Fragile Families and Child Wellbeing Study

A national, long-term study of the causes and consequences of childbearing outside marriage

SUMMARY

For the past decade, a research team based at Princeton and Columbia universities has been engaged in a national, long-term study of the consequences of childbearing outside marriage and has shared the resulting data and findings widely with the academic and policy-making communities. The Fragile Families and Child Wellbeing Study was supported by the Robert Wood Johnson Foundation (RWJF) from February 1, 1998 through December 31, 2011, and the study continues with support from other grants.

Out-of-wedlock births increased dramatically in the latter decades of the 20th century, and the researchers sought to fill what they viewed as an information void about this growing group of at-risk parents and their children—what the team termed “fragile families.”

The study conducted interviews with the parents of approximately 5,000 children born in 20 large U.S. cities at the turn of the 21st century and tracked these families through follow-up interviews when the children were one, three, five, and nine years old. Approximately three-quarters of the couples were unmarried at the time of birth; the married one-quarter served as a control group.

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1 The study team said it used the term *fragile families* both to make the point that unmarried parents and their children constitute families, but also that they are families at higher risk for poverty and dissolution than traditional families.
**Key Findings**

The study yielded several major findings about the characteristics and relationships of unmarried parents and explained how these and other factors influence children’s development, as reported in the Fragile Families and Child Wellbeing Study Fact Sheet.²

- “A large proportion of unmarried parents are in ‘marriage-like’ relationships at the time of their child’s birth.” Half the studied couples were living together at the time of birth, and another 32 percent were romantically involved but living apart. Less than 20 percent were not romantically involved.

- “Despite their high hopes, most parental relationships do not last, and as a result many children experience high levels of instability.” Five years after the birth of their child, only 35 percent of the unmarried couples were living together, and less than half of that group were married.

- “Relationship changes influence parental resources and contributions.” During the five years after birth, unmarried mothers had “lower income growth and worse health trajectories” than married mothers. The father’s involvement with the child declined over the five years.

- “Unmarried parents are much more disadvantaged than married parents.” Compared to the study’s married cohort, the unmarried parents were more likely to have started parenting in their teens and to have had children with other partners; to suffer from depression and substance abuse; to be poor and less educated; and to have spent time in jail.

- “Children born to unmarried parents do not fare as well as children born to married parents.” At year five, children born to unmarried parents had higher rates of obesity and asthma; lower cognitive scores; and higher levels of behavior associated with social problems.

**Policy Recommendations**

In a journal article published in *The Future of Children*, project team members recommended four steps to strengthen fragile families:³

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1. Scale up programs “to encourage more responsible sexual behavior” and expand access to contraception for individuals who might not be able to afford it.

2. Expand marriage-education programs to include job training, employment assistance, and mental health components, and rigorously evaluate existing community-based fatherhood programs to determine what increases paternal involvement.

3. Redesign government tax and assistance programs to ensure that children have access to high-quality early education and health care—with assurance that these benefits will not be cut or reduced if parents marry or live together.

4. Develop and evaluate new demonstration programs and policies in two areas: (1) assistance to help unmarried parents get a college education; and (2) penal system reform, especially initiatives providing alternatives to incarceration.

**Funding**

RWJF supported the study from February 1, 1998 through December 31, 2011 with three grants totaling $3.7 million. During that period, the study received an additional $35.4 million from other public and private sources.

The National Institute of Child Health and Human Development was by far the biggest funder, providing grants totaling $28.3 million. The Ford Foundation contributed $2.3 million, the largest amount from any of the other 17 private supporters. See Appendix 1 for the full list of funders.

**CONTEXT**

The proportion of children born to unmarried parents increased dramatically in the United States during the latter decades of the 20th century. In 1960 about 6 percent of births occurred outside marriage; by the end of the century out-of-wedlock births accounted for nearly a third of all births, according to the National Center for Health Statistics. Among Blacks and Hispanics, the proportion was higher.

This development and its implications for child wellbeing were of concern to policymakers. Reflecting a widespread view that children are better off when two parents are involved in their upbringing, the Personal Responsibility and Work Opportunity Reconciliation Act (the 1996 federal law overhauling the welfare system), offered financial rewards to states that reduced nonmarital births. Other provisions—including

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4 The three grants were to Princeton University School of Public and International Affairs, Bendheim-Thoman Center for Research on Child Wellbeing (Princeton, N.J.):

- ID# 30978 ($1,370,000, February 1, 1998 through January 31, 2002)
- ID# 38788 ($100,000, June 1, 2000 through December 31, 2001)
- ID# 43407 ($2,218,229, January 1, 2002 through December 31, 2011)
strengthened enforcement of child support requirements—were designed to increase the involvement of unwed fathers.

Both Presidents Bill Clinton and George W. Bush continued to emphasize this policy direction with other initiatives, including ones to encourage fathers to be responsible parents and to promote healthy relationships among low-income couples.

A team of researchers interested in issues surrounding single-parent families considered the scientific basis for these policies to be weak. In their view, objective data on unmarried parents and their children were sorely lacking—especially data on unwed fathers, a group that past research had found elusive.

For example, does an unwed father’s involvement improve child wellbeing, or does it increase parental conflict, ultimately leaving the child worse off? To that and other questions integral to informed policy-making, there were few solid answers, the team contended.

Led by Sara S. McLanahan, PhD, professor and director of the Bendheim-Thoman Center for Research on Child Wellbeing at Princeton University, and Irwin Garfinkel, PhD, professor in the Columbia University School of Social Work, the researchers set out to fill this information void through a multi-city, multiyear study of unwed parents and their children—what the team termed *fragile families*.\(^5\)

The *Fragile Families and Child Wellbeing Study* (Fragile Families) sought answers to four basic questions:

- What are the conditions and capabilities of unmarried parents, especially fathers?
- What is the nature of the relationships between unmarried parents?
- How do children born into these families fare?
- How do policies and environmental conditions affect families and children?

The Fragile Families team also hoped that other researchers interested in at-risk families would use the data generated by the study.

For a list of the principal investigators, see Appendix 2.

**RWJF’s Interest in This Area**

In the 1990s, RWJF increased its attention to the impact of poverty and related social conditions on people’s health and health care. As part of this expanded focus, the Foundation implemented the *Urban Health Initiative*, a 10-year, $63-million program to improve health outcomes among children in five economically distressed cities:

\(^5\) See page 1 of this report, footnote 1, for the explanation of this term.
When the Fragile Families team solicited funding for its study, RWJF agreed to support data collection in the same five cities. Although the Fragile Families research was unrelated to the Urban Health Initiative, RWJF saw the study as an opportunity to increase understanding of the health problems that young unwed parents and their children face—information that RWJF believed would inform its own grantmaking in the urban health field.6

In addition to those five cities, RWJF supported the collection of data in Newark, N.J., in collaboration with two other philanthropies: Fund for New Jersey and the Healthcare Foundation of New Jersey. RWJF, which is located in Princeton, N.J., has a national focus but recognizes a special responsibility to its home state.

**Additional Resources and a Larger Study**

Eager to increase the size of the study sample, McLanahan and Garfinkel continued to seek resources from other private and public sources. Most importantly, the team successfully solicited a $5.9 million grant from the National Institute of Child Health and Human Development—the first of what over the next decade would be four large grants from that agency. One of these new grants was to Christina Paxson, PhD, then professor of economics at Princeton,7 to support data collection and analyses of child abuse and neglect. Another was to Jeanne Brooks-Gunn, PhD, professor of psychology at Teachers’ College, Columbia University, to support data collection and analyses of children’s early education and kindergarten experiences. The upshot is that the team ended up with enough funding to support data collection in 20 cities.

As a result, the RWJF contribution represented just under 10 percent of the total funding for the study. But, says McLanahan, RWJF’s early support was critical to the team’s ability to mount a national research project. The Fragile Family study “absolutely would not have happened if we hadn’t had that money.”

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6 The Fragile Families study was one of four urban health research projects that RWJF supported in the late 1990s. Two others focused on welfare reform issues and the third addressed community capacity building. See Appendix 3 for links to separate reports on those projects.

7 Paxson became president of Brown University in July 2012.
THE PROJECT

The Fragile Families team implemented a study of approximately 5,000 families with newborn children in 20 large cities. The study featured interviews with the parents at the time of birth and tracked the families through follow-up interviews conducted when the children were approximately one, three, five, and nine years old.8

The purpose of the study was to build a body of research on the consequences of nonmarital childbearing for parents and children. Accordingly, the team structured the study sample so that most of the couples—roughly three-quarters—were unmarried at the time of birth.9 The married couples served as a control group.

While RWJF’s support ended in December 2011, the Fragile Families study is ongoing, with a new round of data collection scheduled to start in early 2014. See Afterward for more on the study’s status.

Selecting the Sample Cities

To develop a nationally representative sample of all nonmarital births in the United States, the team stratified the 77 cities with populations of more than 200,000, based on three variables—welfare generosity, strength of the child support system, and strength of the local labor market—and randomly selected 16 of the cities. Eight ranked either extremely high or low in the stratified variables and eight were in the moderate range.

In each city, the team identified birthing hospitals in which at least 10 percent of all births were to unmarried mothers. From this group of hospitals, they randomly selected hospitals and then beds within each hospital to obtain a sample of new mothers. When weighted, the data are representative of all births in U.S. cities with populations of 200,000 or more.

These were the 16 cities:

- Austin, Texas
- Baltimore*
- Boston
- Chicago
- Corpus Christi, Texas

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8 RWJF’s third and final grant, originally set to end in 2004, was extended through 2011 and helped support some data collection activities when the children were nine.

9 The sample’s precise size was 4,898 families, of which 3,712 were unmarried and 1,186 were married, the Fragile Families team reported.
- Indianapolis
- Jacksonville, Fla.
- Nashville, Tenn.
- New York
- Norfolk, Va.
- Philadelphia *
- Pittsburgh
- Richmond, Va.*
- San Antonio
- San Jose, Calif.
- Toledo, Ohio

* Identifies cities where data collection was supported at least in part by RWJF.

Three of the cities in the national sample were part of RWJF’s Urban Health Initiative: Baltimore, Philadelphia and Richmond, Va. To make the study more useful to the Foundation, the team added three additional cities, including the two other cities that were part of the Urban Health Initiative (Detroit and Oakland, Calif.) and Newark, a distressed city in New Jersey. A fourth city of special interest to the researchers because of its leadership in welfare reform (Milwaukee) was also added to the sample. The new cities are not part of the national sample; however, when weighted, these data are representative of births in the city.

For a more detailed description of the research methodology see, “Fragile Families: Sample and Design” in Children and Youth Services, 2001.\(^{10}\)

The Interviews


The initial interviews were conducted immediately after the child’s birth while the mother was still in the hospital—an approach informed by several pilot studies conducted in 1995–1996 with Ford Foundation funding. These pilots found that it was possible to gain permission to conduct interviews of new parents in the hospital, including the unwed fathers who often came to visit. If the fathers did not visit the hospital, the mothers were often willing to provide contact information for them.

While obtaining hospital permission for the Fragile Families study was labor intensive (see Lessons Learned), the interviewers were able to reach 75 percent of the unwed fathers in the 20 cities—either at the hospital or subsequently by telephone. When the father could not be interviewed, the team was often able to obtain some information from the mother. Ultimately, the study was able to conduct at least one interview with 85 percent of the unmarried fathers.

Guided by a structured questionnaire, these interviews provided data on the child’s health, the family’s economic condition, and the quality of the couple’s relationship. To measure the latter, each parent was asked how often the other parent was loving and affectionate, and mothers were asked if they had ever been hit or slapped. The unmarried couples were also asked about the likelihood that they would marry each other.

The interviewers also asked questions to measure the parents’:

- Expectations regarding the father’s rights and responsibilities
- Level of support from family and friends
- Knowledge of local policies and community resources

Follow-Up Rounds: 1999–2010

The study followed the baseline cohort through structured telephone interviews with both parents when their children reached their first, third, fifth, and ninth birthdays.

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11 The interviews were conducted in two cities in 1998 and five more in 1999 by the National Opinion Research Center at the University of Chicago under a subcontract. Interviews in the final 13 cities were conducted in 2000 under a subcontract to Mathematica Policy Research, Inc.

12 For the baseline survey, the overall response rate (including married and unmarried couples) was 86 percent for mothers (calculated as a percentage of eligible births) and 78 percent for fathers (calculated as a percentage of mothers interviewed).

The follow-up interviews updated information on the children’s health and development and on the parents’ relationship, use of health care and child-care services, and experiences with welfare and child support agencies.

In addition, the three-, five-, and nine-year follow-ups included an in-home interview with the mother or primary caregiver and an assessment of the home environment and child’s cognitive and emotional development.

The ninth-year round added a DNA component. Mothers were asked to provide saliva samples for themselves and their children so that researchers could examine the interplay between genetics and the environment.

Although participation declined over time, the team maintained what it characterized as “respectable response rates.” The rate for eligible mothers (married and unmarried) in the 20-city sample fell from 90 percent in the first follow-up to 76 percent in the last, and for fathers from 74 percent to 59 percent.

**Collaborative Studies**

In addition to following the full cohort of families (termed the core study), the Fragile Families study included a series of collaborative studies to zero in on specific topics. Some of the studies involved adding questions to the core study questionnaire; others collected additional data from a subset of the core study sample.

For example, a collaborative study of the health of children in high-risk families augmented the core interview data with information extracted from the medical records of the mother’s pregnancy and the child’s birth.

For a summary description of all collaborative studies underway or completed, see the Fragile Families Web page.14

**FINDINGS**

Members of the Fragile Families research team, which included graduate students and postdoctoral fellows, reported numerous findings in journal articles, book chapters, and other publications.

Their overarching conclusion, according to the Fragile Families and Child Wellbeing Fact Sheet:15 Children “born to unmarried parents are disadvantaged relative to children born to married parents in terms of parental capabilities and family stability. Additionally, parents’ marital status at the time of a child’s birth is a good predictor of

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14 Descriptions of the collaborative studies are available online at www.fragilefamilies.princeton.edu/collaborative.asp#topic15.
15 The fact sheet availability and source is on page 2 of this report, footnote 2.
longer-term family stability and complexity, both of which influence children’s longer-
term wellbeing.”

The following key findings are based on data collected through the fifth-year follow-up round. 16 Except where otherwise specified, the quotes and data are drawn from the fact sheet with relevant journal articles cited as well.

- **“A large proportion of unmarried parents are in ‘marriage-like’ relationships at the time of their child’s birth.”** Half the studied couples were living together and another 32 percent were romantically involved but living apart at the time of birth. Less than 20 percent were not romantically involved.
  
  - More than 80 percent of unmarried fathers provided support to the mother during pregnancy, and more than 70 percent visited the mother and baby in the hospital. The vast majority of unmarried fathers said they wanted to help raise their child.
  
  - McLanahan and a colleague report in the journal *The Future of Children* 17 that at birth more than 91 percent of the cohabitating mothers and more than half of the noncohabitating mothers said their chances of marrying the father were “fifty-fifty or better.”

  “At the time of the birth, most parents are optimistic about their future together and report relatively high levels of relationship quality,” the authors write.

  They also note that the baseline data included a seemingly contrary indicator: reports of domestic violence by unmarried mothers were nearly twice as high as by married mothers. Elsewhere the team reported an even greater difference. 18

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16 Ninth-year data became available only shortly before RWJF funding ended in December 2011; see the online bibliography at http://crcw.princeton.edu/publications/publications.asp for published articles that include subsequent research.


McLanahan, however, has described the level of domestic violence for both groups as relatively low.  

- “Despite their high hopes, most parental relationships do not last, and as a result many children experience high levels of instability.” Five years after the birth of their child, only 35 percent of the unmarried couples were living together, and less than half of those were married.

  Couples living together at the time of a child’s birth were more likely to be living together five years later than couples romantically involved but living separately at the birth. Of the couples living together, just more than 50 percent were married or cohabiting five years later.

  — After their relationship with the child’s father ended, many unmarried mothers formed new partnerships. Nearly 40 percent of all unmarried mothers entered into at least one new partnership, and about 14 percent had a child with a new partner.

    “The high prevalence of new partnerships underscores an important feature of fragile families: high partnership instability,” McLanahan wrote in a 2009 article.  

- “Relationship changes influence parental resources and contributions.”

  — During the five years after birth, unmarried mothers had “lower income growth and worse health trajectories” than married mothers. Those who ended their unions with the father also had more mental health problems.

  — The father’s involvement with his child declined over the five years. By the fifth-year follow-up, slightly more than a third of the fathers unmarried at the child’s birth were living with that child. Of the nonresident fathers, only 51 percent had seen their child in the past month.  

  — The proportion of nonresident fathers providing formal child support increased (from 11% in year one to 57% in year five). However, over that same period the proportion of nonresident fathers providing informal cash support fell—from 72 percent to 37 percent. (The proportion providing in-kind support such as clothes and toys also declined.)


The researchers suggested this could reflect the growing reach of the formal child support system; rather than increasing their contributions, the fathers replaced their informal support with formal payments.  

- **“Unmarried parents are much more disadvantaged than married parents.”**

  Compared to the study’s married cohort, the unmarried parents were more likely:

  — To have started parenting in their teens and to have had children with other partners. The baseline data showed:

    - At the child’s birth, 18 percent of the unmarried cohabitating mothers and 34 percent of the unmarried noncohabitating mothers were in their teens, compared to 4 percent of the married mothers. (The percentages were similar for unmarried fathers.)

    - Thirty-nine percent of the cohabitating mothers and 35 percent of the noncohabitating mothers previously had a child with another partner, compared to 12 percent of the married mothers. (The percentages for both married and unmarried fathers were significantly higher.)

  — To suffer from depression and substance abuse. According to self-reports from parents:

    - At the year-one follow-up, the prevalence of depression among unmarried mothers was 1.6 times as great as among married mothers, and 1.4 times greater among unmarried fathers, compared to married fathers.

    - At baseline, 21 percent of the unmarried couples reported drug or alcohol problems for at least one partner, compared to 11 percent of the married couples.

  — To be poor and less educated. At their child’s birth:

    - About a third of all unmarried fathers and cohabitating unmarried mothers and about half of the noncohabitating mothers were poor, compared to about 13 percent of married men and 14 percent of married women.

    - Less than 3 percent of the unmarried parents had a college degree, compared to more than a third of the married parents.

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24 See “Barriers to Marriage Among Fragile Families,” footnote 18, page 10 of this report.

To have been incarcerated.

- Incarceration was common among fathers in at-risk families and took a toll on the entire family. Incarceration reduces the father’s earnings and thus the family’s resources, contributes to family breakups, and “adds to the deficits of their vulnerable children,” McLanahan and Garfinkel write.26

- By the time their children are age five, half of the fathers in fragile families have been incarcerated at some point in their lives.

“Children born to unmarried parents do not fare as well as children born to married parents.”

- At year five, children born to unmarried parents had higher rates of obesity and asthma, lower cognitive scores, and higher levels of behavior associated with social problems.27

- Compared to mothers married at the birth of the child, unmarried mothers engaged in fewer literacy activities with their children, were more likely to use harsh discipline (yelling and spanking), and less likely to have a stable home routine (such as a regular bedtime).28

The study’s findings are consistent with the view that birth to unmarried parents reduces a child’s chances in life, McLanahan writes.29 However, she notes that the data also show that birth to married parents who later divorce is associated with reduced parental resources and child outcomes:

“This, it is not marital status at birth that promotes children’s long-term well-being but rather the fact that marital status at birth is a pretty good proxy for children’s long-term family structure.”

**Limitations**

While the nonmarital births sampled in the 20 cities were representative of all nonmarital births in those cities, the marital births were not necessarily representative of all marital births, researchers note.30 The reason is that except in the few cities where the sample

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30 See Reichman et al. footnote 10, page 7 of this report.
included all birthing hospitals, the hospitals selected were those with at least 10 percent of nonmarital births. Thus marital births that occurred in small, typically private hospitals were not included in the study.

Also, the study excluded parents in certain categories, among them those who planned to put their child up for adoption and those who could not speak either English or Spanish well enough to complete the interview. In addition, many hospitals prohibited interviews with parents under the age of 18.

A lack of data from some unmarried fathers was another limitation, researchers noted.31 While mothers could provide data on age, education level, and employment status, some data categories had to be completed via the fathers’ direct interview response, such as his earnings and his view of the quality of the couple’s relationship.

Also, participation was not uniform among the different groups of unmarried fathers. Researchers note that fathers who were not romantically involved with the mother were the least responsive (38% response rate at baseline).

Because mothers may be reluctant to self-report behavior that could reflect poorly on their mothering skills, the study most likely underestimates maternal alcohol and drug use, the team said. Also, as previously noted, the nature of the survey questions and other factors may have resulted in an underestimation of domestic violence in the sampled families.

**Policy Recommendations**

McLanahan and colleagues recommended four steps to strengthen fragile families in a journal article in *The Future of Children*:32

1. **Scale up programs “to encourage more responsible sexual behavior” and expand access to contraception for individuals who might not be able to afford it.**

2. **Expand marriage-education programs to include job training, employment assistance, and mental health components, in addition to relationship-skills improvement.** The authors also call for rigorous evaluation of existing community-based programs aimed at helping nonresident fathers improve their financial condition and increase their involvement with their children.

3. **Redesign government tax and assistance programs to ensure that children have access to high-quality early education and health care—with assurance that these benefits will not be cut or reduced if parents marry or live together.**

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4. Develop and evaluate new demonstration programs and policies in two areas: (1) assistance to help unmarried parents get a college education and (2) penal system reform, especially initiatives providing alternatives to incarceration.

The authors suggest that the study finding most important to policy-making is that birth presents a “magic moment” when unmarried parents are highly motivated to work together—a moment opportune for intervention.

“Fashioned as a bumper sticker,” they write, “our recommendation would be ‘Support the three T’s: Treat early, Treat often, and Treat together.’"33

**Should Marriage Be the Goal?**

Whether marriage is a viable objective for unwed parents depends on the nature of the relationship, the researchers cautioned. “If relationships are casual or highly conflicted, then marriage may be detrimental to parents (and their children). In contrast, if relationships are supportive, promoting marriage may make sense,” says a *Fragile Families Research Brief*.34

Analysis of the national baseline data sorts unmarried couples into three groups relative to marriage promotion programs, the researchers write:35

- About a third of the couples appear to face no serious barriers to marriage (the major barriers being lack of employment, mental health problems, and potential for violence); are largely open to participating in programs designed to improve parental relationships; and would potentially benefit from such programs.

- Another third are romantically involved; have financial and/or mental health problems, and would benefit from marriage programs that address those needs, in addition to strengthening relationship skills.

- The final third would not be good candidates for marriage initiatives. These include couples not romantically involved (18%) and couples at high risk for violence, “suggesting that marriage may not be a safe environment for mothers and children” (13%).

**COMMUNICATIONS**

Dissemination “is our key strategy for informing public policy and ultimately improving the lives of disenfranchised families,” the study team reported. Including the output of the

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35 See “Barriers to Marriage Among Fragile Families,” footnote 18, page 10 of this report.
study’s own investigators and outside researchers, when RWJF funding ended in 2011 the data had been used as a primary source in:

- More than 300 articles in peer-reviewed journals
- 40 books and book chapters
- 60 dissertations
- A series of more than 70 working papers

Among the communications products produced by the Fragile Families researchers:

- **Academic journal articles, book chapters, and a series of working papers**
  exploring a wide range of issues related to at-risk families

- **A series of research briefs summarizing key study findings and their policy implications.** As of 2013, there were 48 research briefs on topics ranging from incarceration to breastfeeding. The briefs were distributed through the Fragile Families listserv, which was open to the public. They are also archived online.

- **A Baseline National Report on the full, 16-city national sample, which was made accessible online.**

- **A baseline report on the Newark sample,** highlighting what the team learned from the initial data about unmarried parents and their children. The team intended the reports to help community leaders and policy-makers develop programs for new parents.

- **A bimonthly electronic newsletter, Fragile Families Update,** highlighting the study’s recent activities, findings and publications and distributed through the listserv

- **A dedicated Fragile Families website** explaining the purpose of the study and providing access to many of the communications products. In addition, the Center for Research on Child Wellbeing’s website maintained an online bibliography of published literature stemming from the study.

- **A series of Fragile Families Working Group meetings** co-hosted by Princeton and Columbia universities each academic year starting in 2002. The meetings provided a forum for faculty, visiting researchers, and students to discuss work underway using the study data. In addition to these meetings, staff spoke at various professional and research conferences.

See this report’s Bibliography section and, for the most up-to-date listing, the study’s online bibliography.

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Sharing the Data

The Fragile Families team made the study data available to outside researchers shortly after each round was collected, and provided technical guidance on downloading and using the data. For example, a memo37 posted on the Fragile Families website identified the statistical *weights* needed to adjust the data for accurate use as a nationally representative sample.

The team released the data in two categories:

- **Public data.** The core interview and certain in-home assessment data were available for downloading to researchers who completed a brief application and a 25-word abstract about the project in which the data would be used.

- **Contract data.** Geographic information (down to the census tract level), medical record information, and certain other data that could compromise respondent confidentiality were available only through a more formal application process that included a restricted data-use agreement and an application fee.

For more about the access process, see the Fragile Families website.

The timely release of the data and streamlined downloading process helped generate a significant body of innovative analyses by external researchers, according to the study team. When RWJF funding ended, nearly 1,400 users had accessed the public data files, and approximately 250 had used the restricted, contract data. These users spanned a variety of academic fields, and their research interests focused on a range of topics, including parental relationships, mental health, child care, education, religion, and employment and earnings.

The data and findings were also used by nonprofit organizations and government agencies to inform program development, policy analysis, and advocacy work. For example:

- The Institute for Children, Poverty, and Homelessness in New York published a series of research papers using study data to highlight the characteristics of urban homeless families with young children.

- The Child Protective Services Unit of the Virginia Department of Social Services included study findings in a newsletter article on the importance of strong parental relationships to children’s healthy development.

RWJF was itself among the users. The study informed its efforts to improve the health of vulnerable populations, says Laura C. Leviton, PhD, RWJF senior adviser for evaluation.

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Additionally, scholars in at least two RWJF programs—*New Connections* and *Robert Wood Johnson Foundation Health & Society Scholars*—used the data in their research projects.

**SIGNIFICANCE OF THE PROJECT**

The Fragile Families and Child Wellbeing Study made available to researchers “the most complete data on unwed fathers to date,” members of the project team wrote in 2001.38

The study also brought attention to the idea that unmarried couples with new children often have strong emotional ties and could benefit from programs that emphasized relationship-building skills. The finding that 80 percent of new, unwed couples were romantically involved “was a huge game changer,” says McLanahan. “People were just astounded. They thought these parents didn’t know each other.”

The Fragile Families study “was the brainchild—it was the spark” for the federal initiative Building Strong Families, according to McLanahan. Launched in 2002, that effort encouraged the development of local programs offering relationship-skills education, family counseling, and other support services to new, unwed parents. Fragile Families also influenced Healthy Marriage Initiative, another federal initiative, launched in 2003.

**LESSONS LEARNED**

In its final report to RWJF, the Fragile Families team identified the following lessons to help other researchers design and implement similar studies:

1. **Be prepared to devote substantial time and resources to obtain hospital permission to interview new parents.** The study collected data in about 75 hospitals, and in each one staff had to find a physician willing to serve as a study “sponsor,” submit an application to the Institutional Review Board, and respond to questions from physicians, administrators, and community representatives. Their efforts ultimately paid off.39

2. **Make a continual, well-funded effort to retain survey respondents.** Locating families, especially fathers, and securing their continued participation in the follow-up rounds proved more labor intensive and expensive than anticipated.

   To address the challenge, the study team hired dedicated survey staff to maintain contact with respondents, provided participation incentives, trained interviewers in

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38 Reichman, et al, footnote 10, page 7 of this report.
39 Two cities—Birmingham, Ala., and Santa Ana, Calif.—were dropped from the initial national sample because of problems gaining access to hospitals, and were replaced by two cities with similar characteristics, Baltimore and San Jose, Calif.
effective “refusal conversion” strategies, and in the ninth year rewarded interviewers based on their success in reaching all family members.

3. **When surveying parents and children, be especially cognizant of the sensitivities that come with complex family situations.** Survey procedures that protect the participants (such as ensuring confidentiality and the right to refuse to answer sensitive questions) need to be clearly explained and reiterated.

4. **When hiring staff to interview disadvantaged, minority, or immigrant populations, give priority to interviewers who have experience with those populations.**

5. **Increase a study’s impact by making the process of downloading and analyzing survey data files as simple as possible for researchers.** Basic steps should include:
   - Providing survey files in multiple software formats
   - Storing data in Web archives that are easy to access
   - Publicizing the release of data
   - Providing on-going data support

6. **Principal investigators and staff can play an important role as conduits of study data to outside researchers.** Over the course of a study, the staff develops valuable insights into the analytical techniques and measuring concepts related to the data. Sharing this information with practitioners in the field increases the data’s use and usefulness.

**AFTERWARD**

**Data Dissemination**

Researchers continue to access the study data. Staff reported a total of 2,400 users of the public data and approximately 320 users of the restricted contract data, as of early 2013—an increase of 1,000 users of public data and 80 users of contract data since the end of the RWJF grant.

Newly published research has focused on analyzing the year nine follow-up data, including genetic data from the saliva samples. One study, for example, examined the effects of the 2008 recession on mothers’ harsh parenting practices and whether the mother’s genetic makeup influenced that dynamic.40

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For an up-to-date listing of published research, see the study’s online bibliography.

**15-Year Follow-Up**

The Fragile Families team plans to begin collecting 15-year follow-up data in February 2014. The new round, funded by the National Institute of Child Health and Human Development, is designed to focus on the school performance and social and health-related behaviors (positive and negative) of the children in the core sample, who are now teenagers. Data collection is scheduled to run through December 2015.

The goal of this new round is to increase knowledge of how experiences in early and middle childhood influence adolescent behavior and, ultimately, health and well-being in adulthood, according to the study team. This new data should be “incredibly valuable because now we’re really shifting the focus” from the parents and their relationship to the children, says McLanahan.

**Additional Projects for RWJF Based on the Study**

McLanahan is writing an epidemiology study called “Exploring the Role of Place and Disparities in Family Violence in the Fragile Families and Child Wellbeing Study,” under RWJF’s *Vulnerable Populations Research and Policy Briefs* authorization.41 The study is reviewing findings from 30 previously published studies that use data from the Fragile Families and Child Wellbeing Study to examine children's exposure to violence.

The study is reviewing (1) studies on the prevalence, predictors, and consequences of mothers' exposure to intimate partner violence—indicators of physical, psychological, and economic violence; and outcomes for mothers' mental health, including anxiety and depression; for mothers' parenting quality; and for children's physical, cognitive, and social-emotional wellbeing; (2) studies on the prevalence, predictors, and consequences of children's exposure to harsh parenting—indicators of abuse and neglect; and outcomes for children's physical, cognitive, and social-emotional wellbeing; and (3) studies on the prevalence, predictors, and consequences of mothers' exposure to neighborhood violence.

McLanahan also is working on an RWJF-funded project to identify characteristics of cities associated with achievement by disadvantaged adolescents to improve youths' upward mobility.42 This project will help inform the Foundation's developing strategy on protecting and preventing exposure of children to adverse experiences. It funds interviews of children, now 15 years of age, included in the original sample and data analysis to identify the trajectory for children, based on the exposure of the child to positive and adverse events, and on the characteristics of their home cities.

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41 Grant ID# 71448 ($20,000, November 15, 2013 to March 14, 2014)
42 Grant ID# 72235 ($688,690, November 5, 2014 to November 14, 2017)
neighborhoods, and schools. The research can be used to predict which adolescents are at greatest risk and, yet, will do better than expected.

McLanahan will make the resulting population-based data of adolescents' characteristics, attitudes, and behaviors; social and antisocial behaviors; cognitive performance; and biological markers of stress publicly available—providing users with a wealth of information on the conditions of children born at the turn of the 21st century.
APPENDIX 1

Other Funders During the RWJF Grant Period

(Provided by the grantee organization; not verified by RWJF.)

Federal Government

- Department of Health and Human Services (Administration for Children and Families and Assistant Secretary for Planning and Evaluation)
- National Institutes of Health
  - National Institute of Child Health and Human Development
  - National Institute of Mental Health
- National Science Foundation

Private Philanthropies

- A.L. Mailman Family Foundation
- California HealthCare Foundation
- Charles Stewart Mott Foundation
- Commonwealth Fund
- David and Lucile Packard Foundation
- Ford Foundation
- Foundation for Child Development
- Fund for New Jersey
- Healthcare Foundation of New Jersey
- Hogg Foundation
- John D. and Catherine T. MacArthur Foundation
- Kronkosky Charitable Foundation
- Public Policy Institute of California
- St. David's Foundation
- St. Vincent Health Services
APPENDIX 2

Principal Investigators of the Fragile Families Study

(Current as of the time of the grant; provided by the grantee organization; not verified by RWJF.)

The Fragile Families and Child Wellbeing Study is a joint effort at Princeton University (through the Bendheim-Thoman Center for Research on Child Wellbeing and the Center for Health and Wellbeing) and Columbia University (through the Columbia Population Research Center and the National Center for Children and Families).

The principal investigators are:

**Princeton University**

*Sara S. McLanahan, PhD*
Project Director
Professor
Sociology and Public Affairs
Director
Bendheim-Thoman Center for Research on Child Wellbeing

*Janet Currie, PhD*
Professor
Economics and Public Affairs

*Christina Paxson, PhD*43
Former Dean
Woodrow Wilson School of Public and International Affairs
Professor of Economics and Public Affairs

**Columbia University**

*Jeanne Brooks-Gunn, PhD*
Professor
Child Development and Education
Teachers College and the College of Physicians and Surgeons

*Irwin Garfinkel, PhD*
Professor
Contemporary Urban Problems
School of Social Work

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43 As of July 2012, Paxson became president of Brown University, but continues to be listed as a PI because of her earlier involvement in the study.
APPENDIX 3

Three Additional RWJF Projects Focused on Urban Health Research

- **Study of the Effects of Welfare Reform on the Health of Urban Families**
  Grantee: Manpower Demonstration Research Corporation (New York, N.Y.)
  ID# 031089 ($1,998,995, August 1997 to December 2001)
  See Program Results Report.

- **Study of Urban Neighborhood and Community Capacity Building**
  Grantee: Research Foundation of the State University of New York (Albany, N.Y)
  ID# 032692 ($749,974, February 1998 to September 2001)
  See Program Results Report.

- **Children, Families and Welfare Reform: A Three-City Study**
  Grantee: University of Chicago, Irving B. Harris School of Public Policy Studies (Chicago, Ill.)
  ID# 032102 ($210,059, September 1997 to June 1999)
  Grantee: Northwestern University School of Education and Social Policy (Evanston, Ill.)
  ID# 037218 ($1,813,750, July 1999 to August 2003)
  See Program Results Report.
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Meadows SO, McLanahan SS and Brooks-Gunn J. “Parental Depression and Anxiety and Early Childhood Behavior Problems Across Family Types.” *Journal of Marriage and


Saleh MF and Hilton JM. “A Comparison of the Paternal Involvement of Low-Income Fathers in Four Developmental Stages: Adolescence, Young Adult, Adult, and Midlife.”


Waller MR and Bitler MP. “The Link Between Couples’ Pregnancy Intentions And Behavior: Does It Matter Who Is Asked?” *Perspectives on Sexual and Reproductive


Books


**Communication or Promotion**

[www.fragilefamilies.princeton.edu](http://www.fragilefamilies.princeton.edu). The Fragile Families and Child Wellbeing Study website contains a list of—and access to—reports and other communications materials disseminated by the study team.