# The Dynamics of Health Behaviors, Pregnancies, and Birth Outcomes

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#### Question

What role do the histories of smoking and marijuana use play in determining birth outcomes?

- Does timing of behavior cessation prior to pregnancy matter?
  - The answer informs women's fertility behavior
  - It informs current public health guidelines that suggest that life-cycle health is important
  - It informs researchers studying women's fertility decisions
- Do the dynamic effects of behaviors differ across the life cycle?

### Paper Summary

#### Contribution

 Estimate the impact that a history of smoking and marijuana use have on pregnancy and birth outcomes

#### Data

Panel survey data from the NLSY 1997 cohort

#### **Estimation Method**

- Estimate a set of dynamic structural equations
- Simulate outcomes using the estimated parameters
- Account for selection, dynamics, and other confounders

#### Results

 Conditional on behavior while pregnant, a history of smoking behavior increases the likelihood of low birth weight, but a history of marijuana use does not

# Background

Why is study of behaviors and birth outcomes important?

- Poor birth outcomes are becoming more common nationally (Goldenberg et al., 2008; NCHS, 2019)
- Differential trends in marijuana use and smoking (Gnofam et al., 2020; NCHS, 2018)
- Prenatal care uptake is increasing (Osterman and Martin, 2018)
- Proportion of pregnancies deemed as "high-risk" is increasing (BCBS, 2020)
- Lack of studies regarding the impacts of health behaviors prior to pregnancy on birth outcomes (Witt et al., 2012; Strutz et al. 2012)

#### Behaviors and Outcomes

What health behaviors are accounted for:

- I observe smoking, marijuana use, and binge drinking
- I do not observe nutrition, exercise, preventive and curative medical care, or mental health
  - But I do observe body mass index (BMI) and self-reported health status (SRHS)

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What birth outcomes are accounted for:

- Main interest: probability of a low birth weight (LBW) birth
- Other outcomes of interest:
  - Probability of pregnancy
  - Probability of a live birth conditional on being pregnant
  - Gestational age at birth conditional on live birth

#### Data Features

#### National Longitudinal Survey of Youth 1997

- Panel data following a nationally representative group aged 14-18 in 1997
- Surveyed annually for 15 years (then biennially for 3 more waves)
- Information on health behaviors, health measures, and pregnancy in each survey wave
- Geographic extract allows me to link market level information from a variety of sources

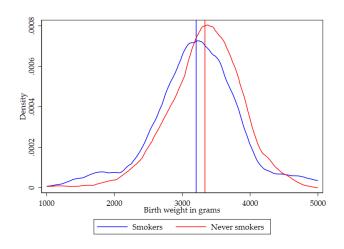
# Sample Description

The estimation sample includes all years of data for women who:

- Provide at least two consecutive years of data
- Have not been pregnant prior to the first observed year of data
- And until the first year of non-response to important dependent variables
- Only the first 15 survey waves are used

The estimation sample contains 3,675 women (84% of full sample) who contribute 40,797 consecutive person-years.

# Distribution of birth weight (NLSY97)



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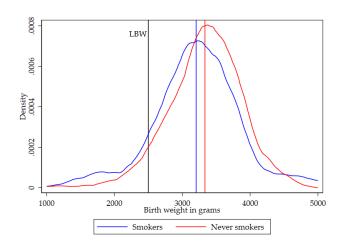


Table 1: LBW probability for different ages and histories of smoking

	Never smoker	Past smoker	Recent smoker	Current smoker
Age 25 and up	6.42%	6.25%	9.59%	11.79%
Under age 25	9.07%	6.62%	10.26%	12.09%

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Under age 25	9.07%	6.62%	10.26%	12.09%

- Recent smokers have higher likelihood of LBW than past smokers
- Association between LBW and smoking history may change with age

Table 2: Correlation of health behaviors with LBW probability

	Indicator only	No covariates	Covariates
Smoked entering t	0.037***	0.013	0.011
	(0.014)	(0.019)	(0.018)
Ever smoked		0.025	0.037**
		(0.021)	(0.019)
Smoking cessation (years)		-0.006*	-0.007**
		(0.003)	(0.003)

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#### Compared to someone who smokes while pregnant:

- A woman who never smokes has a 4.8 pp lower probability of having a LBW birth
- A woman who quit smoking three years before she got pregnant has a 1.6pp lower probability of having a LBW birth

Table 2: Correlation of health behaviors with LBW probability

	Indicator only	No covariates	Covariates
Smoked entering t	0.037***	0.013	-0.004
	(0.014)	(0.019)	(0.018)
Ever smoked		0.025	0.042**
		(0.021)	(0.020)
Smoking cessation (years)		-0.006*	-0.007**
		(0.003)	(0.003)
Used marijuana entering t	0.041**	0.038	0.032
	(0.018)	(0.024)	(0.024)
Ever used marijuana		0.0099	-0.001
		(0.020)	(0.020)
Marijuana cessation (years)		0.002	0.003
		(0.003)	(0.003)
Observable characteristics	N	N	Υ

# Preview of Empirical Strategy

I jointly estimate a set of dynamic structural equations.

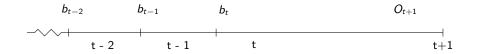
- Equations approximate demand and production functions
- Allows for unobserved correlation within and across time periods
- Estimate using full information maximum likelihood (FIML)
- Disentangle direct and indirect effects histories of health behaviors have on probability of LBW

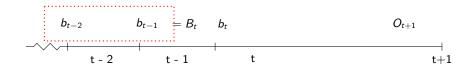
# Motivating Model

Let the probability of LBW entering t + 1 ( $O_{t+1}$ ) be defined by behaviors during and prior to pregnancy:

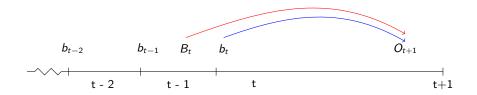
$$Pr(O_{t+1} = o|P_t, L_{t+1}) = f^O(b_t, B_t, X_t, u_{it}^O) \quad \forall t, \quad o = 0, 1$$
 (1)

- Smoking, marijuana use, and binge drinking are captured by  $b_t = (b_t^1, b_t^2, b_t^3)$
- B<sub>t</sub> captures the history of behaviors up to period t for all behaviors
- $\bullet$   $X_t$  is a placeholder for other observed characteristics
- $P_t$  is pregnancy,  $L_{t+1}$  is live birth
- $u_{it}^{O}$  is unobserved to the econometrician

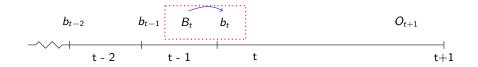




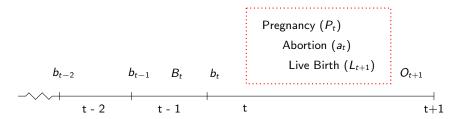
 $B_t$  describes the history of all behaviors  $(b_1, ..., b_{t-1})$  in a parsimonious way, and is observed entering period t.



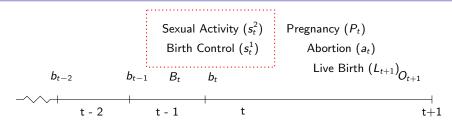
I want to distinguish the effects of  $b_t$  and  $B_t$ .



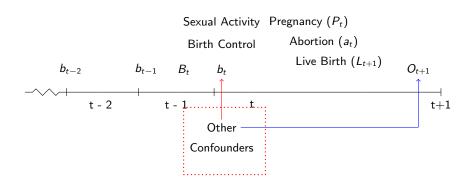
Yet,  $B_t$  influences  $b_t$ .

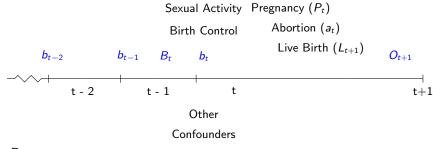


It's also the case that behaviors like smoking influence selection into pregnancy/birth.



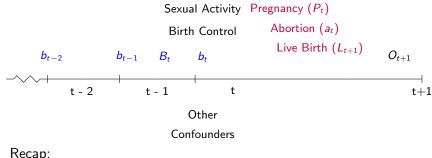
All health  $(b_t)$  and pregnancy-related  $(s_t)$  behaviors are determined simultaneously.





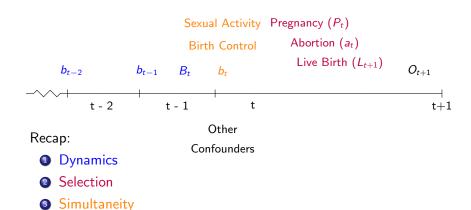
#### Recap:

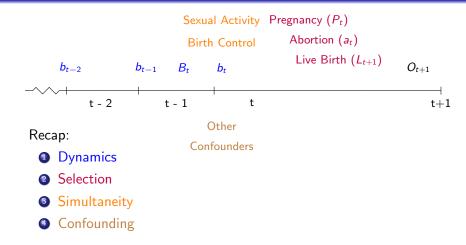
Openies



#### Recap:

- Open Dynamics
- Selection





### **Estimation Equations**

#### What's included?

- Health behaviors: smoking, marijuana use, binge drinking
- Sexual activity and birth control use
- Other confounders: relationship status, school enrollment, and employment
- Pregnancy/Birth: Pregnancy, abortion, live birth, gestational age at birth, and LBW status
- Health measures: BMI (continuous), and self-reported health status
- Attrition
- Initial conditions for health behaviors and health measures

# Unobserved Heterogeneity

I decompose the unobserved component of equation j,  $(u_{it}^j)$ , into three additively separable parts.

- A permanent component,  $\mu^j$
- A time-varying component,  $v_t^j$
- An i.i.d. component,  $(\epsilon_{it}^j)$

$$u_{it}^j = \mu_j + \nu_t^j + \epsilon_{it}^j$$

where  $\epsilon_{it}^{j}$  is distributed normally for continuous outcomes and Extreme Value for dichotomous/polychotomous outcomes.

# Estimating the distribution of UH (Mroz, 1999)

I estimate a discrete distribution of each component  $(\mu, \nu_t)$ , allowing for a non-linear relationship across equations.

- I discretize the support of each component and estimate mass points and weights
- Relaxes typical assumption of normality
- Method sometimes referred to as discrete factor method (DFM) or discrete factor random effects (DFRE)

I estimate the parameters of a structural set of dynamic equations via full information maximum likelihood.

#### Identification:

 Exclusion restrictions - motivated by theory- in the behavior equations (health behaviors, abortion) and selection (pregnancy, live birth)

#### Exclusions for behaviors:

- Shift demand for behaviors
- Unrelated to probability of LBW conditional on those behaviors
- Includes time-varying supply-side market conditions and prices (Gilleskie et al., 2017; Darden et al., 2021)

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#### Exclusions for pregnancy:

Time-varying male-female ratios at county level

#### Exclusions for abortion:

 Time-varying access to abortion clinics and abortion rate per capita at state level

I estimate the parameters of a structural set of dynamic equations via full information maximum likelihood.

#### Identification:

- Exclusion restrictions motivated by theory- in the behavior equations (health behaviors, abortion) and selection (pregnancy, live birth)
- Non-linear functional form of demand (behaviors) and production (outcome) equations (Guilkey and Lance, 2014; Lewbel, 2019; Mroz, 1999)
- Variation in histories of exogenous variables that explain the lagged outcomes in the dynamic equations (Bhargava and Sargan, 1983; Arellano and Bond, 1991)

# Low Birth Weight Specification

$$Pr(O_{t+1} = o|L_{t+1} = I) = f^{O}(B_t, H_t, N_t, b_t, s_t, c_t, X_t, Z_t^{O}, u_t^{O})$$

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•  $B_t$  describes the history of behaviors entering t Details

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- $N_t$  characterizes the history of pregnancy and birth outcomes

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- $X_t$  is exogenous demographic information

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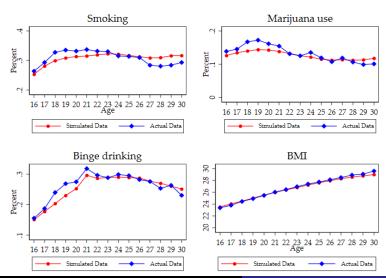
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- $X_t$  is exogenous demographic information
- $Z_t^O$  represents exogenous location-specific period t supply-side information

#### Estimation Fit

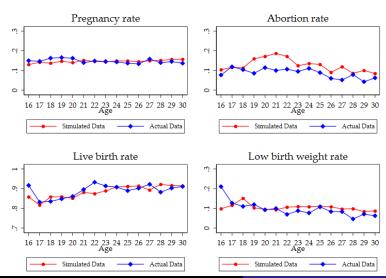
I use the estimated parameters to simulate behavior for all individuals from age 14 to age 32.

- Each individual-year is replicated 500 times
- All endogenous variables update over time based on parameter estimates and random error draws

#### Fit of health behaviors and BMI



## Fit of pregnancy, abortion, live birth, and LBW



#### Simulation

I conduct several simulations that alter smoking (or marijuana use) behaviors over time.

- Each individual-year is replicated 500 times
- Smoking (or marijuana use) is imposed
- All other endogenous variables update over time based on parameter estimates, random error draws, and updated values of the endogenous history of variables based on simulated values

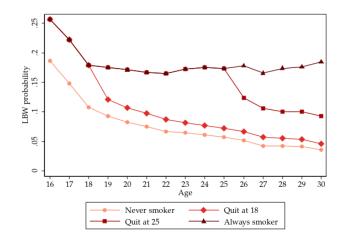
#### Simulation 1

Fix smoking patterns to reflect four different histories of smoking:

- Always smoke
- Quit smoking at age 25
- Quit smoking at age 18
- Never smoke

and evaluate LBW probability from age 16-30.

## Impact of different smoking patterns on LBW prob



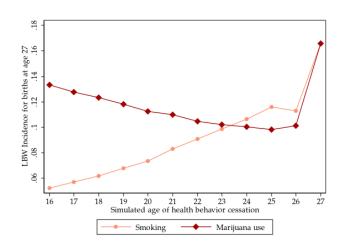
Note: Conditional on pregnancy, no abortion, and live birth

#### Simulation 2

Simulate women to quit smoking (or marijuana use) permanently at each age starting with age 16.

- I evaluate births for women who are 27 years old
- I simulate women to quit at age 16 and summarize LBW probability for women who give birth at 27
- Then I simulate women to quit at age 17 and so on...

# Age-specific cessation effects on LBW: smoking vs. marijuana use



# Impact of different smoking patterns on other outcomes

Table 3: Impact of different smoking histories on cumulative pregnancy outcomes at age 30

Measure	Smoking Pattern			
	Never	Quit at 18	Quit at 25	Always
Number of pregnancies	1.353	1.472	1.427	1.184
Number of LBW births	0.068	0.096	0.148	0.139
Number of abortions	0.110	0.154	0.156	0.158
Number of live births	1.085	1.222	1.043	0.791

#### Conclusion

- A history of smoking impacts the probability of LBW
  - There is a direct effect of past smoking behavior conditional on smoking behavior while pregnant
  - There is an indirect effect of past smoking through its effect on other behaviors/outcomes and selection into an observed birth
- There are substantial dynamic differences in how smoking and marijuana use affect the probability of LBW
  - The impact of smoking cessation increases gradually over time
  - The impact of marijuana use is concentrated to more recent use

# Questions

## Details on $B_t$

The history of health behaviors entering period *t* is summarized by four variables for each behavior:

- Indicator of participation in the behavior in t-1
- Indicator of ever having participated in the behavior up to t
- Number of years of cessation conditional on ever having done the behavior
- Age interacted with lagged behavior to allow for different effects across age



## Details on $N_t$

The history of pregnancy, abortion, and birth outcomes entering period t is characterized by four variables:

- Number of pregnancies up to t
- Number of live births up to t
- Indicator of a LBW birth up to t
- Indicator of an abortion up to t

Back