

Low-Income Immigrant Parents and their Children in Four Large Urban Cities

According to the 2000 Census, 20 percent of all children in the U.S. had at least one immigrant parent. On average, children in immigrant families are born healthier, more likely to live with both parents, and are more likely to live with extended family and within supportive ethnic enclaves (Hernandez 2004; Shields and Behrman 2004). Yet, despite these advantages, children in immigrant families are more likely than children in native-born families to live in poverty, and more likely to experience socioeconomic and cultural factors that can unfavorably affect their development (Hernandez 2004). We examine how the employment experiences of immigrant mothers affect their children, and whether these same experiences differ for children of mothers who are U.S. natives. Recent waves of immigrants may be particularly disadvantaged in the U.S. labor market, lacking the formal education or training, as well as necessary legal status to secure higher quality, full-time work.

We use data from the Project on Devolution and Urban Change, a longitudinal study of welfare-receiving mothers in 1995 who lived in highly disadvantaged neighborhoods of Cuyahoga, Philadelphia, Los Angeles, and Miami-Dade county to examine whether immigration status moderates the effect of maternal work hours on the educational, health, and behavioral outcomes of preschoolers (aged 2 to 6 at Wave I) and adolescents (aged 12 to 18 at Wave I). Approximately 19 percent of the 8,600 children in the data are born to immigrants. Most of these immigrants are of Hispanic origin, with a fifth from Puerto Rico, one third from Mexico, and notable minorities from Cuba, the Dominican Republic, Haiti and El Salvador. Immigrant respondents answered questions about duration in the United States, citizenship, and language proficiency. Children's outcomes are assessed in 1998 and 2001 via maternal reports on school participation—including attendance, tardiness, and missing school—school performance, health status and insurance, receipt of professional help for emotional or behavioral problems, smoking and involvement with crime. We control for an in-depth set of covariates (including maternal depressive symptoms, parenting, health limitations, domestic violence, substance abuse and neighborhood quality) and time invariant unobserved child characteristics through lagged longitudinal models (or, “fixed effects” models).

Approximately one third of immigrant mothers work more than 30 hours per week, 12 to 16 percent work part-time and up to half do not work at either the first or second survey wave. Table 1 presents very preliminary findings suggesting that the effects of employment differ for adolescents of immigrant mothers: While mother's part-time work shows no effect among all adolescents, this same work status increases the number of days late for school and the likelihood of being contacted about school-related problem behavior of adolescents of immigrant mothers. This paper examines effects on a similar set of outcomes among younger children, explores parenting, out-of-school care or household composition might account for the ways in which immigrant mother's employment might differentially affect children's outcomes, and assesses how these effects vary by birthplace, English proficiency and years of U.S. residency.

Schooling Outcomes of Low-Income Youth: The Role of Maternal Work Hours

Table 1

Fixed Effects Estimates of the Effects of Full and Part Time Work on Adolescent Schooling Outcomes, Controlling for Neighborhood Characteristics

Variable	Number of Days Missed School	Number of Days Late for School	School Performance (Scale 1-5)	Performed Below Average in School	Parent Contacted About Behavior Problems in School
Worked ≤ 30 hours	-0.13 (0.36)	-0.07 (0.34)	-0.11 (0.12)	0.68 (0.46)	-0.42 (0.33)
Worked > 30 hours	-0.14 (0.30)	0.53 (0.32)	-0.09 (0.10)	0.00 (0.33)	0.55 * (0.30)
Worked ≤ 30 hours	-0.11 (-0.40)	-0.66 (0.41)	-0.30 (0.14)	0.37 (0.48)	-0.78 (0.38)
*Immigrant Mother	0.09 (-0.77)	2.22 ** (0.77)	-0.40 (0.27)	2.37 (1.60)	1.86 ** (0.92)
Worked > 30 hours	0.40 (-0.38)	-0.39 (0.36)	-0.07 (0.12)	-0.10 (0.35)	0.42 (0.35)
*Immigrant Mother	0.55 (-0.67)	0.90 (0.57)	-0.06 (0.20)	0.88 (0.91)	0.47 (0.69)

* p<.10; ** p<.05; *** p<.01; Standard Errors are in parentheses

Notes: Clogit models were used to predict the dichotomous outcomes. The cluster option was used in all of these models to adjust standard errors for the lack of independence between observations (multiple observations per child).

The following controls were included in all of the above models: child gender and race; mother's age, educational attainment, marital status, cohabitation status, sf-12 physical health component score, CES-D score, an indicator for whether or not a health condition limits the mother's ability to work, indicators for whether or not the mother has recently been physically abused, emotionally abused, or has used hard drugs, presence of another adult in HH, presence of child other than R's own or adopted child, and number of children in HH. The models also include controls for neighborhood quality: indices depicting concentrated disadvantage, crime and drug use, and residential stability.

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