

Shorter life expectancy linked to 2016 presidential election outcome

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Concerns about health and rising death rates may have helped tilt the 2016 presidential election in favor of Donald J. Trump, according to an analysis of voting patterns and mortality rates in counties across the U.S.

Findings from the study, at Columbia University Irving Medical Center (CUIMC), were published online today in the *Journal of General Internal Medicine*.

"Although [life expectancy](#) is increasing in many parts of the country, especially in urban areas, we're not seeing nearly the same gains in rural and middle America. We shouldn't underestimate the degree to which some portions of the country have been left behind in terms of their health. And it's not surprising that health disparities correspond with voting behavior," said study leader Lee Goldman, MD, MPH, the Harold and Margaret Hatch Professor, Dean of the Faculties of Health Sciences and Medicine, and Chief Executive, Columbia University Irving Medical Center.

Dr. Goldman and colleagues hypothesized that changes in health outlook may have affected the outcome of the [2016 presidential election](#). To test this hypothesis, they used publicly available data from each of the country's 3,112 counties to compare changes in presidential voting from 2008 to 2016 with changes in death rates. The analysis controlled for race/ethnicity, income, education, unemployment rates, health insurance rates, and other factors.

Both 2016 presidential candidates received fewer votes than the 2008 Republican and Democratic presidential candidates in 398 counties. And while President Trump fared better than Senator John McCain in 2,607 counties, Secretary Hillary Clinton surpassed President Obama's percentage of the vote in only 108 counties.

Counties with a net gain in the percentage of individuals who voted for the Republican candidate had a 15 percent higher 2015 age-adjusted death rate than counties with a net gain in Democratic voters. The increase in [death rates](#) due to alcohol, drugs, and suicide was also 2.5 times higher in counties where Republicans made gains compared with

counties where Democrats made gains.

"It's commonly argued that President Trump won by receiving more votes from people who have been left behind economically—especially older, less-educated, and less-urban, white voters," said Dr. Goldman.

"Based on our data, we can also say that changes in life expectancy were an independent factor in voting choices. Reduced health prospects are an important marker of dissatisfaction, discouragement, hopelessness, and fear—sentiments that may have resonated with voters who sided with President Trump. Although correlation does not imply causality, our findings also suggest that plausible improvements in life expectancy in Michigan, Pennsylvania, and Wisconsin might have shifted their electoral votes to Secretary Clinton.

"Regardless of your political persuasion, our paper suggests that if [health disparities](#) were important enough to influence presidential voting, they may have an even broader impact on our country's future than we had imagined," said Dr. Goldman. "It also highlights how much work remains to reduce [health disparities](#)."

The paper is titled, "Independent Relationship of Changes in Death Rates with Changes in U.S. Presidential Voting." The other contributors are: Maribel P. Lim, Qixuan Chen, Peng Jin, Peter Muennig, and Andrew Vagelos (all at CUIMC).

More information: Lee Goldman et al, Independent Relationship of Changes in Death Rates with Changes in US Presidential Voting, *Journal of General Internal Medicine* (2018). DOI: 10.1007/s11606-018-4568-6

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