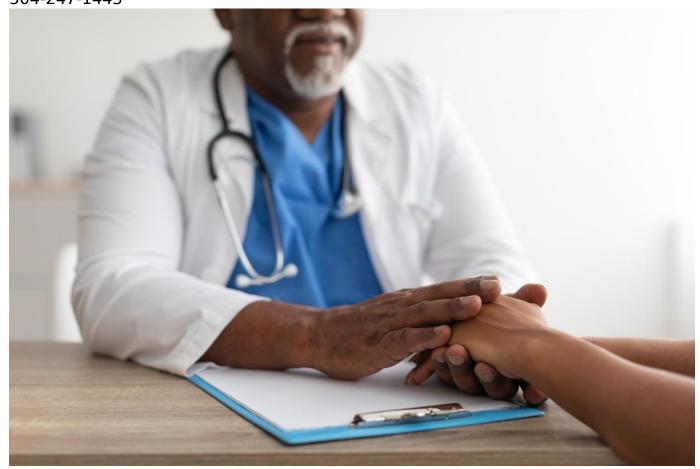
## Study finds that eight factors put Black adults at greater risk of early death

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The study found that the early mortality rate between Black and White Americans can be explained by eight social factors: employment, income, food security, education level, access to healthcare, quality health insurance, home ownership and marital status. (Photo by iStock)

Black adults who live in the United States have a 59% higher risk of premature death than White adults.

A new study from Tulane University <u>published in Lancet Public Health</u> has found that this gap can be entirely explained by disparities in eight areas of life critical to health and well-being: employment, income, food security, education level, access to healthcare, quality health insurance, home ownership and marital status.

These eight factors are called social determinants of health. Using data from the National Health and Nutrition Examination Survey, a CDC survey used to determine disease prevalence and risks across the

country, Tulane researchers modeled the impact of each factor on a person's life expectancy. When all unfavorable social determinants were accounted for, the 59% mortality disparity was reduced to zero.

"It totally disappeared," said <u>Josh Bundy</u>, lead author and epidemiologist at Tulane's School of Public Health and Tropical Medicine. "There's no difference between Black and White premature mortality rates after accounting for these social determinants."

While the mortality gap has been largely pinned on socioeconomic factors such as education level, income and employment status in recent years, researchers have acknowledged that these factors only explained most of the gap, Bundy said.

"This is the first time that anyone completely explained the differences," Bundy said. "We didn't expect that, and we were excited about that finding because it suggests social determinants should be the primary targets for eliminating health disparities."

Socioeconomic factors were still found to play a major role, accounting for approximately 50% of the Black-White difference in mortality in the study. However, the other nearly 50% of the difference was explained by marital status, food security and whether someone has public or private health insurance, softer indicators that can speak to a person's social support network, stability or job quality.

Unfavorable social determinants of health were more common among Black adults and were found to carry enormous risk.

Having just one unfavorable social determinant of health was found to double a person's chances of an early death. With six or more, a person has eight times higher risk of premature mortality.

Jiang He, the corresponding author and <u>Joseph S. Copes Chair of Epidemiology</u> the School of Public Health and Tropical Medicine, said these results "demonstrated that race-based health disparities are social, not biological, constructs."

Bundy agreed, adding that the findings explain how "structural racism and discrimination lead to worse social risk factors, which may lead to premature death."

"So how do we eliminate the structural differences between races?" Bundy said. "And regardless of race, if you have six or more of these factors, you're at a really high risk. How do we address these issues for everyone?"

As a concept, social determinants of health is a relatively new framework being emphasized by the CDC's Healthy People 2030 initiative.

Going forward, Bundy hopes the concept gains more traction and that policymakers use these findings to address the race-based mortality gap.

"These social determinants of health are the foundation of health problems," Bundy said. "They need to be a top priority going forward and it's going to take policy, research and a multi-disciplinary approach to tackle these issues."