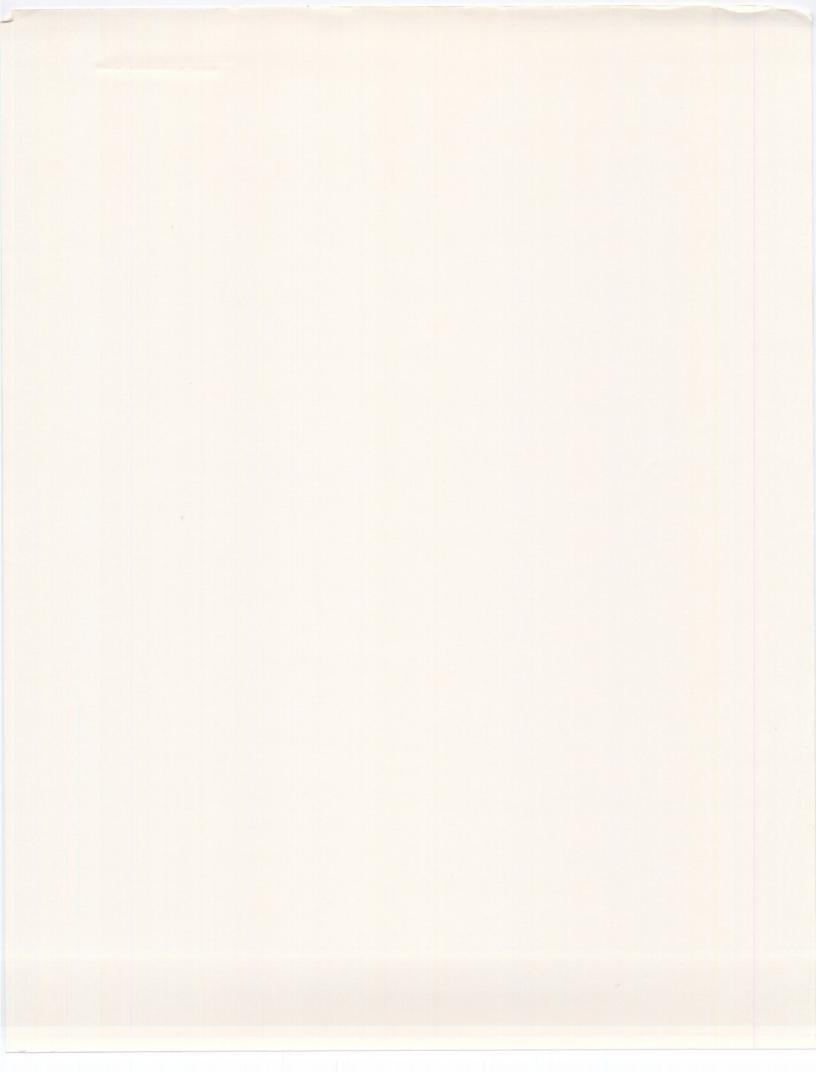
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DELAYED CHILDBEARING AND FAMILY RELATIONS IN THE U.S.: A PRELIMINARY ANALYSIS

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INTRODUCTION

First birth rates to U.S. women 25 and older have increased steadily since the early 1970s, while rates to younger women have been declining. Between 1970 and 1982 the first birth rate for women 30 to 34 doubled from 7.3 first births per 1,000 women to 14.6. In 1970 first births to women 25 and older accounted for only 19 percent of all first births. By 1982 the proportion had climbed to 36 percent. Although the majority of these births occur to women in their late twenties and early thirties, an increasing number are born to women in their mid and even late thirties (NCHS. Monthly Vital Statistics Report, Vol. 33, No. 6, Supplement, 1984). These changes in American fertility patterns are often referred to as delayed childbearing. Headlines announce "The Graying of American Motherhood" (Vrazo, 1984) and scholarly articles on delayed childbearing are increasingly common (Bloom, 1982a, 1982b, 1984; Trussell and Bloom, 1984; Hofferth, 1984; Morgan and Rindfuss, 1982; Morgan et al, 1984; NCHS (Ventura), 1982; Wilkie, 1981).

For the most part, however, these studies focus on the demographic characteristics of women and couples who delay childbearing and on the possible social and economic forces that might explain it, ignoring the possible consequences of delayed childbearing for family life and for society.

From these studies, we learn that delayed childbearers tend to be white, highly-educated, two-career couples. Although the women have a strong attachment to the labor force, they do not necessarily prefer careers over family life (Wilkie, 1981). Beyond these facts, however, we know very little. The popular media often assume that delayed childbearers and their families are among the elite of our society -the Yuppies or young professionals. It is implicitly assumed that their children will receive every advantage that money can buy. Some researchers do suggest one or two areas where older childbearers might experience more difficulties. For example, some wonder whether the larger number of years between parents and children could exacerbate the generation gap (Wilkie, 1981; Morgan and Rindfuss, 1982). Generally, however, most cite the greater emotional maturity and financial security of older first time parents and suggest that these are beneficial for family life and relations between parents and children (Morgan and Rindfuss, 1982).

Delayed Childbearing and Family Life: Some Speculations

How sound are the above assumptions? First of all, not all women who postpone childbearing have high status jobs. Although the majority are professionals, many are sales, clerical, or service workers and some do not work at all (Baldwin and Nord, 1984). Secondly, can we be certain

that greater financial security leads to better outcomes all around? Consider some alternative interpretations of the "Yuppie-become-parent" scenario. Perhaps children of these couples sense the "richer" atmosphere of their households and thus expect more from their parents than their parents think it wise or necessary to provide. The children might be disappointed when their expectations are not met and such disappointment could lead to less intimate relations between the generations. Parents who have spent years enjoying affluence, leisure, and time together might find the changes imposed by children to be particularly burdensome. It is also possible that older, first-time mothers feel more pressure because of their dual responsibilities of careers and childrearing or simply because they have less energy. In either case they might be distracted or tense more often than younger childbearers. Moreover, it is not too far-fetched to hypothesize that children might recognize the difference between their mother having to work in order to support her family and their mother choosing to work to further her own career or to fulfill herself. If they interpret one form of time use by the mother as rejection, they might feel more distant from her. Under these conditions, relations between mothers and children could also be more strained in the households of delayed childbearers.

Parent and child relations are important for the quality of family life and for child development. Moore, Peterson, and Furstenberg (1984) in a study of the antecedents of early premarital intercourse found one of the predictors to be lack of closeness between the teenager and his or her parents. The emotional and psychological strength of parents has also received attention, particularly among researchers studying teen parents because many people fear for the well-being of their children. McLaughlin and Micklin (1983), for example, hypothesize that psychological factors could help explain the poor outcomes for adolescent childbearers and their children, which we shall review shortly. In a study of women aged 14-24 in 1967, they found an early first birth -- one occurring before a women reached age 19 -reduced the mother's sense of control over her environment and her future. But what about tired, work-absorbed, older parents and their children? Is there some age that is too late to begin childbearing? Other studies demonstrate that the psychological and emotional well-being of the parents is important for child development. In a study which did not focus on age at first birth, Patterson (1982) examined the effects of stress in adult lives and mental health outcomes for children. Maternal irritability in the last year was a good predictor of poor outcomes for the children. It seems reasonable to hypothesize that maternal

state of mind could also have an effect on children's school performance and relations with other adults and children. Do older and younger childbearers differ along psychological dimensions?

Are younger, intermediate, and older mothers different in other ways that could affect their families? In a study which examined the costs of raising children to age eighteen, Espenshade found that parental expenditures on children increase the longer the first birth has been delayed. He also found that delaying the first birth increases subsequent expenditures on children more in higher income families than it does in lower income ones (Espenshade, 1984). As Espenshade notes, the interaction between income and expenditures on children could be due to differences in the life-time earnings curves of high status occupations and other occupations. Other explanations, though, are also possible. Perhaps higher income families place more emphasis on education and thus are more willing to invest in their children's education. If, as in the words of another researcher, "the well-being of children depends so much on the care provided in families and on the willingness and ability of parents to invest in the future of their children" (Fuchs, 1983:52), then the children of delayed childbearers may have an advantage over children of younger childbearers.

Until research is done, we cannot be sure whether

beginning parenthood at older ages is the same, better, worse, or just different from beginning parenting at other ages. Although several observers have noted the lack of research on the implications of older parental ages for family life and parent-child relations (Wilkie, 1981; Ragozin et al, 1982; Cohen et al, 1980; Kellam et al, 1982), no large-scale studies have yet addressed these topics.

Research on Adolescent Pregnancy

There are, of course, numerous studies on the youngest mothers -- teenagers. As with the work on delayed childbearing, most studies of adolescent pregnancy are descriptive in nature. From them, we know that teenage childbearers are predominantly black, have lower achieved educational levels (Hofferth and Moore, 1979), and have greater marital instability (McCarthy and Menken, 1981) than older mothers. For the last reason, teenage mothers are more likely to be single heads of their families. Partly because of their lower education, they have lower incomes and are more likely to receive some sort of State or Federal assistance than older mothers (Moore and Caldwell, 1977). Illigitimacy is high (Baldwin, 1980). Based on this description, delayed childbearers do indeed seem to be the opposite of teenage childbearers. But, can we assume that simply because the two groups represent

different extremes on these demographic and socioeconomic characteristics that they will be opposites in other ways.

And what about their children?

Children of Teenage Childbearers

Several studies of adolescent pregnancy have looked at the effects on the offspring born, specifically their cognitive, social, and emotional development, and their school achievement. A small, but persistent positive relationship between mother's age at birth and a child's intellectual ability has been noted. The difference has been found for infants at eight months of age, children at four years (Maracek, 1979), at seven years (Maracek, 1979; Dryfoos and Belmont, 1979), at eleven years (Record, McKeown, and Edwards, 1969), and at nineteen years (Zybert, Zena. and Belmont. 1978). These studies overall had relatively small samples, but Cohen, Belmont, Dryfoos, Stein, and Zayoc (1980) obtained the same results when they examined three large data sets. Although all the studies attempted to control for social class and other confouding factors, some researchers suggest that the association of maternal age and parity with social class accounts for the observed differences (Record, McKeown, and Edwards, 1969).

Another indicator of cognitive abilities, school success, indicates that children of teenage mothers do less

well than children of older mothers. In a study of ten and eleven year olds from intact families, economically disadvantaged children of adolescent mothers repeated a grade more often and had lower reading scores than other children (Davis, 1979). Card (1981) found fifteen year old children born to adolescent parents to have lower grades than the other students. Her results, however, did not hold for seventeen year old children. And another study indicated that children born to mothers seventeen years old or younger were less able to adapt to school (Kellam, 1978). Kellam suggests that the inability to adapt could affect their emotional adjustment as teenagers.

Unlike the results on cognitive abilities, the results of studies of the relationship between mother's age and a child's social and emotional development are not very consistent (see Baldwin and Cain, 1981, for a review).

Some studies reveal no persistent relationship
(Furstenberg, 1976; Dryfoos and Belmont, 1979). Others note differences. Maracek (1979), for example, studying children's behavior when they were four years old and again when they were seven, found maternal age to be unimportant in accounting for child behavior at four, but associated with several differences in child behavior at seven.

Children born to mothers younger than eighteen showed greater overactivity, hostility, restiveness, and lack of impulse control than children born to older mothers. Card

(1981) found children of adolescent parents to have lower educational expectations and to be less sociable, tidy, cultured, and mature than their classmates. The fact that these results did not show up until school age may imply that environmental factors account for the observed differences. Baldwin and Cain (1980) suggest the educational and economic disadvantage and the greater likelihood of marital breakup associated with teenaged childbearing are the mediating variables for the results for children of teenage parents.

Research on Teenage Childbearers: Its Limitations for Understanding the Consequences of Other Ages at First Birth

The research on teenage childbearing has limitations for understanding the full range of differences in family life and parent—child relations that are associated with maternal age at first birth. First, most studies have simply grouped all women over twenty together as a contrast to teenagers ignoring possible differences among the older women. Second, any associations between maternal age and family relations found in studies of adolescent pregnancy may not apply to older mothers. There is very little theory about how or why maternal age at first birth may affect family relations or child outcomes. Because of this lack of theory, we have no idea of the functional form that maternal age may have with these other variables and, thus, we do not know how to extrapolate from the findings

on teenage childbearing. Still, the work on teenage childbearing provides a useful beginning for a more comprehensive look at maternal age, one that goes beyond the problem of teenage pregnancy to the other end of the spectrum.

RESEARCH OBJECTIVES

In this paper we will take a look at the implications of delayed childbearing for women and their families several years after the women have begun childbearing. In particular, we will examine the psychological well-being of the mothers, their attitudes towards motherhood, and their relations with their children. We will also take a look at the cognitive and emotional development of their children who are in middle childhood.

Possible Differences between Older and Younger Childbearers

In the Introduction, we speculated on possible implications of delayed childbearing for family life. By looking at the consequences of delayed childbearing, we are hypothesizing that women who start childbearing at older and younger ages are different from each other. Before continuing, we need to organize our earlier loose assertions into a set of hypotheses and add other posssibilities that could differentiate older and younger childbearers. The following list is not meant to be

comprehensive, however, only suggestive. And we will not attempt to test all of these hypotheses in this paper, but, the list will provide a wider base from which to look at what may underly age at first birth.

1. Demographic Characteristics of Women

The research cited above suggests that women who start childbearing at younger and older ages tend to differ in basic socioeconomic characteristics such as income, education, and race, all of which affect the environment children are raised in. For these reasons, older childbearers and their families are expected to be better off than younger childbearers.

2. Physical Stamina and Energy

The physiological process of aging may mean that women who are older at first birth tire more easily or are in other ways physically less able to cope with the demands of parenthood. They may supervise their children less well and be too tired for trips or to participate in outdoor activities, like playing sports, with their children.

3. Psychological Components of Aging

It is often asserted that older parents are more mature than teenage parents and that maturity is a necessary quality for good parenting. But, there are other psychological changes that accompany aging beyond becoming more mature. Older parents may be more set in their ways.

4. Values and Attitudes

Norval Glenn and other researchers have looked at changes in values and attitudes with age, particularly the tendency of older voters to be more conservative than younger ones. If values and attitudes do change with age, then the content of what a mother wants to transmit to her children could be different depending on her age at their birth. Furthermore, if values and attitudes become more stable over time, then older childbearers might be more consistent and coherent in their enforcement and articulation of them. Consistency is generally assumed to be important in the socialization process, but Goode (1982:82) has noted that "one inconsistency, being rewarded much but not all of the time, may be especially effective

in creating a deeply held belief or attitude."
Additionally, large differences in age between parents and children could lead to a large gap in their world-views, values, and attitudes.

5. Commitment to Parenthood

There is some indication in the research that women undergo a developmental change around age thirty (Stewart, 1977). Those who already have families become more interested in activities outside their homes, while those who haven't yet begun families begin to express more interest in familial roles. There may be differences in the commitment to parental responsibilities depending on when women start childbearing. To look at this possibility, however, we would need to consider other questions. For example, how conscious a decision is family building in the teens and early twenties? Do women start families then because they really want them or do they start them because that is when they believe they are expected to have families? Have women who started families later thought more about what they are doing? If they have thought more about their decision, does that in any way influence how they raise their children?

6. Types and Variety of Life Experiences

Women who are older at first birth have had more time to accumulate a variety of experiences which may have given them additional emotional strengths, perspective on life, and added to their confidence. They may be more patient and better able to cope with unexpected events. On the other hand, they may be used to a certain amount of control in their lives and thus find the uncertainties of parenthood difficult to manage.

7. Selection Process by Age at First Birth

Among whites, delayed childbearing may reflect delayed marriage which may indicate a lack of success in the marriage market for reasons that also augur poorly for child outcomes. Or, it may reflect a voluntary deferrment of childbearing until other goals, such as obtaining an advanced degree, are met. These different paths which lead to the same result of a delayed first birth may have very different implications for family life.

8. Age at First Birth Influences A Woman's Future Life Course

When in a woman's life she has children is associated with other aspects of her life such as marriage,

marital stability, whether she participates in the labor force and, if she is in the labor force, what type of occupation she is likely to have. It also is associated with her level of completed education and, perhaps, whether she lives nearby her own parents. All of these, in turn, affect the family environment in which she raises her children.

9. Societal Supports and Sanctions

Society may treat women differently depending on their age at first birth. Perhaps there are fewer societal supports and more expectations when a woman is older at first birth. Certainly, most people would assume that the older woman knows what she is doing and is aware of what problems may lie ahead.

10. Availability of Familial Support

Older and younger childbearers may differ in the access they have to support from family members. Older childbearers, partly because they may have married later and moved more, may not live as close to their own parents as younger childbearers. Possibly, their own parents are dead or are no longer capable of helping with day to day childrearing tasks. On the other hand, their parents might be better able to provide financial support if that is necessary than the parents of younger childbearers.

11. Peer Pressure and Women's Expectations

Women who start childbearing at very young ages or at older ages may feel "off-schedule" compared to their friends or to what they themselves had visualized. If they do feel "off-schedule" that could contribute to stress in their lives.

12. Aspirations and Expectations for Their Children

Older childbearers may have higher expectations for their children's behavior and achievements. They may expect perfection in manners, cleanliness, and school success. Thus they may impose more boundaries on their children because they have a clearer idea of what they consider appropriate behavior. And, they may be more forceful in pushing their children towards their own ideals than younger childbearers.

13. Children's Awareness of Parental Age

Perhaps children are sensitive to any differences in their parents compared to the parents of their friends

or what they observe around them. They might be aware that their parents are a little older or younger than the parents of their friends. Or, if age is not of any direct relevance to them, they may be aware of differences between their parents and other parents that associated with the age at which their parents started childbearing. For example, if their parents are less willing to participate in school activities or extracurricular activies such as girl or boy scouts or sports. Even the type of interests that their parents have could set them apart.

METHODS

The Sample

In 1976, the Foundation for Child Development sponsored a major data collection effort, the National Survey of Children (NSC). The primary goals of the survey were to (1) assess the physical, social, and pyschological well-being of American children; (2) develop a national profile of the way children live and the care they receive; (3) permit analysis of the relationships between the conditions of children's lives and measures of child development and well-being; and (4) replicate items from previous national studies of children and parents for time-trend analyses. The study population was defined as children living in households in the 48 contiguous states who were ages 7-11 in 1976. The sample was a multi-stage stratified probability sample of households containing at least one child in the appropriate age range. The sampling produced 2,193 eligible households. From these households, data were gathered on 2,301 children in 1,747 households for a completion rate of 80 percent.

Interviews were conducted with as many as two eligible children, selected at random, and the parent most capable of providing information about the child, usually the mother. Black households were oversampled to produce interviews with approximately 500 black children. Weights were developed to adjust for this oversampling, and to correct for minor differences between census and sample figures for age, sex, race of child, and residential location. A follow-up survey of schools attended by the children in the study was carried out in the spring of 1977. School information was obtained on 1,682 children.

The NSC is an exceptionally rich data set containing detailed questions on the adult respondent's marital history, education, and work experience. Questions were also asked about her' health, mental well-being, and childrearing strategies. If she was married, she was questioned about the quality of that relationship. She was also asked questions about the behavior, school performance, physical health, friends, habits, and general well-being of those children who were in the sample. The children were asked many of the same items so it is possible to compare responses of mothers and their children.

^{*}In the following discussion we shall refer to the adult respondent as she because, as mentioned above, in all but a few cases the respondent was the biological mother.

Drawbacks of the Sample for Our Purposes

Although the NSC is an excellent data set for exploring relations among mothers and children and their respective senses of well-being, it has a few drawbacks for studying consequences of the current trend towards delayed childbearing or maternal age at first birth. First, as Table 1 shows, the women who were 25 or older at first birth were all born before 1945. The women who are now delaying childbearing were born during the height of the babyboom in the late forties and fifties. It is possible that the women who were older at first birth in the NSC were in some way different from those women now postponing having children. For example, there were certainly fewer women of their generation beginning childbearing at these older ages so they might have felt more isolated or out-of-step with their friends than women who are currently delaying childbearing. Thus, if we do find differences among older and younger childbearers we will have to be cautious in how we interpret the results. If we hypothesize lack of peer support (hypotheses #11) as an explanation, that may no longer be true.

Second, precisely because there were fewer women beginning childbearing at older ages, the number of women in our sample who were 25 or older at first birth is not

very large: 197 white women and 42 black women. And only a small proportion of these women were thirty or older at first birth. If we expect women who start childbearing in their late thirties to be very different from women who start in their late twenties, then the NSC won't be very useful for distinguishing these two groups.

Finally, because there are such large differences between blacks and whites and the way they are treated in the United States, we do not want to analyze the two groups together. The number of black women, however, is too small for a separate analysis. For this reason, we examine only the experiences of white women and their children.

The Analysis Plan

Because we are exploring a largely uncharted area, in this paper we will restrict ourselves to analyses of bivariate relations. We will look for associations between maternal age at first birth and measures of how women and children are functioning. Later papers will use multivariate techniques to examine possible interactions between mothers age at first birth and other variables. This paper will point to the most fruitful paths to follow.

In this paper, we define delayed childbearers as women who begin childbearing at age twenty-five or older. We selected age twenty-five as the cut-off because in the

United States during this century women have typically begun childbearing in their early twenties. In this way, we can see the implications of relatively small delays in the timing of first birth for later family life. We will not group all women over twenty-five together, though, and we will present data on teenagers and women who start childbearing in their early twenties. Thus, we will be able to look at differences among older childbearers and between younger and older childbearers.

RESULTS

Socioeconomic Indicators and Women's Ages at First Birth

As noted earlier, women who start childbearing at older ages tend to be much better off socioeconomically than women who start childbearing in their teenage years. But how do they compare to women in their early twenties? Table 2 presents some of the socioeconomic characteristics of women in the NSC by their ages at first birth. Women who are twenty-five and older at first birth are more likely to come from higher income families, to have completed more years of schooling, and to have held professional jobs than are younger women of any age. Reflecting the tendency of women to marry men of the same or higher education, the most educated parent in the household is also higher in families of delayed childbearers.

The high categories on income and both measures of education exhibit a j-shaped pattern across the ages with women 17 and younger and 18 thru 20 at first birth almost as likely to achieve a college degree or to be in families earning \$20,000 or more. After age twenty, there is an approximately linear increase in the proportion of women completing a college degree or living in families earning \$20,000 or more with age at first birth. The pattern is similar for the most educated parent in the household. Both measures of education show a substantial increase in the proportion completing a college degree between those who are 21-22 at first birth and those who are 23-24. This discontinuity is most likely linked to the fact that the typical age for completing college is 22. Thus women who have a first birth at that age or younger are unlikely to have completed college at the time of the birth, although they could finish the degree later. An important observation arises from this discontinuity. A birth is just one of several choices that a woman has. Her age at first birth indicates to a certain extent her priorities. From these simple crosstabulations, however, we can't tell whether women left school before they became pregnant or whether they left school because they became pregnant.

These three measures of socioeconomic status reveal another important point: the delayed childbearers are not an homogeneous group. Only a third of the women

twenty-five and older come from families with incomes of \$20,000 or more. That leaves two out of three of the women twenty-five and older in the NSC in families with incomes of less than \$20,000. Although two out of five of these women are in the mid-income ranges, slightly more than one out of five are in the low-income groups. Similarly with educational attainment: although women twenty-five and older are more likely to have completed college than younger women, a substantial proportion of them have less than a high-school education.

The diversity of these women makes any tendency towards wholesale generalizations about delayed childbearers inappropriate. An important question that can't be addressed in this paper is, what causes women to time their first birth when they do? These women are obviously not randomly distributed across the socioeconomic groups (hypothesis #1 is a statement of fact then) and they may well be sorting themselves along other dimensions as well. The older childbearers are perhaps more diverse because that group consists of at least two types of women. First, there are those who have deliberately chosen to put off childbearing until a later age. Then, there are the women who have been unable for some reason to have children earlier. As suggested in hypothesis #7 (selection process) it is not unlikely that the consequences of delayed childbearing will be different for these two groups

of women. Thus, the question of the consequences of delayed childbearing goes beyond a comparison of older and younger women to an understanding of differences among women of the same age.

Returning to Table 2, we can see some other hints of differences among the older childbearers and between older and younger childbearers. Although women twenty-five and older are more likely than younger women to have ever held a professional occupation, there is a slight decrease in the proportion having done so between the age groups 25-27 and 28+. This decrease may be partly due to the open-ended nature of the last category so that it is in effect a residual category. Or it might reflect cohort differences in the availability of such positions for women.

In spite of the relatively higher incomes and educations of older childbearers, women 23-24 at first birth are more likely than any other childbearers to describe their neighborhood as a very good or excellent place to raise children. Women 28+ at first birth are no more likely than 18-20 year olds and are slightly less likely than 21-22 year olds at first birth to report favorably on their neighborhood. To understand the reasons for the differences in reporting and the implications of the differences for children, it would be necessary to explore where these women are living. Perhaps the 23-24 year olds are more likely to be living in suburban

neighborhoods where other children are present, whereas older childbearers are living in more adult-oriented communities. Also, if women of different types tend to have births at different times, these responses may reflect their own values rather than actual differences in the neighborhoods.

There is one last item of interest in Table 2 — the proportion of women reporting 3 or more moves in the last five years. Although this measure is not an indicator of socioeconomic status, it clearly shows that increasing ages at first birth are associated with fewer moves, at least while the families have some young children. The decrease in mobility implies an increase in the stability of surroundings for children of older childbearers.

Let us now turn to a totally unexplored area. How are these women doing several years after they have initiated childbearing? Will we find differences in their physical and emotional well-being by their age at first birth?

Age at First Birth and the Physical and Emotional Well-being of Women at the Time of the Interview

Age at first birth can have long-term consequences for the mother. As discussed above, women who start childbearing in their teenage years tend to have higher rates of marital disruption and larger completed family sizes than women who start childbearing at older ages. A woman with a very early or a very late birth might also be

at risk of more health problems than women who start childbearing during the more typical twenties. And we know that these women differ in basic socioeconomic measures. Quite possibly, then, early or late childbearers may differ from other women and from each other in how they feel about their lives after their children have reached middle childhood.

Table 3 shows how women in the NSC responded to questions on their current health, marital happiness, and their life in general by their age at first birth. These women do differ from each other, but the patterns are not as clear as those found in the socioeconomic measures. It is interesting to note that there is no significant difference among the women in how they describe their marriage. That measure is dichotomous: those saying their current marriage is very happy versus everyone else, including those not currently married. In spite of the tendency for very young childbearers to experience more marital disruption, they are no less likely to be happy in their current marriages than women who waited a little longer to have children. This measure, however, gives no indication of the family structure (intact, stepfamily, or mother alone) that the child is living in. We know from the research that marital disruption has a variety of consequences for children (Furstenberg et al, 1983; Peterson and Zill, 1984; Zill and Peterson, 1983;

Wallerstein and Kelly, 1980). Thus even if the women do not differ in marital happiness by their age at first birth, outcomes for their children may be different.

In terms of their current health, the women 23-24 years old at first birth were most likely to describe themselves as in very good or excellent health. The overall pattern is an inverted u-shape with an increase in reporting of good health with age at first birth to age 23-24. followed by a decrease at the older ages. Older women, of course, have lived longer and have had more time to develop the ailments that come with age. It is also possible that women who experienced difficulties bearing children earlier and were delayed childbearers only because of their difficulties were in poorer health to begin with than other childbearers. This likelihood might partly explain the rather sharp drop in reporting of good health among the women 28 years and older at first birth. The very youngest group of women, however, are the least likely to report their health as very good or excellent. Thus, to some extent this report may measure the women's current psychological state.

Looking at the proportion of women who say they are sad fairly or very often, we do see that the youngest childbearers are the most likely to report being sad. This result may, of course, be related to their report of poor health. We cannot disentangle the direction of effects

with simple crosstabulations. As age at first birth increases, however, women are less likely to report frequent saddness until the oldest age group is reached when there is again a slight increase.

Another dimension of psychological distress is how often a women is tense. The women 17 and younger at first birth are the ones most likely to report that they are tense fairly or very often. The women 23 to 24 at first birth are least likely to say that they are often tense. There seems to be very little difference in the responses of the delayed childbearers and the women 18-22 at first birth on this question. Given the stereotype of the delayed childbearer as a career woman trying to juggle both work and family, it is interesting that there are not sharp differences in their reports of tenseness. Of course, as pointed out earlier, the delayed childbearers in the NSC may not be representative of today's delayed childbearers. Even though the delayed childbearers were more likely to have ever held a professional occupation, we have not looked at how many of them are currently employed.

Another way to look at the complexity in women's lives is to see how often they feel rushed. There were no statistically significant differences (using an ordinal test, tau C) in women's responses to this question by their ages at first birth. However, a chi-square test on the responses was significant at the .05 level. Women 28 and

older at first birth were more likely than other women to state that they always feel rushed. Women 25-27, on the other hand, were among the least likely to give this response.

When we approach the question of availability of time from another perspective — how often the women have time on their hands — we find statistically significant differences when tested ordinally and nominally. There is a nearly linear decline with age at first birth in the proportion of women who say that they have time on their hands. Thus although few women regardless of their age at first birth feel rushed all the time, the older a women is at first birth the less likely she is to have time on her hands.

When women were asked to give an overall rating to their lives, women 23-24 at first birth were most likely to describe their lives as tops or very good. Generally the pattern of responses to this question was again an inverted u-shape with inceases in positive responses to age 23-24 followed by slight declines at the older ages. The delayed childbearers, however, were about as likely as women 18-22 at first birth to describe their lives as tops or very good. Once again, women who were 17 or younger at first birth were the least likely to give a favorable response. Looking at the proportion of women who gave a

neutral response² to the question on how their lives were going, women 28 and older at first birth were much more likely than other childbearers to respond in this manner.

Although we have noted several differences among women by when they began childbearing, we cannot be certain to what extent these differences are attributable directly or indirectly to their ages at first birth and to what extent they are due to their current ages. Returning briefly to Table 1, we can see that the younger ages at first birth are predominantly composed of the younger birth cohorts. In order to be able to disentangle which of the observed effects are due to age at first birth and which are due to a woman's current age, we would want to look at women who are currently the same age, but who started childbearing at different ages. We could, for example, look at the 1935-39 cohort. By doing this, however, we run into a problem with small cell sizes.

Keeping in mind the caveat that we may be confounding current age with age at first birth, we have nevertheless seen differences in women's current physical and emotional well-being and in their socioeconomic characteristics by their ages at first birth. Will these differences carry over into their attitudes about childrearing and

They were more likely to say their lives were more positive than negative or were about even between the two.

motherhood?

<u>Women's Attitudes Towards Childrearing by</u> Their Age at First Birth

Some clues about how mothers who start childbearing at different ages feel about motherhood can be gleaned from questions such as: Would they have children again? Has having children made them a better person? How would they rate themselves as parents? How often are they worn-out from the burdens of raising a family? Women's responses to these and other questions by their ages at first birth are contained in Table 4.

Overall, most women say that they would have children again and that they feel strongly about it. There is a tendency for very young and older mothers to say that they would not have children again, but the actual proportion of women who give this response is quite small. It is surprising, then, that very few parents rate themselves as excellent. A relatively large proportion of the women, however, rate themselves as only fair to poor parents. The group that stands out in all these responses are the women who were 17 and younger at first birth. Delayed childbearers are not very different from moderate aged childbearers.

Many people wonder whether women who wait until they are older at first birth will tire more easily from the strains of childrearing. Although women 25 and older at

first birth did not rate their health as highly as women 23-24, they are slightly less likely to say that they are mostly or always worn-out from the burdens of raising children. The pattern of responses across the age groups, however, is not statistically significant.

Except for very young teenage childbearers, a woman's age at first birth does not seem to influence the way she feels about childrearing, even several years after she began. It is possible, however, that an outside observer would note differences that a mother wouldn't recognize herself.

Table 5 contains the interviewers evaluations of the parent respondent and their description of the general atmosphere of the household. There was a very slight tendency for interviewers to more often describe women 23 and older at first birth as showing pride and pleasure in their children. That response was a little more marked when calculated using children as the base. Interviewers were also more likely to describe the households of delayed childbearers as quiet, whereas younger mothers' households were more likely to be described as somewhat or very noisy and chaotic. Older childbearers were also less likely to have yelled at their children during the interview. These results tell us that although the women in general have similar attitudes towards motherhood, that their households and parenting styles may be different.

But when we look at women's responses on their parenting styles -- whether they are steady or changeable in dealing with their children -- there are no significant differences by their ages at first birth (Table 6). In fact, most women say that the subject child was no trouble to bring up and that they are very close to the subject child. Although the differences are not statistically significant, women 28 and older at first birth are the most likely to report themselves as very close to the subject child. And children of women 28 and older at first birth are more likely to say that their mothers spend enough time with them than children of other childbearers. This result fits in well with a study by Hill and Stafford (1980) that showed that more highly educated women spend more time on child care than do less educated women: "Even for college-educated women who work more than 20 hours a week in the labor market, the per child levels of care time and incremental housework remain at reasonably high levels. If necessary, women who went to college will give up sleep in order to provide child care" (Hill and Stafford, 1980:220). As we saw earlier, the older women tend to have the highest levels of education.

So far we have seen that women do differ in socioeconomic characteristics by their ages at first birth and that they also differ along some measures of physical and emotional well-being. In general, however, the women

tend to be quite similar (excluding teenagers) in their attitudes towards motherhood and in their closeness to their children. Will any of the differences we noted be apparent when we look at their children?

Child Outcomes by Mother's Age at First Birth

Table 7 contains measures of children's cognitive, physical, social and emotional well-being by their mother's age at first birth. A quick glance at the table shows that there are differences for the children on the cognitive measures and on the reports of their health, but that there are no statistically significant effects of their mother's age at first birth on their social and emotional adjustment. These results square well with the research on children of teenage parents reviewed earlier. In general, children seem to be quite resilient. They survive and do well under a wide variety of conditions.

School and academic achievement, though, are quite important for a child's future. Thus differences in this area can have a long lasting effect on the child's life. Generally, children of older childbearers do better in school. On the vocabulary score, however, there is a dip in the generally increasing score with age of mother at first birth: Children of women 25-27 at first birth are a little less likely than children of women 23-24 at first birth to score 60 or higher on the Peabody Picture

Vocabulary Test. They are also a little more likely to score higher on the poor concentration scale than the children of women 23-24. The slight differences may not be significant and they could be due to sampling variability. Certainly, the generally higher educations of the older mothers and their quieter households would provide a more amenable atmosphere for academic success.

SUMMARY AND CONCLUSIONS

The most important conclusion that emerges from this preliminary analysis is that delayed childbearers are not homogeneous. Their heterogenity, however, does not manifest itself in predictable ways. In terms of socioeconomic measures, delayed childbearers tend to fall into the two extreme categories more often than other childbearers. On the other measures they sometimes respond as if the sterotype of today's delayed childbearer held (e.g., they rarely have time on hands, they don't worry about income, they are not worn-out from raising a family). And sometimes they divide as one might expect from the responses on the socioeconomic measures (e.g., the majority thought life was very good, while a large fraction saw their lives in neutral terms). Many of the measures presented showed a u-shape or inverted u-shape pattern, suggesting two possibilities. Older childbearers might face more physical, emotional, and psycholgical strain than

other childbearers. Or the pattern was caused by the heterogeneity of the older childbearers.

A second important point that can be drawn from this analysis is that mothers exhibit more differences by their age at first birth than their children do. This may indicate children's resiliency. Or possibly mothers shield their children from the stresses and strains that they feel.

Future Research

To understand the consequences of delayed childbearing for family life, we need to look more closely at the women who delay childbearing. Specifically, because the women are diverse, we need to divide them into two more homogeneous groups. Once we have more uniform groups we can then see what consequences there are depending upon the route that led to the delayed birth.

TABLE 1: NUMBER OF UNWEIGHTED CASES (PARENT-BASED) IN AGE AT FIRST BIRTH
AND BIRTH COHORT CATEGORIES BY RACE

WHITES	Age at Birth of First Child										
Birth Cohort	LE 17	18-20	21-22	23-24	<u>25</u>	<u>26</u>	<u>27</u>	28	<u>29</u>	30+	TOTAL
⟨1935	11	50	36	25	11	6	11	9	5	22	186
1935-39	16	58	49	36	8	14	9	15	14	9	228
1940-44	27	128	85	89	28	22	10	3	1	-	393
1945-49	46	172	87	17	-	-	-	-	-	-	322
1950+	31	23	-	-	-	-	-	-	-	-	54
TOTAL											
Parent-based	131	431	257	167	47	42	30	27	20	31	1,183
(Child-based ¹	159	563	325	221	63	57	35	36	26	37	1,335)
BLACKS											
Birth Cohort	<17	17-18	19-20	21-22	23-2	4	25-	27	28+		TOTAL
					_		_				
<1935	7	3	16	9	5		7		15		62
1935-39	10 7	12	13	10	10 5		7		6		68 70
1940-44 1945-49	21	18 40	19 20	14 12	5		-		_		98
1950+	30	15	1	-	7				_		46
13301	30	10	1								70
TOTAL											
Parent-based	75	88	69	45	28		21		21		344
(Child-based ¹	114	134	97	56	34		32		31		478)

^{&#}x27;The number of children in the National Survey of Children according to their mother's age at first birth.

TABLE 2
MEASURES OF SOCIOECONOMIC STATUS BY
AGE AT FIRST BIRTH*

	10-17	<u>18-20</u> (Perc	<u>21-22</u> ent Giving	23-24 Positive	25-27 Response)	<u>28+</u>	(Signif/tau C)	
Mother's Highest Grade								
Less than High School	71.7	35.1	15.9	15.4	16.0	22.1	(.0000/.3313)	
College Degree or More	1.6	1.2	8.0	17.2	24.5	35.9		
Most Educated Parent								
Less than High School	30.2	19.6	7.8	11.5	10.3	10.0	(.0000/.2639)	
College Degree or More	6.5	6.4	17.4	30.9	42.2	45.0		
Family Income Before Taxes								
Less than \$10,000	28.2	30.7	21.2	17.2	22.4	21.3	(.0000/.1193)	
\$10,000-\$19,999	52.1	50.9	53.5	55.8	44.4	43.4		
\$20,000+	19.7	18.4	25.3	27.0	33.2	35.3		
Mother's Occupation (Ever)								
Professional	11.2	10.7	15.6	26.3	32.4	28.4	(.0000/2263)	
Sales/Clerical	22.7	33.9	50.8	45.4	35.9	41.5		
Neighborhood								
Very Good/Excellent	54.6	62.8	63.1	74.4	68.9	62.8	(.001/0753)	
Fair to Poor	23.2	17.2	15.3	8.3	13.8	11.8		
3+ Moves in Last Five Years	22.8	22.7	15.0	14.7	12.2	6.4	(.0000/1136)	

Applies only to white women living in the continental United States in 1976 and who had at least one child aged 6-11 at that time.

TABLE 3
MEASURES OF WOMEN'S PHYSICAL AND EMOTIONAL STATE
BY THEIR AGE AT FIRST BIRTH*

	10-17	<u>18-20</u> (Percen	t Giving P	23-24 ositive Re	<u>25-27</u> sponse)	28+	(Signif/tau C)
Maternal Health Very Good/Excellent	56.6	63.8	72.2	79.7	69.5	57.0	(.0003/0810)
Very Happy Marriage	57.6	59.7	67.8	64.8	57.2	58.7	(not sig/025)
Tense fairly or very often	41.1	31.9	34.4	21.6	32.3	29.1	(.022/.0499)
Sad fairly or very often	19.2	10.8	8.6	6.4	5.2	6.3	(.008/.00576)
Always feel rushed Never feel rushed	22.0 17.6	24.5 17.9	27.9 14.1	18.7 12.5	19.7 13.0	31.3	(not sig/0151)
Often/sometimes have time on hands Almost never/never have time on hands	27.3 72.7	28.1 71.9	23.9 76.1	22.5 77.5	18.5 81.6	14.4 85.6	(.001/0657)
Always worry income is not enough	19.8	18.6	18.1	15.4	14.9	13.3	(.0003/.0819)
Life is Tops/very good Okay Not very good/terrible	38.1 14.7 1.6	48.7 13.4 3.8	53.1 12.4 3.4	59.2 9.5 0.9	51.8 5.0 2.3	51.6 21.0 0.0	(.005/0573)

^{*}Applies only to white women living in the continental United States in 1976 and who had at least one child aged 6-11 at that time.

TABLE 4
WOMEN'S ATTITUDES TOWARDS CHILDREARING BY THEIR AGE AT FIRST BIRTH¹

	10-17	<u>18-20</u> (Percen	21-22 t Giving P	23-24 ositive Re	25-27 (sponse)	<u>28+</u>	(Signif/tau C)	
Worn-out from raising family Mostly or always	6.2	8.1	7.0	5.5	4.7	2.6	(not sig/0203)	
Rarely/never	53.5	45.4	41.4	43.8	43.9	46.9	(106 319/ 10204/	
Rate self as parent								
Excellent	7.9	6.9	11.6	11.2	5.6	9.7	(.001/0657)	
Fair/poor	31.5	32.0	25.4	18.3	22.7	21.2		
How much can parents help their children live good lives								
A great deal	50.1	50.1	52.5	57.9	47.0	64.2	(.056/0363)	
Children made me a better person	90.2	92.3	90.5	94.9	93.0	95.6	(not sig/0229)	
Often feel might lose control and hurt my children Never feel might lose control and	2.6	0.7	0.8	1.5	0.6	3.4	(not sig/0183)	
hurt my children	58.9	58.4	50.6	59.0	50.0	61.1		
Have Children Again	77.0	86.2	04.0	88.1	88.4	88.8	(.016/0329)	
Yes and feel strongly No and feel strongly	77.3 7.4	5.0	84.9	1.8	4.9	5.4	(.010/0323)	
						-7.6		

Applies only to white women living in the continental United States in 1976 and who had at least one child aged 6-11 at that time.

TABLE 5 .
INTERVIEWER EVALUATION OF PARENT RESPONDENT AND HOUSEHOLD*

	10-17	<u>18-20</u> (Perce	<u>21-22</u> nt Giving A	<u>23-24</u> Positive R	<u>25-27</u> esponse)	28+	(Signif/tau C)
(Percents Based on Number of Mothers)							
General Atmosphere of Household Somewhat or Very Noisy/Chaotic	42.2	43.9	40.9	37.8	32.4	32.9	(.005/.0593)
Respondent Preoccupied from Time to Time	5.3	8.0	4.5	2.3	5.0	12.3	(not sig/.0111)
Respondent Shouted or Yelled at Her Children	5.0	4.8	1.3	3.3	2.3	1.6	(.02/.0262)
Respondent Freq Turned Attention to Herself when Talking of Children	7.3	4.3	3.6	6.8	2.1	7.0	(not sig/.0034)
Respondent Showed Warmth in Tone when Talking of her Children	86.9	83.6	88.0	88.3	86.7	86.7	(not sig/.0189)
Respondent Showed Pride and Pleasure in her Children	86.9	89.3	89.3	93.7	92.2	91.6	(.046/02777)
(Percents Based on Number of Children	in the NSC)					
Respondent Showed Warmth in Tone when Talking of her Children	85.2	82.9	89.7	86.9	88.2	87.5	(.027/0413)
Respondent Showed Pride and Pleasure in her Children	85.3	88.3	88.9	93.7	92.9	92.3	(.002/0521)
Respondent Dwelt on Problems with her Children	10.0	7.8	5.8	4.8	1.4	4.9	(.001/.0470)

^{*}Applies to white women living in the continental United States in 1976 who had at least one child aged 6-11 at that time.

TABLE 6
PARENT-CHILD RELATIONS*

	10-17	18-20 (Perce	21-22 ent Giving	23-24 Positive R	<u>25-27</u> (esponse)	28+	(Signif/tau C)			
Parent Responses										
Handling Children										
Very steady	26.1	15.7	19.2	17.4	13.3	17.9	(not sig/015)			
Somewhat or Very Changeable	29.4	32.5	34.8	24.7	24.9	24.8				
Trouble to Bring up Subject Child										
None	53.5	54.0	51.4	51.5	52.3	50.8	(not sig/.0120)			
Quite a bit	6.3	6.2	7.8	4.6	6.6	5.2				
44146 4 514	0.0									
Respondent is Very Close to										
Subject Child	79.7	73.6	72.7	71.7	71.1	87.2	(not sig/.0023)			
Child Response										
Mother Spends Enough Time with										
Subject Child	67.7	64.7	64.4	65.8	60.6	72.2	(not sig/.0042)			
andres ours	4/1/	4117	WILL.	0010	0010	7212	Signious			

Applies to white children who were aged 6-11 in 1976 and who were living with their biological mothers in the continental United States.

TABLE 7
MEASURES OF CHILDREN'S COGNITIVE, PHYSICAL, SOCIAL, AND EMOTIONAL WELL-BEING
BY THEIR MOTHER'S AGE AT FIRST BIRTH*

	10-17	18-20 (Per	<u>21-22</u> cent Givin	<u>23-24</u> g Positive	25-27 Response)	28+	(Signif/tau C)
Cognitive Measures Scored 60+ on Peabody Picture Vocabulary Test	15.3	12.9	18.7	28.5	24.1	35.7	(.0000/,0158)
Behind Modal Grade	25.4	19.3	18.6	13.8	12.4	9.6	(.0000/-,0730)
Scores High on Confusion/ Poor Concentration Scale	16.0	16.0	15.3	10.1	11.2	8.6	(.0000/0753)
Physical Health Child's Present Health is Excellent	41.8	49.2	58.6	62.2	59.9	52.9	(.0000/0868)
Social Adjustment Scores High on Scale Measuring Lying, Destructiveness, and Fighting	15.1	13.7	15.2	12.8	12.8	4.5	(not sig0175)
Scores High on Anti-Social Scale	7.2	7.1	6.9	4.0	4.6	1.5	(not sig/011)
Emotional Adjustment Needs/Gotten Psychiatric Help	12.0	11.7	17.5	7.6	6.7	15.0	(not sig/013)
Child wishes he/she were someone else	29.4	41.2	34.0	31.4	41.7	32.1	(not sig/.0162)
Child Says Family is Happy	68.2	71.7	76.1	74.3	72.0	71.4	(not sig/018)

^{*}Applies to white children who were aged 6-11 in 1976 and who were living with their biological mothers in the continental United States.

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