

Mortality Rates for Leading Causes of Death Rise in Counties With Higher Poverty

An ACS study highlights mortality disparities and may help accelerate equitable advancements against premature death.

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A new study led by [American Cancer Society](#) (ACS) researchers shows disparities in mortality from 10 leading causes of death by county-level poverty widened during the past three decades in the United States. The findings were out December 19 in *Med*, a journal published by Cell Press.

“There hasn’t been a lot of investigation about the progress in cause-specific mortality across U.S. counties by socio-economic status,” said [Dr. Daniel Wiese](#), principal scientist, cancer disparity research at the American Cancer Society and lead author of the study. “The good news is we discovered we’re making headway against mortality for people affected by health disparities in this country concerning many diseases like heart disease, cancer, and influenza, but we still have a long way to go for many others.”

Researchers analyzed data using county-level mortality (all-cause, 10 leading causes in 2020, excluding COVID-19) and population data derived from the National Center for Health Statistics. Scientists calculated absolute and relative changes in age-standardized death rates by county-level poverty from 1990-1994 to 2016-2020.

Study results showed from 1990-1994 to 2016-2020, death rates from all-cause, diseases of heart, cancer, cerebrovascular disease, and pneumonia/influenza declined nationally, but rates increased for unintentional injury, chronic obstructive pulmonary disease (COPD), Alzheimer’s disease, diabetes, suicide/self-inflicted injury, and kidney disease mortality. Counties with higher poverty levels (20% and higher) had smaller declines or larger increases in death rates for each evaluated cause of death, exacerbating the disparities in mortality by county-level poverty, except for unintentional injury and suicide/self-inflicted injury. For example, disparities in death rates for kidney disease between lowest vs highest poverty level counties increased from 34% in 1990-1994 to 57% in 2016-2020. In 2016-2020, death rates for leading causes of death were 12% (for Alzheimer’s disease; suicide/self-inflicted injury) to 81% (for diabetes) higher in persons residing in counties with the highest poverty level than in those residing in the lowest poverty level.

“We think these findings can stimulate further research on factors that mediate the association between poverty and cause-specific mortality and, consequently, speed up equitable progress against premature death in this country,” Wiese added.

“This research highlights the pressing need for Congress and state lawmakers to prioritize policies that make health care affordable for everyone,” said [Lisa A. Lacasse](#), president of ACS’s advocacy affiliate, the American Cancer Society Cancer Action Network (ACS CAN). “We urge Congress to support the Medicaid program and the 10 states that have yet to increase Medicaid eligibility to act quickly. This will help ensure more people can access lifesaving early detection, get preventive screening for diseases like cancer, and receive the quality and timely treatment they need to not only survive but thrive after a diagnosis.

Other ACS researchers contributing to the study include [Dr. Hyuna Sung](#), [Dr. Ahmedin Jemal](#), and senior author [Dr. Farhad Islami](#).

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