Bounding the Child Penalty

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 - ► The New York Times: "The Gender Pay Gap Is Largely Because of Motherhood" (C. C. Miller, 2017)
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 - Business Insider: "What's the major reason a woman might get paid less than men in the same field, and with the same education? Kids." (Kaplan, 2023)
- Academic discourse:
 - "Not surprisingly, children are the main contributors to women's labor supply changes." (Goldin, 2014)
 - "The effects of parenthood (...) account for most of the observed gender inequality in labor market outcomes" (Kleven et al., 2023)

Fertility is endogenous

► Human capital, wealth, health, career prospects, the cost of parenthood

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Leading methods only addresses each separately

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Age 35, 1st child at 36

All childless

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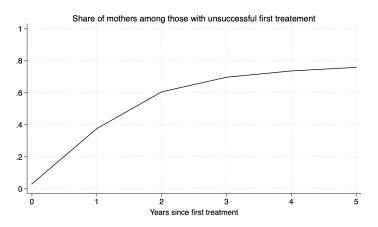
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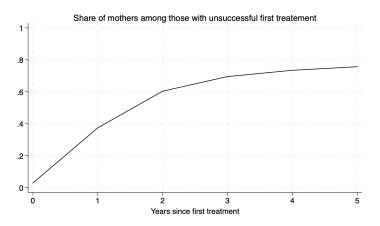
Some childless, some mothers for <5 years

Very different results even in same samples My sample

Motherhood Among Unsuccessfully Treated

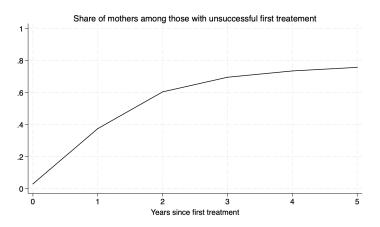


Motherhood Among Unsuccessfully Treated



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Motherhood Among Unsuccessfully Treated



$$au_{RF} = 0.25 au_{Parenthood} - 0.75 au_{Delay}$$
 $au_{IV} = au_{Parenthood} - 3 au_{Delay}$

How much can we say about the causal effect of parenthood?

- 1. Estimator that simultaneously addresses endogenous timing and dynamic effects
- 2. Empirical evidence using Dutch data

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 - Endogenous number of attempts
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 - Adapted DML estimator of Semenova (2020)
- Application to Dutch data
 - ► Sizable effect on women's outcomes in short-medium run
 - Explains up to half of post-child gender inequality
 - Both event study and IV might overstate the career cost

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Childless outcome:

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For simplicity we are at t = T.

Model (cont.)

Women differ in:

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$$(Y(1), Y(0), N, G) \perp D_j | P \geq j$$

- P number of attempts
- \triangleright D_i success of attempt j

"Once sperm/eggs at attempt j are implanted, whether this results in a conception is as-good-as-random"

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Object of interest:

$$\tau_C = \mathbb{E}[Y(1) - Y(0)|N = 0]$$

Effect of motherhood for women reliant on treatments to conceive.



$${\it G}=1$$
 (willing to try once)

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$$D_1 = 1$$

$$D_1=0$$

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$$\mathbb{E}[Y(1)]$$

$$D_1 = 0$$

$$\mathbb{E}[Y(0)]$$

Simple World: Max 2 Att., Only via IVF (if G Obs.)

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$$D_1 = 0$$

Simple World: Max 2 Att., Only via IVF (**if** G **Obs.**) G=1

(willing to try once)

G=2(willing to try twice)

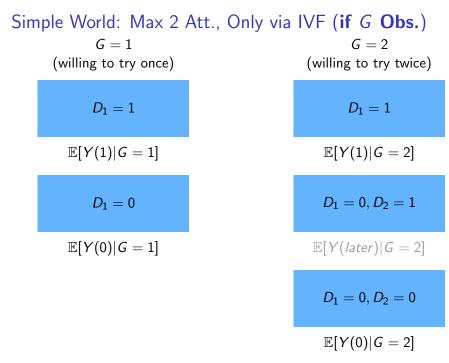
 $D_1 = 1$

 $D_1 = 1$

 $D_1 = 0$

 $D_1 = 0, D_2 = 1$

 $D_1 = 0, D_2 = 0$



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Simple World: Max 2 Att., Only via IVF (Observed)

G=1

G=2

(willing to try once)

(willing to try twice)

$$D_1=1$$

$$D_1=0$$

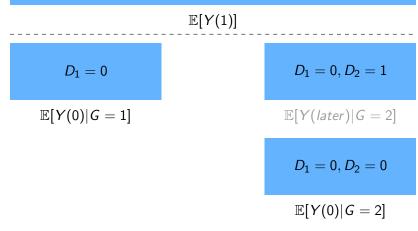
$$D_1=0,D_2=1$$

$$D_1 = 0, D_2 = 0$$

Simple World: Max 2 Att., Only via IVF (Observed) G=1G=2(willing to try once) (willing to try twice) $D_1 = 1$ $\mathbb{E}[Y(1)]$ $D_1 = 0$ $D_1 = 0, D_2 = 1$



Simple World: Max 2 Att., Only via IVF (Observed) $G=1 \qquad \qquad G=2 \\ \text{(willing to try once)} \qquad \qquad \text{(willing to try twice)}$ $D_1=1$ $\mathbb{E}[Y(1)]$



Simple World: Max 2 Att., Only via IVF (Observed)

G=1 (willing to try once)

G=2 (willing to try twice)

$$D_1 = 1$$

 $\mathbb{E}[Y(1)]$

$$D_1=0$$

 $\mathbb{E}[Y(0)|G=1]$

Pr(G=1) =

$$D_1=0,D_2=1$$

 $\mathbb{E}[Y(later)|G=2]$

 $D_1=0,D_2=0$

 $\mathbb{E}[Y(0)|G=2]$

$$G = 1$$

$${\cal N}=0$$
 ${\cal N}=1$ (child if fail)

$$\label{eq:G} \textit{G} = 1$$

$$\label{eq:gamma} \textit{N} = 0 \qquad \qquad \textit{N} = 1$$
 (child if fail)

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$$G=1$$
 ${\it N}=0$ ${\it N}=1$ (child if fail)

$$D_1 = 1$$

$$D_1=0,\,C=0$$

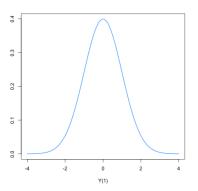
$$D_1=0,\,C=1$$

$$G=1$$
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 $N=1$ (child if fail)
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 $F_{Y(1)}$
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 $\mathbb{E}[Y(0)|N=0]$
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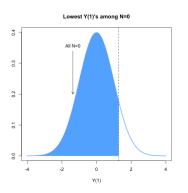
Intuition: Motherhood Outcome Y(1)

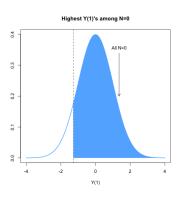
1. Identify distribution of motherhood outcomes using women with successful first treatment



Intuition: Motherhood Outcome Y(1) (cont.)

- 2. Estimate Pr(N = 0) = 0.9 on control group
- 3. Assume most extreme distributions of types

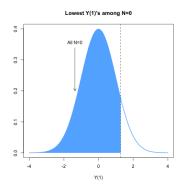


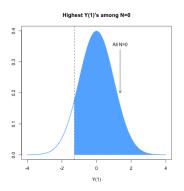


Intuition: Motherhood Outcome Y(1) (cont.)

4. The means of the two trimmed distributions give bounds:

$$LB_{\mathbb{E}[Y(1)|N=0]} \le \mathbb{E}[Y(1)|N=0] \le UB_{\mathbb{E}[Y(1)|N=0]}$$

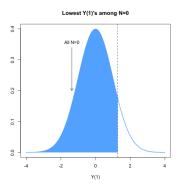


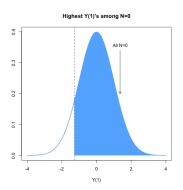


Intuition: Motherhood Outcome Y(1) (cont.)

5. Bounds on the effect:

$$LB_{\tau_c} \leq \mathbb{E}[Y(1) - Y(0)|N=0] \leq UB_{\tau_c}$$







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- Relatively invasive procedure performed under sedation/anesthesia
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I exploit the moment embryos/sperm are transferred into the uterus

Is success as-good-as-random?

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- Administrative data from Statistics Netherlands
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 - ▶ Labor market outcomes from 2011 to 2021

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 - Labor market outcomes from 2011 to 2021
- ► Unlimited IUI and first 3 IVF attempts covered by mandatory insurance (later IVF attempts cost 2500-5000 Eur per cycle)
- Sample of opposite sex couples cohabiting before first IUI attempt

Balance Treatment success Success prob. change

Results

Bounds

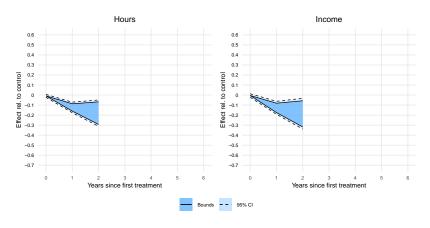


Figure 1: Bounds - short run



Bounds

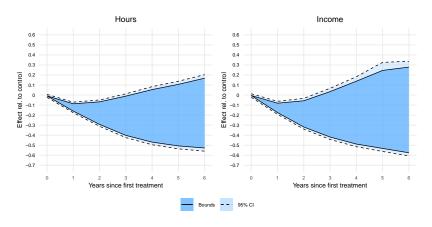


Figure 2: Bounds - medium run



Monotonicity

Monotonicity

➤ Some women whose first treatment attempt succeeds eventually conceive more children without treatments

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- ▶ It may be reasonable to assume that they would have eventually conceived at least one child if all treatments had failed

Plausibility discussion Benefit of monotonicity Graphic intuitio

Monotone Bounds

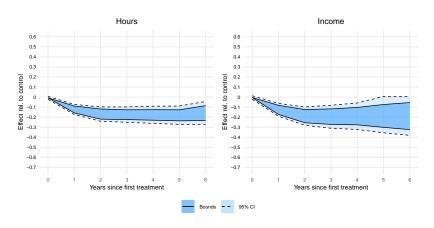


Figure 3: Monotone bounds for percent effects



Monotone Bounds: Explaining Gender Inequality

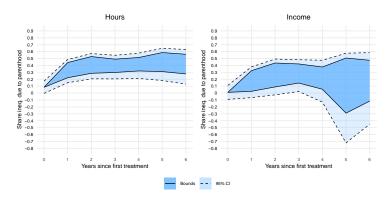


Figure 4: Share of gender inequality explained by parenthood

Extensions

Outcomes:

- ► Fatherhood Absolute Percentage
- Decomposing gender inequality Share explained by children
- ► Effect of delaying motherhood Absolute Cumulative

Existing estimators:

- ► Are existing estimates biased? IV-IVF equivalent Placebo event Placebo ineq.
- Are estimates less informative that existing? Confidence intervals

Robustness:

- ▶ Bias due to depression Effect on depression Bounds for non-depressed
- Correcting for parental leave Max. leave
- Inequality correcting for age De-aging partners
- ► Stable complier group Childless final period
- ► Estimator without DML Identification Effects
- ► Relaxing monotonicity Direction Partnered only

Other:

- ► Heterogeneity Covariates Willingness to try
- ► Population imputation* ES pop. vs IVF Mother. imp. Childless imp. Effect imp.

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 - Drives up to 60% (50%) of gender inequality in post-child work hours (earnings)
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 - IV-IVF might overstate penalty in the short run
 - ES might overstate penalty in both short and medium run

Appendix

Literature

Identification Math

Treatment Success

Balance

Type Shares

Trimming Shares

Monotonicity

Bound Width

Extensions

Application to Other Settings

References

Gender inequality in labor market outcomes.

▶ Bertrand (2011); Blau & Kahn (2017) for review.

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Main methodological ideas closely related to:

- Van den Berg & Vikström (2022): sequential treatment assignment.
- Lee (2005); Zhang & Rubin (2003): bounds with missing data.

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Back Literature
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Bensnes et al. (2023); Gallen et al. (2023)

Main idea:

- 1. Estimate effect in first period after treatment (while there are no later-mothers)
- 2. For individuals who are treated in second period, plug in estimate from the first
- 3. Repeat for all periods ...

Required (intuitive) assumptions:

- 1. Effect must be similar between women who do and who do not enter motherhood later
- 2. Effect cannot vary over the life-cycle

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Literature (cont.)

Parenthood, labor market outcomes, and gender equality:

- ► Event studies: Angelov et al. (2016); Chung et al. (2017); Kleven, Landais, Posch, et al. (2019); Eichmeyer & Kent (2022),
- Abortion access: A. R. Miller (2011); Brooks & Zohar (2021)
- ► Infertility: Agüero & Marks (2008); Cristia (2008)
- ➤ Sibling sex mix: Angrist & Evans (1996); Iacovou (2001); Cruces & Galiani (2007); Maurin & Moschion (2009); Hirvonen (2009)
- ➤ Twins: Rosenzweig & Wolpin (1980); Bronars & Grogger (1994); Jacobsen et al. (1999); Vere (2011)
- ► Miscarriages: Hotz et al. (2005)

Methodological paper on dynamic compliance and treatment effects:

► Heckman et al. (2016); Han (2021); Van den Berg & Vikström (2022)

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Naive Comparison: IV vs ES

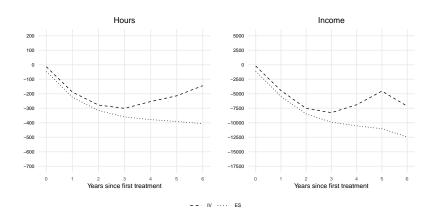


Figure 5: Comparison of IV and ES estimators using main sample





Broadly:

- ▶ Do not want/plan children
- ► Want/plan children

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- ► Get immediately
- Get naturally after few attempts
- Get with medical assistance

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- Try and fail naturally
- Try and fail with medical assistance (+ naturally?)

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Broadly:

- ► Do not want/plan children
- Want/plan children

Motherhood outcome:

- Get immediately
- Get naturally after few attempts
- Get with medical assistance

Childless outcome:

- Do not try
- ► Try and fail naturally
- ► Try and fail with medical assistance (+ naturally?)

Extrapolation requires carefully addressing mental health consequences of failure (and medical procedures)

Identification Intuition (cont.)

Step 0:

$$\mathbb{E}[Y|C=0, P=j] = \mathbb{E}[Y(0)|j \text{ fails, } N=0, G=j]$$
$$= \mathbb{E}[Y(0)|N=0, G=j]$$

Step 0:

$$\mathbb{E}[Y|C=0, P=j] = \mathbb{E}[Y(0)|j \text{ fails}, N=0, G=j]$$
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Step 1:

$$\mathbb{E}[w(P)Y|C=0] = \mathbb{E}[Y(0)|N=0],$$

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with:

$$w(P) \propto \frac{1}{\prod_{g=1}^{P} \Pr(D_g = 0 | P \geq g)} \stackrel{\text{if } \Pr \text{ const.}}{=} \frac{1}{\alpha^P}.$$

Step 0:

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Step 2:

$$\mathbb{E}[N] = \mathbb{E}[w(P)C|\text{no success}],$$

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- 1. Y's among $D_1 = 1$ "reveal" the distribution of Y(1)'s 2. Assume women with N=0 are in the left/right tail
- 3. Bounds on $\mathbb{E}[Y(1)|N=0]$

ToC

Step 0:

$$\mathbb{E}[Y|C=0, P=j] = \mathbb{E}[Y(0)|j \text{ fails}, N=0, G=j]$$
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 - 2. Assume women with N=0 are in the left/right tail
- 3. Bounds on $\mathbb{E}[Y(1)|N=0]$ Graph int. Coins Det. int. Trimming int. Back

Estimator Intuition: Math with Coins

- Each individuals flips a coin once
- Some may chose to flip again if heads come up
- ▶ Number of flips (P) observed
- Y only revealed for those who never flip heads

$$\mathbb{E}[Y] = \mathbb{E}\left[\frac{1}{(1/2)^P}Y\mathbf{1}\{\mathsf{no heads}\}\right]$$

Back

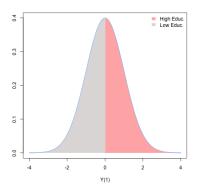
Formal Identification

$$\begin{split} & \Delta_{L} = \mu_{L} - \mu_{C} \\ & \Delta_{U} = \mu_{U} - \mu_{C} \\ & \mu_{C} = \mathbb{E}\left[\frac{Y}{\prod_{j}^{P}(1 - p_{j}(X_{j}))} \middle| \mathbf{1}_{Child} = 0\right] \mathbb{E}\left[\prod_{j}^{P}(1 - p_{j}(X_{j})) \middle| \mathbf{1}_{Child} = 0\right] \\ & \mu_{L} = \mathbb{E}\left[\frac{Y}{p_{1}(X_{1})} \middle| D_{1} = 1, Y < y(1 - s)\right] \mathbb{E}\left[p_{1}(X_{1}) \middle| D_{1} = 1, Y < y(1 - s)\right] \\ & \mu_{U} = \mathbb{E}\left[\frac{Y}{p_{1}(X_{1})} \middle| D_{1} = 1, Y > y(s)\right] \mathbb{E}\left[p_{1}(X_{1}) \middle| D_{1} = 1, Y > y(s)\right] \\ & y(q) = G^{-1}(q) \\ & G(q) = \mathbb{E}\left[\frac{1(Y \leq q)}{p_{1}(X_{1})} \middle| D_{1} = 1\right] \mathbb{E}\left[p_{1}(X_{1}) \middle| D_{1} = 1\right] \\ & s = \mathbb{E}\left[\frac{1_{Child}}{\prod_{i}^{P}(1 - p_{i}(X_{i}))} \middle| W = 0\right] \mathbb{E}\left[\prod_{i}^{P}(1 - p_{j}(X_{j})) \middle| W = 0\right], \end{split}$$

where $W = 1 - \prod_{j=1}^{P} (1 - D_j)$.

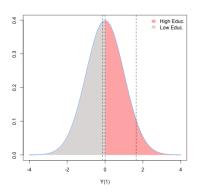
Tightening Bounds with Covariates

1. Separate distribution of motherhood outcomes into low and high education groups



Tightening Bounds with Covariates (cont.)

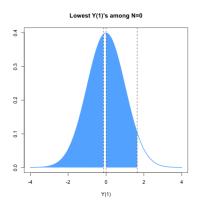
- 2. Estimate Pr(N = 0|high) = 0.9 and Pr(N = 0|low) = 0.9 on control group
- 3. Assume most extreme distribution of types within educ. groups



Tightening Bounds with Covariates (cont.)

4. The mean of the trimmed distribution gives new lower bound

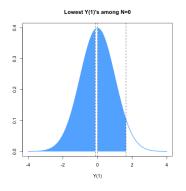
$$\mathbb{E}_{educ}[LB_{\mathbb{E}[Y(1)|N=0]}(educ)] \leq \mathbb{E}[Y(1)|N=0]$$

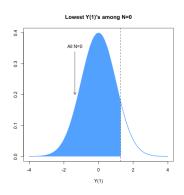


Comparing the Bounds

Conditional lower bounds is higher than unconditional:

$$\mathbb{E}_{educ}[LB_{\mathbb{E}[Y(1)|N=0]}(educ)] \geq LB_{\mathbb{E}[Y(1)|N=0]}$$

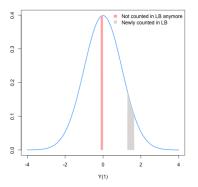




Comparing the Bounds (cont.)

Conditional lower bounds is higher than unconditional:

$$\mathbb{E}_{educ}[LB_{\mathbb{E}[Y(1)|N=0]}(educ)] \geq LB_{\mathbb{E}[Y(1)|N=0]}$$



$$m_L(data, \eta_0) = \frac{D_1}{e_1(X_1)} Y 1_{\{Y < q_1(s_0(X_1), X_1)\}} - \Pi_{j=1}^P \frac{1 - D_j}{1 - e_j(X_i)} SY$$

$$\begin{split} m_L(data,\eta_0) &= \frac{D_1}{e_1(X_1)} Y 1_{\{Y < q_1(s_0(X_1),X_1)\}} - \Pi_{j=1}^P \frac{1 - D_j}{1 - e_j(X_j)} SY \\ \eta_0 &= \{s_0(x), q_1(u,x), e_j(x)\} \\ s_0(x) &= Pr(N = 0 | X_1 = x) \\ q_1(u,x) &= F_{Y(1)|X_1=x}^{-1}(u) \\ e_j(x) &= Pr(D_j = 1 | P \ge j, X_j = x) \\ S &= 1_{\{childless\}} \end{split}$$

$$m_L(data,\eta_0) = \underbrace{\frac{D_1}{e_1(X_1)}Y1_{\{Y < q_1(s_0(X_1),X_1)\}}}_{ ext{1st success mean below trim thresh.}} - \underbrace{\Pi_{j=1}^P \frac{1-D_j}{1-e_j(X_j)}SY}_{ ext{childless mean}}$$
 $\eta_0 = \{s_0(x), q_1(u,x), e_j(x)\}$
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$$\mathbb{E}[m_L(data, \eta_0)] = \mathbb{E}[LB_{\tau_c}]\alpha_{scaling}$$

$$\frac{1}{\sqrt{n}}\sum_{i}(m_L(data_i,\widehat{\eta})-\mathbb{E}[m_L(data_i,\eta_0)])\stackrel{d}{\to}?$$

ToC

- ▶ Semenova (2020) develops DML estimator for Lee bounds
- ▶ When G = 1, Lee bounds = my approach
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$$\frac{1}{\sqrt{n}}\sum_{i}(g_L(data_i,\eta_0)-\mathbb{E}[m_L(data_i,\eta_0)])\stackrel{d}{\to} N(0,\sigma^2)$$

Narrowing the Bounds with Covariates (cont.)

Alternative extension of Lee bounds (to my knowledge)

- ightharpoonup Take some function g(x)
- $ightharpoonup \mathbb{E}[g(X_1)|N=0]$ can be identified on women who remain childless
- ► Take $\mathbb{E}[Y(1)|N=0] = \mathbb{E}[g(X_1) + \varepsilon|N=0]$
- ▶ Only need to bound $\mathbb{E}[\varepsilon|N=0]$
- ▶ $g(X_1)$ can be directly chosen to minimize the spread in residuals, e.g. OLS of Y on X_1 for women with $D_1 = 1$.
- Since residuals typically have a narrower distribution, this gives narrower bounds.
- Also, likely to improve asymptotic efficiency: only need to compare residuals in both groups, $\mathbb{E}[g(X_1)|N=0]$ is the same for treated and control.

Back (DML) Back (extensions)

Randomness in IUI and IVF

Treatment success is not completely random.

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Randomness in IIII and IVF

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- Arguably the most important factor for success also related to labor market outcomes is the age of the woman and their partner.
- ▶ I allow the probability of success at each attempt to depend on the age of the woman and their partner at the time of the attempt interacted with treatment type.

Other (medical) factors relevant for IVF success appear to be largely unrelated to labor market outcomes (Lundborg et al., 2017).



Treatment Success

- ▶ I impute treatment success as having a child born within 10 months after treatment without subsequent treatments in between.
 - Validated to reflect medical records of treatment success (Lundborg et al., 2017).

Back

Balance

Table 1: First treatment outcomes and descriptives

	Success	Fail	Difference	Dif. cond. age FE
	(1)	(2)	(1)-(2)	(1)-(2) cond. age
Work (W)	0.881	0.863	0.018	0.008
	[0.324]	[0.344]	(0.009)	(0.009)
Work (P)	0.884	0.865	0.019	0.014
	[0.320]	[0.341]	(0.009)	(0.009)
Hours (W)	1239.696	1208.255	31.441	17.578
	[605.070]	[634.840]	(16.168)	(15.812)
Hours (P)	1473.383	1438.880	34.502	22.690
	[658.917]	[695.345]	(17.699)	(17.587)
Income 1000s € (W)	28.049	27.434	0.615	0.942
	[19.559]	[20.232]	(0.516)	(0.496)
Income 1000s € (P)	37.173	36.959	0.214	0.896
	[26.484]	[29.443]	(0.746)	(0.732)
Bachelor deg. (W)	0.608	0.605	0.002	0.018
	[0.488]	[0.489]	(0.013)	(0.012)
Bachelor deg. (P)	0.593	0.598	-0.004	0.008
	[0.491]	[0.490]	(0.013)	(0.012)
Age (W)	31.643	32.384	-0.741	
	[4.016]	[4.383]	(0.111)	
Age (P)	34.672	35.459	-0.787	
,	[5.527]	[5.993]	(0.152)	
Observations	1,716	13,788		
Joint p-val.	_	·	0.000	0.536

 $\it Note:$ Labor market outcomes measured year before first treatment. (W) - woman, (P) - partner. Standard deviations in brackets. Standard errors in parentheses.

Balance in Later Treatments

Table 2: Balance in later treatments

	D2	D3	D4	D5	D6	D7	D8	D9	D10
Work (W)	0.013	-0.002	0.023	0.008	0.030	0.007	-0.008	0.016	0.041
	(0.009)	(0.010)	(0.011)	(0.012)	(0.013)	(0.014)	(0.017)	(0.019)	(0.026)
Work (P)	0.011	0.014	0.005	0.014	-0.004	-0.008	0.001	0.016	0.040
	(0.010)	(0.010)	(0.011)	(0.012)	(0.013)	(0.014)	(0.017)	(0.020)	(0.027)
Hours (W)	37.050	-0.615	45.477	39.327	68.596	25.780	-5.734	81.149	29.860
	(17.373)	(18.648)	(20.127)	(21.930)	(24.489)	(26.043)	(31.176)	(36.869)	(49.101
Hours (P)	29.074	28.347	18.441	35.597	-7.332	-15.344	0.360	47.511	49.279
	(19.336)	(20.807)	(22.614)	(24.685)	(27.215)	(28.618)	(34.381)	(41.158)	(55.440
Income 1000s € (W)	1.786	0.283	1.123	1.672	1.380	0.489	0.417	1.839	-0.297
	(0.548)	(0.592)	(0.647)	(0.710)	(0.786)	(0.831)	(1.030)	(1.240)	(1.714)
Income 1000s € (P)	0.221	1.277	1.588	1.125	-0.542	-0.370	1.567	1.001	-0.202
	(0.820)	(0.846)	(0.923)	(1.018)	(1.123)	(1.212)	(1.423)	(1.666)	(2.277)
Bachelor deg. (W)	0.002	0.026	-0.020	0.001	-0.003	0.003	0.023	-0.012	0.045
	(0.013)	(0.014)	(0.015)	(0.017)	(0.019)	(0.020)	(0.024)	(0.028)	(0.038)
Bachelor deg. (P)	0.005	0.010	0.011	0.007	-0.003	0.013	0.020	0.012	-0.014
	(0.013)	(0.014)	(0.016)	(0.017)	(0.019)	(0.020)	(0.024)	(0.029)	(0.039)
Age (W)	0.001	-0.007	-0.040	0.024	0.013	-0.001	-0.046	-0.027	-0.017
	(0.011)	(0.015)	(0.019)	(0.023)	(0.026)	(0.028)	(0.036)	(0.043)	(0.059)
Age (P)	0.001	-0.007	-0.040	0.024	0.013	-0.001	-0.046	-0.027	-0.017
	(0.011)	(0.015)	(0.019)	(0.023)	(0.026)	(0.028)	(0.036)	(0.043)	(0.059)
Observations	12,955	10,759	8,714	6,969	5,403	3,938	2,718	1,848	1,173
Joint p-val.	0.071	0.737	0.057	0.439	0.420	0.991	0.836	0.508	0.437

Note: Each column describes the differences between those treated successfully and those treated unsuccessfully at the respective treatment attempt conditional on fixed effects for age-at-treatment interacted with fixed effects for treatment type. Labor market outcomes and age measured year before first treatment. (W) – woman, (P) – partner. Standard errors in parentheses.

Representative and Relevant Treatment group

Table 3: Full sample, relevant sample, and representative sample

	Success (1)	Fail (2)	Relevant (3)	Representative (4)	Success vs rep. (1)-(4)	Rel. vs rep. (3)-(4)
Work (W)	0.881	0.863	0.822	0.801	0.080	0.021
	[0.324]	[0.344]	[0.334]	[0.399]	(0.010)	(0.005)
Work (P)	0.884	0.865	0.850	0.783	0.101	0.066
	[0.320]	[0.341]	[0.344]	[0.412]	(0.010)	(0.005)
Hours (W)	1239.696	1208.255	1120.310	1071.721	167.975	48.589
	[605.070]	[634.840]	[583.894]	[697.609]	(16.879)	(8.254)
Hours (P)	1473.383	1438.880	1392.628	1245.385	227.998	147.243
	[658.917]	[695.345]	[663.323]	[793.411]	(19.197)	(9.376)
Income 1000s € (W)	28.049	27.434	24.925	20.903	7.146	4.021
	[19.559]	[20.232]	[15.086]	[17.981]	(0.435)	(0.213)
Income 1000s € (P)	37.173	36.959	35.002	27.544	9.630	7.459
	[26.484]	[29.443]	[23.998]	[28.685]	(0.694)	(0.339)
Bachelor deg. (W)	0.608	0.605	0.591	0.576	0.032	0.015
	[0.488]	[0.489]	[0.414]	[0.494]	(0.012)	(0.006)
Bachelor deg. (P)	0.593	0.598	0.582	0.554	0.040	0.029
	[0.491]	[0.490]	[0.416]	[0.497]	(0.012)	(0.006)
Age (W)	31.643	32.384	33.284	28.384	3.259	4.900
	[4.016]	[4.383]	[3.892]	[4.648]	(0.112)	(0.055)
Age (P)	34.672	35.459	36.327	28.384	6.288	7.943
	[5.527]	[5.993]	[3.924]	[4.655]	(0.113)	(0.055)
Observations	1,716	13,788	5,103	374,812	•	

Note: Labor market outcomes measured year before first treatment for main sample and year and 9 months before birth of first child for represenstative sample. Representative sample selected to match main sample by year of conception. Relevant sample consists of women in the main sample who remain childless weighted to account for differences in the probability to remain childless. (W) - woman, (P) - partner. Standard deviations in brackets. Standard errors in parentheses.

Predicted Success Prob. per Treatment

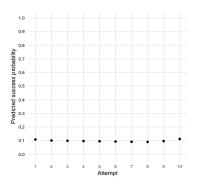


Figure 6: Predicted success probability holding X fixed at first attempt average

Back



Attempts



Figure 7: Number of treatments and type





Non-treatment Conception by Type



Figure 8: Conceiving naturally and willingness to attempt





Trimming shares

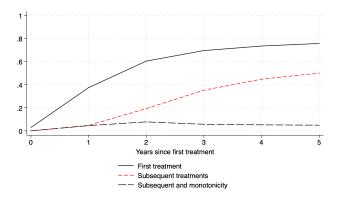


Figure 9: Trimming share under different information



Correction Term

$$\begin{aligned} & corr_L(data,\eta_0) = q_1(s_0(X_1),X_1) \Pi_{j=1}^P \frac{1 - D_j}{1 - e_j(X_j)} (S - s(0,X_1)) \\ & - q_1(s_0(X_1),X_1) \frac{D_1}{e_1(X_1)} (\mathbb{1}_{\{Y < q_1(s_0(X_1),X_1)\}} - s_0(X_1)) \\ & - \frac{D_1 - e_1(X_1)}{e_1(X_1)} z_L^+(1,X_1) s(0,X_1) \\ & + \sum_k \mathbb{1}_{P \ge j} \Pi_j^{k-1} \frac{1 - D_j}{1 - e_j(X_j)} \frac{e_k(X_k) - D_k}{1 - e_k(X_k)} (s_k(0,X_k)\beta_k(0,X_k)) \\ & + \sum_k \mathbb{1}_{P \ge j} \Pi_j^{k-1} \frac{1 - D_j}{1 - e_j(X_j)} \frac{e_k(X_k) - D_k}{1 - e_k(X_k)} q_1(s_0(X_1),X_1) (s(0,X_1) - s_k(0,X_k)) \end{aligned}$$

ToC

Bounds: Absolute

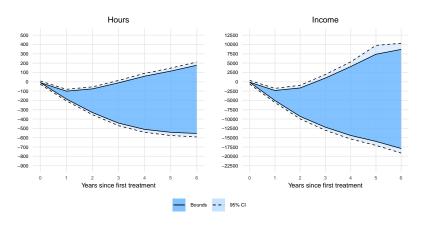


Figure 10: Bounds effects





Bounds: Hours - Comparison to Baseline Lee Bounds

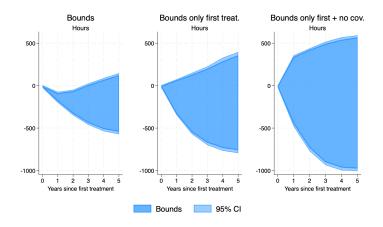


Figure 11: Comparison with baseline Lee: hours



Bounds: Income - Comparison to Baseline Lee Bounds

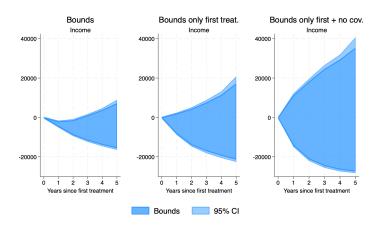


Figure 12: Comparison with baseline Lee: income





- Yes, if families are determined to have at least one child.
 - Decreasing marginal returns to children.
 - Stronger sufficient assumption: success cannot increase total (natural) births.

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 - First child may "save the relationship" resulting in more attempts to conceive.

Is monotonicity realistic?

- Yes, if families are determined to have at least one child.
 - Decreasing marginal returns to children.
 - Stronger sufficient assumption: success cannot increase total (natural) births.
- No, if first treatment success increases the likelihood of attempting to conceive naturally.
 - Couples may realize they are fertile and try more.
 - First child may "save the relationship" resulting in more attempts to conceive.
- Robustness: restrict to only couples that stay together Effects

Back Benefit of monotonicity Graphic intuition

Benefit of Monotonicity

Women who conceive a second child naturally are not the women who would remain childless.

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- Women who conceive a second child naturally are not the women who would remain childless.
- This restricts which women among successfully treated could have remained childless had all treatment attempts failed.
- Narrower bounds.



Monotonicity: Intuition (1)

Identify distribution of motherhood outcomes from group whose first treatment succeeds:

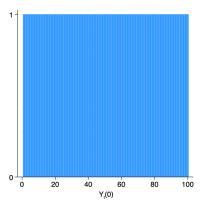


Figure 13: Distribution of potential motherhood outcomes

Monotonicity: Intuition (2)

Without monotonicity: 20 with highest/lowest outcomes:

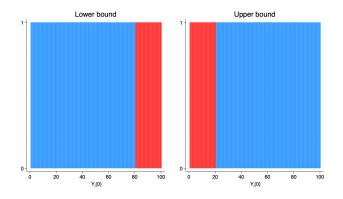


Figure 14: Distribution of potential motherhood outcomes



Monotonicity: Intuition (3)

With monotonicity: first, drop 10 who conceive again naturally:

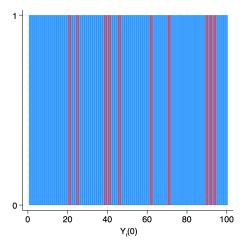


Figure 15: Distribution of potential motherhood outcomes

Monotonicity: Intuition (4)

With monotonicity: second, drop another 10 with highest/lowest outcomes:

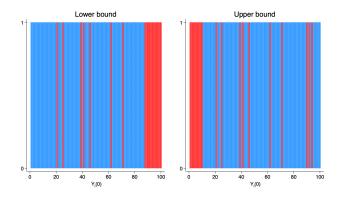


Figure 16: Distribution of potential motherhood outcomes



Monotonicity: Intuition (5)

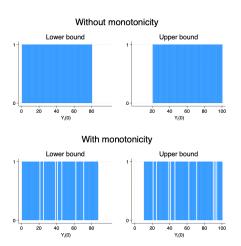


Figure 17: Distribution of potential motherhood outcomes

Monotone Bounds: Absolute

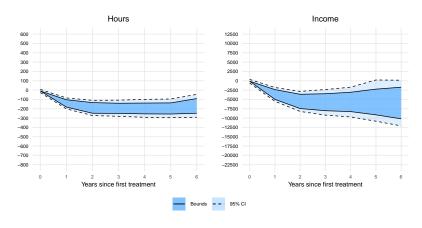


Figure 18: Monotone bounds: absolute terms





How Wide are the Bounds?

6 years after first treatment:

- Bounds:
 - ▶ 1 SD of pre-treatment hours
 - ▶ 1 SD of pre-treatment earnings
- Monotone bounds:
 - ▶ 0.15 SD of pre-treatment hours
 - 0.25 SD of pre-treatment earnings

Back

Extensions

Outcomes:

- ► Fatherhood penalty Absolute Percentage
- ► Decomposing gender inequality Share explained by children
- ► Effect of delaying motherhood Absolute Cumulative

Existing estimators:

- ► Are existing estimates biased? IV-IVF equivalent Placebo event Placebo ineq.
- Are estimates less informative that existing? Confidence intervals

Robustness:

- ▶ Bias due to depression Effect on depression Bounds for non-depressed
- Correcting for parental leave Max. leave
- ► Inequality correcting for age De-aging partners
- Stable complier group Childless final period
- Estimator without DML Effects
- ► Relaxing monotonicity Direction Partnered only

Other:

- ► Heterogeneity Covariates Willingness to try
- ▶ Population imputation* ES pop. vs IVF Mother. imp. Childless imp. Effect imp.

Monotone Bounds: Women who Remain Childless

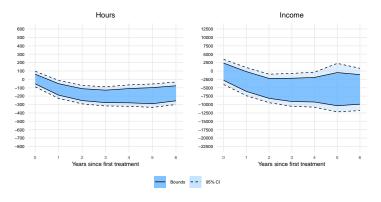


Figure 19: Monotone bounds using final status





Event Study: Population vs IUI Sample

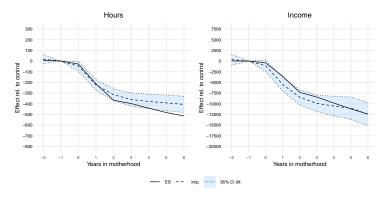


Figure 20: ES for population and women with first IUI success





Imputing Population Motherhood Outcomes Using IUI Sample

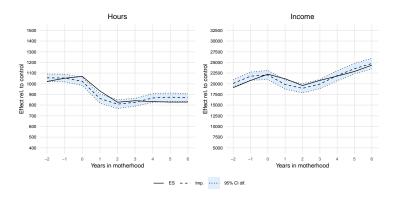


Figure 21: Population Outcomes vs IUI-imputation (age & education)





Imputing Population Childless Outcomes Using IUI Sample

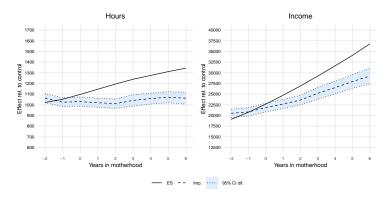


Figure 22: Population Outcomes vs IUI-imputation (age & education)





Event Study vs IUI-imputation for Population

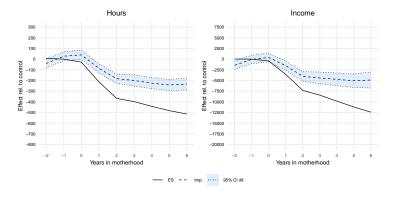
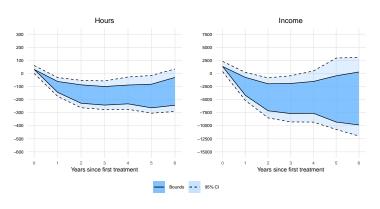


Figure 23: Event study vs IUI-imputation for population (age & education)



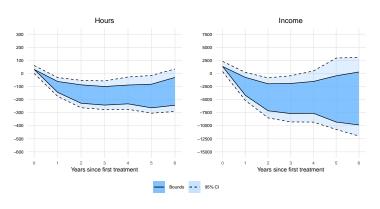


Simple estimator



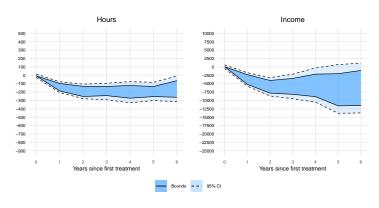
Back

Simple estimator



Back

Relaxing Monotonicity Direction







Heterogeneity by Covariates

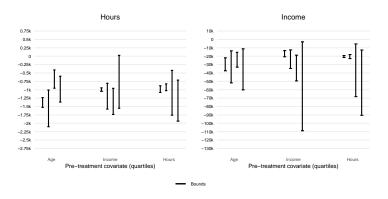


Figure 24: Cumulative outcomes after 6 years, pre-treatment covariates





Heterogeneity by Willingness to Undergo Procedures

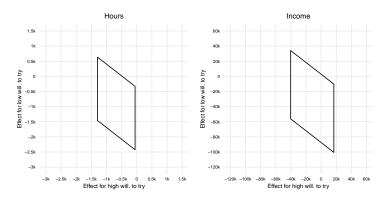


Figure 25: Cumulative outcomes 6 years after, G above or below 6



Monotone Bounds: Excluding Depression

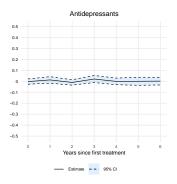


Figure 26: Sequential-IV estimates for effect on antidepressant take-up



Monotone Bounds: Excluding Depressed

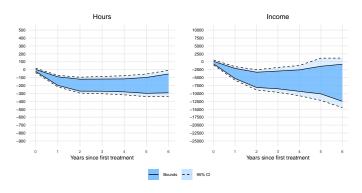


Figure 27: Monotone bounds for women who would not start antidepressants if they were to remain childless





Monotone Bounds: Assuming Maximum Leave

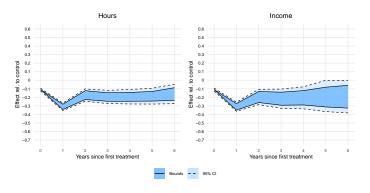


Figure 28: Monotone bounds scaling outcomes in years with childbirth by max. leave fraction





Monotone Bounds: Correcting for Partner's age

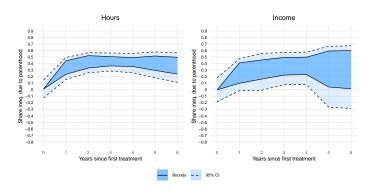


Figure 29: Monotone bounds using male income at same age as female



Monotone Bounds: Fatherhood Penalty

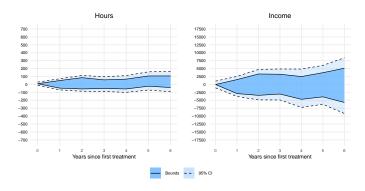


Figure 30: Monotone bounds for partners





Monotone Bounds: Fatherhood Penalty in Percent

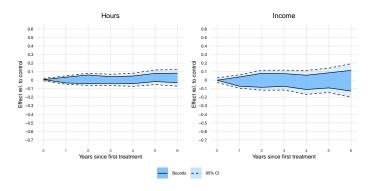


Figure 31: Monotone bounds for partners in percent





Monotone Bounds: Explaining Gender Inequality

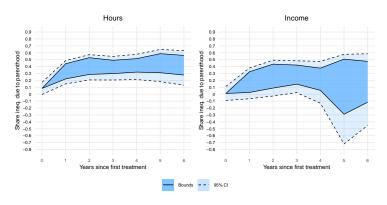


Figure 32: Share of gender inequality explained by parenthood





Are Bounds Less Informative?

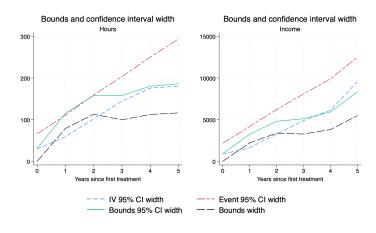


Figure 33: Confidence intervals for different methods





Monotone Bounds and IV

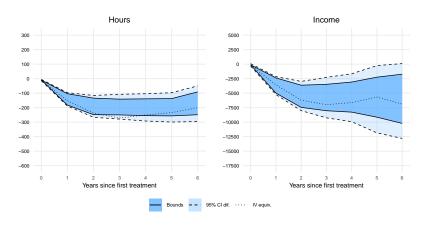


Figure 34: Bounds and IV equivalent for the same population





Placebo Event

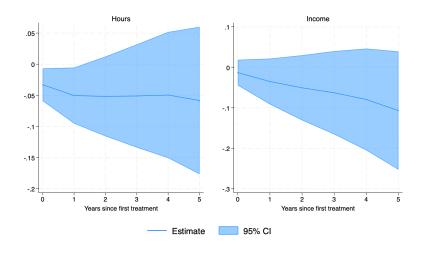


Figure 35: Placebo event study

Inequality treating ES bias as causal

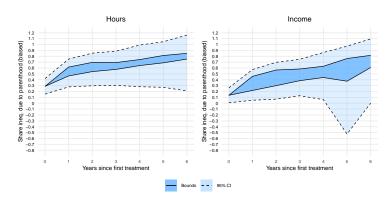


Figure 36: Placebo effects as share of bounds for the same population

Two possible interpretations:

- Event study severely overstates the penalty
- ▶ Large share of penalty is due to trying to conceive not parenthood per se

Back Placebo as share of regular event

Yearly effect of Delaying Motherhood

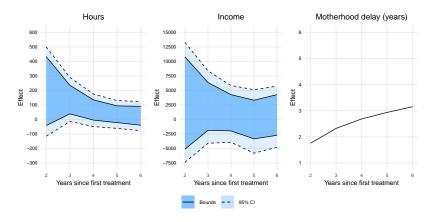


Figure 37: Effect of delaying relative to motherhood at first attempt Opposite of what is frequently assumed!



Cumulative effect of Delaying Motherhood

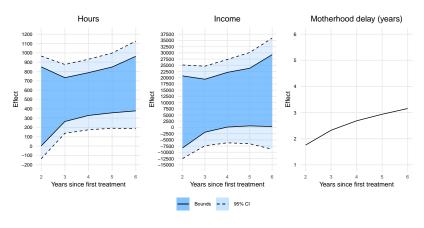


Figure 38: Effect of delaying relative to motherhood at first attempt

Back



Monotone Bounds: Women who Remain Childless

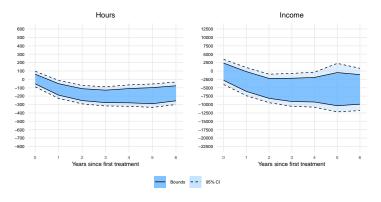


Figure 39: Monotone bounds using final status





Relaxing Monotonicity to Partnered Women

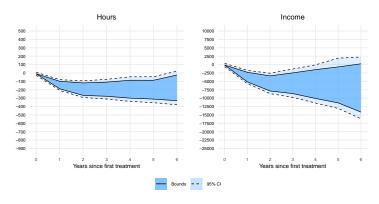


Figure 40: Monotone bounds using women who stay partnered

Back (extensions) Back (monotonicity)

Testing the Plug-in Approach

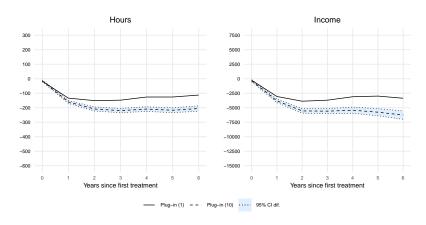


Figure 41: Plug-in estimators exploiting different number of treatments





Application to Other Settings

Key features:

- 1. Dynamic treatment effects.
- 2. Individuals (may choose to) "re-apply" for random treatment assignment.
- 3. Some may obtain treatment endogenously.

Application to Other Settings

Key features:

- 1. Dynamic treatment effects.
- 2. Individuals (may choose to) "re-apply" for random treatment assignment.
- 3. Some may obtain treatment endogenously.

Few examples:

▶ Education, medical trials, research grants, job training.



Application to Other Settings (Examples)

- Education: grade retention, school admission lotteries, special and gifted education programs.
- Medical trials: individuals assigned to control may eventually choose to participate in other medical trials or selectively receive a different treatment.
- Research grants: after unsuccessful application can apply for another or receive funding other ways.
- Job training: those not assigned to training may re-apply, some assignments may be non-random.

Back

Estimated Bias and Placebo Event Study

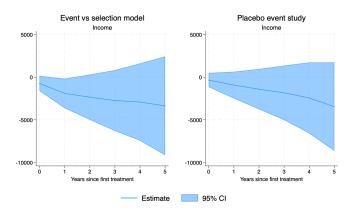


Figure 42: Difference between selection model estimate and event study estimate compared to placebo event study estimate



References I

- Agüero, J. M., & Marks, M. S. (2008). Motherhood and female labor force participation: evidence from infertility shocks. American Economic Review, 98(2), 500–504.
- Angelov, N., Johansson, P., & Lindahl, E. (2016). Parenthood and the gender gap in pay. Journal of labor economics, 34(3), 545–579.
- Angrist, J., & Evans, W. N. (1996). Children and their parents' labor supply: Evidence from exogenous variation in family size. National bureau of economic research Cambridge, Mass., USA.
- Bensnes, S., Huitfeldt, I., & Leuven, E. (2023). Reconciling estimates of the long-term earnings effect of fertility (Tech. Rep.). Institute of Labor Economics (IZA).
- Bertrand, M. (2011). New perspectives on gender. In Handbook of labor economics (Vol. 4, pp. 1543–1590). Elsevier.
- Bertrand, M. (2020). Gender in the twenty-first century. In Aea papers and proceedings (Vol. 110, pp. 1-24).
- Blau, F. D., & Kahn, L. M. (2017). The gender wage gap: Extent, trends, and explanations. *Journal of economic literature*, 55(3), 789–865.
- Bronars, S. G., & Grogger, J. (1994). The economic consequences of unwed motherhood: Using twin births as a natural experiment. The American Economic Review, 1141–1156.
- Brooks, N., & Zohar, T. (2021). Out of labor and into the labor force? the role of abortion access, social stigma, and financial constraints (Tech. Rep.).
- Chung, Y., Downs, B., Sandler, D. H., Sienkiewicz, R., et al. (2017). The parental gender earnings gap in the united states (Tech. Rep.).
- Cristia, J. P. (2008). The effect of a first child on female labor supply: Evidence from women seeking fertility services. *Journal of Human Resources*, 43(3), 487–510.
- Cruces, G., & Galiani, S. (2007). Fertility and female labor supply in latin america: New causal evidence. Labour Economics, 14(3), 565–573.
- Eichmeyer, S., & Kent, C. (2022). Parenthood in poverty. Centre for Economic Policy Research.
- Gallen, Y., Joensen, J. S., Johansen, E. R., & Veramendi, G. F. (2023). The labor market returns to delaying pregnancy. Available at SSRN 4554407.
- Goldin, C. (2014). A grand gender convergence: Its last chapter. American economic review, 104(4), 1091-1119.

References II

- Han, S. (2021). Identification in nonparametric models for dynamic treatment effects. *Journal of Econometrics*, 225(2), 132–147.
- Heckman, J. J., Humphries, J. E., & Veramendi, G. (2016). Dynamic treatment effects. Journal of econometrics, 191(2), 276–292.
- Hirvonen, L. (2009). The effect of children on earnings using exogenous variation in family size: Swedish evidence.
- Hotz, V. J., McElroy, S. W., & Sanders, S. G. (2005). Teenage childbearing and its life cycle consequences: Exploiting a natural experiment. *Journal of Human Resources*, 40(3), 683–715.
- Iacovou, M. (2001). Fertility and female labour supply (Tech. Rep.). ISER Working Paper Series.
- Jacobsen, J. P., Pearce III, J. W., & Rosenbloom, J. L. (1999). The effects of childbearing on married women's labor supply and earnings: using twin births as a natural experiment. *Journal of Human Resources*, 449–474.
- Kaplan, J. (2023, October 9). A woman's chance for equal pay plummets when she has a kid and never recovers, says the newest harvard economist to win the nobel prize. Business Insider. Retrieved from https://www.businessinsider.com/
 - women-pay-gap-motherhood-fatherhood-nobel-prize-harvard-economist-2023-10
- Kleven, H., Landais, C., & Leite-Mariante, G. (2023). The child penalty atlas (Tech. Rep.). National Bureau of Economic Research.
- Kleven, H., Landais, C., Posch, J., Steinhauer, A., & Zweimüller, J. (2019). Child penalties across countries: Evidence and explanations. In Aea papers and proceedings (Vol. 109, pp. 122–126).
- Kleven, H., Landais, C., & Søgaard, J. E. (2019). Children and gender inequality: Evidence from Denmark. American Economic Journal: Applied Economics, 11(4), 181–209.
- Lee, D. S. (2005). Training, wages, and sample selection: Estimating sharp bounds on treatment effects. National Bureau of Economic Research Cambridge, Mass., USA.
- Lundborg, P., Plug, E., & Rasmussen, A. W. (2017). Can women have children and a career? IV evidence from IVF treatments. American Economic Review, 107(6), 1611–37.
- Maurin, E., & Moschion, J. (2009). The social multiplier and labor market participation of mothers. American Economic Journal: Applied Economics, 1(1), 251–272.

References III

- Melentyeva, V., & Riedel, L. (2023). Child penalty estimation and mothers' age at first birth (Tech. Rep.). ECONtribute Discussion Paper.
- Miller, A. R. (2011). The effects of motherhood timing on career path. Journal of population economics, 24, 1071–1100.
- Miller, C. C. (2017, May 13). The gender pay gap is largely because of motherhood. The New York Times. Retrieved from https://www.nytimes.com/2017/05/13/upshot/the-gender-pay-gap-is-largely-because-of-motherhood.html
- Rosenzweig, M. R., & Wolpin, K. I. (1980). Life-cycle labor supply and fertility: Causal inferences from household models. Journal of Political economy, 88(2), 328–348.
- Semenova, V. (2020). Generalized lee bounds. arXiv preprint arXiv:2008.12720.
- Van den Berg, G. J., & Vikström, J. (2022). Long-run effects of dynamically assigned treatments: A new methodology and an evaluation of training effects on earnings. Econometrica, 90(3), 1337–1354.
- Vere, J. P. (2011). Fertility and parents' labour supply: new evidence from us census data: Winner of the oep prize for best paper on women and work. Oxford Economic Papers, 63(2), 211–231.
- Zhang, J. L., & Rubin, D. B. (2003). Estimation of causal effects via principal stratification when some outcomes are truncated by "death". Journal of Educational and Behavioral Statistics, 28(4), 353–368.