

Mortality, Health, Diseases and the Economy

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Advanced Economic History

Session 3

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Inequalities during the mortality transition:

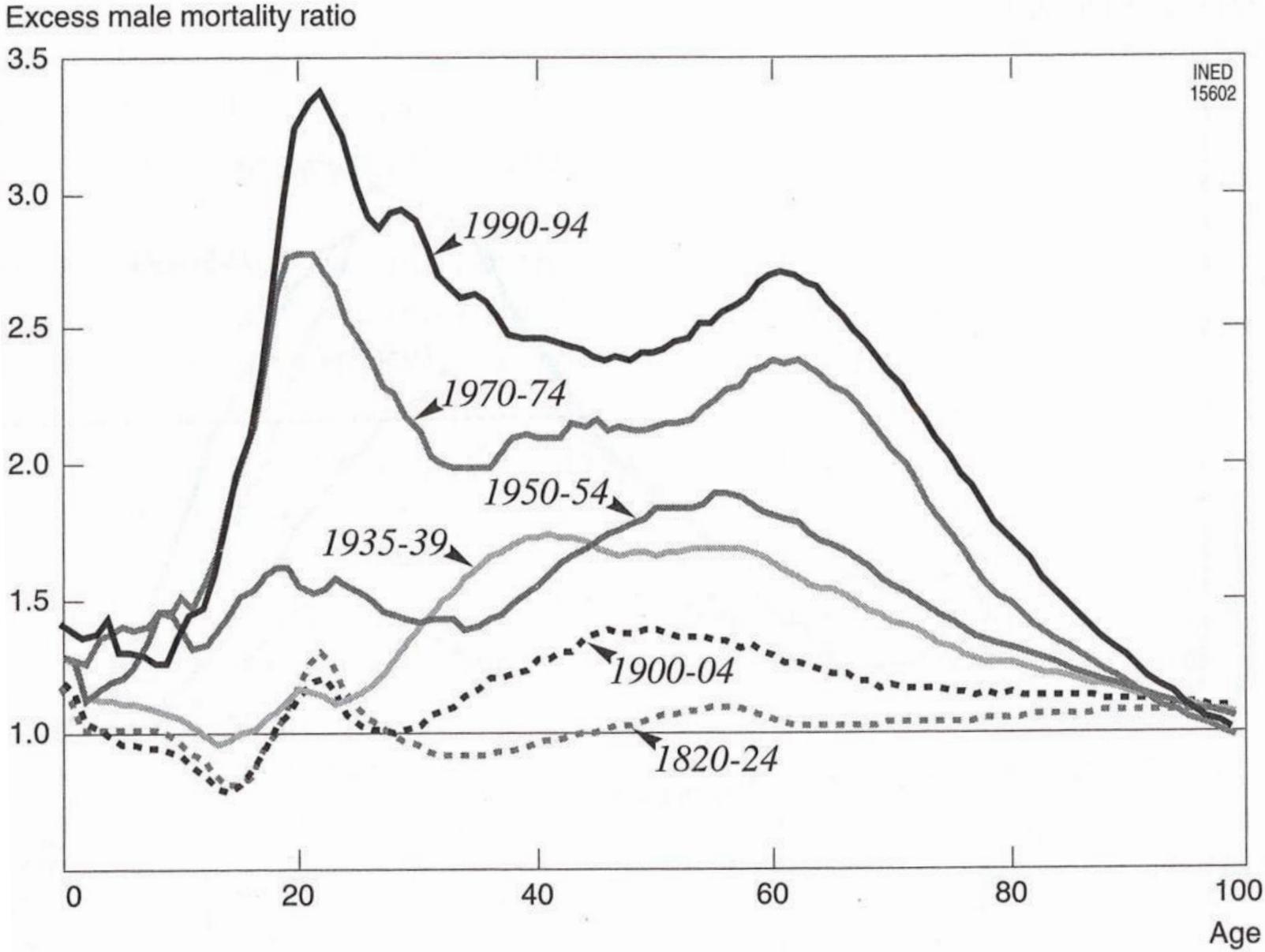
Space, gender, and income



The gender gap

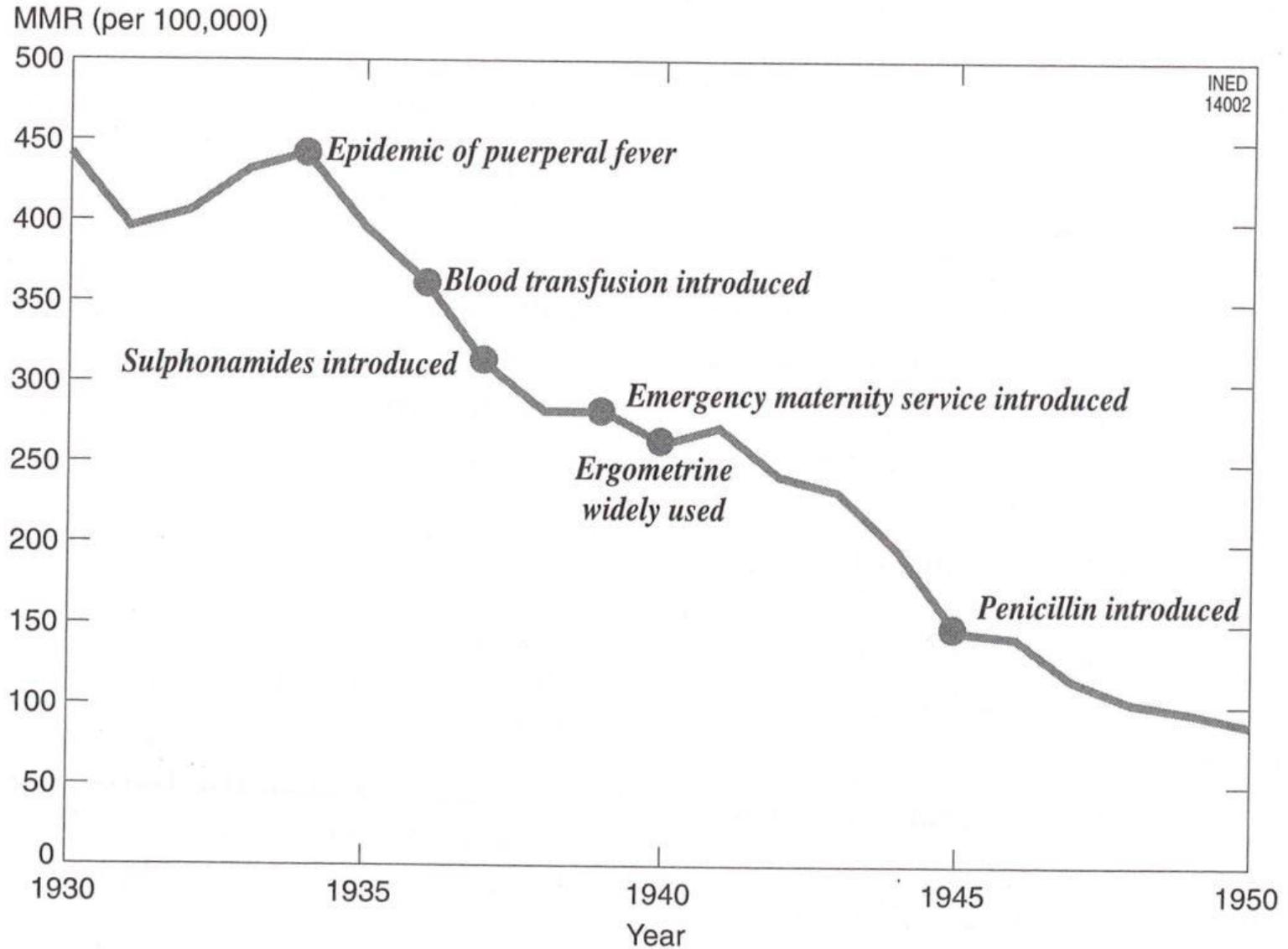
- ❑ Natural advantage for women...
- ❑ ...Often compensate and reversed by social practices.
 - ✦ A reversal during the health transition.
 - ✦ A spectacular increase in male mortality.
 - ✦ A disadvantage turned to an advantage?
- ❑ Finally social practices and genetics goes hand in hand.
- ❑ Still huge variations.

Masculine over-mortality, France, 1820-1990



Jacques Vallin. 2006. "Mortality, sex, and gender" in Caselli, Graziella, Jacques Vallin, et Guillaume J. Wunsch. *Demography: Analysis and Synthesis. Volume 2*. Amsterdam ; Boston: Elsevier, 177-194

Maternal mortality ratio, England and Wales, 1930-1950



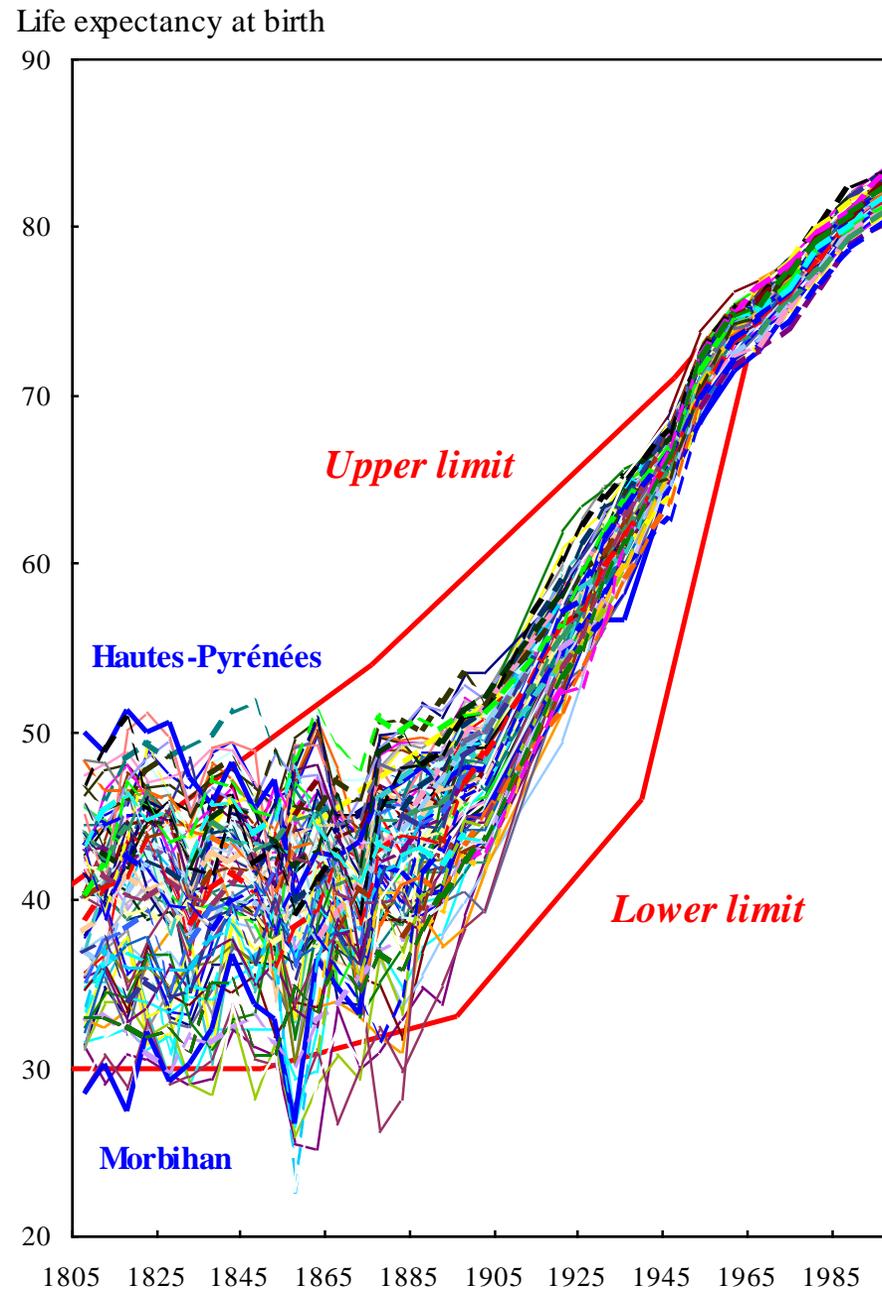
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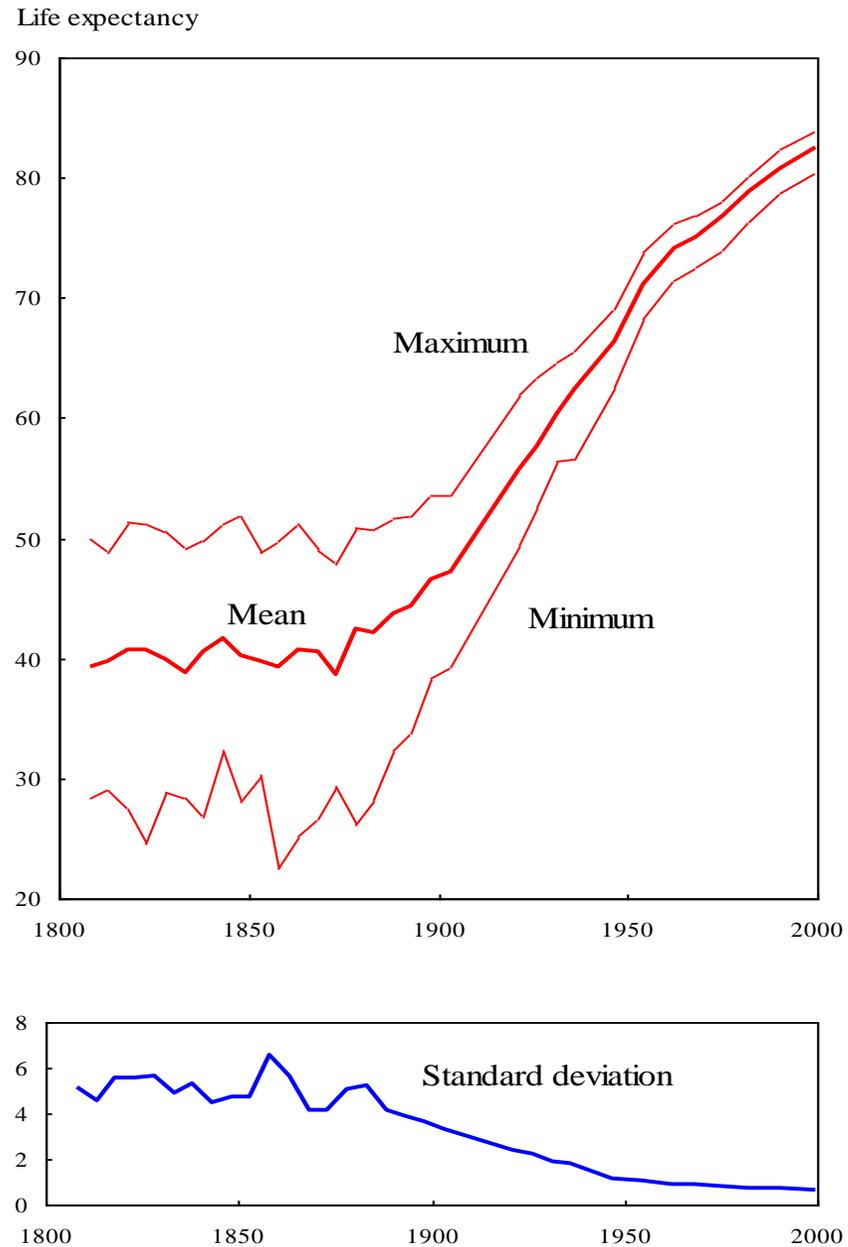
Variations in space

- ❑ Convergence between areas over time
 - ▲ Sub-national evolutions.
 - ▲ Homogenization (of practices, behaviours, knowledge, etc.).
- ❑ The “urban penalty”
 - ▲ Linked to bad living conditions...
 - ▲ ...or population concentration?
 - ▲ Stay high until the 20th century.

Female life expectancy by French département



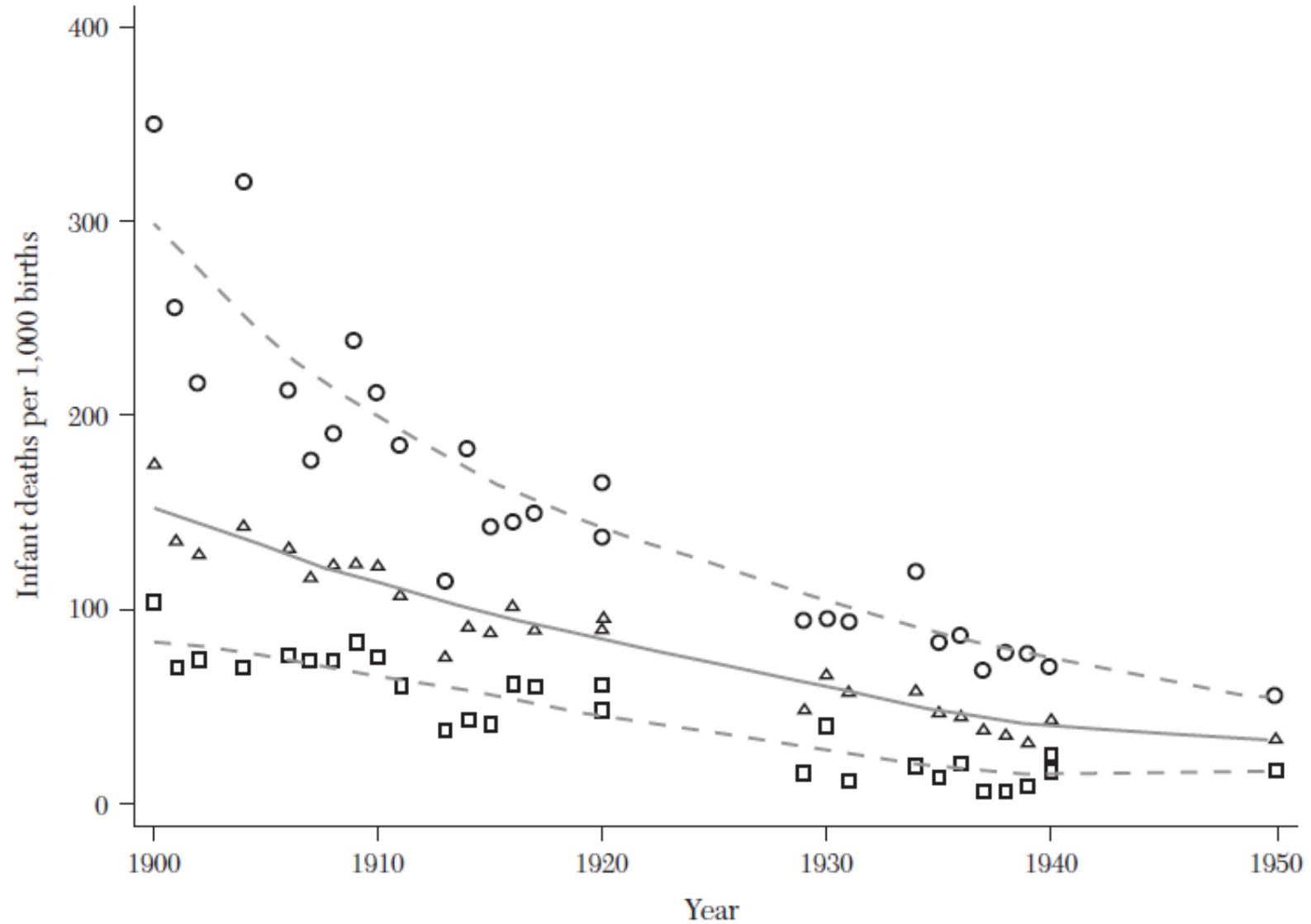
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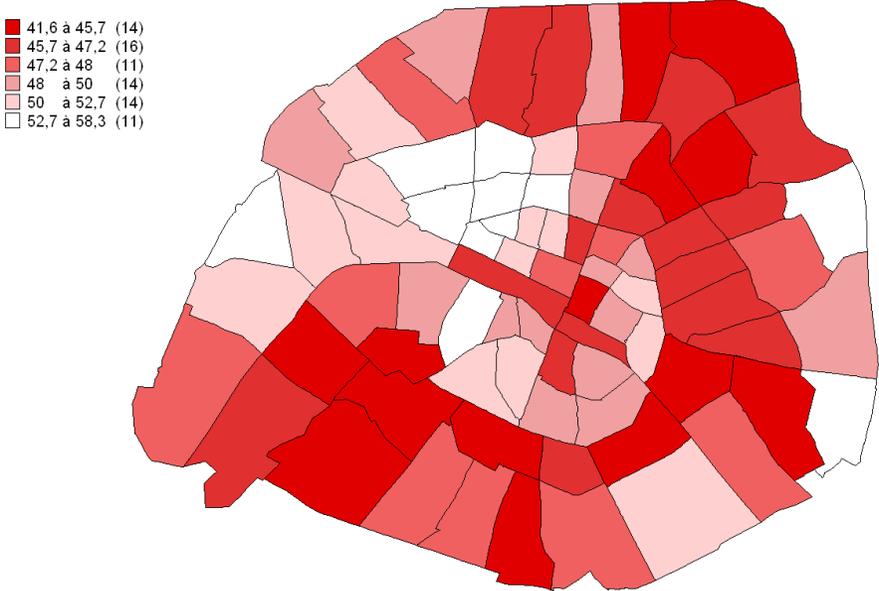
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Within cities mortality in the US

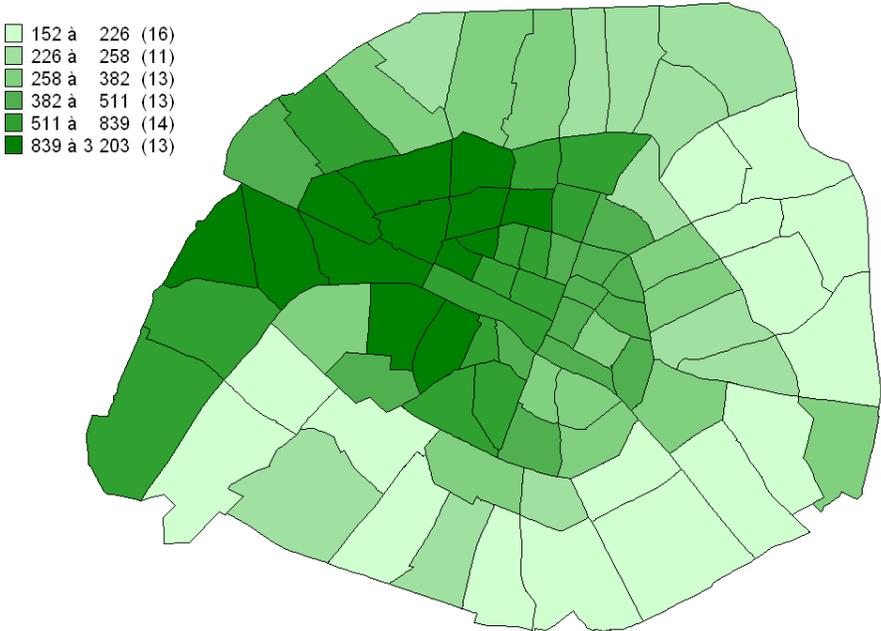


Spatial variations in mortality are also social variations: Paris

Life expectancy, Paris 1881



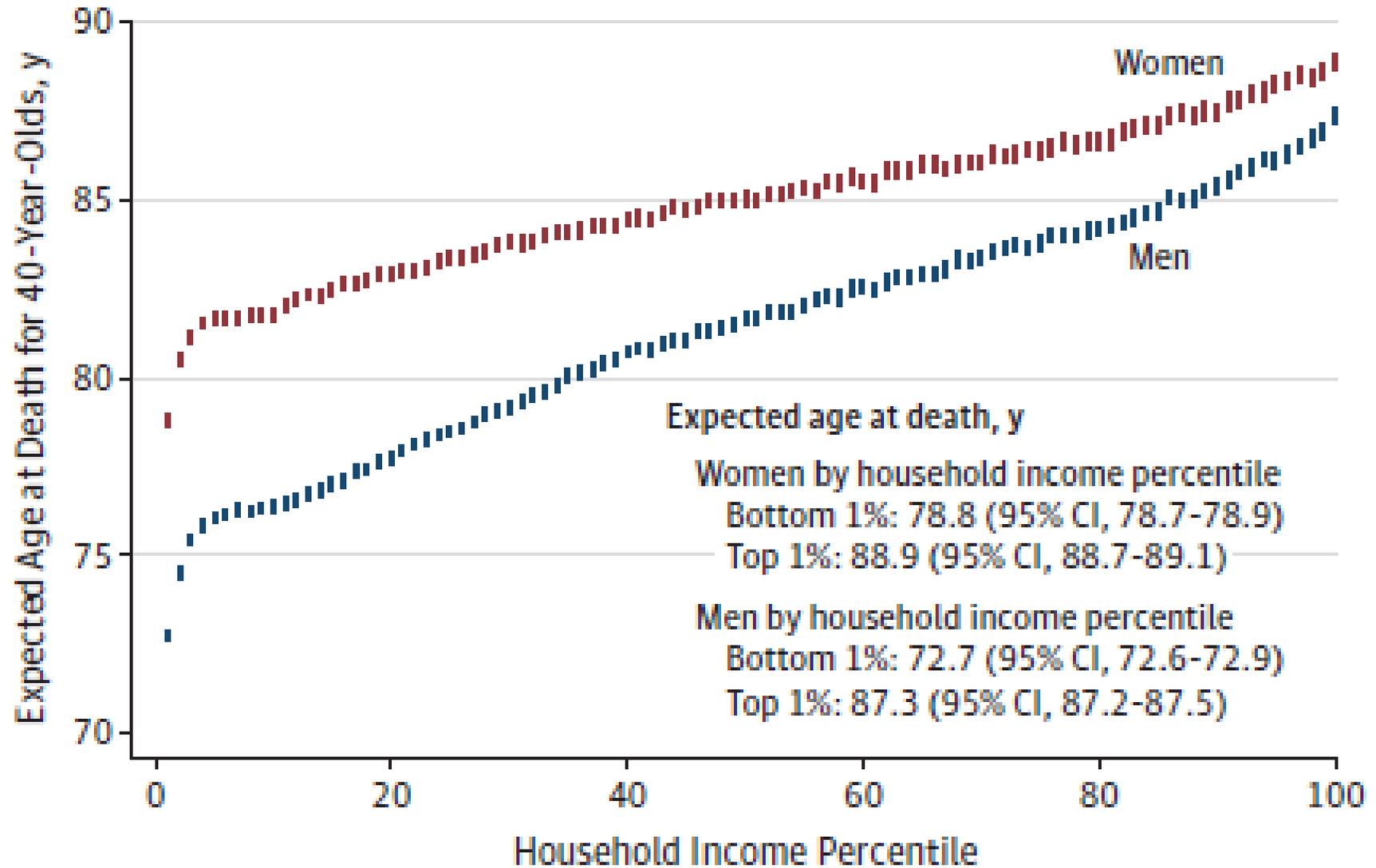
Rents, Paris 1878



The health-wealth relationship

- How much does wealth influence life chances?
 - ❖ Various indicators: wealth, income, education, etc.
 - ❖ Most studies use occupation as a proxy for affluence.
- Does this relationship change with time?
 - ❖ The gradient is invariant with time.
 - ❖ The gradient appears with the industrial revolution and diminishes during the 20th century.
 - ❖ Role of cities/urbanisation.
 - ❖ Role of different medical technology.

The health-wealth relationship: today



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Wealth does not protect from mortality before IR

- Very limited medical knowledge
 - ❖ No use to give all your money to a doctor.
 - ❖ It can even be detrimental (e.g., bleeding, lack of hygiene).
- Exposure is key
 - ❖ Lot of social mixing and interactions (e.g. servants).
 - ❖ Exposure to bad quality food and water is not uncommon, among all social groups.
- Anecdotal evidences
 - ❖ From Ramses V to Nathan Rothschild, going by Louis XVth.

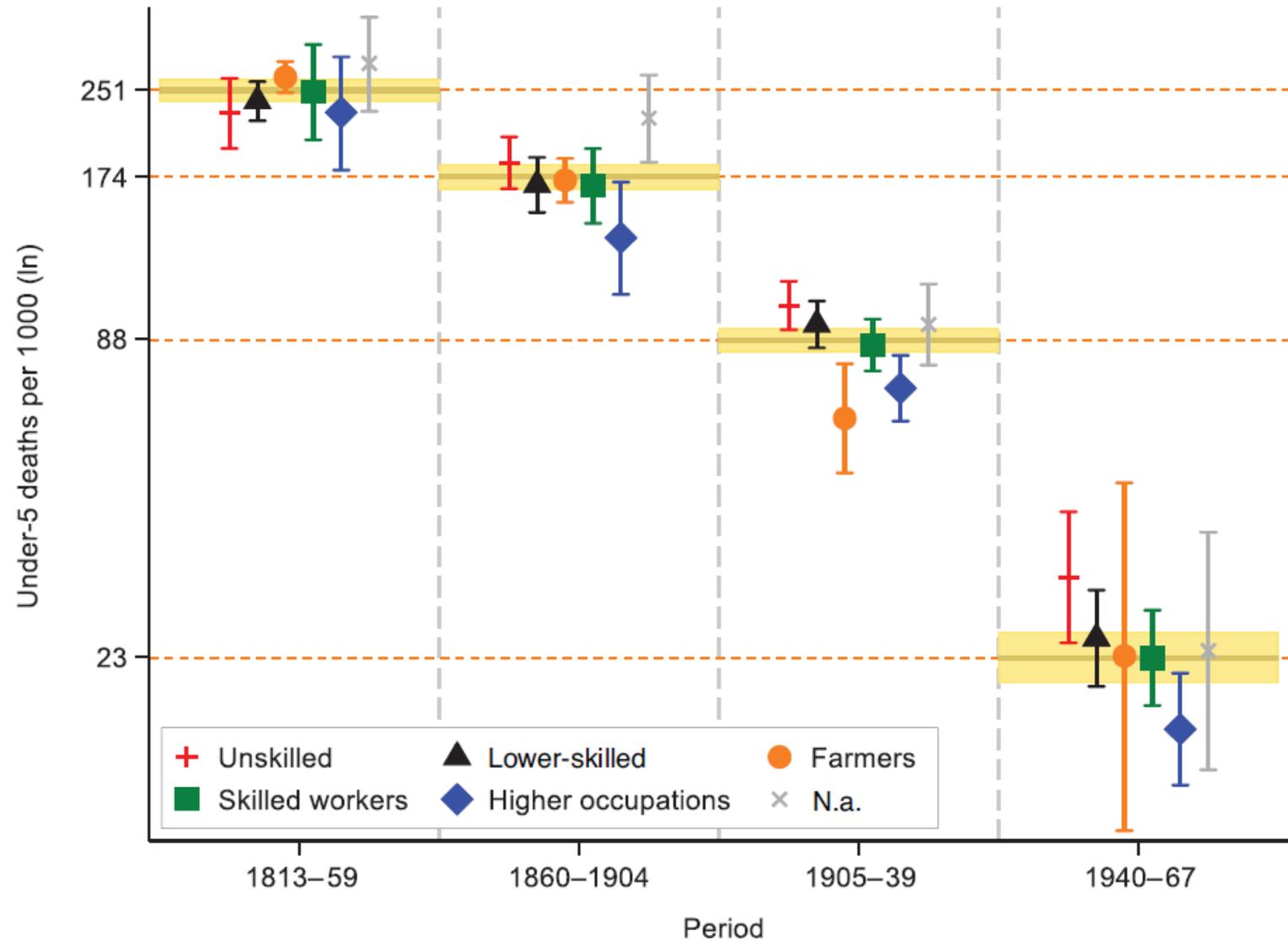
Wealth does protect from mortality before IR

- Standard of living matters
 - ❖ More (and better quality) food protects against diseases.
 - ❖ General physical conditions is better.
 - ❖ Type of work done matters as well.
- Exposure is key
 - ❖ The wealthiest are increasingly separated from the population.
 - ❖ Less potentially dangerous social interactions.
 - ❖ For instance: capacity to flee in times of plague.
- Theory of fundamental cause (Link & Phelan, 1995...).
 - ❖ SES-related resources (money, prestige, power...) promote health under different circumstances..
 - ❖ The precise links and mechanisms depend on context: Lifestyle; access to health care; environment; psychosocial.
 - ❖ Exceptions? In time of crisis or when knowledge is lacking and so power/money might not do anything.

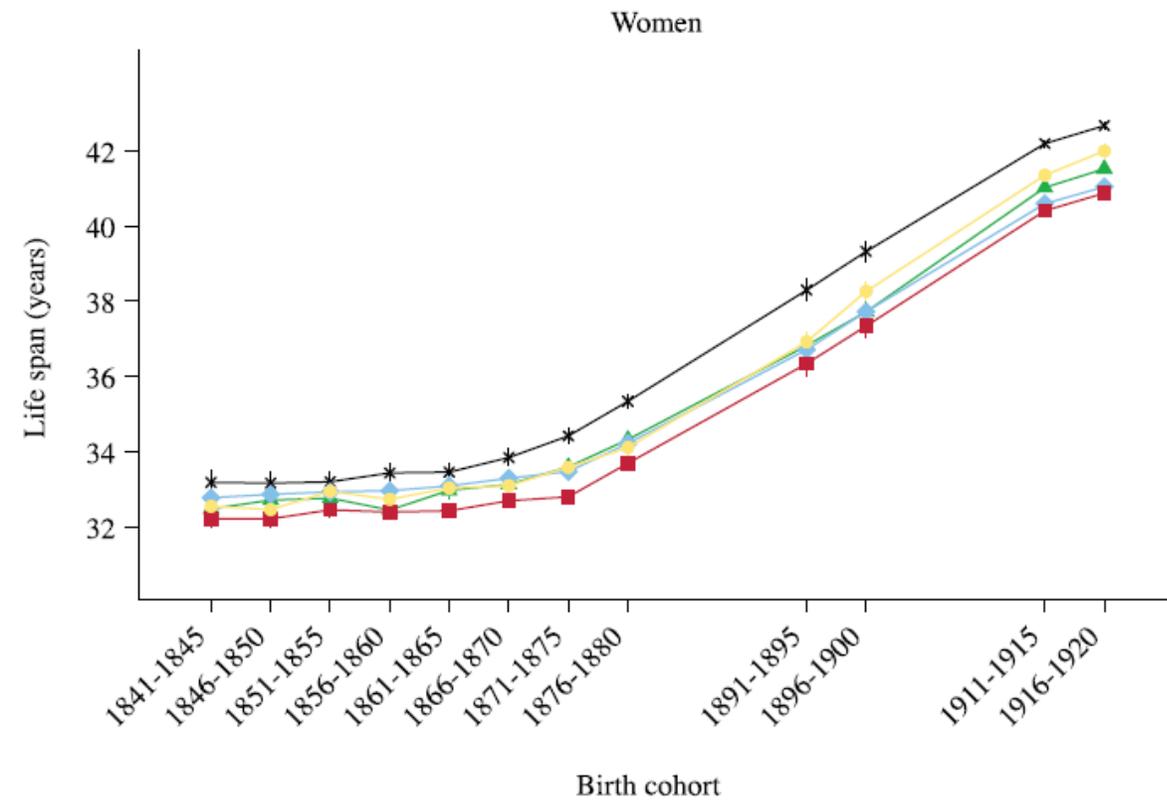
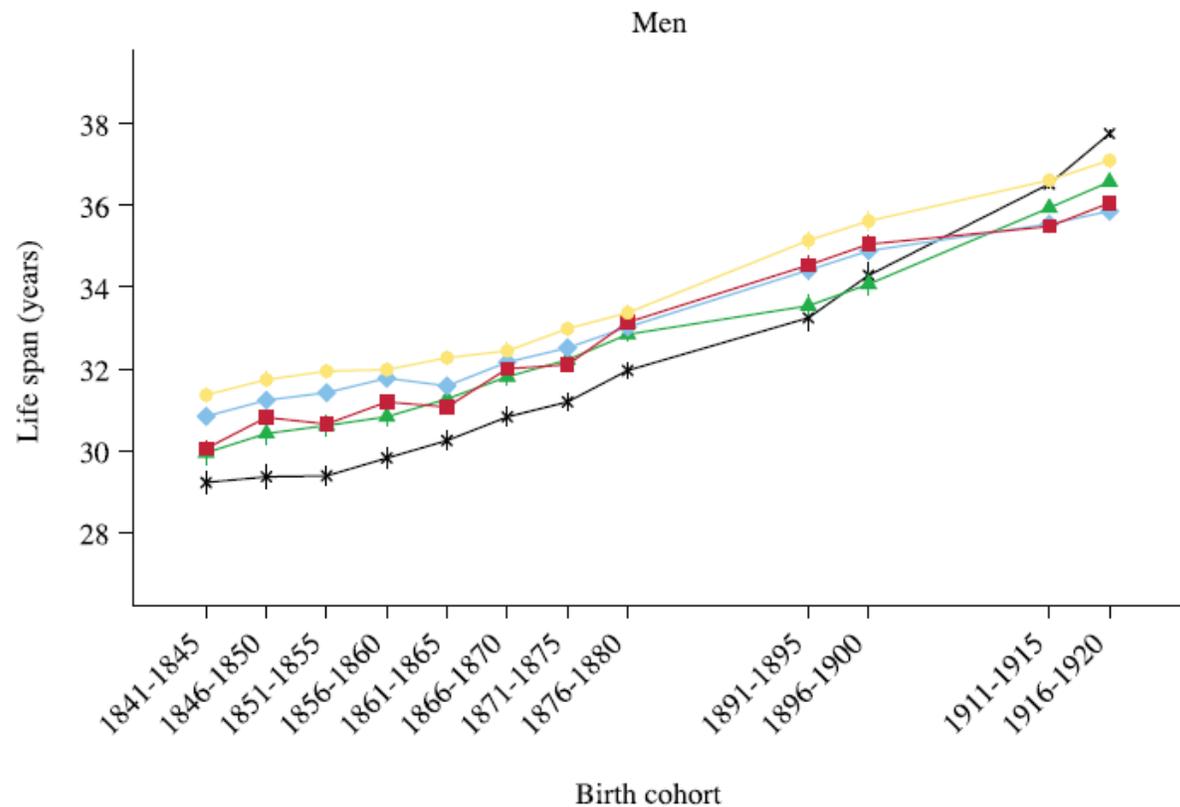
Mixed empirical evidence

- Very little empirical evidence in the past
 - ❖ Plague epidemics: little variation by SES (Alfani & Bonetti 2019: Italy), better adaptation from the wealthy (Cummins, Kelly and O'Grada, 2016: London).
 - ❖ Sweden: for men, inversion of the SES gradient over time; much stable for women.
 - ❖ Variations by age: child mortality gradient emerge much earlier than for adults.
- Explanations?
 - ❖ Chronology of the rise of the gradient points to lifestyle (smoking), work related condition, unequal access.
 - ❖ Low nutrition, poor water and sanitation seem to have mattered less.
- Role of context is decisive
 - ❖ Not exactly the same in large metropolises and small urban area.
 - ❖ Not the same for all age groups, strong differences by gender.

Children mortality by SES, Sweden



SES gradient in the past: Sweden (e40)



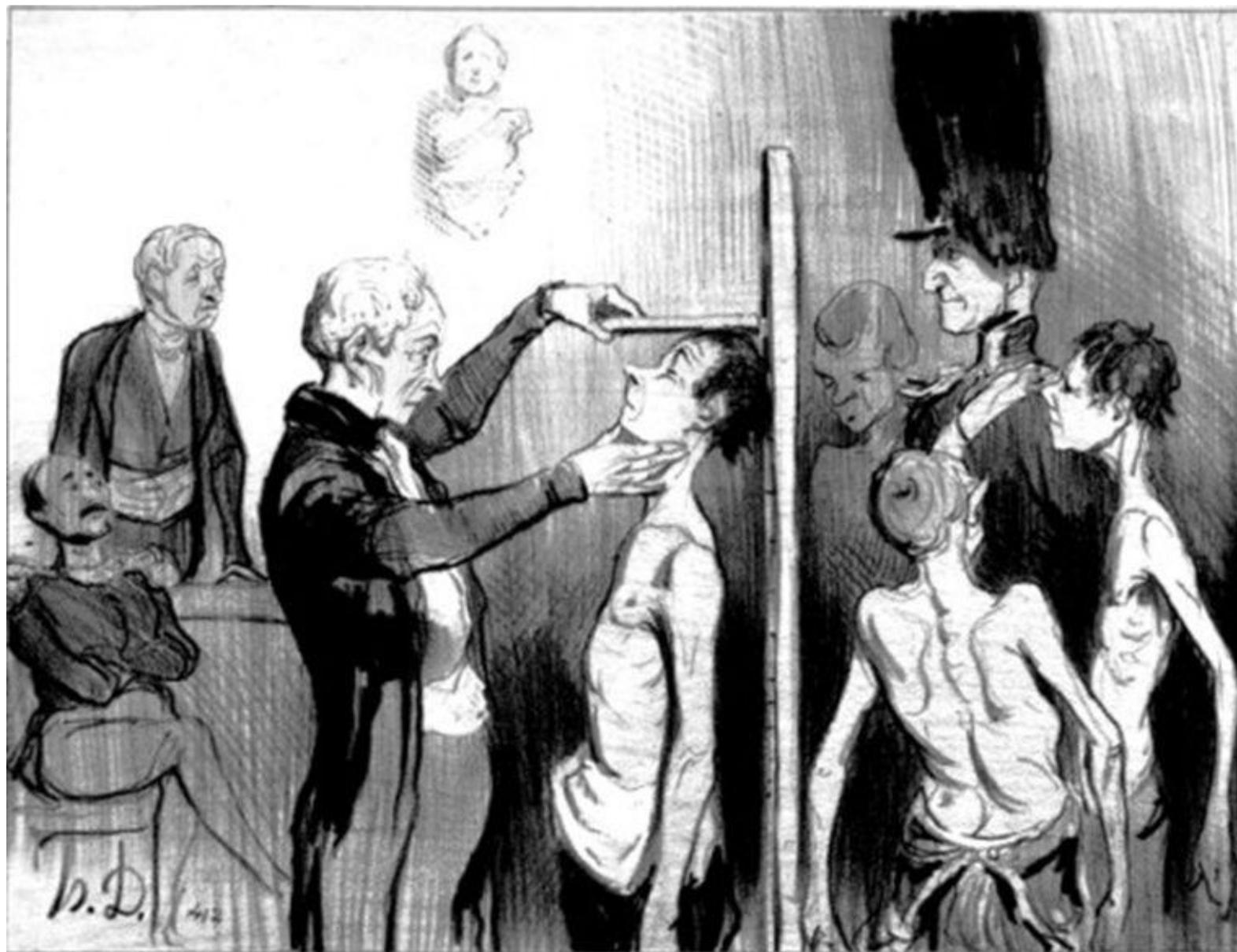
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Who benefited from the health transition?

- ❑ Changes in health technology
 - ▲ Costs and returns may vary between social groups.
- ❑ Changes in the economic structure matters
 - ▲ Link with income inequalities.
 - ▲ Wage returns to different kind of work.
- ❑ Contradictory findings
 - ▲ Lack of empirical evidences.
 - ▲ Non-linear evolutions over time.
 - ▲ Education gradient

Height and physical capital



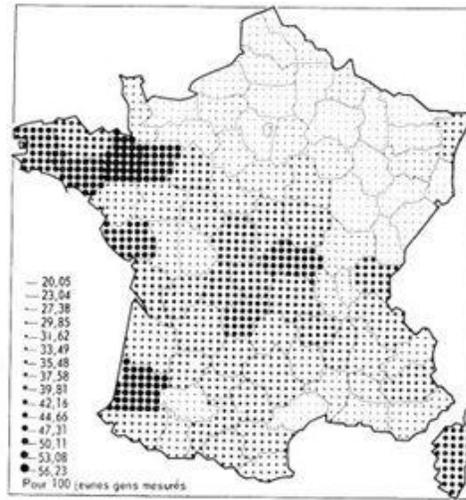
Stature as a measure of standard of living

- The body as a firm
 - ❖ Inputs: food (calories).
 - ❖ Outputs: basic metabolism, diseases, physical activities.
- Results: physical growth
 - ❖ Height is the visible result of the growth process.
- An indicator of standards of living?

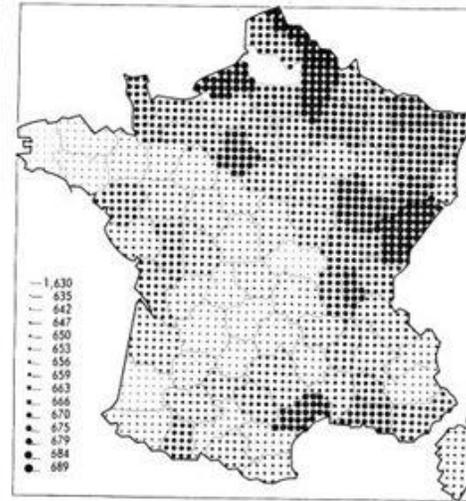
Stature as a measure of standard of living

- The base for an anthropological history
 - ❖ Indicators of physical conditions.
 - ❖ Le Roy Ladurie et al. (*Anthropologie du conscrit français*).
- Robert Fogel
 - ❖ Compensating the lack of indicators of living standards for black slaves.
 - ❖ Showing that height is not correlated with income.
 - ❖ Looking at the relationships between height and mortality.
 - ❖ Getting a broader perspective on height.

Height and living conditions in France

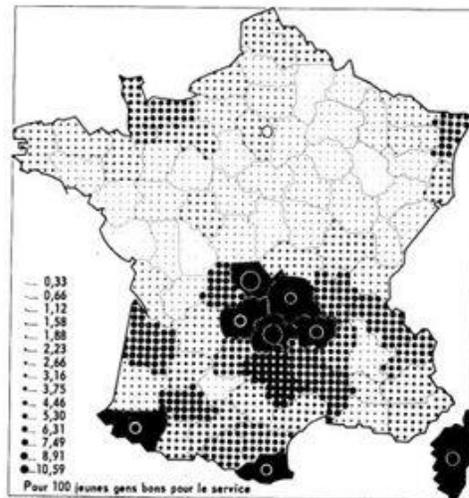


9. Petites Tailles

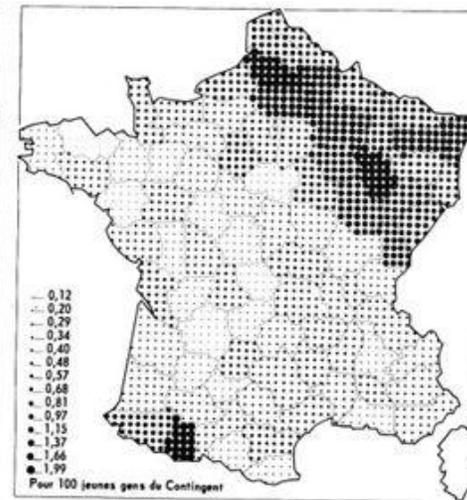


12. Moyenne des tailles

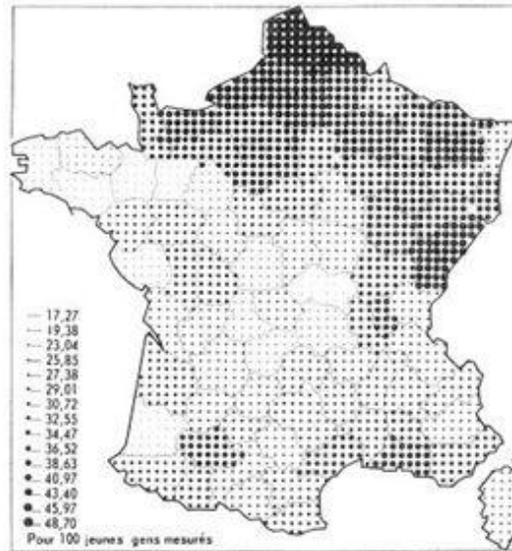
6. Absents



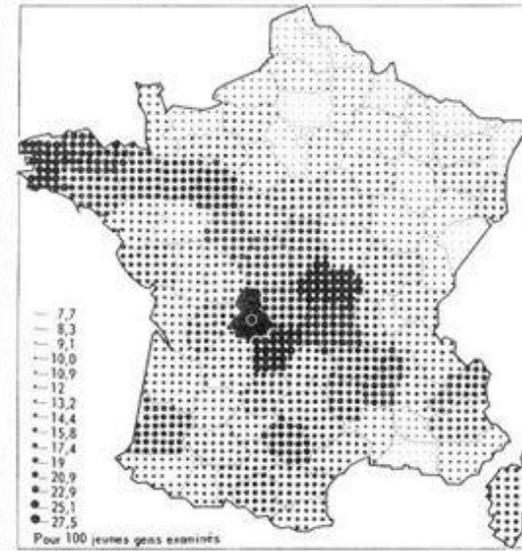
4. Élite



Height and education in France

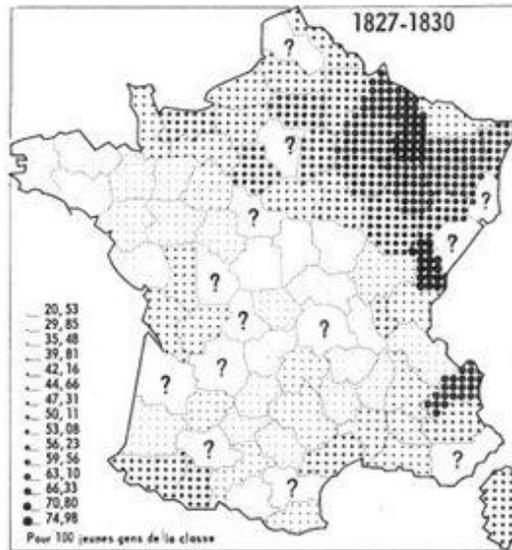


11. Grandes tailles

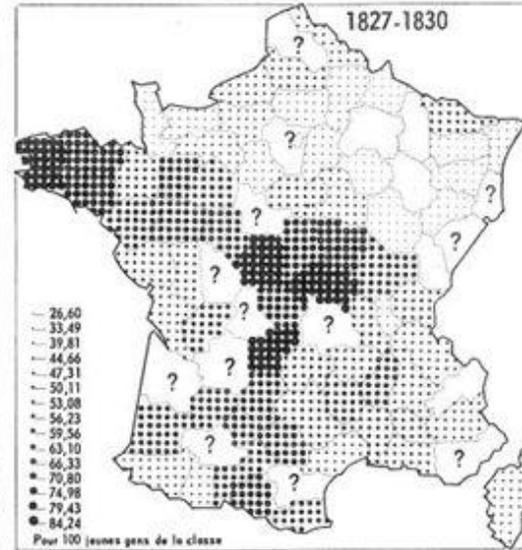


50. Défaut de taille

53. Lire et écrire



54. Ni lire, ni écrire



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The case *for* anthropometrics

- ❑ Easy to compute and frequently available
 - ▲ Often the only indicator available.
 - ▲ Allows for study of evolution in the long run.
 - ▲ And between countries.
- ❑ Reflect more directly standards of living or welfare (?).
- ❑ Have consequences on future life.

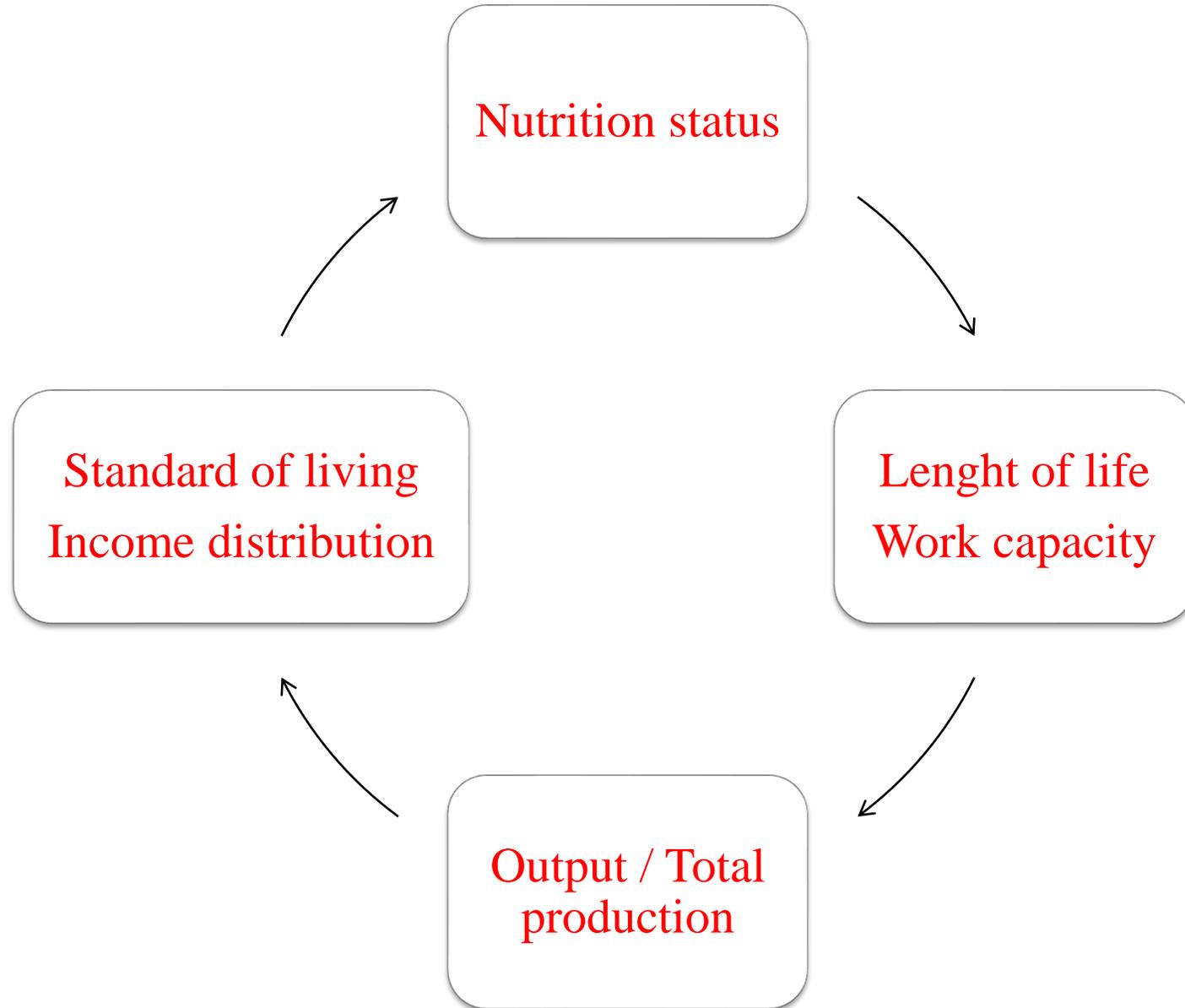
The case *against* anthropometrics

- ❑ What it measures is still unclear
 - ▲ Many different determinants.
 - ▲ The period of body growth is large and its limits unclear.
- ❑ Many sources of bias
 - ▲ Measurement issues: truncation, heaping.
 - ▲ Population are often selected.
- ❑ A shortcut too often made from heights
 - ▲ to standards of living,
 - ▲ to well-being.

Stature as a physical capital

- The size of the body matters
 - ❖ For physical (and cognitive?) ability.
 - ❖ For length and intensity of work.
- Consequences on later life?
 - ❖ Resistance to disease? Longer life?
- A virtuous circle (Fogel).

The technophysio evolution



The historical heights literature

- ❑ Military personnel

- ▲ Contributing to the standard of living debate.
- ▲ The most easily available source.
- ▲ But little account for self selection.

- ❑ Slaves, prisoners and criminals

- ▲ Slave trade and human growth.
- ▲ Prison data.

- ❑ Bias and selections

- ▲ Too strong emphasize on left-side selection.
- ▲ Changes in selection over time (so in the composition of the sample).

Early life effects

- Early life conditions

- ❖ Persistence of the effect, association with certain diseases.
- ❖ Possibility to compensate later? Catching-up....

- The foetal origin hypothesis

- ❖ Heavily debated: not easy to observe or measure.
- ❖ Even among nutritionists and co.

- In utero vs later

- ❖ Timing of the effects.
- ❖ Variations among age but also gender effects.

Early life effects: early examples

- Season of Birth
 - Linked to longevity, but also to specific risks.
 - Cystic fibrosis, multiple sclerosis, diabetes, high blood pressure, etc.
 - And non-medical conditions: occupational attainment, various measurement of education.
- Age of mother at conception
 - Linked to longevity.
- Cohort-specific insults, especially in utero
 - David Barker and the Fetal Origins Hypothesis
 - Example: 1918-19 influenza pandemic (Almond, *Journal of Political Economy* 2006).

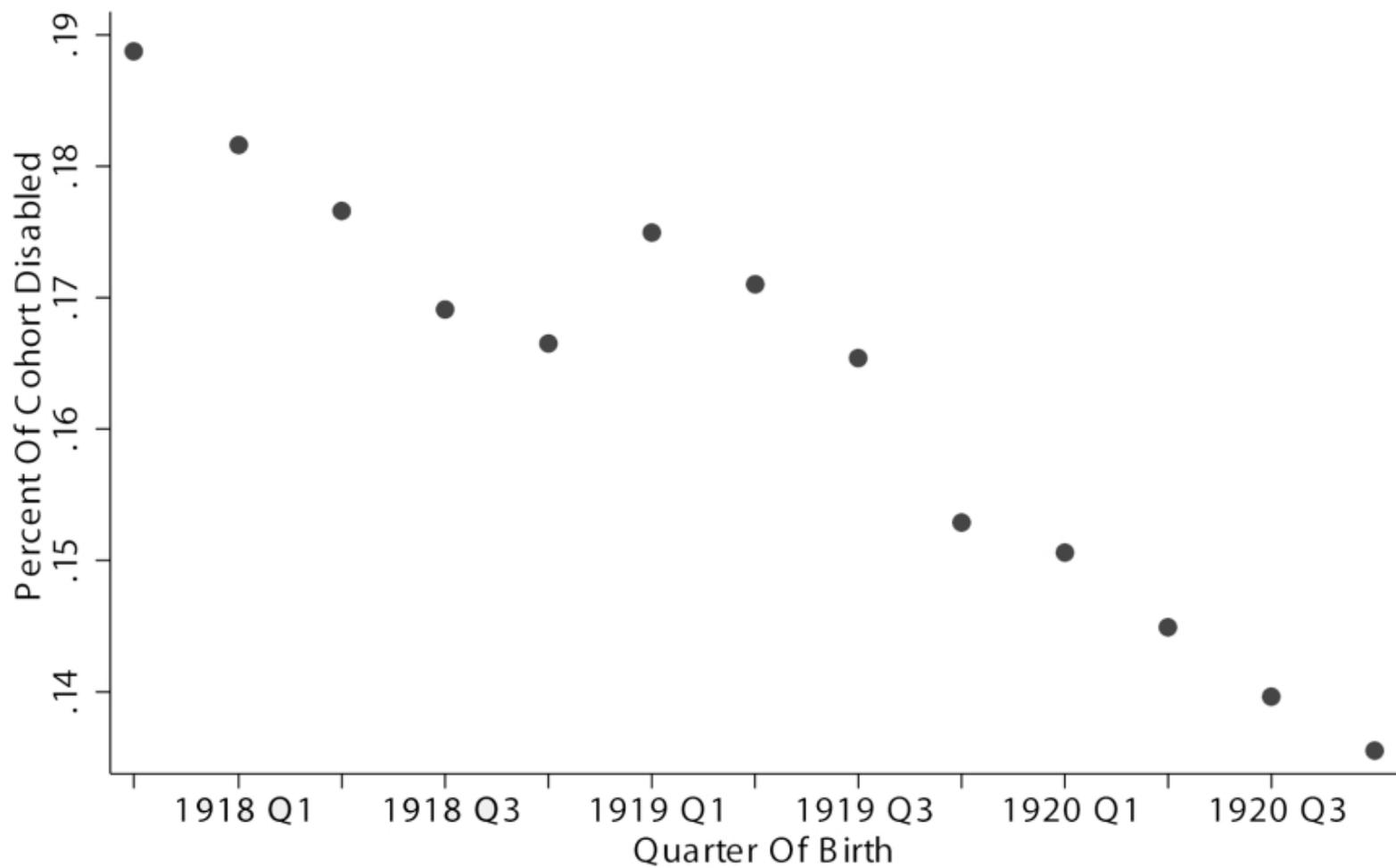


FIG. 2.—1980 male disability rates by quarter of birth: prevented from work by a physical disability.

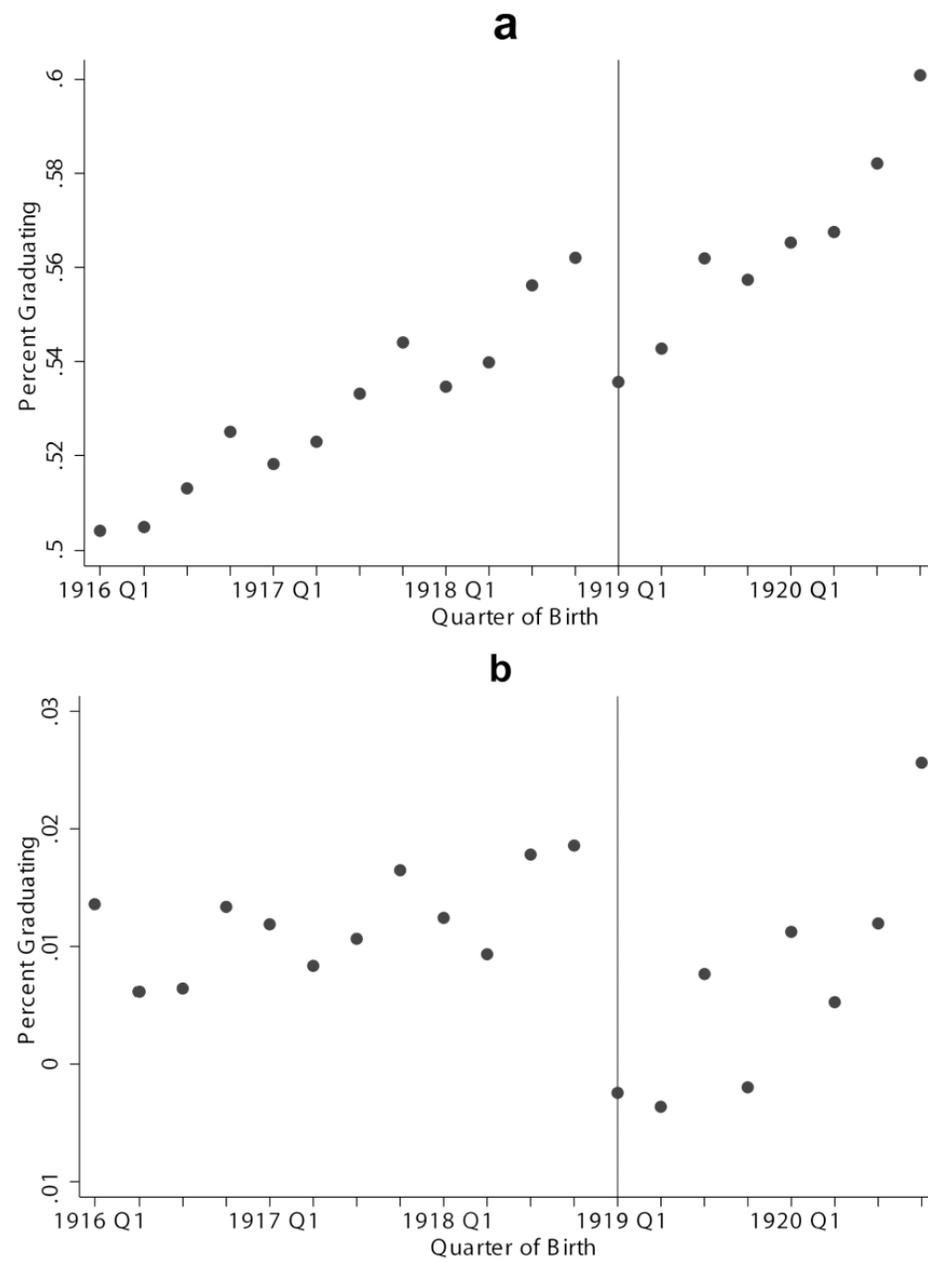


FIG. 5.—*a*, 1980 high school graduation rate by quarter of birth. *b*, Regression-adjusted 1980 high school graduation rate by quarter of birth.

Investigating early life effects

➤ Specific shocks: wartime and long lasting deprivation

- Civil warfare in present-day developing countries.
- Papers on long term consequences of Vietnam war. Explore longevity, but also specific risks.
- Korean war, Biafra, Ethiopia, etc.

➤ Famines

- The Dutch Hunger Winter, the Great leap forward, the siege of Leningrad...
- Most obvious exogenous shocks...
- ... but selection issues and limitations of the data.
- Problem with the timing, the precise chronology.

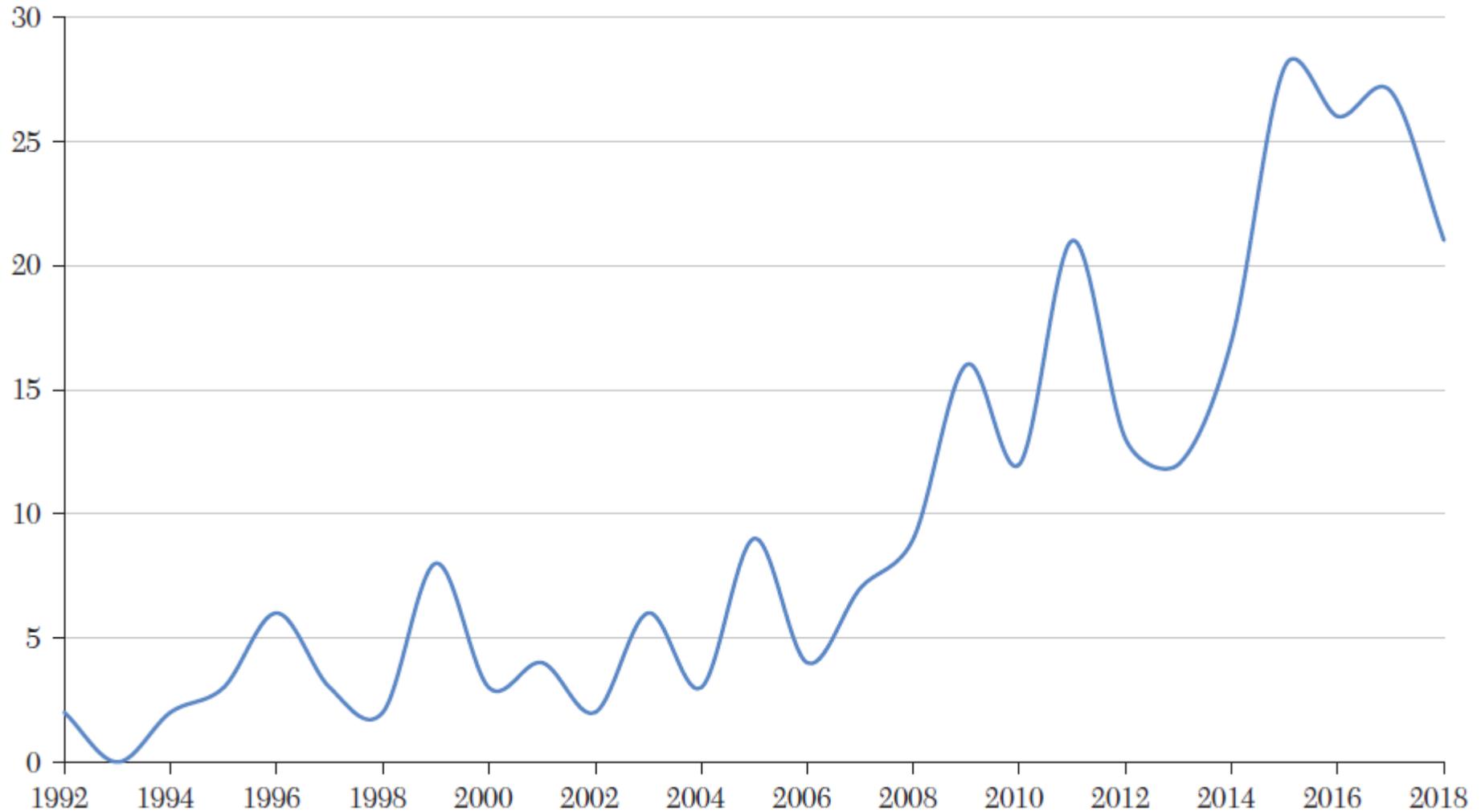
➤ Overviews

- Almond, Douglas, and Janet Currie. 2011. "Killing Me Softly: The Fetal Origins Hypothesis." *Journal of Economic Perspectives*, 25 (3): 153-72.
- Almond, Douglas, Janet Currie and Valentina Duque. 2018. "Childhood Circumstances and Adult Outcomes: Act II." *Journal of Economic Literature*, 56 (4): 1360-1446.

Early life effects on economic outcomes

- “Thus, the fetal origins hypothesis has not only survived contact with economics, but has flourished.”
- “Clearly, a full acceptance of the fetal origins hypothesis idea would have radical implications for individual decisions and policy alike, suggesting for example, that the optimum time to intervene to improve children’s life chances is before they are born, and perhaps before mothers even realize that they are pregnant.” Almond and Currie, *JEP* (2011).
- Direct or indirect effects
 - Measure of fetal health (birth weight) vs latent effects.
 - Nutritional vs non-nutritional effects: maternal stress.
- The challenge of measure
 - Easy to observe (just need a date/place of birth), but control group is much trickier to obtain.
 - The advantage of history: people are seen after the end of their life and these life can be replaced in a broader context.
 - But very a-historical analyses in the end.

Publication on FOH in top economic journals



From Almond, Currie and Duque *JEL* (2018). Number of annual publications from January 1993 to October 2015 in the *Quarterly Journal of Economics*, *American Economic Review*, *Journal of Political Economy*, *Econometrica*, *Review of Economic Studies*, *Journal of Labor Economics*, *Journal of Econometrics*, *Journal of the European Economic Association*, *Review of Economics and Statistics*, *Journal of Human Resources*, *Journal of Public Economics*, *American Economic Journal: Applied Economics*, *Journal of Development Economics*, *American Economic Journal: Economic Policy*, and *Journal of Health Economics*

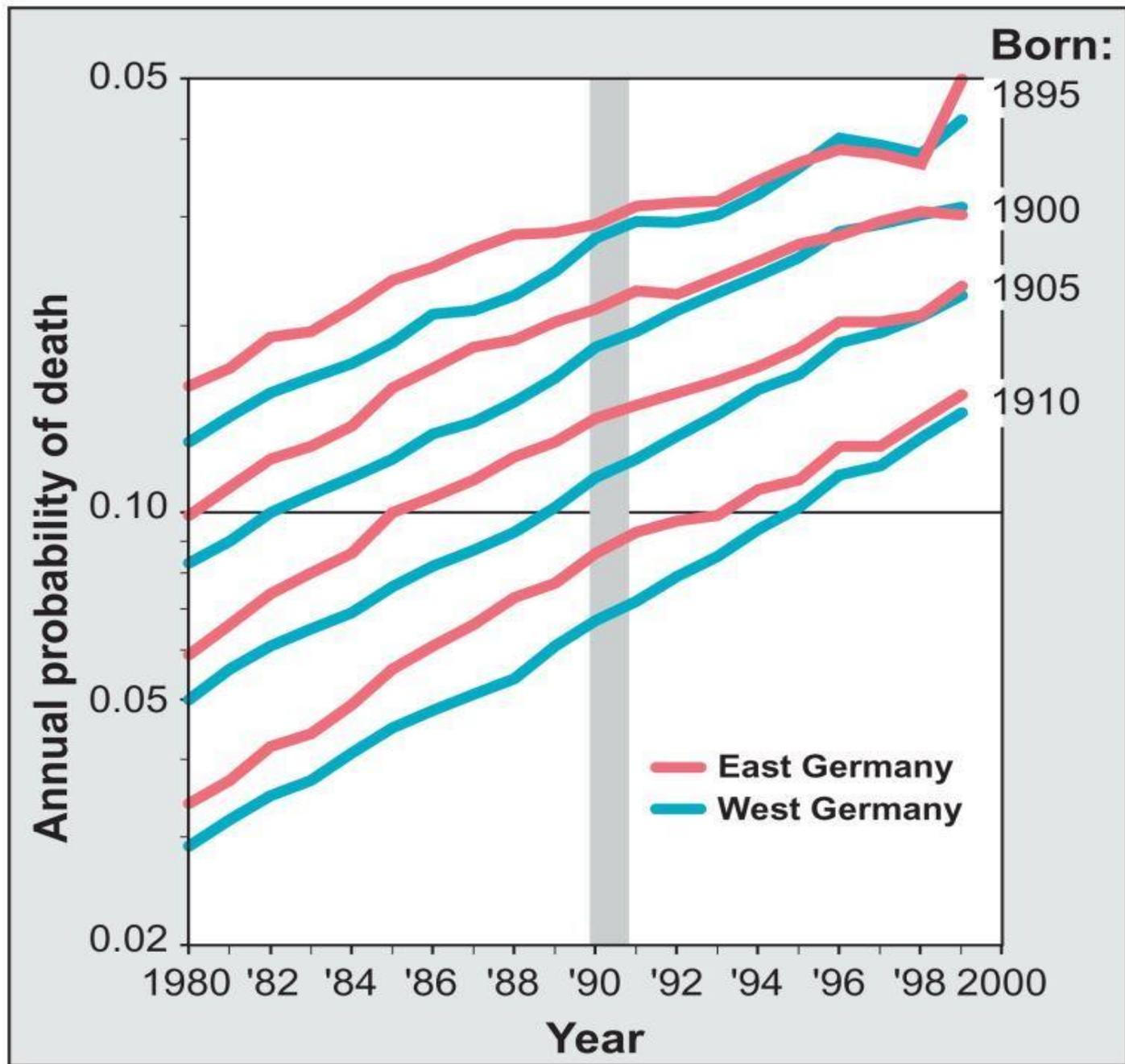
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Contra early life hypothesis

- Germany as a quasi natural experiment
 - ❖ Gjonça, Brockmann and Maier (2000); Vaupel et al. (2003); Myrskylä and Scholz (2013), etc.
- Vaupel, Carey, and Christensen:
 - ❖ “Although conditions early in life do significantly influence human health and survival late in life, the German example—and other demographic data—provide strong evidence that such effects are of less importance (at least in more recent decades) than changes in current conditions.”
 - ❖ “Epidemiological and clinical research provide further evidence of the malleability of old age. For example, the risk of death for elderly smokers who quit falls, within 1 or 2 years, to a lower level than that suffered by recalcitrant smokers. There is a growing appreciation that even octogenarians and nonagenarians can substantially benefit from medical interventions such as cataract surgery and hip replacement.”

**Death rates in
Germany
before and after
reunification**



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Revisiting the 1918 influenza pandemic

- Brown & Thomas (2018): a refutation of Almond (2006)
 - ❖ “The non-random selection of the draft and the hypothesized non-arbitrary family planning of those experiencing a war, create legitimate concerns over the assumption of random experimental assignment.”
- Beach, Ferrie & Saavedra (2018): refuting the refutation?
 - ❖ “These data allow us to construct an individual level panel dataset by linking World War II enlistment records back to the census. This means that we can observe each individual twice: first as a child with their parents and again as an adult when they enlist.”
- The synthesis: Beach, Brown, Ferrie, Saavedra, and Thomas (2022)
 - ❖ “We find that exposure to greater pandemic intensity lowered educational attainment among the male enlistees that were successfully linked to the 1920 census when comparisons are drawn either between the 1912-1919 birth cohorts or among brothers in a household fixed effects model. On the other hand, when we restrict attention to the 1918-1919 birth cohorts, to help rule out unobserved differences across cohorts, none of the estimates is statistically significant..”

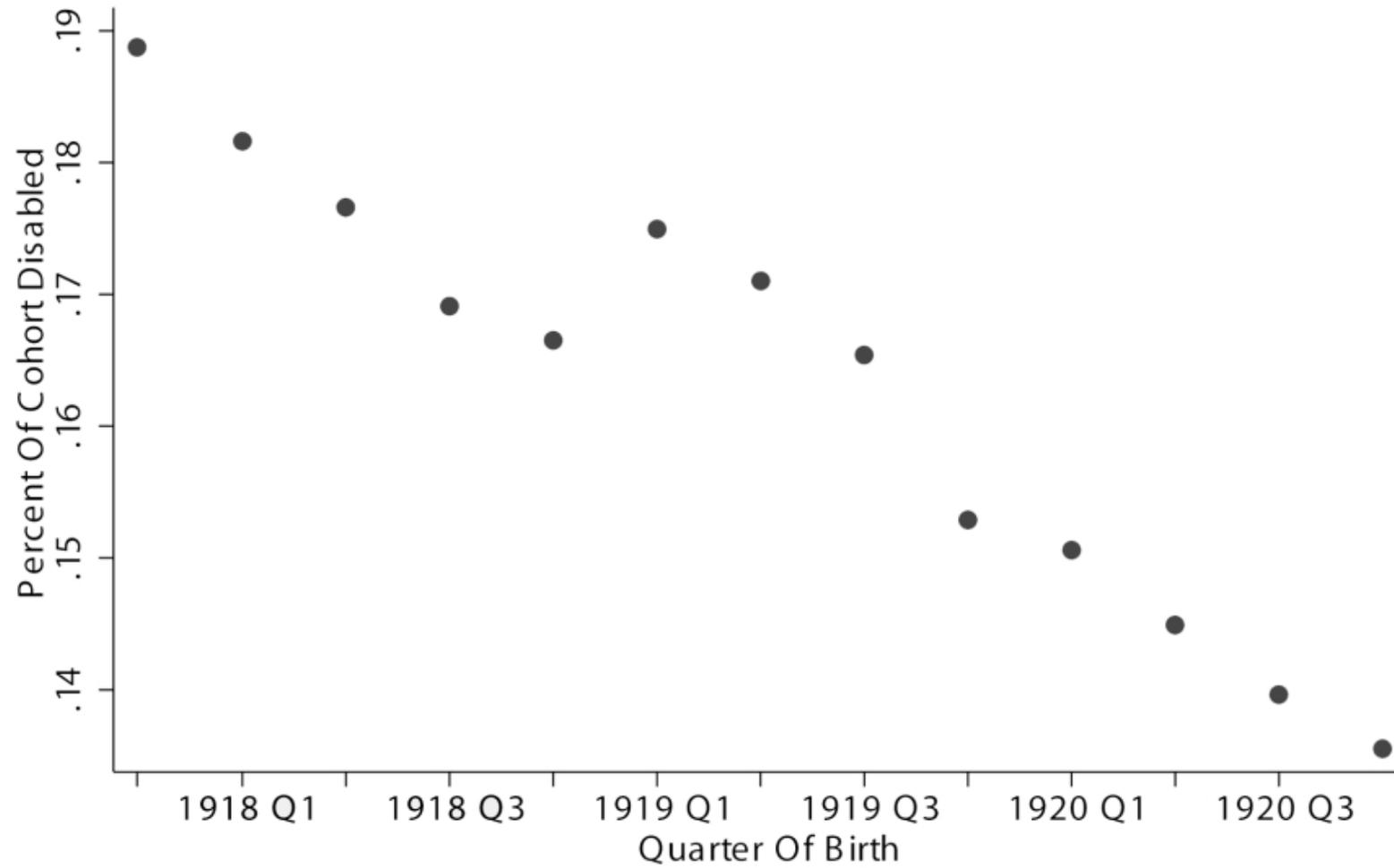
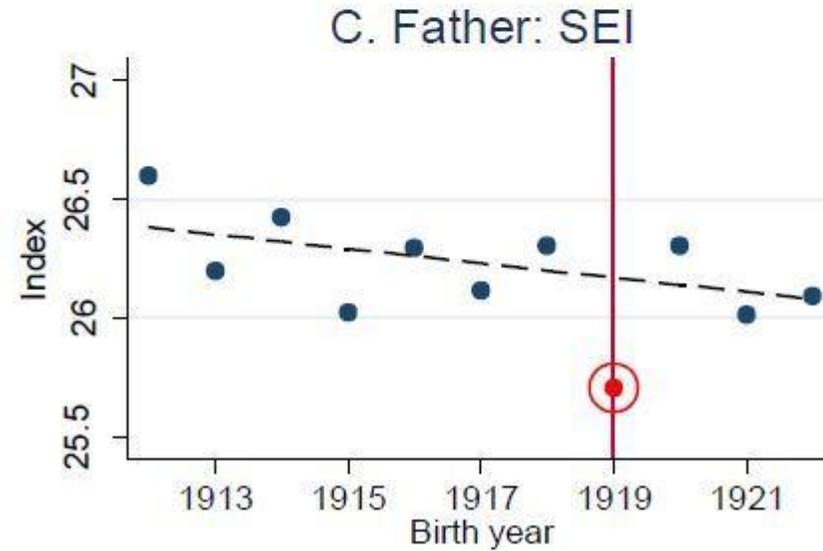
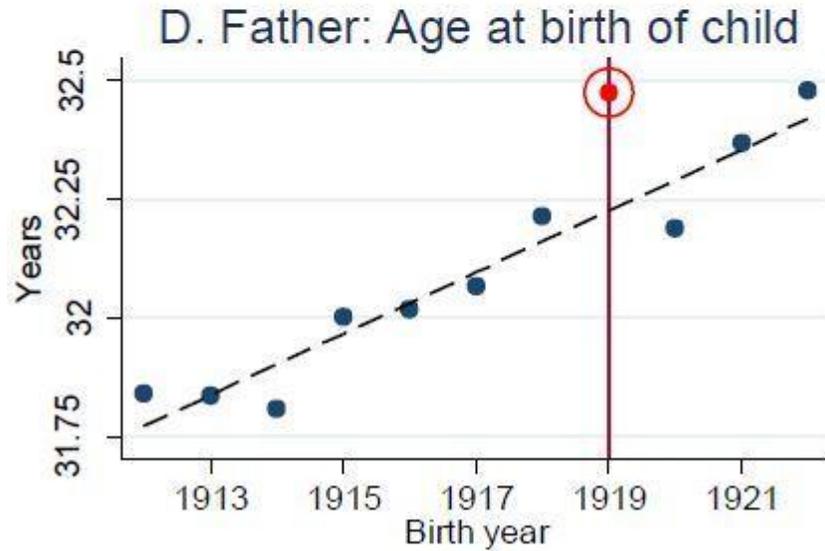
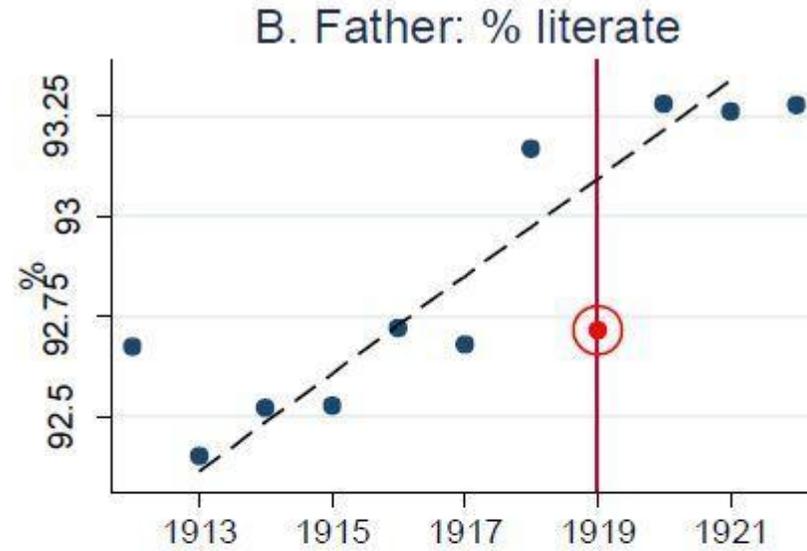
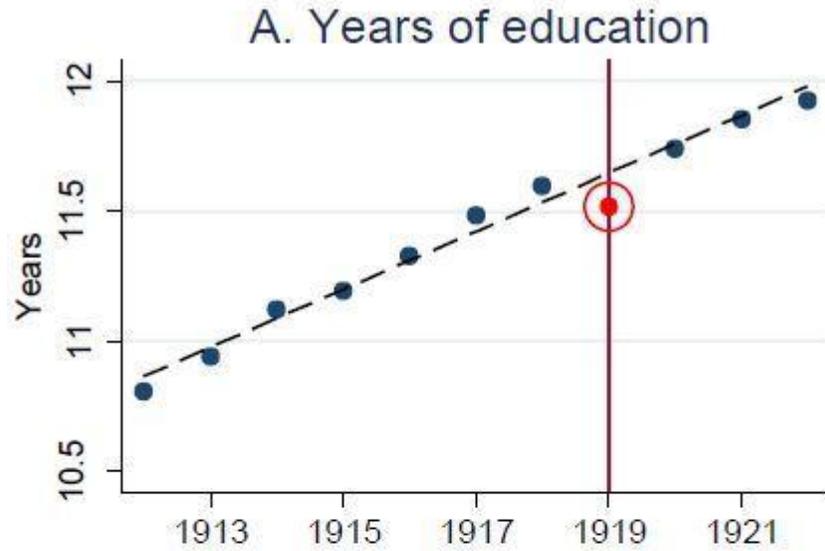


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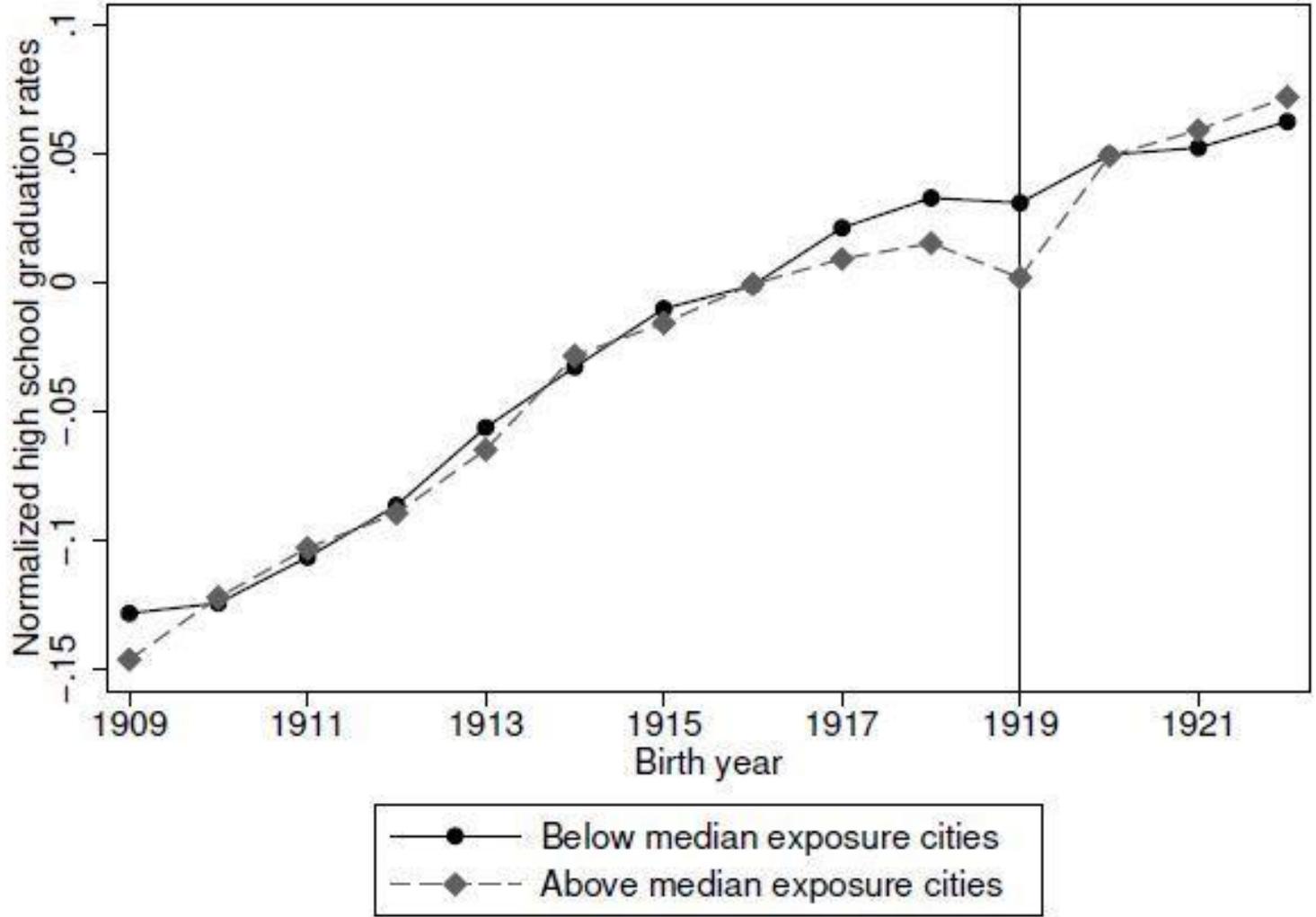
The influenza generation (from BT)



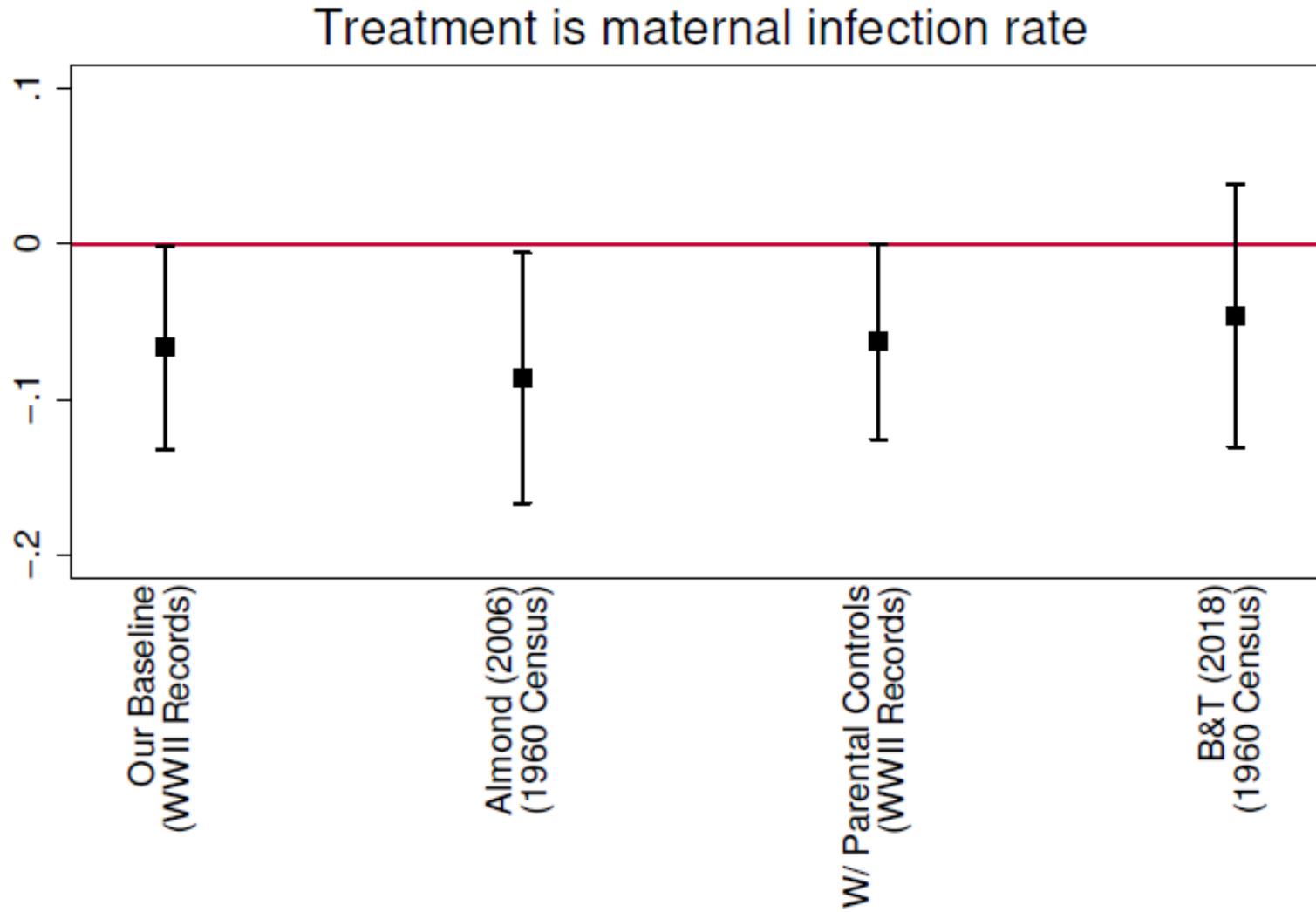
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Spatial variation in pandemic exposure (from BFS)



Comparison of results (from BFS)



Linked sample with influenza deaths (from Beach et al.)

| | <u>1912-1919 Birth Cohorts</u> | | <u>1918-1919 Birth Cohorts</u> | | <u>Brothers Sample</u> <u>1912-1919 Birth Cohorts</u> | |
|---|--------------------------------|--------------------|--------------------------------|-------------------|--|--------------------|
| | Unadj. (1) | Adj. (2) | Unadj. (3) | Adj. (4) | Unadj. (5) | Adj. (6) |
| <u>Estimated effect of Std. Excess Flu X Born in 1919</u> | | | | | | |
| <u>Dependent variables</u> | | | | | | |
| Years of schooling | -0.065* (0.020) | -0.045* (0.017) | -0.036 (0.020) | -0.023 (0.019) | -0.072 (0.049) | -0.104* (0.050) |
| Graduated high school | -0.017* (0.004) | -0.013* (0.004) | -0.011* (0.005) | -0.009 (0.005) | -0.023* (0.012) | -0.039* (0.012) |
| Observations | 148,550 | 148,550 | 56,756 | 56,756 | 12,864 | 12,864 |
| Height | 0.036 (0.021) | 0.047* (0.020) | -0.013 (0.032) | -0.014 (0.038) | 0.106 (0.062) | -0.050 (0.073) |
| Observations | 113,609 | 113,609 | 45,831 | 45,831 | 7,991 | 7,991 |

Revisiting the 1918 influenza pandemic

- Almond (2006): individual data US census 1960-80, no linking, effect is related to year of birth (and, less importantly, place of birth).
- Brown & Thomas (2018): individual data US census 1920-30, comparison between cohorts, no linking.
- Beach, Ferrie & Saavedra (2018): individual data, linking World War II enlistment records to the census: more precise, but selected.
- The synthesis: Beach, Brown, Ferrie, Saavedra, and Thomas (2022):
 - Observing selection of father for 1919 birth cohort.
 - Limited results on individual dataset.

General conclusion: on history and economics

- History allows to pose specific problems differently...
 - Looking at historical dynamics.
 - Testing variations in behaviours.
- ... but is more and more often used as a pretext
 - Using time to get exogeneity and only as such.
- History is especially important to study change in population
 - Lots of inertia in demographic phenomenon.
 - Being able to see long-term effects.

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