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Using Cause-of-Death Data to Better Understand the U.S Increasing Disadvantage in Mortality

Magali Barbieri

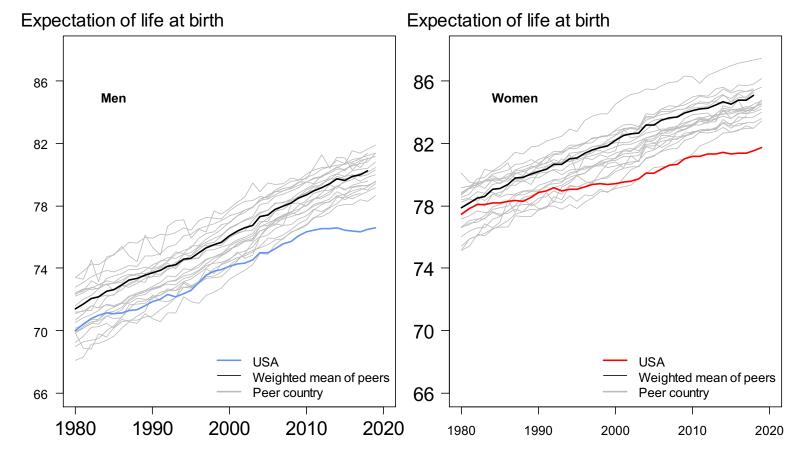
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Research question

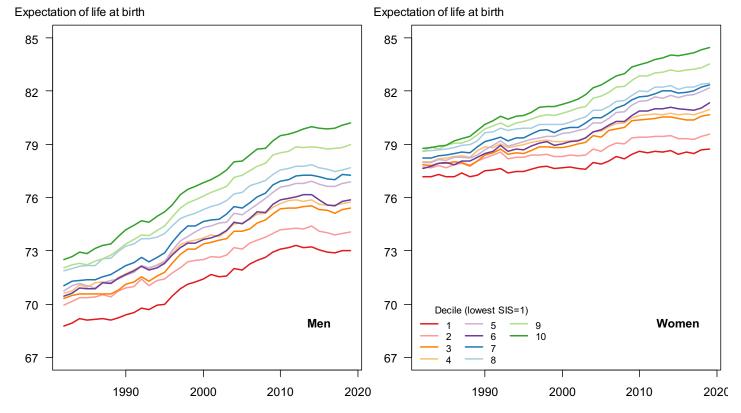
How do mortality disparities within the US contribute to the US international disadvantage in life expectancy ?

The US disadvantage in mortality



Source: constructed from HMD data.

County-level socioeconomic inequalities in mortality



Source: constructed from NCHS Multiple Mortality Files.



Builds on the USMDB project usa.mortality.org

The United States Mortality DataBase: lifetable series for all

- US Census Regions, Divisions and states since 1959
- soon to be extended back to 1937
- => HMD methods protocol
- US counties since 1982
- => statistical methods for small-population areas (Alexander, Zagheni , Barbieri, 2017)

Overview of methods

- 1. Construct a single socioeconomic score (SES) for each US county (Singh and Siahpush, 2002, 2006)
- 2. Rank counties, weight by population, and group into deciles of approx. equal size (~10% total US population)
- 3. Compute lifetable series and cause-specific mortality rates
 - a. for each SES decile for 1982-2019 (lifetables), 2000-2019 (rates)
 - b. for peer countries and the US for corresponding years
- 4. Estimate cause-of-death contributions to life expectancy difference between US/SES decile and peer countries

Data and sources

- 1. Socioeconomic scores (by county) : 2000 Census
- 2. US mortality (1982-2019)
 - Individual birth and death records (NCHS-NAPHSIS)
 With sex, age at death, county of residence, and underlying cause of death
 - July 1st population estimates (Census Bureau) By sex, age and county
- 3. Peer countries' lifetables (1980-2019): Human Mortality Database
- 4. Peer countries' cause-specific mortality rates (2000-2017+): WHO (Australia, Austria, Belgium, Canada, Germany, Denmark, Spain, Finland, France, the UK, Ireland, Italy, Japan, the Netherlands, Norway, Portugal, Sweden)

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- Socioeconomic variables used to construct the SES score:
 - 1. % pop. 25+ with <9 years of education
 - 2. % pop. 25+ with 4+ years of college
 - 3. % pop. 16+ in white collar occupations
 - 4. Unemployment rate
 - 5. Median household income adj. for state median housing costs
 - 6. Ratio of median income in 1st and 5th quintiles
 - 7. % pop. < Federal poverty threshold
 - 8. Median home value (owner occupied units)
 - 9. Median gross rent
 - 10. % housing with no telephone
 - 11. % housing with no or incomplete plumbing

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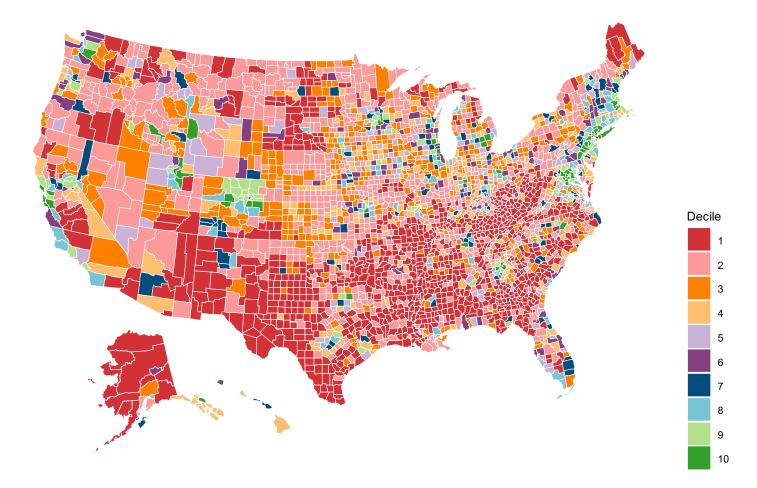
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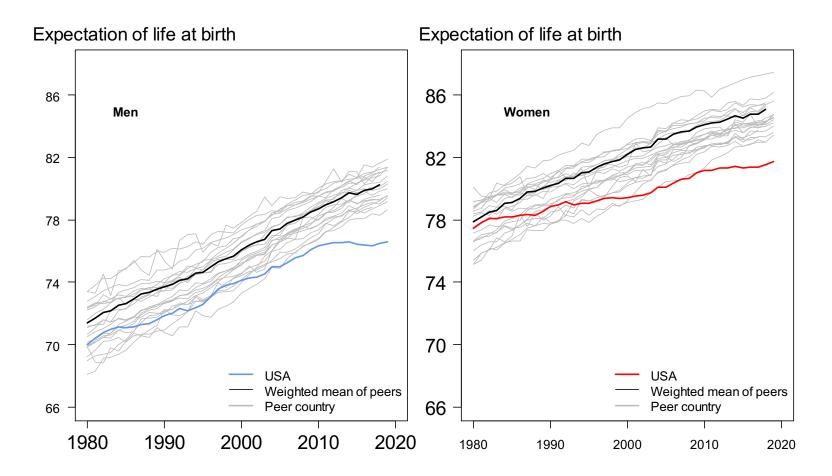
Construction of deciles

- Extraction of socioeconomic variables for each county from the census
- Principal Component Analysis
 - 1. Standardization
 - 2. Correlation matrix
 - 3. Extraction of principal components
- Correlations with 1st component applied to each variable for each county and summed up to yield a single SES score
- Counties ranked on their scores and weighted by their population
- Grouping of counties in 10 categories (deciles), each representing about 10% of the US population

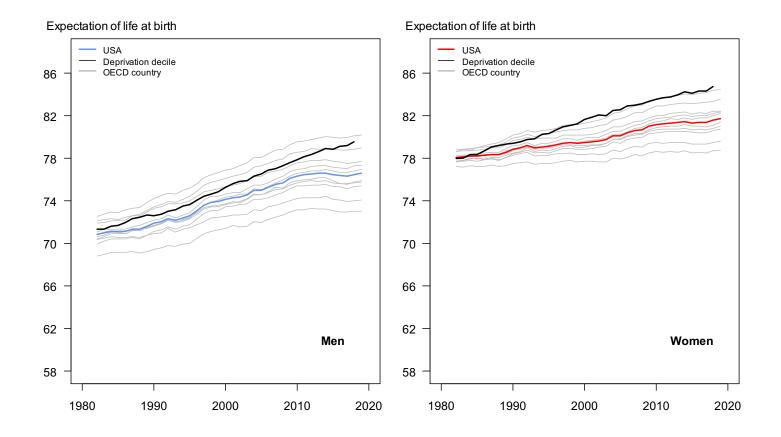
Distribution of counties by socioeconomic decile in 2000



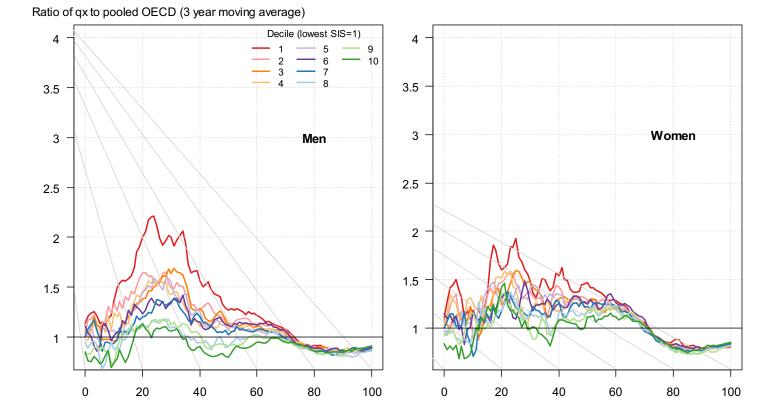
The US disadvantage in mortality



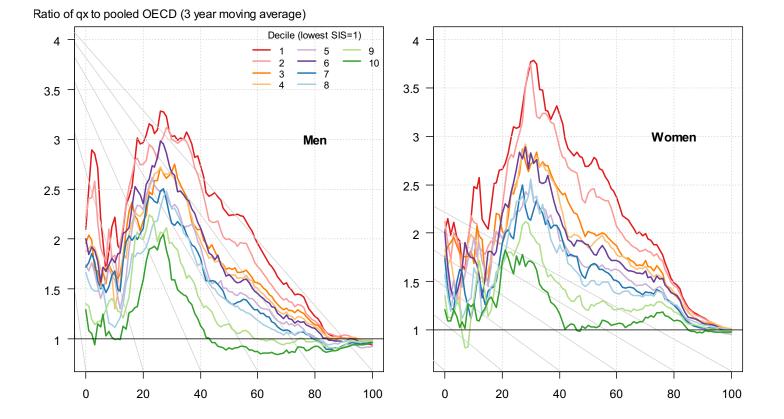
County-level socioeconomic inequalities in mortality and the US disadvantage in mortality



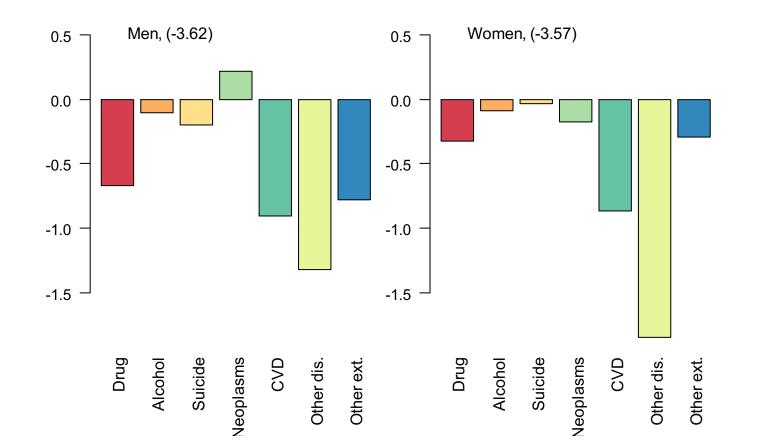
Ratio of qx values, US Deciles/Pooled OECD, 1982



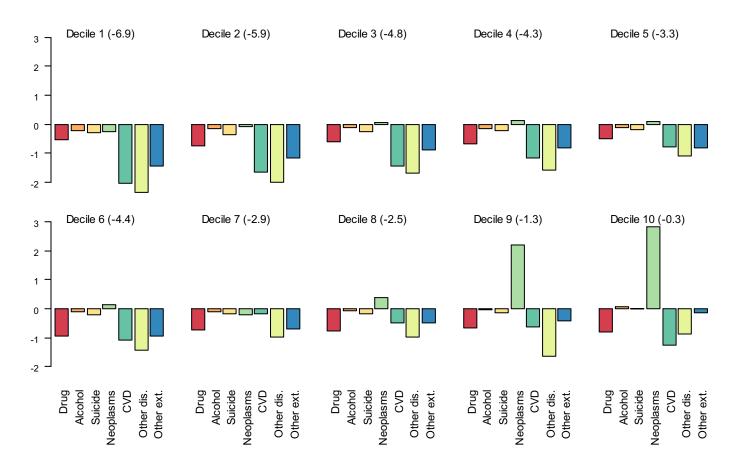
Ratio of qx values, US Deciles/Pooled OECD, 2019



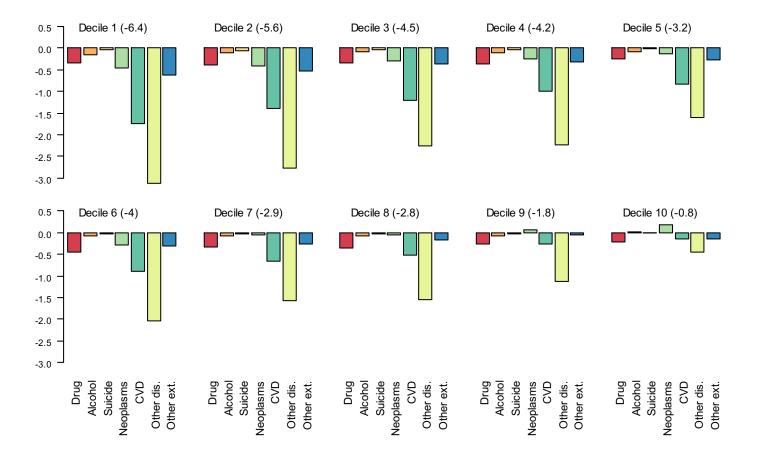
Cause-of-death contributions to the US disadvantage in life expectancy at birth (US vs. weighted mean of peers), 2017



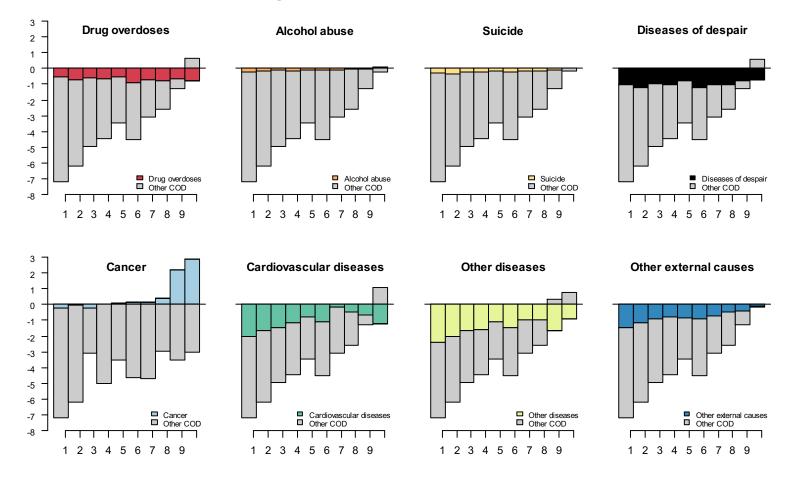
Cause-of-death contributions to life expectancy gap between SES deciles and aggregate of peer countries, all ages combined, men, 2017



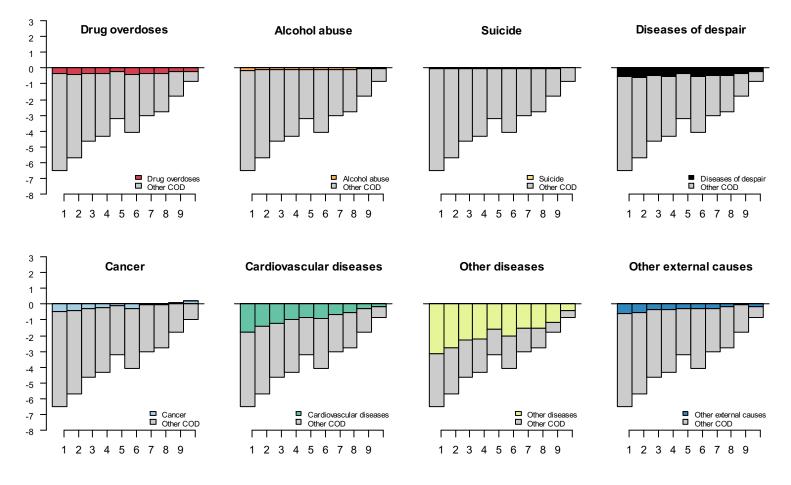
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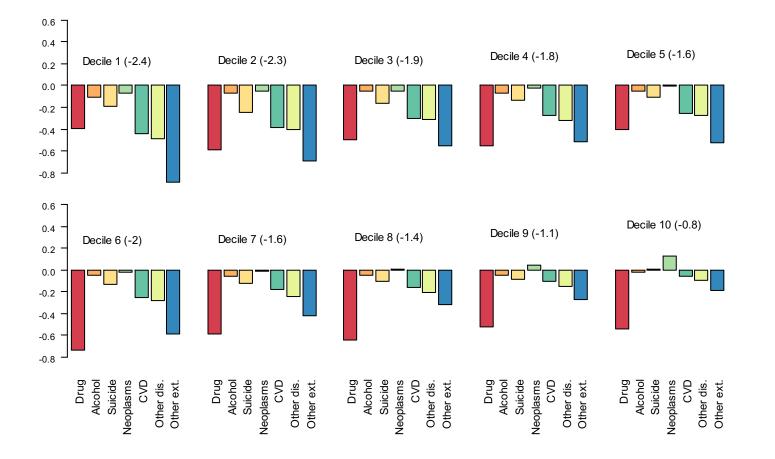
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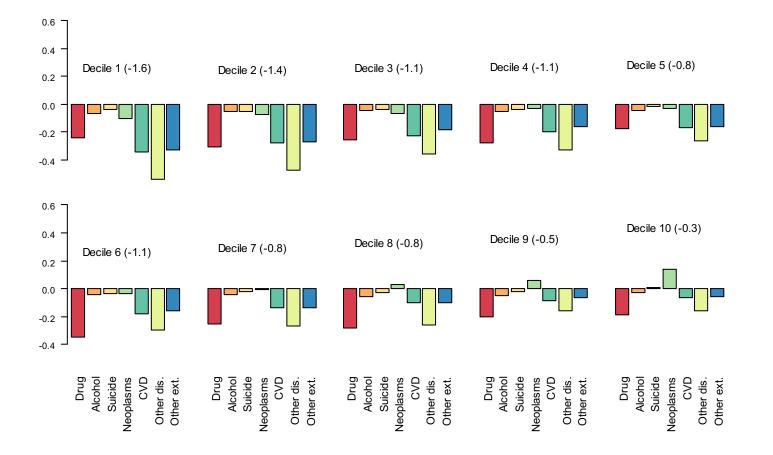
Cause-of-death contributions to life expectancy gap between SES deciles and aggregate of peer countries, all ages combined, women, 2017



Cause-of-death contributions to life expectancy gap between SES deciles and aggregate of peer countries, ages 20-50, men, 2017



Cause-of-death contributions to life expectancy gap between SES deciles and aggregate of peer countries, ages 20-50, women, 2017



Conclusion

- 1. County-level socioeconomic disparities in mortality are large in the United States...
- 2. ... but even the 10% Americans of either sex in the most affluent counties are not doing that well compared with peer countries
- 3. All cause-of-death categories contribute to the disadvantage, except for cancer (for men)
- 4. Mortality is particularly high in the US (especially for women) relative to the comparison group at young adult ages (20-50 years old), in large part due to the diseases of despair
- 5. After age 85, US men are doing relatively well in terms of survival relatively to peer countries but their advantage is eroding

Acknowledgments

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However, the authors are solely responsible for the content of this presentation, which does not necessarily represent the official views of the SOA and of the National Institutes of Health.



