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Headline: HEALTH IN AMERICA TIED TO INCOME AND EDUCATION

The nation's health continues to show record progress, but Americans with low income or less education aren't as likely as more advantaged Americans to share in the good health news, according to HHS' comprehensive annual report on the health of the nation.

"Health, United States, 1998," issued today by HHS Secretary Donna E. Shalala, reports record-high life expectancy, with a narrowing life expectancy gap between whites and blacks. It also shows record-low infant mortality; as well as declining death rates for a number of the leading causes of death, including heart disease, cancer and firearm-related mortality.

At the same time, the report includes a special study of socioeconomic disparities in health. For almost all health indicators considered, each increase in either income or education increased the likelihood of being in good health. Persons with lower income or education also had a higher prevalence of health risk factors, such as sedentary life style and cigarette smoking, were less likely to have health insurance coverage or receive preventive care, and were more likely to report unmet health care needs.

"Health is improving in America along many fronts, and our challenge is to share that progress as widely as possible," Secretary Shalala said. "This comprehensive report shows the progress we're making, but it also documents the strong relationship between socioeconomic status and health in the United States for every race and ethnic group studied.

"There is a role for everyone in every community in eliminating disparities in health and health care in America," Shalala said. "The best solutions to closing this gap are strong, effective partnerships which build on the latest and best knowledge."

The report prepared by the National Center for Health Statistics, a part of the Centers for Disease Control and Prevention in HHS, examines a wide range of topics. The findings show that:

- * Adults with less education tend to die younger than more-educated adults. Across the board, less-educated adults have higher death rates for all major causes of death, including chronic diseases, communicable diseases, and injuries.
- * Cigarette smoking among adults 25 years of age and over declined between 1974 and 1995, but declines were greater for more educated adults. In 1995 the least educated men and women were more than twice as likely to smoke as the most educated.
- * Socioeconomic status also influenced the health of children. Low birthweight and infant mortality rates were higher among the children of less-educated mothers than among children of more-educated mothers. Infants born to mothers who did not finish high school were about 50

percent more likely to be of low birthweight than infants whose mothers finished college.

* Exposure to environmental lead and elevated blood lead levels in young children were associated with low family income. Children 1-5 years of age living in families with low income were over seven times as likely to have elevated blood lead levels as children in high-income families. However, the risk also varied by race and ethnicity; poor non-Hispanic black children are at the greatest risk, with over 20 percent having high blood lead levels, compared with 8 percent of poor non-Hispanic white and 6 percent of poor Mexican American children.

* Socioeconomic status has a direct influence on insurance coverage and access to care--for both preventive services and regular visits. Low income adult men were seven times as likely to be uninsured as high-income men and low income women eight times as likely as their high-income counterparts to be uninsured.

* Children in higher income families were less likely than poor children to be without a regular source of health care. However, insurance coverage makes a real difference for poor children in terms of access to health care. Among all poor children under 6 years of age, 21 percent of those without health insurance had no usual source of care compared with 4 percent of poor children covered by insurance.

The annual assessment of the health of all Americans reports that infant mortality fell to a record low of 7.3 deaths per 1,000 live births in 1996 and that life expectancy reached an all-time high of 76.1 years. The long-standing gap in life expectancy between men and women narrowed to 6 years and the differential between the white and black population narrowed as well. Life expectancy for the white population now stands at 76.8 years; and for black Americans life expectancy has now reached 70.2 years.

A number of the leading causes of death showed declining death rates in the 1990s. Heart disease, the leading cause of death, continued its long downward trend, with the death rate down 12 percent from 1990 to 1996. In the same time period, the death rate for cancer--the second leading cause of death--declined by 5 percent, after increasing steadily for the previous 20 years. Between 1993 and 1996, the death rate for firearm-related injuries and the homicide rate declined by about 20 percent after increasing steadily since the mid-1980s. However, the death rate for stroke, the third leading cause of death, which, like heart disease, has had a long downward trend, has shown little improvement since 1992.

Changes in health care are noted. HMO enrollment continued to rise so that in 1997 one quarter of the U.S. population was enrolled in HMO's. During the 1990s the use of traditional fee for service medical care benefits by employees in private companies declined sharply. Also during the 1990s, the full funding of medical care coverage became less common in both small and large firms.

Copies of the report can be downloaded from the NCHS Home Page on the Internet at <http://www.cdc.gov/nchswww/nchshome.htm>.

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