

The Great Divide: Education and Mortality

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Our talk is about death more than life

- As economists, we are more used to discussions of income, employment
- We will talk about income but not our main focus
 - Income can be seriously misleading, especially *average* income, because the distribution of income is positively skewed
 - Mean income in 2023 was \$115,000 (up 75 percent since 1967)
 - Median income in 2023 was \$80,000 (up 40 percent since 1967)
 - Over some periods, if income moves to the rich, mean can go up, while median is flat or falling
- Life expectancy is not like this, and inherently interesting in itself

More on income versus years of life

- Much recent focus on how mean household incomes in the US have done well relative to other rich countries
 - Especially by economists and the economic press
 - *“The American economy has left other rich countries in the dust”* headline in *The Economist* (Oct 14, 2024) is typical
- But income and consumption are of limited value if you are dead
 - Focusing on life and death gives a different take on progress in the US

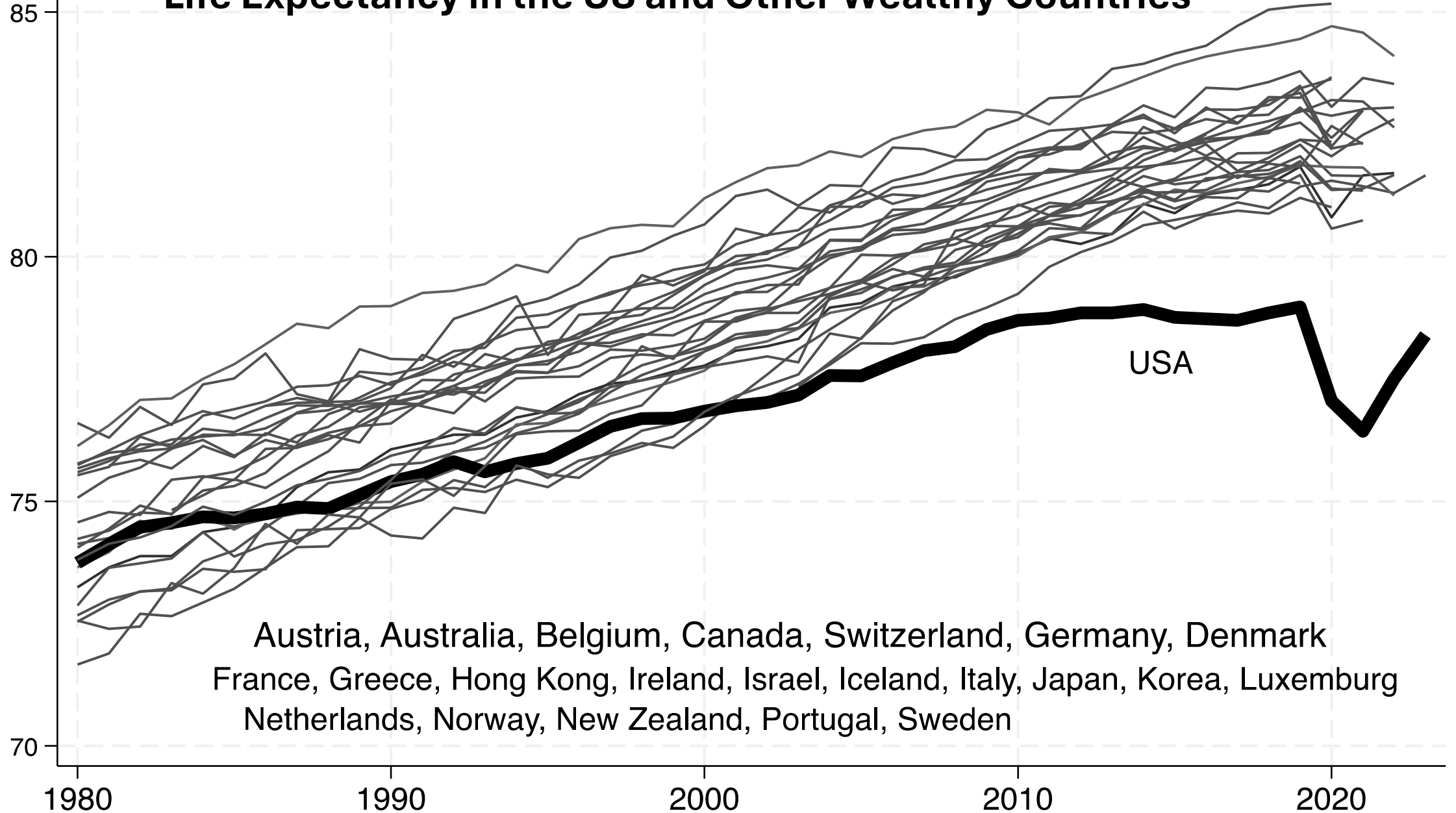
More on income versus years of life

- We argue too that, at least until recently, incomes have not done so well for most of the population
 - Rising inequality is happening, though not best way to think about it
 - Resist focus first on (a) mean, and then on (b) distribution:
(a) is rising, good (b) is a problem but a minor one
- The mean is an increasingly poor indication of typical living standards, given the long positive tail in the income distribution
- Life expectancy is closer to a representative average of years lived for people, and does not suffer from same problems

Life expectancy in US vs other rich countries

- Latest available data for US, 2023
- Other countries to most recent available
- The US has done poorly over several decades, almost uniquely so in rich countries in the world
 - Angus was born in Scotland, which is almost but not quite as bad, but Scotland is a small country, with population about the size of Los Angeles

Life Expectancy in the US and Other Wealthy Countries

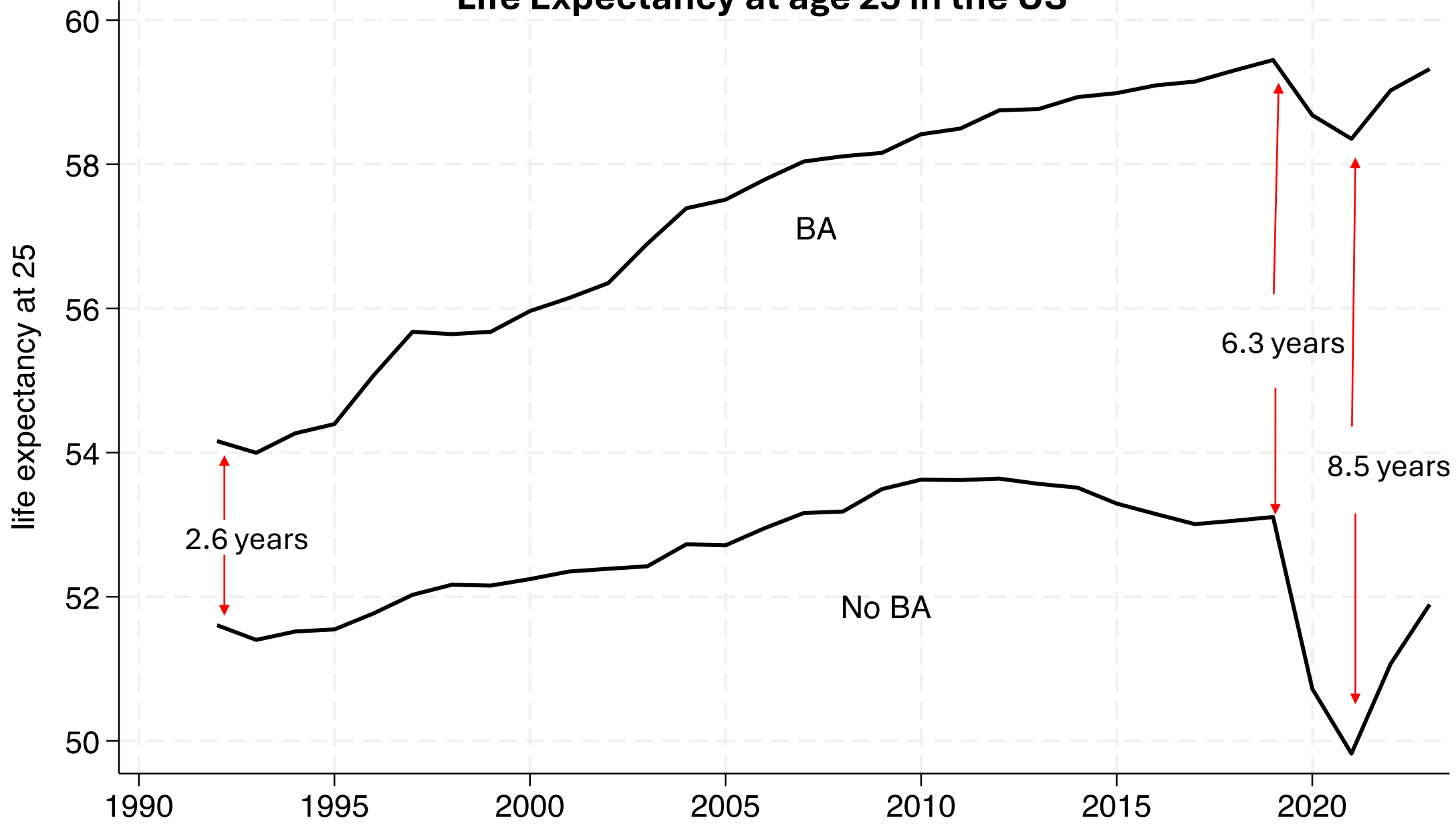


Austria, Australia, Belgium, Canada, Switzerland, Germany, Denmark
France, Greece, Hong Kong, Ireland, Israel, Iceland, Italy, Japan, Korea, Luxemburg
Netherlands, Norway, New Zealand, Portugal, Sweden

Life expectancy by education

- Those with and without a four-year college degree have had very different experiences in the US
 - People with “some college” look more like those with none than those with a 4-year degree
- Switch to LE at age 25
 - Given that we don’t know who is going to go to college
 - This room is NOT representative of the US: overall, about 38 percent of Americans adults have a four-year degree

Life Expectancy at age 25 in the US

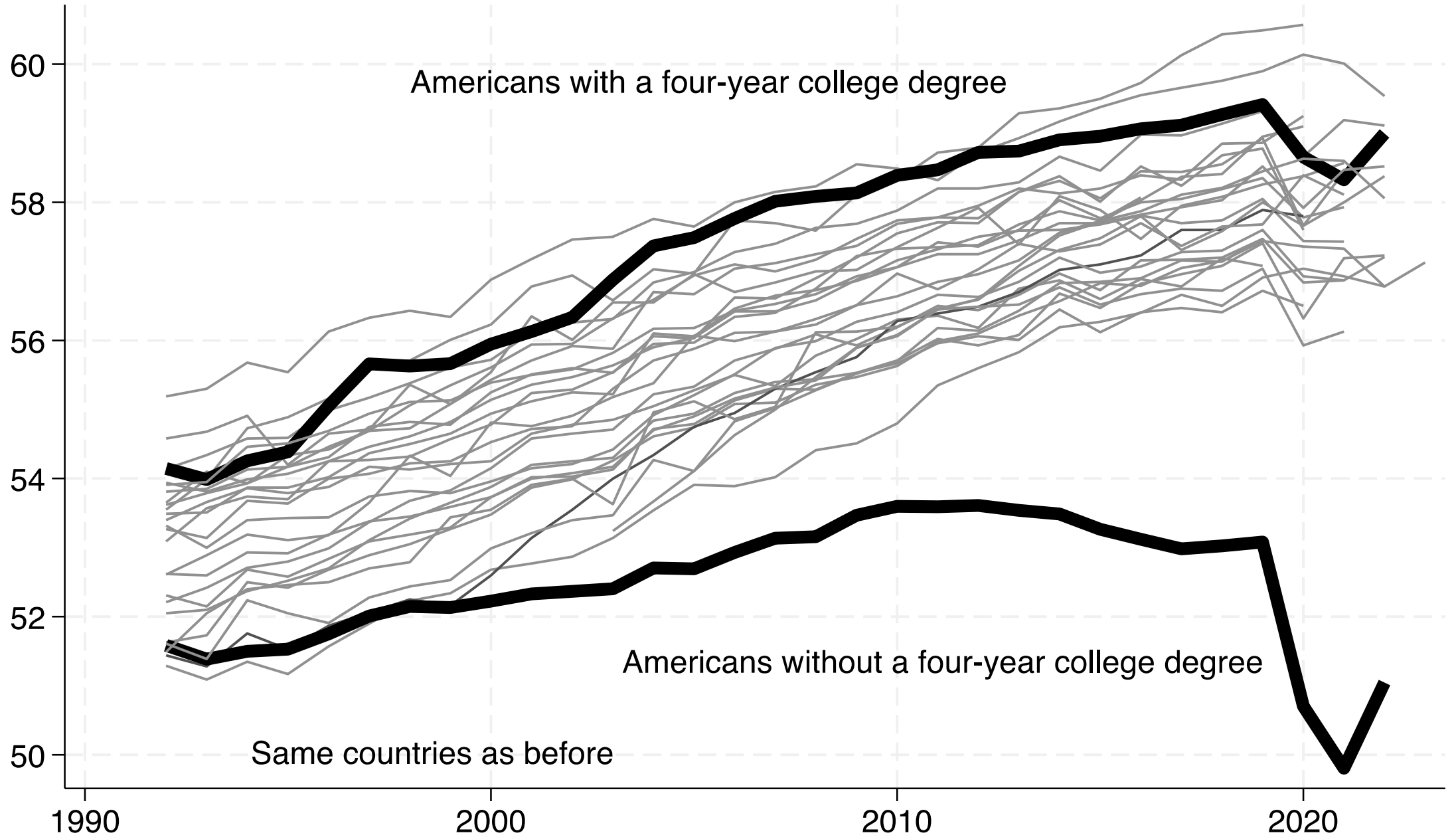


The only precedent for LE moving in opposite directions: eastern Europe post USSR

Comments

- The minority with a BA have done much better
- Even before COVID, even for BA, slowing in growth in recent years
- There is a *reversal* for those without a BA after around 2010
- COVID deaths are very clear
 - Much lower for those with a BA
 - Types of employment, living arrangements, take-up of vaccine
 - Almost complete recovery for those with a BA
 - Not true for those without
- Compare this with other wealthy countries

Life Expectancy at age 25



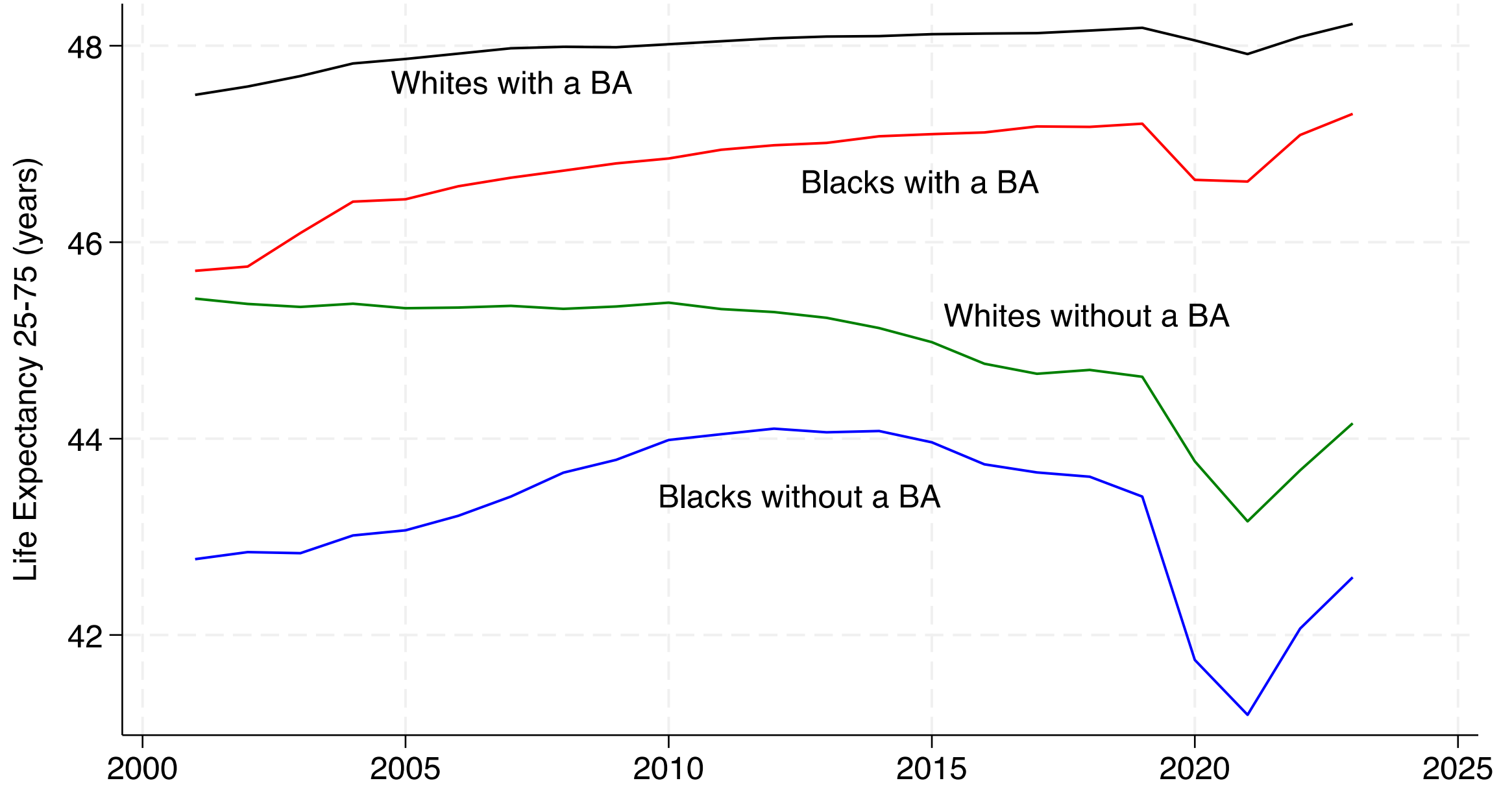
COMMENTS

- Other countries' education-mortality relationships don't look like this
 - Those with more education have higher LE, but LE for less- and more-educated usually move together over time, and gaps are smaller
- Not clear that education itself is responsible for the LE gap in the US
 - Selection into college?
 - We do not find this in our work
 - Medical access/treatment?
 - Gap is rising for causes of death where mortality is falling (cancers), and where mortality is rising (deaths of despair, Alzheimer's) – when medicine is of little help
 - The doubling of the college wage premium? (40% in 1980, 80% today)
 - More rigid class distinctions?

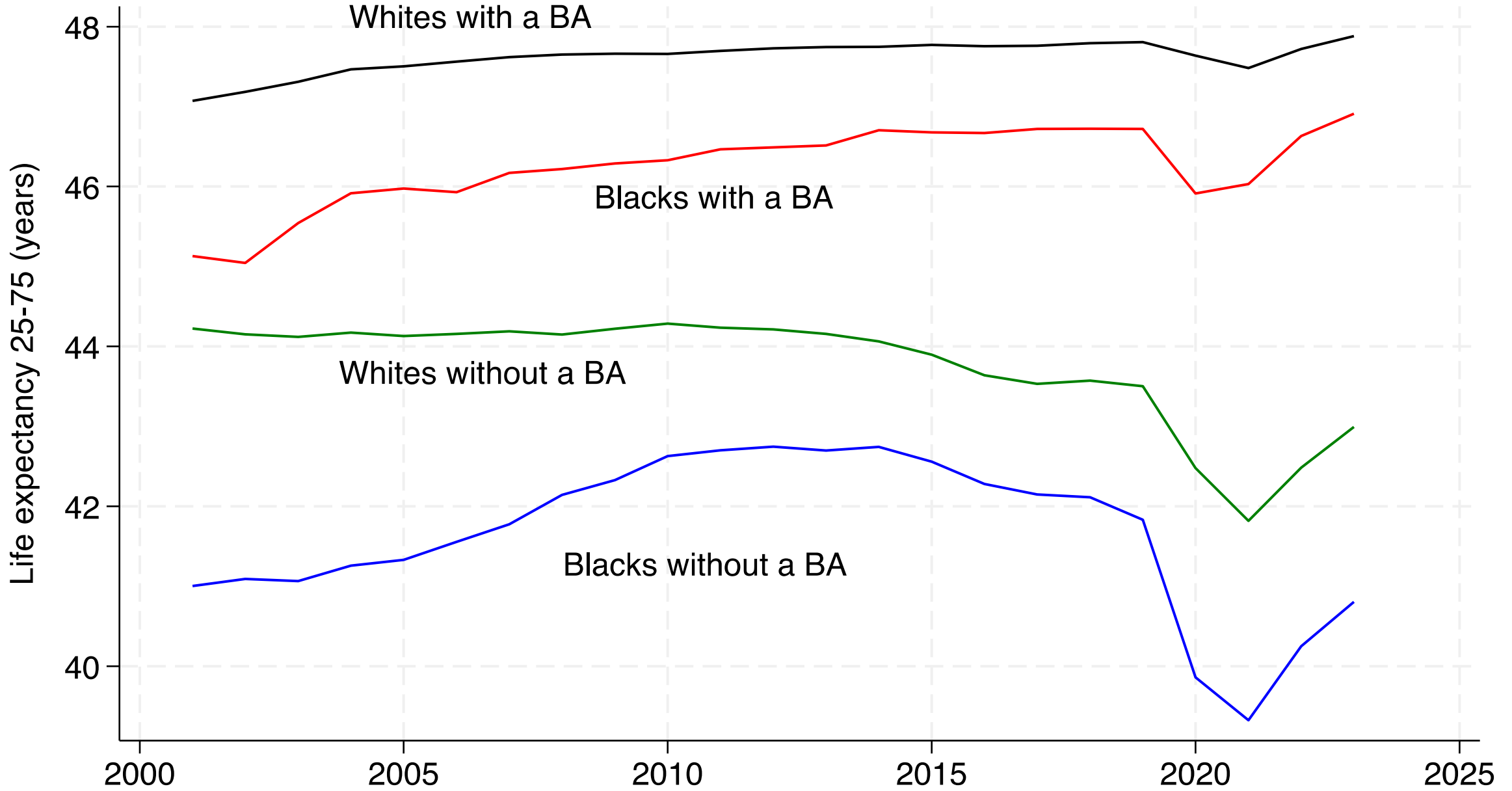
Differences by sex, and by race

- We find similar patterns by race and college degree
 - For technical reasons, we work with expected years of life from 25 to 85
 - Otherwise, we need to make heroic approximations
- Over time, gaps between races *within* educational groups have fallen, while gaps between those with and without a BA have risen for both Blacks and whites

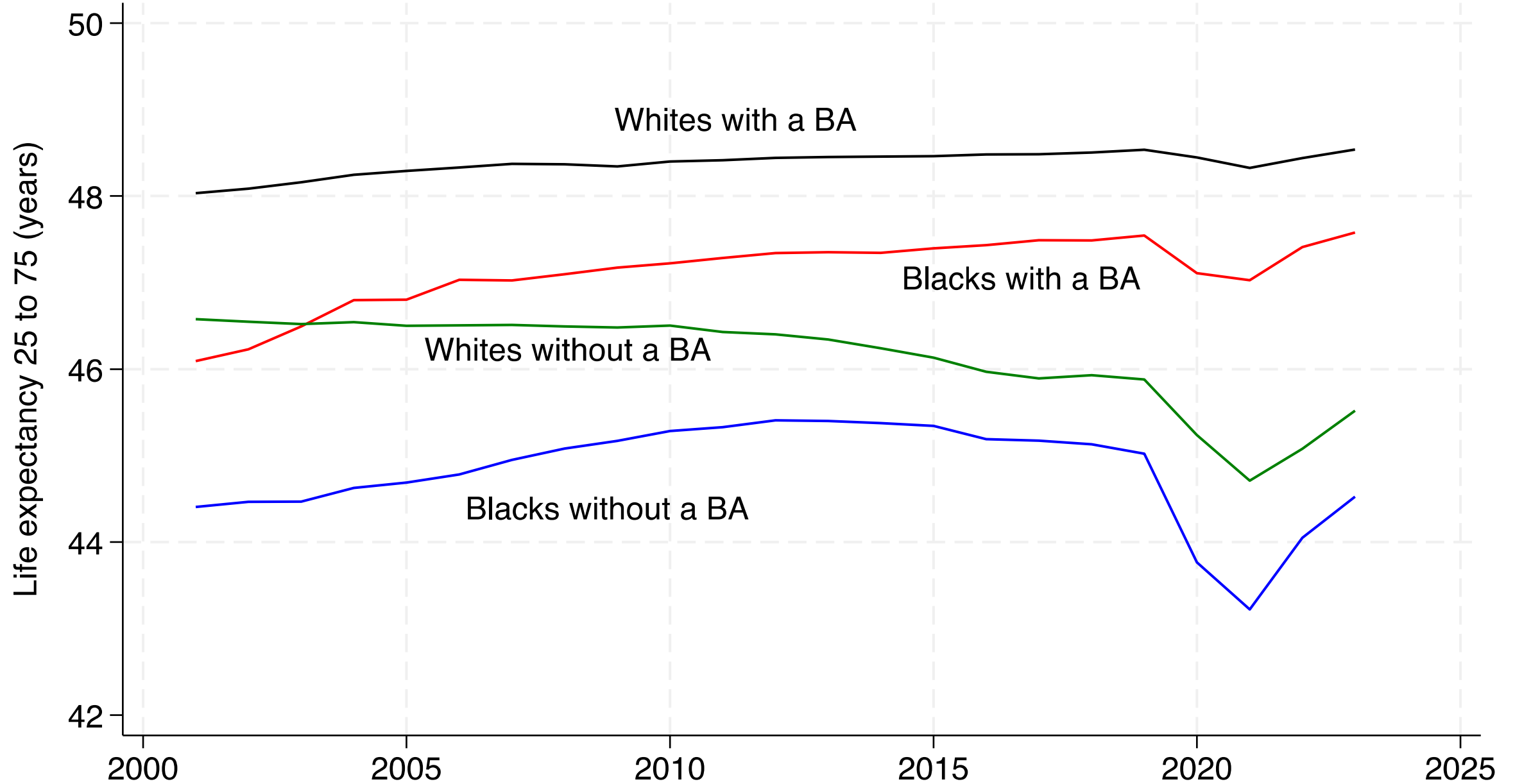
Men and Women



Men



Women



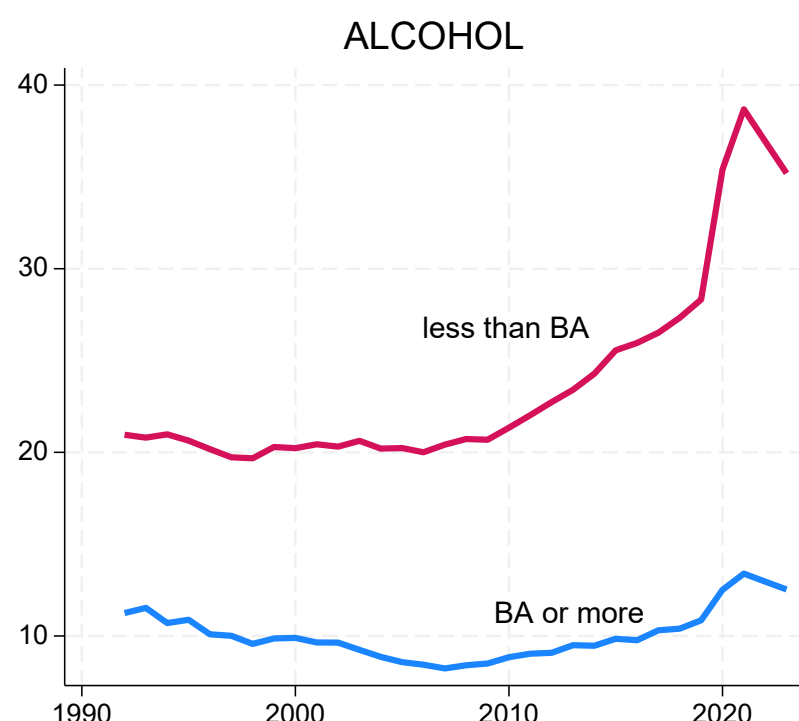
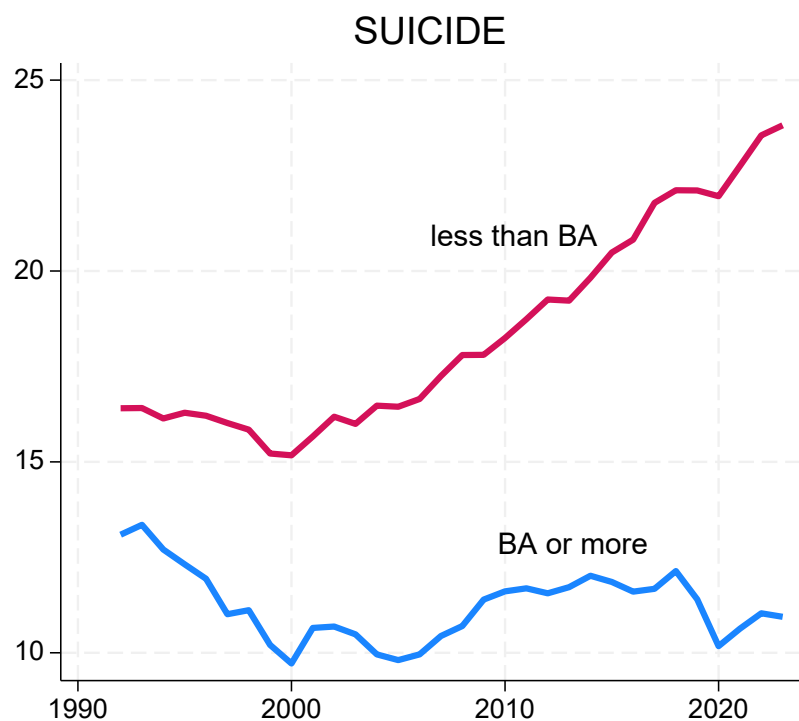
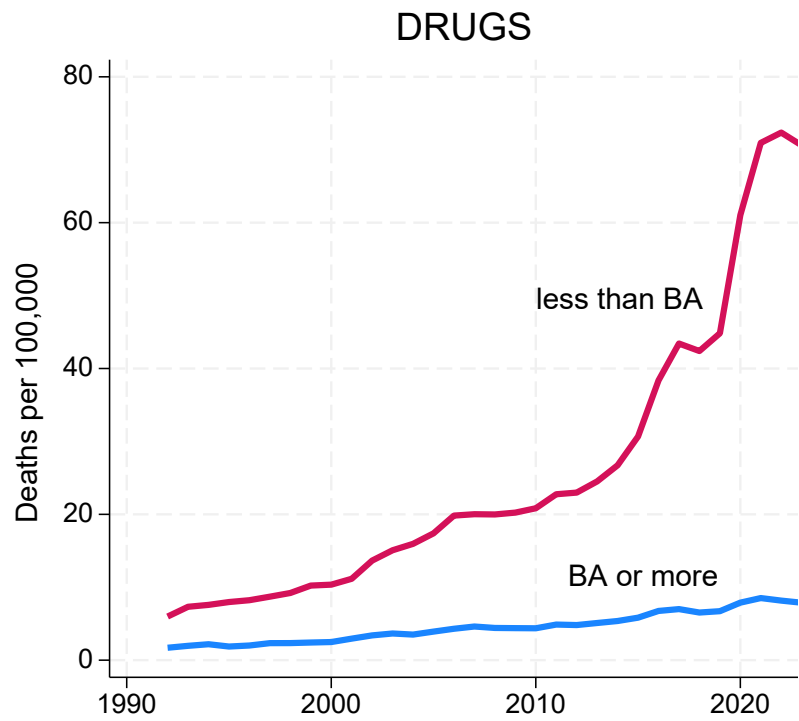
Comments

- Widening gaps by education, for both Blacks and whites
- Blacks without a BA made substantial progress until about 2012, then sharp reversal
 - As is true for whites, cardiovascular disease progress (an engine for LE) stopped
 - Fentanyl entered the (street) drug market in 2013
- COVID was much deadlier for Blacks than whites
 - True for both education groups, but especially for those without a BA
- Even whites with a BA have little gain, and those without have seen two decades of longevity loss

What diseases are causing the education-mortality gaps to rise?

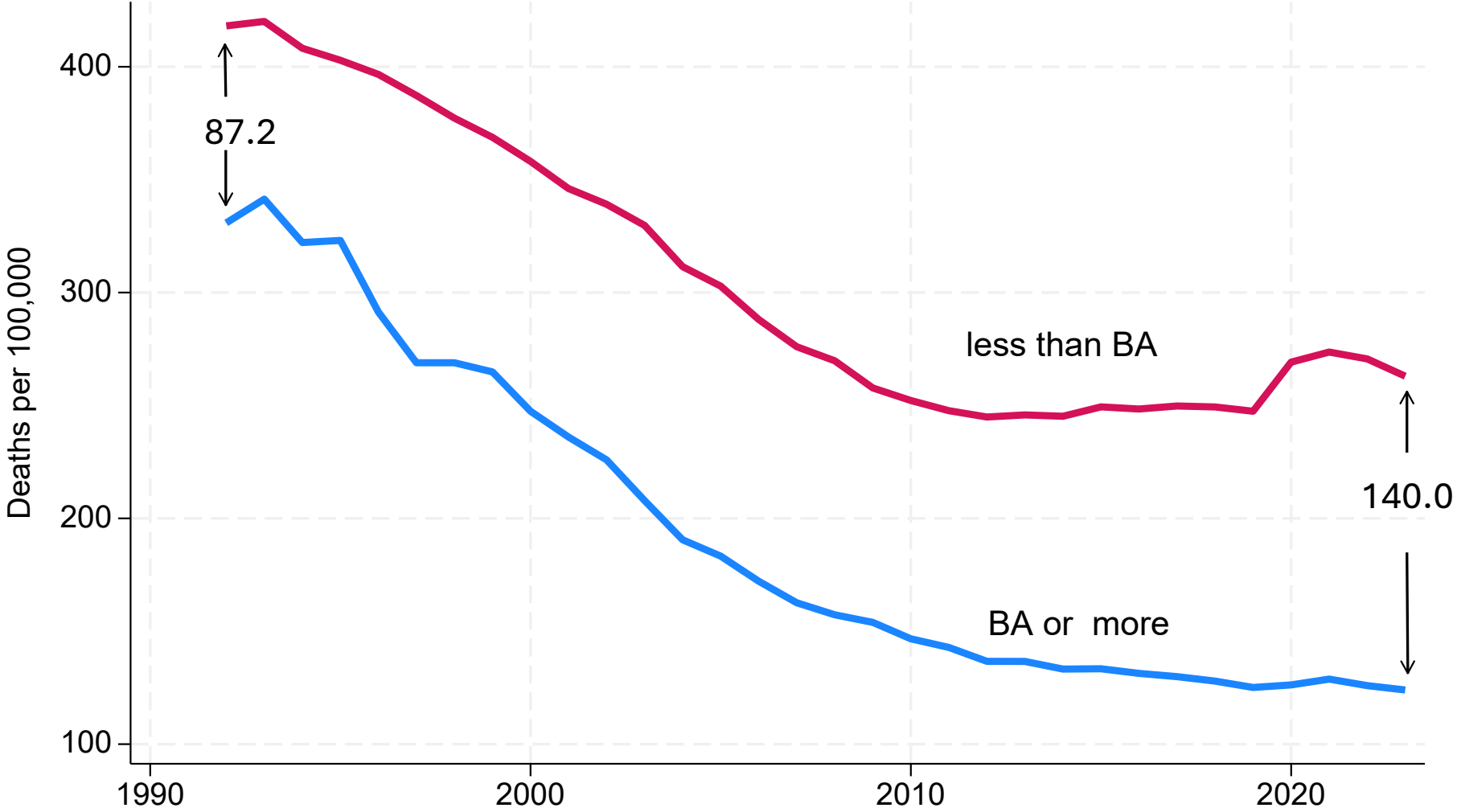
- Deaths of despair (drugs, alcohol, suicide)
 - Limited role for medical system
 - In fact, perverse for drugs at the beginning of the crisis
- Cardiovascular diseases
- Cancers
 - Both amenable to treatment

Drug, suicide and alcohol mortality, men and women, age-adjusted 25–84



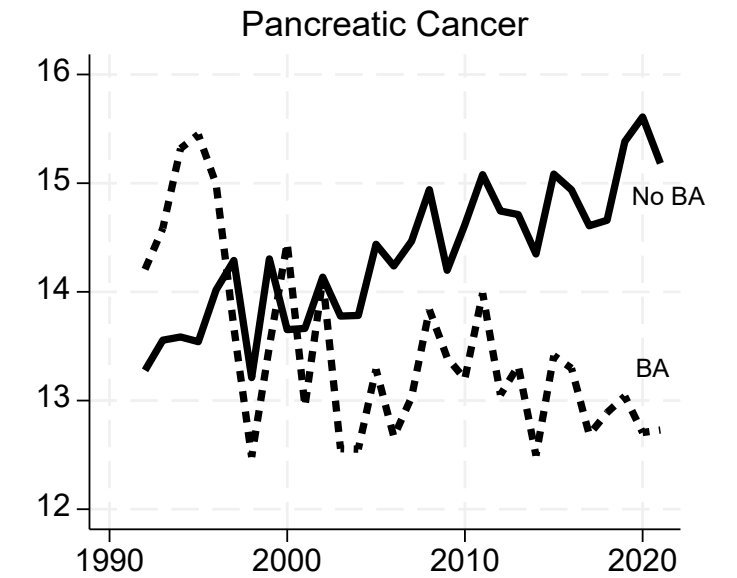
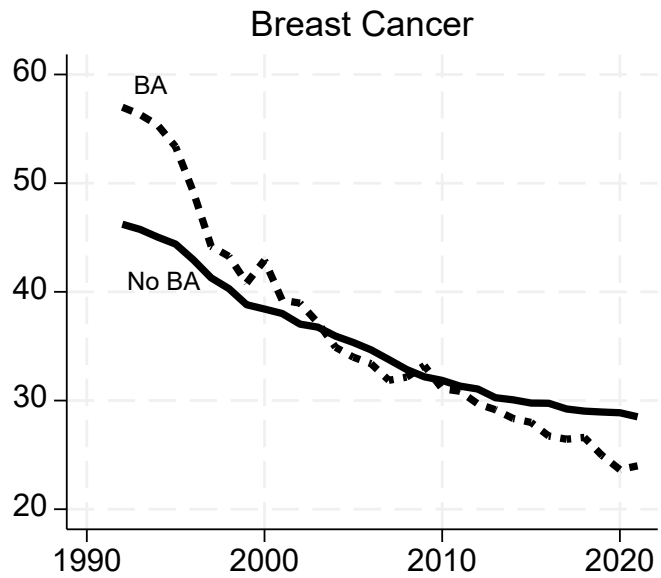
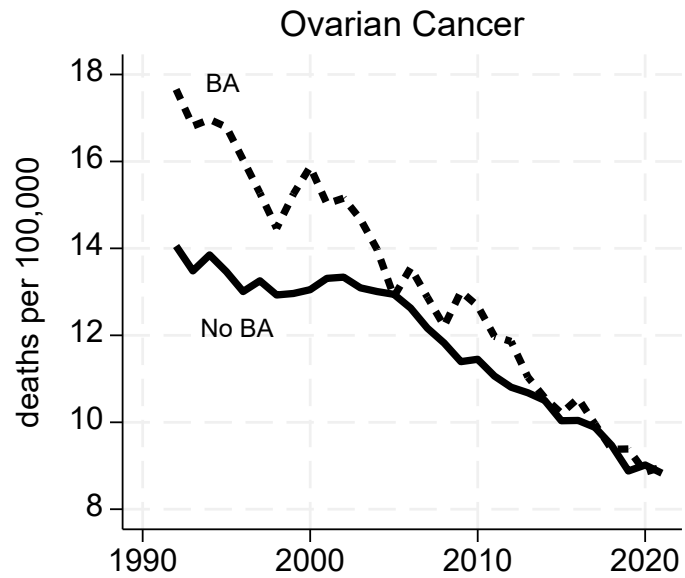
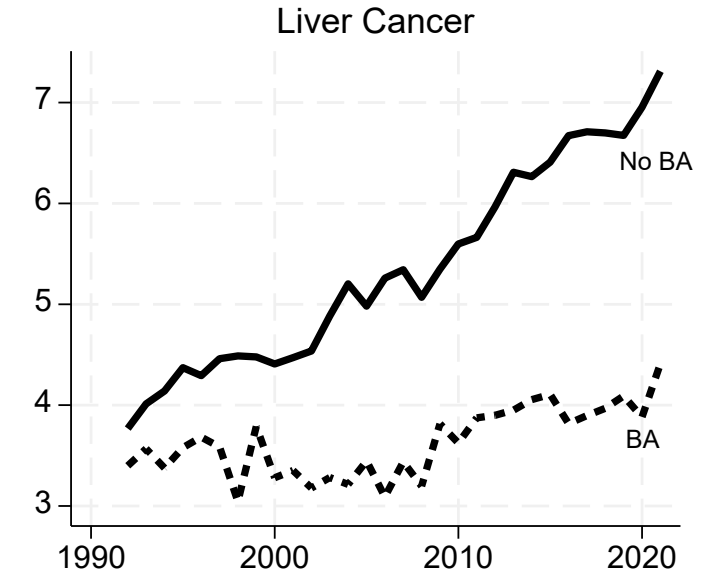
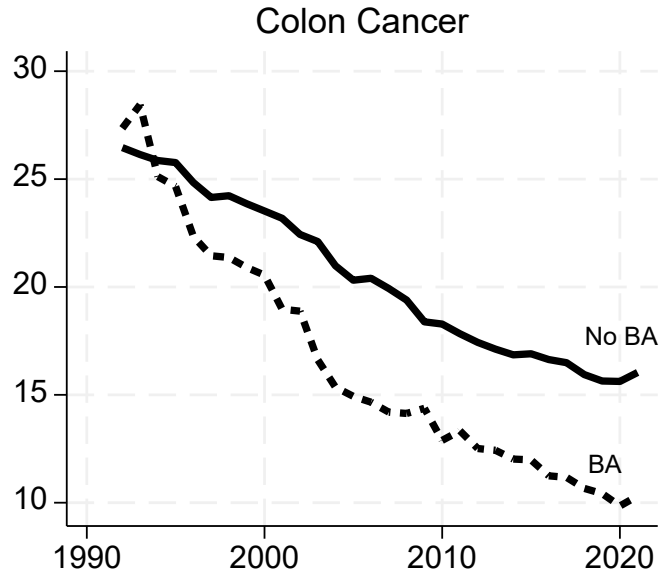
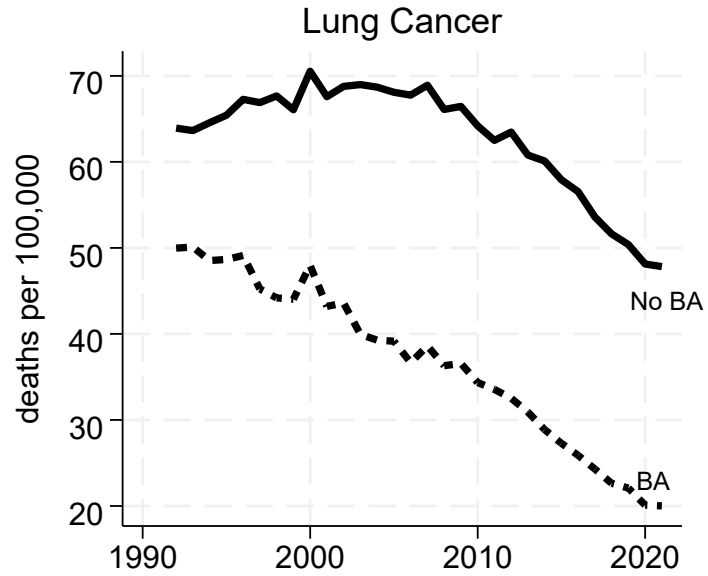
SOURCE: National Vital Statistics 1992-2023

Cardiovascular mortality, men and women, age-adjusted 25–84

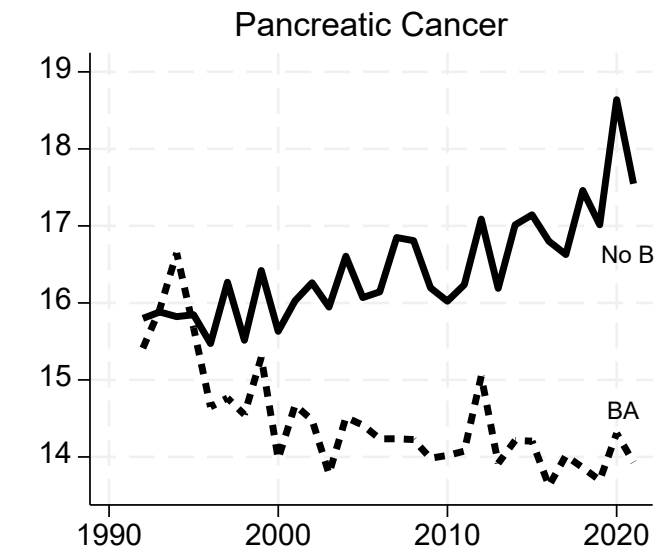
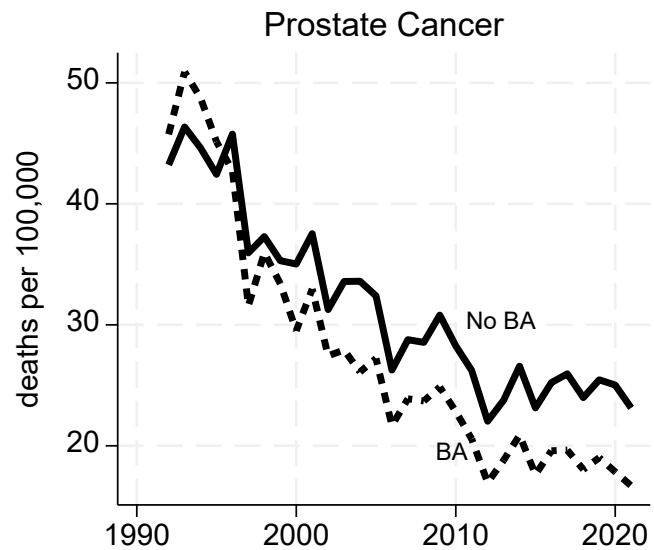
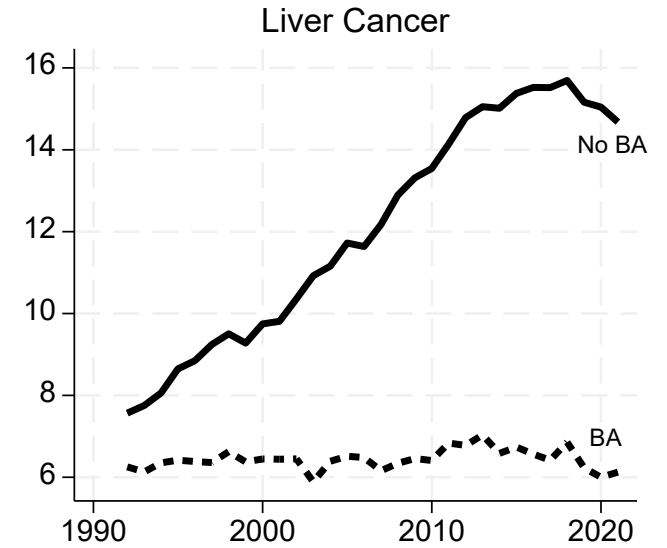
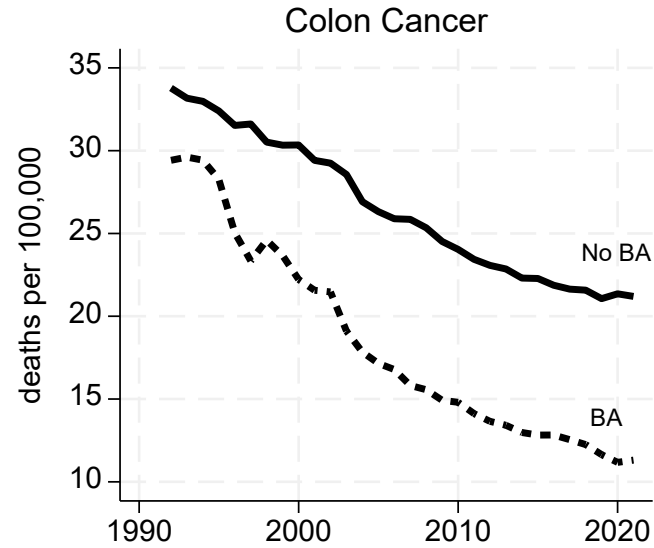
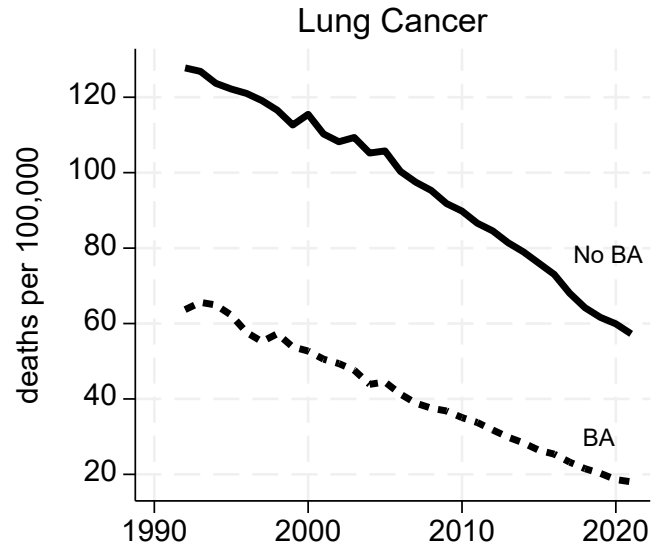


SOURCE: National Vital Statistics 1992-2023

WOMEN



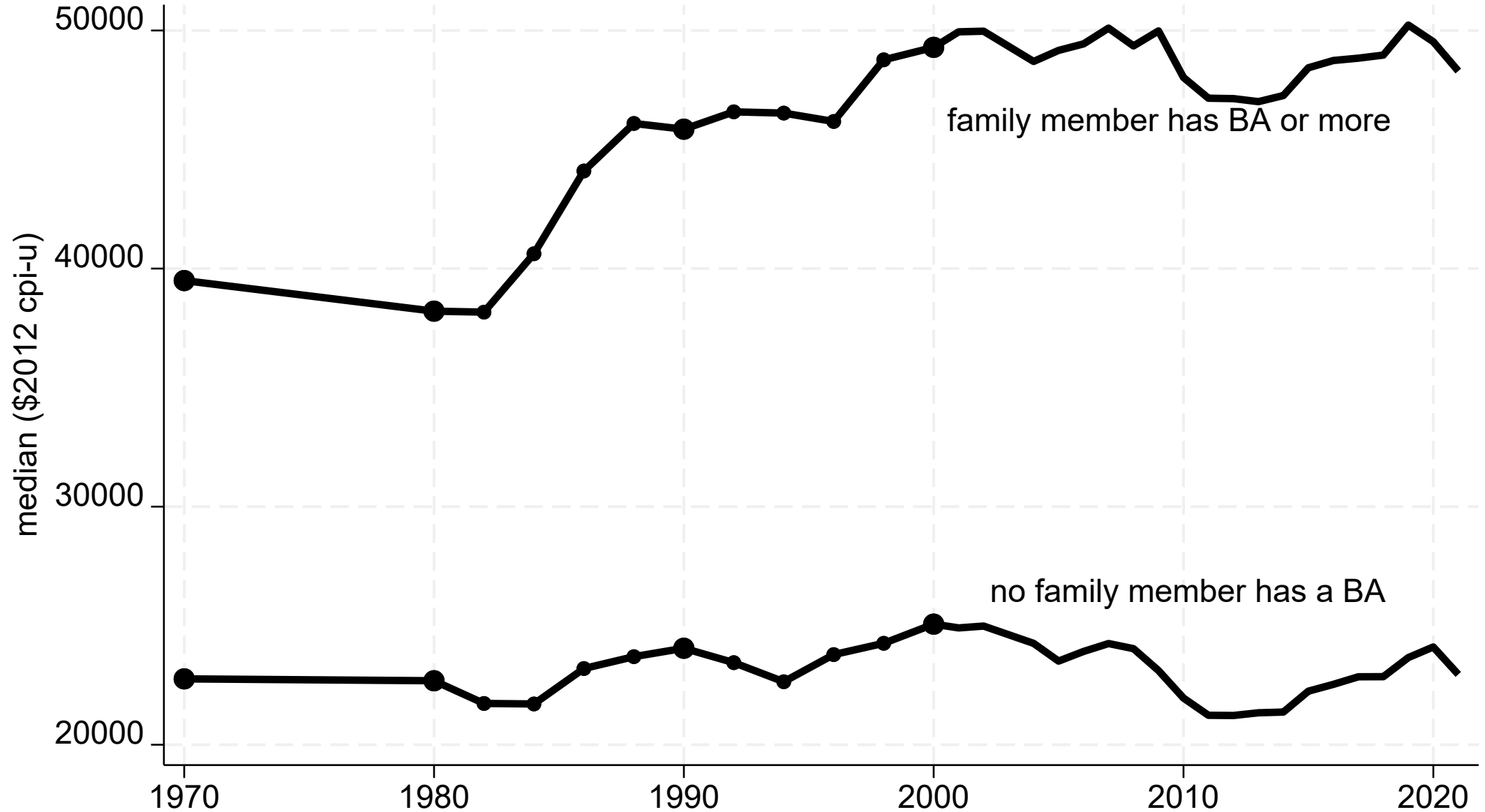
MEN



Good things—including better health—are coming less, if at all, to less-educated Americans

- Starting from a base of birth year 1950, entering labor market around 1970
- **For those without a BA**, steady birth cohort by cohort increases in
 - Suicide, drug and alcohol-related mortality
 - Chronic pain, sciatic pain
 - Difficulty socializing with friends
 - Mental distress
 - Obesity rates
 - Never married, not married
 - **OUT OF THE LABOR FORCE**
 - **LOW REAL WAGES**

Real Family Total Income per Equivalence Unit



SOURCE: US Census (1970,1980,1990,2000), Current Population Survey(1982-88,1992-98), American Community Survey(2001-2021); authors' calculations.

The Great Divide: Education and Mortality

Going to college encourages people to take better care of themselves via what they learn in college and through their peers: peers encourage better diet, more exercise, less substance use, more wellness visits, more screenings

In the US, people with a BA are treated as being of higher status, and status affects health directly, and through interaction with the healthcare system

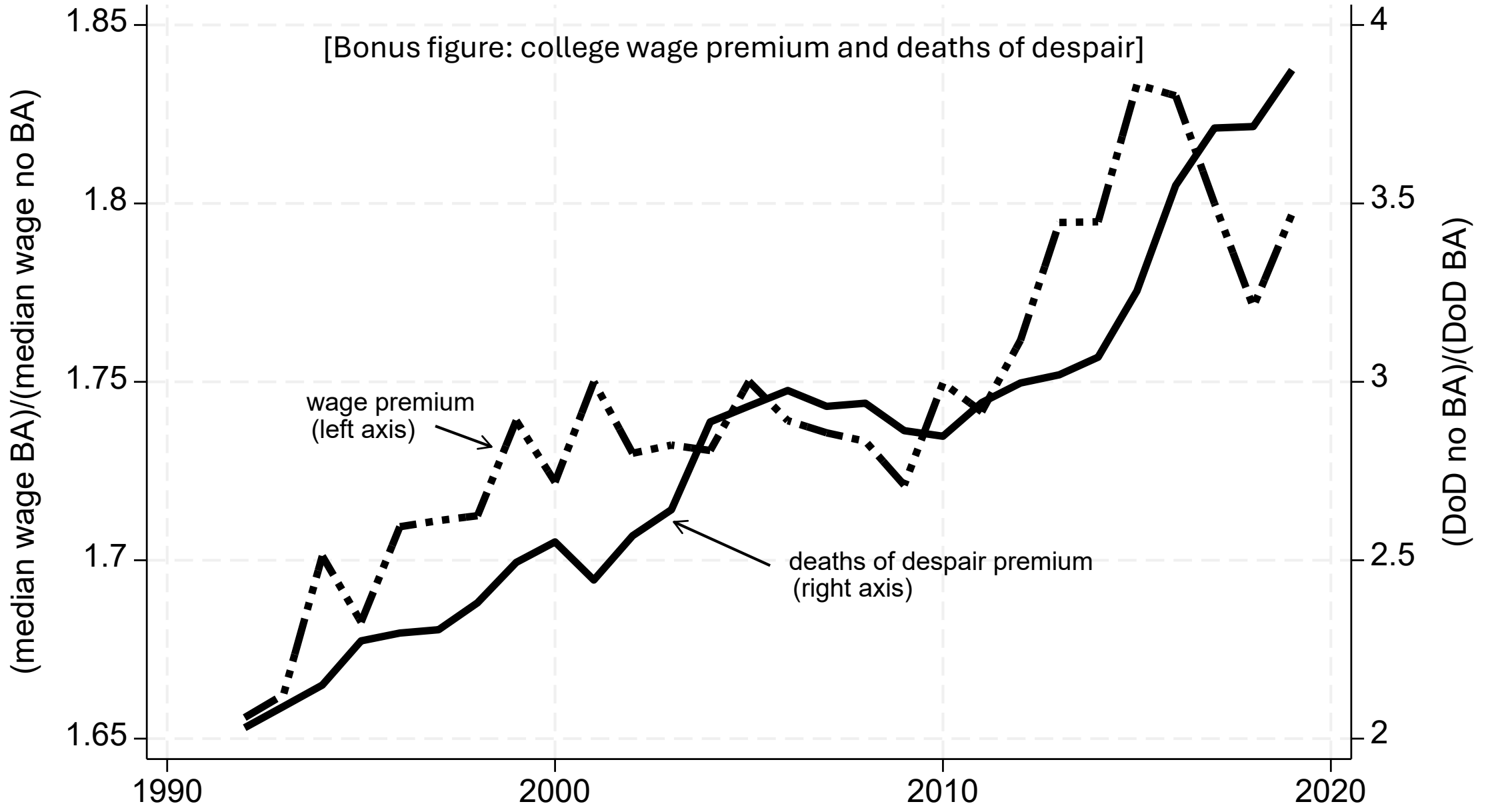
People with a BA have more economic stability, which allows more social stability, and economic and social stability affect health – both directly and through health behaviors and interactions with the healthcare system

Whatever the answers are, they lie in the lived experiences of people with and without a BA – mortality is just the final marker of a process that unfolds over decades

Thank you!

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Sources: CPS Outgoing Rotation Groups, National Vital Statistics Study; authors' calculations