women and one-fifth of White women did so (results not shown).

In this paper I distinguish between women who had children that were born during cohabitation and those who conceived children during cohabitation. This distinction is important because three-fifths of women who conceived a child during cohabitation went on to give birth to that child during cohabitation (Table 2). Approximately one-third (34%) of women married before the birth of child and only seven percent of women separated from their cohabiting partner before the child was born. It is important to distinguish between births and conceptions because potentially different factors may predict whether a woman simply conceives her child during cohabitation or whether she conceives and gives birth to her child in cohabitation. Furthermore, the family type at birth sharply differs among racial and ethnic groups. The overwhelming majority of Hispanic (70%) and Black (77%) women who conceived a child during cohabitation also gave birth during that cohabiting union while only half of White women did so.

Multivariate Models

The multivariate results estimating time to first conception are presented in Table 3. The hazard ratios are the exponential values of the coefficients and represent the percentage increase

or decrease in the hazard of conception in contrast to the omitted group. The standard errors are presented in parentheses. I present two models: the first model is a zero-order model consisting of only racial and ethnicity and a second model that includes all the other covariates. Identical analyses are conducted estimating the hazard of first birth in cohabitation and any differences in results between the two outcomes are noted below.

The first model in Table 3 presents the zero-order effects of race and ethnicity on the hazard of conception. Hispanics have a 134% greater hazard of having a conception during cohabitation than non-Hispanic white women. African American women have a 79% higher hazard of conceiving a child during cohabitation. The difference between African American and Hispanic women is statistically significant, African Americans have a 25% lower hazard of having a cohabiting conception than Hispanics. An examination of cohabiting births, and not conceptions, leads to similar conclusions about racial and ethnic differences.

The second model shows that the racial and ethnic differences remain significant, but are somewhat reduced in magnitude, with the inclusion of the other independent variables. An exception is that the difference between Black and Hispanic women is no longer statistically significant when the other covariates are added to the model. The log likelihood ratio test indicates that the covariates significantly contribute to the fit of the model ($p=0.000$). There are no significant differences in the effects of the background (family structure and religiosity) covariates on the hazard of a cohabiting conception or birth. Both education and employment status have substantial influences on the hazard of having a cohabiting conception or birth. The hazard of childbearing during cohabitation significantly decreases with education. Women who have a college degree at the start of cohabitation have a 65% lower hazard of having a conception during their cohabiting union. Women not working full-time have greater hazards of

experiencing a conception than women working full-time. Women's fertility behavior prior to cohabitation significantly influences the hazard of a cohabiting conception. Women who had conceived children prior to cohabitation made a significantly slower transition into parenthood than women who had not had children prior to cohabitation. Women who cohabit at older ages have lower hazards of a conception or birth than younger women. The period effects do not significantly differ for the hazard of a cohabiting conception but the results suggest that women who started cohabiting in the 1990s had a significantly greater hazard of giving birth to a child during cohabitation than women who cohabited in the early 1980s. There has been no change in the percent of cohabitators who conceived a child during cohabitation but there has been a rise the in percentage of cohabitators who give birth to a child during cohabitation; largely because of declines in marriage to pregnant cohabitators (see Raley 1999).

The effects of the covariates may depend somewhat on the women's race or ethnicity. Using log-likelihood ratio tests I compare models with and without racial and ethnic interaction terms. The only covariates that had significantly different effects across race and ethnicity were age at start of cohabitation, family background, and education. Family background differences are not found for Hispanics but being raised in a single or step-parent family increases the hazard of a cohabiting conception for White and Black women. Age at cohabitation does not significantly influence the timing of conception in cohabitation for Hispanic women but age lowers the hazard for both White and Black women. The effect of education does not differ for Hispanics and Whites and mirrors the pattern of results presented in Table 3. Unlike Hispanic and White women, Black women with low education levels do not significantly differ from those with 12 years of education. Regardless of race or ethnic group, women with high education

levels have significantly lower hazards of having a conception while cohabiting than women with 12 years of schooling.

Cohabitation Status at Time of Child's Birth

One way the acceptance of cohabitation as a family form for raising children can be examined is by determining whether women who became pregnant during cohabitation decide to give birth to their child during cohabitation or not. The analyses are limited to women who conceived a child during cohabitation and the distribution of the variables for this sample are presented in the second column of Table 1.

The odds that a woman who conceived a child during cohabitation gave birth during their cohabiting union are presented in Table 4 with the first column presenting the effects of only race and ethnicity and the second column incorporating the other covariates into the model. The multivariate results mirror those reported in Table 2. Pregnant Hispanic women have 139% greater odds of giving birth to their child during cohabitation than White pregnant women. Similarly, pregnant Black women have 247% greater odds of giving birth to their child during cohabitation than White women. No statistically significant difference exists between Black and Hispanic women.

The second column shows that the inclusion of the other covariates slightly reduces the magnitude but not the statistical significance of the effects of the race and ethnicity variables. The control variables contribute to the overall fit of the model ($p=0.005$). Net of the control variables, Black and Hispanic cohabiting women who conceive children during cohabitation have significantly higher odds of giving birth to that child during cohabitation than White, pregnant, cohabiting women. The other variables exhibiting significant differences are family

type and education. Pregnant women from “other” types of families have greater odds of giving birth during cohabitation than women from two, biological parent families. Pregnant women who had less than 12 years of education have higher odds of giving birth to their child during cohabitation than women with 12 years of education.

Intention Status

Another way of evaluating whether cohabitation is an acceptable family arena for childbearing is to examine whether the differences in childbearing that are observed are due to intended or unintended childbearing. The first column of Table 5 shows that just over half of cohabiting women classified their first child conceived within cohabitation as intended. These levels of timing status within cohabitation are better understood when contrasted to levels among married and unmarried women. The vast majority (82%) of married women had an intended first conception, whereas only about two-fifths (39%) of mothers who conceived their child prior to marriage while living alone (that is women who were unmarried and not cohabiting) categorized their child as intended (results not shown).

Childbearing is most common in cohabitation for Hispanic women and a relatively high proportion of those children are intended. Almost two-thirds (65%) of Hispanic women had an intended conception in cohabitation, while 56% of Black women and only half of non-Hispanic white women intended their first conception in cohabitation (Table 5). Results are similar if timing status of births, not conceptions, within cohabitation are considered.

Multivariate Models

The odds of an intended (rather than unintended) conception resulting in a live birth are presented in Table 6. Identical models predicting the the odds that a birth during cohabitation was intended were estimated and a similar pattern of results exists for both outcomes. The zero-

order models show that Hispanic women have significantly greater odds of having an intended conception than White women. African American and White women have similar odds of having an intended conception.

The multivariate model shows that Hispanic women continue to have higher odds of having an intended conception than White women even with the potential intervening mechanisms included in the model. The control variables significantly contribute to the fit of the model ($p=0.000$). The effects of the other covariates vary somewhat depending on the dependent variable (conception or birth). There are no significant differences in the effects of family background. More religious cohabitators have higher odds of an unintended conception. Women who had less than 12 years of education had lower odds of an intended conception in cohabitation than women with 12 years of schooling. The effects of higher levels of education are not statistically different than the effect of simply having a high school degree. The odds of having an intended conception do not vary by employment status. Women who conceived children prior to cohabitation had similar odds of having an intended birth as women who had no children prior to cohabitation. Women who started cohabiting at older ages had lower odds of having an intended conception. Finally, the year the cohabitation started has similar effects on the intended or planning status of a conception.

DISCUSSION

There is continued attention to the levels of unmarried childbearing in the United States, and increasingly we are recognizing the importance of cohabitation in understanding recent fertility patterns. This research will contribute to our understanding of cohabitation and family building in three ways. First, unlike prior studies this project focuses solely on cohabiting couples allowing a detailed examination of the socioeconomic differentials in childbearing

during cohabitation. To better understand the implications of cohabitation for children's lives it is necessary to know more about the women who have children while cohabiting. Women who are the most socioeconomically disadvantaged, low education levels and not working full-time, have considerably higher levels of childbearing during cohabitation. Furthermore, women who already have children are more likely to go on to have children while they are cohabiting.

Second, instead of ignoring race and ethnic differences and similarities in childbearing behavior this paper focuses on the timing of childbearing during cohabitation for Black, white, and Hispanic women. An underlying premise of most prior work is that cohabitation serves the same family functions for each race and ethnic group. The findings from this project indicate that the majority of women do not conceive or give birth to children while cohabiting.

Cohabitation is generally a childless union for White women but among Hispanics and Blacks childbearing in cohabitation is much more common. Almost two-fifths of Hispanic women conceived a child during cohabitation and Hispanic women are more likely to have two or more children while cohabiting. After controlling for socioeconomic characteristics, Hispanic and African American women have higher hazards of childbearing during cohabitation than White women.

Third, this project moves beyond documenting differentials in childbearing by attempting to determine whether cohabitation serves as an acceptable venue for childbearing. Some clues about the meaning of cohabitation are provided by examining whether pregnant cohabiters remain cohabiting at the time of their child's birth and the intention status of children conceived during cohabitation. Hispanic and Black women are more likely to remain cohabiting once they become pregnant with a child than white women. These results suggest that cohabitation may serve as a more acceptable venue for raising children for Hispanic and Black

women than white women. Another indicator of how women feel about childbearing during cohabitation is whether they report a child was intended or not. Over half of women who conceived a child during cohabitation reported it was intended. The contention that women who are more likely to have children during cohabitation also are more likely to report those children were intended is true only for Hispanic women. The higher levels of childbearing that occur among Hispanic women during cohabitation are not the result of unintended births. Even though the level of childbearing during cohabitation is twice as high among Blacks than Whites, the percentage of women who report unintended conceptions and births is roughly the same. Taken together these results suggest that childbearing during cohabitation is more acceptable family form for having children for Hispanic women than African American or White women.

This paper has three key shortcomings. First, the analyses focus on single-sex models of fertility and cohabiting outcomes. These decisions occur within a dyadic context and future work should incorporate crucial information about the cohabiting partners' characteristics. Unfortunately, the NSFG did not collect retrospective data about cohabiting partner characteristics that the respondent did not marry.

Another limitation is the limited sample size that precludes distinguishing between Hispanic ethnic groups (e.g. Cubans, Puerto Ricans, and Mexican-Americans). Consequently, the Hispanic categorization includes individuals with many different ethnic roots. The acceptability of cohabitation as an arena for family building could differ among Latino subgroups. Puerto Ricans represent the most disadvantaged Hispanic group and their economic status is on par with African Americans. The family experiences of Puerto Ricans appear to be quite different from those of other Hispanic subgroups and in fact cohabitation appears to operate

more akin to marriage among Puerto Ricans than other racial and ethnic groups (e.g., Landale and Forste 1991).

Third, the mechanisms through which race and ethnicity influence childbearing are not established in this paper. This paper documents that the racial and ethnic differences are not explained by socioeconomic variation. Thus, other aspects of the social context contribute to racial and ethnic patterns of childbearing in cohabitation. Yet it is beyond the scope of this paper and data used in this project to determine the specific mechanisms. Nonetheless, understanding the mechanisms remains a critical question. Differences in intention status of childbearing and decisions to remain living with cohabiting partners at the time of the birth provide some hints about potential explanations for racial and ethnic differentials. Other research on attitudes about nonmarital childbearing and cohabitation also provide some clues about sources of differences (e.g., Carter 1993; Oropesa 1996). An important next step will be to specifically examine the racial and ethnic cultural and social backdrop under which family building decisions are made.

Researchers often try to place cohabitation on a continuum with singlehood at one end and marriage at the other end. The questions often posed are whether cohabitation is a substitute for marriage or does cohabitation replace premarital courtship. These are reasonable questions, but are confounded by the fact that the boundaries between marriage and singlehood have become less distinct, largely due to increases in nonmarital fertility. It does not appear that we will ever be able to strongly argue that cohabitation functions in one particular manner for all cohabitators. We need instead to recognize and understand the sources of variability and change in cohabitation. In this paper I have attempted to improve our knowledge about some sources of variability in cohabiting unions. Moreover, our understanding of racial and ethnic differences in

family formation often ignores cohabitation. These results suggest that accurate portrayals of recent family change among racial and ethnic groups require acknowledging cohabitation.

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Table 1. Distribution of Independent Variables

	<u>Total</u>	<u>Conceptions</u>
Race/Ethnicity		
Hispanic	9.9	18.9
African American	13.8	21.7
White	72.5	54.9
Other	3.8	4.6
Family Background		
Two Biological Parents	61.1	53.6
Single Parent	17.7	21.1
Step Parent	14.9	17.7
Other	36.3	7.6
Religiosity (mean)	3.1	3.1
Education		
<12 years	24.8	46.0
12 years	47.2	43.7
13-15 years	13.3	7.3
16+ years	14.7	3.0
Employment		
Not Employed	31.3	46.5
Part Time	9.1	9.8
Full Time	59.6	43.7
Prior Fertility		
Any Conceptions	19.9	26.4
Any Births	14.3	21.0
Age Start Cohabiting (mean)	20.8	19.5
Year Start Cohabiting		
1980-1984	30.3	35.9
1985-1989	32.2	38.7
1990+	37.5	25.4
N	2716	657

Weighted percentages and means

Table 2. Union Status of Cohabiting Conceptions at Time of Birth

<u>Birth Union Status</u>	<u>Race/Ethnicity</u>				
	<u>Total</u>	<u>Hispanic</u>	<u>African- American</u>	<u>White</u>	<u>Other</u>
Cohabitation	59.2	69.1	77.4	49.8	46.0
Marriage	34.2	27.3	12.5	44.3	43.6
Not Intact	<u>6.6</u>	<u>3.6</u>	<u>10.0</u>	<u>5.9</u>	<u>10.4</u>
	100.0	100.0	100.0	100.0	100.0

N=657

Weighted Percentages

Table 3. Proportional Hazard Estimates of Timing to First Fertile Pregnancy in Cohabitation

	<u>Hazard Ratio</u>	<u>Hazard Ratio</u>
Race/Ethnicity		
Hispanic	2.34** (.10) ^a	1.77** (.11)
African American	1.79** (.09)	1.69** (.10)
Other (White) ^b	1.52 (.23)	1.57* (.23)
Family Background		
Single Parent		1.05 (.10)
Step Parent		1.07 (.12)
Other (Two Biological Parents)		1.00 (.14)
Religiosity		1.04 (.03)
Education		
<12 years (12 years)		1.33** (.10)
13-15 years		0.67** (.16)
16+ years		0.35** (.23)
Employment		
Not Employed		1.28** (.10)
Part Time (Full Time)		1.48** (.14)
Prior Conceptions		
Yes (No)		0.78** (.09)
Age Start Cohabiting		0.96** (.01)
Year Start Cohabiting		
1980-1984		0.95 (.11)
1985-1989 (1990+)		1.11 (.10)
-2 Log Likelihood	8908.3	8780.4
<u>Df</u>	3	16

N=2716

*p ≤ .05 **p ≤ .01

^a Standard errors in parentheses

^b Reference category in parentheses

Table 4. Odds Ratio Estimates that a Child Conceived During Cohabitation Is Born Into Cohabitation

	<u>Odds Ratio</u>	<u>Odds Ratio</u>
Race/Ethnicity		
Hispanic	2.39** (.22) ^a	1.85** (.23)
African American	3.47** (.20)	3.00** (.22)
Other (White) ^b	0.91 (.45)	0.83 (.47)
Family Background		
Single Parent		1.20 (.22)
Step Parent		1.01 (.25)
Other (Two Biological Parents)		2.42* (.38)
Religiosity		0.96 (.07)
Education		
<12 years (12 years)		2.13** (.23)
13-15 years		1.36 (.33)
16+ years		0.77 (.51)
Employment		
Not Employed		0.99 (.23)
Part Time (Full Time)		0.86 (.31)
Prior Conceptions		
Yes (No)		1.46 (.21)
Age Start Cohabiting		1.03 (.03)
Year Start Cohabiting		
1980-1984		0.98 (.23)
1985-1989 (1990+)		1.20 (.23)
-2 Log Likelihood	808.4	778.5
<u>Df</u>	3	16

N=657

*p ≤ .05 **p ≤ .01

^a Standard errors in parentheses

^b Reference category in parentheses

Table 5. Intention Status of Children Conceived During Cohabitation Among Racial and Ethnic Groups^a

	Race/Ethnicity				
	Total	Hispanic	African-American	White	Other
Intended	44.2	35.0	44.1	48.6	31.1
Unintended	55.8	65.0	55.9	51.4	68.9
	100.0	100.0	100.0	100.0	100.0

^aConceptions resulted in live births
 N=657
 Weighted Percentages

Table 6. Odd Ratio Estimates that a Child Conceived During Cohabitation Was Intended

	<u>Odds Ratio</u>		<u>Odds Ratio</u>	
Race/Ethnicity				
Hispanic	1.61*	(.21) a	1.65**	(.23)
African American	1.17	(.18)	1.45	(.08)
Other (White) b	2.00	(.48)	1.99	(.50)
Family Background				
Single Parent			0.70	(.21)
Step Parent			0.71	(.24)
Other (Two Biological Parents)			0.94	(.30)
Religiosity			0.87*	(.06)
Education				
<12 years (12 years)			1.61*	(.21)
13-15 years			0.64	(.32)
16+ years			1.66	(.55)
Employment				
Not Employed			0.92	(.21)
Part Time (Full Time)			0.86	(.29)
Prior Conceptions				
Yes (No)			0.65*	(.19)
Age Start Cohabiting			1.12**	(.03)
Year Start Cohabiting				
1980-1984			1.12	(.22)
1985-1989 (1990+)			1.38	(.21)
-2 Log Likelihood	898.6		860.1	
	3		16	

N=657

*p .05 **p .01

^a Standard errors in parentheses

^b Reference category in parentheses