PARITY

TODOs:

* Read orand 2009
* Read willson 2007
* Read Dannefer 2003
* Obesity in adolescence in sensitive periods einbauen!? Ferraro 2003

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Children to feel complete 🡪 if they don’t fulfill the expectations its umso mehr deprimierender

Bonelli:

PRO

* Man hat das Leben zu Hause
* Kinder stabilisieren Partnerschaften weil man eine gemeinsame Aufgabe hat
* Wenn man Kinder hat, hat man Zukunft (Kinder lieben dich wenn alle anderen gestorben sind) dafür gibt es keine Garantie aber es ist sehr wahrscheinlich wenn man selbst seine Kinder geliebt hat
* Kinder (besonders junge Kidner) belohnen/beschenken ihre Eltern auch mit viel Freude, Liebe und Nähe (kann man sich nicht kaufen, Kinder sind sehr authentisch)

CONTRA

* Die Belastung durch pubertierende Kinder ist eine ganz andere als durch Nuegeborene (Kinder die nicht aufhören zu weinen, nicht schlafen etc., kranke kinder / special needs kinder) oder durch ständig streitende Geschwister (da spielt auch der Abstand zwischen den Kindern eine Rolle: solange das erste kind bei geburt des zweiten noch unter 2 ist, entwickelt sich kaum eine Eifersucht. Falls der BAstand größer ist, legt sich die Eifersucht dennoch nach ein paar Monaten)
* Es gibt so viele verschiedene Arten von Belastungen, dass man das sehr gut differenzieren muss und für alles gibt es Lösungen
* Kindererziehung offenbart Differenzen in den Weltanschauungen zwischen den Eltern, das birgt natürlich Konfliktpotenzial (am besten vorher klären, wie sollen kinder erzogen werden, was sollen sie lernen? Konsens wäre gut) symptom einer dissonanz die das paar eh in sich trägt. Es ist wichtig, dass zwischen vater und mutter kein blatt pastt, die beiden nicht gegeneinander ausspielbar sind
* Es kommt auf den Charakter der Eltern an, aber es gibt Menschen die sehr schnell gestresst sind und sich selbst unter Druck setzen (Perfektionismus) und angst haben etwas falsch zu machen. wichtig: Gelassenheit bewahren!!

#### Big. Family Lifestyle

We have seen above in chapter (XX), how parenthood generally leads to a more health-conscious life style. Can a bigger family size reverse this association?

On the other side, evidence for health benefits of bigger family size have been found:

Norwegian data found a negative association between high parity and alcohol related mortality (Grundy & Kravdal, 2010)

But for high parity parents life style changes seem to work against them:

having more than 3 children might prevent parents from retaining a healthy routine OR people with bad lifestyles choose to get more children.

Results from Model 4, additionally controlling for age at first birth among the parous, also showed a negative association between high parity and female mortality from acci- dents and violence. High parity among men, however, was posi- tively associated with mortality from accidents and violence and circulatory diseases (Model 3).

When age at first birth was controlled, a negative association with alcohol-related mortality was found and the positive association between high parity and circulatory disease mortality was no longer significant. However, in analyses stratified by level of education (not shown but available on request) we found a significant positive association between high parity and circulatory disease mortality for men with only compulsory education (OR 1.19; 95% CI 1.08e1.30 P < 0.001), but not the better educated, with indications of a similar association for women in this educational group. Similarly, the association between high parity and mortality from accidents and violence among men was positive only among those with lower levels of education, while the association between high parity and alcohol- related deaths was negative only for men at the highest educa- tional levels.

{Grundy:2010gq p.1859ff}.

#### Stress / Role Overload / Social Depletion

4. Ross CE, Mirowsky J. Family relationships, social support and subjective life expectancy. J Health Soc Behav. 2002;43:469–89. doi:10.2307/3090238.

Selection effect: if youre happy with first child youre more likely to have another one (Margolis & Myrskylä, 2015)

#### Selection Mechanisms

However, since lessthan 4% of men and women in Sweden have five or more children, we suspect thatthere may be selection mechanisms that account for this association that are notcaptured by our control variables.

Indeed, we suspect that selection processes largely explain the curvilinearrelationship between parity and mortality amongst biological parents in contem-porary populations. The similar results for men and women, as well as thecurvilinear nature of the relationship for biological mothers and fathers, suggest thatselection on socioeconomic status or health drives the parity–mortality association,and particularly at higher parities. The fact that the results for the relationshipbetween parity and mortality change substantially after adjusting for socioeconomicstatus and educational attainment suggests that socioeconomic status-relatedselection processes play an important role in explaining this relationship. However,the fact that the curvilinear pattern remains even after adjusting for socioeconomicstatus suggests that other selection factors may also play an important role.Childless individuals are likely to be negatively selected out of partnering andparenthood, while those who have many children, particularly amongst groups withlower levels of education, may be drawn from groups who are more reckless interms of health habits as well as behaviours such as driving. The lower mortality ofadoptive parents provides additional evidence that selection on health behaviours isan important cause of lower mortality. (Barclay & Kolk, 2018)

We show that in natural fertilitypopulations the relationship between fertility and late-life mortality cannot be studied correctly withoutconsidering the effects of differences in health and of mortality selection during childbearing ages becausethese two effects lead to a dampening of the true relationship. If these effects are controlled in Hollings-worth’s genealogy of the British peerage a significant trade-off between reproduction and longevity existsfor females but not for males. the slope of the increase in the force of mortality per child is 3.8% and it is significant at a level of DOBLHAMMER OEPPEN

# TRADE OFF THEORIE

Whether a cost of reproduction exists among humans is still questionable. A major study of aristocraticBritish families finds a significant positive correlation between parity and late-life mortality, which indicatesa trade-off between reproduction and longevity. This result is supported by four other studies, while earlierstudies have not found a relationship or came to the opposite conclusion. We show that in natural fertilitypopulations the relationship between fertility and late-life mortality cannot be studied correctly withoutconsidering the effects of differences in health and of mortality selection during childbearing ages becausethese two effects lead to a dampening of the true relationship. If these effects are controlled in Hollings-worth’s genealogy of the British peerage a significant trade-off between reproduction and longevity existsfor females but not for males. the slope of the increase in the force of mortality per child is 3.8% and it is significant at a level of DOBLHAMMER OEPPEN

# K SOCIAL SUPPORT

Some research suggests benefits of availability of social support from children on incidence of or survival from cancers and circu- latory diseases. Results from the Copenhagen Heart Study, for example, showed that parents, particularly fathers, with less than monthly contact with a child had higher rates of mortality and a higher incidence of heart disease than other parents (Barefoot, Grønbǽk, Jensen, Schnohr, & Prescott, 2005). Social support from children has also been hypothesised to contribute to the longer survival from certain cancers among parents found in several studies (Egan, Quinn, & Gragoudas, 1999; Kravdal, 2003; Salvesen, Akslen, Albrektsen, & Iversen, 1998; Skuladottir & Olson, 2006), but not all (Jacobsen, Vollset, & Kvåle, 1995; Nagle, Bain, Green, & Webb, 2007).

physiological effects of pregnancy, for instance, differen- tial exposure to sex hormone secretion in low versus high parity women [39]

39. Kravdal O, Hansen S. Hodgkin’s disease: the protective effect of childbearing. Int J Cancer. 1993;55:909–14. doi:10.1002/ijc.291 0550606.

RELIGION

The rela- tively smaller influence of high versus low parity on mortality may be, in part, due to the confounding effect of religion, which is related both to larger family sizes and reduced mortality [35]. „ (Jaffe 12)

Jaffe DH, Eisenbach Z, Neumark YD, Manor O. Does living in a religiously affiliated neighborhood lower mortality? Ann Epidemiol. 2005;15:804–10. doi:10.1016/j.annepidem.2004.09.014.

# Lifestyle factors

# Partnership

There is also a significantnegative correlation between marital satisfaction and number of children (d -0.13,r -.06).

# SOCIAL SELECTION EFFECTS:

Life satisfaction increases in the year prior to and in the year of a first birth, and then decreases from the baseline level. Those who go on to have a second birth have a higher baseline life satisfaction level than those who stay at parity 1. The two groups have a similar average trajectory before a first birth, but in the year of the first birth and the year after a first birth, there are important differences. Those who have a second birth gained more in life satisfaction around the time of a first child’s birth than those who stayed at parity 1 (.20 compared with .12 units higher than baseline in the year of the first birth) and had a smaller drop in well-being in the year after the birth than the group that stays at parity 1 (−.08 compared with –.18 units lower than baseline in the year after the first birth). In other words, those who have a more difficult transition to parenthood, as measured by changes in overall life satisfaction, are less likely to have another child. MARGOLIS 2015 1155

# ASSOCIATION OVER THE LIFECOURSE

(Some studies suggest that the relationship is strongest around the age of 60: Doblhammer2000 / Manor Eisenbach2000).

Over age: Modig 2017, Doblhammer 2000, Manor Eisenbach 2000

# CULTURE

Importance of socio cultural norms

“This suggestion

is also supported by a recent finding that

high parity is associated with better health among

women and men in West Germany but with worse

health among East German women (Hank 2010).” (Read, Grundy, and Wolf 2011). But did Hank control for important factors??

Based on the historical and cultural differences in the research findings and popluations, liegt es nahe politisch-gesellschaftlichen Rahmenbedingunen als Einfluss-Faktoren miteinzubeziehen. (race, ost-west, cohort) Ost West ist für meine Kohorte insofern interessant als dass:: XYXYXY

# Alternative Theory zu “cum. advantage/disadv”: stress process model

THE STRESS PROCESS

Research on physical and mental health brought forth a theoretical framework called “the stress process” (Orand 2009: 127 : (Pearlin, 1999). ). It proposes the idea that the exposure to stressors weakens peoples capacities to maintain the functioning of their bodies. A primary stressor can be any sort of trauma, challenge, hardship and debilitative condition. For example economic hardship can directly lead to illness, which would be considered a secondary stressor itself.

“stress proliferation” (the exposure to some [primary] stressors, such as economic hardship, that lead to other [secondary] stressors, such as illness);

physical and psychological “health outcomes”; and “mediators” (economic, social or personal resources that can attenuate or accentuate the effects of stressors) or “moderators” (statuses or resources that regulate the pattern of effects of stressors).

The cumulation of stress over time can be initiated by trauma or severe hardship or crisis at any time in the life course, or by repeated exposure to the same stressor (e.g., poverty) over an extended dura- tion or to a proliferation or cascade of stressors (poverty, poor health, trauma), especially in the absence of attenuating influences (Pearlin et al., 2005). Stressors can exhibit trajectories of persistence, of incline, or of decline that affect the onset and progression of outcomes such as depression or disability. As such, the stressor trajectories can influence the trajectories of outcomes. Like the cumulative disadvantage process, the stress process entails selection, extended duration of exposure, and growth or proliferation over time.

These two models of cumulative processes developed somewhat independently, but they now employ similar methodologies to reveal explanations for inequalities in all aspects of well-being in aging pop- ulations. The analytical tools are the same and, increasingly, the con- ceptual frameworks are effectively equivalent, linking early events and conditions to later events and conditions as multiple trajectories of the life course. (Orand 2009: 127)

the *stress process model,* developed by Leonard I. Pearlin and colleagues over nearly three decades (Pearlin, 1999; Pearlin, Menaghan, Lieber- man, & Mullan, 1981; Pearlin, Schieman, Fazio, & Meersman, 2005). Orand 2009: 124

Pearlin, L. I. (1999). The stress process revisited: Reflections on concepts and their interrelationships. In C. S. Aneshensel & J. C. Phelan (Eds.), *Handbook of the sociobiology of mental health* (pp. 395–415). New York: Klu- wer.

Pearlin, L. I., Menaghan, E. G., Lieberman, M. A., & Mullan, J. T. (1981). The stress process. *Journal of Health and Social Behavior, 22*, 337–356.

Pearlin, L. I., Schieman, S., Fazio, E. M., & Meersman, S. C. (2005). Stress, health, and the life course: Some conceptual perspectives. *Journal of Health and Social Behavior, 46*(2), 205–219.

Pearlin, L. I., & Schooler, C. (1978). The structure of coping. *Journal of Health and Social Behavior, 19*(1), 2–21.

Pearlin, L. I., & Skaff, M. M. (1996). Stress and the life course: A paradigmatic alliance. *Gerontologist, 36*(2), 239–247.

“stress proliferation” (the exposure to some [primary] stressors, such as economic hardship, that lead to other [secondary] stressors, such as illness);

physical and psychological “health outcomes”; and “mediators” (economic, social or personal resources that can attenuate or accentuate the effects of stressors) or “moderators” (statuses or resources that regulate the pattern of effects of stressors). (Orand 2009: 127)

# ACCUMULATION / CHAIN OF RISKS THEORY

Ferraro found a way to distinguish between the mechanisms that accumulate either advantage or disadvantage {Ferraro:2009vo}. DiPrete offers a summary of the variety of models to mathematically estimate outcomes and growth processes {DiPrete:2006hx}.

The modeling of cumulative advantage processes has depended on the application of diverse multiple regression–based methods (e.g., structural equation models; hierarchical linear models, including latent growth curve models; and latent class models and other mixture mod- els) used widely in the social sciences but identified most strongly in their development with demography, social stratification and, now, the life course. These methods permit the specification of models that can deal with variable interactions, asymmetry of effects, and unmeasured heterogeneity, among other challenges. A recent review of cumulative advantage research (DiPrete & Eir- ich, 2006) makes the case that the status attainment model (going back as early as Blau and Duncan, 1967) provides the basic tools for studying these cumulative processes of selection and exposure. The phenomenon of interest is inequality in the level and growth of an outcome variable (e.g., wages or health) that can be accommodated with the traditional status attainment model. This model measures and estimates the rela- tionships among sequential statuses across the life course. (Orand 2009: 125)

DiPrete and Eirich (2006) argue that two categories of cumulative advantage exist in the literature. The “*strict forms*” include exponential or contagious growth models that examine the impact of current (ini- tial) differences (selection) in an outcome (e.g., wages) on differences in rates of growth or change in that outcome over time. Strict forms have right-skewed distributions in outcomes and, distinctively, reveal grow- ing inequality in the outcome over time as a positive function of earlier levels of the outcome variable itself. A second strict form adds other explanatory variables besides the focal outcome (e.g., wages over time), such as race, education, employment, and so forth, to specify the effects of the accumulation of past events or patterns of “path dependence,” which denotes a sequentially selective process whereby advantage or dis- advantage in earlier life domains (e.g., childhood circumstances) condi- tion later advantage–disadvantages in and across a range of sequential life course domains, such as education, work, family and health sta- tuses across the life course. The path-dependent model implies that the impact of prior events increases across the life course. (Orand 2009: 126)

“*Status attainment forms*” of cumulation are more widely applied in the literature of interest here and fall in two categories: The status- dependent form measures the effects of a fixed status (e.g., race, child- hood poverty) in an additive framework, including other sequential explanatory variables to predict levels of an outcome (e.g., wages) or changes in levels of an outcome. According to DiPrete and Eirich (2006), one status attainment form, labeled the “status-dependent form,” tracks the effects of cumulative exposure across the life course, as in the case of the cumulative disadvantage of being black over time within and across social domains. Dependence on status also reflects other aspects of social selection, captured by the enduring effects of childhood condi- tions well into adulthood, closely associated with path dependence in the previously discussed strict form category. (Orand 2009: 126)

In the second status attainment form, labeled the “status resource form,” a fixed status (e.g., race or childhood poverty) interacts with other explanatory variables (e.g., such as educational attainment) to estimate the extent to which explanatory variables behave differently across status groups. Hence, the interaction between race and educa- tion can specify the process whereby, all else being equal, blacks receive lower returns, from economic, personal, and health resources to years of cumulative education across their lives. Such information adds speci- ficity (e.g., by race) and complexity (e.g., between races) to the social mechanisms of cumulation processes. These models, so described, per- mit the observation of selection, cumulative (duration of) exposure, and persistence or change as cumulative processes. (Orand 2009: 126)

Cumulative processes can therefore be studied by the extent to which they are sequentially selective, involve cumulative or varying durations of exposure to favorable or unfavorable conditions, and are relatively per- sistent trajectories of advantage or disadvantage in salient life outcomes that are anchored in social origins. As such, social selection, cumulative exposure, and trajectories of continuity (persistence or change) are the major components of cumulative processes, and they are highly correlated over time. ORand:2009vf p 127

For predicting the effects of life course variables on cumulative trajectories for advantaged and disadvantaged groups, these processes require multiple observations over time and methods for iden- tifying trajectories rather than point-in-time estimates. ORand:2009vf p 128

„One possibility is that fertility adds uniquely to ‘‘chains of risk’’ and the accumulation of (dis)advantage across women’s lives. „

{Spence:2009ha p.1625}

Life-span development results from lifelong adaptive

processes in which some are cumulative and continuous,

and others are discontinuous and innovative,

showing little connection to prior events or processes. (670 William Damon Richard Handbook of child Development, davon ein Chapter)

CRITIC on CUMULATIVE THEORY:

For recent applications of cumulative advan- tage theory in health, see Walseman et al. (2008), Shuey & Willson (2008), and Taylor (2008).

A second area of theory development also tries to go beyond the language of life courses as sequences of transition and states and instead focuses on the concept of risk (O’Rand 2003). Exposure to risk, measured by its incidence and duration, can be a powerful concept in map- ping and measuring life courses. It also has the virtue of tying life course research to public policy. An emergent literature looks at risks that are specific to given welfare state policies ( Jonsson & Mills 2001, DiPrete 2002, Gangl 2004, Mayer 2005). DiPrete’s (2002) typology of welfare states, by combining degrees of risk exposure and of risk compensation, is a major advance in theories relating the state and life courses. Leisering (2003) also markedly refines earlier theory building (Mayer & Scho ̈pflin 1989) regarding policy effects on the life course.

(Mayer 2009 424)

TEXT SCHON FERTIG:

The theory of cumulative risks and benefits is consistent with the idea of exposure timing and sensitive periods presented in the chapter above and should be able to tie together all the previously discusses research findings.