

# Maternal Mortality Risk and the Gender Gap in Desired Fertility \*

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## Abstract

Spousal disagreement over desired number of children is believed to be a significant factor in slowing down demographic transitions in Sub-Saharan Africa, where fertility rates have remained high even as women's desired fertility declines. We develop a model in which an initial gender gap in ideal fertility prevents effective communication between spouses about the costs of childbearing incurred by women. This friction is likely to further widen the fertility disagreement in environments where maternal health risk is high and imperfectly observed, and where men have fewer opportunities than women to learn about average and relative risk. To assess the importance of this channel, we design an intervention to experimentally vary exposure to information about maternal health risk to either the husband or the wife on a sample of approximately 500 couples in peri-urban Lusaka. At baseline, husbands display lower knowledge of maternal mortality and morbidity compared to their wives. After the intervention, relative to the control group, couples in which the husband is treated experience a 5 pp increase in regular use of oral contraceptives accompanied by a 5.5 percentage point (pp) decline in the probability of having a child in the year following the intervention (a 46% reduction). Consistent with our hypothesis, treated husbands also report lower desired fertility and have more accurate beliefs about their wife's desired fertility, indicating that the mechanism behind the fertility result is not improved ability to control fertility. Moreover, couples in which the husband is treated increase communication about family planning, consistent with the treatment acting on men's lower knowledge of maternal risk, which wives are unable to communicate on their own. Couples in which the wife is treated also appear to reduce fertility but do not otherwise exhibit a similar pattern of behavioral change relative to the control group.

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