

Multipartnered Fertility at Midlife

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Introduction



- Family life in America has changed dramatically over the last 50 years and as a result of increases in divorce, cohabitation, and single parenthood, the opportunities for adults to have children with more than one person (called *multiple partner fertility* or "MPF") have risen substantially.
- MPF has been linked to many negative outcomes, such as poverty, depression, delinquency and drug use in children and adults, high conflict relationships, and the receipt of less support from family members.
- Unfortunately, our knowledge of women's MPF is rather limited because most work on this topic has utilized male, urban, or young adult samples. To date, there are no national estimates of multiple partner fertility for women who have completed their childbearing.



Research Questions

- How prevalent is multiple partner fertility among American women?
- What factors are associated with this family pattern?
- What predicts whether women will experience MPF in their lifetime?

Data

DATA: The National Longitudinal Survey of Youth 1979 (NLSY79) female respondent file: 6,282 women of ages 41-49 in 2006, 22 waves of data collection, response rate 62%.

SAMPLE: Women who did not miss more than 5 total or 3 consecutive surveys over the 22 waves (n=3,978)

DEPENDENT VARIABLE:

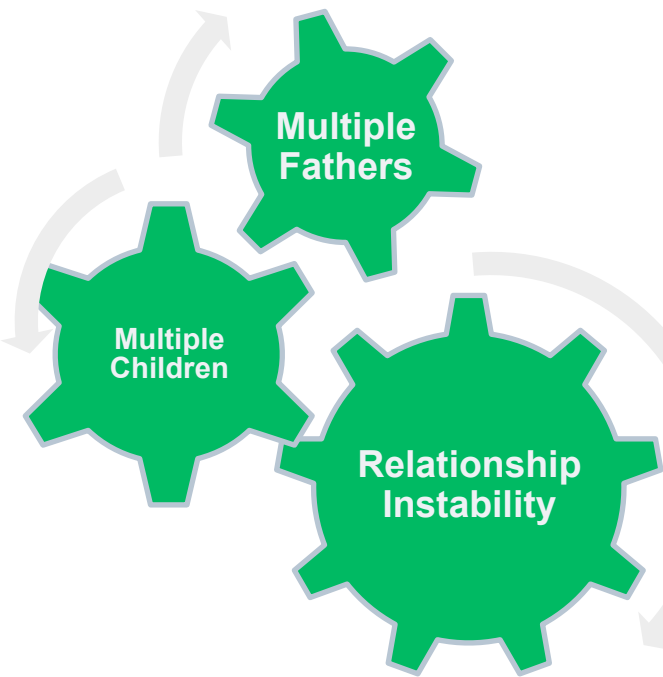
Multiple partner fertility was created from harmonizing questions in the 22 waves of data from the household roster about maternal relationships, relationship start and end-dates, and follow-up survey questions on father presence and involvement over time, and longitudinal information on relationship status. By triangulating this data I was able to identify the fathers of each child. Women were coded as having zero children (0) or one child (1), and among women with two or more children, those with one father were coded as having single partner fertility (SPF= 2), and those with two or more fathers were coded as having multiple partner fertility (MPF= 3).

RESULTS:

- All data are weighted to address oversampling and to provide national estimates
- All correlates presented are significant at the <.05 level



How are Families with MPF Complex?



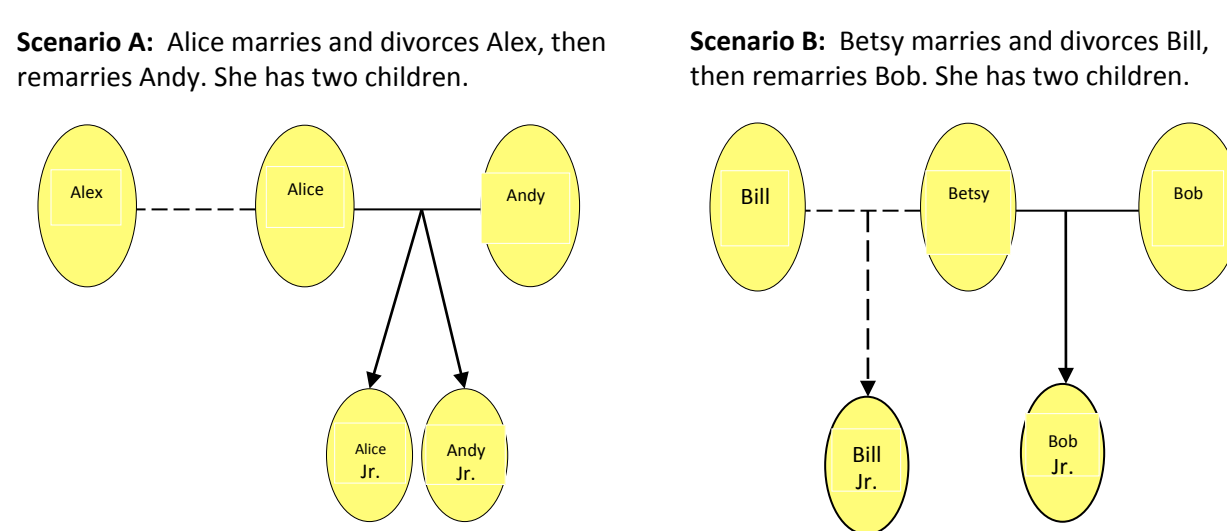
Like a gear, multipartnered fertility has many moving parts, including multiple children, multiple partners, and relationship instability.

At a minimum, women with multipartnered fertility have:

2 children, 2 fathers, 2 relationship formations, and 1 relationship dissolution. However, this pattern can be much more complex and include many children, fathers, and cycles of relationship formation and dissolution that may range from marital to cohabiting to nonresidential unions.

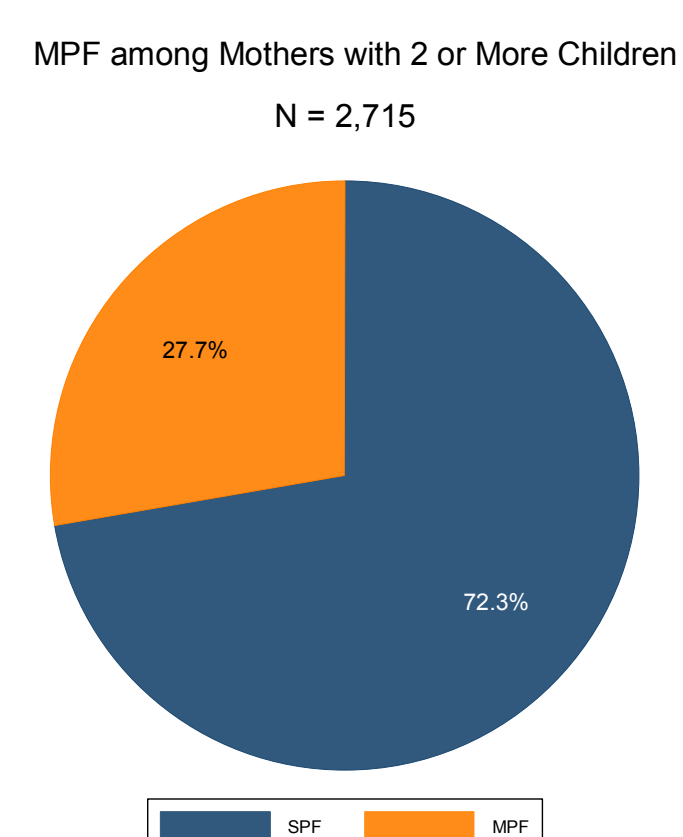
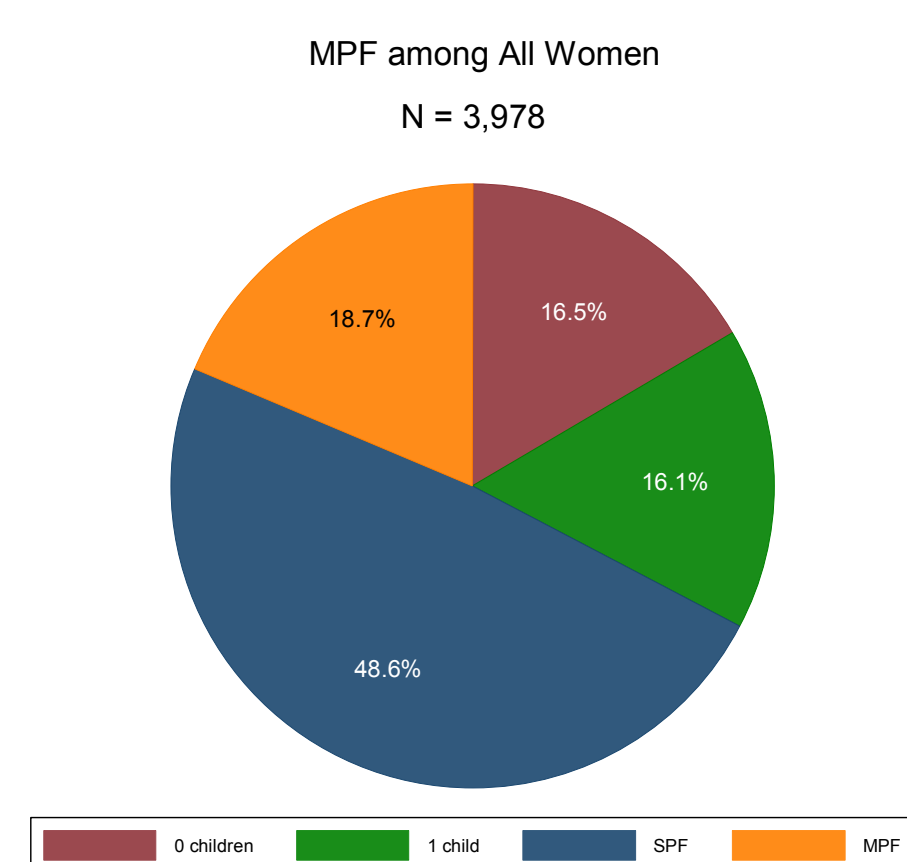
It is important to note that experiencing a particular pattern of instability at the household level doesn't mean that families have similar real world experiences or outcomes. This is one reason the study of MPF is important to family scholars.

Imagine a scenario in which two women share the *same household level relationship trajectory* of marriage, divorce, remarriage but have *distinct multiple partner fertility patterns*.



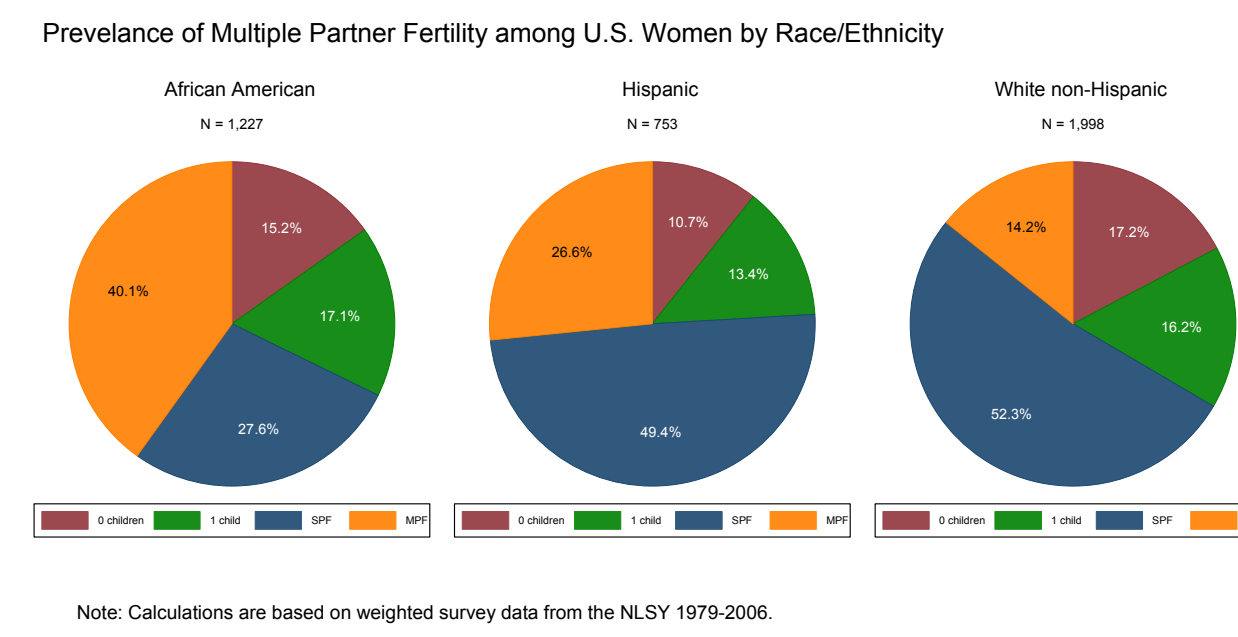
- In Alice's *single partner fertility family (SPF)*, the children are full siblings who were raised by both parents and did not experience a marital disruption.
- In Betsy's *multiple partner fertility family (MPF)*, there are half siblings, a non-resident biological father, a resident step-father, and for one of the children, time spent in a single parent home.
- In Betsy's family there are also many more family roles that need to be filled which may create family strain and ambiguity. Furthermore, while Alice's family has very clear ties to kin outside the household, Betsy's family has ambiguous ties to extra-household kin networks (e.g. grandparents, aunts, and uncles).

Prevalence of MPF among U.S. Women



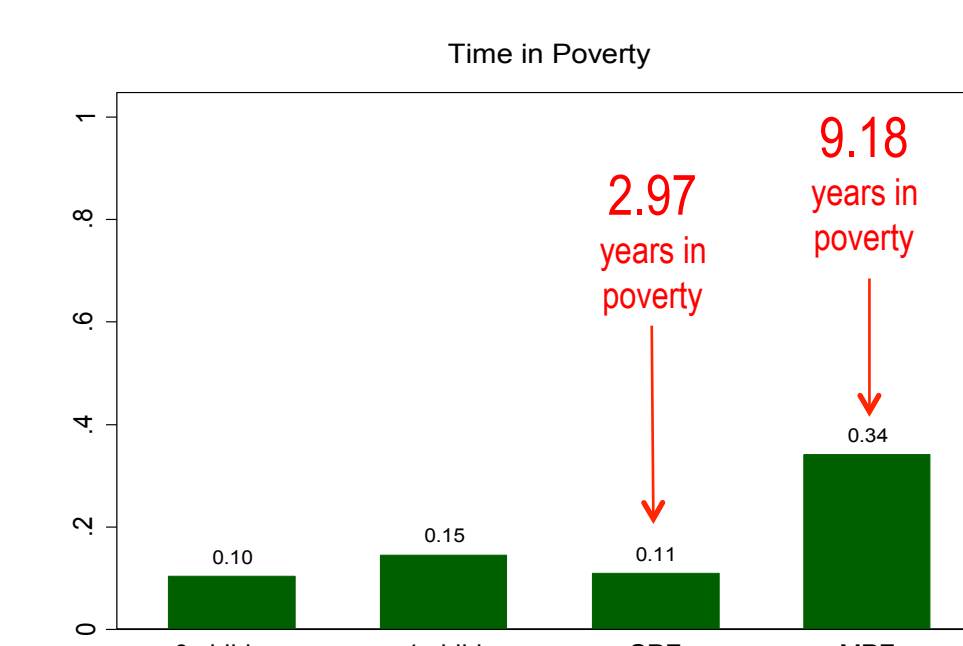
Nearly one in five American women has had children with multiple partners by midlife. And among mothers with two or more children the rate is even higher, at 28%.

Variations by Race/Ethnicity

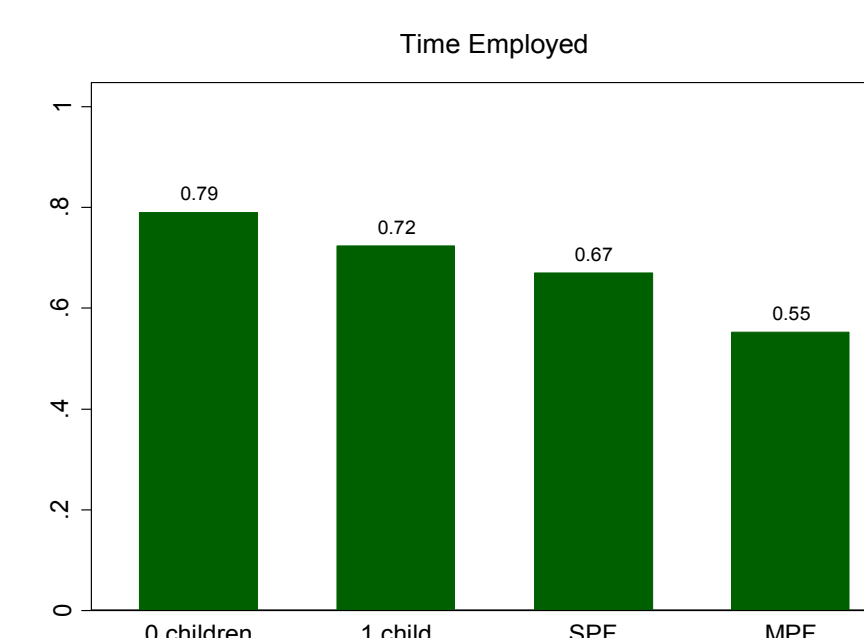


Consistent with past research on men, multiple partner fertility among women varies by race and ethnicity, with rates being highest for African American women, then Hispanic women, and then Non-Hispanic White women.

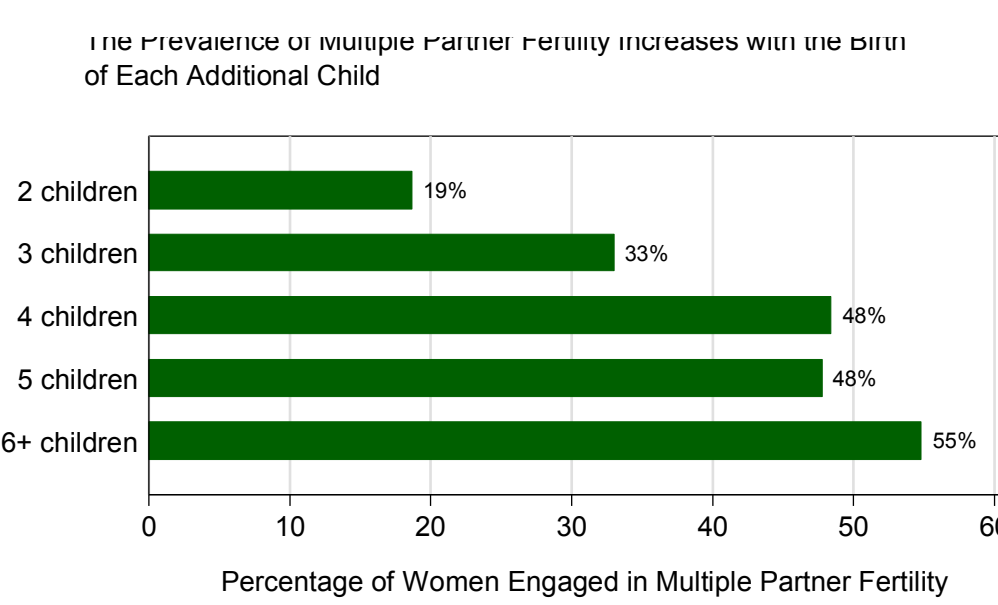
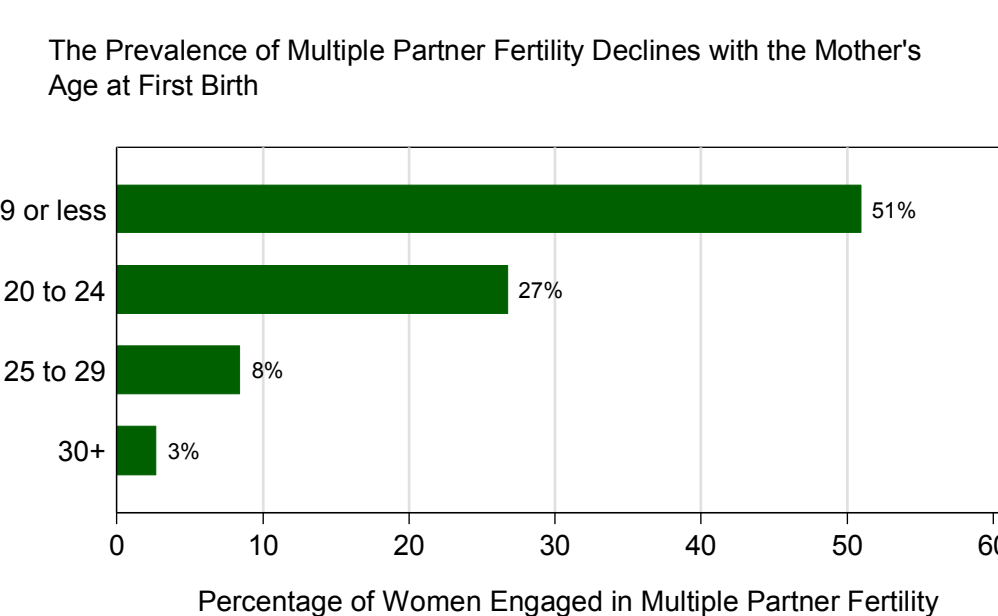
Correlates of Multipartnered Fertility



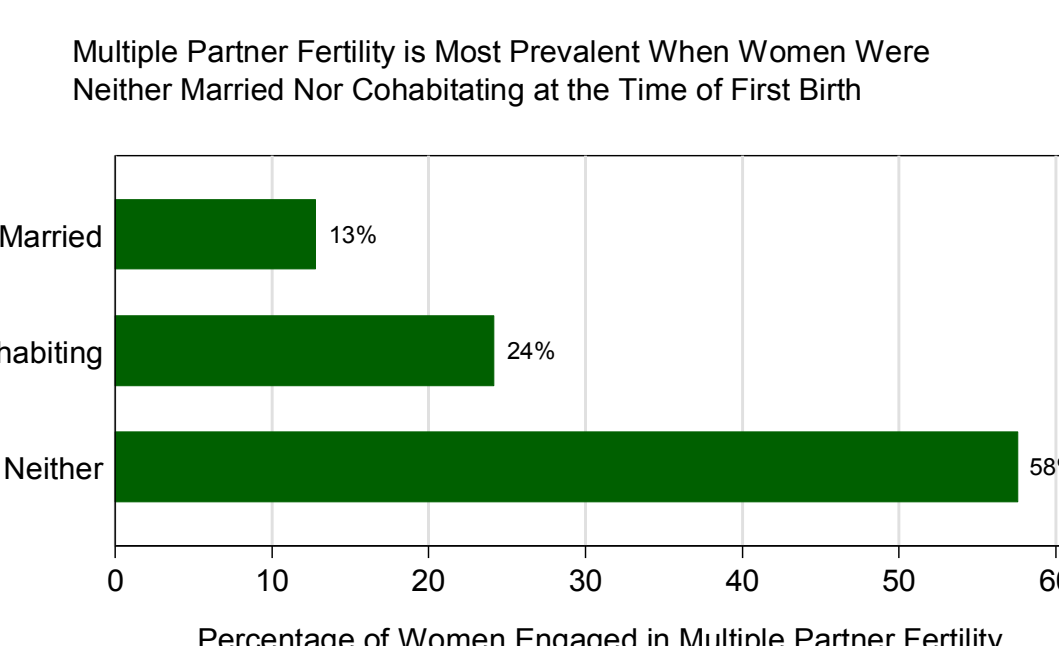
MPF women spend, on average, **six additional years living in poverty during their adult life compared to other women**, with each year in poverty containing its own set of unique stressors and negative life experiences that may accumulate for the woman and her children.



MPF women spend between **three to four additional years unemployed compared to other women**. They also have, on average, between 1 to 2 fewer years of education than other women.

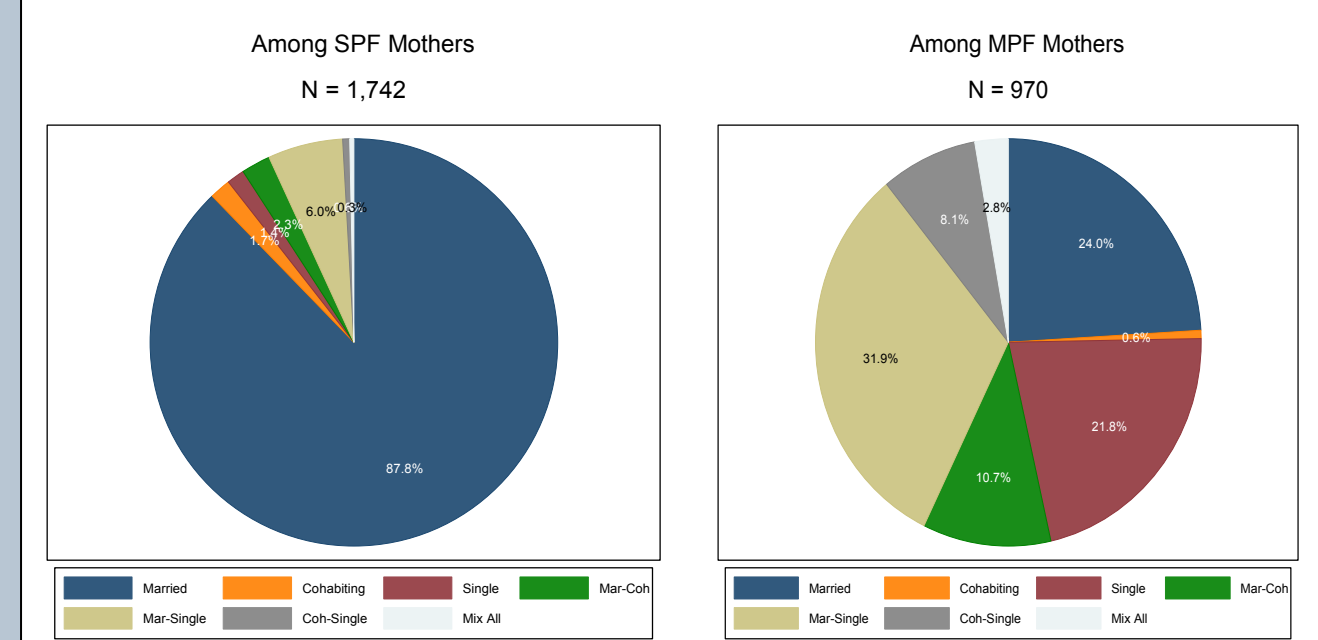


The likelihood of MPF declines with women's older ages at first birth, and increases with the birth of each additional child.



MPF is most likely when women are not living with or married to the fathers of their first child.

Partnering Characteristics



The majority of women experiencing MPF (70%) report being married to at least one of their children's fathers.

Multivariate Models: Pathways in MPF

In logistic models, women appear to have similar 'pushes' into multipartnered fertility, including:

- Being in a nonresidential relationship at the time of first birth
- Younger age at first birth
- If the women expected to be married within 5 years of 1979
- If the woman attended church less than once a month
- Being raised by a single mother or mother/step-father
- Experiencing poverty in 1979
- Mother having less than a high school degree
- Race still important even after controlling for key correlates

Among all women, there was a decreased risk of experiencing MPF among:

- If the woman was foreign born
- If the father had more than a high school degree
- If the woman had higher fertility expectations in 1979

Conclusion

Multiple partner fertility is a significant and pervasive family formation pattern in America today. One in five women will experience MPF and its related family complexities, and this is particularly true for women of color who experience MPF at much higher rates than White women.

MPF is associated with a host of chronic stressors such as lower education, more time spent in poverty, and less time employed.

MPF is also correlated (as expected) with its component parts, such as: higher rates of childbearing, a greater number of partners, and more relationship instability.

In logistic models, African American women appear to have different 'pushes' into multiple partner fertility compared with Hispanic and non-Hispanic White women. For example, while all women were greatly influenced by their relationship status at first birth, White and Hispanic women's MPF was also predicated on the number of men they lived with and the number of children they had over their lifetime. For Black women, the exposure to men and children were not significant predictors of MPF, but being raised by a single mom was critical.

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