

Academic and Behavioral Outcomes among the Children of Young Mothers

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Abstract

In this paper, we use newly available data from the National Longitudinal Survey of Youth to investigate the effects of early motherhood on academic and behavioral outcomes for children born to early childbearers. We find that early motherhood's strong negative correlation with children's test scores and positive correlation with children's grade repetition is almost entirely explained by pre-birth individual and family background factors of teen mothers themselves. However, early childbearing is associated indirectly with reduced children's test scores through its linkage to family size (and thus to child birth order). We find a different pattern in predicting fighting, truancy, early sexual activity, and other problem behaviors among adolescent and young adult off-spring. For these behaviors, maternal age-at-first-birth remains an important risk-factor even after controlling for a wide range of background factors and maternal characteristics. These results highlight the diverse pathways through which teen parenting might influence subsequent child well-being and social performance.

Keywords:

teen childbearing and parenthood

test scores

grade retention

behavior problems

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adolescent sexual activity

Introduction

Controlling for background factors, do the children of teen mothers experience worse behavioral and academic outcomes than do their comparable peers? Although this is a central question of public and academic concern, there is little consensus about the link between early parenting and subsequent child outcomes. The lack of available research is especially pronounced regarding adolescent outcomes, although such outcomes constitute a principal area of policy concern.

Many researchers and policymakers argue that young mothers, especially teen mothers, are less able to emotionally and financially nurture capable, healthy, well-adjusted offspring (Hayes, 1987; Maynard, 1997). These fears are heightened by the strong first-order correlation between early parenthood and many poor child outcomes including low birth weight, low cognitive test scores, behavioral problems, grade repetition, and adult economic disadvantage.

Early work, concentrating on these associations, supported the popular belief of teen parenthood's dire consequences. For example, the 1987 two-volume treatment of teen parenthood, *Risking the Future*, stated,

[T]he personal costs resulting from unintended pregnancies and untimely birth are far too high to countenance an indifferent response.... [H]eighted health and developmental risks to the children of adolescent mothers are a few of the most obvious and immediate personal costs. (Hayes, 1987, p. ix).

However, later work has questioned the causal role played by early parenting, and has paid more explicit attention to other family and individual background factors that might account for teen parenthood's apparently detrimental effects. By 1994, some investigators openly questioned the conventional wisdom regarding early parenthood (Geronimus, Korenman, & Hillemeier, 1994).

Geronimus and colleagues write:

Our finding that, net of family background factors, teen childbearing may not adversely affect early childhood development casts doubt...on the presumptive benefits to children of efforts to alter women's fertility behavior.... (p. 605).

This paper uses recently available data to examine a variety of adolescent behavioral outcomes to create a more complete picture of the relationship between maternal age and child outcomes. It also examines psychometric test scores of younger children and retention in school—two key indicators of academic performance. In four ways, this paper contributes to the literature on the impact of early parenting on subsequent outcomes among children.

First, we look at outcomes for a group that has received less systematic attention in the teen parenting debate: adolescents and young adults born to teen mothers. We seek to predict several behavioral and academic measures for this group—measures that may reflect the different causal pathways by which teen childbearing is correlated with subsequent outcomes for children. Most of our behavioral outcomes have received little attention in previous work on teen childbearing effects. (See Maynard (1997) for work that treats related outcomes for adolescents).

Second, we replicate earlier research, notably Geronimus and colleagues (1994) and Moore, Morrison, and Greene (1997), by also examining correlates of academic test scores. Using later available waves of the same longitudinal data source used in these two studies, we explore whether there are important changes in a more recent sample that includes older children.

Third--again using a longer timeframe of data following mothers and their children--we examine outcomes for higher parity offspring of women who first gave birth during the teen years. Additional years of data allow us to examine a more representative picture of teen mothers' family constellations than was possible with earlier sources.

Finally, the longer timeframe allows a more representative comparison group of children born to women who delayed childbearing past their teen years. One can examine many effects of childbearing on teen mothers themselves by following a cohort of women into their mid-twenties. When studying the impact of teen childbearing on the next generation, however, one must compare children born to teen mothers to their counterparts whose mothers delayed first-births. This requires a longer period to identify women who delay their childbearing but who will eventually have children. The longer a sample is followed, the better the sample will represent the full population of children born to mothers of all ages.

In all of our analyses, we measure maternal age at first birth with a set of four dummy variables (16 years old and under, 17-18, 19 and 20-21 with over 21 as the reference category) as opposed to a single dichotomous teen or non-teen variable. This approach allows us to assess whether childbearing in the early teen years affects children differently than in the later teen years and whether childbearing just after the teen years is associated with similar outcomes as teen childbearing.

In the following sections, we first review relevant previous studies of adolescent parenthood effects. We next describe the data and methods we use to study the effects of early childbearing on adolescent and young adult children. We then summarize and discuss our results. We conclude with a discussion of study limitations, policy implications, and directions for future research.

Previous Studies of Adolescent Parenthood Effects

Academics, politicians, philanthropists, and the public at large have long been fascinated with teen parenthood as a social problem. Although decision-makers within government and private philanthropy have often assumed early childbearing to be the root cause of many social dislocations and

disadvantages, academics have been less certain. Empirical work on the effects of teen motherhood has created a mixed picture of the causal power of early childbearing. The literature consistently shows a strong correlation between teenage parenting and many negative outcomes. However, the actual causal relationships and possible policy interventions are less clear.

As noted above, the two-volume *Risking the Future* (Hayes, 1987) warned of the detrimental consequences of teen parenting. But several important later studies criticized early work of the kind summarized by Hayes for its failure to adequately separate the effects of individual, family, and community characteristics correlated with adolescent childbearing that are harmful to children. Factors that lead certain young women to bear children may reflect more fundamental economic and educational disadvantages. Conceptually and empirically, it is therefore difficult to isolate the consequences for children that stem uniquely from teen parenthood.

Moreover, teen parenting likely has different effects on different outcomes. If teen parenting causes economic hardship, childhood outcomes that are especially income-sensitive will show the strongest effects. If, however, the dominant impact of early childbearing is to alter parenting skills and behaviors, one might observe large effects for childhood outcomes that are relatively unrelated to mothers' economic status. Outcomes must therefore be individually examined to produce an overall understanding of the link between early parenting and subsequent well-being of children.

The recent literature on the effects of early childbearing on teen mothers themselves examines educational outcomes, adult economic status and welfare use, family formation, and employment (Bronars & Grogger, 1995; Corcoran & Kunz, 1997; Hoffman, Foster, & Furstenberg, 1993; Hotz, McElroy, & Sanders, 1997; Geronimus & Korenman, 1992). Three of these five studies use fixed-effects sibling models. Hotz et al. compare teens who had live births and teens who had miscarriages.

Bronars and Grogger compare teen mothers who had twins with teen mothers who had singleton births under the assumption that having two children at the same time has twice the impact of having one. All of these studies produce notably smaller point estimates than did earlier research which included more limited controls for background factors correlated with teen parenting. For a more extensive review of the literature on teen parenthood effects, see Coley and Chase-Lansdale (1998).

The recent literature on the effects of maternal age at first birth on children has examined birth and early health outcomes, psychometric tests, educational outcomes, psychological well-being, home environment, early fertility, delinquency and early behavior problems, incarceration, and adult financial status (Geronimus & Korenman, 1993; Geronimus et al., 1994; Grogger, 1997; Hardy et al., 1997; Haveman, Wolfe, & Peterson, 1997; Moore et al., 1997). The two papers by Geronimus and colleagues use fixed-effects cousin comparisons. The other papers use explicit controls. Grogger compares the children born to women when they are teens with children born later to mothers who began childbearing as adolescents. (See Hao, Matsueda, & Earnhart (1998) for a similar approach using a fixed-effects sibling comparison). Recent estimates for effects on children are less consistent than recent work on effects on teen mothers themselves. Moore and colleagues find teen childbearing effects on cognitive tests and home environment; Grogger finds effects on male incarceration rates; and Haveman and colleagues and Hardy and colleagues find effects on educational attainment, early fertility, and economic outcomes. However, Geronimus's research team finds no effects on children's cognitive development or home environments. Geronimus and Korenman (1993) find no negative effects (and a few positive effects) on most of their infant health outcomes.

National Longitudinal Survey of Youth (NLSY) Sample and Measures

The NLSY follows a national sample of 12,686 young men and women who were between the ages of 14 and 21 in 1979. The respondents were interviewed annually until 1995 when the survey became bi-annual. The NLSY over-sampled African-Americans, Hispanics, and poor whites (although the poor white sample was dropped due to funding constraints after 1988). Children born to the female respondents began to be tracked in 1986 with bi-annual interviews (of mother and child, depending on the child's age) and assessments of psychometric and behavioral factors. Beginning in 1994, children age 14 and over (officially referred to as the "young adults" by the NLSY) received a separate interview designed to explore issues relevant to older children of the original NLSY sample such as sexual behavior, substance use, pregnancy, school completion, and criminal behavior. It is this group of older children we refer to as the adolescent and young adult children. Since its 1986 inception, the Mother-Child file has included interviews with 10,505 children of the NLSY females. In 1996 (the latest survey year available), 7,103 of these children were interviewed. Of these, 5,431 were under the age of 14 and were eligible for the psychometric assessments we investigate. The additional 1,672 were at least 14 years old and received the survey questions we analyze about grade repetition and what we are calling behavioral outcomes (early sexual activity, truancy, smoking tobacco or marijuana, and fighting). Children 14 and over are not given the psychometric assessments.

Dependent variables— In examining the effects of teen motherhood on children, we were interested in young children's cognitive test scores, grade repetition, and adolescent behavioral factors.

Specifically, our dependent variables for the younger children (under age 14) are: the Peabody Individual Achievement Test (PIAT) mathematics subscale, administered to children aged five or older; the PIAT reading comprehension subscale, administered to children aged five or older who achieved a

score of at least 19 on the PIAT reading recognition subscale; and the revised Peabody Picture Vocabulary Test (PPVT-R) which measures heard vocabulary recognition and is administered to children aged three or older. We analyzed results for the PIAT reading recognition test as well, but found results similar to those for reading comprehension. For simplicity, we solely show the comprehension results. We use the 1996 scores for the PIAT math and reading tests. We use the 1992 PPVT score since 1992 is the most recent year the test was administered to the full sample of eligible children. We use the raw test scores, with appropriate child age controls, since the standardized scores artificially constrain variance across scores. Our dependent variables for the adolescent and young adult sample (age 14 and older) are: repeating a grade in school; having sexual intercourse before the age of 16 (children not yet 16 by the end of 1996 are excluded from the analyses of this outcome); truancy, which is coded as 1 if the respondent reported having skipped school in the past year; fighting in school or at work in the past year; and smoking marijuana in the last 30 days. Also, in analyses not shown, we treated tobacco smoking as a dependent variable and found similar results to those of smoking marijuana.

Independent variables— Our main independent variables of interest are dummies for maternal age at first birth. We include whether the mother was 16 or younger, 17-18, 19, or 20-21 when she had her first child. We include ages 20-21 because mothers who gave birth in their early twenties may experience different outcomes from mothers who delayed childbirth until later years. The reference category is whether a mother was over 21 years of age. However, given the structure of the NLSY, the age range of the reference category is truncated. The highest age of first birth in the reference category varies depending on for which sample the particular dependent variable is measured. No mother

initiated childbearing after age 34 for the sample given the math and reading tests, after age 32 for the sample given the PPVT test, or after age 24 for the adolescent and young adult sample surveyed about grade repetition and our behavioral factors of interest. All models also include controls for the child's age. For the young children's outcomes, we broke the full range of child ages in months into six categories of roughly equal numbers of respondents and created corresponding dummy variables to allow for a non-linear relationship between age and test score. For the adolescents, we included a dummy variable for each year of age between 14 and 19 with age 20 or over used as the omitted category.

To control for background factors correlated with maternal age at first birth, we also include many other explanatory variables. These include grandmother's education (high school, less than high school, or more than high school); mother's urban/rural and south/non-south residence at age 14; mother's household structure at age 14 (whether the mother lived with both biological parents, with any biological parent, or in a single or no parent household); and grandmother's labor force status (employed outside the home or not) when the mother was 14. We also include mother's score on the Armed Forces Qualifying Test (AFQT), which was administered to all NLSY respondents in 1980. The AFQT measures reading comprehension, vocabulary, and mathematics skills. AFQT scores reflect both genetic endowment and environment. In addition, we control for race, Hispanic origin, and child's gender. In some models, we also include child's birth order and family size.

Table 1 contains weighted means for all variables that appear in the analyses.

[Table 1 About Here]

Methods

We use the inclusion of explicit control variables to control for the effect of maternal background. For each outcome, we first estimate a sparse regression specification with maternal age at first birth dummies and child age as the only control. We then run a second specification which adds family background controls in order to assess the possible causal responsibility of early parenthood.

To increase our confidence that our second model does not include variables endogenous to early childbearing, we performed a robustness test by removing any child whose mother began childbearing prior to 1980 when the AFQT test was administered. Our results were robust across both specifications.

The consequences of pregnancy may be different for younger teens. To capture potentially important differences between early and late teen childbearing, we include dummies for several age-at-first-birth categories (described above). We also ran all models with a single teen/non-teen variable coded as 1 if a woman began childbearing before age 19 and 0 otherwise. Results were robust across both specifications.

The results we present in the paper show coefficients for our maternal age at first birth categories compared to the reference group of women who began childbearing at age 22 or later. We chose this reference group because we were interested in whether early childbearing even past adolescence (i.e. between ages 20-21) is associated with negative child outcomes. However, it may be unrealistic to expect policies to induce young women who might have become teen mothers to delay childbearing all the way to age 22. Hence, we were interested in whether delays just into the twenties were associated with improvements in child outcomes. To investigate this question, we re-ran all of our analyses (results

not shown) using childbearing at age 20-21 as the omitted reference category. With the exception of fighting, results were robust across each of the two specifications.

We use linear OLS regressions for continuous dependent variables and multiple logistic regression for dichotomous dependent variables. In all models, we include only the cases that have complete data for the set of regressions containing full background controls. In all cases, standard errors are corrected to accommodate unobserved correlation between mothers in the original NLSY households. Statistical estimates were computed using the STATA software package for personal computers.

It is important to note that our analyses are of effects on children born at any time to women who had their first live birth while in their teens. We chose this approach because teen motherhood may have deleterious effects on the mother that are long-lasting and that are transmitted to all of her children. Some studies suggest that while teen mothers experience initial disadvantages post-birth, they eventually catch up to their later childbearing peers (Furstenberg, Brooks-Gunn, & Morgan, 1987). If so, one might fear that we are understating teen motherhood effects by including children born later to women who had their first births as teens. To address this possibility, we re-ran all of our analyses on only first-born children (not shown). These analyses showed no substantial differences in the teen parenthood effects.

Results

Correlation between timing of motherhood and children's outcomes— In models that control only for child age, we find that teen parenthood has a large and statistically significant relationship in the expected direction with almost every studied outcome. Presumably these correlations are what has

sparked public concern about teen childbearing in the first place. Although our behavioral variables have received less research attention than other outcomes, they yield the same striking pattern of correlations.

[Table 2 About Here]

We present these models in Table 2. Marijuana use in the past month is the only variable for which there is no significant baseline correlation with maternal age at first birth. (In analyses not shown, cigarette smoking in the last 30 days and both marijuana and cigarette smoking ever and 1-2 times per week in the last 30 days all had no significant baseline correlation with timing of first birth). Early sexual activity, fighting at school or work, and truancy are all positively associated with having a mother who began childbearing in her teens. Children of teen mothers also have lower math, reading and PPVT scores and are more likely to have repeated a grade in school.

Controlling for background and demographic characteristics

When we include family background controls in models, the story changes strikingly. These results appear in Table 3. On all of the academic variables, which include both the psychometric tests and grade repetition, the magnitude of the teen childbearing effects are greatly reduced and none remain statistically significant.

A different pattern emerges for the behavioral variables. Teen childbearing effects remain for several variables: whether a child has had sexual intercourse before the age of 16, whether a child has fought at school or work, and whether a child has skipped school. In predicting truancy, the significant coefficient on mother's first birth at age 17-18 from the age-only control model retains significance and actually increases in size in this more fully controlled model. The coefficients for first birth at 16 or under

and at 17-18 in predicting sexual intercourse by age 16 also retain significance and size. The coefficients are only slightly reduced across models for first birth at 16 or under and at 17-18 in predicting fighting at school or work.

[Table 3 About Here]

For academic outcomes, we find that gender, race, maternal AFQT, birth order, and number of siblings all have significant effects on at least two of the four outcomes. Girls are less likely to repeat grades and have higher reading comprehension scores. African-Americans have lower test scores, but are no more (or less) likely to repeat grades. In addition, Hispanic children have lower PPVT scores, though this pattern is difficult to interpret given language concerns.

Maternal AFQT scores are positively associated with all test scores and are negatively associated with grade repetition. Point estimates are large and statistically significant in all specifications. Birth order also has an apparent effect. Compared to first-children, second children as well as third or higher birth order children had lower scores on all three tests.

For the behavior models, gender, race and ethnicity, and maternal AFQT all had significant effects on at least one of the outcomes. The most striking effects were for race and gender. Female children were less likely to fight or skip school. African-American children were less likely to skip school and more likely to become sexually active before age 16. AFQT slightly lowered the chance of fighting.

Because coefficients from logistic regressions are difficult to interpret directly, we calculated predicted probabilities for the dichotomous outcome variables in Table 3 based on maternal age at first birth. These figures appear in Table 4. We show these calculations only for the models in Table 3. To calculate the predicted probabilities, we took a baseline case of a child whose mother had the following

characteristics: at age 14 she lived in an urban area in the North with both biological parents, her own mother worked at that time and had less than a high school education, and her AFQT score (measured in 1980) was at the mean. The baseline is a young adult age 20 or over. We show the figures by gender and by race. We do not display results by Hispanic origin since ethnicity had little apparent effect on most outcomes.

[Table 4 About Here]

The Table shows many large point estimates for the impact of early childbearing on behavioral outcomes. Particularly noteworthy is the association between a mother's early initial childbearing and early initiation of sexual activity among her children. For example, a non-Hispanic white male whose mother began childbearing between 17 and 18 has a predicted probability of having sex before age 16 of .52 compared to only .14 for white males whose mothers delayed childbearing until age 22. There are significant and sizeable differences for fighting and truancy as well. The comparable comparisons are .20 to .12 for fighting and .37 to .21 for truancy.

Delaying childbearing just beyond the teen years — While we use age-at-first-birth over the age of 21 as our reference category in the results we show in the paper, we also ran our regressions (results not shown) with initiation of childbearing at 20-21 as the reference category to see if delaying childbearing just beyond the teen years has different effects than teen childbearing. We found the same pattern of results for all outcomes except for fighting. In other words, the children of women who began childbearing before age 20 had no sizeable or significant differences in test scores or grade repetition from the children of those who began childbearing between ages 20-21, but the former group did have significantly higher levels of early sexual activity and truancy than the latter. Thus, we might expect

childbearing delays just past the teen years to diminish these outcomes. For fighting, differences are only evident once childbearing is delayed to age 22 or above.

Importance of child's birth order and number of children born to child's mother— In the literature examining the effects of teen motherhood on children, it is standard to include measures of birth order in models. We include birth order in Table 3 because the two studies most closely aligned to our study chose to do so (Geronimus et al., 1994; Moore et al., 1997). As we examined similar outcomes but in older children using later NLSY data, we wanted to use similar specifications to compare our findings with earlier waves of NLSY data. In addition, birth order has strong effects that are empirically and conceptually different from the effects commonly associated with early childbearing. To separate the effects of birth order from family size, we also include a control for number of children in the dataset associated with each mother.

Although one should be concerned that birth order and number of children may be endogenous to teen childbearing (since teen mothers have more children and therefore are more likely to have a child of higher birth order in the sample), we believe it is appropriate to include these variables separately because they reflect very different family processes that affect child outcomes. Moreover, in our analysis of this dataset, birth order appears to have equally important effects for children of older mothers as it does for the children of mothers who initiated childbearing in the teen years.

While birth order is treated simply as a control with little or no discussion in the other studies, its effects on academic outcomes are so powerful that we believe it is important to highlight them as well as the effects of number of children in the family. Within table 3, higher-parity children perform significantly

worse on all academic tests. Children with more siblings have lower PPVT scores and are more likely to repeat grades.

Because birth order and number of children in the family are arguably endogenous to maternal age at first birth, and because they have important effects, we ran the models in Table 3 without the two birth order dummy variables and without number of children in the family. The pertinent coefficients from these regressions are shown in Table 5. Note that when birth order and number of children in the family are removed from the regression specification, the coefficients on all variables marking teen childbearing become statistically significant and substantially more negative in predicting the PPVT and PIAT reading comprehension test scores. The effect of very early childbearing (at 16 or earlier) on PIAT math score also increases and becomes statistically significant.

However, even without birth order and number of children in the model, comparison of Tables 2 (with just child age controls) and 5 indicates that inclusion of background characteristics substantially reduces the effects of early parenting on academic outcomes for children. However, the effects are only driven to zero once birth order is included in the model.

[Table 5 About Here]

Birth order and number of children do not appear to play the same role in our analysis of behavioral outcomes. When we remove them from the models predicting behavioral outcomes shown in Table 3, the pattern of coefficients on maternal age at first birth are substantially unchanged. These coefficients are also shown in Table 5.

Alternative Approaches

For the outcomes in which a teen childbearing effect remained after the inclusion of extensive controls, we attempted several additional techniques (results not shown) to address potential unmeasured heterogeneity. However, inadequate statistical power eliminated the possibility of using each of these approaches to produce convincing results. We computed fixed-effects cousin comparison models for all outcomes. In all cases, we obtained small point estimates from these models, however, the accompanying standard errors were large enough to permit clinically significant effects. We also attempted to compare the children of women who began childbearing as teens and the children of women who experienced miscarriages as teens and their first live births after their teen years. Finally, we tried to use age at menarche as an instrument. In both the miscarriage comparisons and the instrumental variables analyses, we lacked adequate sample size to obtain usable results.

Discussion and Conclusion

Study Limitations

Our goal was to investigate the causal role of teen childbearing itself as opposed to identifying a full range of the factors that cause the child outcomes in question or mediate between teen childbearing and the outcomes. Thus, we do not present a detailed longitudinal picture of the evolving family environment available to children. For example, we expect that changing household composition may play an important role as well as changes in family income over time. Paternal age and involvement and neighborhood, peer, and community factors are also of likely importance. A cross-sectional analysis is sufficient to determine whether the children of teen mothers experience adverse outcomes (indeed,

inclusion of dynamic factors after the child's birth would be endogenous). It is not sufficient to provide a rich causal explanation of any resulting teen parent effects.

While we have good measures for mothers' academic ability and several features of her socioeconomic background, we have less extensive data regarding other parental skills, attitudes, and resources that may influence behavioral outcomes. Factors such as both maternal and paternal disciplinary style, mental health, and role model effects may be especially important in predicting child behaviors, yet are more difficult to measure in feasible survey data. It is possible that these more subtle characteristics and behaviors may also be correlated with self-selection by young men and women into the role of teen parenting.

Although the NLSY is a high-quality dataset, it nonetheless contains anomalies, inconsistencies, and likely misreporting. We performed extensive data cleaning to address these issues, but some data quality issues remain. As in most studies of hidden or stigmatized behavior, we rely on potentially unreliable self-reports. Our two reports of male pregnancy highlight the additional problem of adolescent whimsy and deliberate false reports. The study design of the NLSY also limited available data. We have less extensive data regarding initial life circumstances for children born before the initial 1979 survey wave than we do for children born in later years.

NLSY study design has a particularly strong impact on our resulting sample of adolescent and young adult children of the original NLSY cohort. Most NLSY children in the adolescent and young adult sample are still relatively young (in the mid-teen years). The adolescents and young adults with available 1996 data are disproportionately born to teenage mothers (often young teenage mothers) hence they are not fully representative of the population of similar-aged teens. In addition, given the age restrictions in the original NLSY sample, no mothers of the adolescent and young adult sample initiated

childbearing after the age of 24. In terms of the behavioral effects we find, this sample creates a conservative test as the inclusion of later childbearers would likely increase and not diminish estimated effects of early childbearing. The mothers in the test score analyses could have started childbearing as late as their mid-30s. We employ age and period controls to ameliorate resulting potential biases. However, the age structure appears to be an intrinsic limitation of the NLSY.

Our study contains several other limitations. AFQT is measured after the first birth for a small proportion of women, complicating proper causal interpretation of this variable. Analysis of post-1980 births suggests that this limitation does not appreciably change our point estimates. However, our limited sample size prevents us from exploring this issue in greater depth.

Interpreting the Results

Compared with other children and young adults in the NLSY sample, children of teen mothers were more likely to score poorly on tests of academic skill, to be retained in school, to initiate early sexual activity, and to display problem behaviors such as truancy and fighting. We found no zero-order correlation between timing of first birth and a child's use of tobacco or marijuana. For the outcomes correlated with timing of motherhood, children of young teen mothers displayed worse outcomes than did children of teen mothers who experienced later first-births.

Although teen childbearing is a powerful *marker* for adverse outcomes, it appears to play little or no causal role for the academic outcomes we measure. Controlling for maternal background factors, maternal age at first-birth has no statistically or clinically significant association with performance on standardized academic tests or with the probability of grade retention in school. (However, teen parenthood is related to birth order and number of children in the family which are in turn related to test

scores.) We found a different pattern for the behavioral outcomes. For early sexual initiation, truancy, and fighting, the relationship with teen motherhood survives inclusion of extensive background controls. Thus, different child outcomes appear to be influenced by different causal pathways and different characteristics of the family and home environment.

Our findings regarding academic outcomes are consistent with those of Geronimus and colleagues (1994) who studied a younger sample of children. The Geronimus et al. analyses left open the possibility that teen childbearing is associated with long-term differences in academic outcomes for children. Our analysis of more recent data that include older children finds no such detrimental effect. Additional analysis of one key measure—children’s grade retention in school—yielded the same results. For academic outcomes, public alarm over teen childbearing itself seems misplaced. However, our birth order and number of children in the family results may indicate that curtailing family size may have some benefits. Given the age of our sample, we do not examine high school completion rates. Haveman and colleagues (1997) do find teen parenthood effects on children’s probability of graduating from high school.

Our findings, like those of Geronimus and her colleagues, diverge from the findings of Moore and colleagues (1997), which show effects of early childbearing on academic outcomes using the same 1990 NLSY data as Geronimus and colleagues (1994). Our different results appear to reflect our inclusion of mothers’ AFQT scores as a predictor of children’s academic performance. When we remove AFQT from the models, we too find effects on the academic outcomes. AFQT’s strong effects are likely due to a combination of factors. AFQT scores reflect maternal genetic endowment to some degree, but since scores are also affected by environment and education (see Winship & Korenman, 1997), they may capture some of the socioeconomic differences between teens that contribute to

selection into early childbearing. Due to assortative mating, scores also partly proxy for paternal genetic and socioeconomic background (Phillips, Brooks-Gunn, Duncan, Klebanov, & Crane, 1998). Since we are interested in the effects of early parenting independent of parental cognitive ability and the environmental factors associated with AFQT scores, we believe it is appropriate to include AFQT in these regressions.

Like the previous papers, we included birth order in our analyses—another important variable correlated with early childbearing. Indeed, while teen parenthood net of family size and a child's birth order does not appear to predict academic test scores of children, it does appear to play a role in these outcomes through its relation to family size.

Our findings of teen parenting effects on behaviors are consistent with studies of related adolescent and young adult outcomes. For instance, Grogger (1997) finds that net of background factors, male children of teen mothers have slightly higher incarceration rates than the sons of older mothers. Similarly, Haveman and colleagues (1997) find that teen motherhood effects on a daughter's chances of becoming a teen mother survive the inclusion of background factors in models. Our findings lend support to the hypothesis that early parenting plays some causal role in problem adolescent behaviors. However, our results are also consistent with the possibility that unmeasured factors correlated with early parenting account for the observed effects. While fixed-effects cousin comparisons eliminated teen childbearing effects on behavioral outcomes, the standard errors were too large to reject the possibility of clinically important effects.

Our current methodology does not allow us to examine *why* teen parenting might have harmful effects. Early childbearing is strongly correlated with reduced economic well being, particularly during the early childhood years. This economic consequence may deny children important material resources

needed for successful development and psychological well being. Although such income effects are certainly plausible, Mayer (1997) argues that this direct material route cannot fully account for the observed variation in child outcomes. In analyses not shown here, we find that early parenting effects survive the inclusion of a rudimentary income measure, a finding consistent with Mayer's argument. However, we hope in future work to provide a more systematic income analysis to explore these questions.

It is also possible that young mothers do not have the maturity and life experience or social supports necessary for highly developed parenting skills. Without these skills, young mothers may not be able to shape appropriately their children's activities and behavior. If children's academic performance is particularly shaped by innate ability, by the quality of school inputs, and by parents' basic academic skills, it is possible that immature parenting styles or over-stressed parents have a larger impact on problem behaviors than they do on children's academic skill.

The fact that higher birth order children have worse outcomes in our models may be interpreted as evidence against the parenting skills argument, since arguably women should have time to develop parenting skills by the time they have additional children. However, these positive effects could be overshadowed by the increased parental stress additional children can bring.

A third possibility is that young parents themselves may be more ambiguous role models in discouraging certain behaviors. Children may mimic their parents' past behavior, which includes early sexual activity and pregnancy.

The relationship between early childbearing and child outcomes alternatively may not be mediated by any of the above individual factors but by social structures such as neighborhood context and the peer groups of children that may result from teen parenting. If, for instance, early parenting ties

women disproportionately to disadvantaged neighborhoods through effects on income, breadth of social networks, or some other mechanism and if neighborhoods do indeed affect child outcomes; the negative child behaviors we measure may result. This scenario is distinct from arguments about the causal role of teen mothers' socioeconomic background. Here, the focus is on contextual disadvantages that stem from early parenting itself as opposed to prior such disadvantages that may lead to adolescent motherhood. We plan to investigate the role played by these possibly mediating paths in future work.

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