

Multigenerational Effects of Smallpox Vaccination

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Motivation

- 1 Intergenerational health transmission is a significant barrier to overall socioeconomic mobility [Björkegren et al. 2022](#), [Halliday 2019](#).
- 2 Recent studies have shown that interventions can effectively reduce health persistence [East et al. 2023](#), [Mazumder et al. 2023](#).
- 3 Vaccination has the potential to benefit future generations due to *non-specific* vaccine effects [Benn et al. 2023](#).

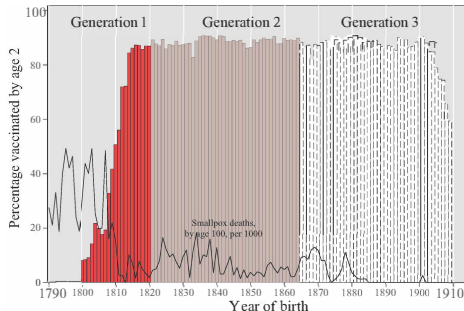


Our Contribution

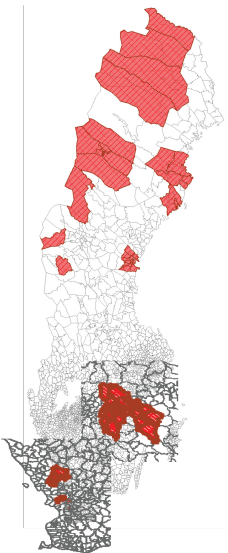
- **How does childhood vaccination impact longevity and occupational status across three generations?**
- We explore **a smallpox vaccination campaign** in Sweden in 1801, applying an IV design with a shift-share formula as an instrument.
- **Results** indicate that the vaccine's positive effects persist through the third generation, driven equally by a higher likelihood of personal vaccination and epigenetic factors.

Smallpox Vaccination in Sweden

- 1 *Variola major* had a case fatality rate of 55% among children and caused lifelong complications (e.g., blindness and CNS problems).
- 2 **1801**: Free vaccination began across Sweden, targeting children under age 2.
- 3 **Church musicians and church assistants** who were not typically involved in public health duties administered the vaccinations.



Methodology and Data

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- 1 Our sample includes 141,067 individuals born in 1790-1910 across 70 parishes, followed until death, outmigration, or age 100 (CEDAR 2022, SEDD 2021).
 - 2 We use a shift-share IV approach (Borusyak & Hull 2023, Borusyak et al. 2022).

2SLS for Generation 1:

$$\text{Vaccine}_i = \alpha C_{p(t-1)} x C_{rt} + \eta_t + \gamma_p + \delta_{rt} + X_{i(p)t} + \epsilon_i$$

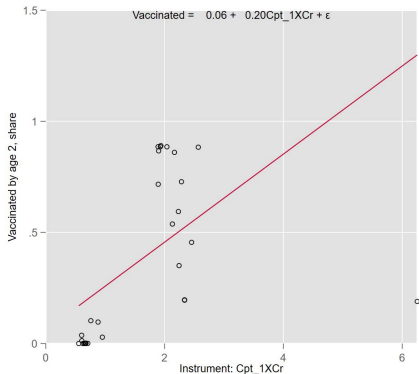
$$Y_i^{G1} = \beta^{G1} \widehat{\text{Vaccine}}_i + \eta_t + \gamma_p + \delta_{rt} + X_{i(p)t} + \nu_i$$

2SLS for Generations 2 and 3:

$$Y_{ji}^{G2(G3)} = \beta^{G2(G3)} \text{Parent}(\widehat{\text{Grandparent}}) \text{Vaccine}_{ji} + \eta_{it} + \gamma_{ip} + \delta_{irt} + X_{i(p)t} + \xi_{ji}$$

where $C_{p(t-1)} x C_{rt}$ is a shift-share formula: C is the number (ratio) of church musicians/assistants.

First-stage estimates



| | Vaccine |
|--|----------------------|
| $C_{p(t-1)} \times C_{rt}$ | 0.129*** (0.0224) |
| Kleibergen-Paap F-statistic | 52.999 |
| Anderson-Rubin F-statistic | 3.290 |
| Individuals | 32,120 |
| Parish of birth FEs | Yes |
| Year of birth FEs | Yes |
| Region of birth x Year of birth FEs | Yes |
| Families' Xs x Year of birth FEs | Yes |
| Parish of birth Xs x Year of birth FEs | Yes |

*** $p < 0.01$, ** $p < 0.05$, * $p < 0.1$

Generation 1: OLS estimates

| | Remaining years lived at age 2 | Disability-free years lived at age 2 | Occupational score, max after age 15 |
|----------------|-----------------------------------|---|---|
| Vaccine | 12.171*** | 11.766*** | 2.436*** |
| | (1.911) | (2.232) | (0.201) |
| R sq | 0.086 | 0.085 | 0.044 |
| Individuals | 32,120 | 30,930 | 22,823 |

*** $p < 0.01$, ** $p < 0.05$, * $p < 0.1$

Generation 1: 2SLS estimates

| | Remaining years lived at age 2 | Disability-free years lived at age 2 | Occupational score, max after age 15 |
|--|-----------------------------------|---|---|
| Vaccine | 11.592** | 11.999** | 5.049** |
| | (4.144) | (4.374) | (2.191) |
| R sq | 0.161 | 0.158 | 0.186 |
| Individuals | 32,120 | 30,930 | 22,823 |
| Parish of birth FEs | Yes | Yes | Yes |
| Year of birth FEs | Yes | Yes | Yes |
| Region of birth x Year of birth FEs | Yes | Yes | Yes |
| Families' Xs x Year of birth FEs | Yes | Yes | Yes |
| Parish of birth Xs x Year of birth FEs | Yes | Yes | Yes |

*** p<0.01, ** p<0.05, * p<0.1

Generations 2 and 3: 2SLS estimates

| | Remaining years lived at birth | Disability-free years lived at birth | Occupational score, max after age 20 |
|--|-----------------------------------|---|---|
| ParentVaccine | 2.204*** | 8.015*** | 1.099* |
| | (0.652) | (2.008) | (0.656) |
| R sq | 0.069 | 0.045 | 0.178 |
| Individuals | 109,112 | 29,748 | 90,294 |
| GrandparentVaccine | 1.057** | 4.262** | -0.715 |
| | (0.497) | (1.886) | (0.445) |
| R sq | 0.187 | 0.031 | 0.084 |
| Individuals | 116,544 | 40,324 | 70,920 |
| Parish of birth FEs | Yes | Yes | Yes |
| Year of birth FEs | Yes | Yes | Yes |
| Region of birth x Year of birth FEs | Yes | Yes | Yes |
| Families' Xs x Year of birth FEs | Yes | Yes | Yes |
| Parish of birth Xs x Year of birth FEs | Yes | Yes | Yes |

*** $p < 0.01$, ** $p < 0.05$, * $p < 0.1$

Mechanisms

- ① **Generation 1:** Impacts arise from both **specific** and **non-specific** effects of the vaccine.
- ② **Generations 2 and 3:** Using causal mediation analysis (Imai et al 2010), we find that **personal vaccination** in childhood and **epigenetic** changes each contribute equally to the observed effects.

Robustness analyses

- 1 Exclusion restriction and monotonicity assumptions are likely to hold.
- 2 No impact from overlapping interventions.
- 3 Mother fixed-effects estimates support the results.
- 4 Bounds tests on smallpox vaccination and placebo treatments shows that unmeasured covariates are unlikely to eliminate the vaccine effects.

Conclusions

- ① Childhood smallpox vaccination significantly boosts longevity and occupational achievements, and these benefits are partially transmitted to the next two generations.
- ② Both non-specific effects of the vaccine and the health behaviors it promotes in parents are important mechanisms.

Thank you!

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