Maternal Health and the Baby Boom

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Abstract

Maternal deaths accounted for over 15% of all deaths for women in prime age years until the late the early 1930s in the U.S. Starting in 1936, the maternal mortality rate dropped dramatically, reaching modern levels by the early 1950s. The female-male differential in life expectancy at age twenty rose from one to over six years over this time period. Moreover, there was a sharp reduction in the incidence and duration of all maternal conditions, leading to a sizable decline in the health burden associated with pregnancy and childbirth. We argue that these developments contributed significantly to the mid-twentieth century Baby Boom and the subsequent Baby Bust: The reduction in the health burden associated with pregnancy and childbirth increased the demand for children, while the associated rise in women’s life expectancy increased the returns from human capital investment and the opportunity cost of children.

We exploit the large cross-state variation in the size of the drop in maternal mortality to examine the impact on fertility for cohorts of women who were differentially exposed to the decline in maternal mortality, using a difference-in-difference estimation approach. We find that the drop in maternal mortality can account for 75% of the increase in fertility for women born between 1931 and 1938, who experienced the highest lifetime fertility. In addition, the drop in maternal mortality can also account the rise in the female-male differential in college graduation rates for this and later cohorts. These findings provide new insights on the determinants of fertility behavior in the US and other countries that experienced similar improvements in maternal health.