

Life expectancy is declining in the US, but it doesn't have to be

December 7 2022, by Annalies Winny



The 'In America: Remember' exhibition honored the Americans who died of COVID-19 by planting 660,000 white flags on the National Mall in Washington. Credit: Elvert Barnes Photography / Wikimedia Commons

The U.S. is experiencing its sharpest decline in life expectancy in more than a century—since the eras of World War I and the Great Influenza.

This dire development represents the combined toll of many crises—but

it can be reversed, according to a [report](#) released this morning by the Bloomberg American Health Initiative at the Johns Hopkins Bloomberg School of Public Health.

Until 2014, life expectancy at birth in the U.S—a core measure of population health—was steadily trending upward. Then it plateaued. Then it dropped.

In 2021, an American was expected to live 76.1 years—down 2.8 years from the 2014 peak of 78.9 years. This backslide has erased all life expectancy gains since 1996, according to recent data from the Centers for Disease Control and Prevention.

Deep-rooted inequities and structural racism are also contributing to Americans dying younger, as evidenced by the uneven racial and ethnic breakdown in life expectancy:

- Non-Hispanic Black Americans' life expectancy is 70.8 years, down four years during the pandemic
- Indigenous Americans' life expectancy is 65.2 years, down 6.6 years during the pandemic

[The report](#), authored by Bloomberg School faculty, presents evidence-based solutions to the top drivers of declining life expectancy: COVID-19—the top contributor—as well as overdose, gun-related homicide and suicide, teen suicide, motor vehicle crashes, and heart disease, stroke, and diabetes.

"The decline in U.S. life expectancy is a devastating trend that we refuse to accept," said Michael R. Bloomberg, founder of Bloomberg Philanthropies and WHO Global Ambassador for Noncommunicable Diseases and Injuries. "The good news is that while the challenges we face are serious and stubborn, they are not insurmountable, and the

history of American [public health](#) is filled with extraordinary successes."

Adds the initiative's director Josh Sharfstein: "We have to shake off the feeling that things are going to just keep getting worse. There are no quick fixes, but there are absolutely things that can be done."

In many respects, we already know what to do, Sharfstein says. Many effective interventions—from overdose-reversal medications to gun permit requirements to heat action plans—are already being implemented across the country. "We have the evidence that they work, but we haven't been able to gain enough scale," says Sharfstein.

The report lays out 10 urgent yet practical steps for how [decision makers](#) at all levels can address the root causes of declining [life expectancy](#) in the U.S. They include:

- Congress should support the Biden Administration's request for additional funding for public health outreach, COVID-19 vaccination, treatments, and research.
- Hospitals and clinics and jails and prisons should provide access to medications that treat opioid use disorder such as buprenorphine and methadone.
- Health agencies should expand harm reduction services such as public health vending machines and overdose prevention sites.
- States should implement extreme risk protection orders; require permits for gun purchase; and support community violence intervention programs.
- Schools should offer easily accessible, confidential, and comprehensive adolescent health care.
- Regulators and automakers should embrace the implementation of driver impairment detection technology.
- The FDA should release long-term, mandatory, industry targets for sodium reduction in the U.S. processed [food supply](#) and

- develop local and regional food infrastructures.
- Cities should promote and protect biking and walking and slow urban sprawl to reduce motor vehicle crashes; implement heat action plans; and strengthen community violence intervention programs.

Provided by Johns Hopkins University

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