



Variation in the link between parental divorce and children's health disadvantage in low and high divorce settings



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ABSTRACT

Like in other world regions, children with divorced parents in sub-Saharan Africa experience significant health disadvantages relative to their peers with married parents. Preliminary evidence suggests this disadvantage may not be uniform across the subcontinent's diverse settings. Research from other world regions shows that the childhood health consequences of divorce vary across different contexts. Specifically, we hypothesize that the childhood disadvantages associated with divorce are more severe in regions of sub-Saharan Africa where divorce is rare, and less so where divorce is a more common family experience. Using Demographic and Health Survey data from 290 subnational regions within 31 sub-Saharan African countries, multilevel models document the previously shown link between having a divorced mother and child morbidity and mortality. The study results further demonstrate that the childhood health disadvantage is accentuated in subnational African regions where fewer women are divorced and muted in areas where more women are divorced. The findings demonstrate that the broader context can powerfully moderate childhood health inequalities traditionally thought of as operating at the family or individual level.

Introduction

Across diverse regions of the world, divorce is associated with health disadvantages for the adults and children who experience it (Amato, 2010; Bhuiya & Chowdhury, 1997; Cherlin, Chase-Lansdale, & McRae, 1998; Schmeer, 2013). Only recently, however, has research explored the health implications of divorce in sub-Saharan Africa, where the public health environment suggests the potential for severe health effects is profound. Studies on the link between parental divorce and children's health have developed a clear consensus: African children with divorced mothers have worse health, worse developmental profiles, and lower survival rates, relative to their peers with married mothers (Chae, 2013; Clark & Hamplová, 2013; Thiombiano, LeGrand, & Kobiané, 2013).

Extending this multinational evidence linking parental divorce and children's health disadvantage, we ask whether this association is uniform or if it varies across the subcontinent—specifically, according to the commonality of divorce. Studies of Europe have found that the societal level and acceptability of divorce strongly shape how consequential divorce is for individuals' well-being (Kalmijn & Uunk, 2007; Kalmijn, 2009; Soons & Kalmijn, 2009). The tremendous variation in the prevalence of divorce across Africa motivates our interest in

assessing the relevance of these findings to the African context. At the country level, for example, over 40% of first unions end in divorce within 20 years in Central African Republic, Congo (Brazzaville), and Liberia, compared to fewer than 10% in Mali (Clark & Brauner-Otto, 2015). Within countries there are also striking differences in the commonality of divorce. In Malawi, for instance, the probability of divorce for women in the northern region is nearly one half of what it is for women in the southern region (Reniers, 2003).

Based on this variation, we hypothesize that in geographic areas where divorce is a rare marital outcome, African children of divorced parents will have worse health profiles than in areas where divorce is more common. To test this hypothesis, we pool Demographic and Health Survey (DHS) data from 31 sub-Saharan African countries; these data feature nationally representative samples of reproductive-age women and include detailed information on their marital status and children's outcomes. With these data, we characterize 290 subnational regions by their highly variable prevalence of currently divorced women, and then estimate multilevel models to assess whether the association between divorce and childhood morbidity and mortality varies accordingly. This study highlights the benefit of explicitly considering the contexts in which family-based health inequalities unfold to understand whether they vary accordingly.

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Parental divorce and childhood health in sub-saharan Africa

Does context matter?

There are two primary reasons to hypothesize that the childhood health profiles of children with divorced mothers will be worse in African contexts where divorce is rare. The first reason is selection, which could operate at both the contextual and family levels. In terms of the contextual level, divorce may be more strongly correlated with poor childhood outcomes in low divorce settings because these are also the poorest, least-developed areas. That is, low divorce contexts in Africa may be some of the most socioeconomically disadvantaged settings, where children generally experience poor outcomes. For instance, low divorce areas in Africa tend to be rural settings (Clark & Brauner-Otto, 2015), where school participation is generally low (Zhang, 2006). Living in a rural, educationally disadvantaged setting, where adults have little education and health infrastructure is limited, is correlated with poor childhood health outcomes (Bocquier, Madise, & Zulu, 2011; Fotso, 2007; Kravdal, 2004). Children in these areas may thus experience worse health due to these other contextual realities. Less favorable socioeconomic environments may especially disadvantage children with single—including divorced—mothers, given their possibly limited access to resources at the household level as well. Thus, children with divorced mothers may have worse outcomes compared to their peers with married parents in low divorce societies, but mostly due to the double burden of the unfavorable socioeconomic conditions in their community and their home—not necessarily because of the rarity of divorce.

In addition to selection at the contextual level, selection could also operate at the family level to drive spurious cross-contextual variation in the association between divorce and childhood health disadvantages. That is, individuals who divorce in low divorce settings may be selected on factors associated with poor childhood health. In low divorce settings, the barriers to divorce are higher and thus raise the threshold for leaving a bad marriage (González & Viitanen, 2009; Goode, 1963). In these areas, divorce may be reserved for the most conflict-ridden, possibly even violent, marriages, whereas divorce in other areas may more commonly result from mild marital dissatisfaction (Soons & Kalmijn, 2009). African mothers who divorce where it is uncommon likely have more tumultuous experiences leading up to the divorce than do their peers whose marriages dissolve in settings where divorce is a more typical experience. Because Africa continues to have some of the world's highest rates of intimate partner violence (IPV) (García-Moreno, Jansen, Ellsberg, Heise, & Watts, 2006; Jewkes, Levin, & Penn-Kekana, 2002; Koenig et al., 2003), if divorced women in low divorce settings experience higher marital conflict, this could specifically translate to greater exposure to IPV. IPV is strongly associated with poor childhood health (Åsling-Monemi, Pena, Ellsberg, & Persson, 2003); thus, the circumstances that encourage mothers to divorce in low divorce settings could fully explain why their children have worse outcomes, compared to their peers with married mothers and their peers with divorced parents who live in high divorce settings. That is, in high divorce settings where the threshold for dissolving a marriage is lower, divorce is less likely to be concentrated among the most volatile situations, and thus it may be only weakly correlated with poor childhood health. From this perspective, although children with divorced mothers may have worse health in low divorce settings, accounting for their mothers' distinct profiles could explain the difference.

Aside from selection, a second possibility suggests that the contextual prevalence of divorce could more directly condition its relationship with children's well-being by moderating its economic, social, and psychological implications for mothers. Beginning with economic factors, divorcing in a low divorce setting may put women at especially high risk of poverty. In Africa, bridewealth is a common marital tradition, but it tends to be more common in low divorce settings. Although the norms and expectations surrounding bridewealth

vary tremendously across Africa, in its basic form, the practice involves a prospective husband paying the bride's family goods, such as livestock, clothing, beads, household items, or money (Browning & Miller, 1999). The payment of bridewealth transfers power and authority to the husband and limits a wife's financial autonomy from him and his family (Dodoo, 1998; Horne, Dodoo, & Dodoo, 2013). Thus, given the organization of marriage and family life in low divorce African settings, many divorced women in these areas may have fewer resources than their peers who divorce in a context where it is more common. Moreover, because women's families often have to repay bridewealth if the union ends, divorced mothers in low divorce settings may receive minimal familial support (Goode, 1963; Isiugo-Abanihe, 1994). Because economic disadvantage is closely associated with poor childhood health (Montgomery & Hewett, 2005), the greater economic consequences of divorce in low divorce settings could mean children with divorced parents have especially poor health and lower survival. Conversely, high divorce contexts are often matrilineal settings where women maintain their own budgets and enjoy land rights (O'Rourke, 1995), so divorce may not be as closely linked to financial hardship, thereby loosening its association with poor childhood health.

In addition to greater economic ramifications, divorcing in an African context where divorce is rare may also be more socially challenging for children's mothers than doing so in a place where it is more common. Evidence from across diverse contexts and historical periods suggests that the extent to which divorce—and other family processes—is perceived as socially acceptable increases with its prevalence (Blumer, 1986; DiFonzo, 1997; Spanier & Thompson, 1987; Thornton, 1985; Thornton & Young-DeMarco, 2001; White & Booth, 1991). In fact, in some African settings where divorce is common, it is locally understood as an acceptable, if unfortunate, part of marriage (Kaler, 2001). In high divorce regions of Malawi, even religious leaders support divorce as a strategy for addressing certain marital issues, such as sexual infidelity (Trinitapoli, 2011). Conversely, researchers describe divorce as culturally, religiously, and socially unacceptable in African societies where it is rare. For example, in southeastern Nigeria where divorce is uncommon, Smith (2009) reports that it is viewed as immoral. Divorced women living in African settings where divorce provokes social disapproval report discrimination and isolation (Clark, Beguy, & Cotton, 2013). Based on previous evidence that African children whose mothers are socially isolated experience higher mortality (Adams, Madhavan, & Simon, 2002), this social isolation could further contribute to children of divorced mothers in low divorce societies having worse health outcomes than their peers in high divorce areas.

Building on the notion that divorce is more isolating in low divorce settings, divorced women in these areas may face a greater psychological burden than women who divorce where it is more common (Diener, Gohm, Suh, & Oishi, 2000). Qualitative research of divorced women in Kenya confirms that they internalize the social disapproval of divorce. One divorced woman stated: "I am disrespected because I don't have a husband. The women around here feel that since I am not married then I am not a good member of the community" (Clark et al., 2013). Psychological research shows that negative self-perceptions interfere with emotional well-being (Yang et al., 2007), which could mean divorced women in low divorce settings are more likely to develop depression and anxiety; in turn, children whose mothers have mental health concerns are known to have worse health and developmental outcomes (Engle et al., 2007; Patel, Rahman, Jacob, & Hughes, 2004).

Current study

In light of these potential mechanisms, in this study we assess whether the poor childhood health outcomes associated with having a divorced mother vary across low versus high divorce contexts in sub-Saharan Africa. Although our data do not allow us to fully rule out the possibility that selection at either the contextual or family level drives

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