**REPORT**

###### Monday, October 23, 2017

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**“Wealth-Associated Disparities in Death and Disability in the United States and England”**

**TEASE RUNS: 5 seconds**

**IS WEALTH ASSOCIATED WITH DEATH AND DISABILITY IN OLDER ADULTS IN THE U-S AND ENGLAND?**

**JAMA 4064**

**TRT: 1:54**

**Monday, October 23, 2017, 11 AM ET**

**INTRO:**

**Although life expectancy has increased worldwide, differences in death rates among socioeconomic groups continue to grow in the United States and Europe. But are there differences in the relationship between wealth and health among older adults in the U-S, which has Medicare and Social Security, and in England where there is a national health care system? A new study in JAMA Internal Medicine looks at that question. Laura Berger has more in this week’s JAMA report.**

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| **B ROLL:**  **Couple crossing street, couple walking, couple biking, couple shopping, walking dog, crowd**  **SOT/FULL**  **Lena Makaroun, MD Geriatrician, VA Puget Sound Health Care System, U of Washington**  **Super@: 20**  **Runs: 26** | **AS THE GLOBAL POPULATION AGES, DISABILITY RATES ARE RISING AND SO ARE DISPARITIES IN DEATH RATES AMONG SOCIOECONOMIC GROUPS. A NEW STUDY IN JAMA INTERNAL MEDICINE COMPARES THE ASSOCIATION BETWEEN WEALTH AND HEALTH IN THE UNITED STATES AND ENGLAND TO UNDERSTAND HOW WEALTH INFLUENCES DEATH AND DISABILITY IN TWO COUNTRIES WITH DIFFERENT HEALTH CARE AND SAFETY NET SYSTEMS.**  **“ …Wealth is a better representation of purchasing power in retirement for older adults. We also wanted to study the association of wealth with disability; as disability is a crucial health outcome for older adults and is linked to quality of life, hospitalizations, and nursing home placement. The reason we wanted to look at the difference between the United States and England, is that these two countries have extremely different health care and social safety net systems.”** |
| **B-ROLL:**  **Dr. walking down hall, working at desk, man walking dog, man with cane, man walking, man sitting, women at café, lady walking, men walking, crowd, man walking** | **DR. LENA MAKAROUN (MAK-A-ROON) OF THE VA PUGET SOUND HEALTH CARE SYSTEM AND CO-AUTHORS ANALYZED DATA FOR ADULTS OVER 50 FROM THE U-S HEALTH AND RETIREMENT STUDY AND THE ENGLISH LONGITUDINAL STUDY OF AGING.**  **THEY SEPARATED ABOUT 12 THOUSAND ADULTS IN THE U-S AND MORE THAN 75 HUNDRED IN ENGLAND INTO CATEGORIES OF WEALTH BASED ON THEIR NET WORTH AND CATEGORIES OF AGE BECAUSE MANY SAFETY-NET PROGRAMS BEGIN AT AGE 65.**  **THEY TRACKED DEATH AND DISABILITY – MEANING DIFFICULTY IN THINGS LIKE EATING, DRESSING OR BATHING.**  **THEY FOUND THAT LOWER WEALTH WAS ASSOCIATED WITH HIGHER RISK OF DEATH AND DISABILITY IN OLDER ADULTS IN BOTH THE U-S AND ENGLAND.**  **DR. MAKAROUN SAYS LIFELONG STRESSORS RESULTING FROM LOW WEALTH – SUCH AS UNSTABLE HOUSING AND EXPOSURE TO TRAUMA – COULD BE A FACTOR IN THE ASSOCIATION BETWEEN LOWER WEALTH AND POORER HEALTH IN BOTH COUNTRIES DESPITE DIFFERENT SAFETY-NET AND HEALTH CARE SYSTEMS.** |
| **SOT/FULL**  **Lena Makaroun, MD Geriatrician, VA Puget Sound Health Care System, U of Washington**  **Super@: 1:33**  **Runs: 17**  **Broll man walking dog, couple walking, men with canes, couple walking** | **“ Our results suggest that wealth is a strong social determinant of health and may inform policy makers interested in improving population health to focus on social and fiscal policies in addition to health policy.”** |
| **B-ROLL: men on bench** | **LAURA BERGER, THE JAMA REPORT** |

**TAG: ABOUT HALF OF THE ADULTS WERE WOMEN.**

**Please see the complete study for additional information, including other authors, author contributions and affiliations, financial disclosures, funding and support, etc.**

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**ADDITIONAL SOUNDBITES:**

**QUOTE 1 Runs: 25 seconds**

**“Now, we couldn’t determine causality from our study, but one possible explanation for our**

**results is that poor health outcomes result from cumulative life long stressors resulting from low wealth. Our study suggests that the ability of health care delivery to kind of improve those stressors and help later in life may be modest.”**

**QUOTE 2 Runs: 20 seconds**

**“Another possibility is that in both the United States and England, the health care systems are primarily focusing on treating diseases rather than on prevention and health promotion so it may be that the time point of intervention needs to be much earlier to affect the health trajectory of low wealth individuals.”**