Cumulative childhood adversity and active life expectancy among US adults

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Studies of the early-life origins of adult physical functioning and mortality risk find that childhood health and socioeconomic context are particularly important predictors, often irrespective of adult experiences. However, these studies generally assess functioning and mortality as distinct processes and rely on cross-sectional prevalence estimates that neglect the interplay of disability incidence, recovery, and mortality. We hypothesized that early-life disadvantages both shorten lives and increase the number of years lived with functional problems, and that one's educational attainment could at least partially overcome the health consequences of early-life disadvantages. Drawing on the 1998-2008 Health and Retirement Study, we examined these hypotheses for non-Hispanic whites and blacks 50 to 100 years of age using multistate life tables. Within levels of educational attainment, adults from disadvantaged childhoods lived fewer total years of life, fewer years of active life, and spent a greater portion of life functionally impaired compared with adults from advantaged childhoods. Achieving higher levels of educational attainment often overcame the health-related consequences of childhood disadvantages, particularly among men, while low educational attainment often erased the health-related benefits of childhood advantages. Policies aimed at improving population health and reducing disparities should target childhood and adolescence, particularly through access to quality education.