

Health and Wealth: the challenge of the gradient

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Director

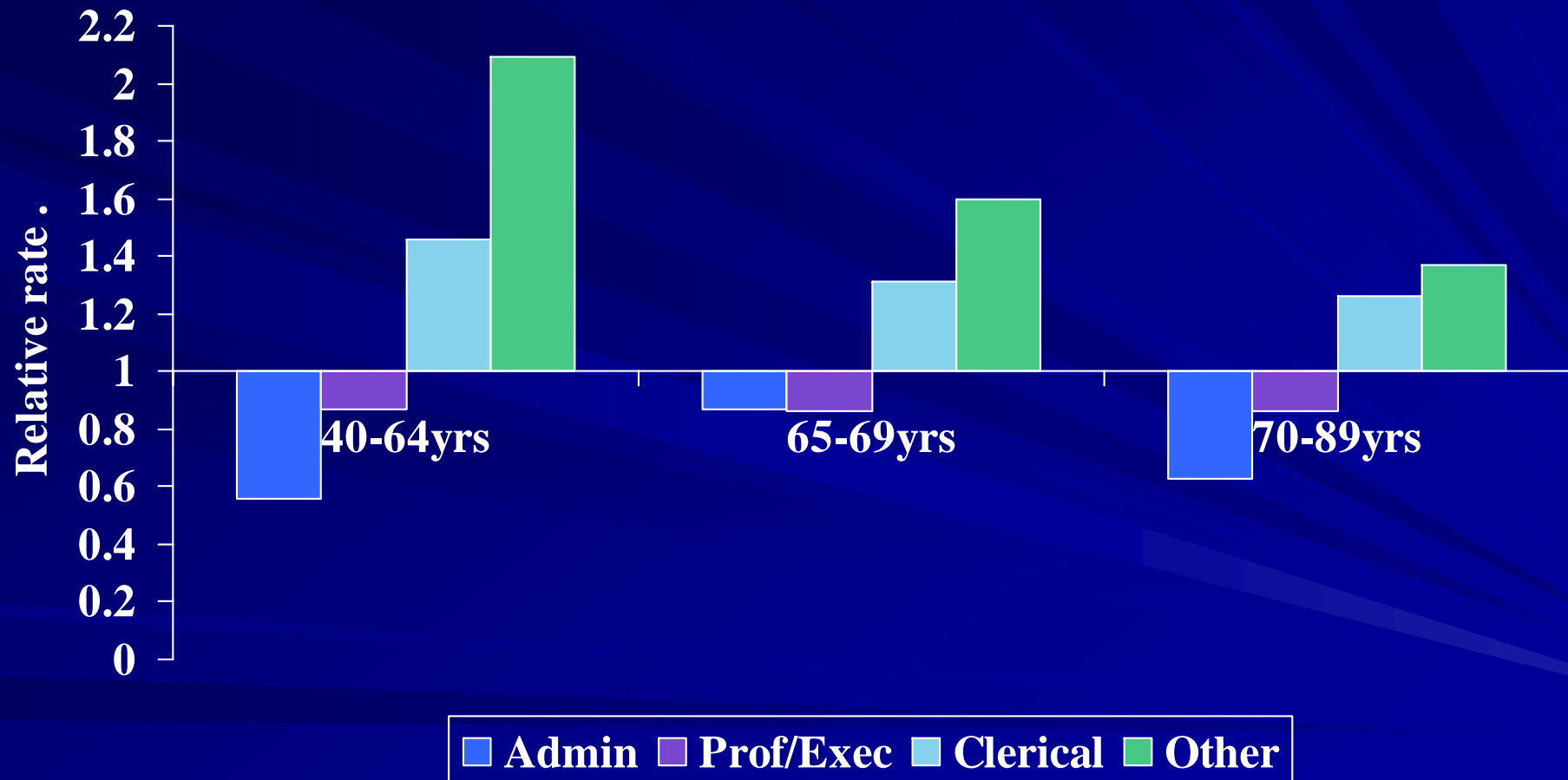
International Institute for Society and Health

The Royal Swedish Academy of Sciences
May 29th 2007

- The gradient
- Poverty?
- Not inevitable
- Selection?
- Causal pathways
- Action

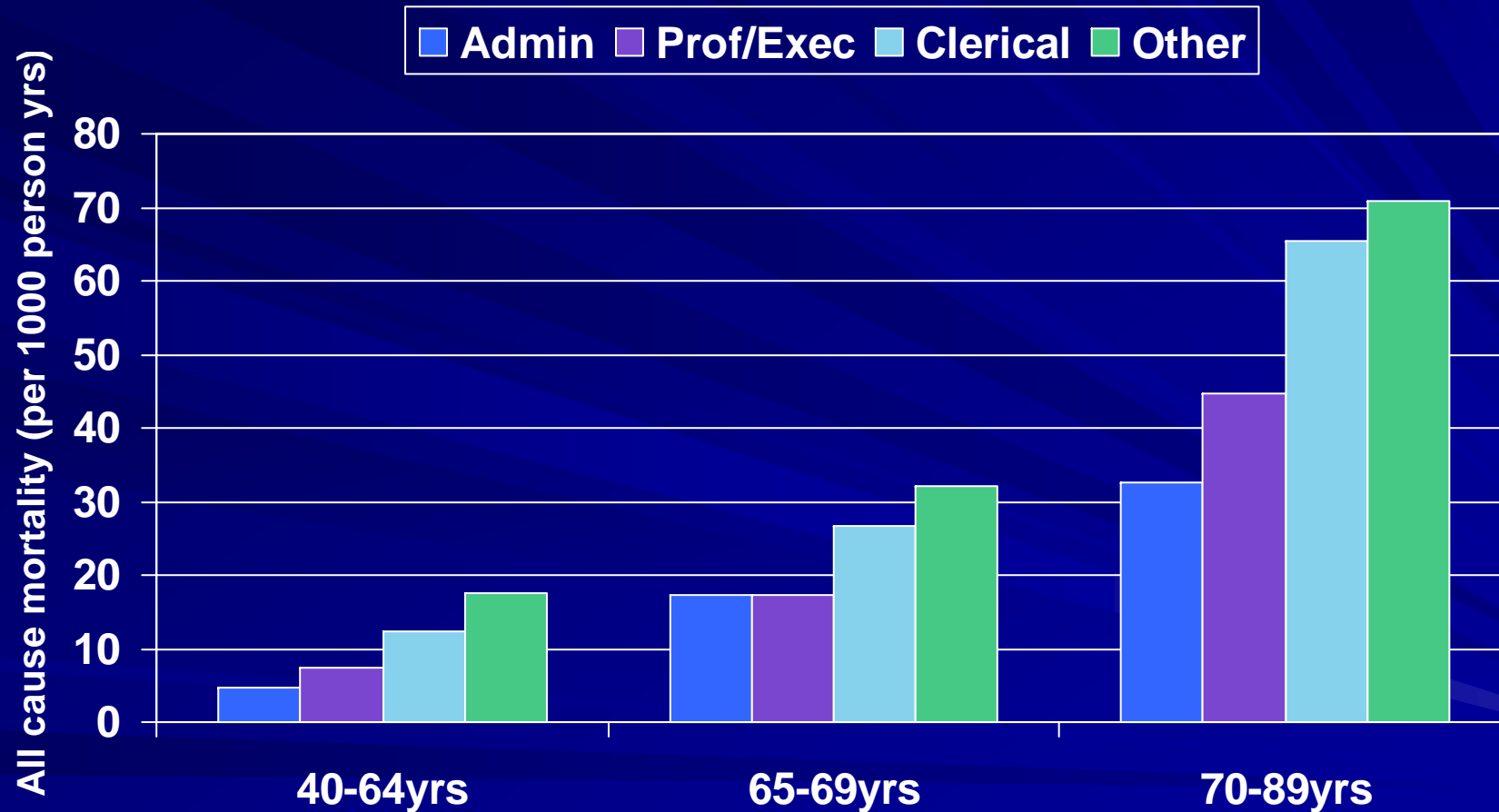
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MORTALITY OVER 25 YEARS ACCORDING TO LEVEL IN THE OCCUPATIONAL HIERARCHY: WHITEHALL



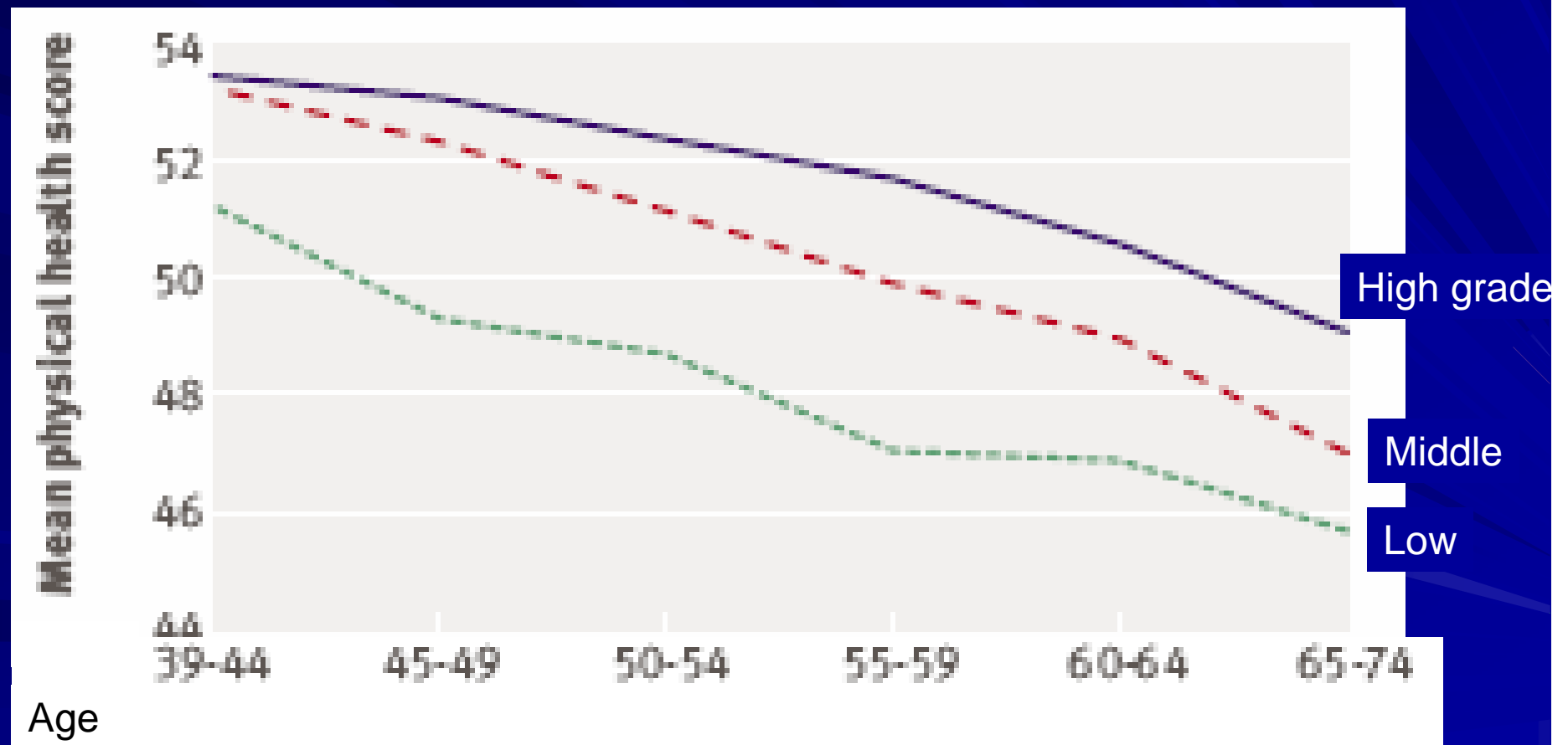
(Marmot & Shipley, 1996)

Mortality over 25 years according to level in the occupational hierarchy: Whitehall



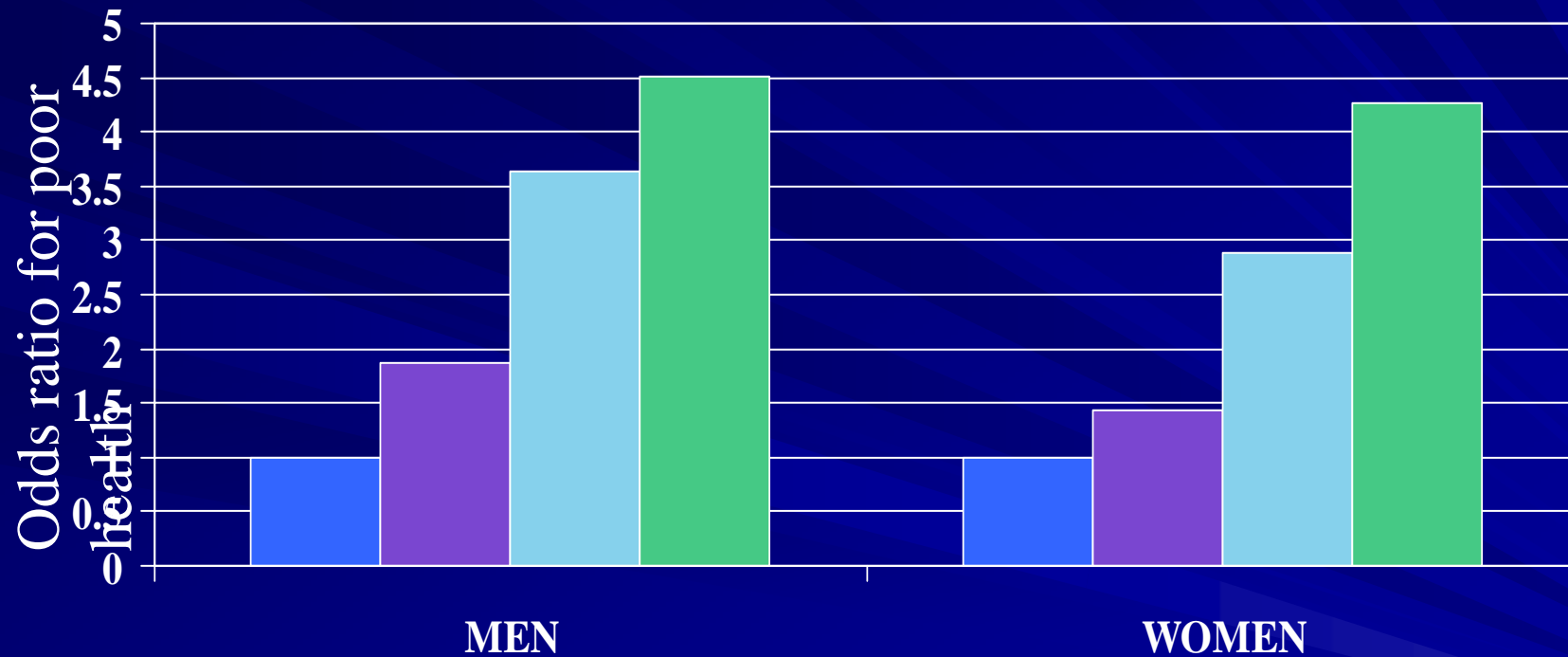
(Marmot & Shipley, BMJ, 1996)

Self-reported physical health in older people: WII study



Poor self-rated health at age 50+ and accumulation of socio-economic risk factors over life course in Russia

No. of risk factors
 0
 1
 2
 3

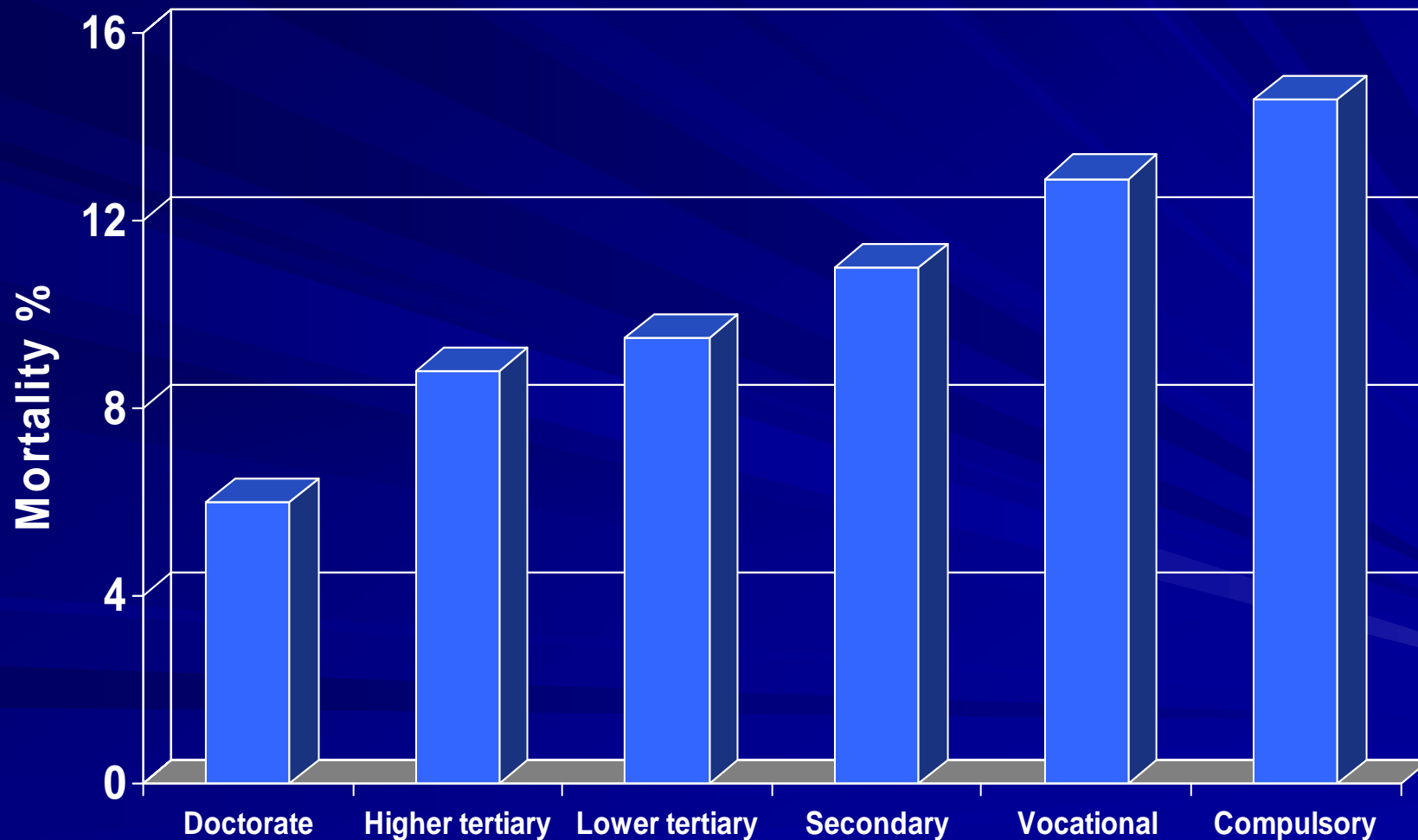


Risk factors:

- Ever hungry to bed aged 15 yr
- Elementary /vocational education
- Adult household income below median

(Nicholson et al)

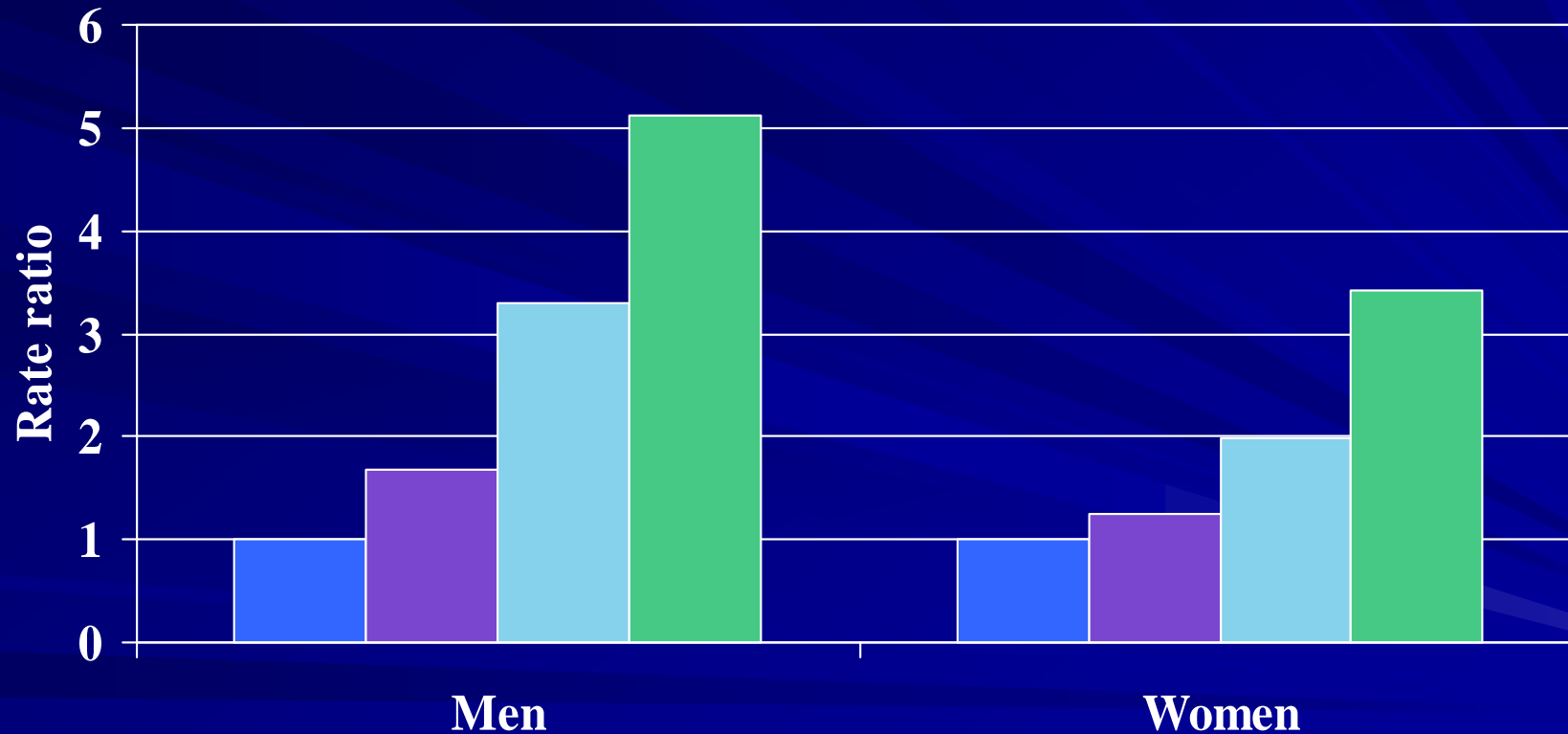
MEN AGED 64 IN 1990 WHO DIED UP TO 1996 BY EDUCATION SWEDISH NATIONAL SAMPLE



Erikson 2001

MORTALITY* AND EDUCATION, SOUTH KOREA

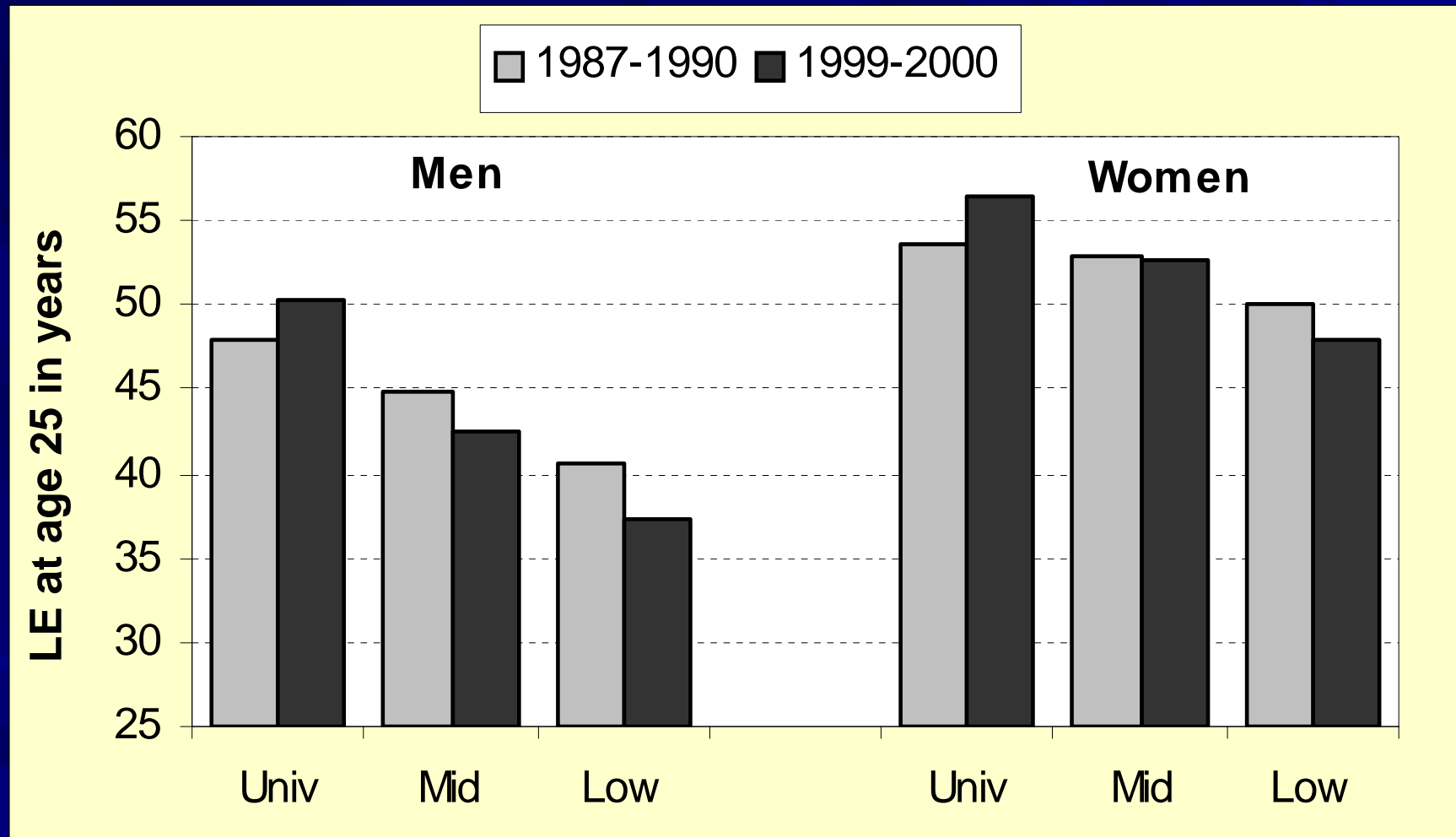
■ University
 ■ High
 ■ Middle
 ■ Elementary



*Mortality in Korean working population aged 20-64, 1993-1997, adjusted for age
 (Source: Son et al. JECH 56:798, 2002)

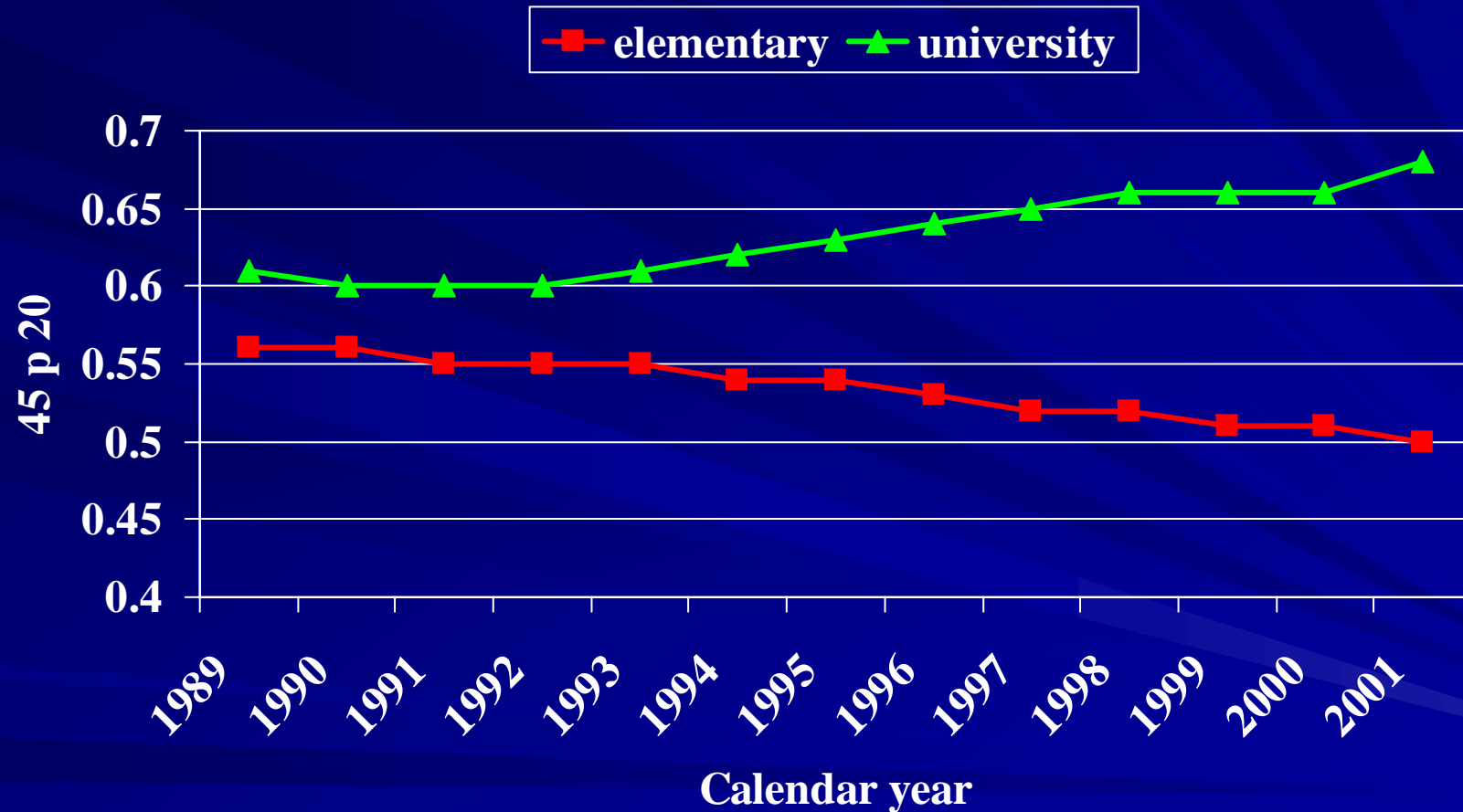
- Oscar winning actors and actresses lived an astonishing 4 years longer than their co-stars and the actors nominated who did not win. (Redelmeier & Singh)
- Winning the Oscar is like reducing your chance of dying from a heart attack from about average to zero.

Change in Life Expectancy at age 25 by Educational Level 1989-2000 in Estonia



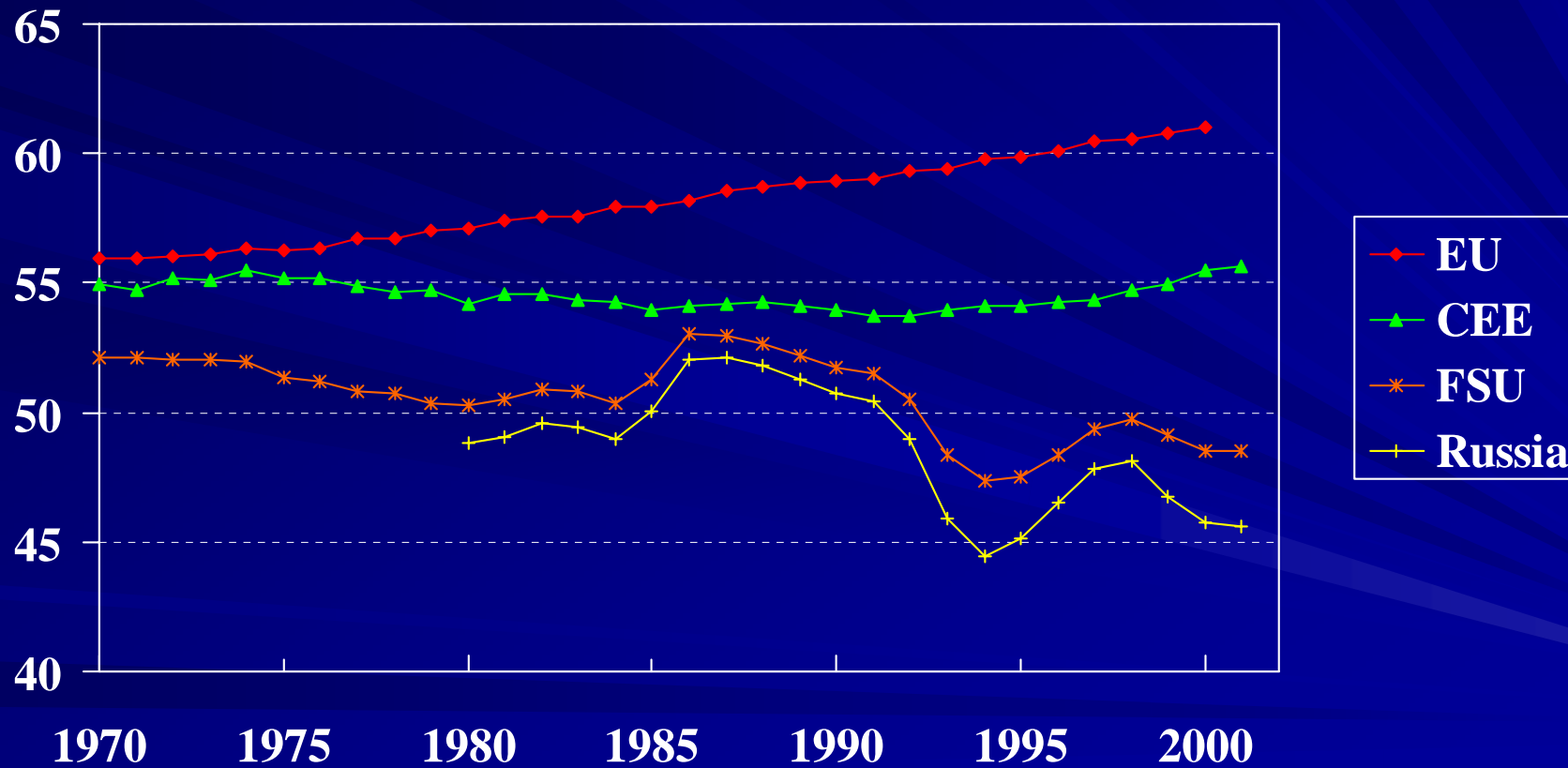
(Leinsalu, Vagero & Kunst, *Int J Epidemiol* 2003)

The widening trend in mortality by education in Russia, 1989-2001



45 p20 = probability of living to 65 yrs when aged 20 yrs

LIFE EXPECTANCY AT AGE 15 IN EUROPE, MEN, 1970-2001



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LIFE EXPECTANCY AT BIRTH

	MALE	FEMALE
INDIGENOUS AUSTRALIAN*	59.4	64.8
NON INDIGENOUS AUSTRALIAN*	76.6	82.0
INDIA**	61.8	65.0
RUSSIA**	59.0	72.1

(*<http://www.hreoc.gov.au>, Social Justice Report 2005;**Human Development report 2005)

INFANT MORTALITY/1000 LIVE BIRTHS

	INFANT MORTALITY PER 1000 LIVE BIRTHS
ABORIGINAL*	12.7
AUSTRALIAN	5.2
SIERRA LEONE	181
ICELAND	3

*Aboriginal and Torres Strait Islanders

GDP PER CAPITA AND LIFE EXPECTANCY: SELECTED COUNTRIES

	GDP PER CAPITA (PPP US\$)	LIFE EXPECTANCY AT BIRTH (MALES)
SRI LANKA	3,778	68
COSTA RICA	9,606	75
RUSSIA	9,230	58
CHILE	10,274	74

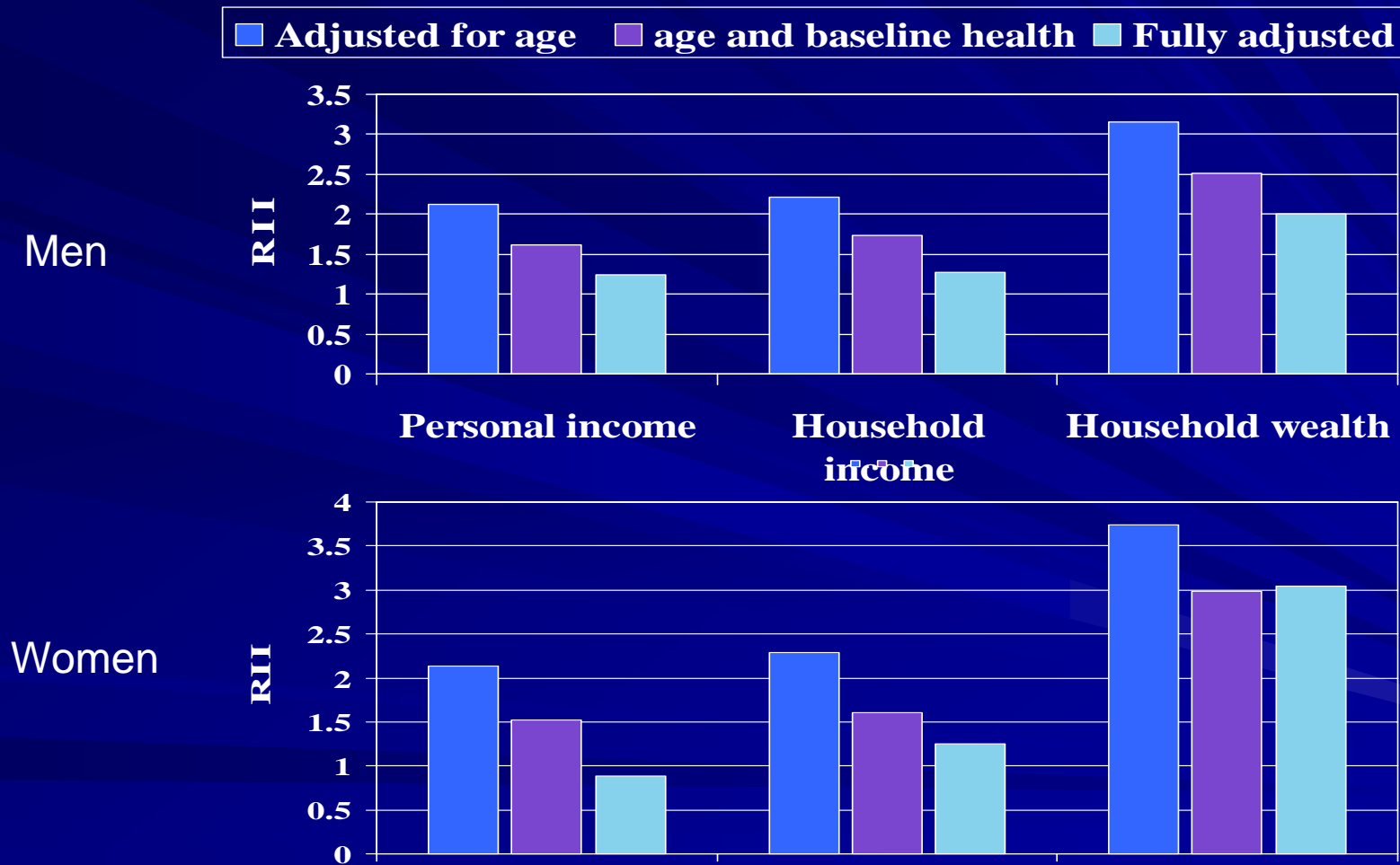
Source: Human Development Report 2005 and World Health Report 2005

Life expectancy and GDP per capita in \$US (PPP) in 2004

	LE at birth	GDP
Japan	82.2	29,251
Switzerland	80.7	33,040
Sweden	80.3	29,541
Spain	79.7	25,047
France	79.6	29,300
UK	78.3	30,821
Greece	78.3	22,205
Costa Rica	78.3	9,481
Chile	78.1	10,874
Cuba	77.6	5,700
US	77.5	39,676

(Human Development Report 2006)

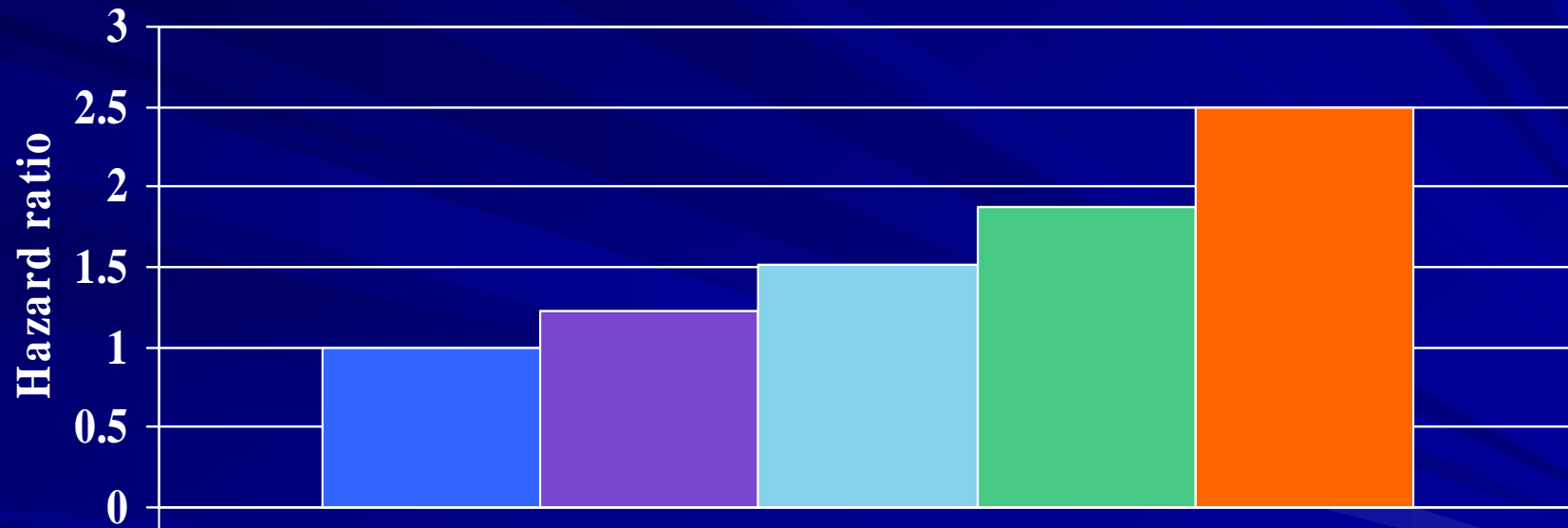
Changes in RII for income and wealth on *poor self-rated health* among men and women after adjustments: WII



Coronary events by economic difficulties: WII

(adjusted for age)

■ Lowest (0/0)
 ■ 0/1-2
 ■ 1-2/1-2
 ■ 0-2/3+
 ■ (3+/3+)



Total coronary events

Relative hazard ratio
between the bottom and
the top hierarchies

2.8 (1.9-2.4)

P-value for RII

< 0.001

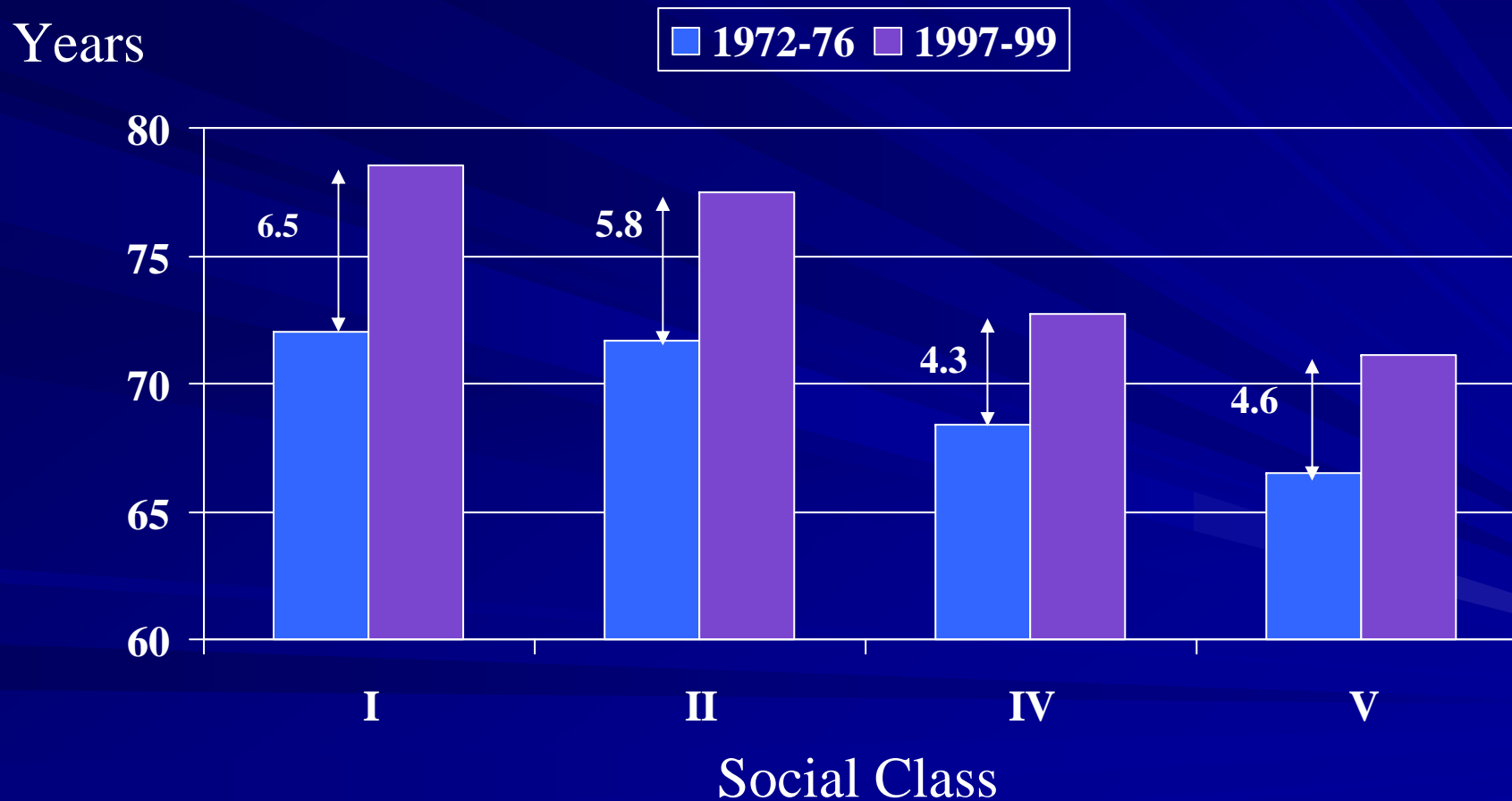
Ferrie et al, 2005

Hazard ratios for RII for economic difficulties and coronary events after adjustments

Adjustments	Total coronary events
Age	2.80 (1.9-4.2)
Model 1: age + SES measures	2.67 (1.7-4.1)
Model 2: model 1 + early life factors	2.70 (1.8-4.1)
Model 2 + psychosocial work characteristics	2.56 (1.7-3.9)
Model 2 + health-related behaviours	2.60 (1.7-4.0)
Model 2 + biological factors	2.42 (1.6-3.7)
All	2.28 (1.5-3.5)

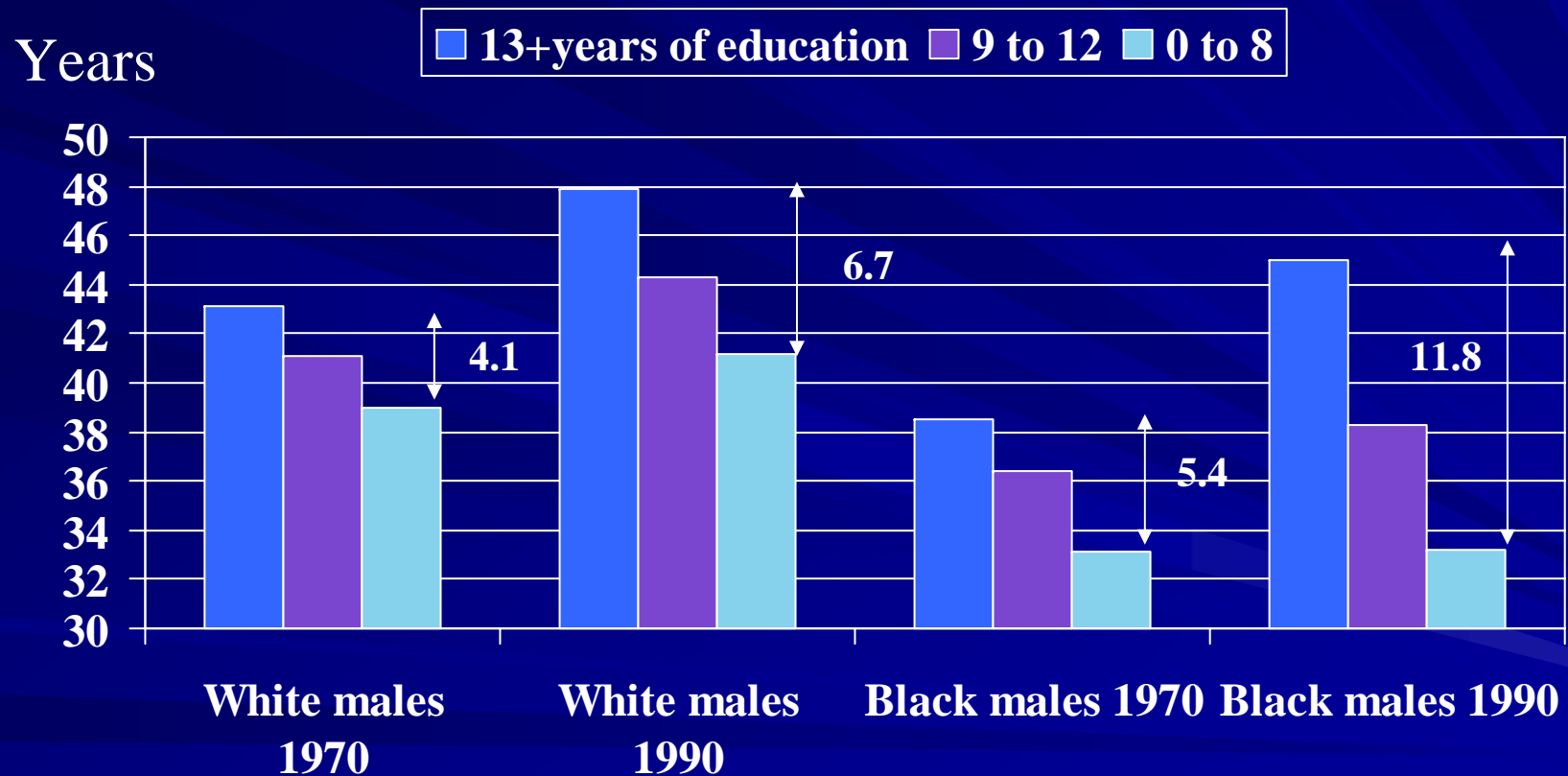
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Life expectancy at birth for men by social class in England and Wales



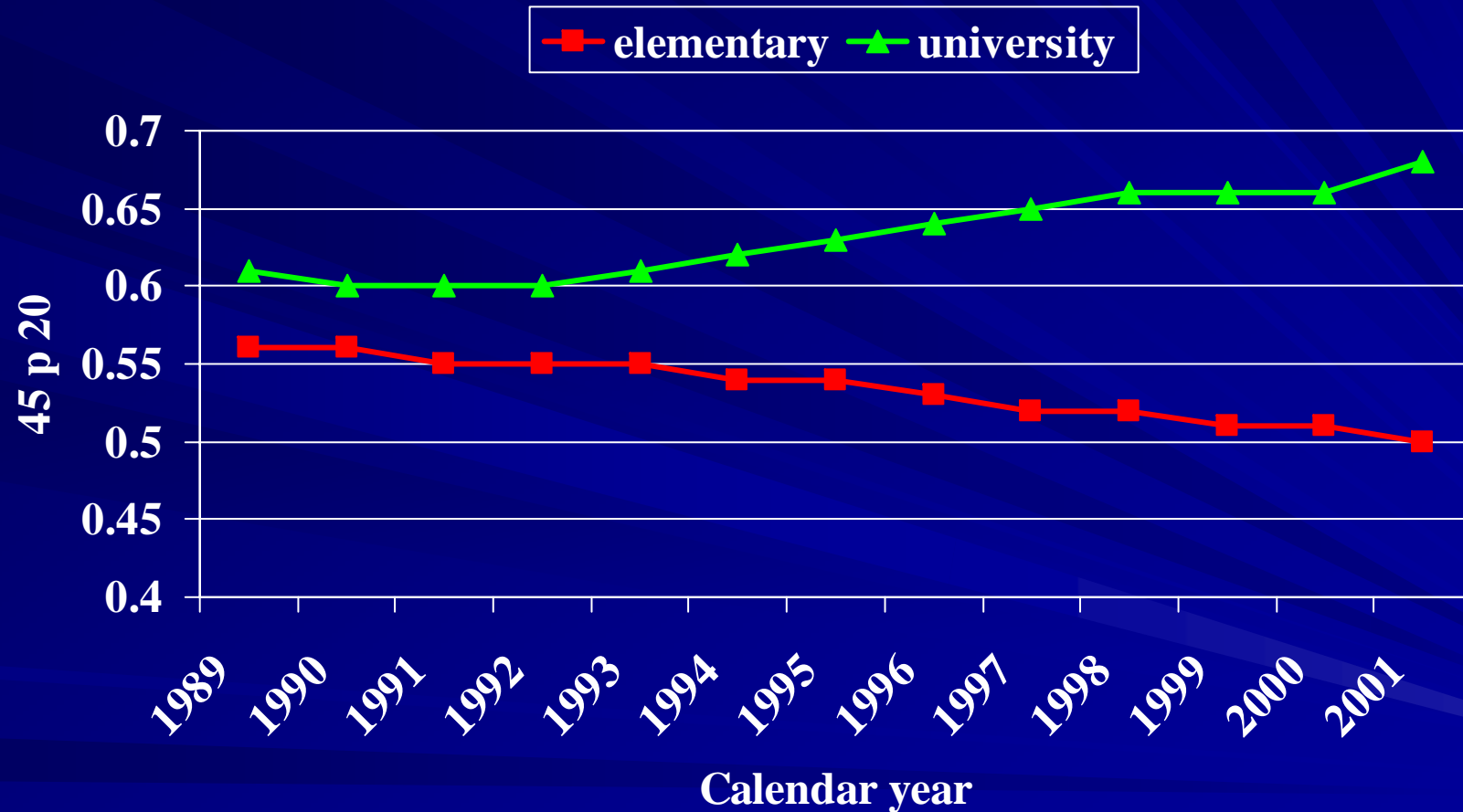
Source: Donkin, Goldblatt, and Lynch 2002

Life expectancy at age 30 by education for men in the US



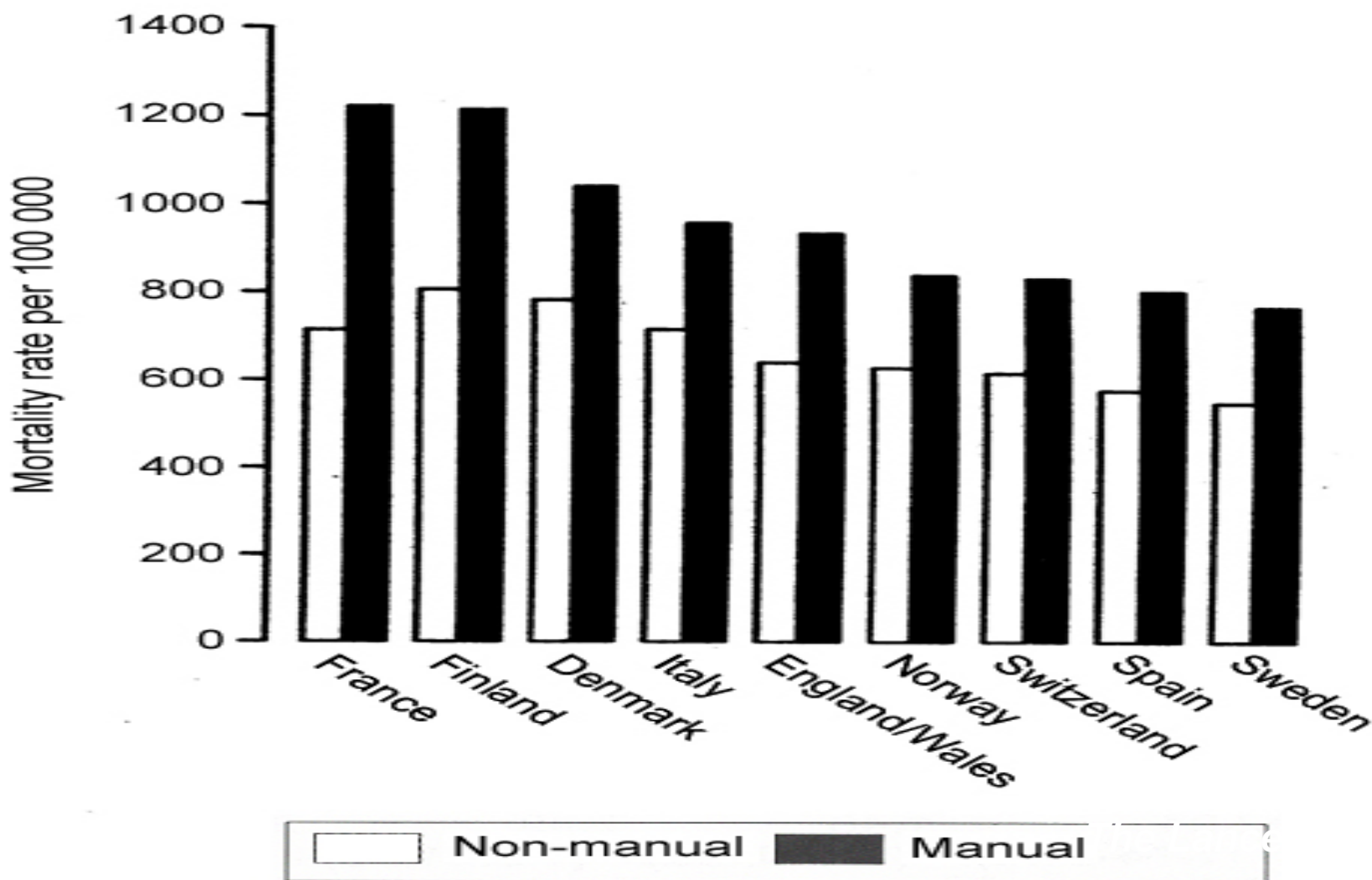
Source: Crimmins and Saito 2001

The widening trend in mortality by education in Russia, 1989-2001

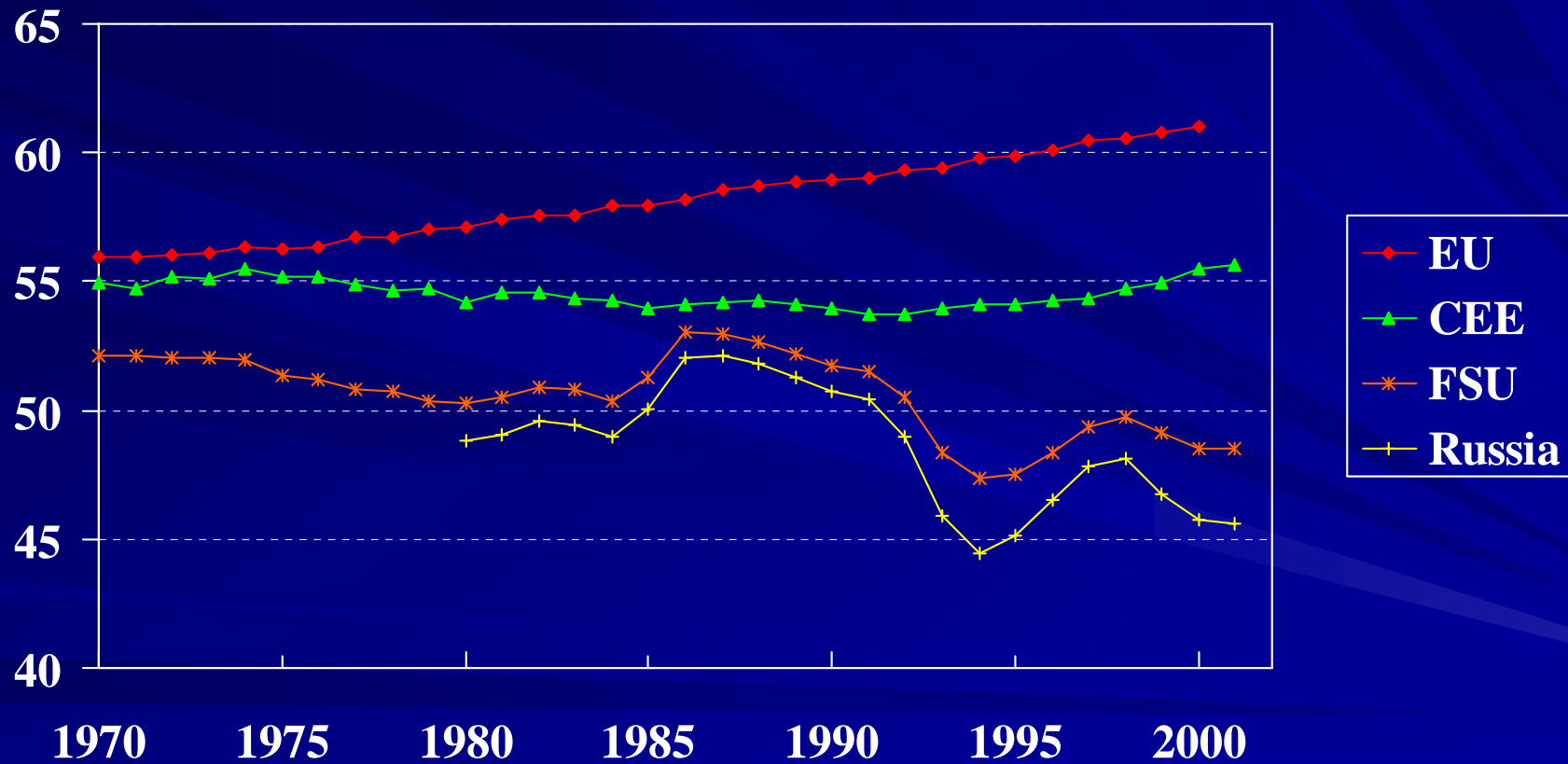


45 p20 = probability of living to 65 yrs when aged 20 yrs

Mortality for non-manual and manual workers
in nine European countries
Ranked by absolute level of mortality of
manual workers; age groups 45-59



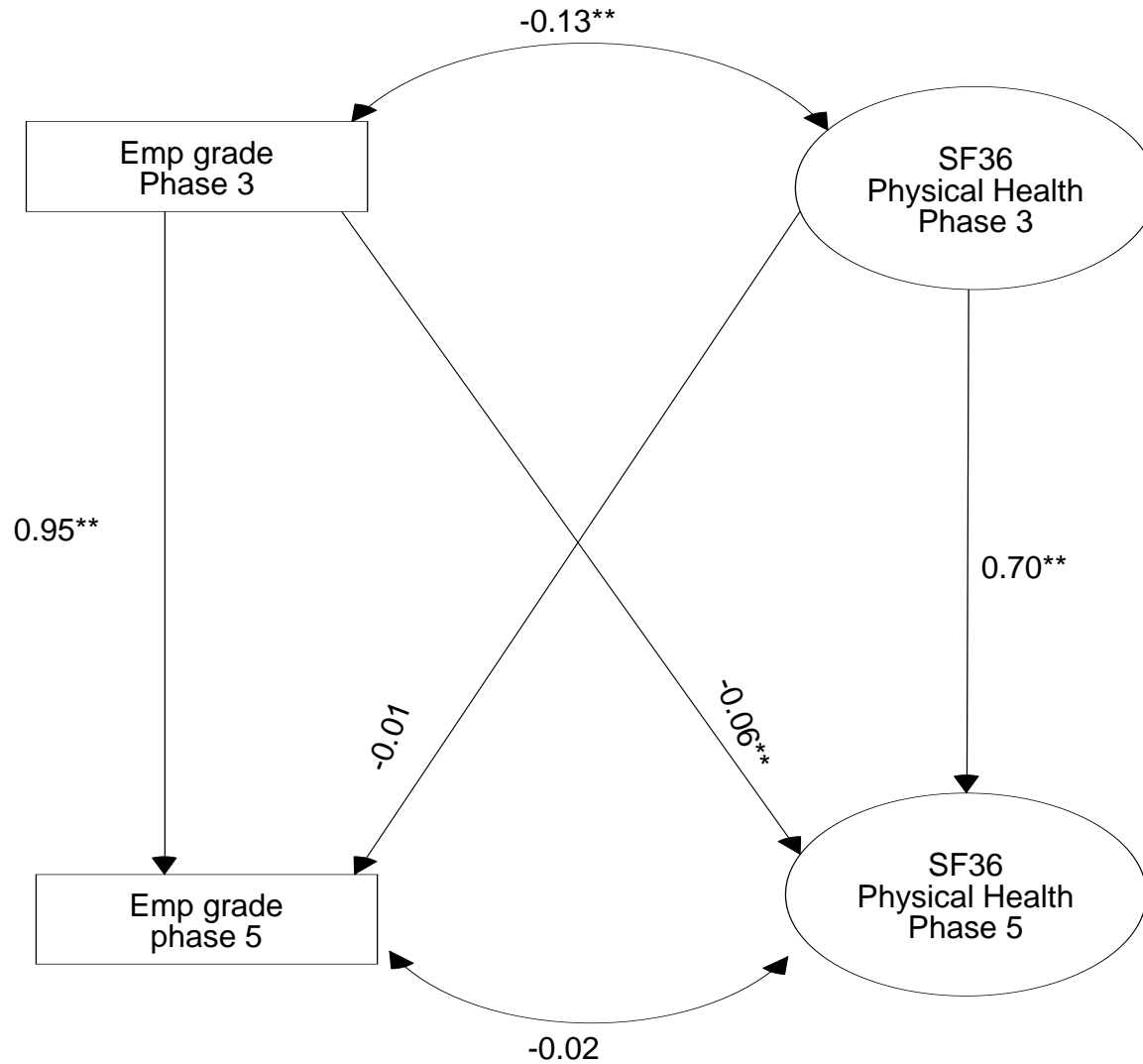
LIFE EXPECTANCY AT AGE 15 IN EUROPE, MEN, 1970-2001



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Cross lagged panel model of employment grade and physical health

men

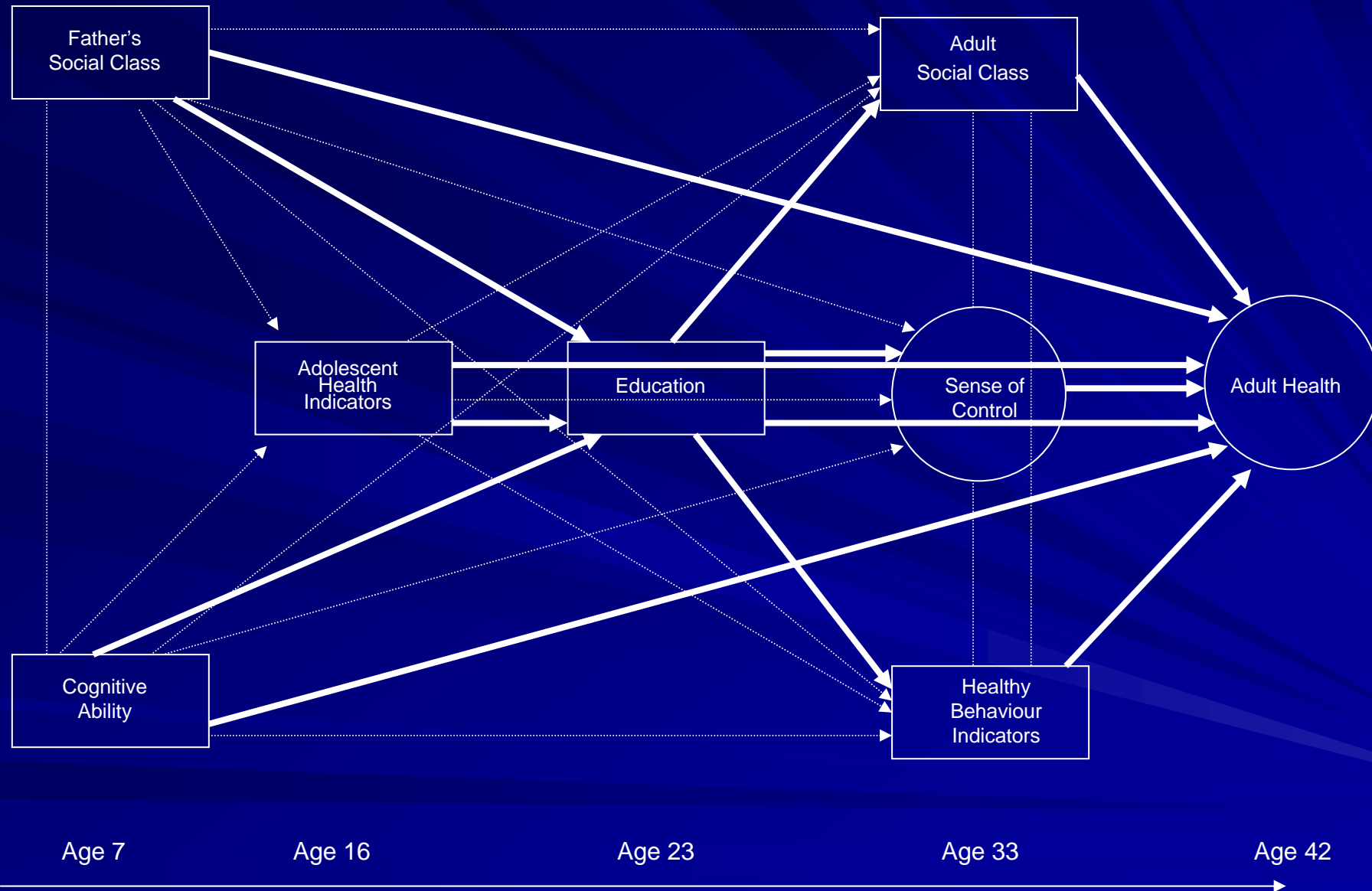


Correlation between adult health and adult SES when health related mobility path is removed
-0.02

social causation path is removed
-0.02

both cross lagged paths are removed
-0.02

'Health Selection in the Whitehall II study',
Chandola et al.
Soc Sci Med 2003



Chandola T, Clarke P, Morris, J N, Blane D. (2006) "Pathways between education and health: a causal modelling approach". *Journal of the Royal Statistical Society, Series A*, 169(2):337-359

1958 Birth Cohort

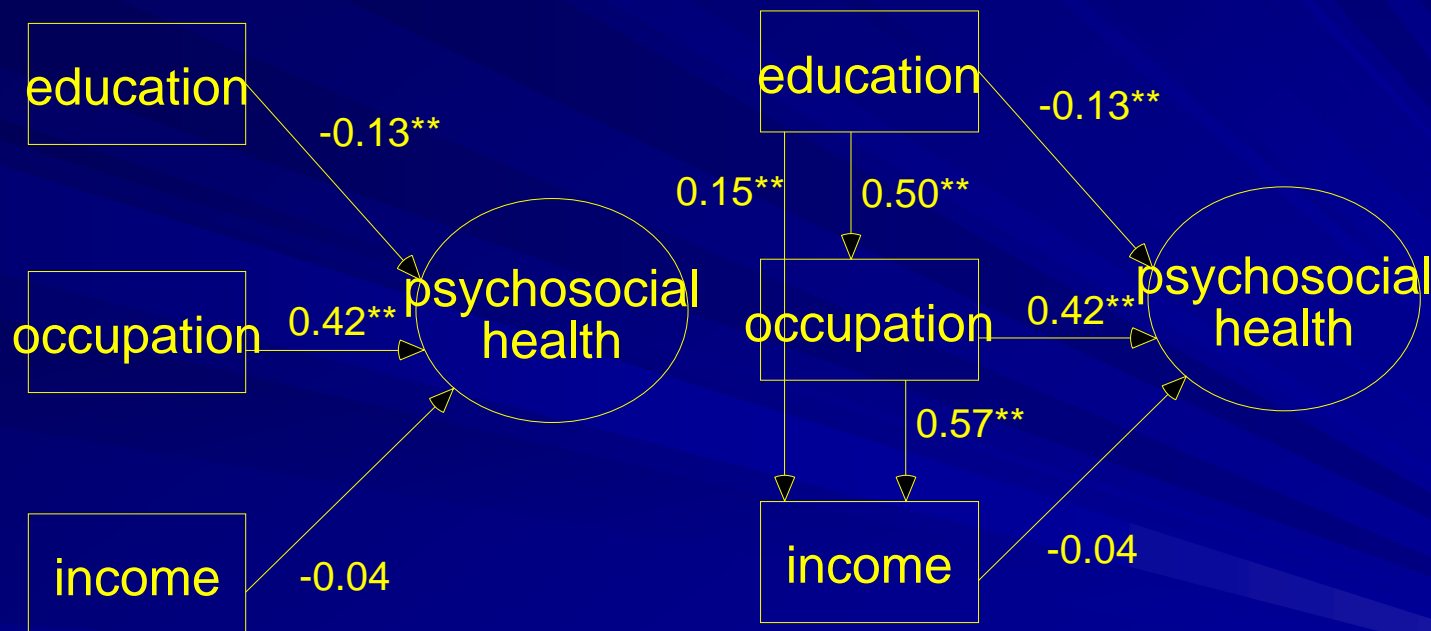
- The correlation between adult social class and adult health among men in the 1958 NCDS cohort reduced from -0.19 to -0.07 when adjusted for educational qualifications, father's social class and cognitive ability. Adolescent health (at age 16) did not contribute to reducing the social gradient in adult health.

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Causation

- Life course
- Behaviours
- Medical care
- Control
- Social supports
- Biology

Whitehall II – Is education related to health?



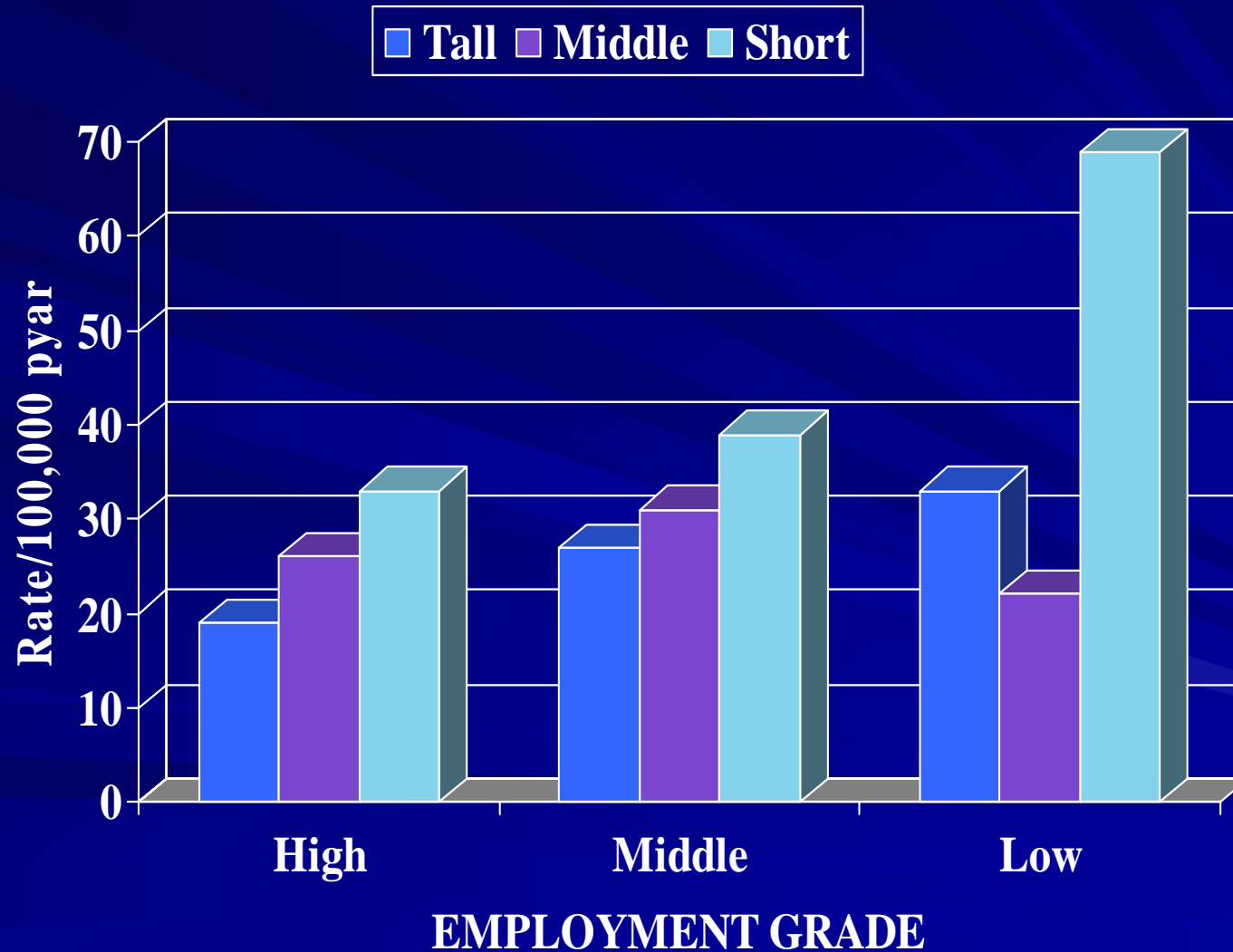
Multiple regression

Path analysis

Source: Singh-Manoux, Clarke & Marmot

Multiple measures of socio-economic position and psychosocial health: proximal and distal Measures; Int. J. Epidemiol. 31: 1192-1199.

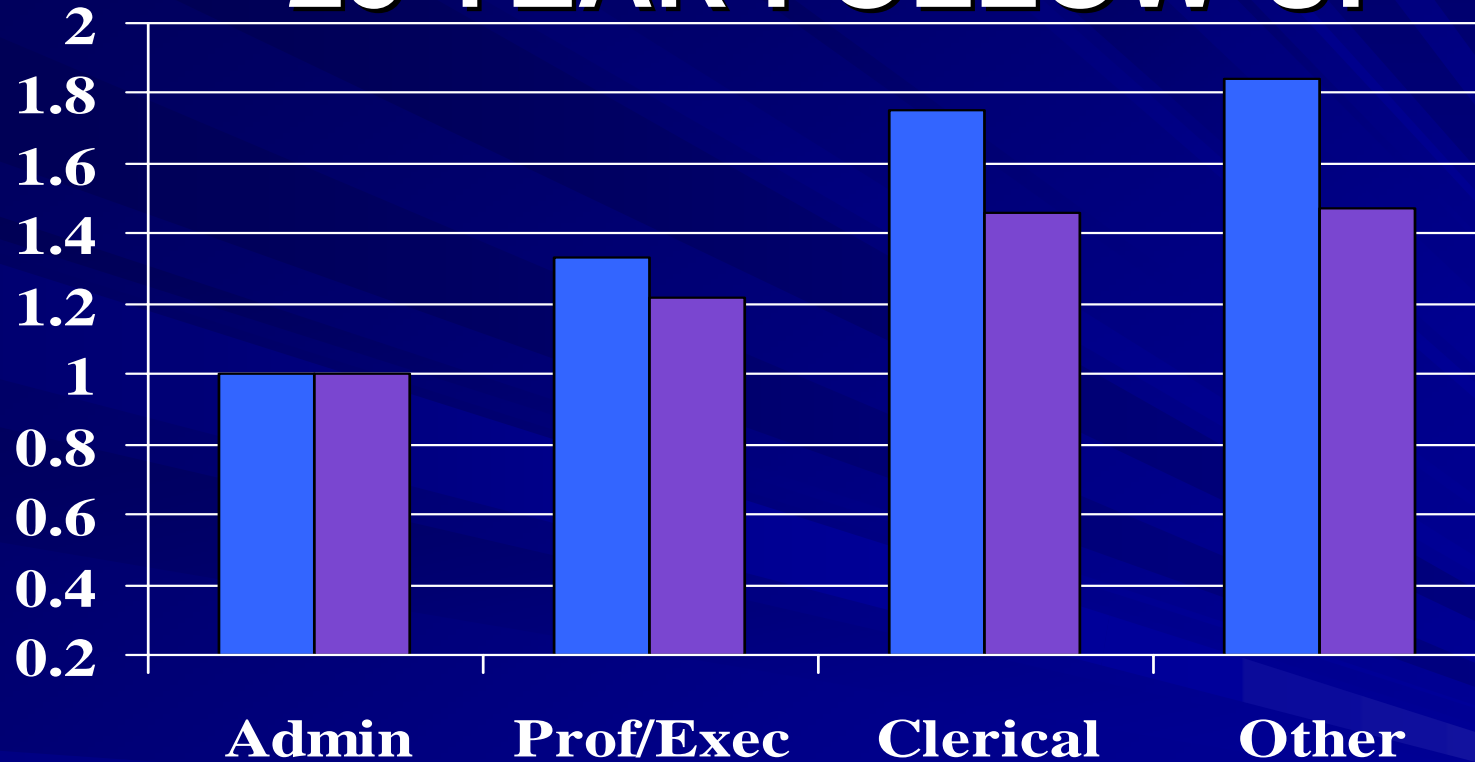
CHD death/MI incidence in 10 years by grade and height: M Whitehall II



Causation

- Life course
- **Behaviours**
- Medical care
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WHITEHALL CHD MORTALITY 25 YEAR FOLLOW-UP



■ Adjusted for age
 ■ Adjusted for other risk factors

controlling for (a) age, and (b) age, smoking systolic blood pressure, plasma cholesterol concentration, height and blood sugar

Causation

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Total expenditure on health as % of GDP (2003)

	%	LE at birth 2004 (both sexes)
USA	15.2	78
UK	8	79
Cuba	7.3	78
Japan	7.9	82
Sweden	9.4	81
Iceland	10.5	81

EXPENDITURE ON MEDICAL CARE PER CAPITA IN US AND UK

- UNITED STATES:

 - US\$ 5274

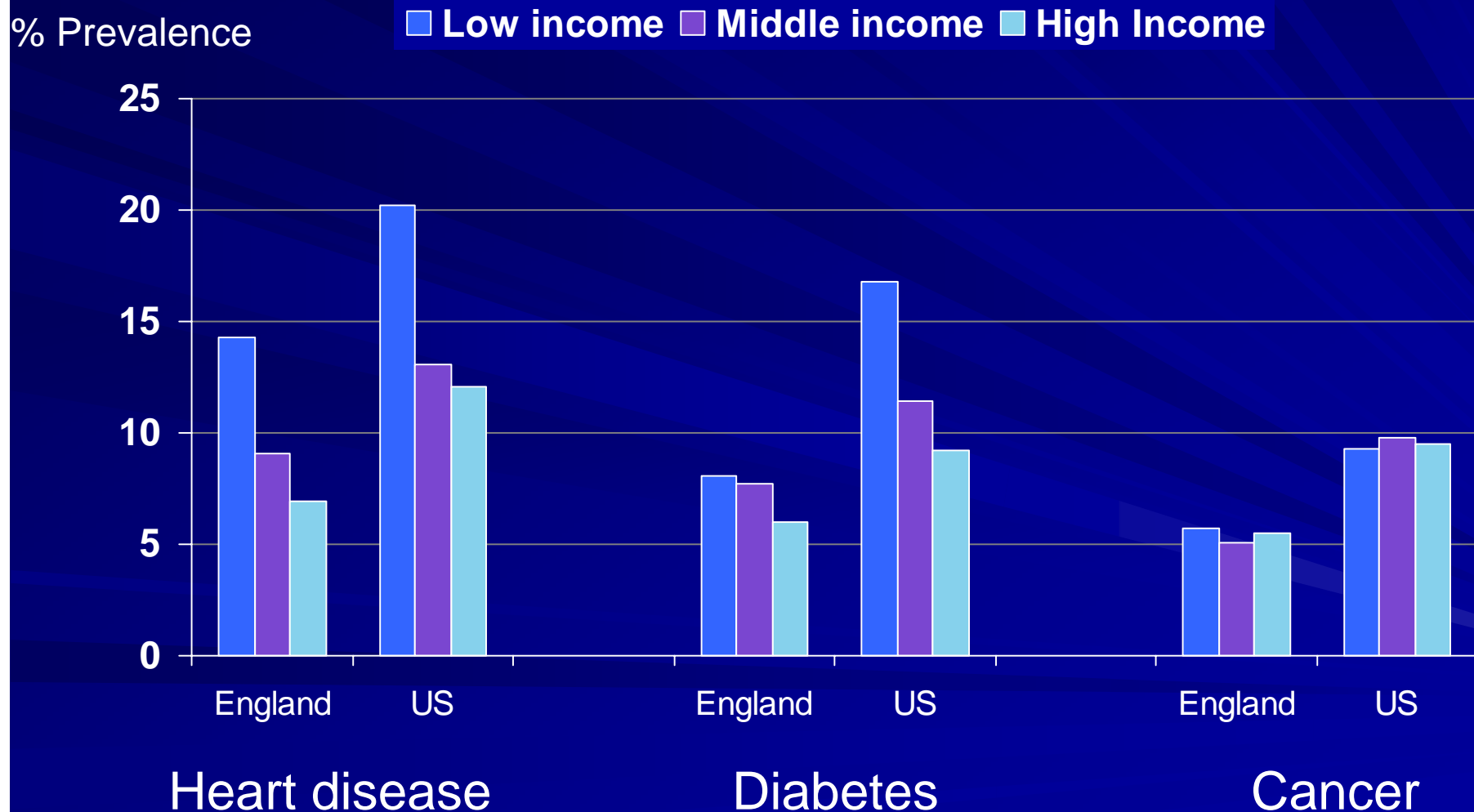
- UNITED KINGDOM:

 - US\$ 2164 (adjusted for purchasing power)

(Human Development Report 2005)

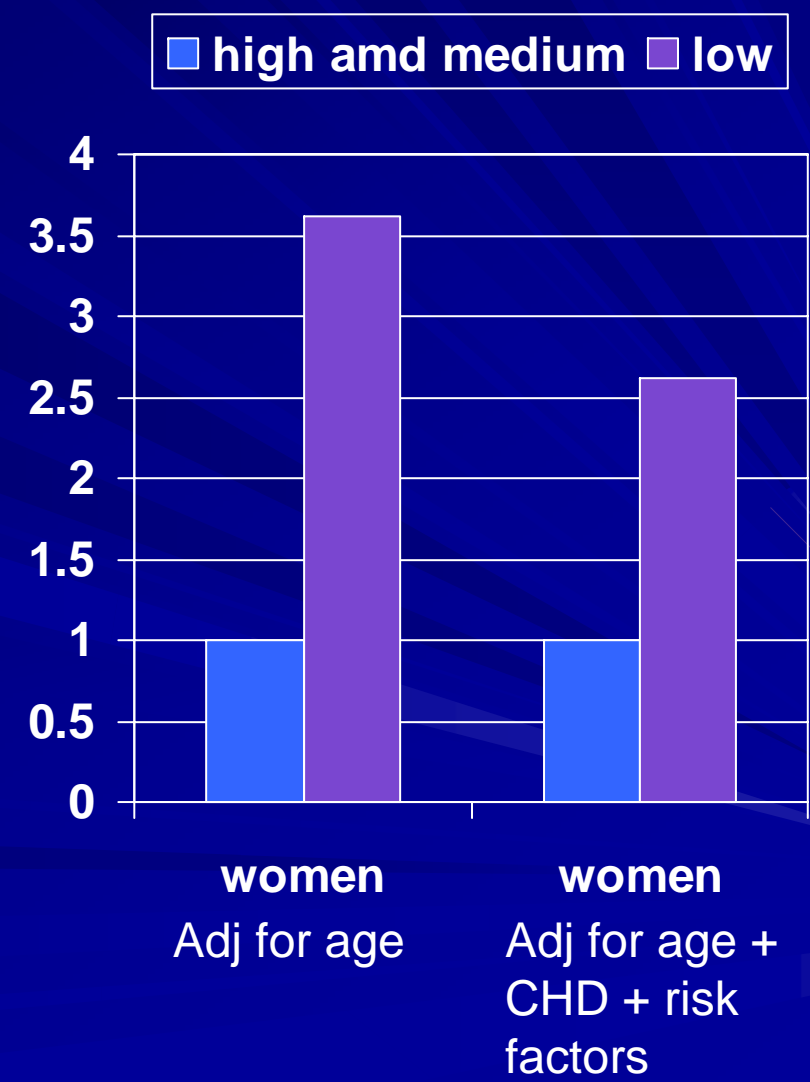
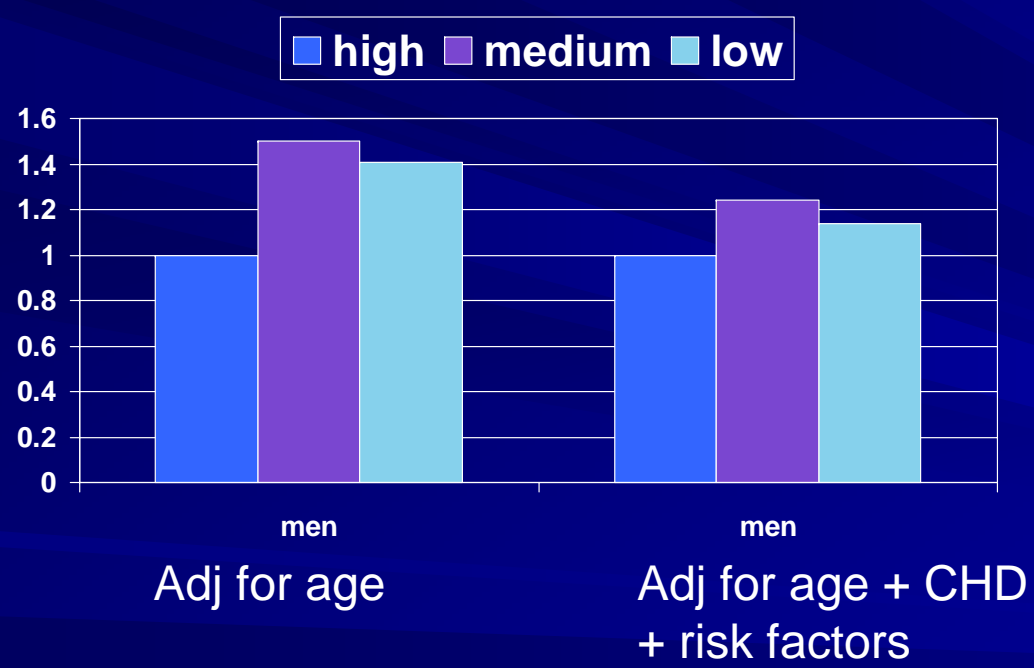
HEALTH DIFFERENCES BETWEEN ENGLAND AND THE US

55-64 year olds



Source: Banks, Marmot, Oldfield and Smith; JAMA 2006

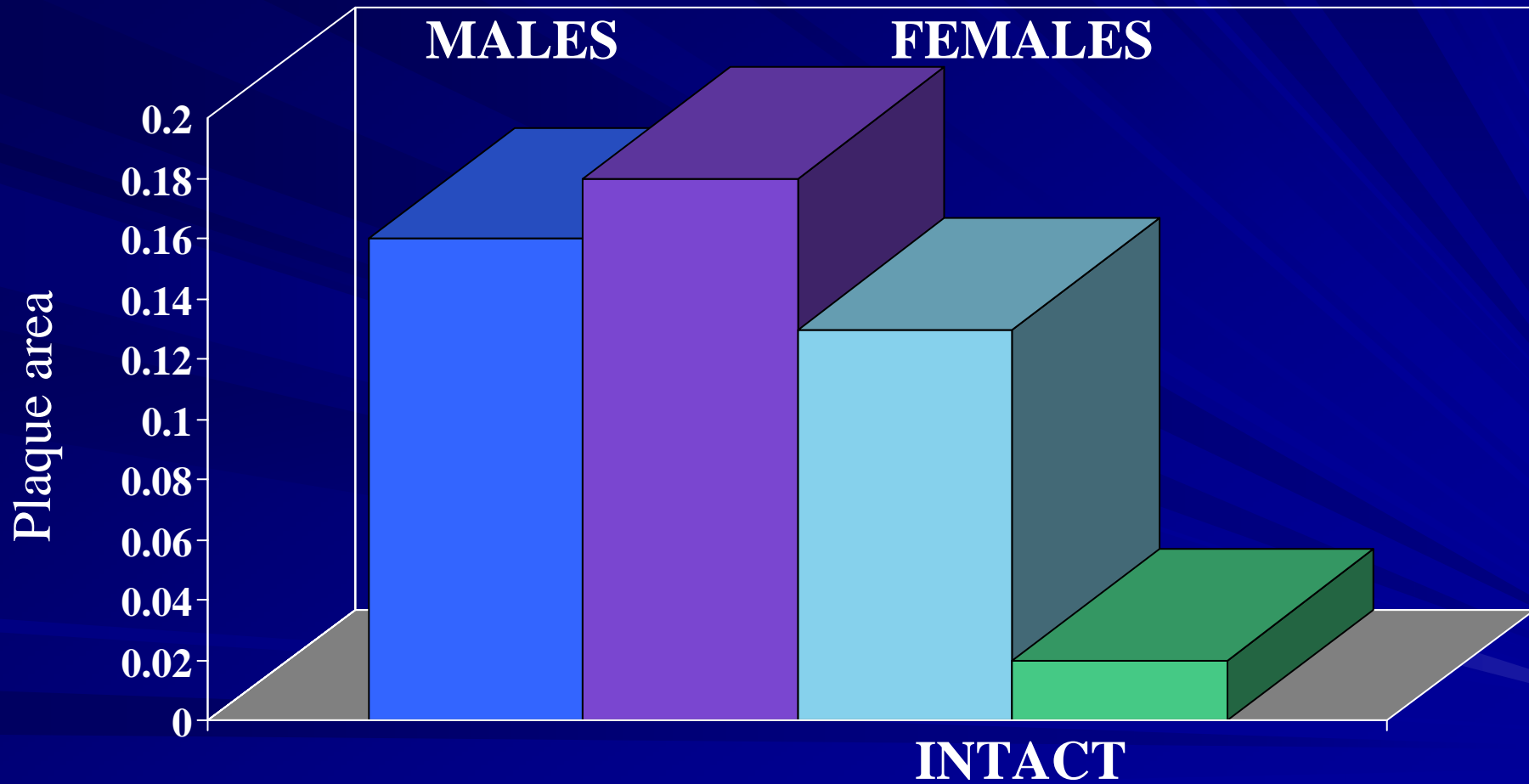
Medical care (revascularization) and employment grade: Whitehall II



Britton et al BMJ: 329, 381, 2004

ATHEROSCLEROSIS IN MONKEYS

■ OVARIECTOMY
 ■ SUBORDINATE
 ■ DOMINANT

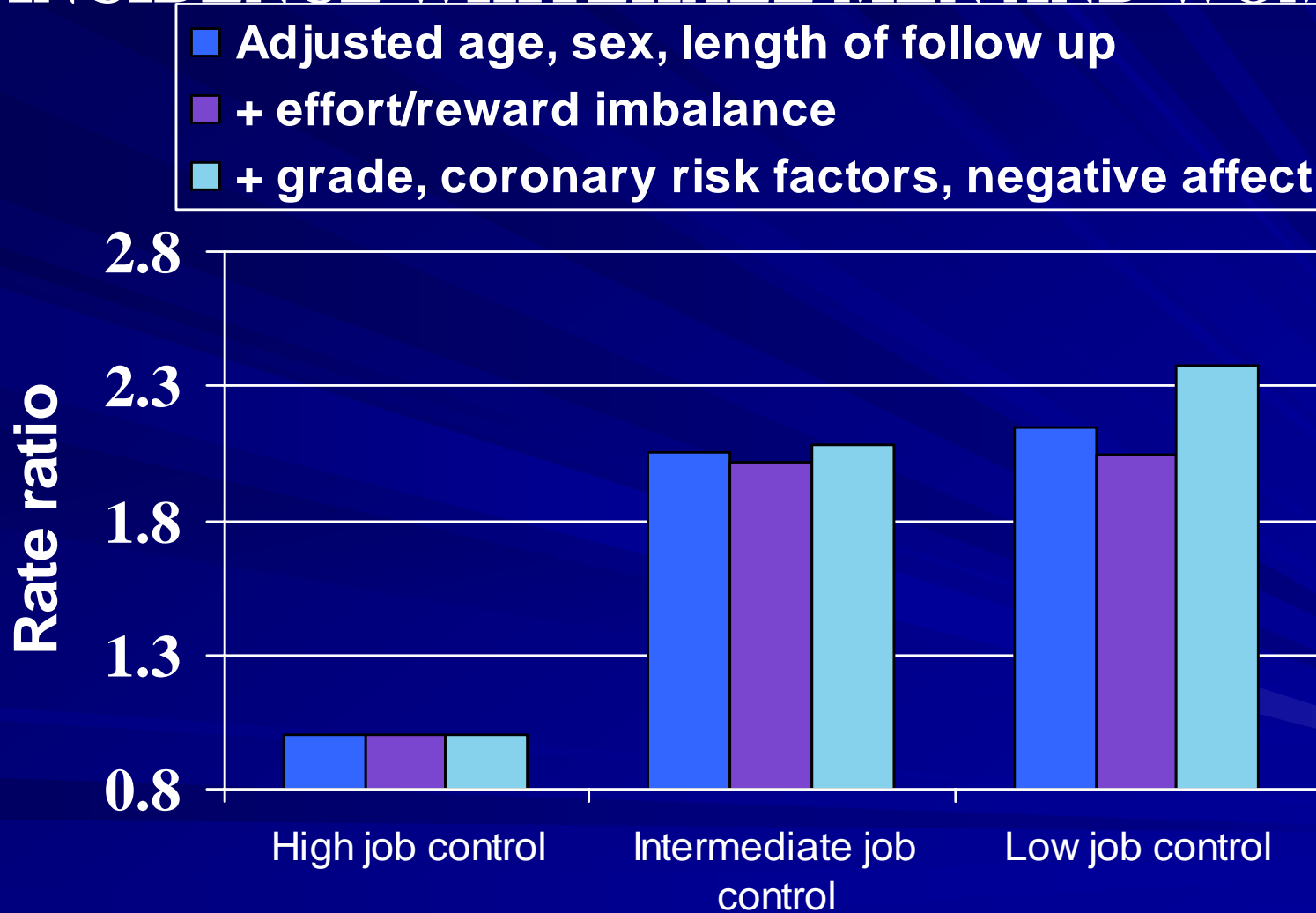


Shively, 1999

Causation

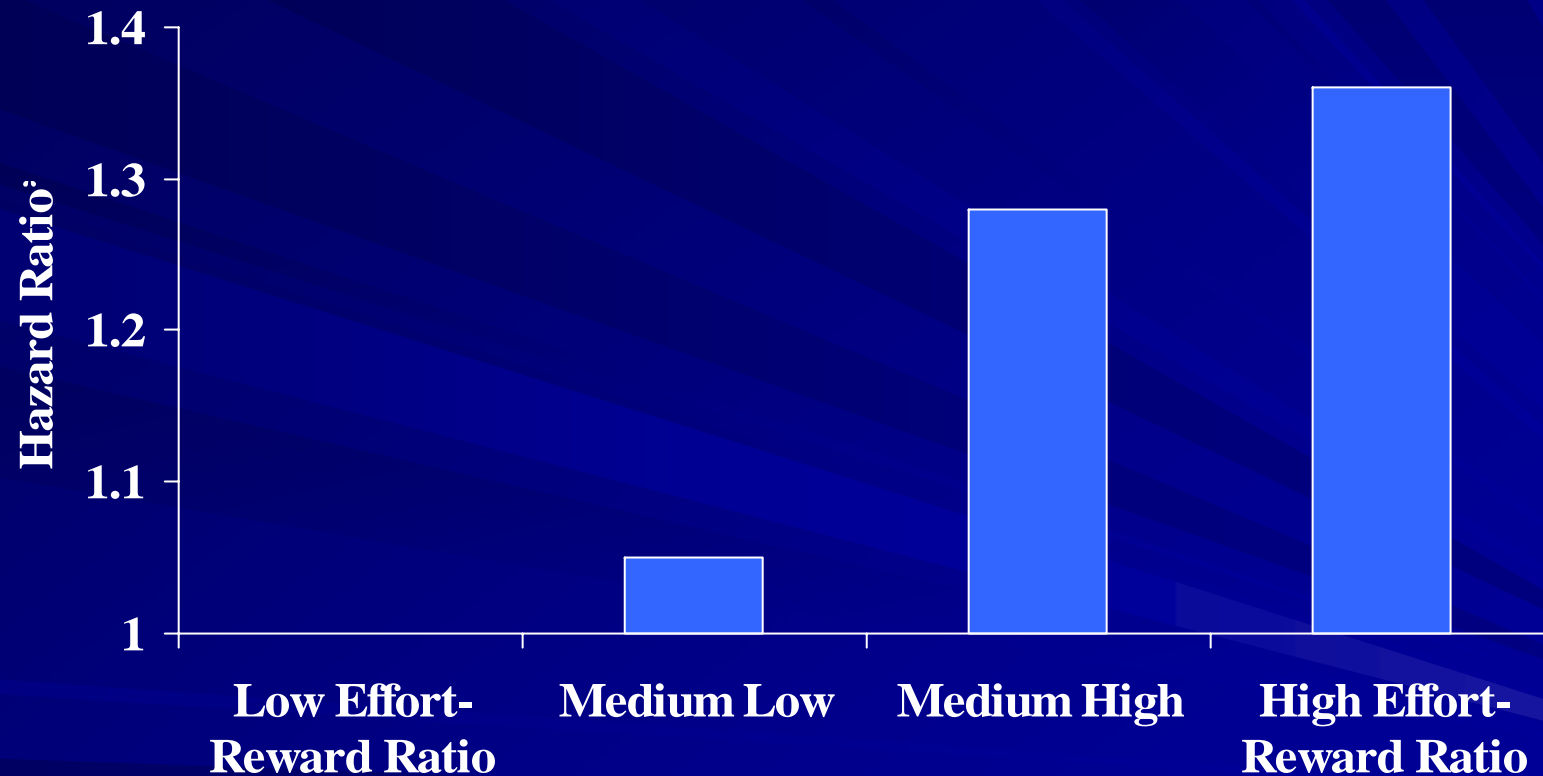
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SELF-REPORTED JOB CONTROL AND CHD INCIDENCE WHITEHALL MEN AND WOMEN



Bosma et al, 1998

EFFORT-REWARD IMBALANCE AND CHD WHITEHALL II

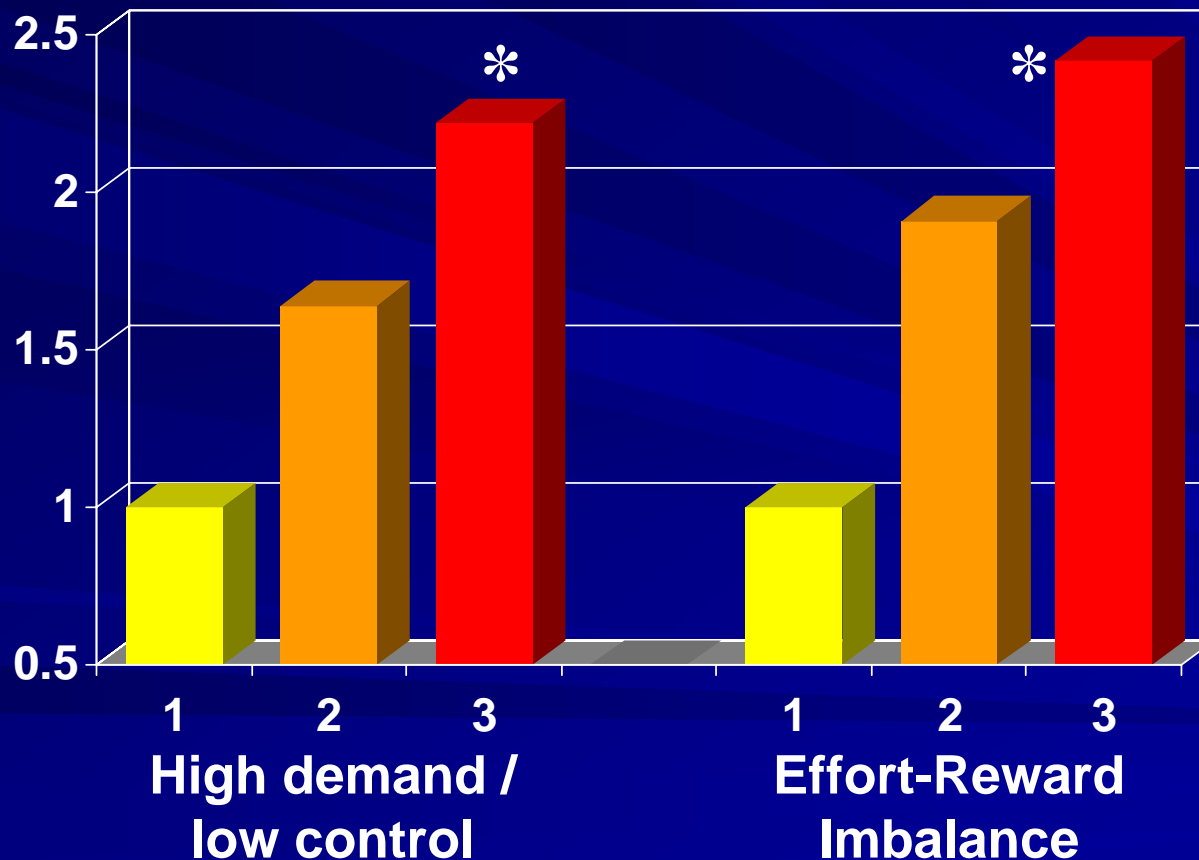


*Adjusted for age, sex and grade

(Kuper et al. 2002, Occup Environ Med, 59, 777-784)

Adjusted hazard ratios for cardiovascular mortality by levels of work stress[#]

N_{max}=812 (73 deaths); mean follow-up 25,6 years



Tertiles
 1 = low;
 2 = intermediate;
 3 = high

[#]adj. for age, sex,
 occupational group,
 smoking, physical
 activity, SBP,
 total chol., BMI

* p < .05

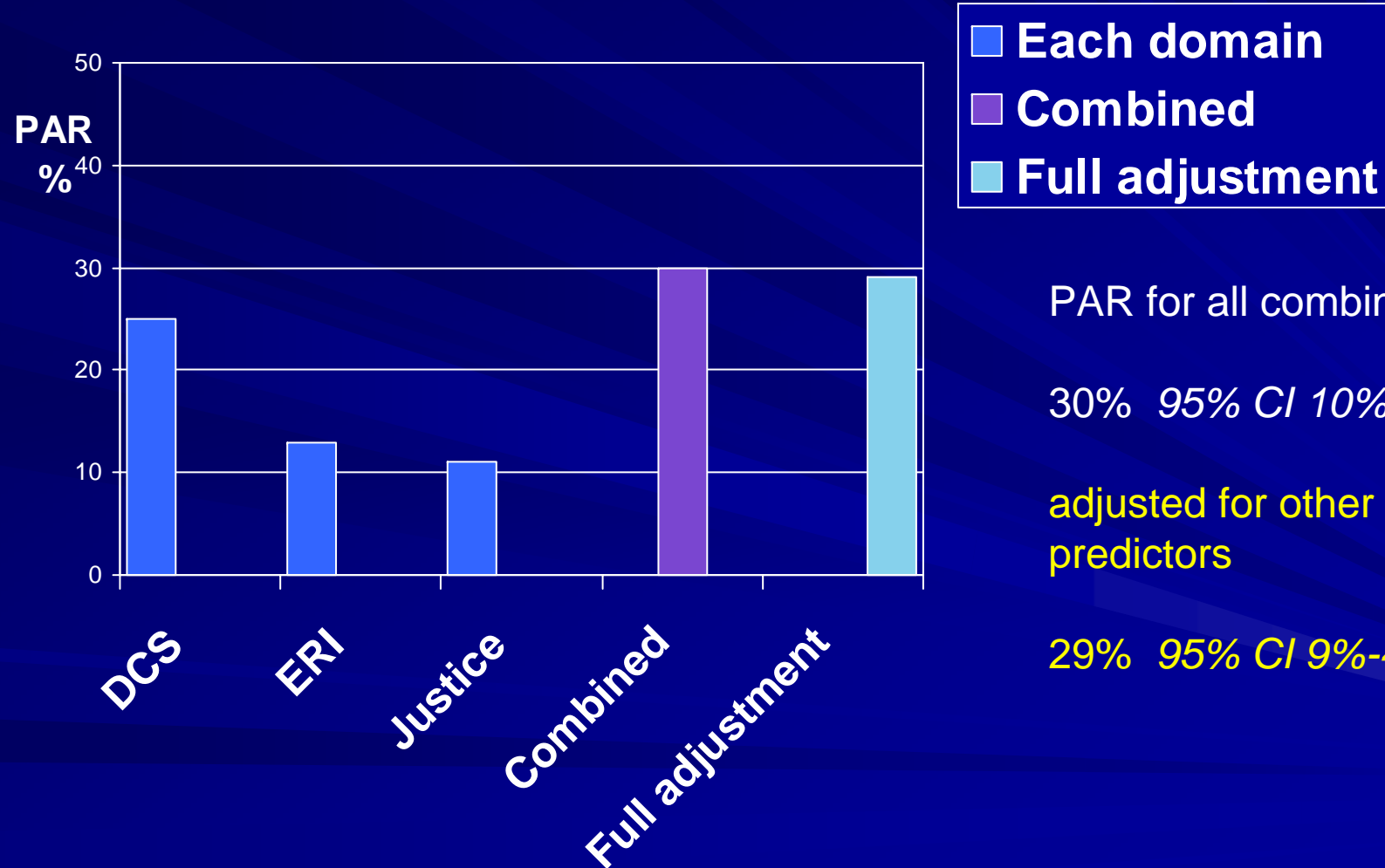
Source: M. Kivimäki et al. (2002), BMJ, 325: 857

Meta-analysis

Work stress is associated with a 50% excess risk of coronary heart disease

Model	N	HR (age- & sex-djusted)
Job strain	83 014	1.45
ERI	11 528	1.58
Injustice	7 246	1.47

PAR* for coronary heart disease (fatal CHD/non fatal MI/definite angina)



PAR for all combined *

30% 95% CI 10%-46%

adjusted for other predictors

29% 95% CI 9%-45%

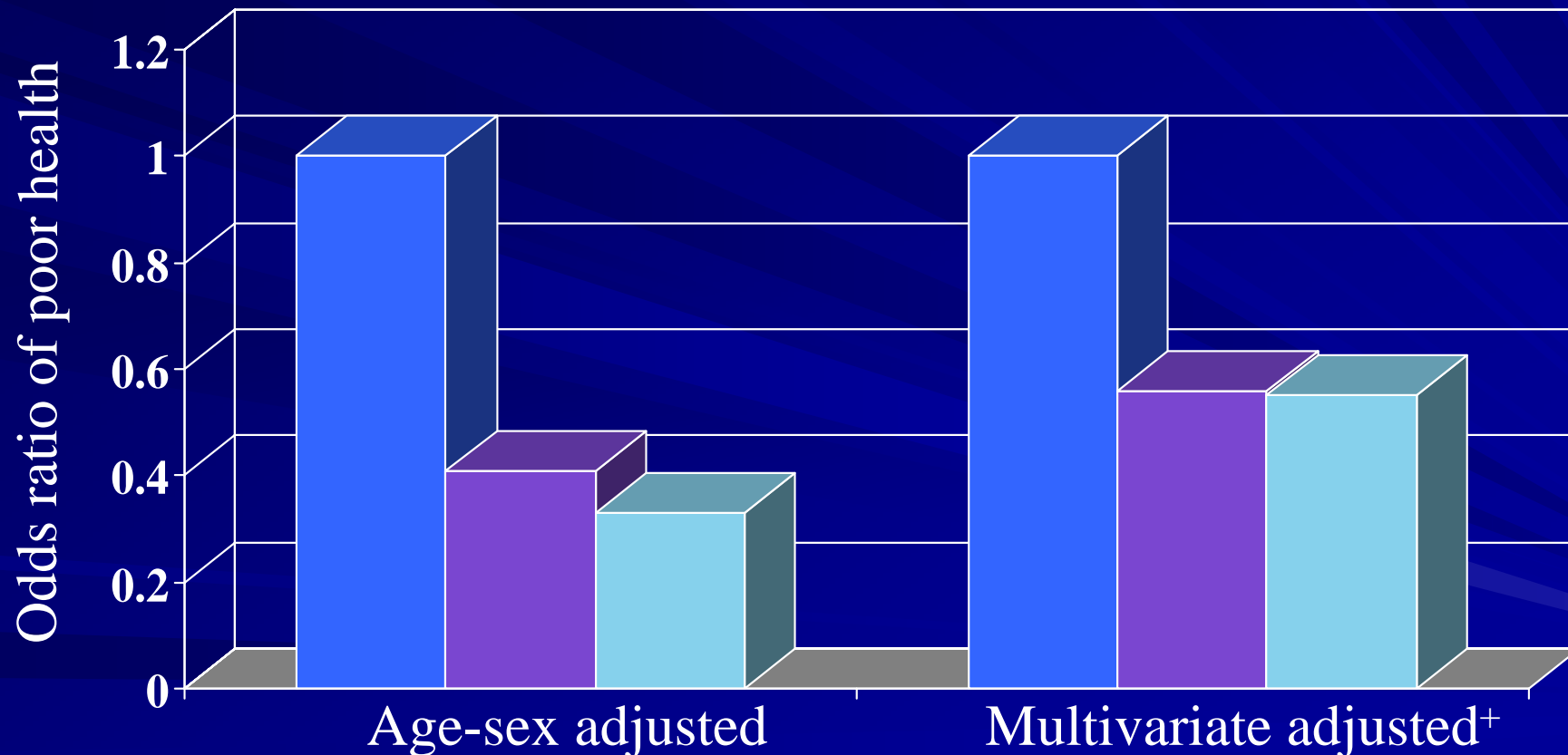
*Population attributable risk
odds ratios adjusted for age, sex, employment grade

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POOR HEALTH IN HUNGARY BY SOCIALLY* ORIENTED ITEMS

0-2 items 3-5 items 6-7 items



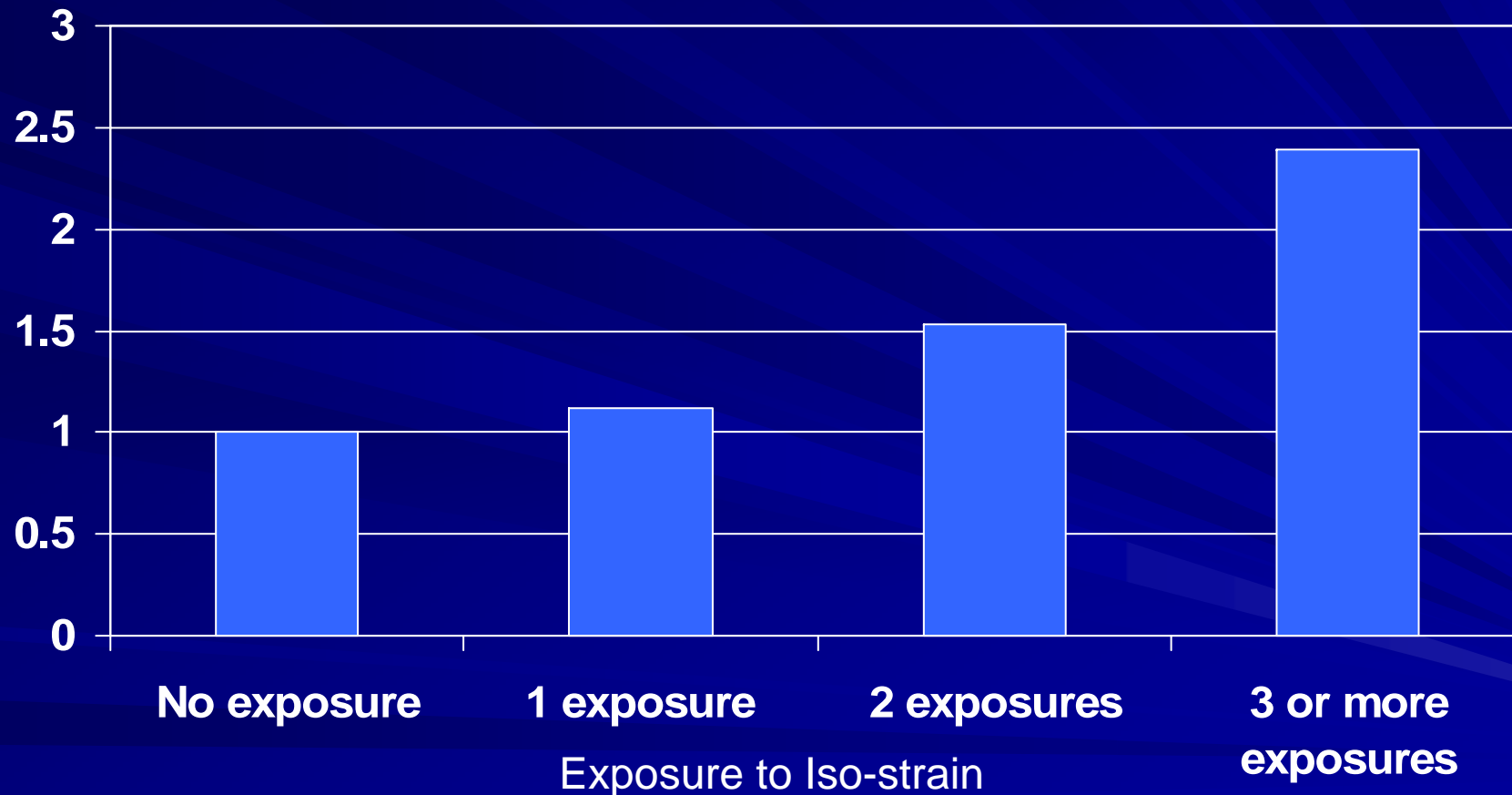
* colour tv, radio, record player, stereo system, motorbike, car, car radio
 + age, sex, educ, marital, material deprivation
Pikhart 2000

Causation

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- **Biology**

ODDS RATIO* OF METABOLIC SYNDROME BY EXPOSURE TO ISO-STRAIN: WHITEHALL II PHASES 1 TO 5

Odds Ratio



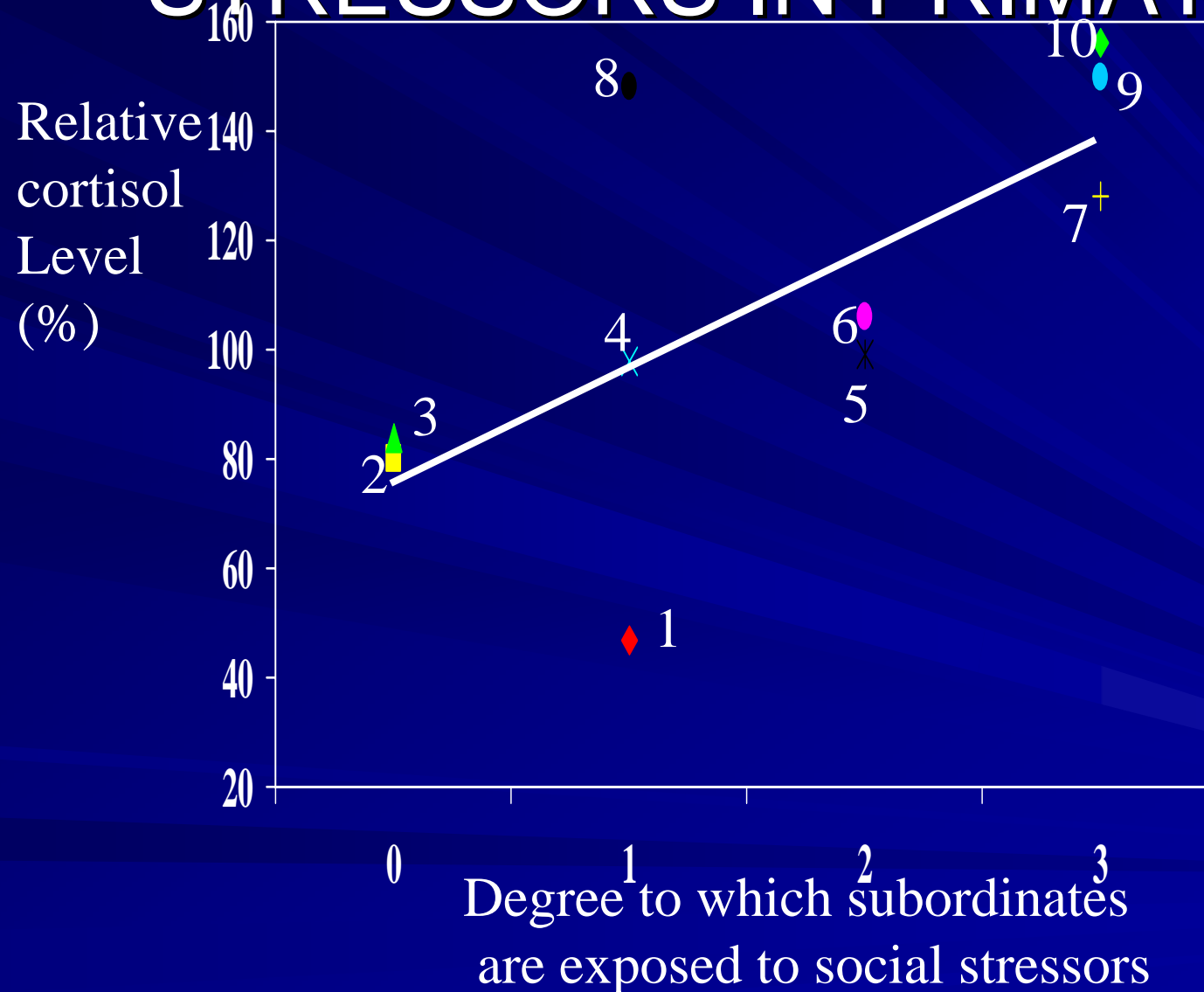
*Adj. for age, employment, grade and health behaviours

Chandola, Brunner & Marmot, BMJ, 2006

MECHANISMS

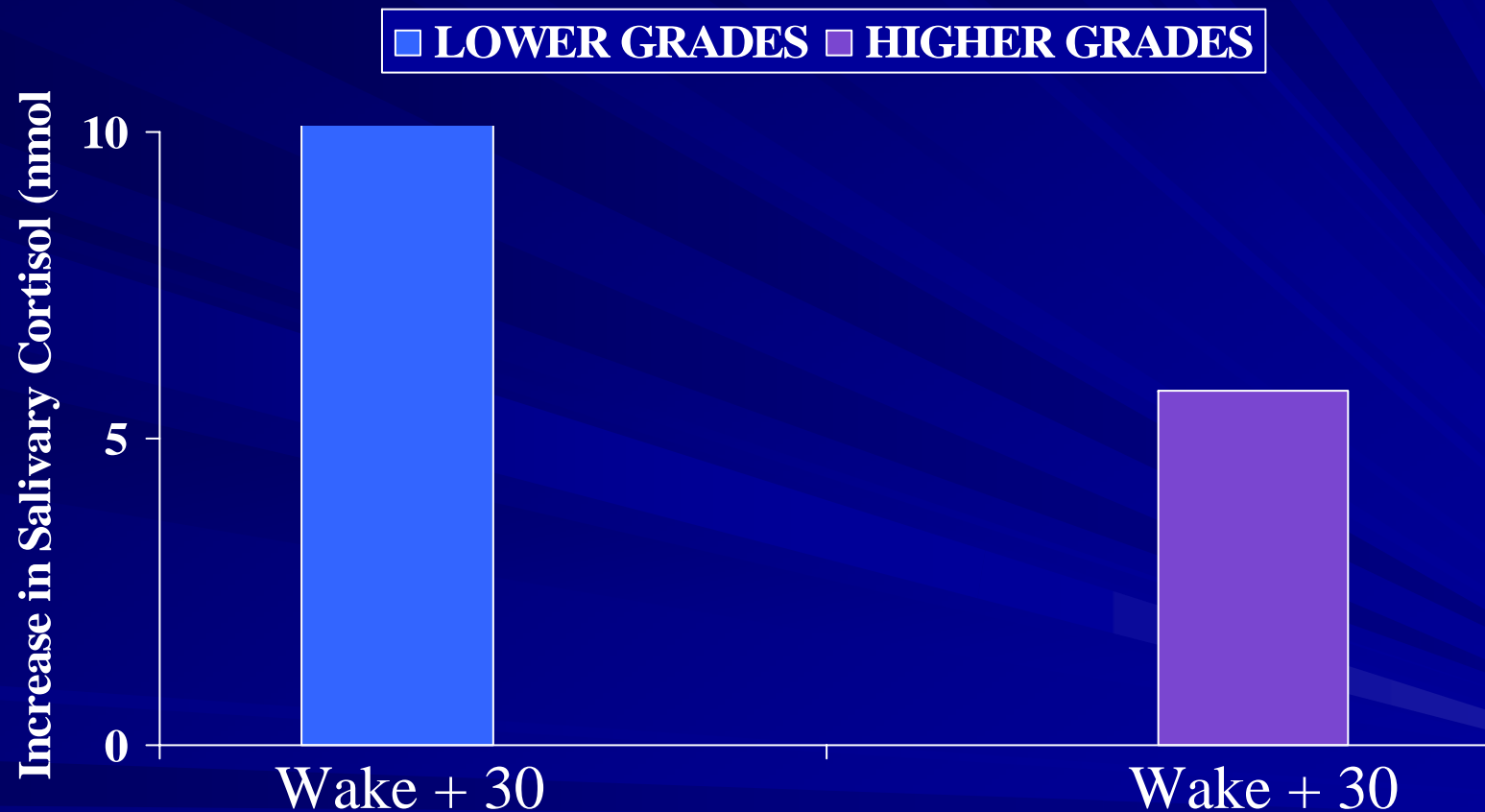
- HYPOTHALAMIC PITUITARY
AXIS HPA – CORTISOL
- SYMPATHETIC/PARASYMPATH
ETIC

STRESSORS IN PRIMATES



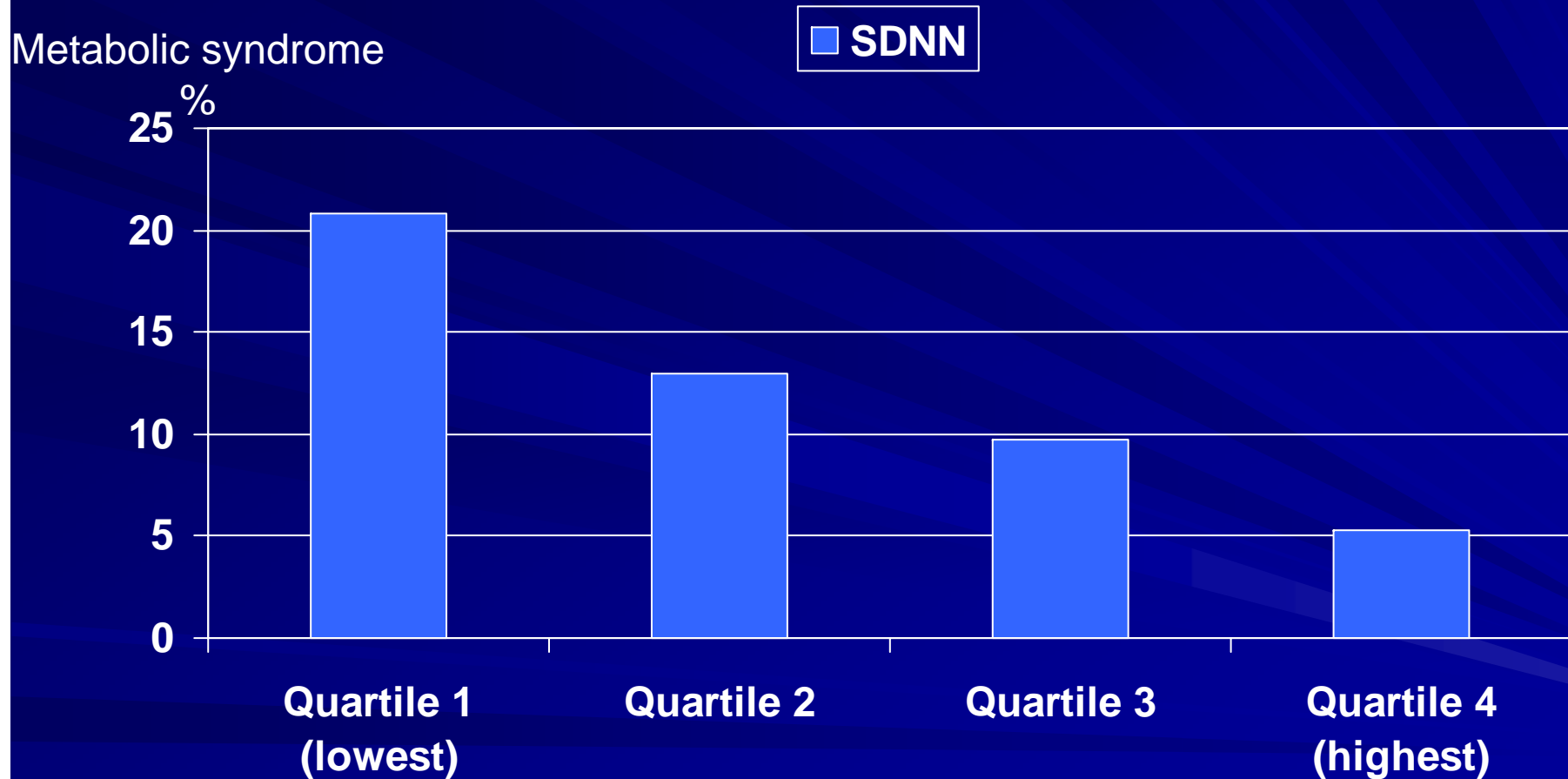
Adapted from: Abbott et al. *Hormones and Behavior* 43 (2003) 67-

CORTISOL AWAKENING RESPONSE AND EMPLOYMENT GRADE - WHITEHALL II



(Kunz-Ebrecht et al. Psychoneuroendocrinology, 2004)

METABOLIC SYNDROME AND HEART RATE VARIABILITY: W II STUDY MEN



(Hemingway et al. Circulation, 2005)

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Commission on Social Determinants of Health 2005 -2008

- Commissioners
- 9 Knowledge Networks
- Partner Countries
- Civil society work
- Global initiative
- WHO integration



Set up by the World Health Organisation

www.who.int/social_determinants

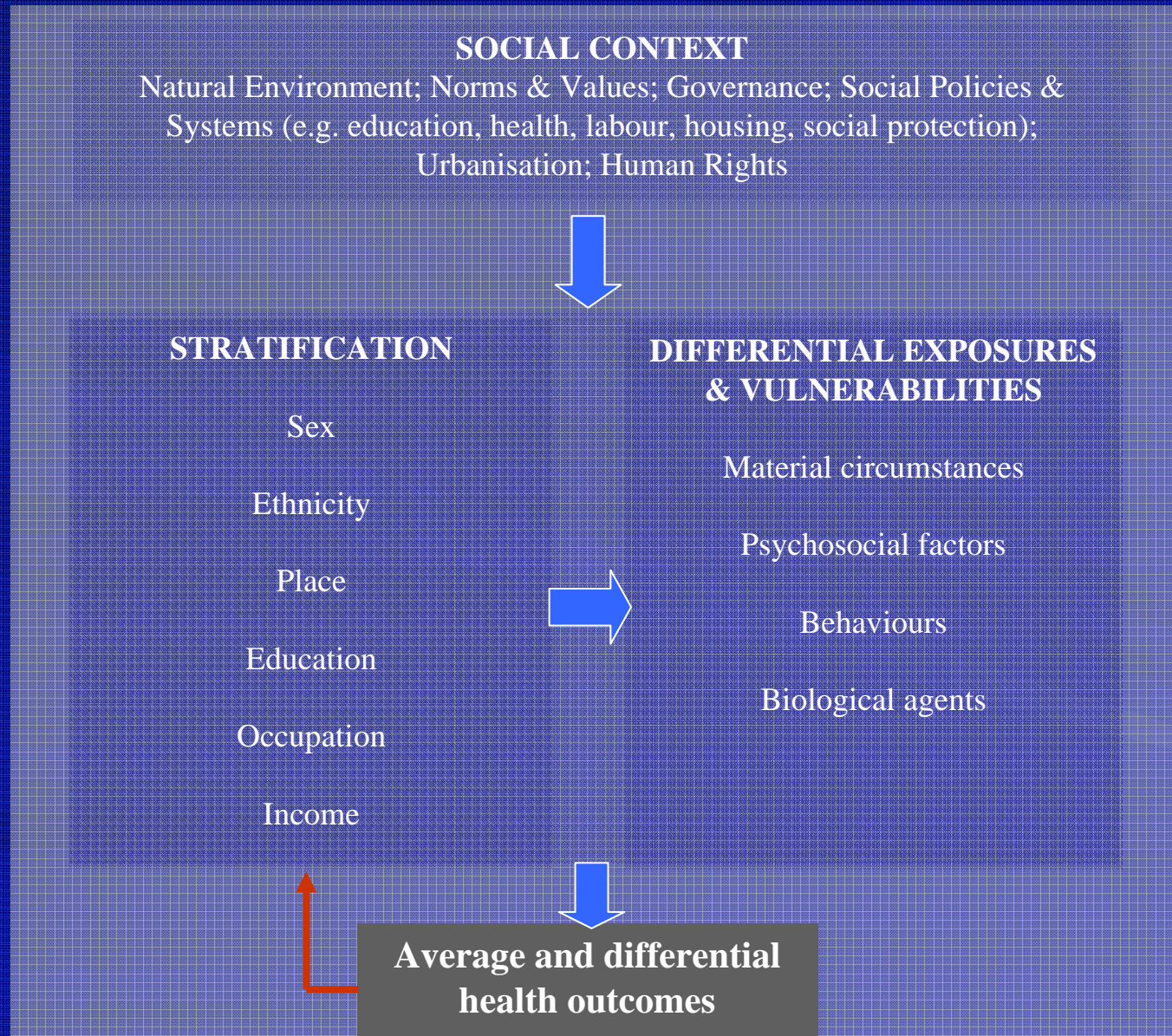


7th Commissioners meeting at WHO, Geneva, Jan 2007

Conceptualising the Social Determinants of Health

GLOBALISATION

GOVERNANCE FOR HEALTH



Policy Entry Points

- Social stratification – people's social position related to their health
- Differential exposure to health damaging conditions
- Differential vulnerability
- Differential consequences of ill health

Level

- Global
- Regional
- National
- Local
- Household
- Individual

**STATUS
SYNDROME**

**MICHAEL
MARMOT**

STATUS SYNDROME

**HOW OUR SOCIAL STANDING
AFFECTS OUR HEALTH
AND LONGEVITY**



**MICHAEL
MARMOT**



