

Economic opportunity may have a significant effect on health behaviors and risks

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A new study led by Massachusetts General Hospital (MGH) investigators has found evidence that economic opportunity - the prospect that individuals may be able to improve their economic status - may have important effects on the health of a community. In an *American Journal of Public Health* report that has been published online, the researchers found that mortality rates were higher and that risk factors like obesity and smoking and the prevalence of hypertension and diabetes were greater in areas with the lowest levels of economic opportunity, based on a nationwide database.

"Today there is growing concern that economic opportunity - a core tenet of the American Dream - is not accessible to everyone," says Atheendar Venkataramani, MD, PhD, of the MGH Division of General Medicine, lead author of the report. "Our findings - that people living in counties with lower economic opportunity on average had worse health behaviors, poorer overall health and were more likely to die younger - suggest that economic opportunity is important for good health as well as for economic well being."

While much attention has been given lately to issue of income inequality, economic opportunity is a different concept. Income inequality represents unequal distribution of resources at the present time, while economic opportunity reflects prospect for future social mobility. Venkataramani explains that while the two concepts are probably related, they may have distinct consequences for health, which led his team to embark on what they believe is the first national study to



examine the relationship between economic opportunity and health.

Economic opportunity is usually determined by comparing income differences between generations. For this study, the researchers used information from the Equality of Opportunity Project Database - compiled by investigators from Harvard University, Stanford University, and the University of California, Berkeley - which computes intergenerational economic mobility by comparing the 2010 to 2012 tax records of 10 million young adults with those filed 10 to 15 years earlier by their parents. Levels of economic opportunity were determined on a county-by-county basis based on the extent of income improvement experienced by the average individual whose parents had reported incomes in the lowest 20 percent. The researchers then examined how the level of economic opportunity in a county related to the overall mortality rate and the prevalence of health behaviors and risk factors as reported by the Centers of Disease Control and Prevention.

The study results - based on data from almost 2,700 counties covering 97 percent of the U.S. population - found strong associations between areas of low economic opportunity, such as the Southeast and upper Midwest, and higher mortality rates. Prevalence of smoking, obesity, hypertension and diabetes were all higher in lower-opportunity counties. All of the associations were stronger in working age adults, particularly those ages 25 to 44, and among African Americans. The researchers determined that moving from the lowest opportunity to mid-range counties was associated with a 6.5 percent decrease in mortality, while moving to areas with the highest opportunity levels appeared to reduce the mortality rate by 16.7 percent.

"There are two ways that economic opportunity could influence health," says Venkataramani, who is an instructor in Medicine at Harvard Medical School and a member of the Harvard Center for Population and Development Studies. "First, being healthy helps people get and keep



better jobs and higher incomes. When prospects of improving incomes are more remote, people could lose an important motivating force to maintain healthy behaviors. Second, diminished economic opportunities may lead to greater despair, which could lead to poor health behaviors. Our study does not allow us to say for sure whether economic opportunity causes health, but our findings do imply that rising economic opportunity can bolster health or that the structures, institutions and policies that create opportunity could contribute to better health."

He notes that future studies are needed to more clearly determine whether the relationship between economic opportunity and health is causal, possibly by examining the effects of policies designed to improve opportunities on the health of a community. Better understanding of the mechanisms that link opportunity with health could come from analyzing detailed individual data on the relationships between perceived opportunities, career aspirations and health outcomes. At a time when other research has suggested a link between beliefs about reduced economic opportunities and poor health outcomes among white Americans in particular, a focus on the role of hope and despair could be particularly valuable, Venkataramani notes.

More information: *American Journal of Public Health*, dx.doi.org/10.2105/AJPH.2015.302941

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