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Labor Market Decisions, Children's Health, and Divorce

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Abstract

There are numerous contributing factors that should be taken into account in any marriage or divorce decision. This paper examines the interaction effects of a child's health with other important factors on the likelihood of divorce, such as labor market

1 Introduction

The existence of children in a marriage can dramatically change the interactions between the parents. Most often, children are treated as a quasi-public good that enhances the marriage quality. Indeed, many researchers find that the existence of children in a marriage not only increases the overall welfare of the parents, but also decreases the likelihood that the parent's will divorce. Most people who decide to have a child will give birth to a healthy child. However, there is an unfortunate minority who will give birth to children who are born with defects that will require a doctor's attention. If this condition is chronic, then the unhealthy child may place additional strain on a marriage; if these strains are great enough, the couple may even decide to divorce. This paper empirically explores the relationship between the health of a child with the likelihood that their parents are divorced. The child's health is also interacted with other key variables, such as labor market decisions and divorce legislation, which allows for cumulative effects of the individual stresses.

Several factors must be taken into account when a couple decides to divorce. The type of divorce legislation that is in place, be it unilateral, where only one partner needs to desire a divorce before one is granted, or mutual consent, where both parties must consent to the divorce, can serve to induce divorce or prevent it. Since the unilateral divorce revolution in the early 1970s, 28 states introduced some form of unilateral divorce legislation. As of 2002, 34 states had some form of unilateral divorce legislation in place. In states where mutual consent divorce legislation is in place, both partners need to agree to the divorce before one is granted. This serves as a barrier to divorce in marriages in which only one partner desires a divorce. Unilateral divorce legislation decreases the economic cost of divorce and further serves to encourage divorce as only one partner needs to consent before a divorce is granted.

Divorce can have important economic implications for both the parents and the child. According to the Census Bureau, roughly 50% of marriages in the United States end in

divorce. As of 2002, 23% of children under 18 lived with their mother only. The overall proportion of persons married has also gone down over time. As of 2002, 59% of the population was married. This is down from 72% in 1970 and 62% in 1990¹. The percent of people who have never married by the age of 35 is 23 percent for males and 16 percent for females as of 2002. These facts are important for several reasons. Pedersen, Rubenstein, and Yarrow (1979) found that infants raised without fathers were less cognitively competent than infants raised in two-parent families even though mothers in single- and two-parent families behaved similarly. Children from single-female-headed households are more likely to drop out of high school, less likely to attend college, and experience teen births. Children who come from single-parent households also tend to earn less income in their adulthood (McLanahan and Sandefur, 1994). Divorce decisions can affect not only the distributions of marital surplus before the divorce occurs, but the individual decision to work or stay home after the divorce.

The fact that an unhealthy child may destabilize a marriage has not only important economic implications but can also have important policy implications. Between 1996 and 2004, 7.9% of all children born were underweight, with 1.5% having a very low birth weight². As of 2006, 15.8% of individuals had no form of health insurance. Unhealthy children need more time and resources than their healthy counterparts. This makes them more likely to be subject to the economic hardships that often follow divorce. Fertig (2005) finds that parents of less healthy children in the United States were 50% more likely to divorce. This was not the case in the United Kingdom, which has a universal health care policy. Specific policies may be needed to deal with the needs of disabled children who live with a single parent, or to reduce the stresses on couples who are raising disabled children.

Fertig's 2006 findings that unhealthy children in the United Kingdom, where there is a universal health care system, do not significantly increase the incidence of divorce, can

¹<http://www.divorcemag.com/statistics/statsUS.shtml>

²<http://209.217.72.34/HDAA/TableViewer/tableView.aspx?ReportId=224>

have some potentially interesting policy implications in the United States. As noted in

the gains from marriage. This is due to the fact that under mutual consent laws, the partner who retains custody of the child is worse off in divorce as they will have to accept more of the negative shock of a sick child. This implies that the custodian will require a higher post-divorce transfer from the non-custodian partner in order to be willing to divorce. The

healthier child in order for the marriage to remain attractive.

This paper uses the National Longitudinal Survey of Children and Youth 1979 (NLSY79) and develops a probit MLE model in order to empirically test the existence of these interaction effects. Interaction terms are included in the estimation that control for parent's labor force decisions, divorce regimes, and the health of the child along with several controls that are of importance in the marriage-divorce decision. The data covers all years starting in 1979 through 1986 and covers every other year through 2004 and initially surveyed 12686 individuals. Over time, though, individuals dropped out of the survey and so the number of viable observations also decreases over time.

As suggested by Snipes (2007), interaction effects should be taken into account as each variable contributes stress to the marriage individually, but they may also play upon each other, enhancing each other's effects so that they play a larger role than they would individually. This paper takes these cumulative effects into account.

The main finding of this paper shows that interaction effects do in fact exist and account for 24 percent of the total effect of having both parents working full time in the market and 49.8 percent of the total effect of having an unhealthy child. These interactions are significant at a 95 percent confidence level. The direct effect of these shocks is also shown to

The remainder of this paper proceeds as follows. Section 2 provides a brief review of the literature. Section 3 describes the data used. Section 4 describes the empirical methodology, discusses the results, and examines different specifications and techniques in order to test the robustness of the results and are discussed further in section 4. Section 5 concludes.

of individuals in a marriage can potentially have large repercussions for the stability of the marriage and their roles are examined here.

Other papers explore the role of children. The existence of children is found to play an important role in determining the share of marriage rents that an agent receives (Chiappori, 1997). Weiss and Willis (1997) find that the existence of children also decreases the likelihood of divorce, as do the existence of high divorce costs and types of divorce legislation in place; however, they do not take into account the effects of the child's health. Brown and Flinn (2007) develop a continuous time model that allows for strategic behavior between parents in making child quality investment choices. They find that changes in the family law environment have relatively small impacts on the value of child quality, but that the impact on the welfare distribution of the parents is substantially greater. These papers did not take into account the fact that the child may be unhealthy, which would serve to decrease the appeal of the marriage. While the presence of a child may serve to enhance the appeal of a marriage, the fact that the child is unhealthy will serve to offset some, if not all, of the benefits derived from the child.

Mauldon (1992) explores how a child's characteristics affect the child's experience of divorce instead of the effects of children on adults probability of divorce. She finds evidence that both congenital and non-congenital problems put children at higher risk of parental divorce at every age up to nine. She also finds that older black children are no more likely to experience divorce than older white children; however, younger black children are more likely to experience divorce. She also finds that having a mother who married young increases the likelihood of divorce as do mothers with higher education levels. Fertig (2006) estimates reduced form equations and shows that the presence of sick children, specifically children of low birth weight, increased the likelihood of divorce in the United States by about 50 percent. She further argues that the effect of low birth weight on parental divorce in the United States is causal given that there are few direct channels through which a parents'

divorce can lead to a low birth weight birth, reducing the probability of reverse causality. She also finds that in the United Kingdom, which has universal health care, a child's low birth weight has no effect on divorce. This is due to the fact that the universal coverage helps to mitigate infant health problems. As noted in the introduction, this finding can have some potentially important policy implications.

This paper is an attempt to take into account all of these factors, divorce legislation, labor market decisions, and not only the presence of children but their health as well, that had previously been examined separately. It examines the cumulative effects of these separate stresses while allowing them to be individually significant as well. The stresses examined here all need to be taken into

questions on educational attainment, training investments, income and assets, health conditions, workplace injuries, insurance coverage, alcohol and substance abuse, sexual activity, and marital and fertility histories. Starting in 1986, specific questions regarding the children of the original NLSY respondents were also collected every other year thereafter. The data collected in these surveys covered questions about their health, attitudes, reading and comprehension test scores, and several other variables. Starting in 1994, children of NLSY respondents who were at least 15 years old were also interviewed.

Information pertaining to specific divorce laws and child custody and child support payments were obtained from the Cornell University School of Law website³. Table 1 lists the years the states first changed to a unilateral divorce legislation. As of 2004, 17 states (including the District of Columbia) had not adopted a unilateral divorce legislation.

3.1 Descriptive Statistics

Table 2 provides descriptive statistics for the sample demographic variables. There are several things worth noting upon examining Table 2, such as the data on the number of children in the household, including biological, step, and adopted children. The average number of children present in the house is increasing over time until 2002. This is to be expected; as the respondents grew older, they became more likely to have given birthpro cnttle653(the)-341(resp)-

respondent's working full time rises. In 1988, 43.8 percent of respondents worked full time. By 2002, that number had jumped to 65.81 percent. The percentage of female respondents in the NLSY79 is about 50 percent and this proportion remains fairly constant over the sample period. The percentage of respondents with a high school education or better is 74.6 percent after 1984 and 64 percent over the entire sample. This is at least due in part to the fact that a number of respondents may not have been old enough in 1984 to have yet graduated from high school. The percentage of couples in which both parents work full time in the market is 54.8 percent over the sample period. This is close to the percentage found in the general population, which is around 50 percent.

Descriptive statistics for health measures are given in Table 3. For the purposes of this

The most important column is column one, which provides correlations between the divorce decision and the key shocks examined in this paper. All variables are positively correlated with divorce, as should be expected. The largest correlation is between the labor market decision and the decision to divorce. Also of note are the correlations between the \shock"

| Variable | Deñition |
|----------|---|
| Div | indicator equaling one if the person is divorced and zero otherwise |
| income | log of the income of the respondent |
| spinc | log of spouse's income |
| age_rst | respondent's age when their rirst child was born |
| rirstmar | respondent's age when they rirst married |
| rhrwork | |

variables. We would expect that a unilateral divorce legislation to have a low correlation with the child health variables, as the type of legislation in place should play little, if any, role in determining the health of a child. The fact that unilateral divorce legislation is in place could be taken into account in determining the distribution of marital rents and then in turn these rent shares may affect the health of the child is one avenue that a unilateral divorce legislation could affect a child's health. Examining the column containing the unilateral divorce legislation variable, we see that the correlations are indeed low. Similarly, the correlation between living under a unilateral divorce regime and the fact that both parents work full time in the market is very low. The correlations between both parents working full time in the market and the health of the child are also small.

Table 5 provides estimates for the baseline probit regression. The first column shows estimates with limited child health information in order to give baseline estimates for comparison. Column two includes several other child health parameters. Column three includes child health information as well as several interaction variables. This is the main specification. Table 6 provides the marginal effects of the probit estimates and Table 7 provides coefficients for alternate specifications.

4.1 Probit Results

As can be seen from table 5, the coefficient for whether or not a child with a condition that requires a doctor's supervision is present in the house is positive, indicating that a child's adverse health plays a role in the parents deciding to divorce. However, the coefficient is insignificant in the main specification, with a p-value of 0.15. In columns one and two, however, the presence of an unhealthy child is a significant factor in the parent's decision to divorce at at least a 90 percent confidence level. According to Table 6, the presence of an unhealthy child increases the likelihood of divorce by about 2 to 2.6 percent at the average. This positive relationship is in line with Fertig (2006) who also found that parents

of unhealthy children were more likely to divorce, although the effect found here is less than what was found there. One way we can interpret this finding is to say that the coefficient on the health measure implies that the economic costs of staying married are increased, or alternately that the gains from marriage fall. Snipes (2007) argues that the adverse health of the child introduces a shock that reduces the utility of both parents in a marriage. In divorce, then, at least one parent is better off in divorce as they will not have to bear the full brunt of the burden of the sick child, assuming that only one parent has primary custody. The estimate for total number of children requiring a doctor's supervision is negative but insignificant, with a p-value of 0.509.

Table 5 shows that an increase in the total number of children with a chronic condition present in the household increases the likelihood of divorce. The estimate for the total number of children with a chronic condition is positive at 0.2161 and is significant at a 95 percent confidence. Table 6 implies that each chronically ill child increases the likelihood of divorce by about 3 percent. This is not surprising as a chronic condition is more likely to be around to stay. We would expect that the more children with a chronic condition that exist in a household, the larger would be the associated costs and strain and would thus be more likely to induce divorce. The fact that the condition is chronic means that the costs associated with the sick child are also prolonged and the marriage will therefore have to endure the shock for a much longer time, if not forever. In a marginal marriage where only one partner desires a separation, divorce may temporarily be able to be prevented through such mechanisms as intra-household reallocation of resources. For example, one partner may have to leave the labor market and stay at home with the child. However, these reallocations may not be a sustainable arrangement over time and the temporary fix may not be enough

number of children in a household with a chronic condition with the estimate for any child having a chronic condition. The estimate for the total number is larger than the estimate

divorce before one is granted. Marriage contracts in this case will not necessarily be efficient. This is not the case under a unilateral divorce regime. Under a unilateral divorce regime, the partner that desires the divorce can now leave. Further, it may serve to enhance the efficiency of marriage contracts by providing more perfect information pre-marriage.

The coefficients on the hours worked per week in the market by the respondent and their spouse are negative; however, only the estimate for the spouse is significant in all specifications. These estimates imply that for every additional hour the spouse worked in the market, the couple is about 0.05 percent less likely to be divorced. These estimates, however, are small and their marginal effects are correspondingly small. At least part of this effect could be explained by the fact that, up until 1989, most of the respondents did not work full-time in the market. Any additional income that is brought into the household from working an extra hour (up until full-time) would then more than likely be seen as a positive addition to the marriage and would thus decrease the probability of divorce.

What is much more important than the changes in the number of hours worked is the estimate for both parents working full time in the market. This effect is large and significant in all specifications, with an estimate of around 0.46 at a 95 percent significance. This implies that if both parents work full time in the market, ceteris paribus, they are around 7.5 to 8 percent more likely to be divorced. There are several reasons why this might be so. If both partners work full-time outside of the home, there will be less time to devote to the marriage and to each other. If problems arise, be they health related or otherwise, there may not be as much time to address and settle these issues before they become serious and potentially marriage ending. Less time will be spent toward enhancing the quality of the marriage or simply gaining pleasure from each other's company, decreasing the attractiveness of the marriage. The added stresses that often come with a full-time job, such as working overtime or the strains from trying for promotions, can spill over into the marriage and cause strain that would otherwise not necessarily be there. The magnitude of the estimates for

both parents working full time are robust to changes in specification as is their significance.

have time to stabilize before the shock of a child is introduced into the household. Younger parents may also not be able to handle the additional stress of a child. The estimate shows that this is not the case. The education levels of both the respondent and their spouse are both positive and significant. Education decisions as well as labor market decisions that are made before marriage provide a potential partner with information that may serve to better match individuals before marriage which in turn makes for more stable marriages. If an individual puts off getting married or having children, then these decisions are more likely to be made. Minorities are more likely to be divorced in the sample. However, the estimate for minorities is insignificant.

Three interaction terms are included in the main specification and in all other alternate specifications.⁴ There are three possible interactions between the three key variables, *unidoc*, *unifull*, and *docfull*, where the definitions of each are given in the table above. Table 5 shows that the interaction between both parents working full time in the market and the presence of an unhealthy child is negative and significant at a 95 percent confidence. The estimate is -0.1585, which implies that this interaction decreases the the likelihood of divorce by about 0.02602 percent. In order to obtain the total effect of an unhealthy child and both parents working full time in the market, one needs to add both the direct effect, given as the marginal effect of the variable itself, with the interaction effect. Doing this shows that the interaction effect accounts for 24 percent of the total effect of having both parents working full time and 49.8 percent of the total effect of an unhealthy child. Seventy six percent of the effect of having both parents working full time in the market and 50.2 percent of the effect of an unhealthy child is then driven by direct effects. This shows that interaction effects do indeed play a role in the divorce decision and should be taken into account when estimating the determinants of divorce. The effects of the individual variables not only play

⁴When the interacted variables are both dummy variables, the interaction effect is the discrete double difference: $\frac{\partial^2 F(u)}{\partial x_1 \partial x_2} = \odot(\beta_1 + \beta_2 + \beta_{12} + X\beta) - \odot(\beta_1 + X\beta) - \odot(\beta_2 + X\beta) + \odot(X\beta)$

a role independently but they also interact with each other and have a cumulative effect that is not captured when considering the variables individually. A three way interaction term combining all three effects was also included in similar estimations used here. However, the effect was always insignificant and is thus not included here. The other two interactions considered are insignificant with p-values of 0.268 for

are more likely to marry each other and less likely to divorce once married. More importantly, the magnitudes, signs, and significance levels for the estimates of the other variables remain fairly constant throughout all specifications, showing that the results presented above in section 4.1 are robust to changes in specification.

As mentioned above, missing data issues are of particular importance in the NLSY79. Therefore, the data used in estimation include mean-value imputed data. One alternative to this is multiple imputation. This process was first developed by Rubin (1987). Instead of filling in a single value for each missing value, Rubins multiple imputation strategy replaces each missing value with a set of plausible values. This replaces missing observations with values that reflect the uncertainty in the missing value. By allowing more than one value on a missing variable to be estimated, multiple imputation corrects for sampling variability. Missing values are filled in using a Markov Chain-Monte Carlo (MCMC) simulation. A Markov chain is a sequence of random variables in which the distribution of each element depends on the value of the previous one. In MCMC, one constructs a Markov chain long enough for the distribution to stabilize to a common distribution. In essence, this method takes into account all available information and predicts plausible values for missing data. This method was attempted but abandoned as it failed to obtain convergence in distribution for the missing values.

Robust errors were also taken into account when estimating equation (1). Robust errors seek to provide methods that emulate classical methods, but which are not unduly affected by outliers or other small departures from model assumptions. The probit regression was run

5 Conclusions

There are numerous contributing factors that need to be taken into account in any marriage or divorce decision. These factors may play upon each other and serve to compound any potential problems that the individual factors taken by themselves would not capture. This paper examines the interaction between several important variables. Not only can living in a state with a unilateral divorce legislation decrease the costs of divorce, but combining this effect with the fact that both partners spend more time out of the house and the presence of a sick child can greatly decrease the appeal of the marriage. This will in turn increase the likelihood of divorce. The interaction of two of these effects, the stress of an unhealthy child and having both parents working full time in the market, is shown here to be significant. This finding combines several other findings that show that these factors, while individually significant, are also significant when interacted, depending on the effects interacted. This implies that the stresses that accompany having an unhealthy child and having both parents work full time in the market enhance each other and serve as further deterrents to remaining married. This finding has some potentially important policy implications. The effects of a divorce can be significant and long-lasting for both the parents and especially for children. If health care provisions are provided, the effects of an unhealthy child will be reduced by offsetting at least the pecuniary consequences associated with increased medical costs. If pre-natal care is provided, the potentially deleterious effects of an unhealthy child may be offset all together. Increased maternity leave may also help to combat the negative effects of these variables as it will allow a parent to spend more time at home with a new child. This may be especially important since early childhood is of particular importance in the development of cognitive abilities.

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Table 1 - Year of Switch to Unilateral Divorce Legislation Across States

| State | Year | State | Year |
|---------------|------|---------------|------|
| Alabama | 1971 | Michigan | 1972 |
| Alaska | 1935 | Minnesota | 1974 |
| Arizona | 1973 | Montana | 1973 |
| California | 1970 | Nebraska | 1972 |
| Colorado | 1972 | Nevada | 1967 |
| Connecticut | 1973 | New Hampshire | 1971 |
| Delaware | 1968 | New Mexico | 1933 |
| Florida | 1971 | North Dakota | 1971 |
| Georgia | 1973 | Oklahoma | 1953 |
| Hawaii | 1972 | Oregon | 1971 |
| Idaho | 1971 | Rhode Island | 1975 |
| Indiana | 1973 | South Dakota | 1985 |
| Iowa | 1970 | Texas | 1970 |
| Kansas | 1969 | Utah | 1987 |
| Kentucky | 1972 | Washington | 1973 |
| Maine | 1973 | Wisconsin | 1978 |
| Massachusetts | 1975 | Wyoming | 1977 |

Table 2 - Parameter Averages

| Year | Number of Children in the Household | Respondent Works Full Time in the Market | Spouse Works Full Time in the Market | Percent of Respondents with a High School Degree or Better |
|------|-------------------------------------|--|--------------------------------------|--|
| 1979 | 0.17 | 33.4% | 87.94% | 11.4% |
| 1980 | 0.12 | 33.9 | 89.21 | 20.5 |
| 1981 | 0.24 | 40.4 | 90.5 | 27.6 |
| 1982 | 0.33 | 47.6 | 90.14 | 39.2 |
| 1983 | 0.42 | 33.3 | 88.85 | 52.2 |
| 1984 | 0.52 | 26.4 | 90.26 | 71.3 |
| 1985 | 0.58 | 6.3 | 90.82 | 80.9 |
| 1986 | 0.68 | 40.0 | 91.5 | 79.9 |
| 1987 | 0.79 | * | 90.74 | 77.3 |
| 1988 | 0.91 | 43.8 | 89.23 | 71.6 |
| 1989 | 1.00 | 50.0 | 90.97 | 73.0 |
| 1990 | 1.08 | 55.6 | * | 71.2 |
| 1991 | 1.14 | 16.67 | 93.0 | 78.9 |
| 1992 | 1.21 | 33.3 | 90.7 | 75.1 |
| 1993 | 1.28 | 66.67 | 88.78 | 71.7 |
| 1994 | 1.32 | 61.67 | 89.63 | 72.1 |
| 1996 | 1.40 | 61.73 | 93.24 | 73.2 |
| 1998 | 1.46 | 61.37 | 93.5 | 78.8 |
| 2000 | 1.43 | 65.19 | 93.82 | 68.0 |
| 2002 | 1.38 | 65.81 | 92.83 | 80.5 |
| 2004 | 1.29 | 64.63 | 92.44 | 70.7 |

Table 3 - Health Parameter Averages for Households With Children

| Year | Percent of Households With a Child Requiring Doctor Supervision | Average Number of Children Requiring a Doctor Per Household | Percent of Households With a Child With a Chronic Condition | Average Number of Children With a Chronic Condition Per Household |
|------|---|---|---|---|
| 1986 | 8.3% | 0.089 | * | * |
| 1988 | 8.7 | 0.095 | 63.1% | 0.673 |
| 1990 | 9.6 | 0.102 | 66.6 | 0.719 |
| 1992 | 10.1 | 0.115 | 71.2 | 0.738 |
| 1994 | 9.7 | 0.109 | 64.3 | 0.701 |
| 1996 | 11.1 | 0.127 | 67.1 | 0.767 |
| 1998 | 9.8 | 0.108 | 71.0 | 0.798 |
| 2000 | 10.4 | 0.114 | 73.6 | 0.802 |
| 2002 | 7.6 | 0.082 | 72.5 | 0.781 |
| 2004 | 7.6 | 0.080 | 71.4 | 0.774 |

* Variable is not available for that year

-0.0160-0.0088

Table 4 - Ordinary Correlation

| | Divorced | Both Full | U D | Total Doctor | Any Chronic |
|--------------------|----------|-----------|--------|--------------|-------------|
| Both Full | 0.4214 | | | | |
| Unilateral Divorce | 0.0368 | 0.0068 | | | |
| Any Doctor | 0.0195 | -0.0160 | -0 | | |
| Total Doctor | 0.0209 | | | 0.9545 | |

Table 5 - Parameter Estimates

| Variable | Estimate 1 | Estimate 2 | Estimate 3 |
|---------------------------------|----------------------------|----------------------------|----------------------------|
| Income | 0.0232865* (0.0018302) | 0.0232088* (0.0018311) | 0.0232276* (0.0018317) |
| Spouse Income | -0.0203922* (0.002948) | -0.0204504* (0.0029487) | -0.0205366* (0.0029489) |
| Age at First Birth | 0.0306396* (0.0009589) | 0.0305475* (0.0009768) | 0.0305171* (0.0009769) |
| Age at First Marriage | -0.0857065* (0.0023739) | -0.085869* (0.0023781) | -0.0858413* (0.002378) |
| Hours Worked Per Week | -0.0014138 (0.0012641) | -0.0014231 (0.0012646) | -0.0014116 (0.001264) |
| Hours Worked Per Week (Spouse) | -0.003833* (0.0008218) | -0.0038508* (0.000822) | -0.0038357* (0.0008223) |
| Both Parents Work Full Time | 0.4333244* (0.0557044) | 0.4320322* (0.0557321) | 0.4596028* (0.0587161) |
| Education | 0.0280868* (0.0061167) | 0.0280973* (0.0061154) | 0.0279103* (0.0061175) |
| Minority | 0.0218805 (0.0141021) | 0.022177 (0.0141071) | 0.0220399 (0.0141095) |
| Number of Children in Household | -0.0250035* (0.006469) | -0.0263055* (0.0065427) | -0.0265052* (0.0065442) |
| Spouse's Education | 0.0156368* | | |

Table 6 - Marginal Effects of Probit Estimates

| Variable | Estimate 1 | Estimate 2 | Estimate 3 |
|---|-------------|-------------|-------------|
| Income | 0.0033626* | 0.003351* | 0.0033519* |
| Spouse Income | -0.0029447* | -0.0029527* | -0.0029636* |
| Age at First Birth | 0.0044244* | 0.0044105* | 0.0044039* |
| Age at First Marriage | -0.0123762* | -0.012398* | -0.0123876* |
| Hours Worked Per Week (Respondent) | -0.0002042 | -0.0002055 | -0.0002037 |
| Hours Worked Per Week (Spouse) | -0.0005535* | -0.000556* | -0.0005535* |
| Both Parents Work Full Time | 0.0766403* | 0.0763587* | 0.0821992* |
| Minority | 0.0031759 | 0.0032187 | 0.0031971 |
| Number of Children in Household | -0.0036106* | -0.0037981* | -0.0038249* |
| Spouse's Education | 0.002258* | 0.0022379* | 0.00222392* |
| Unilateral Divorce Legislation in Place | 0.0189215* | 0.0189099* | 0.0196494* |
| Any Child Requiring Doctor Supervision | 0.0198901* | 0.0260674** | 0.0262492 |
| Total Number of Children Requiring a Doctor's Supervision | | -0.0084615 | -0.0091109 |
| Any Child Has a Chronic Condition | | -0.0156272 | -0.0172627 |
| Total Number of Children With a Chronic Condition | | 0.0300096* | 0.0311857* |
| unidoc | | | 0.0315086 |
| unifull | | | 0.0015229 |
| docfull | | | -0.0260278* |

