

What girls study at school affects how healthy their babies will be later in life

Education plays a crucial role in shaping the future of individuals and societies. [Pilar Cuevas-Ruiz](#), [Cristina Borra](#) and [Almudena Sevilla](#) present findings from research on the long-term health effects of a comprehensive educational reform in Spain that integrated a more general curriculum into the high school system. They find girls who followed a broader educational curriculum until the age of 16 were more likely to have healthier children later in life than those who were divided into vocational or academic tracks at the age of 14.

[Better health at birth is linked to better long-term outcomes](#), such as higher educational attainment, better earnings, and lower risk of disability. While [prior research](#) has identified several factors that influence health at birth – including maternal years of education, behaviour, access to resources and mental and physical health – there has been limited research investigating the effect of the specific educational curriculum studied by the mother on infant health. This knowledge gap stems from the challenges of randomly assigning different curricula to mothers while controlling for their innate abilities and observing the subsequent health outcomes of their children.

To address this gap, we analysed the effects of an educational policy reform in Spain. The reform postponed students' choice between academic or vocational tracks from the age of 14 until 16, requiring all students to complete a broader, two-year general curriculum. The implementation of the new comprehensive curriculum was staggered across Spanish provinces over a ten-year transition period, in which the old and new high school systems coexisted.

To identify the effects of more general education on children's outcomes, we constructed an index of exposure to the policy using manually collected data on the share of 14-year-old students under each high school system during the transition period and compared the health outcomes of children born to mothers with varying levels of exposure to the policy. The study focused on the health outcomes of firstborn children born to mothers aged between 25 and 33 who were enrolled in high school between 1975 and 1985.

Our findings revealed that children whose mothers were exposed to the broader educational curriculum had improved health outcomes at birth. We assessed the health of newborns based on several indicators, including very low birth weight (less than 1,500 grams), and very preterm birth (less than 33 weeks). In the study, approximately 1% of newborns had very low birth weight and 1% were very preterm. The analysis showed a 27.14% decrease in the likelihood of very low birth weight and a 27.5% decrease in very preterm birth. These figures imply that there were 305 fewer children born with a very low birth weight and 480 fewer very preterm births.

We also explored several underlying channels through which increased maternal general schooling could have positively affected children's health. Our results suggest that the effect is primarily driven by an increased maternal participation in the workforce and improved family planning, rather than increased ability to avoid risky behaviours or increased earnings through different job choices or partner selection.

The comprehensive educational reform in Spain successfully provided broader knowledge and learning skills to women without affecting the completion of different educational programmes or years of schooling. The increase in the share of women enrolled in the new comprehensive system demonstrates the success of the reform. However, it did not significantly affect the proportion of women with a high school diploma or college degree, indicating that the changes were primarily driven by the curriculum rather than educational attainment or credential acquisition.

Our research highlights the significant impact of a broader maternal educational curricula on the health outcomes of children at birth. It emphasises the potential benefits of integrating a broader and more general educational curriculum into high schools and underscores the importance of considering the impact of educational policies on health outcomes. Our findings urge policymakers to prioritise the quality of education, alongside its quantity, to pave the way for improved health outcomes for future generations.

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