

Moving towards universal coverage
**Issues in maternal–newborn health
and poverty**

3

Impact on economic
growth of investing in
maternal–newborn health

| Karl Wilhelmson
| Ulf-G. Gerdtham

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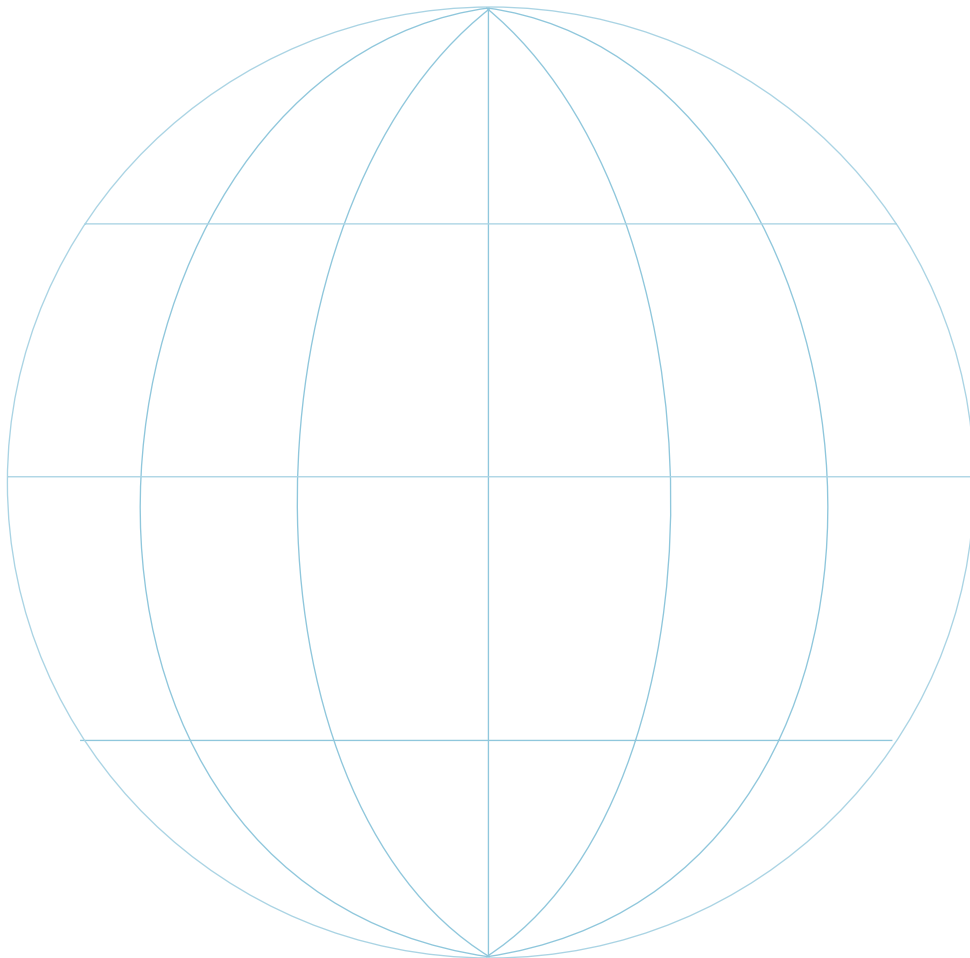
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Acronyms

AIDS	Acquired immunodeficiency syndrome
GDP	Gross domestic product
GLS	Generalized least squares
MNH	Maternal–newborn health
OECD	Organisation for Economic Co-operation and Development
OLS	Ordinary least squares
PPP	Purchasing power parity
SDP	State domestic product
WHO	World Health Organization

Abstract

The aim of this paper is to provide a systematic review of the evidence of the impact on economic growth of investments in maternal–newborn health (MNH). The methodology used for the review includes a systematic search for published literature in relevant electronic databases. In the paper, we review five studies: four empirical and one theoretical. One of the empirical papers measures health by infant mortality. The study finds that a 1/1000-point reduction in the infant mortality rate leads to an increase in the level of State Domestic Product by Indian Rs 2.70 and an increase in the average growth rate per year of 0.145%. Similar results are reported for other health measures in other studies. Our main conclusion, however, is that the area lacks research and that considerably more is needed before any advice can be provided to policy-makers about the contribution to growth of investments in MNH. Specifically, first and foremost, studies are needed that explicitly analyse the impact of MNH on level and growth of output. Second, we suggest the use of more comprehensive MNH measures that consider the health of both mothers and newborns and aspects of ill-health other than death, such as measures of quality of life, functional limitations, mental health and sickness absenteeism. Third, estimates of the effects of MNH on growth need to be controlled for other health dimensions, i.e. aspects that may confound the impact of MNH. Fourth, studies are needed of the effects on determinants of growth in order to understand better the links between MNH and growth. Fifth, studies based on smaller geographical areas within countries and longer time series are needed, in order to obtain more precise estimates and also better estimates of the long-term growth paths. Finally, we suggest compilation of other data sets on microeconomic data, for example, to study effects at firm level of MNH on labour productivity through inability to work, disability, sick days, etc.

Key Words: Maternal–newborn ill-health (MNIH), Economic growth, Health, Systematic review

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