

## New medical conditions more likely to spark healthy changes among better-educated middle-aged people

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Better-educated middle-aged Americans are less likely to smoke and more apt to be physically active than their less-educated peers. They are also more inclined to make healthy changes—in general and in the face of new medical conditions—and adhere to them, according to a new study in the September issue of the *Journal of Health and Social Behavior*.

"This study documents that there are very large differences by <u>education</u> in smoking and physical activity trajectories in middle age, even though many <u>health habits</u> are already set by this stage of the life course," said study author Rachel Margolis, an assistant professor of sociology at the University of Western Ontario. "Health behavior changes are surprisingly common between ages 50 and 75, and the fact that bettereducated middle-aged people are more likely to stop smoking, start physical activity, and maintain both of these behaviors over time has important health ramifications."

In her study, "Educational Differences in Healthy Behavior Changes and Adherence Among Middle-aged Americans," Margolis draws on data from the Health and Retirement Study (HRS), a longitudinal study of aging that is nationally representative of the U.S. population above age 50. Her analysis considers more than 16,600 HRS participants ages 50-75 during the study period 1992-2010.



Margolis found that 15 percent of college-educated respondents smoked at some point between ages 50-75, compared to 41 percent of college dropouts. There were also large differences by education in <a href="https://physical.org/physical.or

According to Margolis, health problems arise throughout the life course and how people respond to new medical conditions can shape their future health. "I studied whether education affected the likelihood that people changed their behavior after they learned they had a condition that necessitated behavior modification for disease management," she said. "I found that having more education increased the odds that a person made a healthy behavior change when faced with a new chronic health condition. This finding helps explain why there are educational differences in chronic disease management and health outcomes."

Margolis also discovered that one's level of education became decreasingly important as a moderator of healthy behavior changes upon diagnosis as age increased. Having more education increased the odds of smoking cessation among people in their 50s who were diagnosed with a new condition, but not those in their 60s or early 70s.

"Well-educated smokers in their 60s and early 70s are a small and select group," Margolis said. "They may be the most addicted or the most stubborn."

Another possible explanation for why well-educated smokers in their 50s were more likely to quit than those in their 60s and early 70s is that the longer people expect to live when they get sick, the more likely they are



to make a healthy behavior change, Margolis said.

Interestingly, although Margolis found that better-educated people were much more likely to, for example, quit smoking when they got sick, her research also revealed that those with lower levels of education were also more likely to quit after receiving a negative diagnosis than when they were healthy.

"To improve overall population health, my research suggests that health practitioners and policymakers can take better advantage of the fact that people from all educational backgrounds are more inclined to make healthy changes at the point of diagnosis and focus on encouraging healthy changes at that time," she said.

## Provided by American Sociological Association

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