

Do Mother-Daughter Similarities in Human Capital and Nonmarital Birth Status Explain Intergenerational Linkages in Infant Health Outcomes?

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ABSTRACT

Prior research frequently demonstrates intergenerational (mother-daughter) similarities in infant health outcomes (e.g., having a low birth weight, or preterm infant), but finds that less than half of this association can be attributed to genetic or biological explanations. This suggests that more than half of this association is attributable to environmental explanations, but little research has tested what features of the environment might matter. A sociobehavioral modeling perspective leads me to hypothesize that mother and daughters share characteristics such as human capital acquisition at the time of first birth, prenatal health behaviors, and whether their first birth occurs within a marital union. In turn, these similarities are potential environmental explanations for the demonstrated similarities in birth outcomes. This study uses a population-based sample of young women (National Longitudinal Survey of Youth, 1979 Cohort) and their children (Children of the NLSY79). Both mothers and daughters were asked a rich set of questions regarding the timing of first birth, their prenatal behaviors, characteristics of the social environment, their human and financial capital preceding birth, and the birth weight (and gestational length) of their infants. Structural equation models indicate that previously-documented mother-daughter similarities in birth weight may be at least partly spurious in that intergenerational transmissions of educational attainment and sociobehavioral modeling accounted for half of the mother-daughter similarity in the risk of low birth weight when subgroups of non-poor and poor women were compared, and partially accounted for the mother-daughter similarity in birth weight (adjusted for preterm birth status). Furthermore, the effect of education on birth weight and the risk of low birth weight operated indirectly through nonmarital birth status. Findings demonstrate the importance of including this broader intergenerational context in future investigations of infant health outcomes—especially with respect to research that intends to inform policies related to preventing infant health risk and reducing infant health disparities.