THE UNIVERSITY OF HOUSTON
INSTITUTE FOR RESEARCH ON WOMEN, GENDER & SEXUALITY

Houston/Harris County Gender & Sexuality Data: Initial Report

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THE UNIVERSITY OF HOUSTON INSTITUTE FOR RESEARCH ON WOMEN, GENDER & SEXUALITY (UH IRWGS) *documents and analyzes gender and sexuality dynamics in Harris County, as they intersect with race, ethnicity, class, age and other identify factors, exploring their effects on individual lives and the wider economy and society. This report provides initial data to spur dialogue, especially with regard to issues of current and future workforce, health, civic participation, and in/equity.*

Findings documented here include new analyses of select local gender and sexuality data, derived from the annual US Census and other sources, as well as some national and other comparison data, and some relevant preexistent analyses by others. These baseline data and data on other relevant topics not covered here will be expanded upon in IRWGS research and reports going forward.

GENDER, RACE/ETHNICITY, AND POVERTY

In Harris County in 2017, the poverty rate of women (18 and over) was nearly 50% higher than that of men (15.3% to 10.4%), see Figure 1. This gender gap in adulthood poverty rates was larger than observed nationally, in Texas as a whole, and in comparable urban counties in the United States.

Importantly, local adulthood poverty rates, and gender gaps in these, varied widely by race/ethnicity, see Figure 2.

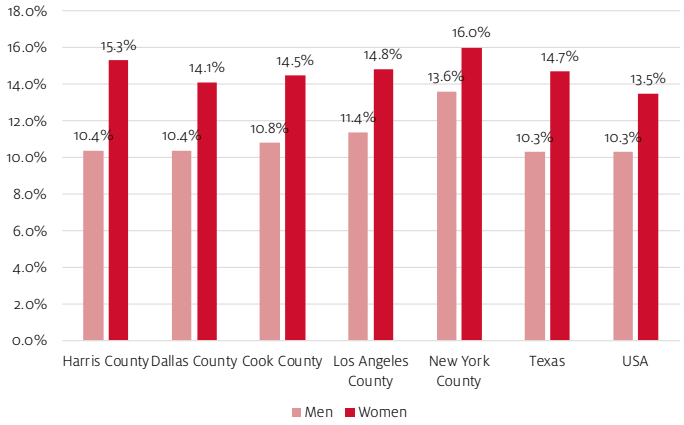
GENDER, RACE/ETHNICITY, AND WAGE INEQUALITY

Like the rest of the country, Harris County has a gender wage gap. The national wage gap during 2017 meant that, comparing median salaries regardless of occupation, industry or seniority, full-time working women, including women of all races, made 81.7 cents for every $1 made by full-time working men, including men of all races (Institute for Women's Policy Research [IWPR], 2019; Table 2).

In Harris County, condensing the years 2015-2017, full-time working women made 83.3 cents to the dollar of full-time working men (Texas Women's Foundation [TWF], 2018; Table 1). Issues affecting the gap may include occupational segregation (channeling women and men into different jobs with different pay scales), varying rates of promotion, discrimination in pay within jobs, intersectional racial bias, inequitable pay for jobs involving comparable skills, etc. (American Association of University Women, 2018).

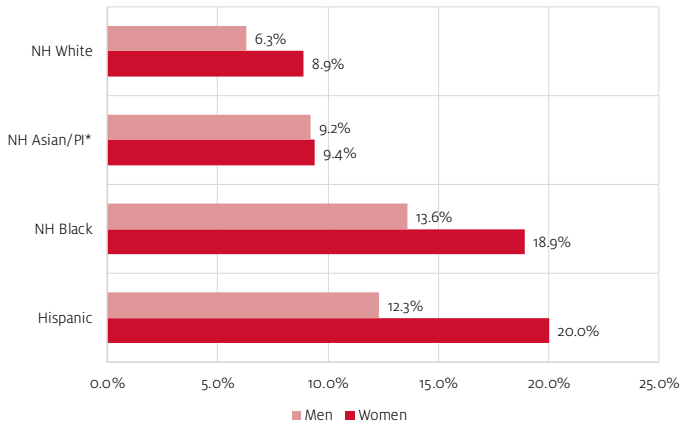
As is also the case nationally, the gender wage gap in Harris County varies considerably among women by race/ethnicity, compared to non-Hispanic (NH) White men, the highest earning group in the county.[2] Nationally during 2017, for each dollar made by NH White men, NH Asian women made 86.0 cents, NH White women 74.8 cents, NH Black women 61.3 cents, and Hispanic women (of all races) 53.2 cents (IWPR, 2019; Table 1). In Harris County, condensing the years 2015-2017, these wage gaps were markedly larger; compared to each dollar made by NH White men, NH White women

Figure 1: 2017 Adult Poverty Rates by Gender for Harris, Dallas, Cook, LA & NY Counties, Texas & USA*



*Source: American Community Survey (2017) microdata retrieved from IPUMS-USA, University of Minnesota (www.ipums.org); UH IRWGS analysis. (*Cook County includes Chicago and New York County equals Manhattan.)*

Figure 2: 2017 Harris County Adult Poverty Rates, by Gender and Race/Ethnicity



Source: American Community Survey (2017) microdata retrieved from IPUMS-USA, University of Minnesota (www.ipums.org); UH IRWGS analysis. NH = non-Hispanic; PI = Pacific Islander; Hispanic includes all races.[1]

**While 2017 ACS data show a 0.2% gap in the percentages of NH Asian/PI women and men in poverty, the 2016 / 2018 gaps were 2.3% (12.5% men/14.8% women) / 2.1% (10.5% men/12.4% women), respectively.*

made just 69.4 cents, NH Asian/PI women 63.6 cents, NH Black women 47.1 cents, and Hispanic women (of all races) 33.5 cents (TWF, 2018; Table 2). See Figure 3.

Wide gender wage gaps in Harris County in particular may be due in part to the fact that NH White men in Harris County in 2015-2017 made more ($78,000 median; see Figure 3) than NH White men nationally during 2017 ($60,388 median; Gould, et al., 2018), the former within a largely sex- and race-segregated corporate/business environment that disadvantages women and minority individuals. Houston's businesses lean heavily toward the oil and gas sector, where women make up only 22% of employees and their representation relative to men decreases with seniority (Women in Energy, 2019). Such underrepresentation means that women in Harris County may have proportionately less sway within these environments, and proportionately less money and influence of their own to spend within the community.

Although this report focuses on the gender wage gap as it disadvantages women, Figure 3 also speaks to the fact that the Harris County wage gap across men of various races and ethnicities is notable. As shown, Hispanic, NH Black, and NH Asian/PI men made substantially less than NH White men.

THE GENDERED HARDSHIP MATRIX

Low wages are part of a nexus of interrelated variables that create and sustain economic precarity and concomitant vulnerability in women. For example, economic dependency may lead women to stay in abusive relationships (Barnett, 2000), and this dynamic may be intensified among women with children they must provide for (Nouer et al., 2014) and immigrant women (Reina et al., 2014). In particular, undocumented immigrant women may fear deportation upon reporting abuse, and if not undocumented themselves, may fear deportation of family members.

The following "Gendered Hardship Matrix" (Figure 4) suggests how, without a social safety net, challenges for women may cascade and compound. For instance, early or unplanned fertility may lead to school leaving, limited job choices and/or low wages. Those in turn may mean lack of reliable childcare, leading to absenteeism and then to job loss. Outside of paid work, women are often additionally tasked with childcare; obtaining and preparing nourishing food for the family; caring for elders; doing the emotional work within a couple; doing the preponderance of housework; maintaining family kinship networks; et cetera. Such dynamics may be further intensified within a context of poverty. Poverty also correlates with higher levels of domestic violence (Goodman et al., 2009; Satyanathan & Pollack, 2001).

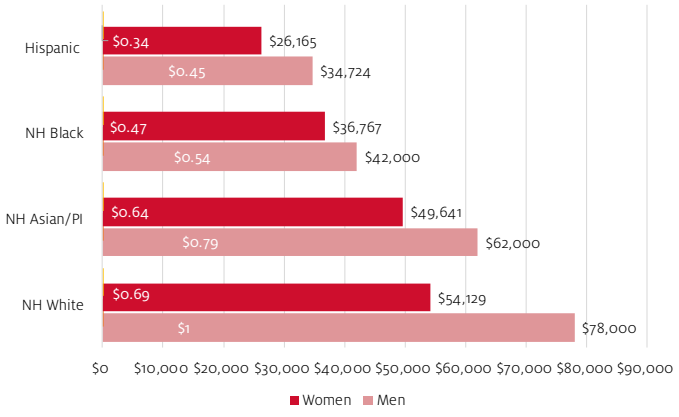
Analysis of data from 1,690 mothers in the Fragile Families and Child Well-being Study, by UH IRWGS researcher Daphne

PRECARITY AND DATA

Although some gender and sexuality data are relatively easy to track, others are more difficult. Such difficulties often spring from contexts of precarity – when people feel potentially subject to harm if they divulge information. For example, it is difficult to reliably document rates of domestic violence because reporting could lead to more violence, or to loss of income or housing; undocumented victims may fear that reporting risks deportation (and reduced reporting may lead to a rise in actual violence). Rates of sex sales/purchases and trafficking are difficult to track since these activities are illegal and both parties avoid report. Lesbian, Gay, Bisexual, Transgender and Queer (LGBTQ) people may choose not to self-identify due to lack of employment protection and other social risk. Women overall may hesitate to acknowledge or report harassment or disparate pay when they feel their jobs will be at risk if they complain or that they will suffer in other ways. Researchers in these realms work to document responsibly, in ways that minimize risk.

Sometimes data exist in a precarious state, due to problems such as preservation issues or collection error. The latter was the case when a major rise in the reported rates of maternal mortality in Texas during 2012 turned out to be based in part on people checking the wrong box on a form (Baeva et al., 2018; MacDorman et al., 2018), without follow-up verification. Although those rates generally were not as high as had been suggested, they were still quite high for certain populations, specifically Black women in Texas, who by one analysis died that year at the rate of 27.8 maternal deaths/100,000 births, vs. 13.6 deaths for White women, and 11.5 for Hispanic women (Baeva et al., 2018). As with maternal health issues, Harris County lacks clear and accurate data on quite a few issues within the IRWGS purview; thus the need for research and policy analyses, to better understand and serve the community.

Figure 3: Harris County Median Annual Wages, by Gender & Race/Ethnicity, & Comparison Wages to the Dollar Made by Non-Hispanic White Men (2015-2017)

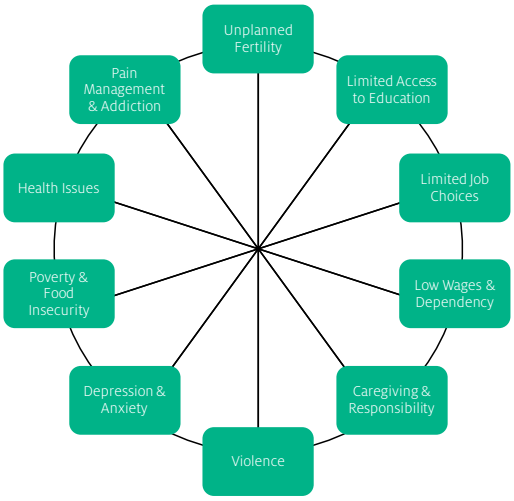


Source: Women's data from TWF (2018; Table 2), based on analyses of 2015-17 American Community Survey microdata conducted by IWPR. Comparable men's median wage data obtained directly from IWPR (personal communication, Oct. 9, 2019), with UH IRWGS calculations of comparison wages to NH White men. NH = non-Hispanic; PI = Pacific Islander; Hispanic includes all races.

[1] *Overall, the Harris County population during 2017 was 43.0% Hispanic (including 34.5% Hispanic White, 6.9% Hispanic Other, 0.8% Hispanic Multiracial, 0.4% Hispanic Black, 0.2% Hispanic American Indian/Alaska Native and 0.1% Hispanic Asian/PI).*

[2] *However, NH White men are not always the highest earners: In 2017, nationally, NH Asian men made 112 cents per dollar made by NH White men (see IWPR, 2019; Table 1); in 2015–2017, in Texas overall, NH Asian/PI men made 111 cents per dollar made by NH White men (data from IWPR, personal communication, Oct. 9, 2019); whereas, as shown in Figure 3, in Harris County they made just 79 cents per dollar made by NH White men (UH IRWGS calculations of comparison wages).*

Figure 4: Gendered Hardship Matrix



Source: UH IRWGS

Figure 5: Overview of Lack of Workforce Support for Families

Light Teal	Child in School
Teal	Parent at Work
RED	Child NOT in School, Parent at Work/Commuting
Black	Parent Commuting

Image does not include all holidays, Spring break, teacher in-services, or areas without Kindergarten.

Source: UH IRWGS.

[3] *261 weekdays/year x 18 years = 4698 total weekdays. 261 days x 5 years = 1305 uncovered full workdays for first five years. Years 5–18, 261–180 school days / year = 81 uncovered workdays / year. 81 x 13 years = 1053 uncovered full workdays in a child's life between ages 5 and 18 (K–12). Years 5–18, 2.5 uncovered afterschool hours x 180 = 450 additional uncovered afterschool hours / year. 450 x 13 = 5850 uncovered total afterschool hours (K–12) divided by 10 = 585 uncovered 10-hour periods (workday equivalent including commute). 1305 + 1053 + 585 = 2943 uncovered 10-hour periods. 4698 – 2943 = 1755 covered 10-hour periods. That means that a child is in school during work hours (from 8am to 6pm) only 37.4% of the time, and not in school 62.6% of the time. Counting from 8am to 5pm, a child is in school during work hours 41.5% of the time.*

[4] *School start and end times vary, generally starting between 7:30 and 8:30am and ending between 2:30 and 4:30pm. For this analysis, we assume a 7.5-hour school day, a start time of 8am, and an end time of 3:30pm.*

Hernandez, found that women who reported experiences with domestic violence, whether physical, mental or sexual, were 44% more likely to be depressed than those who did not report these experiences; depression, in turn, reduced motivation and ability to ensure a food-secure household, the lack of which has been demonstrated to affect children's development (Hernandez, 2014). Other research has demonstrated that decreases in the gender pay gap over time predicted substantial reduction in domestic violence (Aizer, 2010), suggesting that when women have better economic options (and therefore better support should they leave abusive situations), whether or not they are currently employed, domestic violence declines. This may lead to savings on medical care and reduction of productivity losses for employers, in addition to saving whole families from the long- and short-term physical, psychological, and emotional consequences of violence (Aizer, 2010).

LACK OF INFRASTRUCTURE TO SUPPORT WORKING PARENTS

Although childrearing responsibilities are less strictly gender segregated now than previously, women still provide the majority of care and are most likely to adjust their employment to accommodate direct care responsibilities (Livingston, 2018). That burden is increased when parents raise children solo. UH IRWGS analyses of 2017 American Community Survey data (IPUMS-USA, 2019) suggested that, in Harris County, 30.4% of women with minor children in the home were unpartnered, with a median household income of $31,600, and 36.0% living at or below the poverty line, whereas 8.2% of men with minor children in the home were unpartnered, with a median household income of $54,000 and 17.2% at or below the poverty line. Partnered parents had a median household income of $78,000, with 11.2% living at or below the poverty line.

Nationally, in 2017, 26.6% of women with minor children in the home were unpartnered (median household income $35,200 and 31.4% at or below the poverty line), and 8.4% of men with minor children in the home were unpartnered (median household income $52,500 and 15.6% at or below the poverty line). Nationally the median household income for partnered parents was $87,200, with 9.2% at or below the poverty line.

Mothers irrespective of income level or partnership status may be caught in childcare responsibilities that keep them from consistently participating in the work world when they want to, a situation that has historically pushed women out of policymaking roles in business and government and that has also depressed their wages and social influence (Gregory, 2012; Schochet, 2019). Figure 5 documents the lack of public support for childcare, which, at the same time that it denies many children the benefits of early childhood education, also often prevents mothers (predominantly) from working full time consistently, and thus lowers both employers' expectations about the reliability of women workers overall and their willingness to invest in their women employees with raises and promotions.

Between the birth of a child and when she or he turns 18, UH IRWGS estimates that nationally, where public schooling begins with Kindergarten, public care/school is NOT available to children during work hours approximately 63% of the time.[3] That includes no public school care before 5 years old in many districts and, once children enter elementary school, no public care during the summer, school holidays, teacher in-service days, and each school day after roughly 3:30,[4] but it does NOT include sick days. In Fall 2019, Texas schools statewide began offering full-day pre-Kindergarten for some 4-year-olds (those eligible include children under the poverty line, in foster care, and in dual-language or military families), so for those children the rate is now 60% of work hours not covered, but much progress remains to be made.

Those who can afford good private childcare and afterschool and summer programs may be able to combine work with childrearing fairly easily. But the many gaps in the support schedule and the lack of friendliness toward the time demands of childrearing among some employers mean that even well-funded parents who prefer to work full time may feel a need to step out of the work stream or reduce their hours, as UH IRWGS researcher Chinhui Juhn and others have documented (Goldin, 2014; Cubas, Juhn, & Silos, 2018), only to find that it is difficult to step back in (Weisshaar, 2018). For both cultural and economic reasons, that person is the mother 83% of the time (Livingston, 2018).

FERTILITY RATES

Fertility rates have decreased locally and nationally since the start of the recession in 2007 (Centers for Disease Control [CDC], 2020). Overall, Texas and Harris County general and teen fertility levels have declined markedly but remain high compared to national rates.

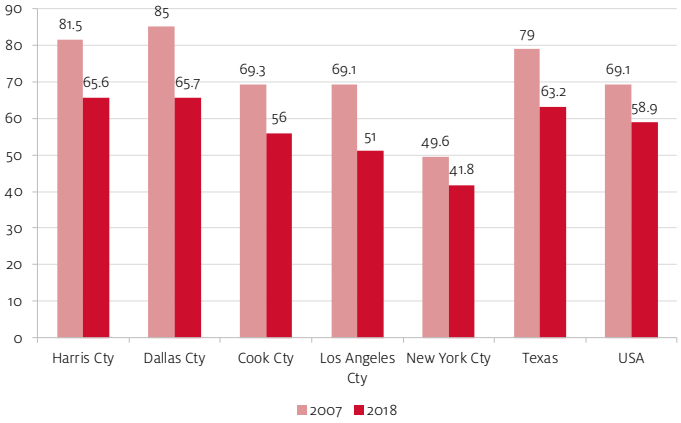
In Harris County in 2018, the general fertility rate per 1,000 women aged 15-44 was 65.6 births, down from 81.5 births in 2007 (see Figure 6), a 19.5% decline, while in 2018 the national rate was 58.9 births per 1,000 women, down from 69.1 in 2007, a 14.8% decline. In Texas overall the rate fell from 79.0 to 63.2 (a 20% decline).

Over the same period, the Harris County fertility rate declined in particular among Hispanic women aged 15–44—from 103.67 births/1000 women in 2007 to 71.64 in 2018 (30.9%), see Figure 7—corresponding to a national decline in births to Hispanic women, from 97.13 births/1000 women in 2007 to 65.72 in 2018 (32.3%).

The national teen birth rate declined even more markedly—by 58.1% between 2007 and 2018, from 41.5 births/1,000 teens to 17.4, see Figure 8. Though rates had been largely declining before 2000, they increased in 2006 and 2007, in some states sharply. The decline resumed in 2008, coincident with the start of the recession. Texas teens surpassed the national rate of fertility decline during the 2007–18 period, falling 59.1% from 61.8 births to 25.3 births/1,000 teens. The state with the highest teen birth rate in 2018 was Arkansas, at 30.4 births/1,000 teens, and the state with the lowest teen birth rate was Massachusetts, at 7.2 births/1,000 teens.

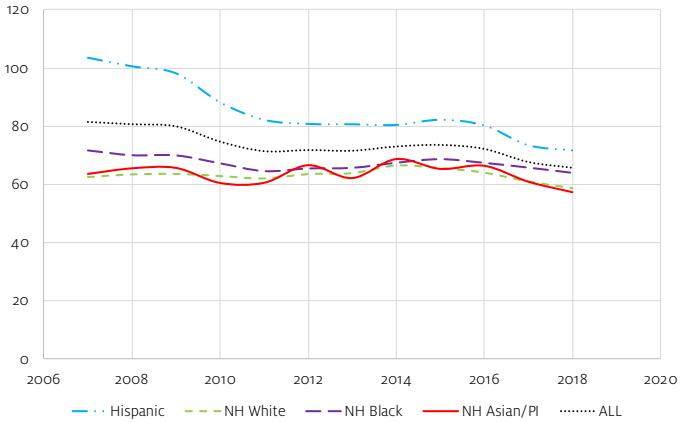
Between 2007 and 2018, the Harris County teen fertility rate fell from 63.26 births/1,000 women to 24.71 (60.9%), see Figure 9.

Figure 6: Fertility Rates (Women Aged 15-44), 2007-2018, for Harris, Dallas, Cook, Los Angeles & New York Counties, Texas & USA



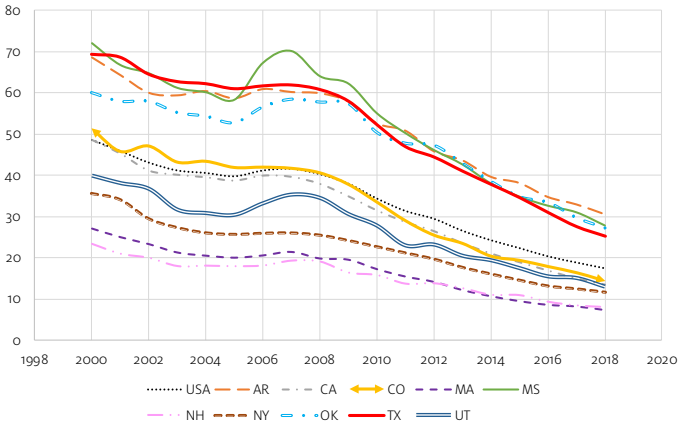
Source: CDC (2020). Births/1,000 women.
(Cook County includes Chicago and New York County equals Manhattan.)

Figure 7: Harris County Fertility Rates (Women Aged 15-44) by Race/Ethnicity, 2007-2018



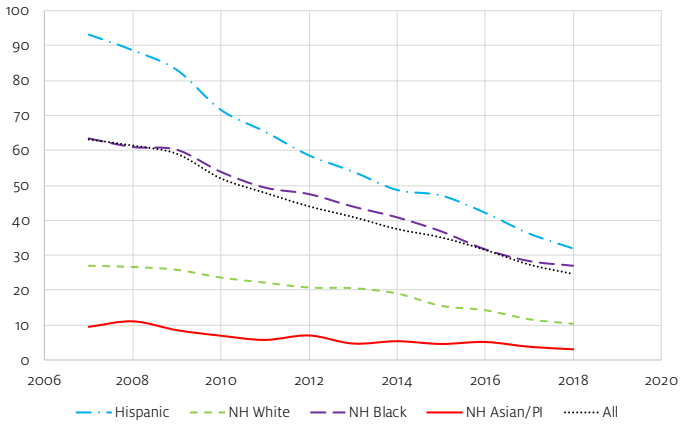
Source: CDC (2020). Births/1,000 women. NH = non-Hispanic; PI = Pacific Islander; Hispanic includes all races.

Figure 8: Teen Fertility Rates (Women Aged 15-19) by Selected States (Arkansas, California, Colorado, Massachusetts, Mississippi, New Hampshire, New York, Oklahoma, Texas, Utah) and USA, 2000-2018



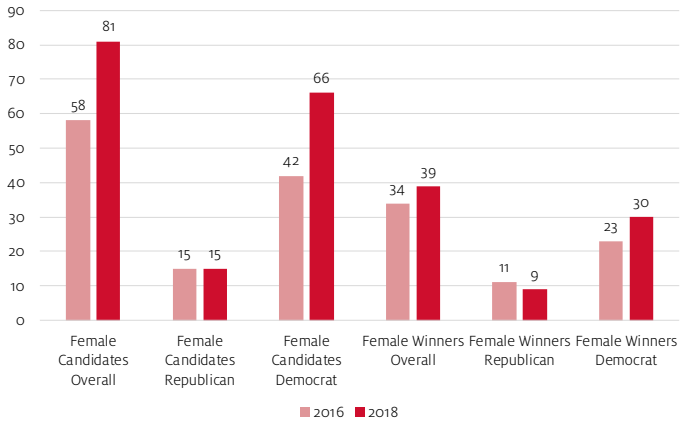
Source: CDC (2019, 2020). Births/1,000 women.

Figure 9: Harris County Teen Fertility Rates (Women Aged 15-19), by Race/Ethnicity, 2007-2018



Source: CDC (2020). Births/1,000 women. NH = non-Hispanic; PI = Pacific Islander; Hispanic includes all races.

*Figure 10: Female Candidates & Winners, Texas Legislature, 2016 & 2018**



*Source: Texas Legislature Online (2020) (winners); Clark (personal communication, October 14, 2019) (candidates). *One Independent ran in 2016, none in 2018.*

As with the general fertility rate, the teen rate involved steep declines among all groups, including Hispanic teens (down 65.6% from 93.09 to 32.06 births/1,000 women), NH Black teens (down 57.3% from 63.34 to 27.05 births/1,000 women), NH White teens (down 62.3% from 27.04 to 10.19 births/1,000 women), and NH Asian/PI teens (down 68.3% from 9.57 to 3.04 births/1,000 women).

The declines in fertility rates reported here have been due in part to the introduction of Long Acting Removable Contraceptives (LARCs) in 2009 (Ricketts et al., 2014), along with other factors.[5] This dynamic fertility landscape creates the opportunity for new analyses around families' desires about childbearing, birth timing, and effects of birth control on the wider economy—for example, correspondence between teen fertility rates and high school graduation rates (for men and women), women's workforce participation, and overall workforce skill levels. These shifts augur direct and transformative economic and social effects.

GENDER AND POLITICAL OFFICE

Though women (50.8% of the Texas population in 2017) hold a disproportionately low percentage of legislative seats in Texas (23.8%—up from 20.4% in 2017 [National Conference of State Legislatures, 2020] and parallel to the 23.6% currently in the US Congress [Center for American Women and Politics, 2020]), increasing numbers of women are running for office in Harris County and statewide, and the numbers of female contest winners are also growing, see Figure 10.

In the 2018 election cycle, women in the Texas legislature increased from 37 to 43 (out of a total 181 seats), with 39 women winning seats (30D and 9R) and 4 female Senators carrying over on staggered terms in 2018. That was up from 34 female winners in the 2016 election cycle. The number of female candidates for state legislative seats rose by 28.4%—from 58 to 81, per UH IRWGS researcher Jennifer Clark (personal communication, October 14, 2019). The Texas delegation to the US Congress gained 3 new women in 2018, increasing to 6 women out of 38, including the first two Latinas to represent Texas in Congress. During 2018 in Harris County, 78 women candidates ran for office (including primaries), and of the 80 offices decided that year, 38 of them were won by women (Municipal Elections, 2020). As of January 2020, after the 2019 election, the Houston City Council includes a majority of female members (9/7) for the first time, the Mayor is an African American man, and the Harris County Judge is a Latina under 30.

Party-wise, 72% of the women in the Texas legislature are Democrats (31D, 12R—28D/6R in the House and 3D/6R in the Senate [Texas Legislature Online, 2020]). The six Texas women in the US Congress include 5 Democrats and 1 Republican. In Harris County the 38 women contest winners in 2019 were all Democrats except for one nonpartisan race, while 29 Republican women lost as did 11 Democratic women (Municipal Election, 2020). While recently the preponderance of woman candidates across all levels of government in Texas have been Democrats, the numbers of Republican women running in 2020 primaries is increasing (Osborne et al., 2019; Zelinski, 2019).

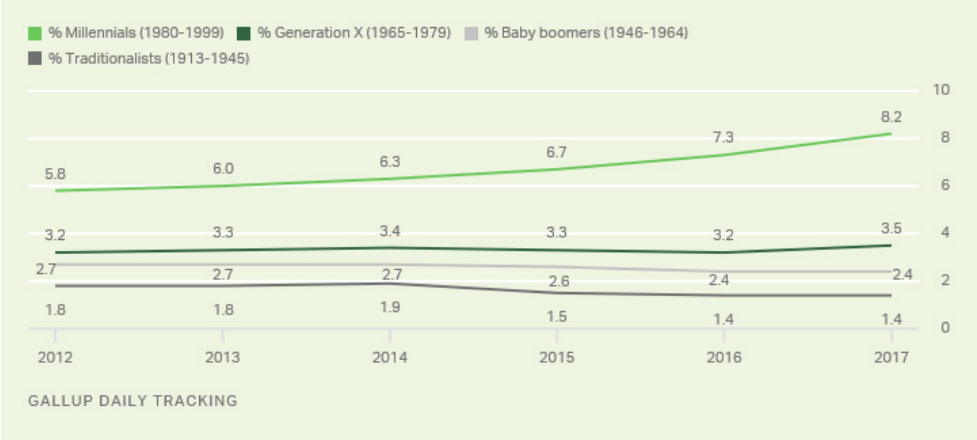
SEXUAL ORIENTATION

Data on sexual orientation is hard to track reliably due to stigma and precarity, but there are some sources of demographic insight. From 2012 to 2017, Gallup polls asked anonymous respondents whether

5 An alternative explanation of a decline in sexual activity among Colorado teens during the 2009-2011 period was not supported by the Behavioral Risk Factor Surveillance Survey (Ricketts et al., 2014). The decline in Harris County fertility rates co-occurred with an almost one third decrease in documented (non-DIY) abortions over the same period (Texas Health and Human Services, 2020).

they "personally identified as lesbian, gay, bisexual or transgender" and found that the percentage responding yes increased each year, from 3.5% in 2012 to 4.5% in 2017 (Newport, 2018). This shift may reflect lesser reticence among younger people to self-report as sexual minorities, perhaps in part because of lesser perceived social stigma about identifying as such. As Figure 11 highlights, rates of self-reported LGBT identity were much higher nationally during 2017 among individuals born 1980-1999 ("millennials"; 8.2%) than among individuals born 1913-1945 ("traditionalists"; 1.4%).

Figure 11: Percentage of Americans Identifying as LGBT, by Birth Cohort, 2017



Source: Newport (2018).

After the US Supreme Court's Obergefell (2015) decision and the arrival of nationwide marriage equality, the US Census began providing data about married and unmarried gay cohabiting partnerships, though no data has been collected on LGBTQ people not in such partnerships. According to UH IRWGS analyses of 2017 American Community Survey data (IPUMS-USA,2019), 0.9% of the population in Harris County were in a same-sex cohabiting partnership, vs. 1.5% of the population nationally. Of the 0.9%, 62.3% were married and 37.7% were in nonmarital relationships. Though this data is likely incomplete, it begins to more fully represent the circumstances of Americans.

Figure 12: Percentage of U.S. Adults Identifying as LGBT, by Gender and Race/Ethnicity, 2012-2017

	2012	2013	2014	2015	2016	2017
	%	%	%	%	%	%
Gender						
Male	3.4	3.5	3.6	3.7	3.7	3.9
Female	3.5	3.6	3.9	4.1	4.4	5.1
Race/Ethnicity						
NH Male	3.2	3.3	3.4	3.5	3.6	4.0
NH Black	4.4	4.0	4.6	4.5	4.6	5.0
Hispanic	4.3	4.7	4.9	5.1	5.4	6.1
Asian	3.5	3.3	4.2	4.9	4.9	4.9

Source: Newport (2018). NH = non-Hispanic; Hispanic includes all races.

During 2012, men (3.4%) and women (3.5%)—there was no category for nonbinary gender identity—identified as LGBT at similar rates in the Gallup survey (see Figure 12). But by 2017 that had changed, such that 3.9% of US men and 5.1% of US women reported identifying as LGBT (suggesting a roughly 43% male/57% female split in the LGBT population, nationally, or a gender difference in reporting). Any such difference deserves analysis. We lack directly comparable data for Harris County, but UH IRWGS analyses of 2017 American Community Survey data indicated that in Harris County 59% of individuals who identified as having same-sex cohabiting partners were men, whereas 41% were women (IPUMS-USA, 2019). This gender division among same-sex cohabiting partners in Houston is effectively the opposite of the national trend regarding LGBT self-report. The Harris County trend is consistent with prior research by UH IRWGS demographer Amanda Baumle, who found that gay men were more heavily concentrated in large cities and lesbians are more concentrated in small cities and rural areas, at least in part for economic reasons (Baumle & Poston, 2011).

Anticipated items for the 2020 US Census include more direct partnership response options than in previous years, and to the extent that stigma does not preclude honest responding this direct assessment approach is advantageous. But the 2020 approach will still be limited to assessing same-sex partnerships within households, excluding non-cohabiting same-sex partnerships and single people. Thus, alternative data sources concerning the experiences of all sexual (and gender) minorities are needed.

WHAT'S TO COME

It may not surprise Houstonians to read that many women are poor here; that women and especially women of color make less on average than men and especially White men here; or that LGBTQ Houstonians experience social stigma. But only by naming these problems and discussing them as a community can we move past taking them for granted and toward fixing them. Likewise, only by analyzing our successes can we build upon them.

The baseline data documented here—on poverty, parenting, wages, family support infrastructure, fertility, political office, LGBT demography, etc.—begin to suggest the dynamic and, in many

respects, inequitable features of the gender and sexuality landscape in Harris County, especially as intersected by race and ethnicity. Many of these factors interact with one another and affect the lives and workforce participation of all Harris County residents, including parents and, in the longer term, their children. All require analysis and the attention of policy makers who seek to give employers access to the full talent pool and to create an equitable and prosperous environment for all Houstonians.

While gender has long functioned as a work-assignment system—channeling men and women into different tasks and pay levels at work and at home—rapid technological and social change and the proliferation of debates with a gender or sexuality component indicate that old patterns have ceased to function. Many related topics—including gender fluidity, sex trafficking, domestic and other forms of violence, reproductive health access, gendered health disparities, gendered patterns of incarceration—also interact with the factors explored here and require expanded empirical research, community dialogue, policy analysis and focused action to meet the social and economic needs of Houston's residents and its employers, now and in the future.

As the region's first gender and sexuality focused think tank, the UH IRWGS aims through empirical research to amplify discussion of the social and economic forces linked to gender and sexuality that have long gone unexamined here. And to engender positive change.

ACKNOWLEDGMENTS

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