

RESEARCH BRIEF #80

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Conservative State Policies Contribute to Higher Mortality Rates among Working-age Americans

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KEY FINDINGS

- State policies predict the risk of dying among working-age adults (ages 25-64) from all causes and specifically from cardiovascular disease, suicide, alcohol, and drug poisoning.
- More liberal policies on firearms, labor, environment, taxes, and tobacco and more conservative marijuana policies predict lower mortality risks.
- Trends in state policies in recent decades, especially on firearms and labor, may have contributed to the high and rising risk of death among working-age adults.
- Changing state policies could cost or save thousands of adults' lives every year.

The risk of dying during working ages (25 to 64) is high and rising in the United States.¹ This trend began decades ago and is most pronounced in certain states in the South and Midwest.¹ The reasons are complex. One speculation points to the tectonic changes in states' policy contexts.² While some states enacted multiple policies that invested in people's economic, social, and behavioral wellbeing (e.g., raising minimum wage and tobacco taxes, enacting environmental protections), others invested little or divested.

This brief summarizes findings from our [recent study](#)³ that examined how state policies over the past 20 years were associated with the risk of dying among working-age adults. The study included eight policy domains: criminal justice, taxes, environment, firearms, marijuana, healthcare, labor, and tobacco. It also estimated how changing these policies across a liberal-to-conservative continuum might affect the risks of dying from any cause and from cardiovascular disease (CVD), suicide, alcohol, and drug poisoning.

Liberal Policies on Firearms, Labor, Environment, Taxes, and Tobacco and Conservative Marijuana Policies Predict Lower Mortality Rates

The risk of dying among working-age adults was strongly related to their states' policies. For example, as shown in Figure 1, women's risk of death was estimated to be 31.8% lower in a state with fully liberal firearm policies than in a state with fully conservative firearm policies, all else being equal. Among the eight policies we examined, marijuana was the only policy for which a more conservative version was associated with lower mortality. More conservative marijuana policies and more liberal policies on firearms, labor, environment, taxes, and tobacco also strongly predicted a lower risk of dying from CVD, alcohol-related causes, suicide, and drug poisoning among working-age adults.

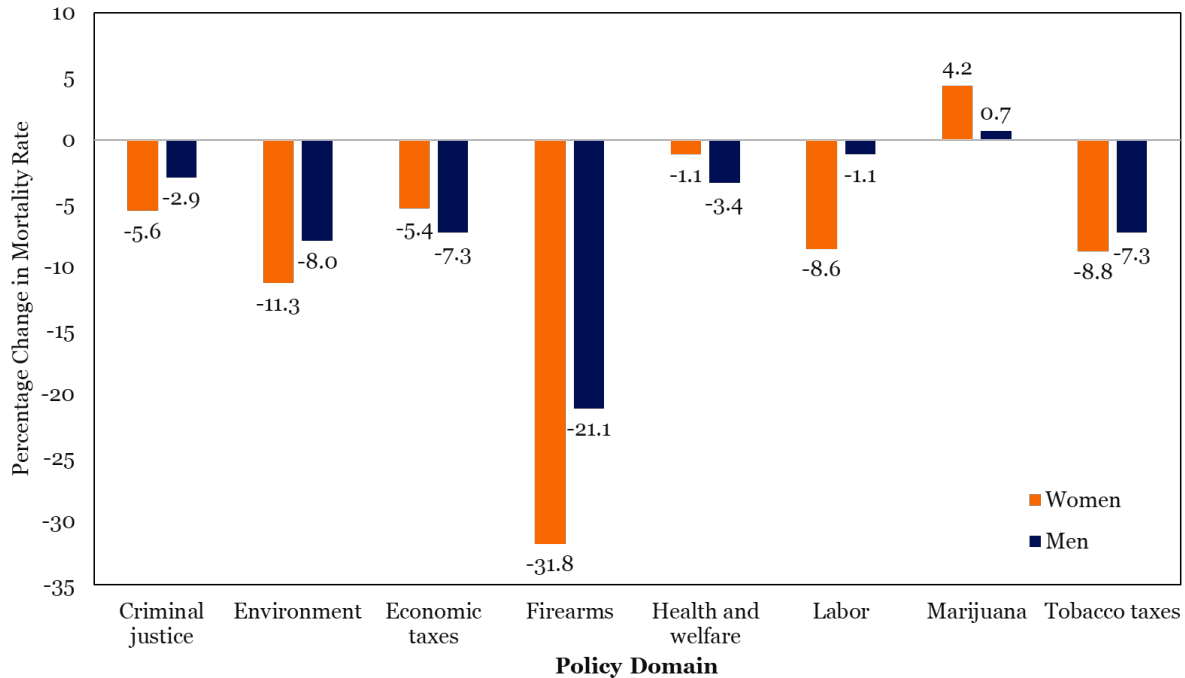


Figure 1: Estimated Percentage Change in Working-age Mortality Rate if a State Policy Changed from Fully Conservative to Fully Liberal

Data Source: Death certificate data are from the U.S. Centers for Disease Control and Prevention's restricted-use National Vital Statistics System, and state policy data are from Grumbach.⁴ Years include 1995-2019.

Changing States' Policies Could Save or Cost Thousands of Lives

If states continue their current policy trajectories, working-age death rates will likely continue to rise. However, changing states' policies could save or cost thousands of additional lives. Simulations from our models estimate that changing all eight policy domains in all states to a fully liberal orientation might have saved 171,030 lives in 2019, while changing them to a fully conservative orientation might have cost 217,635 lives.

Preventing Early Deaths Requires Attention to State Policies

State policies appear to be a key lever for reversing the increase in mortality risk among working-age adults. As these policies have diverged and polarized in recent decades, a greater share of working-age adults is now living in states with policies associated with high mortality. Mostly notably, we find³ that, between 1994 and 2014, the share of working-age adults living in states with relatively conservative firearm policies nearly doubled, from 28.9% to 54.6%, the share living in states with relatively conservative

labor policies rose from 37.4% to 51.4%, and the share living in states with relatively conservative marijuana policies declined from 67.0% to 44.5%. Fixing the high and rising mortality among working-age adults requires state—as well as federal and local—policymakers to enact policies that provide a foundation for all Americans to achieve economic, social, and behavioral wellbeing.

Data and Methods

Age-adjusted mortality rates by sex for each state and year (2000-2019) were calculated using data from the National Vital Statistics System. Annual policy data (1995-2014) were from Grumbach.⁴ Analyses predicted mortality risk from 8 state policy domains, adjusting for stable differences between states, time, state's unemployment rates, share of the state's population that were immigrants, and, in models predicting drug poisoning, the number of state laws intended to reduce opioid supply or harm. Full methodological details are available in the [published paper](#).

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