

## **Health Trajectories over the Life Course: The Consequences of Childhood Health and Social Background Factors**

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The health of individuals is not temporally static, nor can it be divorced from the cumulative impacts of lived experience, which include exposures associated with the physical environment and those derived from individual placement within social and economic hierarchies. Because its basic theoretical and methodological insight is to recognize that individual life circumstances and the events that shape them are best understood in the context of previous events and circumstances, the life course perspective has the potential to provide great insight into the factors and processes that shape health.

Accordingly, there is growing literature on the relationship between early life circumstances and adult health. This includes the work of epidemiologists such as Barker and his controversial Fetal Origins Hypothesis concerning the pathogenesis of cardiovascular disease. Likewise, demographers and other social scientists are beginning to investigate the myriad ways in which adult health and mortality risk are linked to early life exposures (Blackwell et al. 2001; Hayward 2004). This literature suggests that substantial gains in understanding adult health and mortality outcomes can be made from better knowledge of the determinants of health over the life course. They also suggest that the broad parameters of health trajectories may be forged very early in life, as unhealthy children become unhealthy adults and healthy children healthy adults.

Unfortunately, to date this literature has been limited to the estimation of the effect of a given childhood exposure on health or the cumulative mortality risk at some

singular point in adulthood. Few studies have examined health trajectories *as such* or estimated the extent to which childhood health and social conditions are related to the pace and progression of disability and chronic disease. In other words, scant research has looked at whether childhood health and disadvantaged social background increase the “quantum” of aging.

This study attempts to fill this empirical gap by examining the impact of early life circumstances on life course health trajectories. In particular, it investigates the effect of poor infant and childhood health and of parental socioeconomic status on the overall level of adult health and disability, as well their trajectories over time. Using a unique combination of retrospective and prospective data from the Health and Retirement Study (HRS) and latent growth curve models, I estimate the effects of early life health and social circumstances on the overall level and slope of health curves. The use of growth curves is insightful because they can simultaneously examine differentials in both the level (the latent intercept) and trajectory (latent slope) in outcomes over time and the effects of covariates on each of these. In addition, they can be used to model linear and non-linear forms in such relationships.

Preliminary results suggest that poor childhood health has persistent adverse effects on overall adult health as well as trajectories of health over time. This finding is robust across various measures of health status, including overall self-rated health, disability status, or physician-diagnosed chronic disease. This effect of poor childhood health is also orthogonal to both current and childhood socioeconomic status as well as known adult health-related risk factors.