

Contact: Preeti Vasishtha, ASA Director of Communications, (202) 247-9872, <u>communications@asanet.org</u>

Study Explores Political Factors in Determining Infant Health

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WASHINGTON, DC—Since the beginning of the twenty-first century, two key indicators of human development—life expectancy and infant health outcomes—have stagnated or worsened in the U.S. In a new study, <u>Florencia Torche</u>, professor of sociology, and <u>Tamkinat Rauf</u>, PhD student in sociology, both of Stanford University, examine how infant health, which has far-reaching implications for future population health, has been impacted by political context, specifically the political party of the president or governor.

Scholars are increasingly considering how health is determined by inequality and health policy—two areas that are shaped by political decisions and, by extension, the political party of leaders and policy makers. Torche and Rauf ask whether the distinctly different policy positions on social and economic issues held by the Republican and Democratic parties have affected birth outcomes. Their study, "The Political Context and Infant Health in the United States," appears in the June 2021 issue of the <u>American Sociological Review</u>.

The authors built on what they call "macro-comparative" and "specific policy" research traditions looking at the effect of the political party in power at the state and federal levels during a woman's pregnancy on birth outcomes across all 50 U.S. states between 1971 and 2018. They used annual natality data from the Centers for Disease Control and Prevention and causal inference approaches to identify the effect of the party in power.

Infant health improved when Democratic presidents were in power, but the effect of a Democratic president only "becomes significant during the third year, remaining elevated until the end of the party's spell in power," the authors say, which suggests that presidents who are reelected might be particularly efficacious in improving infant health. "This pattern, consistent across outcomes, suggests political parties require time to establish and communicate their vision and policy agenda." The authors did not find a significant effect of Democratic governors.

Additionally, while the health of all infants benefitted from Democratic administrations, there were greater gains for Black infants. The president's party had a positive effect on fetal growth restriction and preterm birth for both Black and White infants, but when comparing between racial groups, a striking difference emerged. Democratic administrations resulted in a .09 percentage-point decline in the probability of fetal growth restriction for White infants, while the comparable figure among Black infants was.24 percentage points. A Democratic administration reduced the chances of preterm birth by .20 percentage points, while the reduction for Black infants was .66 percentage points. For the year 2018, for example, in terms of numbers of births and accounting for the greater number of White infants, these percentage points would have translated to 5,478 fewer preterm White infants and 3,981 fewer preterm Black infants if the president had been a Democrat in 2017.

"High rates of adverse birth outcomes among African American children have been attributed at least partially to the stress emerging from discrimination, exclusion, and racism," the authors

say. "Our findings point to the uniqueness of the African American experience, defined by the legacy of slavery, discrimination, and deep systemic racism."

In order to consider the effect of political context on other vulnerable racial/ethnic groups, Torche and Rauf examined birth outcomes among Hispanics. The authors did not find a comparably strong effect of a Democratic president on Hispanic infants. As with Black and White infants, Democratic presidents had a consistent beneficial effect on infant health among Hispanics, however this impact was more similar to the impact on White infants than Black infants. The authors say that "further understanding differences in the effect of the political context for Hispanics would be an important task for future research."

In terms of the broader implications of this work, the authors hope this research encourages a more critical evaluation of the potentially profound influence of political decisions on population health, including the well-being of the next generation of Americans. "Our research also offers an assessment of whether the Democratic party has lived up to its avowed commitment to issues of social and racial justice and whether approach translates into better conditions for vulnerable populations," said the authors. "In this case, we find it does, but perhaps for other types of issues and outcomes we might find otherwise. Only future research can tell."

For more information and for a copy of the study, contact <u>communications@asanet.orq</u>.

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