

**Determinants of Health Capital at Birth:
Evidence from Policy Interventions**

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Abstracts

Paper I: Austerity Measures and Infant Health. Lessons from an Unexpected Wage Cut Policy

We investigate the effects on health at birth of a shock generated by a major (25%) and unexpected wage cut austerity measure that affected all public sector employees in Romania in 2010. Our findings suggest an overall improvement in health at birth for boys exposed to the shock in early gestation and a decreased sex ratio at birth among early exposed children. These findings are consistent with the selection in utero theory hypothesizing that maternal exposure to a significant shock early in gestation preponderantly selects against frail male fetuses, with healthier survivors being carried to term.

JEL classification: I19, J13, J38, I38

Keywords: austerity measures; fetal shock; health at birth; selection in utero; Romania

Paper II: Bridging the Gap for Roma Women. The Effects of a Health Mediation Program on Roma Prenatal Care and Child Health at Birth

Roma, Europe's largest minority, face poverty, social exclusion and life-long inequalities. We analyze a large-scale public program that aimed to improve the health of pregnant Roma women and children, with the help of trained Roma health mediators. Using rich data from Romania we exploit the spatial and temporal variation in the implementation of the program and find large increases of the take-up of prenatal care services among Roma women, but no change in the probability of low birth weight or premature delivery. Our results show a decrease in the number of stillbirths and infant deaths. We investigate the potential mechanisms.

JEL classification: J13; J15; I14

Keywords: Roma ethnics; program take-up; health at birth; program evaluation

Paper III: The Effects of Financial Incentives on Fertility and Early Investments in Child Health

This paper investigates the effects of maternity leave benefits on fertility, reproductive behavior and early investments in child health by exploiting an unanticipated policy change occurring Romania in 2004 that involved the switch from proportional to fixed and very high benefits. Using Reproductive Health Survey data in a Double Difference design, I find that the substantial change in financial incentives led to marginally insignificant increases in conception rates and decreases in the probability of abortion for women who benefited from the policy change; these women appear to have worse prenatal behaviors, but have children with better health outcomes at birth. Women who were negatively affected by the policy change compensate by investing more in early infant health.

JEL classification: J13; J18

Keywords: maternity leave benefits; fertility; child health; Romania

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