

Academic Study Finds Reparations to Black Americans Would Narrow Racial Health Gap, Increase Life Expectancy

Study published in JAMA Network Open presents research linking African Americans' poor health outcomes and shorter life expectancy to substantially lower wealth

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Dr. Kathryn Himmelstein

A study published today in JAMA Network Open concludes that the racial wealth gap has lethal implications for Black Americans. On average, White households have more [than a 6 to 1 advantage over Black households](#) in mean wealth, \$980,549 to \$142,330, contributing to widespread racial health inequities and shortened life expectancies.

Completed by researchers at Harvard Medical School, the University of Pennsylvania, Johns Hopkins, Drexel, and Duke, the study finds that eliminating the wealth gap with

reparations payments would shrink racial inequities in health and longevity. The study links the low wealth of Blacks, a product of the legacy of slavery and subsequent discriminatory public and private policies and practices, to their shorter life expectancy.

“Our study demonstrates a reparations plan that raised Black net worth sufficiently to eliminate the racial wealth gap for Black American descendants of U.S. slavery would lengthen Black lives dramatically,” said Dr. William Darity Jr., professor of Economics, African and African American Studies at Duke University, and a co-author of the study.

The researchers analyzed data on 33,501 Black and White middle-aged Americans who were tracked for up to 26 years in the federally-funded Health and Retirement Study, which collects comprehensive data on each person’s wealth. Specifically, it includes data rarely available in health studies, such as net value of investments, housing equity, vehicles and other assets.

Among the research subjects, whose average age was 59 at the outset of the study, the odds of dying for Blacks was 26% higher than their White counterparts, equivalent to 4.0 fewer years of

remaining life expectancy. The researchers found that differences in wealth accounted for much of the life expectancy gap and projected the effect of equalizing wealth through reparations payments. Their analysis indicates that fully closing the wealth gap would nearly equalize the two groups' odds of dying, greatly reducing the current Black-White inequity in life expectancy.

"Our findings add to the compelling moral case for reparations," said Dr. Kathryn Himmelstein, a study co-author and infectious disease fellow at Harvard's Massachusetts General and Brigham and Women's Hospitals. "Compensating Black families for the economic legacy of slavery and discrimination would do more than heal their finances – it would improve their health and add years to their lives."

Some activists and scholars have long advocated reparations for Black Americans as compensation for the racism that began with slavery and continued with Jim Crow laws, New Deal programs that initially excluded many Black Americans, housing policies that limited Black families from gaining intergenerational wealth, and other racist government policies and practices. Reparations advocates point to historical precedents like the U.S. government's payments to previously-interned Japanese Americans and Germany's payments to Holocaust survivors. Poll data from 2021 suggest 36% of all Americans, including 86% of Black Americans, support reparations (up from 15% of Americans in 2014), and 196 members of Congress have signed on to a bill that would establish a federal commission to study reparations.

"Many health workers are aware of the deadly impacts of racism on health for Black people, but few have supported reparations as a remedy," said Dr. Michelle Morse, a co-author of the study and internal medicine physician and Assistant Professor at Harvard Medical School. "This research makes it clearer than ever for the medical and public health community to consider reparations as a remedy to advance racial justice and health equity."

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