Health Starts Where We Learn

An essay by Richard W. Riley
We all know that better education leads to better career opportunities, but what if we recognized that it also can lead to a longer and healthier life? Consider this: if you do not graduate from high school, you are likely to earn less money and struggle to make ends meet, work longer hours and maybe even two jobs just to feed your family, and live in a compromised neighborhood without access to healthy food. Simply put, you aren't likely to be as healthy as a college-educated professional. So as governor of South Carolina, and someone who was responsible both for our state’s public education and our health care system, it was critical to realize that fixing one could help the other. If we could raise SAT scores, we could lower the rate of infant mortality. If we could graduate more young people from high school, those graduates would live longer, healthier lives. And if more of our high school graduates were admitted to college, their life expectancy would increase even more.

We all think a lot about improving access to medical care, and that’s important. But consider this: eight times more lives can be saved with education than with medical advances. That sounds shocking, but it underscores just how fundamental education is to our health. The study, “Giving Everyone the Health of the Educated: An Examination of Whether Social Change Would Save More Lives Than Medical Advances,” published in the American Journal of Public Health, found that between 1996 and 2002, medical advances averted, at most, 178,193 deaths. Perhaps more importantly, “correcting disparities in education-associated

Richard W. Riley was governor of South Carolina from 1979 to 1987 and was U.S. Secretary of Education from 1993 to 2001. Throughout his work, he recognized the integral link between education and health and was able to improve outcomes in both. In 2009, Time Magazine named him one of the 10 best Cabinet members in U.S. history.
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mortality rates would have saved 1,369,335 lives during the same period.” That is a stunning number linking better health to better education. That’s not to say we back away from making sure everyone has access to medical care, but it says that medical care isn’t the only answer.

Most people don’t want to think that their life expectancy is limited by their education. In fact, they see life expectancy and education as largely separate, unrelated issues. Yet we know that infant mortality rates decrease when a mother has a college education. We know that infant mortality rates increase when babies are born into poor families, generally families where there is little education. And we know that health improves as one’s education attainment increases. Better educated people have more opportunity to make healthier decisions. They have the money and access necessary to buy and eat healthier foods, including more fruits and vegetables. They are more likely to be familiar with the dangers of tobacco and alcohol and, as such, use them less. Data from the National Longitudinal Mortality Study tell us that people with higher education live five to seven years longer than those who do not finish high school. So we know, through research and practice, that people with more education generally lead longer, healthier lives, and are more involved in school and community activities.

In South Carolina, we were able to improve the health of our citizens by strengthening our education system. A broad coalition of business and community leaders, politicians, educators and parents with a shared vision for a better educated, more productive, more prosperous, healthier South Carolina came together to support a one-cent sales tax to fund education improvement. When the tax was first proposed, there was strong opposition from legislators. South Carolina, and indeed the entire country, was in the grips of a recession. Raising taxes for any reason was not popular with many officials who had to stand for re-election. But our coalition worked carefully and diligently to persuade
our colleagues that this was the right thing to do for our children and for the future of South Carolina. No one worked harder for this legislation than my late wife, Tunky. When the bill was being debated, she was undergoing chemotherapy for a return of her breast cancer. She would go for treatments in the morning and sit in the gallery in the afternoons during the debate listening to every word so that she could go back to the local coalitions to put pressure on legislators who opposed the legislation. In the end, the bill was enacted with strong bipartisan support. And more than 25 years later, improvement in public education continues. SAT scores rose, and infant mortality dropped. High school graduation rates increased, and our citizens are living longer and in better health. And what happened in South Carolina is simply a microcosm for the rest of the country.
Schools are not just centers of teaching and learning; they are places that provide the opportunity to improve the health of all Americans. According to the American Red Cross, 20 percent of the American public is in a school each day. That means that each day, we have the opportunity to improve the health of a significant part of the population.

In the coming decade, improving the high school graduation rate nationally must be one of our most pressing goals. Currently, there are 1.2 million dropouts nationwide, twice the size of the U.S. Army’s 600,000 soldiers serving on active duty. These young people are the real casualties of the tyranny of low expectations that we face in America and of the willingness of too many families, schools and communities to allow students to drop out of school. In the global economy in which we live, these dropouts face a dire future—one of barely getting by, working for low wages in jobs with more occupational hazards and higher stress, living in worse health, in compromised neighborhoods, with less sense of control and social support than those who graduate and go on to college.

For the last quarter century, American education has been trying to reform itself, just as our health care system has been working at reform. We need to recognize that when we reform one, we improve the other. It is imperative that we move more quickly toward reform and set aside our differences so that all Americans can have a shot at the American dream through improved education and improved health. We must create school environments all across this country that instill in our children a love of learning and that help all of them reach their full potential for educated and healthy lives.
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Health begins where we live, learn, work and play. The Vulnerable Populations Portfolio looks at factors outside of the medical care system that impact how healthy—or unhealthy—we are. We create new opportunities for better health by investing in health where it starts—in our homes, schools and jobs.