

Waiting until early 20s to have kids brings no health benefits later on

January 20 2016, by Susan Kelley

Since the 1960s social policies have discouraged teen pregnancy and promoted the benefits of women having children later in life and getting married.

But [women](#) who wait until their early 20s to have kids have no [better health](#) at age 40 than moms who gave birth as teens, a new study suggests. And getting married after having kids is no panacea.

"The take-away is that there are still stresses involved with having children in your early 20s, compared to waiting until your mid to late 20s," said co-author Sharon Sassler, professor of policy analysis and management in Cornell's College of Human Ecology. "You might be trying to juggle work and school. You might not have great health care coverage. You might not have access to great child care. The father of your child might not be great partner material. You might be more likely to smoke and drink. These accumulate and increase the health disadvantages associated with having kids."

The study, "First-birth Timing, Marital History, and Women's Health at Midlife," appears in the December issue of *Journal of Health and Social Behavior*.

The researchers also looked at how marriage affects the midlife health of women who were single when they had kids and married afterward, compared to single moms who never married.

For single African-American women, getting married after having a child was tied to worse health at age 40 than their counterparts who stayed single, the study found. This is despite the fact that single African-American women have been the prime targets of [social policies](#) that promote marriage, Sassler said.

"The idea that women should just get married, rather than find somebody who might be a good co-parent of their child, might be more dangerous to these women's health," she said. "Unclear here are what kinds of spouses are available for these women. Many of the available men also have children with other parents, so there's a lot of economic stress on these men to provide child support across families, and that creates tensions with new spouses."

The authors looked at 29 years of data from 3,348 women born between 1957 and 1965 who participated in the National Longitudinal Survey of Youth 1979. The women in the sample had a first birth between the ages of 15 and 35 while they were married or single. (Those who were divorced at the time they gave birth were excluded.) They were interviewed every one to two years from 1979 through 2008. At age 40, the women were asked to rate their health on a scale from one to five.

Overall the research underlines the need for social policies that provide young parents with good [health](#) care, affordable high-quality [child](#) care, paid maternity leave and especially easy access to contraception.

"A lot of this has to do with inadequate contraceptive coverage," Sassler said. "Everyone thinks, 'Oh, you just go to a clinic that provides family planning to low-income and uninsured people.' But people worry about the out-of-pocket expenses, or the protesters there or finding the time to go there. We tend not to think about these issues that prevent access to contraception."

More information: K. Williams et al. First-birth Timing, Marital History, and Womens Health at Midlife, *Journal of Health and Social Behavior* (2015). [DOI: 10.1177/0022146515609903](https://doi.org/10.1177/0022146515609903)

Provided by Cornell University

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