Social fathers in Fragile Families: Involvement and Associations with Child Wellbeing

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Due to recent trends in marriage, childbearing, and cohabitation, fewer and fewer children are growing up in "traditional," two married, biological parent families. Increasingly, children spend at least part of their childhood living with single parents and/or parents and social parents (cohabiting and married stepparents). These changes, and any effects that they have on the children who experience them, are important for sociologists' theoretical understanding of family relationships and dynamics as well as for our understanding of child wellbeing in an increasingly large number of non-traditional families.

Prior research about the involvement of stepfathers with their partners' children has largely found that such men tend to be less involved with their co-resident children than are resident biological fathers. This body of research also generally finds that the characteristics of these men (education, employment, etc) tend to be less good than those of the children's biological fathers. Research currently underway by this author and colleagues[1] compares the characteristics of mothers' new partners with those of children's biological fathers in a sample of largely minority women with young children born outside of marriage. This research, in contrast with many previous studies focused on between- rather than within-mother differences, finds that the characteristics of mothers' new partners are often better than those of the children's biological fathers. The current paper extends this research to investigate if and how involvement by residential social fathers differs from that of residential biological fathers. I then ask if and how the presence and involvement of social and biological fathers is associated with differences in behavioral and health outcomes for their young children. As our previous findings regarding social fathers contradict what we might expect from previous literature in this area, it seems likely that the present study's examination of patterns of involvement by social fathers in these Fragile Families might also find results that differ from those of previous studies.

Data and Methods

Data for this study come from the Fragile Families and Child Wellbeing Study, a nationally-representative, longitudinal study which follows approximately 5,000 newborns (3,700 born to unmarried parents) through their early childhood years. Information is taken from the baseline, one-year and three-year core interviews with mothers as well as the three-year in-home observation by interviewers. Because few children born to married parents are likely to have social fathers by age 3, the analyses are limited to young children who were born to unmarried parents. Results from this study are generalizable to all young children in large cities born to unmarried parents between 1998 and 2000. The sample for analysis includes 3,086 young children born to unmarried parents about whom we have information from at least their mothers' interviews at the three-year wave of data collection and who lived with their mothers at least half of the time at the three-year interview.

Methods of Analysis

The first section of this paper documents the living arrangements of three-year old children born to unwed mothers and compares mean levels of engagement by residential social and biological fathers for a variety of measures. I next present mean scores for the various child behavior and health outcomes for children living in each type of father family and use OLS regressions to predict these outcomes based on the presence and type of resident father after controlling for a variety of maternal and child characteristics. Finally, I limit the sample to children who reside with their mothers and a social or biological father at 3 years, and again use OLS regressions to predict child outcomes based on levels of father involvement. I also use interaction terms to test the hypothesis that the relationship between resident father involvement and child wellbeing might differ for children living with biological and social fathers. In addition to controlling for maternal and child characteristics, these models also control for socio-demographic characteristics of the child's resident father.

[1] Bzostek, Carlson and McLanahan. 2006. "Does Mother Know Best? A Comparison of Biological & Social Fathers after a Nonmarital Birth." Under review at *Demography*.

Preliminary Results

Involvement by Resident Biological and Social Fathers

Table 1 compares the average number of days in a typical week that resident social and biological fathers are reported by mothers to engage in various activities with the mothers' children. These estimates are weighted to be nationally representative of nonmarital births in large urban areas. Resident biological fathers, on average, display more warmth and affection toward their residential children than do social fathers. Resident social fathers, however, appear to spend more time engaging in indoor play and cognitively stimulating activities (reading and telling stories) with their resident children. Levels of involvement by resident social and biological fathers are equivalent for several other measures. Breaking residential social and biological fathers down into married and cohabiting subgroups does not substantially change these conclusions. While the comparisons found to be statistically significant vary slightly, the direction of differences in most cases is the same whether we compare married or cohabiting social and biological fathers.

Table 1. Mean number of days per week resident fathers engage in activities with focal child, 3 years (mother's report)

	All Resident Fathers		Married Fathers		Cohabiting Fathers	
	Social	Biological	Social	Biological	Social	Biological
Weighted N	**235**	**785**	**42**	**291**	**189**	**494**
Hugs child	6.22 **	6.68	6.50	6.75	6.16 **	6.63
Tells child he loves him/her	5.92 **	6.81	6.53	6.86	5.82 **	6.77
Tells child he appreciates something child did	5.61	5.88	6.43	6.00	5.48 ^	5.81
Sings songs with child	3.61	3.66	4.37	4.06	3.41	3.42
Tells stories to child	4.00 *	3.35	4.53	3.50	3.82 ^	3.26
Reads stories to child	4.08 **	3.22	4.15 *	3.46	3.98 *	3.07
Plays imaginary games with child	4.32	4.04	4.97	4.43	4.17	3.81
Plays inside with toys like blocks/legos	4.83 *	4.70	4.86 *	4.89	4.76	4.58
Average[1]	4.83	4.79	5.29 ^	4.99	4.70	4.67

** p<0.01; * p<0.05; ^ p<0.10 two tailed

Note: The sample is limited to mothers with unmarried births who live with their child at least half of the time. All sample sizes and mean values are weighted. T-tests are based on unweighted samples.

Associations between Resident Social/Biological Father Presence and Child Well-Being

Results from bivariate analyses (not shown here) demonstrate that before controlling for additional factors, children living with social fathers (particularly cohabiting social fathers) exhibit higher levels of aggressive behavior than do those living with both of their biological parents. Children living with single mothers display marginally worse behaviors than do those living with both of their biological parents, and worse health than children living with either a social or a biological father. There are no significant differences by parents' marital status for children living with biological and social fathers.

Table 2 presents coefficients from OLS regressions predicting the four mother-reported child outcomes (aggressive, withdrawn, anxious/depressive behavior and poor health) based on the type of father the child lives with. In the results shown, all groups of children living with biological and social fathers are compared with children living with no father. Out of the four outcome measures, only child health status is consistently associated with the presence of a residential father (see column 4). Relative to children not living with either a social or a biological father, all groups of children living with fathers are reported to be in at least marginally better health. In some cases, the differences are quite substantial. For example, children living with married social fathers are reported by their mothers to have health problems at a level that is more than one-third of a standard deviation lower than those of children living with no father (beta = -.26, std dev = .78). When the reference category is changed from children not living with a father to those living with two married biological parents (results not shown), I find, perhaps

surprisingly, that children living with married social fathers have marginally better health than do those living with married biological parents (beta = -.183).

Turning now to child behavior outcomes, there are few significant differences in child behaviors between children living with and without fathers. The one consistent exception is that living with a cohabiting biological father is associated with lower levels of all three problem behaviors, relative to not living with any father. The only other significant difference is that living with a cohabiting social father is marginally associated with lower levels of withdrawn behavior, relative to not living with a father. When the reference category is changed to children living with two biological married parents, the only significant difference is that children living with cohabiting biological fathers exhibit significantly *less* aggressive behavior than do children living with married biological fathers (beta = -.055). Among children living with cohabiting parents, those living with cohabiting social fathers exhibit significantly higher levels of aggressive behavior, net of other characteristics, than do those living with cohabiting biological fathers (beta = .071). While the presence of a biological or social father appears to have a protective relationship with mother-reported child health, living with a father is not consistently associated with differences in child behavioral outcomes. Living with a cohabiting biological father, however, is associated with fewer behavior problems, relative to living with no father.

Table 2. Results from OLS predicting child outcomes based on residential father presence at 3 years

	Child behavior checklist sub-scales			
	Aggressive	**Withdrawn**	**Anx/dep.**	**Poor Health**
	N = 2,252	**N = 2,252**	**N = 2,252**	**N = 2,803**
Resident father (no resident father omitted)				
Married biological father	0.00	-0.01	-0.02	-0.08 ^
Cohabiting biological father	-0.05 *	-0.03 ^	-0.04 *	-0.15 **
Married social father	0.03	-0.02	-0.04	-0.26 **
Cohabiting social father	0.01	-0.04 ^	-0.03	-0.10 *
Mother's baseline age	-0.004 *	-0.002 *	0.00	0.01 *
Mother's race (black non-H omitted)				
White and other, non-Hispanic	0.06 **	-0.01	-0.03	0.03
Hispanic	0.03	0.02	0.01	0.06
Mother's baseline education (<HS omitted)				
HS degree/GED	-0.02	-0.04 **	-0.07 **	-0.08 *
Some college or more	-0.05 *	-0.09 **	-0.15 **	-0.12 **
Mother self-reports fair/poor health	0.06 *	0.04 ^	0.06 *	0.33 **
Number of children in hhld (3 years)	0.00	0.01 **	0.00	0.03 *
Number of adults in hhld (3 years)	0.01	0.00	0.00	0.00
Mother born in U.S.	0.08 **	-0.02	-0.01	-0.21 **
Focal child born low/very low birth weight	0.00	0.03	0.00	0.11 *
Focal child is male	0.05 **	0.04 **	0.01	0.09 **
Focal child is overly emotional/shy (1-5)	0.11 **	0.06 **	0.09 **	0.09 **
Mean	0.69	0.27	0.49	1.55
Standard Deviation	0.39	0.27	0.32	0.78
Intercept	0.39 **	0.17 **	0.31 **	1.30 **
R Squared	0.08	0.08	0.11	0.06

***p<.001; ** p<0.01; * p<0.05; ^ p<0.10 two tailed

Note: For all four outcomes, higher values indicate greater problems. All information about children's behavior is taken from mothers' reports during the 3-year in-home interview. Information about children's health is collected from the mother during the 3-year core interview.

Associations between Resident Social/Biological Father Involvement and Child Well-Being

Table 3 presents coefficients from OLS regressions predicting child behavior and health with resident father involvement as the key predictor among children living with either biological or social fathers. Net of other characteristics, increased father involvement is significantly associated with reductions in aggressive behavior and improvements in mother-assessed child health, and is marginally associated with reductions in withdrawn behavior.

Each additional day of average father involvement is associated with a decrease in aggressive behavior and child health problems of more than eight percent. After controlling for father involvement, children living with cohabiting biological fathers exhibit significantly lower levels of aggressive behavior and fewer health problems than do those living with recently-married biological parents. In results not shown here, the reference category was changed from two married biological parents to two cohabiting biological parents. Children living with cohabiting social parents exhibit significantly higher levels of aggressive behavior than do children living with cohabiting biological parents. An interaction term testing whether or not the association between level of resident father involvement and child outcomes differed for children living with social versus biological fathers was insignificant and was therefore not included in the models presented here.

Table 3. Results from OLS predicting child outcomes from residential father involvement at 3 years

	Child behavior checklist sub-scales			
	Aggressive	**Withdrawn**	**Anx/dep**	**Poor Health**
	N = 1,038	**N = 1,038**	**N = 1,038**	**N = 1,321**
Average father involvement (0-7)	-0.03 **	-0.01 ^	0.00	-0.06 **
Type of resident father (two married bio omitted)				
Cohabiting bio	-0.07 **	-0.02	-0.03	-0.08 ^
Married social	0.02	0.00	-0.01	-0.12
Cohabiting social	0.02	-0.02	0.01	0.00
Mom's baseline education (<HS omitted)				
HS diploma/GED	0.01	-0.04 ^	-0.04 ^	-0.10 *
Some college or more	-0.02	-0.07 **	-0.10 **	-0.14 *
Mother self-reports fair/poor health	0.02	0.01	0.05	0.34 **
Mother born in U.S.	0.09 *	-0.05 ^	-0.05	-0.24 **
Focal child born low/very low birth weight	-0.02	-0.01	0.00	0.06
Focal child is male	0.07 **	0.03 ^	0.02	0.07 ^
Focal child is overly emotional/shy (1-5)	0.10 **	0.04 **	0.10 **	0.08 **
Resident father's education (<HS omitted)				
HS diploma/GED	-0.04	0.01	-0.05 *	-0.03
Some college or more	-0.02	0.00	-0.04	-0.07
Resident father currently working/in school	-0.03	-0.05 *	0.02	-0.04
Resident father has work-limiting phys/mental cond.	0.07	0.00	0.03	0.15 ^
Resident father has problems with drugs/alcohol	-0.01	-0.02	0.07	0.11
Resident father has ever been incarcerated	0.06 *	-0.02	0.02	0.02
Mean	0.68	0.25	0.47	1.48
Standard Deviation	0.38	0.26	0.32	0.73
Intercept	0.61 **	0.34 **	0.33 **	1.51 **
R Squared	0.11	0.07	0.12	0.11

***p<.001; ** p<0.01; * p<0.05; ^ p<0.10 two tailed

Note: For all four outcomes, higher values indicate greater problems. All information about children's behavior is taken from mothers' reports during the 3-year in-home interview. Information about children's health is collected from the mother during the 3-year core interview. All models also control for mother's age, race, and education, father's age and race, and the number of children and adults in the household.

Summary

In summary, the results from the OLS regressions suggest that, net of other characteristics, children living their biological mothers and any type of father have better mother-reported global health than do children living with single mothers. The results are less consistent regarding the relationship between living with a father and child behavioral outcomes. Only children living with cohabiting biological parents fare better across all three behavioral outcomes than do children living with single mothers. In contrast with previous research finding that children living with two married biological parents almost always fare better than those in step-parent families, I find that this is not the case in this sample of young children born to unwed parents. On the contrary, in several cases, children living with social fathers have better outcomes than do those living with both of their biological parents.

Resident father involvement is significantly and positively associated with child wellbeing. The statistical insignificance of the interaction term indicates that the positive relationship between father involvement and young children's well-being is not dependent upon the child being biologically related to the father.