DEMOGRAPHIC AND SOCIOECONOMIC CHANGES IN RURAL YOUTH - ISSUE BRIEF

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Introduction

The American family has changed significantly in the past 2 to 3 decades. Family disruption and out-of-wedlock childbearing and rearing have increased; and children today have fewer siblings, more often live in a single-parent family, frequently have a working mother, and spend more time as "latch key kids". The overall size of the population of children and youth has fluctuated markedly during the past three decades, reflecting the high fertility of the postwar baby boom, the subsequent low fertility of the 1970's, and the increased fertility of the late 1980's. Today, more mothers with young children are working, and the demand for child care outside the home is greater. Changes in American families raise concern about the effects of family circumstances on the economic, social, and psychological well-being and academic development of children today. While the family is still the central institution in children's lives, the new realities of family life present an uncertain future for children and youth.

Considerable progress has been made over the past 3 decades in improving child health, minority educational achievement, and the economic situation of families with children. Anti-discrimination laws, equal opportunity programs, immunization drives, health and safety regulations, Medicaid, food stamps and child nutrition programs, compensatory education, and other federal and state programs have played a role in these advances. Positive developments in the family circumstances of children include a trend toward later marriages, smaller family size, and higher levels of parental education, with better educated parents more able, on average, to provide an adequate family income.

Nonetheless, a significant minority of children are being reared in less than optimal family environments, particularly the working poor and those in motheronly families. The challenge to policymakers is to find ways to help these children at risk. Families and governments share the responsibility for ensuring the well-being of children by investing in education and providing a safe and wholesome environment for the next generation.

The well-being of children and youth in both metro and nonmetro America is a multifaceted phenomenon. This session will examine recent trends affecting children's well-being, including indicators of economic well-being, physical health, academic achievement, and social behavior. From an appraisal of current knowledge of children and youth, we will aim to: (1) identify information gaps and unresolved substantive and/or methodological issues, and (2) propose the highest priority issues for research during the 1990's. Three broad areas of research on children and youth have been identified as follows: (1) family living arrangements, (2) maternal employment and child care, and (3) social and economic well-being. These topics for research should stimulate group discussion and help us determine the key research issues for the 1990's.

(1) Family Living Arrangements

In 1988, 46 million children-73 percent of children under age 18-were living in two-parent families, compared with 88 percent in 1960. More than 13 million children in 1988 were living with their mothers only-21 percent, compared with only 8 percent in 1960. Twenty-four percent percent of metro children and 20 percent of nonmetro children were living in mother-only families in 1988. Children in mother-only families often face multiple burdens --such as lower average income and higher unemployment. Furthermore, many of

these children lack contact with or support from their absent fathers and must rely on government assistance for support.

• Previous research has focused primarily on families with children, not children themselves. Child-based studies are needed in order to assess the effects of changing family structure—specifically, the increase in mother-only families—on the well-being of children. With children as the unit of analysis, the characteristics of the child's family and residence can be viewed as influential factors in the relationship between family structure and outcomes for children. This approach is advantageous in that children can be grouped by age, race, residence, parental characteristics or any other variable to determine the impact of variation in family characteristics on children this cannot be done when the family is the unit of analysis.

Based on current trends, one-half to perhaps 60 percent of children born today are projected to spend some part of their childhood in single-parent families. Black children are more likely to spend some part of their childhood in a mother-only family than are white children. In 1988, the majority of black children (51 percent) lived with their mother only, compared with 16 percent of white children. The increase in mother-only families implies a growing need at the local/community level for public assistance and programs such as day care, special education, and income maintenance. Research is needed to investigate the association between living in a mother-only family and consequences for the well-being of children in terms of academic achievement, social and emotional development, and economic welfare. What are the implications of changing family structure on nonmetro employment, child welfare services and the enforcement of child support agreements? What are the implications of the labor force participation of women and local employment

conditions on family structure and the well-being of families and children? o Changes in rural/nonmetro family life since the 1970's have paralleled changes in urban/metro families, with higher divorce rates, lower fertility rates, smaller families, fewer children living with both parents, and more women working outside the home. Today, the family circumstances of nonmetro children, with few exceptions, are remarkably similar to those of metro children in regard to family size, age and number of siblings, family living arrangements, and types of child care arrangements. What are the determinants of changing family structure and do these differ by residence? Or has convergence occurred? Are there regional differences, by metro-nonmetro residence? What type of factors explains the apparent convergence in family living arrangements by residence—social, cultural, or economic factors?

(2) Maternal Employment and Child Care

Another profound change in children's lives is the increased probability of having a mother who works for pay outside the home. As of 1988, 62 percent of all children under age 18 had mothers who were in the labor force, compared with 39 percent in 1970¹. As maternal employment has risen, the need for substitute care for the children of working mothers has increased and the location of this care has shifted outside of the child's home. Although care of young children has increasingly moved outside of the child's home, often into group situations, family members continue to have a major role in the provision of care.

In 1987, the most common child care setting for children under 5 years with employed mothers was in another person's home - 36 percent, compared with 30 percent cared for in their own home and 24 percent in child care centers or

nursery or preschool programs during all or most of the time their mothers were at work². School serves as a primary child care arrangement for about threequarters of children 5 to 14 years old; for a sizeable group of these children, before or after school care is needed to cover all the hours their parents are at work. In 1987, twenty-two percent of school-age children required a secondary care arrangement in addition to school; about 2.1 million children were "latch key kids"—children who cared for themselves while their parents were at work³.

The primary type of child care setting for nonmetro children under age 6 closely approximates that of metro children. About 29 percent of children are cared for in their own home by either a relative or a nonrelative. However, metro-nonmetro child care arrangements outside the child's home do differ somewhat. A slightly larger proportion of nonmetro children are cared for by a nonrelative in another home (24 percent) than is the case for metro children (20 percent). Conversely, a smaller proportion of nonmetro children (25 percent) are cared for in a group setting (nursery school, preschool, daycare center) than is the case for metro children (33 percent). Lower population density in nonmetro areas may make group care services less economically feasible; hence, more group child care facilities are located in metro areas.

o Because the increased labor force participation of mothers with young children is a relatively new phenomenon, the infrastructure to support a child care industry for preschool children is only now beginning to emerge. As mothers with young children are expected to retain and even increase their labor force participation, the demand and need for quality child care by working parents or single mothers is also anticipated to increase. What are the implications for nonmetro areas of the increased demand for child care for

both preschool and school-age children? How does the type of child care arrangement and payments for such care differ by residence? What effect does the different nonmetro occupational structure have on the type of child care used? What is the effect of child care expenses and availability of affordable care on types of child care services used?

Child care is expensive-a major household budget item. Lack of affordable child care is probably preventing many poorly educated and lowincome mothers from working at all. Without adequate or affordable child care, nonmetro mothers cannot take advantage of training programs and employment opportunities in rural development programs. Research should investigate the relationship between female employment, child care and poverty status in nonmetro areas. What is the effect of the lack of affordable child care on the labor force participation of women, especially poorly educated and low-income mothers? How and why do maternal employment and child care arrangements differ by metro-nonmetro residence? What differences are found for mother-only families, compared with married-couple families or dual-earner families? Responsible employer personnel policies and government policies are needed to address the issues of providing child care and determining parental leave regulations. Ultimately, local area policymakers will need to address the problem of finding adequate and affordable child care and providing opportunities for training and employment of the mothers of young children. What has been done so far? What is the nature of the nonmetro community response to the provision of child care services?

(3) Social and Economic Well-Being

The overall physical health of U.S. children is better today than in

1960, although the rate of improvement for some health indicators has declined in recent years. Many communicable diseases once common to childhood, such as diphtheria, polio, and measles, have been eradicated or greatly reduced in frequency⁴. The infant mortality rate and death rates for preschool and school age children have declined substantially since the early 1960's, attesting to real improvements in the physical health of young people.

For one out of every 20 babies born in the U.S., the mother has not obtained prenatal care or has obtained care late in the pregnancy. Young teenagers, school dropouts, unmarried women, and black women are at greater risk of not obtaining timely prenatal care. Early prenatal care is one way for the expectant mother to help ensure a healthy infant. Are there residential differences in use and access to prenatal care? How does type of residence-----metro-nonmetro community--affect the provision of such care? Maternal and child health programs need to target their services/programs to reach those most at risk. Research is needed to study the relationship between use of prenatal care, metro-nonmetro residence, and the availability of services.
o Teenage sexual activity outside of marriage has increased since the 1960's, and occurs at earlier ages. Because many teens do not use contraceptives when they initiate sexual activity, this has resulted in a large number of adolescent pregnancies. Among female teenagers 15 to 19 years old in

the mid-1980's who had ever had sex, nearly 1 in 4 became pregnant each year⁵. Teenage births outside of marriage have more than doubled between 1970 and the 1988, from 30 percent of births to teen mothers in 1970 to 66 percent by 1988; this increase is due to both a marked reduction in births to married teens and a decreased tendency to legitimize nonmarital pregnancies through marriage⁶. Since many teen mothers are not marrying, they are at a greater risk of having

to rely on welfare to support their child. How and why does teenage childbearing differ by metro-nonmetro residence---both within marriage and outside of marriage? Later marriages are more likely to endure than those which occur in the teenage years or early twenties. Are there metro-nonmetro differences in the timing of marriage and childbearing?

Today, students are staying in school longer and earning both high school diplomas and college degrees. Two divergent trends in academic achievement have emerged: 1) the academic achievement of today's best students appears to be significantly lower than that of the best students of the early 1960's; and 2) the achievement of minority students and those from lower socioeconomic backgrounds has improved since the early 1960's.

o Although the dropout rate has been reduced substantially in recent years, disproportionate numbers of high school dropouts are still found in families with low socioeconomic status and non-Asian minority backgrounds. What is the relationship between high school drop-out and metro-nonmetro residence? What is the relationship between the educational attainment of youth and out-migration from nonmetro areas? What can be done to target potential high school dropouts? What education or training programs can be implemented in nonmetro areas to better prepare today's children and youth? What programs can be implemented for the education and job training needs of non-college bound youth aged 16-24 to ease employment problems of this age group? The Job Training Partnership Act (JTPA) provides training and employment services for youth—is this program benefitting nonmetro youth? Is there a demand for bilingual, immigrant and refugee education? Adult education? How can such demands best be met?

Children have consistently had a higher probability of being poor than

adults, as seen in official poverty statistics available back to 1959. As of 1988, 12.6 million children (20 percent) lived below the poverty level, onequarter more than the number of children in poverty throughout the 1970's. In 1987, a higher proportion of nonmetro children were in families below the poverty line than were metro children; 24 percent of nonmetro children were poor and 20 percent of metro children were poor. Higher poverty among nonmetro children represents a continuation of historical trends and reflects an overall nonmetro economic disadvantage, seen in lower average incomes and higher unemployment in nonmetro areas.

Children in mother-only families have an almost one in two chance of being poor, compared with a less than one in ten chance for children living with two parents. In 1988, about 3.3 million mother-only families with children-or 45 percent-were in poverty. The growing number of two-parent families in poverty has also contributed to the higher poverty among children during the 1980's, due largely to the stagnation in real wages. Most of these "working poor" do not qualify for any public assistance except food stamps, and many are not covered by health insurance.

The character of poverty is affected by the availability of Aid to Families with Dependent Children (AFDC) and noncash benefit programs, such as food stamps, subsidized housing, and Medicaid. Of approximately 11 million AFDC recipients in fiscal year 1988, 67 percent were children, representing 11 percent of the total child population and 65 percent of poor children⁷. Public assistance benefits have not kept up with inflation during the 1980's, and the 'average value of cash benefits from state welfare programs for poor families with children has declined.

o Several provisions of the Family Support Act (FSA) of 1988 may help

ameliorate some of the adverse economic conditions facing a number of children. The Family Support Act restructures the AFDC program, emphasizes education and job training, extends income assistance to intact families in all states with an unemployed breadwinner who meets certain work-related requirements, provides guarantees for child care, and stricter enforcement of child support orders. Mother-only families (currently served by AFDC) are expected to be the main beneficiaries of the Act's welfare reforms. Research is needed to study the relationship between economic welfare and family type. What is the relationship between changes in employment and economic conditions in nonmetro communities and increased marital disruption and single-parent families? The Family Support Act may especially benefit the nonmetro poor, since many states in which the nonmetro poor are concentrated have not previously offered AFDC benefits to unemployed parents. How will the Family Support Act affect families in need; what is the effect of the FSA on the economic well-being of mother-only families and the working poor? The effects of the Family Support Act can best be determined by studying changes over time. Longitudinal studies are needed to determine the effects of the FSA on the well-being of children and families with children, especially the nonmetro poor.

• Racial differences in childhood poverty are substantial; black children and Hispanic children are more likely to be poor. Socioeconomic and ethnic disparities are also found in a number of child health indicators—mortality rates, health ratings, and some measures of illness and injury—and in children's use of physician and dental services. Black and Hispanic children, especially poor children or those in central cities or rural areas, are less healthy, on average, than nonminority children⁸. Children from poor and minority families receive less frequent care than those from middle-class,

nonminority families⁹—despite the fact that children from poor families are more likely to need medical or dental care. Are there residential differences in the various indicators of child health? What aspects of the rural community and local employment conditions affect the health status and provision of care to children? How does childhood health status differ by poverty status, residence, and region?

• Only about two-thirds of children from families below the poverty line are covered by some form of health insurance, compared with nearly 90 percent of children in families with incomes at least twice the poverty line¹⁰. In addition, more than 85 percent of children in two-parent families are covered by health insurance, compared with less than 70 percent in mother-only families¹¹. How and why does health insurance coverage differ by metrononmetro residence? What programs/policies can be introduced or modified to reach children without health insurance coverage? At what level—state or local?

Summary

Three key areas of research for the 1990's have been identified as: (1) changes in family living arrangements and the increase in mother-only families, (2) increased maternal employment and a greater demand for child care, and (3) the social and economic well-being of children and youth. Hopefully, our discussion today will update our knowledge base of recent trends affecting the well-being of nonmetro children and youth, and help us refine the basic research issues for the 1990's.

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