"Deaths of Despair" Revisited:
Widening educational disparities in US adult life expectancy, 2010–2017

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Abstract

Objectives: The stagnation and recent declines in US adult life expectancy partly reflect growing socioeconomic disparities in life expectancy, with less-educated people experiencing declining life expectancy and well-educated people experiencing improving life expectancy. Less clear are how specific causes of death are contributing to widening socioeconomic disparities in adult life expectancy and whether those causes constitute "deaths of despair."

Methods: Using vital statistics data, this study decomposes the contribution of specific causes of death to widening educational disparities in US adult life expectancy, by race and gender, from 2010 to 2017.

Results: The findings reveal that between 2010 and 2017, life expectancy at age 25 declined among persons with a high school degree or less in almost all race-gender groups: –1.0 years for white men, –1.1 years for white women, and –0.3 years for black men (but increased by +0.3 years for black women). College-noncompleters experienced similar declines in life expectancy: –0.9 years for white men, –0.6 years for white women, –0.5 years for black men, and –0.4 years for black women. By contrast, life expectancy at age 25 increased among the college-educated across all race-gender groups: +0.6 years for white men, +0.8 years for white women, +0.9 years for black men, and +1.7 years for black women. Deaths due to drug poisoning, alcohol use, and suicide—collectively known as "deaths of despair"—increased dramatically since 2010, and among less-educated whites nearly matched circulatory diseases in years of life lost by 2017. "Deaths of despair" accounted for a substantial part of the growing gap in years of life lost between persons with a high school degree or less and the college educated: 70.2% among white men, 44.3% among white women, 62.4% among black men, and 44.6% among black women. However, drug poisoning overwhelmingly accounted for the widening education gap in life expectancy, with only minor contributions from suicide and alcohol-related deaths.

Conclusions: The opioid epidemic is having a substantial effect on US adult mortality. Because these deaths are concentrated among the non-college educated population, they also contribute to the growing inequality in US adult mortality. The pace at which these changes are occurring is dramatic and it is likely that future US adult mortality trends and inequality will be heavily influenced by drug poisoning deaths.