Fertility Differentials across Race-Ethnicity and Generational Status: Incorporating Non-Hispanic Immigrants

The higher fertility of Hispanics, particularly foreign-born Hispanics, contributes to higher overall U.S. fertility, yet increasing immigration from Asia and Africa, combined with the generally young ages of immigrants, suggests that more information is needed on the fertility of non-Hispanic immigrants. In this research, we use the June Fertility Supplement of the Current Population Survey (CPS) to look at the mean number of children across white, black, Hispanic, and Asian women aged 35-44 by generational status. Preliminary results suggest that Hispanic and Asian first-generation women have higher fertility than subsequent generations, and black and Hispanic first-generation women have higher fertility than their white counterparts. Only Asian women demonstrate declining fertility across generations; Hispanic women’s fertility falls from the first to second generation but increases from the second to third generation. Planned analyses will use multiple years of the CPS, explore variation by nationality, and examine the contributions of compositional differences.
INTRODUCTION

Research on race-ethnic differentials in fertility in the United States tends to focus on the Hispanic population, whose fertility rates are estimated to be higher than that of non-Hispanic whites (e.g., Martin, Hamilton, Ventura et al. 2011). Much of Hispanic fertility is driven by Hispanic immigrants, in particular those of Mexican origin (Jonsson and Rendall 2004; Parrado 2011), and the growth of the Hispanic population in the U.S. has been studied extensively (e.g., Tienda and Mitchell 2006). The U.S., however, draws immigrants from all corners of the world and from all races, and non-Hispanic immigrant groups and their fertility behavior, are underrepresented in the literature. Immigration and fertility of both Hispanic and non-Hispanic immigrants, particularly Asians, are expected to contribute to radical changes in the demographic composition of the United States (Humes, Jones, and Ramirez 2011; Passel and Cohn 2008). Furthermore, while a substantial body of literature has examined the role of nativity, generational status, and/or assimilation processes in fertility among Hispanic women (e.g., Bean, Swicegood, and Berg 2000; Frank and Heuveline 2005; McDonald, Manlove, Ikramullah 2009; Parrado 2011; Parrado and Morgan 2008), more research is needed comparing these processes to non-Hispanic immigrant groups in the U.S. It is particularly important to understand the fertility behaviors of those of Asian descent, as Asians are the fastest-growing minority group in the United States and recently surpassed Hispanics as the largest group of new immigrants (Pew Research Center 2012).

It is not clear whether the fertility of Hispanic immigrants differs from other race-ethnic immigrant experiences. That is, the question remains to what extent the higher fertility of first-generation Hispanic women is due to their immigrant status itself (and thus we would expect higher fertility for immigrants across race and nationality) or to something unique about
Hispanic immigrant women. Further, compositional differences across immigrant groups may contribute to differentials in fertility behavior. This study uses data from the June Fertility Supplement of the Current Population Survey (CPS) to examine patterns in the number of children ever born to Hispanic, non-Hispanic white, non-Hispanic black, and Asian women aged 35 to 44 across generational status (first/1.5, second, or third or more). In addition, our planned analyses will assess the roles of traditional correlates of fertility including level of education, income, and union status, in the number of children ever born across race/ethnicity and generational status.

BACKGROUND

Context

High levels of fertility among immigrants are often thought to be due to normative high fertility in sending countries, or in some cases related to selection due to concentrations of younger childbearing age groups of immigrant women (Blau 1992). Traditional assimilation theory posits that these immigrants, with increasing time spent in the U.S., and their children and subsequent generations, will be absorbed into the dominant culture, in this case into a culture of lower fertility. The vast majority of research done on immigrant fertility, however, has actually been done on Hispanic immigrants (e.g., Ford 1990; Forste and Tienda 1996; Hill and Johnson 2004; Kahn 1988), though this literature itself covers a range of nationalities and categorizations—Latin American, Hispanic, Latino Mexican, Mexican-American, or Puerto Rican individuals. This focus is neither arbitrary nor impractical: there are often constraints on fertility data for other minority and immigrant groups that make it difficult to study their fertility
behavior (Forste and Tienda 1996), and traditionally the largest immigrant group in the United States has been Hispanics.

Moreover, the rapid growth of the Latin American-origin population in the United States over the past few decades and its apparent higher fertility rates compared to white non-Hispanic Americans have important implications for the demographic make-up of the United States, potentially affecting public institutions such as school systems (Tienda and Mitchell 2006). Recent releases from the U.S. Census indicate that the Hispanic population in the United States has grown by nearly 43 percent since 2000, to 50.5 million people, comprising 16 percent of the U.S. population and surpassing African Americans as the largest minority group (U.S. Census 2011).

Both fertility and immigration to the United States contribute to this growth. Latin Americans comprise the largest proportion of the foreign-born in the U.S., accounting for more than half of the foreign-born population as of 2010, and Mexicans figure as the largest immigrant group among all nationalities, accounting for nearly 30 percent of the foreign-born population (Grieco et al. 2012). Compared to non-Hispanic whites, Hispanics in the U.S. are a young population, with over 94% under the age of 65 (for non-Hispanic whites this is just under 85%), and nearly 30% of Hispanics are under the age of 15, compared to just 17% of non-Hispanic whites (U.S. Census Bureau 2010); thus, a large share of this population is or will soon be of childbearing age. In 2009 the total fertility rate (TFR) for all race/origin categories was just over 2.0; this was driven, however, largely by Hispanic fertility. The TFR of Hispanic-origin women was well over replacement level at 2.73, while those of non-Hispanic white and black women were 1.78 and 2.03, respectively. Among Hispanic women, the TFR was even higher among
certain ethnic groups, most notably 2.64 among Mexicans and 3.51 among “other” Hispanics, largely of Central and South American origin (Martin et al. 2011).

Latin American-origin groups, however, are not the only groups coming to and bearing children in the United States. Between 2000 and 2010, those who identified themselves as only Asian experienced the fastest rate of growth of any race-ethnic group (Humes et al. 2011). Moreover, Asian immigrants recently surpassed Hispanic immigrants as the largest group—nearly 40 percent—of new immigrants to the U.S (Pew Research Center 2012), and there is evidence that immigration from Latin America has declined in recent years (Passel and Cohn 2010). Over 28% of the foreign-born population in the United States is from Asian countries, nearly 13% comes from European countries, and four percent come from Africa and other regions (Grieco et al. 2010). While not as abundant as fertility research focusing on Hispanics, the very limited extant literature examining other ethnic and immigrant groups, alone or as they compare to immigrants from Latin American sending countries, have found differences in contributions to U.S. fertility (e.g., Bachu and O’Connell 1984; Kahn 1988). Like Hispanics, these other immigrant populations have children and establish subsequent generations in the U.S., yet it is unclear how the fertility of other immigrant groups compares to either native-born Americans or foreign-born Hispanics. To the extent that non-Hispanic immigrant fertility may differ from that of Hispanic immigrants, the shifting composition of the immigrant population has implications for overall fertility in the U.S.

Hispanic nativity and U.S. fertility

The large proportion of foreign-born Hispanics means that the role of Hispanics in U.S. fertility is closely tied to the role of Hispanic immigrants in U.S. fertility. The fertility of foreign-born
Mexicans explains much of the effect of Mexican fertility compared to white non-Hispanics, and Jonsson and Rendall (2004) estimate that the Mexican immigrants and their subsequent generations will reach one million annually by the year 2040, approximately 25 percent of current annual births (Frank and Heuveline 2005; Jonsson and Rendall 2004). Regarding age at (first) birth, native-born Mexicans have been found to have higher fertility at young ages compared to foreign-born Mexicans, but foreign-born Mexicans have higher completed fertility compared to native-born Mexicans (Frank and Heuveline 2005). The extent to which there are differences between foreign-born and native-born Hispanics is not without some debate, however; Parrado’s work (2011) suggests the younger age structure of Hispanics immigrants distorts estimates of cohort fertility rates such as the TFR. Instead, he suggests that completed fertility is a more appropriate fertility indicator, finding that this produces much smaller differences between foreign-born and native-born Hispanics overall.

Several studies find that fertility declines with increasing duration of residence among Mexican immigrants and with increasing generational exposure to the U.S., through both the U.S.’s lower normative fertility and structural factors encouraging lower fertility (e.g., Bean et al. 1984; Choi 2011; Lindstrom and Saucedo 2002; Ford 1990). Some research finds that while duration of residence in the U.S. reduces fertility within nativity groups (i.e., foreign-born Mexicans and native-born Mexican Americans), native-born Mexican Americans have higher cumulative fertility than their foreign-born counterparts, suggesting a differential effect of U.S. exposure depending on nativity (Frank and Heuveline 2005). Similarly, Bean et al. (2000) caution that scholars use restraint in confirming assimilation theory: while applicable to duration effects and first-to-second generation transitions, the authors found third-generation Mexican American women to have higher current fertility than both non-Hispanic whites and second-
generation Mexican American women, a pattern similar to other studies (Carter 2000; Frank and Heuveline 2005). Choi (2011), while finding support for assimilation theory with Mexican immigrant women’s fertility levels dropping with increasing duration of residence, also finds support for a selection effect whereby immigrants’ pre-migration fertility is higher than that of their non-migrant counterparts in Mexico. Lindstrom and Saucedo (2002) find support for selection among temporary and permanent migrants based on fertility preferences, with permanent residents experiencing a stronger negative effect on fertility with time in the U.S.

Non-Hispanic immigrant fertility

Immigrants from Latin American sending countries are not the only race-ethnic group contributing to estimates and projections of U.S. fertility. A fairly dated study, using 1983 CPS data, found that immigrant women from European countries have lower fertility than women from Asian countries but nearly identical to South American women and higher than Cuban women (Bachu and O’Connell 1984). Fertility of immigrants from Mexico, Columbia, Jamaica, Cuba, Dominican Republic, China, South Korea, India, and the Philippines have demonstrated selectivity, encouraging adaptation of destination-country fertility norms, but with Asian groups adopting lower fertility norms more quickly than other groups (Kahn 1988). Some work indicates that the assimilation patterns described above for Hispanic immigrants, in fact, holds more strongly for European immigrants and suggests that this is in part due to different and sometimes temporary or circular migrant flows from Latin American countries (Ford 1990). Chinese immigrants in the U.S. show significant variation in fertility based on ethnic/linguistic subculture and urbanicity of the sending region (Ren 2009), and Chinese women from the People’s Republic of China see increases in their fertility through immigration to the U.S.,
exiting stricter fertility policies (Hwang and Saenz 1997). Interestingly, one study using 1970 and 1980 Census data to examine fertility of immigrants from Latin America, the Caribbean, Asia, and the Middle East found only small differences in fertility rates between immigrants and native-born women (Blau 1992).

Despite these studies, scholarship on differential fertility in the United States could benefit from more from targeted and more current comparisons of the fertility of different race-ethnic groups in the U.S. by generational status, as there are several gaps in the literature. One, it is not clear whether the fertility of Hispanic immigrants differs from that of other immigrants. Immigrants, by and large, tend to be a youthful group, and if a young age structure among immigrants is associated with high fertility (Parrado 2011), then all immigrants—not just Hispanic immigrants—may have higher fertility than native-born non-Hispanic whites, the default comparison group. Two, it is not clear whether generational changes in fertility occur in a similar manner across race-ethnic immigrant groups; that is, is fertility lower, and is the magnitude of decline similar, among successive generations across race-ethnic groups? Three, how does differential selection by socioeconomic correlates (such as education and marriage) and differential assimilation affect fertility rates across generations for different race-ethnic groups?

**Correlates of fertility**

Demographic and socioeconomic characteristics, such as income, employment, and education, are tied to fertility (e.g., Bean and Swicegood 1982; Bongaarts 2010; Musick et al. 2009; Rindfuss, Guzzo, and Morgan 2003), and compositional differences across race-ethnic-generational status groups may contribute to fertility differentials. Hispanics as a group have
lower socioeconomic status than white native-born Americans (Lopez and Cohn 2011), and lower socioeconomic status is associated with earlier sexual debut and thus longer exposure to higher completed fertility (e.g., Madkour et al. 2010). Additionally, union status at birth has been shown to vary by race (Carlson, McLanahan, and England 2004). Hispanics, for example, are more likely to marry as teenagers compared to both blacks and whites (Forste and Tienda 1996; Wildsmith and Raley 2006). Mexican American women have higher proportions of nonmarital childbearing than non-Hispanic whites, which may reflect greater acceptance of cohabitation and childbearing within cohabiting unions compared to white and black American women (e.g., Manning 2001; Oropesa 1996), especially among the foreign-born (Oropesa 1996). In contrast, Asians in the U.S. have very low levels of cohabitation (Brown, Van Hook, and Glick 2008) and nonmarital childbearing, and they tend to marry at later ages (Copen et al. 2012).

Not only do these correlates of fertility vary by race/ethnicity, but there may be variation specific to certain groups across generational status. It is possible that there is a pattern of segmented assimilation whereby some immigrant groups are upwardly mobile and see decreased fertility in accordance with the dominant culture, while other groups experience downward assimilation into oppositional or persistently disadvantaged minority populations (Portes and Zhou 1993) that may have higher fertility.

Data and approach
This study uses data from the Current Population Survey (CPS) June Fertility Supplement to examine fertility differences, measured as number of children ever born, among Hispanic, non-Hispanic white, non-Hispanic black, and Asian women aged 35 to 44; we exclude women who
are American Indian/Alaskan Native and women who are multiracial due to small sample sizes. Though women are certainly able, and do, have children in their late thirties and forties, the bulk of fertility is completed by these ages and thus the number of children born by this point approximates completed fertility. For instance, only 12% of births to Hispanic women and 15% of births to non-Hispanic women in 2009 were to women 35 and older (Martin et al. 2011). We also assess the relationship between generational status (first and 1.5, second, and third-plus) and fertility, within and across race-ethnic groups. In the exploratory analyses presented here, we use only the 2010 June CPS (N=8,902), but we plan to expand our analyses to include earlier waves of the June CPS (which extend as far back as 1971) to explore whether differences across race-ethnic-generational status have changed over time. In future analyses, we will explore further subdividing the age ranges by 35-39 and 40-44 as well as disaggregating the first and 1.5 generations, as the sample sizes will increase with additional cycles of data. We will also explore disaggregating our race-ethnic groups by country of origin. Our preliminary results simply disaggregate the mean number of children by race-ethnic-generational status in the 2010 June CPS. In the completed paper, we will test how compositional factors, such as marital status and education, may be associated with fertility, and explore whether there is variation in the relationship between traditional correlates of fertility such as education and union status and across these groups. We will also explore duration of stay and the timing of immigration by testing for potential interactions and/or subanalyses among immigrants.

**Preliminary results**

Table 1 presents the mean number of children for women aged 35-44 in June 2010, by race-ethnic-generation status. Although we have only limited information in this table, there are
nonetheless several things to note. One, foreign-born Hispanic immigrants do have higher mean family sizes than other foreign-born groups, having nearly half a child more, on average, than white, black, and Asian immigrants. Two, the mean number of children among second-generation immigrants is lower than the mean number of children for first-generation immigrants, and this is true across race-ethnic groups. Black and Asian second-generation immigrant women have the lowest mean number of children, but the proportional difference between the mean number in the first and second generations is largest for Hispanic and black women (about a 20% decline for both groups). Third, only third-generation or later Asian women show further declines in the mean number of children across generations, having an average of only 1.3 children by their late 30s and early 40s. Third-generation or later white, black, and Hispanic women have a mean number of children that is higher than the second-generation women. For whites and blacks, the mean number in the third-generation or later is virtually identical to those of immigrant women; this represents a fairly large proportional increase for black women from the second to the third generation. The mean number of births for third-generation or later Hispanic women remains well below that of immigrant Hispanic women, and the differences across white, black, and Hispanic third-generation women are relatively small. Fourth, generational differences are almost negligible for white women, which might suggest few cultural differences (and thus no need for assimilation) for this group across generations. This would be consistent with some research (e.g., Kalmijn and Van Tubergen 2010) suggesting that race, rather than nationality or ethnicity, is a factor in the assimilation process in the U.S. Asian women, on the other hand, exhibit a clear downward trend in the mean number of children across generations, perhaps reflecting assimilation and upward mobility through education. The lower mean number of children between first and second generation
black and Hispanic women, and the subsequently higher number in the third or later generation, is consistent with other work among Mexican immigrants showing that assimilation and progress often stalls after the second generation (i.e., Blau and Kahn 2007). Moreover, first- and second-generation Asians have overall higher levels of educational attainment compared to native-born whites and other minority groups (e.g., Park and Myers 2010), a status shared by Asian Americans (e.g., Sakamoto, Goyette, and Kim 2009). This combined with more conservative views toward sexual behavior and later ages at sexual debut among Asian American adolescents and young adults compared to other ethnic groups (Okazaki 2002) may account for the group’s unique fertility trend.

Conclusion and next steps
This study will address several gaps in the literature. Fertility research in the United States tends to focus on the Hispanic population, as the group’s high fertility, particularly among immigrants, is believed to drive much of the U.S. total fertility rate. We know less, however, about the fertility of non-Hispanic immigrants, a major oversight given that non-Hispanics account for nearly half of the foreign-born population and Asians recently surpassed Hispanics as the largest group of new immigrants (Pew Research Center 2012). Thus, it is vital to understand whether other immigrant groups exhibit similar fertility patterns, which would suggest continued population growth and fertility levels slightly above replacement-level, or if Hispanic immigrant fertility is uniquely high and thus a compositional shift away from Hispanic-origin immigrant groups to groups from other countries/ethnicities would lead to lower fertility levels and slower population growth. In addition, further investigation is needed into whether and how the effects of factors such as socioeconomic status, duration of residence, and family background are
correlated with fertility across both Hispanic and non-Hispanic immigrant groups. This study will fill these gaps in the literature by comparing the fertility of Hispanic and non-Hispanic immigrants, compared to one another and compared to their native-born counterparts; examining ethnic/regional group differences in fertility outcomes; and examining whether commonly cited correlates of fertility are associated with fertility among these groups to the same degree and in the same direction.
References


U.S. Census Bureau, Statistical Abstract of the United States: 2011

Table 1. Weighted Mean Number of Children by Generational Status for Women 35-44 in the 2010 June CPS

<table>
<thead>
<tr>
<th></th>
<th>White</th>
<th>Black</th>
<th>Hispanic</th>
<th>Asian</th>
<th>Raw N</th>
<th>weighted %</th>
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<tbody>
<tr>
<td>First/1.5</td>
<td>1.77</td>
<td>2.00</td>
<td>2.41</td>
<td>1.84</td>
<td>1,762</td>
<td>22.0</td>
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<tr>
<td>Second gen</td>
<td>1.71</td>
<td>1.55</td>
<td>1.90</td>
<td>1.60</td>
<td>529</td>
<td>6.3</td>
</tr>
<tr>
<td>Third or later</td>
<td>1.78</td>
<td>1.99</td>
<td>2.10</td>
<td>1.32</td>
<td>6,611</td>
<td>71.7</td>
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<tr>
<td>Raw N</td>
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<td>941</td>
<td>1,297</td>
<td>550</td>
<td>8,902</td>
<td></td>
</tr>
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