

Immigration and the Health of Children:

Lessons from the United States at the turn of the Twentieth Century

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Objectives

- Study infant and child mortality among immigrant groups to the U.S. circa 1900.
- Assess differences across origins and generations.
- Examine impact of assimilation (intermarriage, language, SES, time in the US).
- Evaluate the importance of contextual (community) effects.

Data, Universe & Measures

DATA

1910 IPUMS sample: 1.4% (approximately four times larger than the 1910 PUS used by earlier researchers).

1910 Complete Count Database (Ancestry.com & MPC)

UNIVERSE

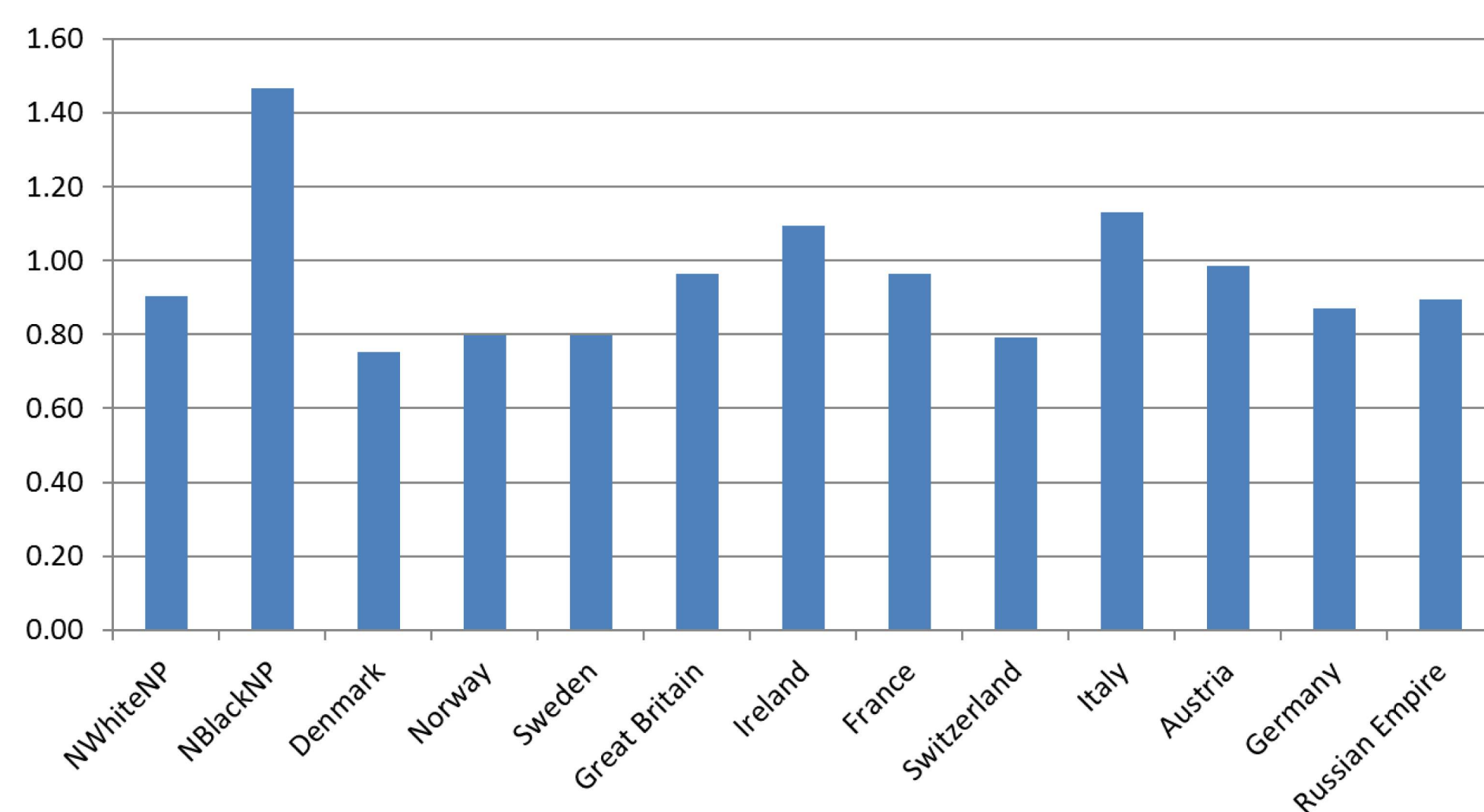
Currently married women in first marriage with spouse present, children ever born ≥ 1 , and marital duration less than 25 years.

CHILD MORTALITY INDEX

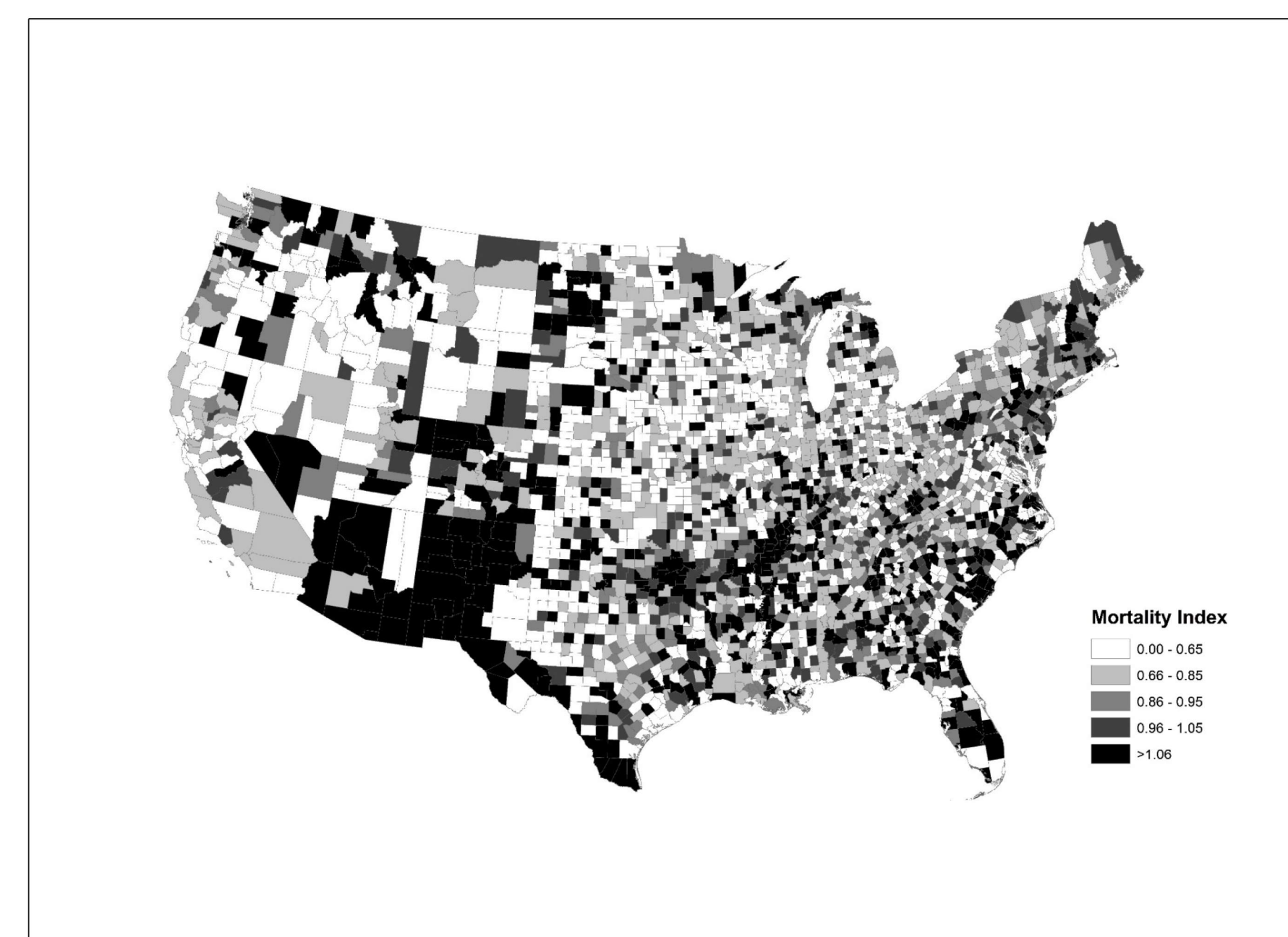
Actual Infant and Child Mortality (Children Ever Born – Children Surviving) / Expected Mortality (Model West level 13.5) (United Nations 1983; Preston and Haines 1991).

Child Mortality Index by Nativity

The Irish and Italians suffered the highest child mortality rates; Scandinavians and the Swiss enjoyed lower rates than native-born whites of native parentage (NWNP).



Child Mortality, White Population, 1910



Geographic variations in child mortality were large, suggesting the need for county-level fixed effects.

Weighted Regression Model

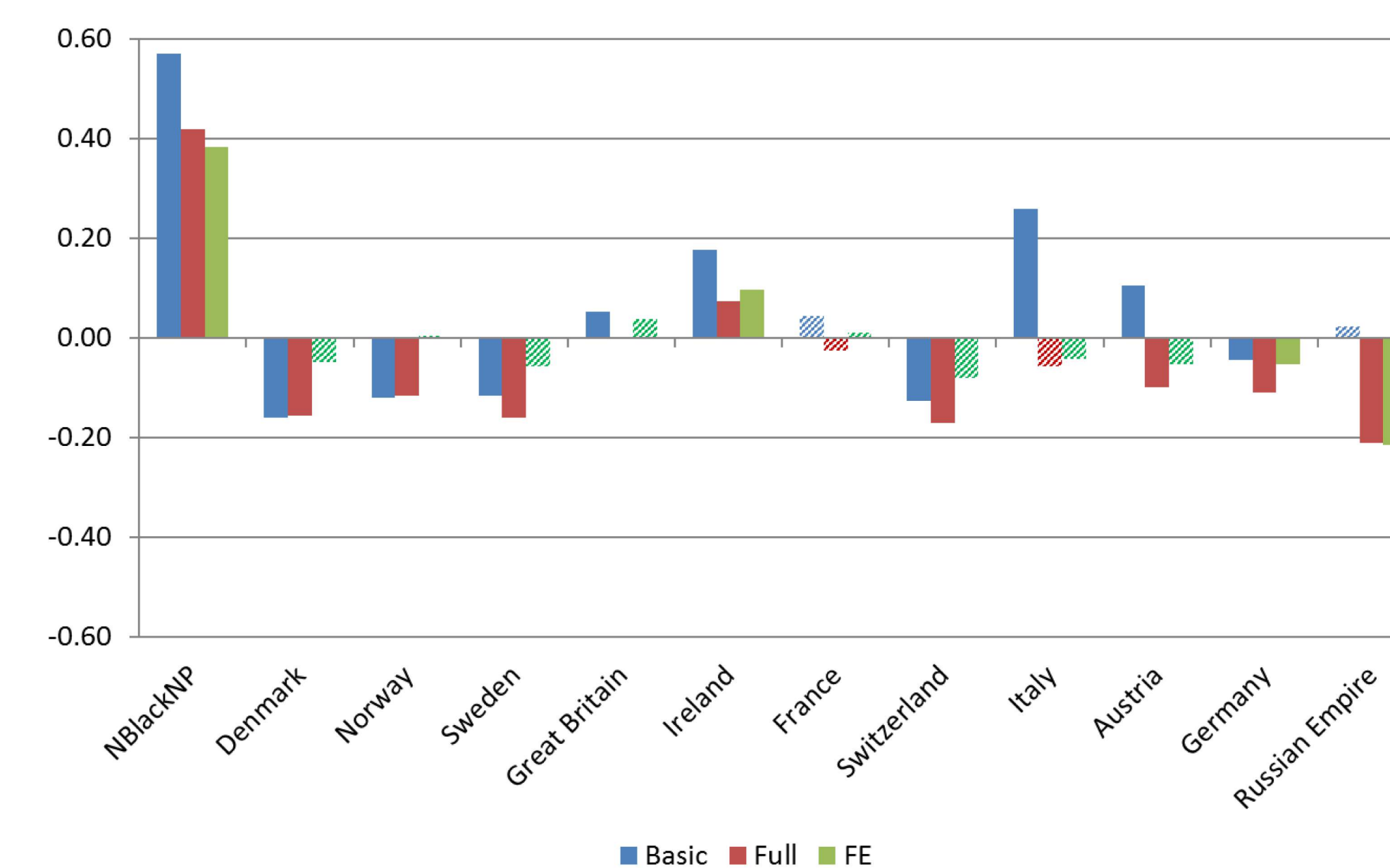
$$M_{ij} = \alpha + \sum_k \beta_k X_{kij} + \gamma_j + \varepsilon_{ij}$$

- M_{ij} : Mortality index for woman i in county j
- X_{kij} : Individual-level variables
- γ_j : County-level fixed effects
- ε_{ij} : Idiosyncratic error

Weighted by children ever born

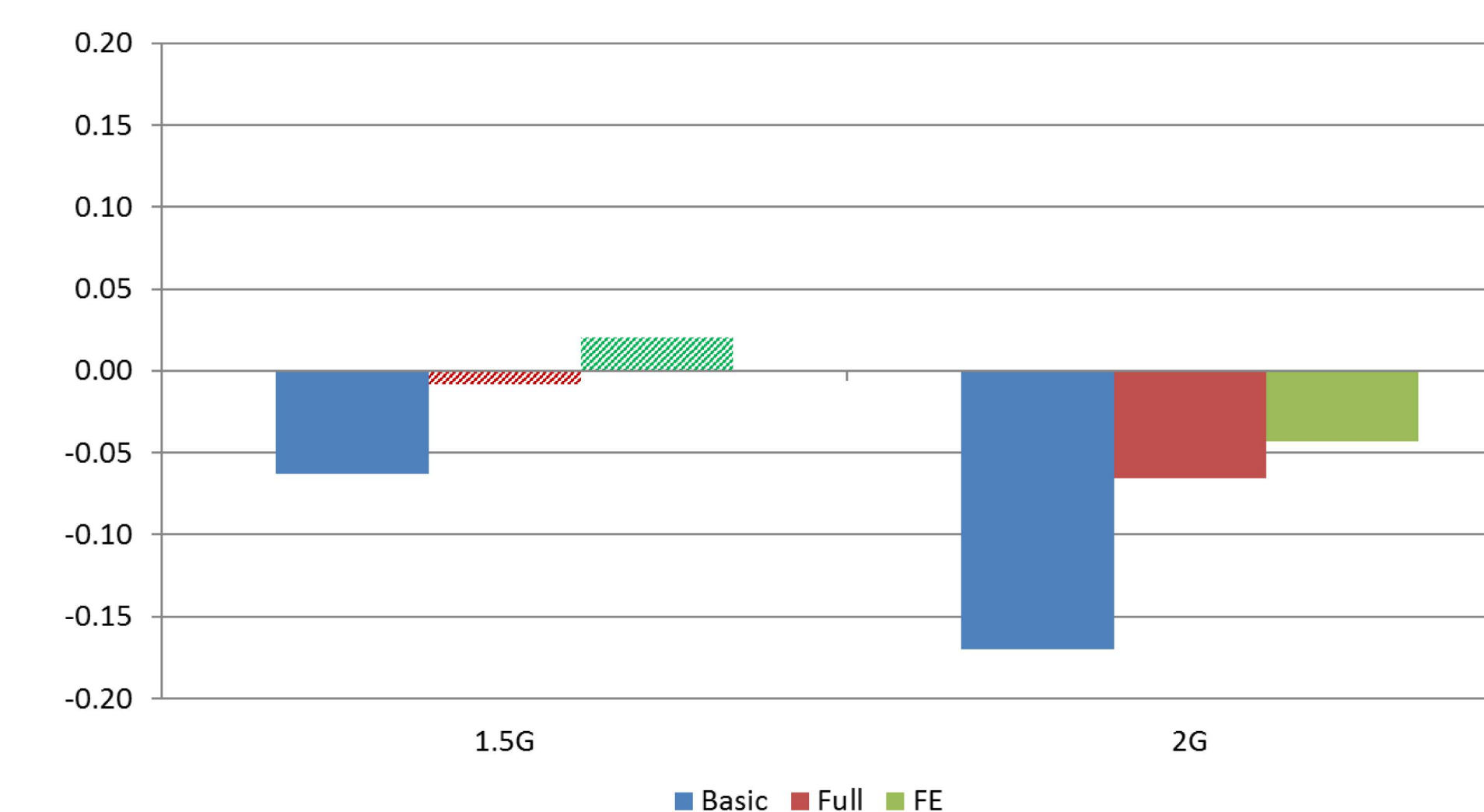
Regression Results - Nativity

Regression coefficients relative to NWNP are shown for the basic model, full model with independent variables measuring assimilation (e.g., ability to speak English) and urban/farm residence, and with county-level fixed effects (FE).



Regression Results - Generation

The second generation had lower child mortality than the first, while being in the 1.5 (arriving as children) does not make much of a difference once we controlled for assimilation and place of residence.



Conclusions and Future Work

Immigrant differentials in child mortality depended to a high degree on assimilation indicators and geographic factors, but some differences remained (Ireland+, Germany-, Russian Jews-)

Although second generations enjoyed lower mortality, we found modest effects of longer residence in the U. S. Intermarriage with natives and second generation immigrants lowered mortality.

We are now examining contextual effects with the 1910 complete-count database, including the impact of neighborhood diversity and origin group size.