



# **The changing association between maternal age and offspring well- being**

**Alice Goisis**

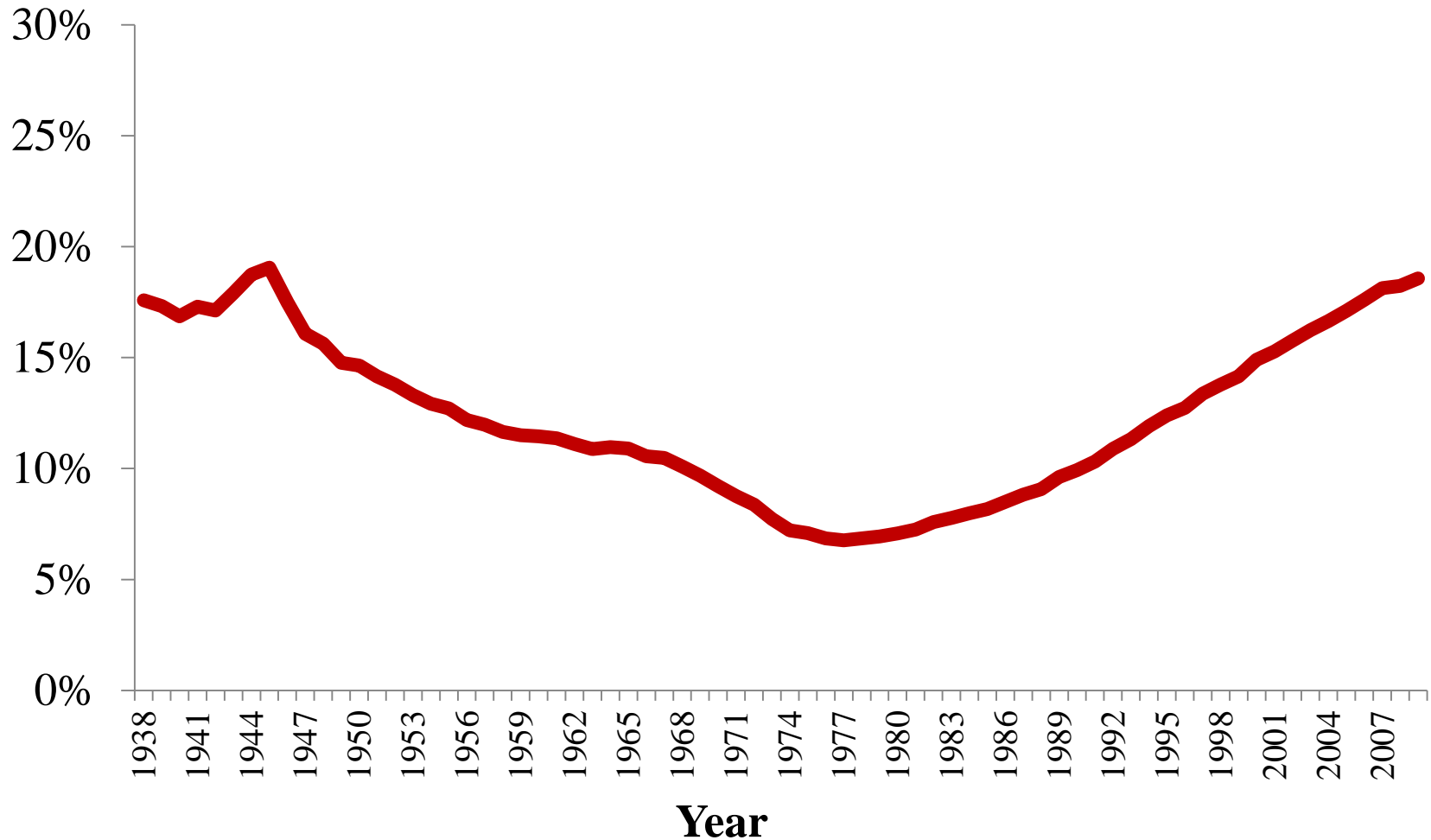
UCL

# Postponement of childbearing

- Childbearing postponement has been increasing across high-income countries since the 1970s/1980s

# Maternal age at birth is increasing

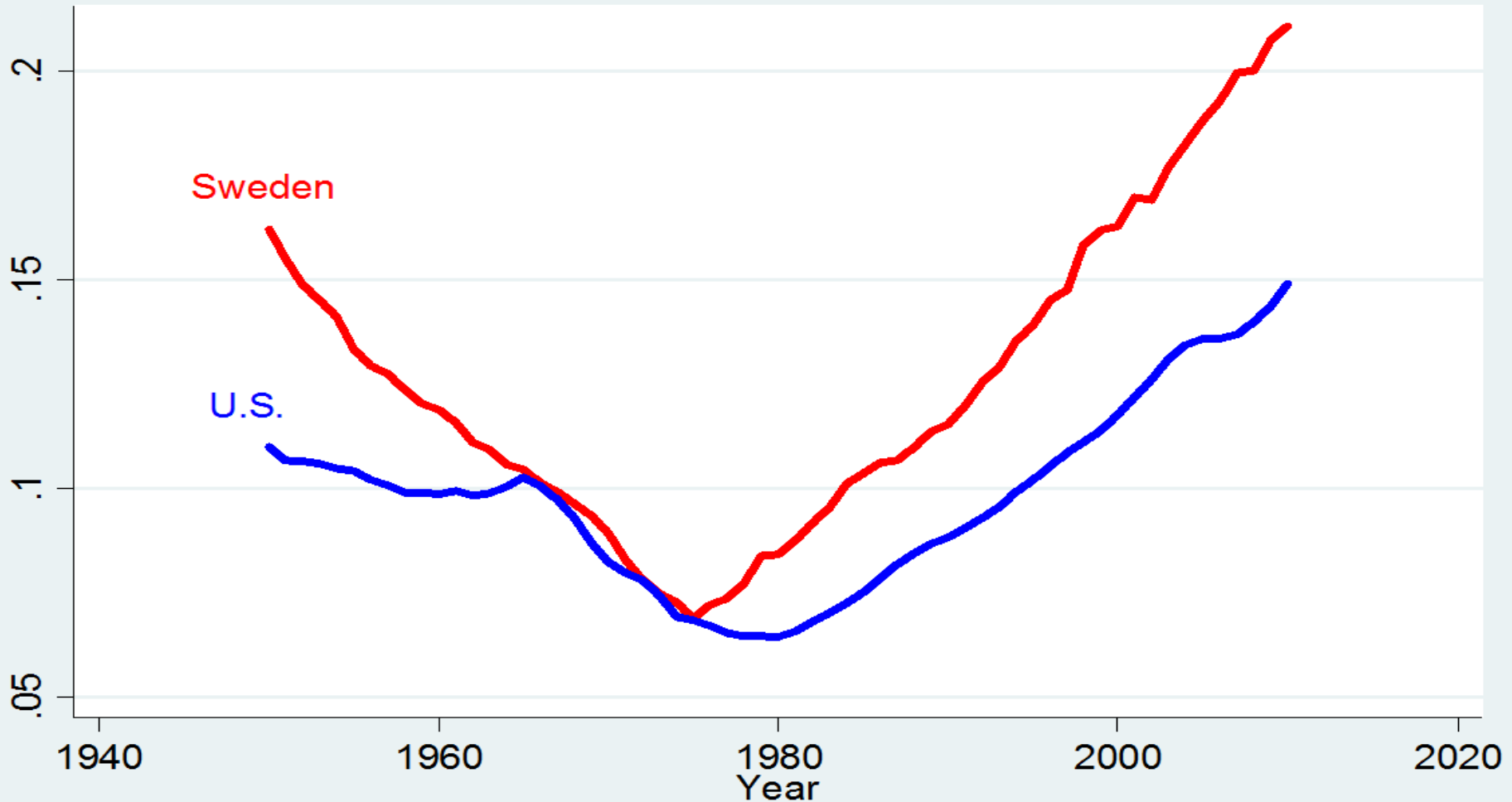
Fraction of fertility attributable to mothers aged 35+: England & Wales



Source: Human Fertility Database

# Maternal age at birth is increasing

Fraction of fertility attributable to mothers aged 35+: U.S. and Sweden



# Postponement of childbearing

- Since the 1970s, in high income countries increasingly often women delay childbearing to older ages
- Increasing concerns about the consequences of being born to an older mother
  - According to the mainstream medical literature being born to an older parent may represent a significant **health risk**

# Advanced maternal age a major risk factor

- For pregnancy and birth outcomes (e.g. Bewley et al. 2005 BMJ)
  - “Parental age has been shown to be a major factor, if not the most important factor, in producing variability in offspring” (Liu et al., 2011)
  - “The consensus is that increasing maternal age is independently associated with specific adverse pregnancy outcomes” (Nwandison and Bewley, 2006)

## But..

- The magnitude of the association depends on the studies and controls used
  - Some studies suggest that the association might be confounded by maternal characteristics

# How old is too old?

Health and medical concerns about childbearing at older ages

**vs.**

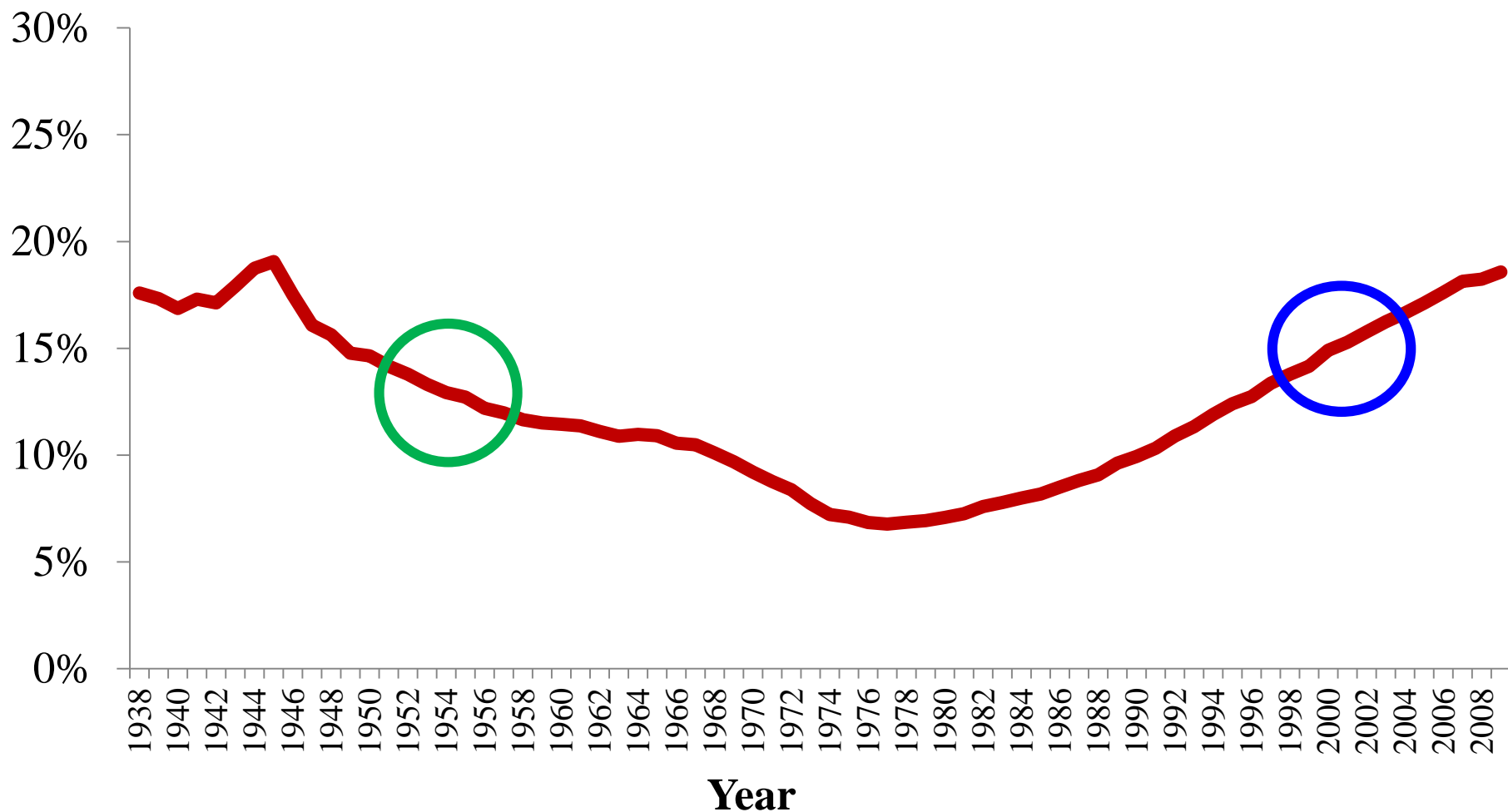
Contemporary older mothers advantaged characteristics (more than) compensate for the health complications

*“The optimal age for childbearing, in terms of pregnancy outcomes, remains the age range 20-35” (Bewley, Davies & Braude, 2005)*

*“The older mother today is at significantly lower risk [of poor health outcomes] than her contemporary two decades ago” (Carolan, 2003)*



# Childbearing at older ages over time in the UK



Source: Human Fertility Database

# Childbearing at older maternal ages: past vs. present

- Currently, advanced age at birth positively associated with socio-economic status and behaviours
- In the past: a qualitatively different process
  - Strongly associated with higher order births
  - Socioeconomic incentives less clear
  - Different social norms regulating entry into parenthood
  - Lower quality antenatal/postnatal care and prenatal screenings

# Study contribution

- **Nature of childbearing at older ages likely to have changed over time**
  - Limited evidence on how the profiles of older mothers have changed over time
  - No evidence on how the association between maternal age and child well-being has (as a consequence) changed over time

# Research questions

- Have the profiles of older mothers changed over time?
- Has the association between maternal age and child well-being changed over time?



**Cross-cohort comparison using UK birth cohorts**

# Data & Method

Survey	1958 (NCDS)	1970 (BCS)	2001 (MCS)
<b>Representation</b>	England, Scotland, Wales	England, Scotland, Wales	England, Scotland, Wales, Northern Ireland
<b>Sampling</b>	Babies born in a single week of March 1958	Babies born one week in April 1970	Babies born between Sept 2000 and Jan 2002
<b>Baseline sample</b>	17,416	17,287	19,244
<b>Analytical sample</b>	15,952	16,432	17,484

# Data & Method

## Main variables

- **Dependent variable – child health**
  - LBW (birth weight less than 2.5 kg)
- **Maternal age at cohort member birth**  
<20; 20-24; 25-29; 30-34; 35-39; **40+**

## Analytical sample

- Live births
- Exclude babies weighting 4.5 kg+

## Method

- Describe the profiles of mothers by age at first birth
- Logistic models to inspect the bivariate association between maternal age and LBW
- Adjust for family/mothers' SES, health and health behaviours

**1958 (NCDS)****1970 (BCS)****2001 (MCS)****Socio-demographic control variables**

Birth order	✓	✓	✓
Social Class	✓	✓	✓
Education	✓	✓	✓
Partnership at the time of birth	✓	✓	✓
Household income			✓
Overcrowding			✓
House ownership			✓

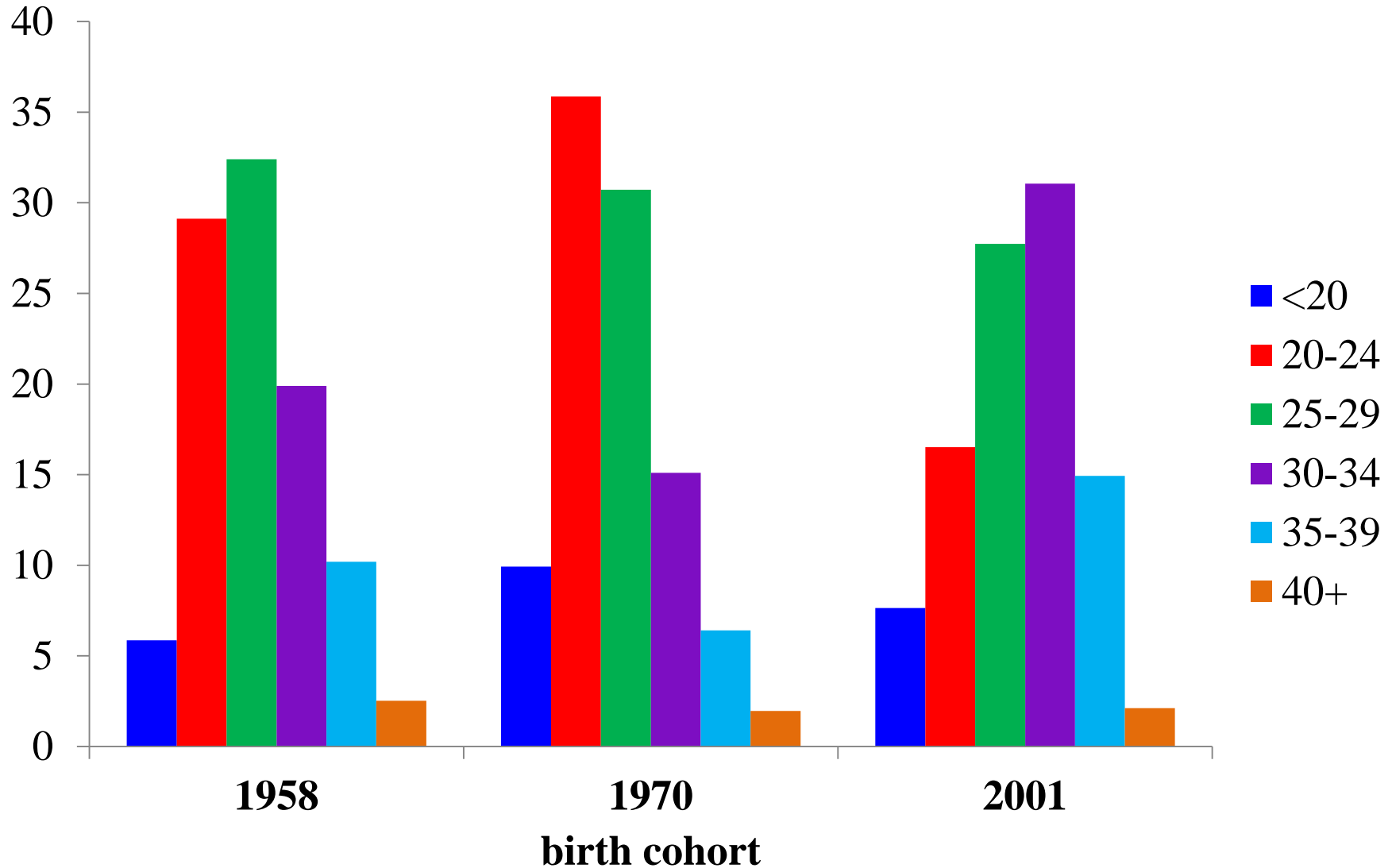
**1958 (NCDS)****1970 (BCS)****2001 (MCS)****Health and health behaviors**

Previous stillbirths/miscarriages	✓	✓	✓
Smoking during pregnancy	✓	✓	✓
C-section delivery	✓	✓	✓
Drinking during pregnancy			✓
Antenatal care after 12 weeks of pregnancy	✓	✓	✓
Gestational hypertension			✓
Mother's height	✓	✓	✓
Complications during labour	✓	✓	
Complications during pregnancy			✓

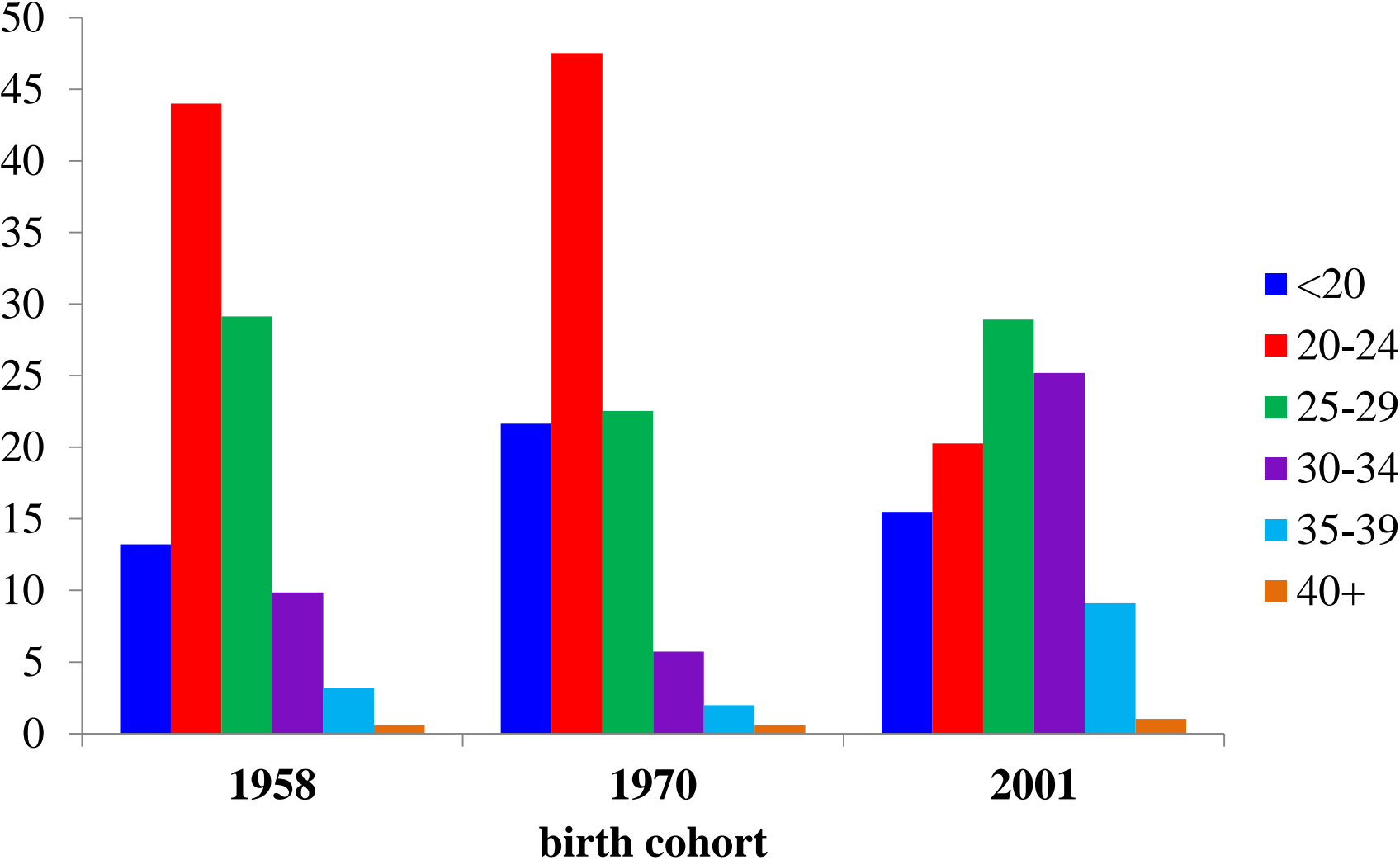


**Have the profiles of older mothers  
changed over time?**

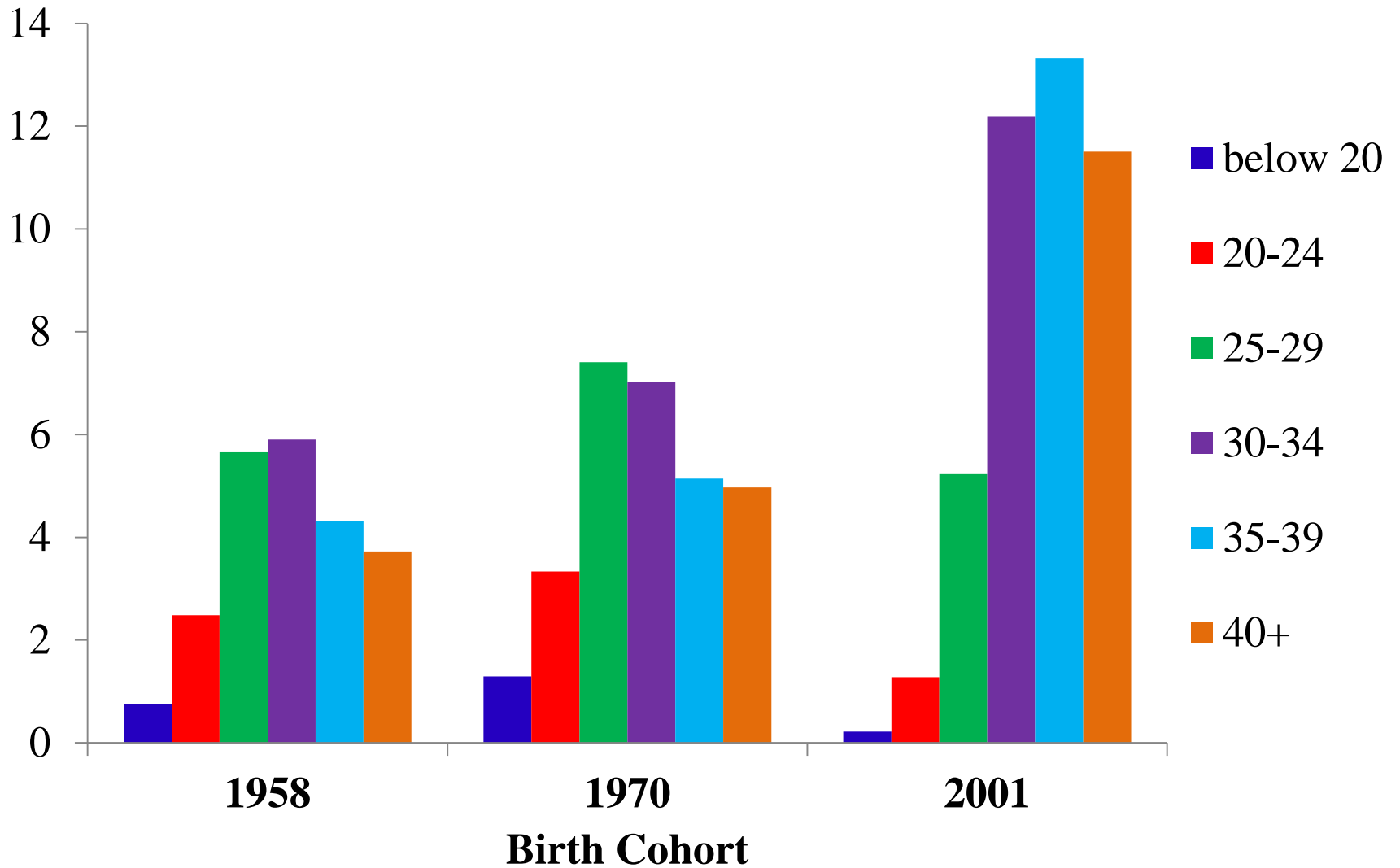
# % births by maternal age



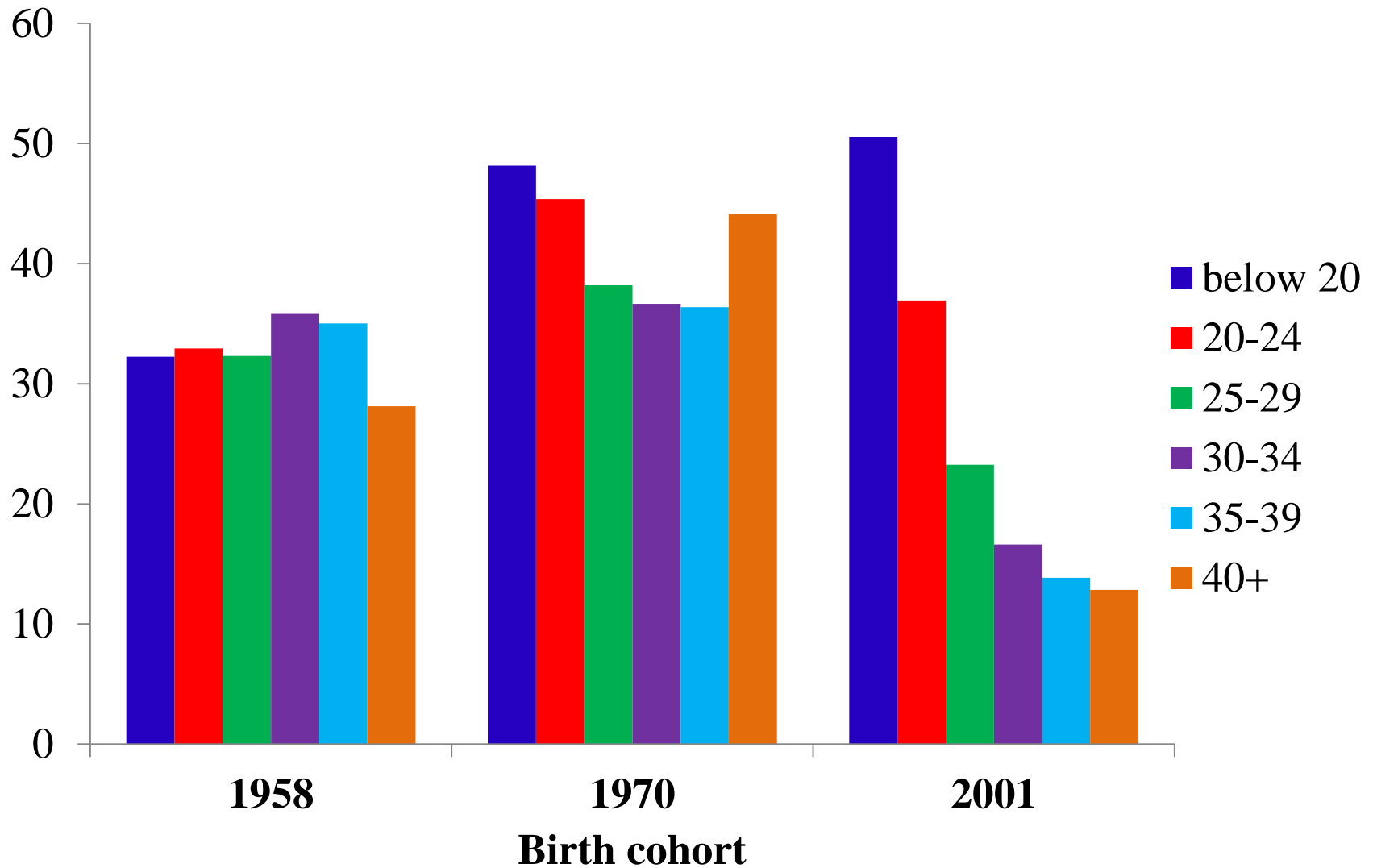
# % first births by maternal age



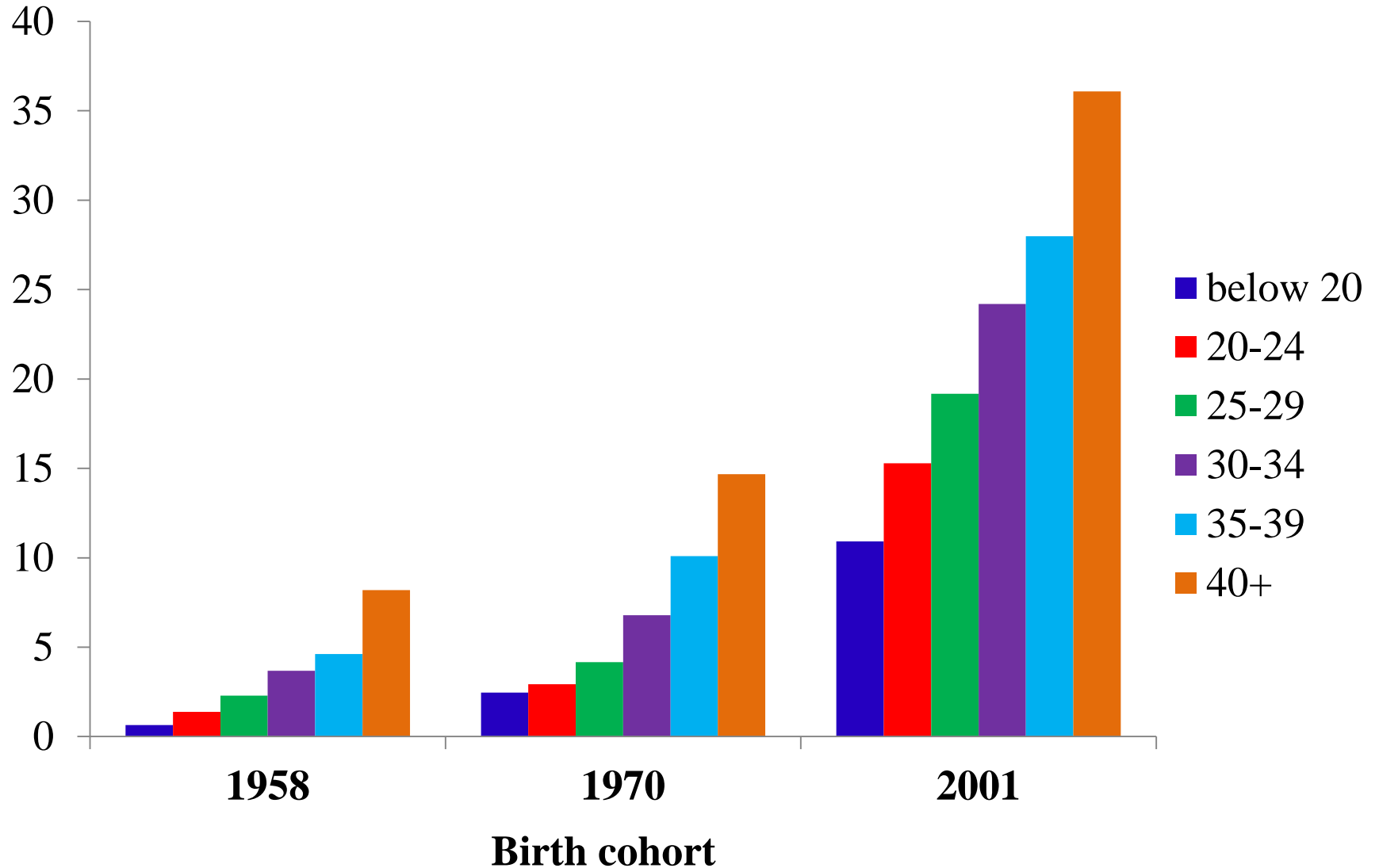
# % High Social Class



# % smoking during pregnancy



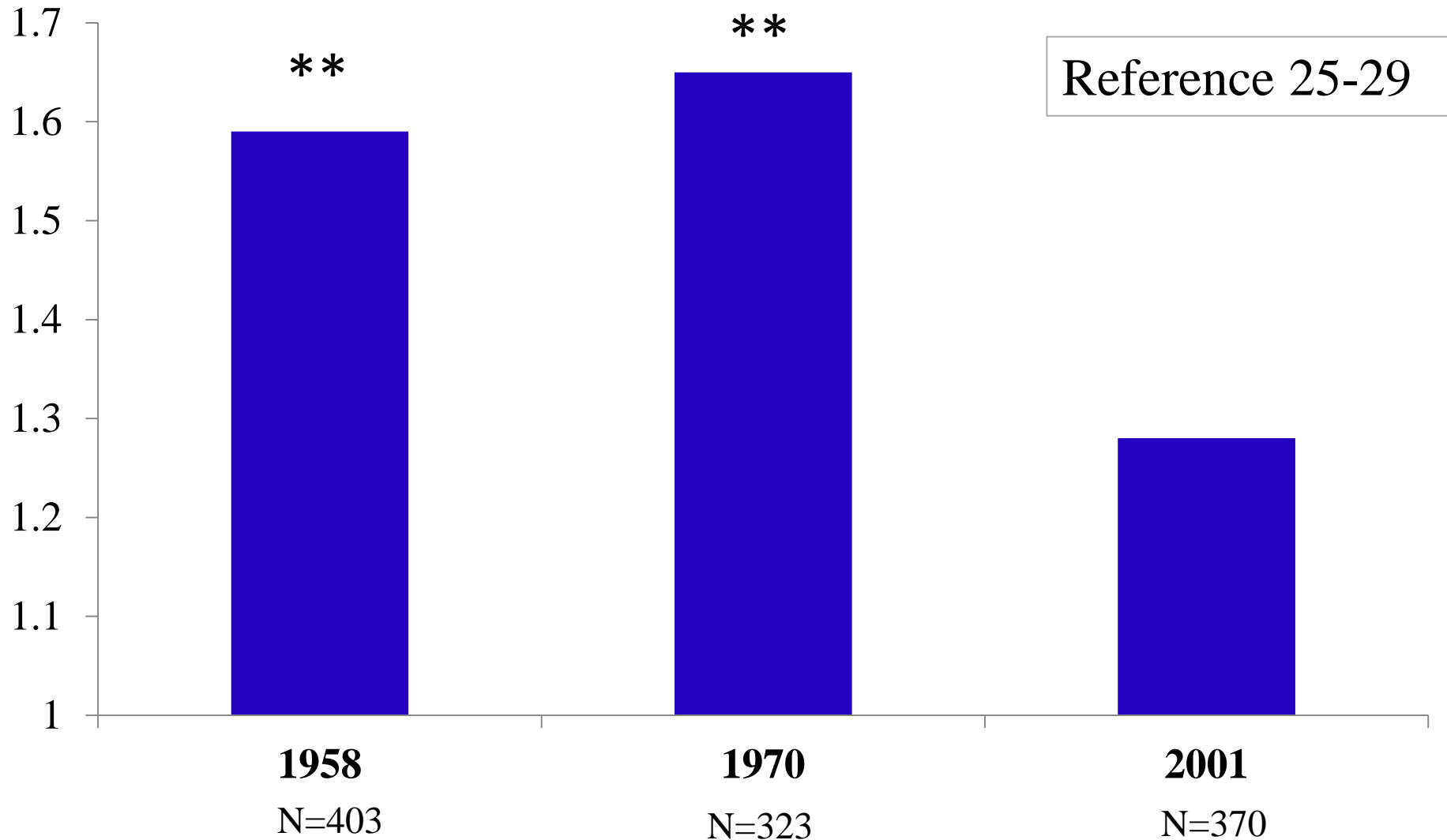
# % C-section deliveries



**Has the association between  
maternal age and child health  
changed over time?**

# Logistic regression model on LBW

## Odds Ratios 40+ baseline model



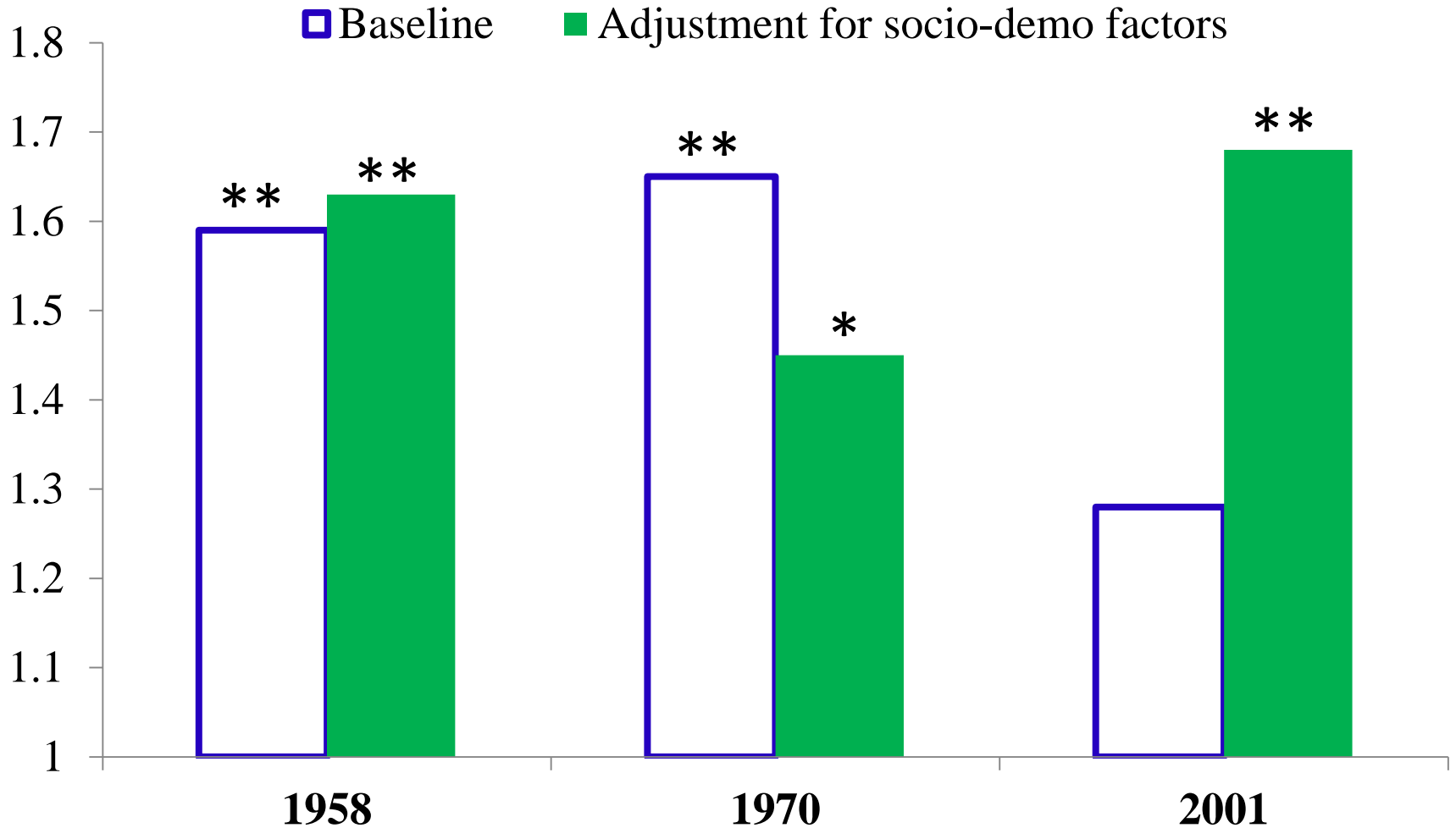


# Logistic regression model on LBW

	1958	1970	2001
Maternal Age <20 (reference 25-29)	1.60***	1.89***	1.36**
Maternal Age 20-24	1.11	1.35***	1.25*
Maternal Age 30-34	1.07	1.04	0.92
Maternal Age 35-39	1.13	1.11	0.96
Maternal Age 40 and over	1.59**	1.65**	1.28
Number of observations	15,952	16,432	17,484

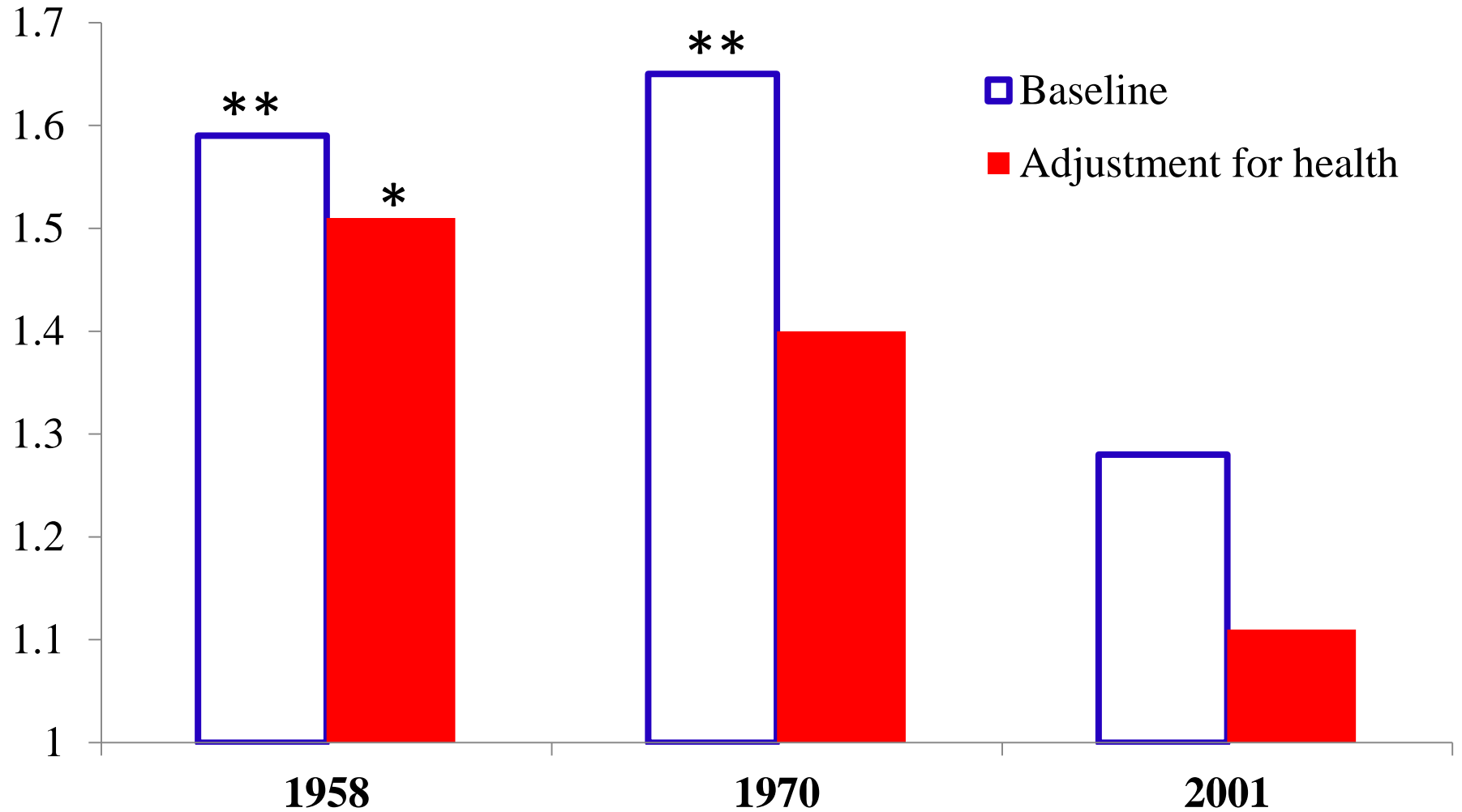
# OR 40+

## Adjustment for socio-demographic factors



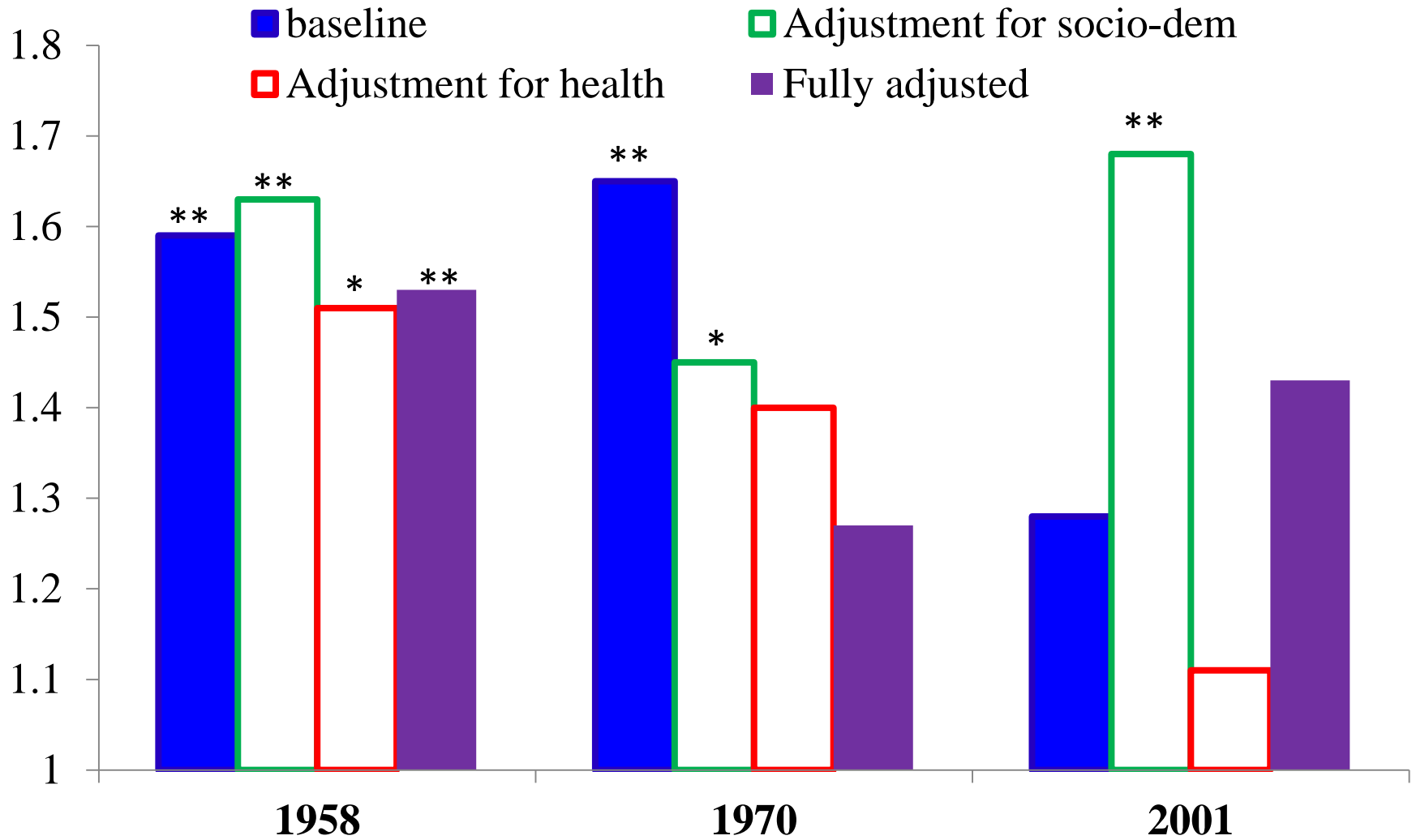
# OR 40+

## Adjustment for health



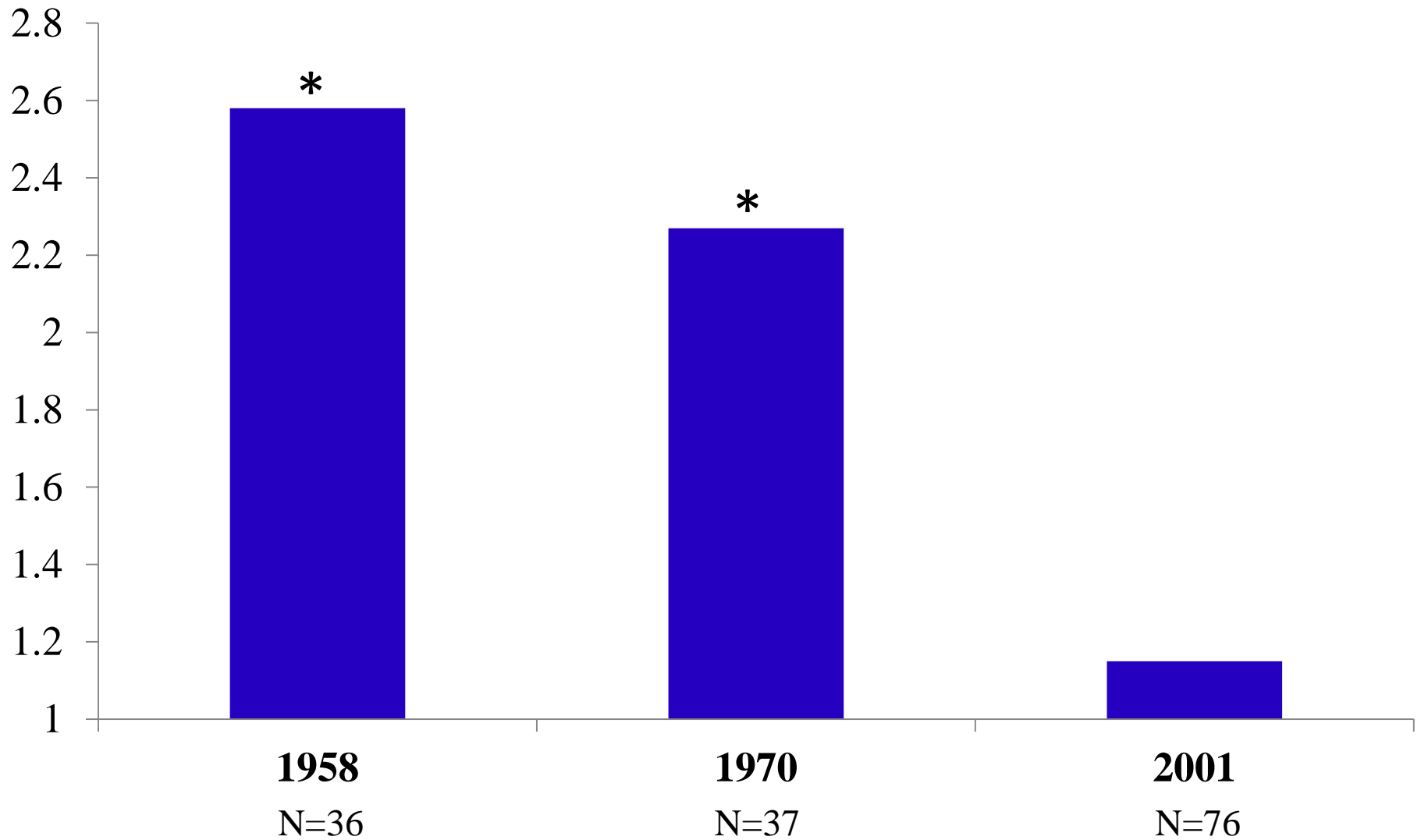
# OR 40+

## Fully adjusted



# OR 40+ Baseline model

## First births only



**Has the association between  
maternal age and cognitive ability in  
childhood changed over time?**

# Data & Method

## Dependent variable

- **Cognitive ability**
  - Verbal test
  - At age 11 (1958/2001) or 10 (1970)
  - Standardized

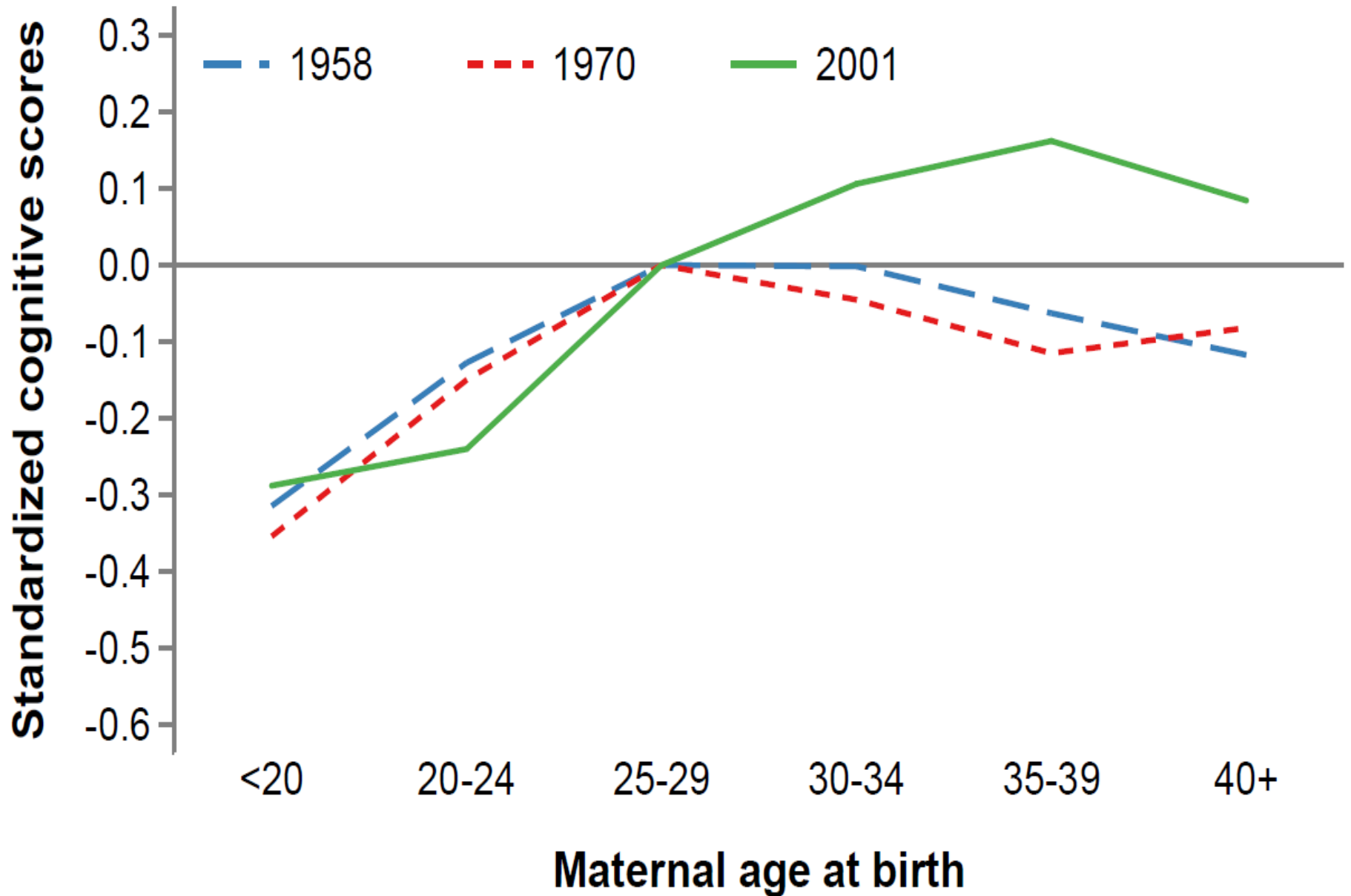
## Maternal age

- **Maternal age at cohort member birth**
  - <20; 20-24; 25-29; 30-34; **35-39; 40+**

## Method

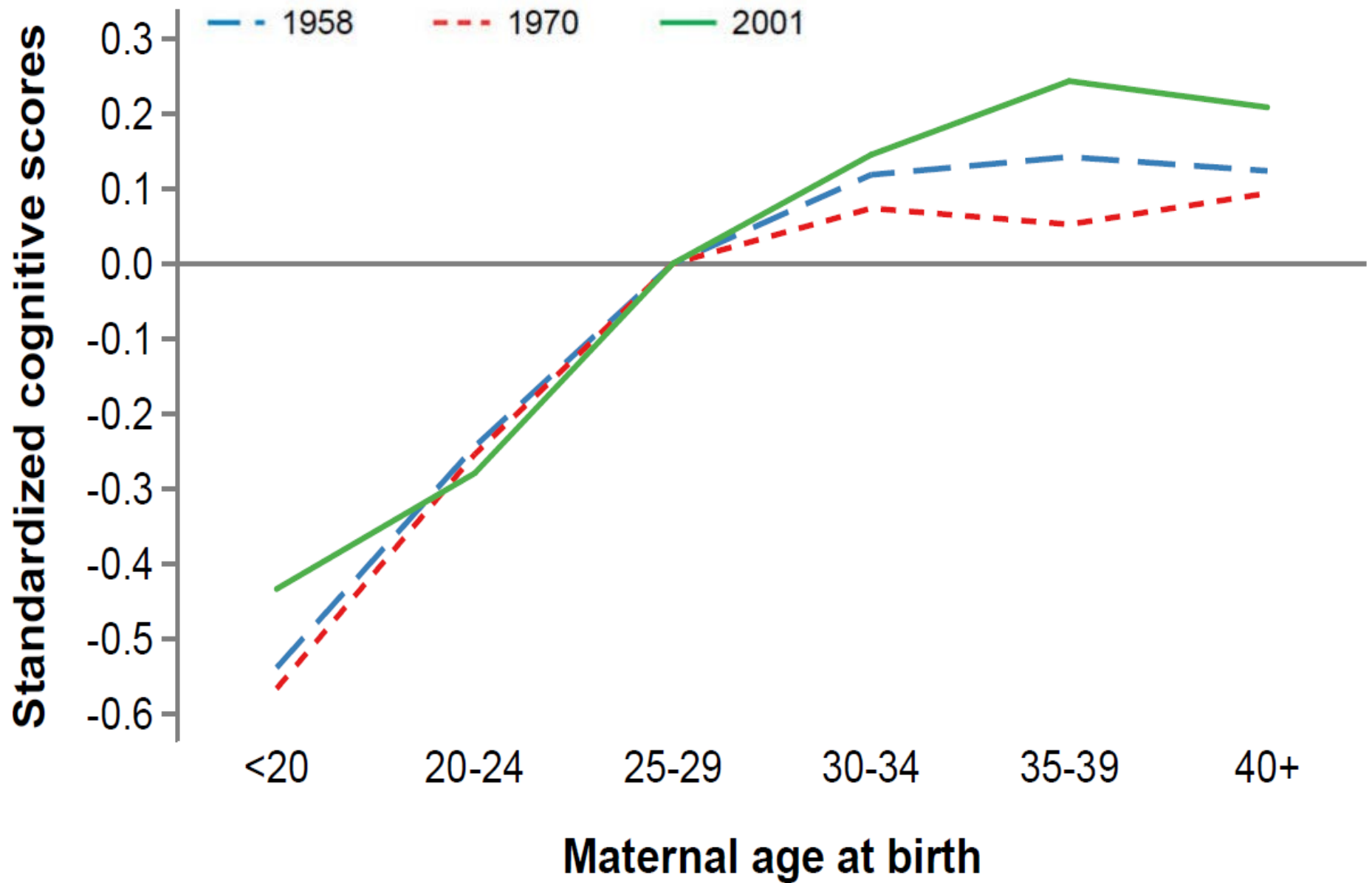
- **Linear models**
  - Model 1: unadjusted association (twin, girl)
  - Model 2: birth order
  - Model 3: birth order + parents' socio-demographic characteristics

# Model 1: baseline model

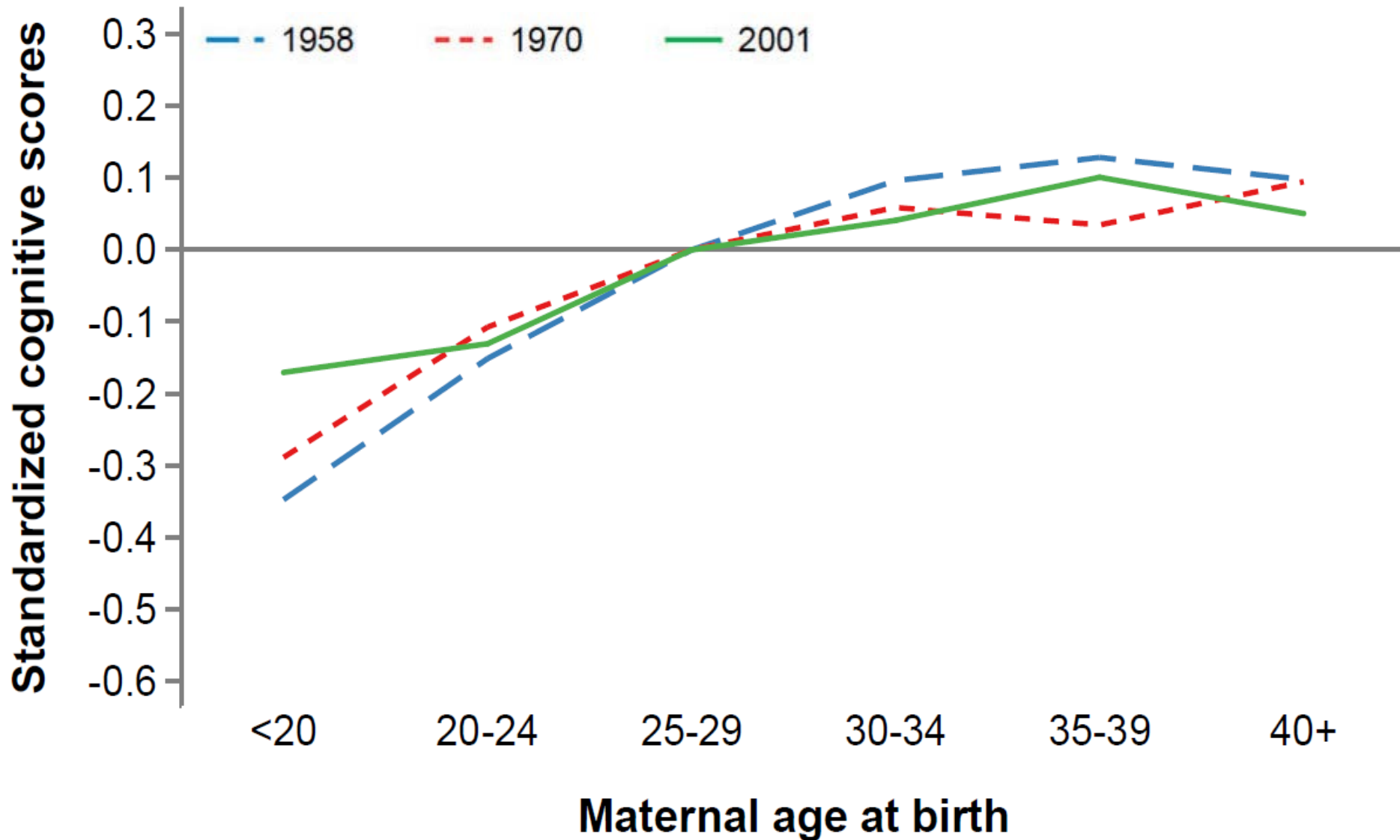




# Model 2: adjusted for birth order



# Model 3: Adjusted for birth order and parents' socio-demographic characteristics



# Testing for differences across cohorts

<b>Maternal age 35-39</b>	<b>1970 to 1958</b>	<b>2001 to 1958</b>	<b>2001 to 1970</b>
Model 1: Baseline	-0.052	0.225 ***	0.277 ***
Model 3: birth order + socio-demographic characteristics	-0.094	-0.028	0.066

# Limitations

- Small sample size
- Live births only
- How much is due to changes in context?

# Summary

- The association between advanced maternal age and child well-being has changed over time
- The results suggest this occurs because the association between maternal age and socio-demographic processes has changed over time

# Summary

- Older mothers in a contemporary cohort are relatively more **advantaged** socioeconomically than in older cohorts
- Across cohorts older maternal age **less** likely to be associated with poor child health and **more** likely to be associated with better cognitive scores
- The socio-demographic disadvantage that historically was associated with older maternal age has not only **disappeared**, but has turned into a potentially important **advantage**

# Overall conclusions

- Maternal age is a complex variable which reflects a multitude of social and health processes
- The intersection of these processes might vary over time and result in heterogeneous associations between maternal age and well-being
- Question its meaning and consequences and contextualize

**Research supported by the COSTPOST  
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- **Goisis, Alice** and Schneider, Daniel C. and Myrskylä, Mikko (2017) The reversing association between advanced maternal age and child cognitive ability: evidence from three UK birth cohorts. *International Journal of Epidemiology*
- **Goisis, Alice** and Schneider, Daniel and Myrskylä, Mikko (2018) Secular changes in the association between advanced maternal age and the risk of low birth weight: a cross-cohort comparison in the UK. *Population Studies*



**Thank you!**

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# **% LBW**

**1958**

**1970**

**2001**

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5.3

6.8

6.7

