

POSTERS (A-Z by title)

A joint analysis of individual and spatial determinants of French student mobility

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Since the implementation of selective admission to master's programs in France in 2016, continuing one's studies has become increasingly complex amid the massification of higher education. In response to this selectivity, a growing number of students pursue master's degrees at different institutions, thereby leaving the institutions where they completed their bachelor's degree.

This phenomenon raises important questions about the factors that shape student mobility between higher education institutions (HEIs). Literature has identified a set of socio-demographic, academic and spatial variables as its main drivers.

However, few studies have analysed the impact of these three types of determinants jointly. The aim of this article is therefore to understand the determinants of student mobility between HEIs. More specifically, it seeks to determine which type of determinant has the strongest effect on student mobility during the transition from bachelor's to master's degrees in French higher education.

This work is based on the hypothesis that spatial characteristics, and more specifically institution-related variables such as size and diversity of educational programs, play a greater role than individual characteristics in the decision to pursue a master's degree at a different institution.

To that end, this work will use the French database SISE (System of Information for Student Tracking), a comprehensive administrative database registering enrolments in HEIs, measuring mobility between different HEIs and giving detailed socio-demographic information about each student. To assess the HEIs' attractiveness, we built a classification of institutions based on their size, the number and variety of teaching programs, as well as their international reputation.

Acceptability of reusable menstrual products in Nepal among school-age girls

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Aim: We investigate the feasibility of switching from single-use disposable pads to reusable menstrual products among school-aged girls in Kaski and Surkhet. The research identifies barriers and facilitators influencing adoption to inform the development of sustainable menstrual health interventions.

Methods: We conducted 53 interviews and focus groups with school-attending girls, teachers, adult men, and community leaders. A four-level coding structure with 88 codes was created based on salient topics.

Results: Disposable pads are widely regarded as the superior menstrual management product, associated with convenience, hygiene, and educational attainment. Cloths, the predominant reusable product, are consistently linked to negative emotions, logistical challenges, stigma associated with poverty, and a negative assessment of the previous generation.

Reusable pads are recognised but rarely used, and environmental concerns influence attitudes only when prompted. Previous interventions promoting reusable products had limited impact, with uptake declining after the distribution of disposable pads increased. Waste management primarily involves burying or open-burning garbage. Both methods were criticised for their perceived environmental and health impacts.

Conclusions: The evidence does not support replacing disposable pads with reusable alternatives in schools. While environmental and financial arguments exist, they are outweighed by social, emotional, and logistical barriers, all heightened by persistent menstrual restrictions.

Recommendations include: offering reusable pads as complementary options, continuing to reduce menstrual restrictions, improving waste management, and piloting long-term programmes.

Finally, it is also important to question why the focus of an environmental policy is placed on pads rather than on other single-use products or on general waste management improvements.

AI-mediated intimacy and reproductive misalignment: A life-course framework for fertility

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This paper is a conceptual and theory-building contribution that examines how artificial intelligence may shape fertility by transforming the historical and relational contexts in which life-course transitions unfold. Building on life-course theory, it treats fertility not as an isolated decision at the point of childbearing, but as the outcome of sequenced transitions including socialization, partner search, union formation, commitment, and readiness for parenthood. The paper asks how AI-mediated intimacy may alter the relational conditions through which individuals move toward, delay, or avoid partnership and parenthood.

The paper reviews emerging research on the short-term effects of AI-mediated tools, including companion chatbots and emotionally responsive systems, and integrates these findings into a life-course framework. It extends the principle of historical context by theorising mediated relational environments as changing digital contexts: from locally bounded interaction, to platform-mediated dating and communication, and now to AI-mediated intimacy. In this framework, AI is treated as a new digital-historical context in which relational expectations, capacities, and pathways into family formation may develop differently.

The central argument is that AI may affect fertility indirectly by reshaping the upstream conditions through which reproductive intentions become, or fail to become, family formation. The paper identifies four mechanisms: under-preparation, expectation shift, substitution, and cost amplification. These mechanisms may intensify existing drivers of fertility delay, including perceived lack of readiness, difficulty with long-term commitment, high emotional cost, and uncertainty about the future.

The paper contributes the concept of reproductive misalignment, defined as the gap between reproductive desires, intentions, and outcomes. Findings feed directly into public policy by formulating criteria for future behavioural interventions aimed at reducing unwanted outcomes, supporting reflective AI use, and strengthening reproductive agency among users susceptible to dependency, avoidance, or relational substitution.

Ambient air pollution and the sex ratio at birth: a cross-country analysis of Demographic and Health Survey Data from 60 countries, 2000-2021

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Ambient air pollution has been consistently linked to adverse pregnancy outcomes, including stillbirth, miscarriage, and preterm birth. However, its effects on the earliest stages of reproduction, including implantation, viability, and early pregnancy loss, which largely occur before clinical detection, remain poorly understood. Shifts in the sex ratio at birth (SRB) provide a sensitive, population-level indicator of sex-biased conception and pregnancy loss, with important demographic and societal consequences.

We conducted a retrospective, population-based analysis of geolocated live births from Demographic and Health Surveys across 60 countries, comprising 161 surveys conducted between 2000 and 2021 and approximately 8.3 million births. Individual-level exposure to ambient fine particulate matter (PM_{2.5}) was assigned by linking survey cluster locations to daily estimates at 1-km spatial resolution from the LGHAP v2 dataset. Conception dates were estimated using reported birth dates and gestational age, enabling reconstruction of maternal exposure during a three-month preconception period and throughout 9 months of gestation. We applied distributed lag non-linear models to examine associations between time-varying PM_{2.5} exposure and the probability of male birth, identifying potential windows of vulnerability. Models adjusted for maternal age, parity, thermal stress, and included country-by-year fixed effects.

Results are forthcoming. If such associations between maternal exposure and the SRB are observed, this would suggest that air pollution affects population-level reproductive patterns and highlight the importance of reducing maternal exposure to reduce (sex-biased) early pregnancy loss.

Exploring the dynamics between ethnic diversity and household composition type across England and Wales

Momoko Nishikido - Queen's University Belfast

Household composition is one way of capturing the diversity of family structures and living arrangements across populations. The distribution of household composition types has remained relatively stable in England and Wales yet vary across ethnic groups and across space. The composition of household types within an area may also shape its level of ethnic diversity. Unpacking this variation and understanding how it may be related to ethnic diversity are important, as England and Wales have become increasingly ethnically diverse over time. These patterns may have practical implications for housing and access to services. This paper therefore explores the dynamics between ethnic diversity and household composition using 2021 Census data for England and Wales. Ethnic group population counts by household composition type for local authority districts are used to address three questions: How ethnically diverse are household types? To what extent does household composition contribute to ethnic diversity? How are ethnic groups distributed across household types? We apply standardised entropy, Theil's H and location quotients to analyse these dynamics by urban-rural classification, given the spatial variation in both ethnic diversity and household composition. Preliminary results suggest couple households with dependent children are the most ethnically diverse across urban-rural categories except London. Within an urban-rural category, ethnic group composition across household types is broadly similar. Furthermore, the distribution of household composition types contributes little to an area's ethnic diversity. These findings suggest that the urban-rural context is a stronger determinant of ethnic diversity than the distribution of household composition types within them.

From childhood plans to adult lives: Aspiration–realization gaps at age 25 in a 1958 British cohort

Zerui Tian - University of Oxford

Children often describe vivid images of adult life before these outcomes can be observed, yet we know little about how such early plans align with later-realized lives. This study benchmarks aspiration-realization gaps by linking age-11 essays from the 1958 National Child Development Study to realized partnership, marriage, employment, and fertility outcomes at age 25 (linked sample size 7,281).

Essays were annotated with a large language model to extract whether respondents imagined specific age-25 outcomes. Imagined indicators were compared with observed outcomes using mismatch rates and direction-of-error measures, and heterogeneity was assessed by sex, father's social class, and cognitive test scores measured by age 11.

Early-life narratives substantially overpredicted family transitions by age 25. In comparable samples with both imagined and realized measures observed, mismatch rates were high for partnership (0.639), marriage (0.665), and having children (0.574), while employment mismatch was lower (0.245). Errors were dominated by false positives, indicating that children often described normative milestones that did not occur by age 25. For fertility counts, respondents overpredicted the number of children by 1.07 on average, with a mean absolute error of 1.37. Mismatch patterns were socially patterned, with higher employment mismatch among women and higher mismatch in having children among men.

These results quantify aspiration-realization gaps from late childhood to early adulthood and show how childhood narratives can be used to measure early life plans at scale. The findings suggest that childhood depictions of adulthood reflect shared cultural scripts and timing expectations, offering a new lens on stratified life-course trajectories.

Inequalities in life expectancy and disability free life expectancy by lowest level birth country in England & Wales: A total population, repeated cross-sectional approach

Joseph Harrison & Matthew Wallace - University of Salford

Research regularly reports lower mortality risks among migrants, leading to conclusions of a "healthy migrant effect". However, the evidence related to health is much less definitive, leading to suggests of a disconnect between the health and mortality risks of immigrants. This highlights a need to progress beyond single-outcome estimates to consider health and mortality. We compute life tables and apply the Sullivan method to both estimate life expectancy and disability-free life expectancy at age 50. We do this at three time points using total population mortality and census data from 2000-2, 2010-12 and 2020-22. Owing to the size of the

data, we compute our estimates at lowest-level country of origin in England and Wales—something that is rarely possible in immigrant health research—providing the most granular analysis of life expectancy (LE) and disability-free life expectancy (DFLE) in the global evidence base to date. We report inequality across immigrants compared to the England and Wales-born. While the majority of smaller immigrant groups (by population size) experience a consistent “healthy migrant effect” (i.e., higher LE and DFLE) at all three time points, the largest groups instead exhibit an “unhealthy migrant effect” (i.e., lower LE and DFLE; Scotland, Republic of Ireland, and men born in Poland and Lithuania) or live longer lives subject to a greater disability burden (i.e., higher LE, lower DFLE; women and men born in Pakistan and Bangladesh). We report a large degree of diversity in immigrant health and identify several vulnerable groups that require targeted public health interventions to alleviate the higher burden of disability and/or mortality.

Introduction to DWP's Demography Centre of Expertise

Sam Mold & Elliott Larkinson - Department for Work and Pensions

The Department for Work and Pensions is a major user of demographic data. This poster gives an introduction to the work of the Demography Centre of Expertise within DWP, how we help policy makers understand the demographic challenges ahead and how academic research can improve our understanding of these challenges.

Mapping maternal morbidity trajectories from pregnancy to postpartum: Evidence from Mexico

Ursula Gazeley - University of Oxford, Selin Köksal - LSHTM, Orsola Torrisi - UC3M; LSE, Signe Svallfors - Stockholm University

Recent conceptualisations of maternal health emphasise its nature as a life course process, calling for greater understanding of how women experience trajectories of morbidity and how different conditions interact across pregnancy and the postpartum period. However, evidence capturing these experiences and their interplay across all stages remains limited.

Using three waves of Mexico's nationally representative National Survey of Demographic Dynamics

(ENADID; 2014, 2018, 2023; $n = 81,977$), we examine trajectories of self-reported morbidity from pre-pregnancy onwards. We focus on direct obstetric conditions (hypertensive disorders of pregnancy (HDP), haemorrhage, infections, delivery, foetal complications), and indirect conditions (metabolic, mental health morbidities). We estimate transition probabilities across ante-, intra-, and postpartum periods and assess co-occurrence between morbidity types across stages.

Direct obstetric morbidity in the antepartum period is highly prevalent, with approximately 80% of women reporting at least one condition, and HDP the most common. Morbidity frequently persists across stages: 51% of women with antepartum HDP report persistence into the intrapartum period, and one third of those with intrapartum HDP report persistence postpartum. Co-occurrence is substantial. Conditional on HDP at any stage, 28% of women experience foetal morbidity and 33% delivery complications. Among women with haemorrhage, over half also experience HDP and 66% report postpartum depression. Overall, 47% of women experience more than one morbidity type. Preliminary regression results highlight consistent associations between morbidity trajectories and pre-pregnancy health, residence, indigeneity, maternal age, and social security.

These findings point to missed opportunities for intervention and underscore the need to address multimorbidity in maternal care.

Monitoring cross-border refugee flows from Sudan using digital trace data

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Forced displacement has emerged as one of the most rapidly expanding forms of human mobility, yet it remains understudied in demographic research. This study explores whether digital trace data (Wikipedia and Google Trends) can serve as an indicator of refugee flows in data-scarce environments, focusing on cross-border displacement from Sudan into Ethiopia.

This study leverages the multilingual structure of Wikipedia to approximate different user populations. I analyse daily view counts between January 2022 and June 2025 for Wikipedia pages dedicated to major cities

in Ethiopia (250,000+ inhabitants), as well as for transit locations specific to the Sudan-Ethiopia migration corridor, across four languages: Arabic (proxy for Sudanese users), Amharic (proxy for Ethiopian users), English (proxy for global interest), and Russian (control language). These data are compared to daily cross-border flows reported by the International Organization for Migration, which monitors key entry points.

Pearson correlation coefficients indicate that Arabic-language Wikipedia page views (log-transformed) are positively associated with refugee inflows (log-transformed), e.g. for Gondar ($r = 0.55$, $p < 0.001$), El Gadarif ($r = 0.53$, $p < 0.001$), Metemma ($r = 0.52$, $p < 0.001$), and Gallabat ($r = 0.47$, $p < 0.001$). This relationship was much weaker or insignificant for the comparison languages (English, Amharic and Russian). Lead-lag dynamics were explored by applying first-order differencing and using vector autoregressive (VAR) models and Granger causality tests. Increases in view counts of Arabic-language Wikipedia pages dedicated to Sudanese transit towns are found to be predictive of border crossings (1-week lead, $p < 0.05$), while for Ethiopian towns the relationship tends to be contemporaneous or with a lag of 1 week. These initial findings indicate that migrants may search for location-specific information before and during their journey, as well as after arriving at their destination.

This research is ongoing and will incorporate additional digital sources - particularly Google Trends - to capture a broader scope of information-seeking. Integrating multiple digital indicators with official displacement data may help to improve the temporal sensitivity and reliability of monitoring systems, contributing to a more comprehensive understanding of forced migration in conflict settings.

Multimorbidity profiles and mortality inequalities among migrant-origin populations in Sweden: A latent class analysis

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Background

Multimorbidity, defined as the coexistence of multiple long-term conditions, is increasingly common and unevenly distributed across populations. It is also a predictor of mortality. Migrants in high-income countries often exhibit distinct disease patterns shaped by selection before migration, exposure during migration, and lived conditions after arrival. Health inequalities among migrant populations are not solely the result of individual behaviours or biological risk factors but are produced through broader structural contexts that shape how diseases cluster within individuals. Despite extensive register-based research in Sweden, most studies overlook how conditions cluster within individuals in ways that reflect shared social and structural exposures. Latent class analysis (LCA) provides a data-driven approach to identify unobserved subgroups with shared morbidity profiles, allowing comparison of disease clustering between migrant and Swedish-born populations.

Methods

We used nationwide Swedish register data to derive multimorbidity profiles among adults resident in Sweden at a single index date (2022). Chronic conditions were identified from inpatient and specialist outpatient care records prior to the index date. Latent class analysis (LCA) was used to identify multimorbidity profiles and we assessed measurement invariance by nativity group-specific LCAs. Finally, class membership was linked to all-cause mortality using survival analysis.

Conclusions

Characterising these patterns provides insight into how social position and migration-related processes become embodied in health and offers an empirical foundation for targeted prevention and healthcare planning.

Natural regions of inequality? Rethinking caste, space, and women's access to maternal care in India **Apoorva Nambiar & Sylvie Dubuc - University of Strasbourg, France**

Despite substantial improvements in maternal health indicators in India, inequities in antenatal care (ANC) utilisation persist across regions and social groups. Conventional demographic research often treats caste, geography, and socioeconomic status as independent predictors, overlooking how these factors intersect to

shape maternal health behaviours. This study examines how geographically embedded caste configurations influence ANC uptake in Odisha- a state characterised by pronounced regional disparities and diverse social stratification.

Using the Indian Demographic Health Survey (2019-21), this research develops caste-region clusters capturing the spatial concentration of social groups through disaggregated caste data. Rather than treating caste as a uniform category, this approach conceptualises social hierarchy as geographically situated, reflecting historical settlement patterns, economic structures, and access to state institutions.

Logistic regression reveals significant heterogeneity in ANC uptake across clusters, with paradoxical patterns in which historically disadvantaged groups demonstrate higher odds of service utilisation once contextual factors are accounted for (northern: OR=1.48, $p=0.003$; southern: OR=1.64, $p<0.001$). These findings suggest that regional health system performance, outreach intensity, and local social dynamics may mediate traditional caste disadvantages.

Beyond regression, the study applies Coincidence Analysis (CNA), used for the first time on DHS data, to identify combinations of conditions (education, media exposure, poverty, healthcare access, among others) or “causal bundles”, that produce ANC uptake through distinct region-specific pathways. This configurational perspective reveals equifinality across caste-region clusters, moving beyond additive models of health determinants.

The findings demonstrate that caste-based disparities cannot be understood without regional context, that configurational methods offer powerful complementary tools for population health research, and that effective maternal health policy must be place-sensitive and structurally informed

Obesity and the experienced cultural, economic, and climate variations among immigrants to high-income countries: An umbrella review of the literature

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Objective: Obesity is a growing global public-health concern, particularly among immigrants to high-income countries. This umbrella literature review synthesizes evidence from systematic reviews to explore the multifactorial cultural, socioeconomic and environmental determinants of obesity and weight gain among immigrants to high-income countries.

Design: A systematic search of PubMed, Web of Science, and Scopus was conducted from January 2015 to November 2025 to identify systematic reviews and meta-analyses examining the impact of cultural, socioeconomic, and environmental factors on obesity among adult immigrants (i.e., economic, students, and refugees) to high-income countries.

Setting: 33 reviews were included and thematically synthesized under four domains: physical climate and physiological changes, socioeconomic stressors and psychological mediators, cultural factors, and methodological quality – rated using the AMSTAR tool.

Results: The review found consistent evidence linking longer duration of residence and higher levels of acculturation with increased obesity risk. Socioeconomic disadvantage, food insecurity, and psychological stress—particularly acculturation stress—were key mediators of weight gain. Less sunny colder climates impacted on weight gain indirectly through limiting physical activity and accessibility to traditional-healthy diet outlets. Cultural dietary transitions and intergenerational differences further influenced obesity trajectories. Methodological quality varied, with only six reviews providing meta-analysis pooled estimates of obesity and being rated as high to moderate quality.

Conclusions: Obesity among immigrants is shaped by intersecting cultural, socioeconomic, environmental and physiological factors. Public-health strategies must adopt culturally sensitive approaches that address structural barriers and support healthy transitions post-migration. Future research should emphasise longitudinal, intersectional, and climate-tailored studies to inform targeted interventions.

Occupation-industry gender composition and earnings premia: Cross-national evidence from France and Germany

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Occupational sorting of women and men into different jobs remains a central driver of the gender earnings gap. The devaluation thesis holds that occupations attract lower pay premia as they become more feminized — yet evidence is typically limited to single-country settings and cannot distinguish whether lower premia reflect job content or gender composition per se. This study provides cross-national evidence on how occupation-industry earnings premia relate to gender composition, using harmonized administrative data for France and Germany spanning 1975–2021.

We draw on two large-scale administrative datasets: the DADS-EDP panel for France and the Sample of Integrated Labour Market Biographies (SIAB) for Germany, harmonized to comparable occupation (ISCO-08 sub-major groups) and sector (NACE Rev. 2) classifications, yielding 903 occupation-industry cells in each country. We estimate occupation-industry earnings premia net of age, education, and year effects, and relate these to the female-to-male gender ratio within each cell.

Our analysis proceeds in four steps. First, we describe cross-sectional associations between gender composition and earnings premia in each country. Second, we estimate gender-specific premia to test whether women and men face different returns depending on the feminization of their occupation-industry cell. Third, we track how changes in feminization over time relate to changes in premia within countries. Fourth, we implement a novel cross-country same-job test: for identical occupation-industry cells, we examine whether the country where a cell is more feminized exhibits lower premia, holding job content constant.

Preliminary results confirm negative associations between feminization and earnings premia in both countries, with the cross-country same-job test providing particularly clean identification.

Residential segregation of the urban elite: Reconstructing the spatial distribution of Madrid's upper classes in the early twentieth century

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Research on urban residential segregation has overwhelmingly concentrated on working-class populations, leaving the spatial organisation of elite groups largely neglected. This paper addresses that gap by reconstructing the residential geography of Madrid's political, institutional, and nobility elites during a period of intensifying urban expansion and social transformation, and examining the spatial distribution, residential clustering, and indicators of segregation characterising these groups.

The primary source is the *Guía-Directorio de Madrid y su provincia* (1924), known as the Bailly-Baillière, a comprehensive city directory recording the professional affiliations, social rank, and residential addresses of Madrid's elite population across five thematic indices. Given the source's scale (approximately 1,000 pages), data extraction proceeds through an automated pipeline combining large-language-model OCR and fuzzy record linkage, producing a structured prosopographical dataset of individuals with known home addresses. Residential entries are subsequently georeferenced against the contemporary street network of Madrid to generate spatial coordinates enabling GIS-based analysis.

The analysis distinguishes three elite subgroups — the institutional-professional class, the diplomatic corps, and the titled nobility — and examines their residential clustering, spatial overlap, and degree of segregation relative to the broader urban population. The granularity of the linked dataset — recording individual-level residential addresses alongside professional rank and social affiliation — permits analysis at the street and neighbourhood level, enabling a reconstruction of intra-elite spatial differentiation alongside the broader pattern of elite concentration across the city.

By situating these historical patterns within Madrid's present-day urban fabric, the study identifies processes of continuity and rupture in elite residential geography, contributing to the quantitative history of urban social stratification in early twentieth-century Spain.

The effect of one-off and regular tobacco tax increases on disparities in infant health outcomes in Finland, from 2009 to 2018

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Maternal smoking during pregnancy remains a major public health challenge in Europe, with serious long-term consequences for maternal wellbeing and infant health. Smoking during pregnancy restricts oxygen to the foetus, causing the heart to work faster and exposing it to harmful toxins. Smoking in women is negatively correlated with age and strongly socially patterned by education, with substantial differences by level of educational attainment and qualification type.

Understanding whether one-off and regular tobacco taxation increases improve birth health outcomes and reduce educational disparities in birth health is critical. Finland implemented one-off tobacco tax increases beginning in 2009; this was later followed by sustained, above-inflation annual tobacco tax increases beginning in 2012. Our study evaluates the impact of these increases (2009–2018) on birth health and infant health outcomes, and examines whether the effects differed by maternal education and age.

We use linked administrative data from the Finnish Medical Birth Register and the Yearly Register of Education, covering all singleton births conceived between January 2000 and December 2018. Interrupted time-series analysis was used to estimate immediate (level) and long-term (trend) effects of tax increases.

The first tobacco tax increase in 2009 was not associated with an overall improvement in birth health outcomes. However, initial results suggest that the sustained tobacco tax increases implemented between May 2012 and December 2017 were associated with reductions in all birth health outcomes. Reductions were largely driven by decreases in smoking in early pregnancy (additional 0.089 percentage points per month post-intervention).

The mental health of young people in UK – explorative study on the self-care practices of the millennial generation using poetic inquiry

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Background

Millennials are a distinct generation which are culturally dissimilar to the previous generations. There is both tension in the literature on their ability to self-care and a gap on what their self-care practices can mean. This study examined their self-care practices and made sense of them.

Research Question

What are the mental health practices of the millennial generation in UK?

Method

Poetic inquiry, a creative methodology, was utilised to relook at the self-care practices of the millennial generation. Poetic inquiry rooted in subjectivity and expressed using language, reflexivity, and metaphor helped to capture the nuances of participants experience that are lost in prose-based study.

Twelve young people aged 18-29 years (6 males and 6 females) participated in the study. They provided digital theme boards and written stories on their self-care practices. These graphic and textual data were collapsed into found poems. The found poems were inductively analysed using the thematic analysis approach.

Findings

The participants self-cared through engaging in Pleasure-Seeking Behaviour; forming friendly bubbles; involvement in spirituality, and bonding with their parents.

The pleasure-seeking behaviour of young people has self-care value and might not be necessarily driven by narcissism. Social networking with friends helps them in stress management. Spirituality offers health and wellbeing benefits to them. The millennials hold strong family values and draw mental health benefits from parental bonding.

Conclusion and Implication

The study provides insight into the self-care practices of the millennials. Their care plan needs to incorporate pleasurable activities, spirituality, parental, and peer to peer support.

Trends and distributions of child health and maternal health in 41 LMICs from 1986 to 2022

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How have child and maternal health jointly developed over time in different low- and middle-income countries (LMICs)? Previous literature often focuses on purely socioeconomic measures, potentially underestimating total levels of inequalities, since family and maternal factors also contribute to their persistence. Using Demographic and Health Survey (DHS) data on 41 countries between 1986 and 2022, I study the concentration of health and mortality in families. Height is used to measure health in the maternal generation, while under-five mortality and stunting are used in the child generation. Maternal height has been stagnating in several LMICs in Sub-Saharan Africa, while child mortality and stunting prevalence have been decreasing over the past few decades. This development suggests a divergence in their trends. While an intergenerational association between maternal and child health has been found almost universally, its long-term pattern has yet to be fully analyzed. I use concentration curves and Wagstaff's concentration indexes to analyze the distribution of child health, using maternal height as the ranking variable. Previous studies found that when mortality decreases, children of disadvantaged women catch up with the average population: this study investigates how this reflects on the under-5 mortality distribution; do the concentration curves get closer to the equity line? As for stunting, since maternal height is a significant predictor, I expect an increasing rate of stunting among shorter mothers, as declining death rates lead to stronger survival among shorter children. Preliminary results conducted on Cameroon and Ethiopia seem to fit with these hypotheses.

Unravelling inequalities in kidney mortality in Mexico. From subnational inequalities to socioeconomic gradients in mortality

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Chronic kidney disease (CKD) is a major global public health concern. It is the third fastest growing cause of death worldwide and is projected to become the fifth leading cause of death by 2040. In Mexico, CKD-related mortality increased by 102 percent and years of life lost by 115 percent between 1990 and 2017. Despite this sharp rise, little is known about socioeconomic gradients and regional disparities in kidney mortality. This gap is important because kidney mortality may be underestimated, as it is often recorded as a contributing rather than underlying cause of death. In addition, CKD treatment is costly, and Mexico lacks universal health care, resulting in highly stratified access to medical services, which may contribute to mortality inequalities. This study has two objectives: to describe trends in kidney mortality at the subnational level from 2000 to 2023 and to assess educational inequalities in kidney mortality over the same period. We combine census data from 2000, 2010, and 2020, national surveys from 2005, 2015, and, if available, 2025, and death records from the National Institute of Statistics and Geography. We analyze mortality trends by sex and state and use segmented regression to identify changes in trends and their relationship to regional disparities. Educational attainment, categorized as elementary school, high school, and university, is used to measure socioeconomic position. Inequalities are assessed using the slope index of inequality and the relative index of inequality. Findings will inform policies aimed at reducing kidney mortality disparities in Mexico.

When politics aligns: The effect of party-in-power congruence on fertility in the UK

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We investigate how political context shapes fertility behaviour in the United Kingdom. We argue that alignment between individuals' political identity, and whether one's preferred party wins elections and governs, plays an important role in shaping narratives about the future and, consequently, decisions related to family formation. Using panel data from the UK Household Longitudinal Study (UKHLS, 1991–2019), we examine how alignment between individuals' partisan preferences and the ruling party affects the monthly probability of conception. Applying mixed-effects complementary log–log regression models with standard demographic and socioeconomic controls, we find that Conservative Party supporters are more likely to conceive a child during periods when their party is in power, while no such effect is observed among Labour voters. A difference-in-differences analysis of all general elections between 1991 and 2019 further shows

that the 2010 election, which returned the Conservatives to power, was followed by an increase in conception likelihood among Conservative supporters compared to the pre-election period, whereas no comparable effects were found for other elections or the 2016 Brexit referendum, or for Labour voters. These findings suggest that political alignment between citizens and government is one of the factors influencing fertility behaviour. The results contribute to the growing literature on political polarization and demographic decision-making, highlighting the role of subjective expectations regarding the domestic political situation and stability, and identity-based narratives in shaping reproductive behaviour.