1. Introduction

Despite the fact that African women play a central role in supporting themselves and their families, surprisingly little is known about single motherhood over women’s life-course. Since the early 1990’s, researchers and policy makers have been interested in links between female-headed households and poverty (Bledsoe 1990; Buvinic and Gupta 1997; Katapa 2006; Lloyd and Gage-Brandon 1993). However, much of the research on poverty and female-supported/headed households relies on cross-sectional data, which only records the current status of the household. Nonetheless, women may be called upon to support themselves and other family members at different stages of their life-course. For example, some women may become single-mothers before marriage, while others may need to rely on their own resources following a divorce or death of a spouse. By taking a life-course perspective, we can not only distinguish between these different types of female-supported households, but also examine cumulative and long-term implications of single motherhood.

Our preliminary estimates using Demographic and Health Surveys (DHS) data from four countries (Kenya, Malawi, Tanzania, and Zimbabwe), indicate that nearly half of all women will have experienced at least one episode of single-motherhood before reaching the age of 45. Unfortunately, only a few DHS collected data on marital histories. Moreover, the marital histories collected by DHS only covered the last five years. Finally, because these are retrospective rather than prospective longitudinal data, it is not feasible to explore the correlates of female-supported households, such as education, poverty, and child well-being, over time.
2. Research questions

The goal of our project is to move beyond the cross-sectional estimates of female household headship and to adopt a longitudinal approach. Specifically, we are interested in three research questions:

1) **Over a woman’s life course (up until the age of 45), what is probability that she will become a single mother?** To answer this question, we will need to assess the probability that she will become a single parent before her first marital union and the probability that she will become a single parent after her first marital union through separation, divorce, or death of her spouse. We will also assess whether the trends in single-motherhood have changed across cohorts and by age at first marriage.

2) **Who is most at risk of becoming a single mother?** We are particularly interested in determining what, if any, role women’s socio-economic status, educational attainment, age at first marriage, timing of children, employment status, and migrant status may be associated with the likelihood that she will become a single mother or a household head.

3) **What are the consequences of single-motherhood on women and children’s well-being?** This question is really comprised of two distinct, but related questions. First, “Does entry into single motherhood reduce women’s socio-economic status and put them on a pathway to poverty?” Single mothers may be poorer because they do not have a partner who may an important source of income and wealth. Moreover, even if women remarry, single mothers may enter into less desirable marriages with poorer men or as a second or third wife. Second, “Does entry into single motherhood compromise their children’s health and well-being?” On the one hand, even if single mothers are on average poorer, they may direct more resources towards their children. On the other hand, in order to support their children, women may enter into less desirable marriages and their children from previous relationships may not be well cared for by their new husbands.

3. Data requirements

Unfortunately, we cannot adequately address these questions with current DHS data. Based on some preliminary inquiries, however, we are hopeful that some of the (H)DSS may have collected the vital data to address these important questions.

To estimate chances of a woman becoming a single parent over her life-course will require data on:
1) Full marital histories
   a. Date when all unions began
   b. Date when all unions ended
   c. Reason for end of union (separation, divorce, death)

2) Full birth histories
   a. Dates of all children’s births
   b. Dates of all children’s deaths (if the child died)

**NOTE:** Information on number 1 and 2 is essential. While nearly all (H)DSS collect full birth histories, full marital histories are relatively rare. We cannot reconstruct full marital histories based solely on current marital status or age of first marriage. At this initial stage we are primarily seeking collaborators who have collected full marital histories. However, if you are interested in this study and would be willing to collect full marital histories, please let us know. We hope that as we expand this study we will be able to secure funding for this additional data collection. The total number of new questions that need to be asked once for a full marital history is relatively small.

To explore the causes and consequences of single motherhood will also require data on:

   3) Women’s age
   4) Women’s educational attainment
   5) Women’s asset ownership, job status, or income (in at least two waves)
   6) Women’s ethnicity and/or religion
   7) Children’s health (vaccination records, recent illnesses (in at least two waves), height and weight)
   8) Children’s education (currently in school or highest level attained)
   9) Children’s residence (if available)

4. Policy implications

From a policy perspective, a better understanding of the links between single motherhood, poverty, and child well-being is vital. Because our estimates of female-headed households rely on current measures, they greatly underestimate the lifetime probabilities of single motherhood. Even when women remarry, episodes of single motherhood can have far-reaching implications on the health and well-being of women and their children. By documenting a) the prevalence of single motherhood over women’s life course and b) examining the implications of these episodes of single motherhood, this research project may help identify particularly vulnerable groups of women and children and will offer a clear rationale to increase girls’ and young women’s schooling and provide them with income-generating skills.

5. Next Steps

If your site is interested in participating in this project, please contact Shelley Clark (shelley.clark@mcgill.ca) or Cassandra Cotton (cassandra.cotton@mail.mcgill.ca). We
would ideally initially like to form a collaborative partnership with between 3 and 5 DSS groups. We would like to engage a range of sites including those in Western, Eastern, and Southern Africa, with diverse populations, i.e. urban/rural, Francophone/Anglophone.

We currently have very minimal funding with which to begin research on Questions #1 and #2. Our plan is to establish a strong collaborative relationship, produce some preliminary results with respect to Questions #1 and #2, and then apply for an NIH NICHD R01 with which to fully explore Question #3, specifically the effects of single-motherhood in children’s health over the life course.

When you contact us, kindly indicate the approximate number of women ages 15 to 50 at your site, whether you have already collected full marital histories, and the names of individuals at your site who are interested in being part of this project.

References:


