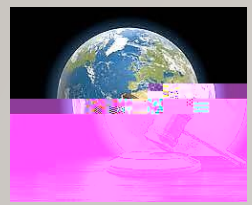

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Research has not been able to offer definitive answers to some critical questions because of:

- Distribution & content of education changes over time
- Education & health are interlinked through life spans within and across generations of populations – thereby involving a larger context within which the association is embedded (Lynch, 2003).
- Three sets of : (income, occupation), (factors that influence access to resources and coping strategies, childhood health), (healthy behaviors) (Folkman & Lazarus, 1980; Harper & Lambert, 1994; Wheaton, 1983)
- There is therefore a growing need for new directions in education–health research.

- To get a clear understanding of the education-health equation and study how education can be key to reducing health disparities & improving the well being of future populations.

Research Question:

-

- Country level data from OECD & World Bank (1995-2015)
- :
  - Adult education level (below secondary, upper secondary, tertiary);
  -

RESULT

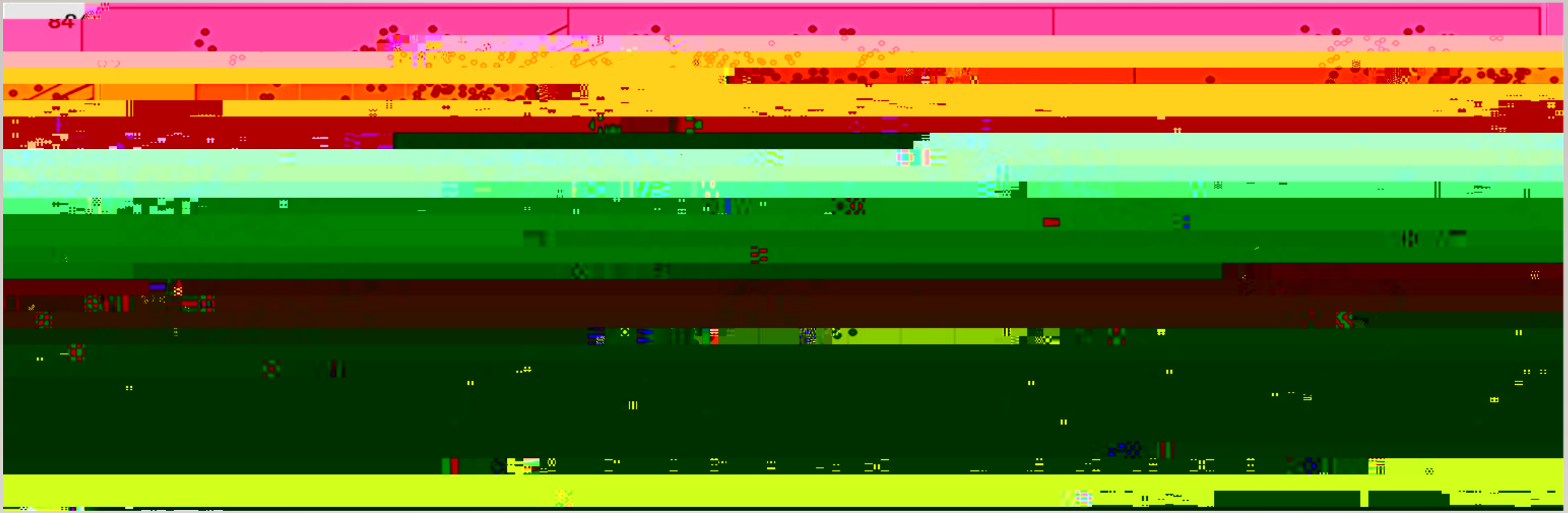
ü

ü GDP had a negative assoc w/ Infant mortality rate & potential years of life lost

(Countries with higher GDP have lower infant mortality & potential years of life lost)

ü GDP showed no assoc w/ Life expectancy at birth & deaths from cancer.

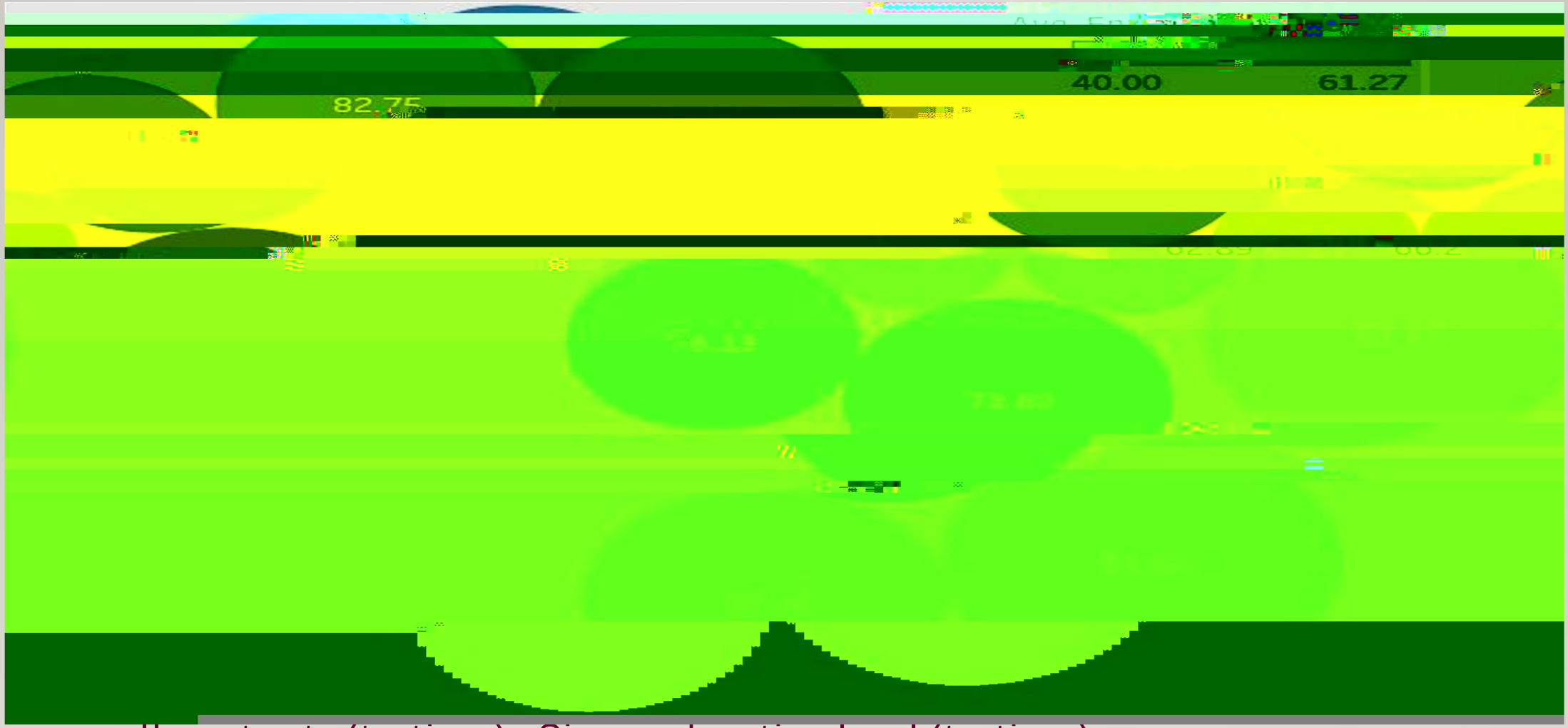
ü education outcomes (
) associated w



Tertiary education level - positive association
NEET ð negative association
Tertiary school life expectancy ð positive association

ü Are (tertiary) and (Tertiary) assoc w/ –

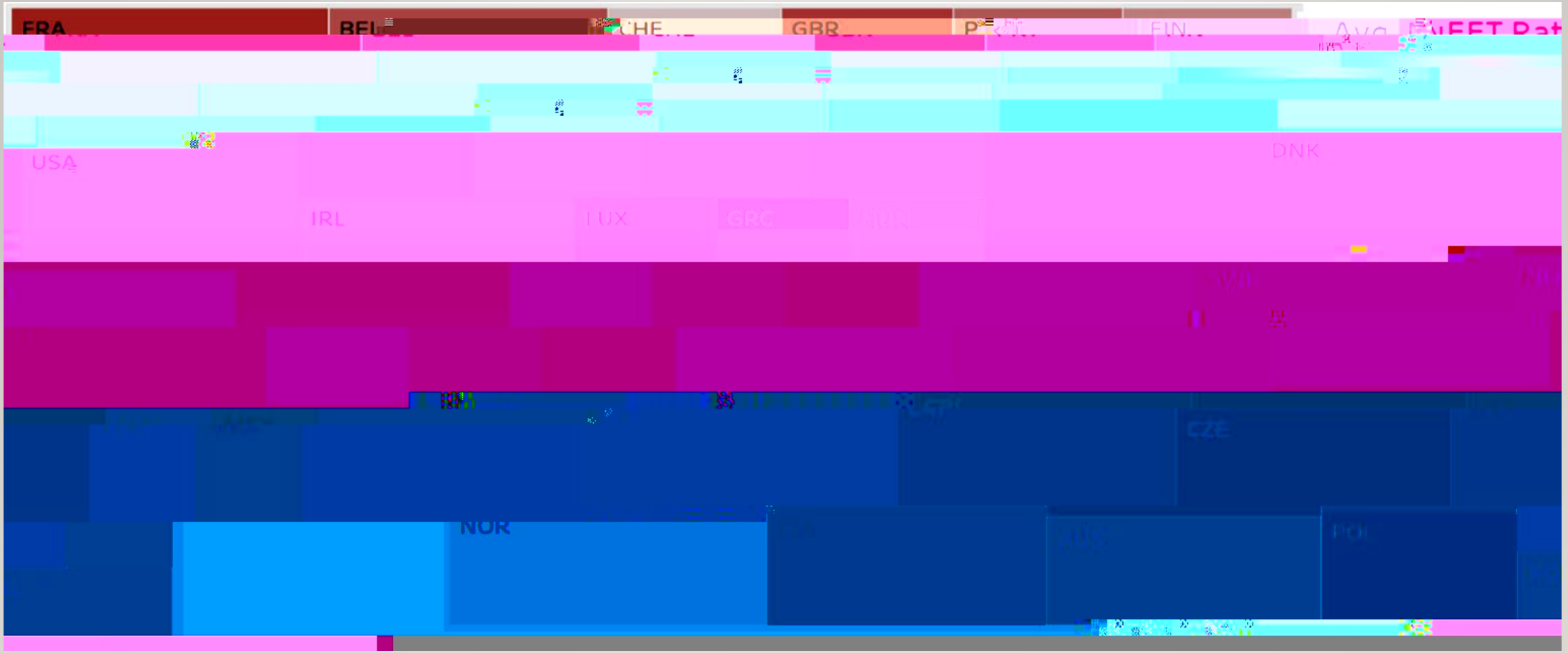
Figure 5



Color = enrollment rate (tertiary); Size = education level (tertiary)
label=child vac rate; Positive assoc of both education & enrollment with child vac rate

ü ls

ü ls assoc w/ (Figure 9)



TUR has the highest NEET;

While SWE,DEN have high exp & low NEET, USA high high exp & high NEET– inconsistent to see any pattern of association

ü ls assoc w/ rates – Figure 13 (positive)

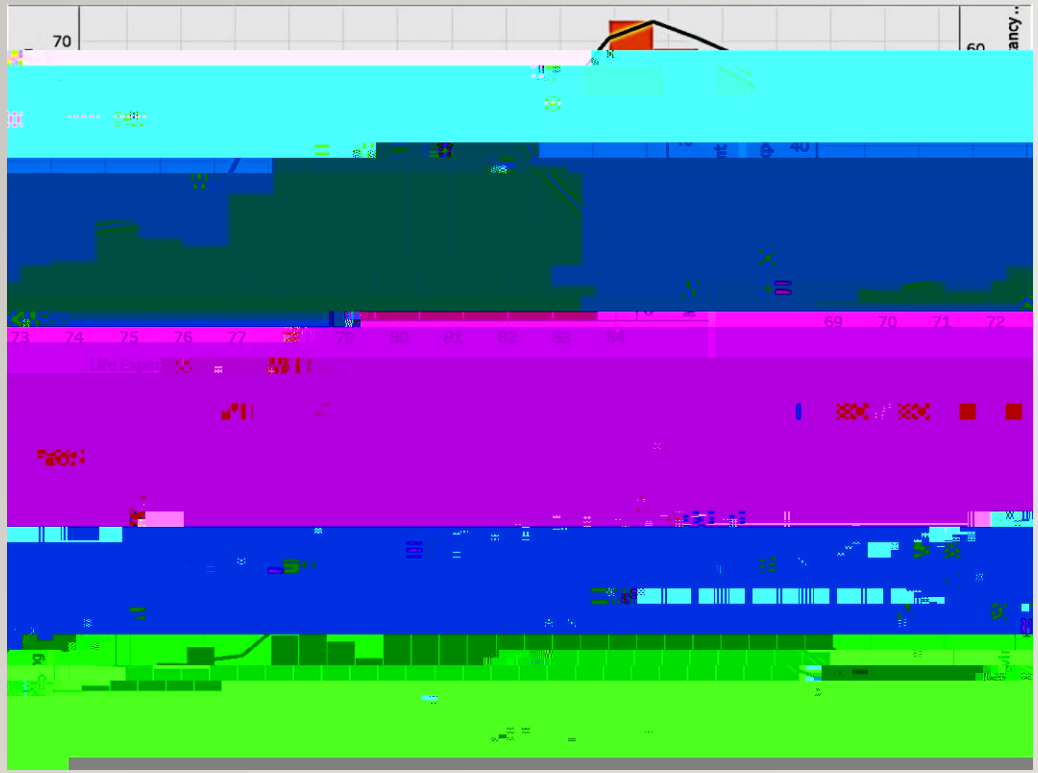
ü Is assoc w/ ? Figure 8

ü

Distribution of

&

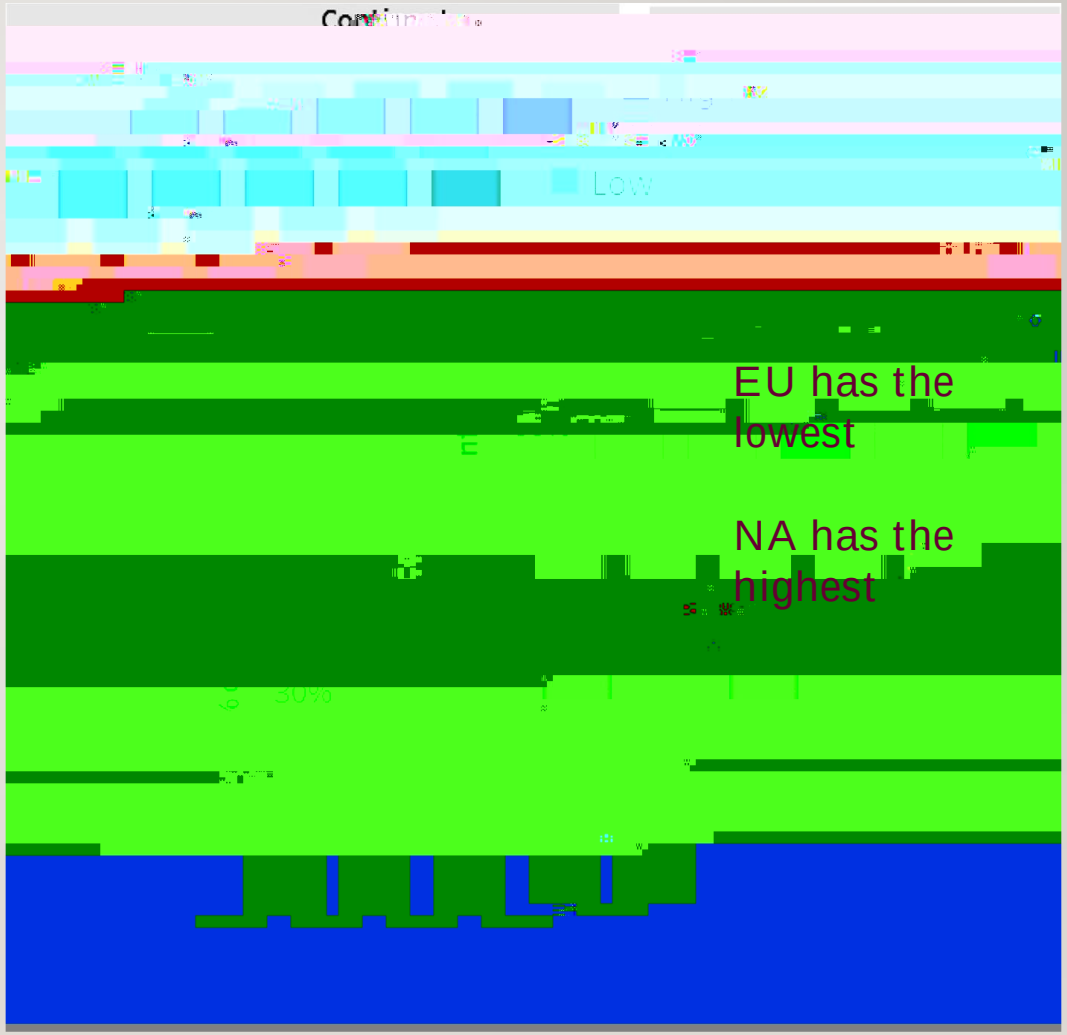
(tertiary)



Life expectancy is skewed to the right (most countries have high); Enrollment rate follows a normal distribution

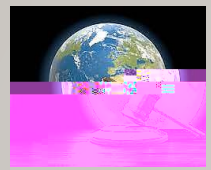
Distribution of

by continent



Summary of analysis in slides:

- ü Do countries with higher have better health status?
  - ü negative assoc w/ Infant mortality rate & potential years of life lost
  - ü no assoc w/ Life expectancy at birth & deaths from cancer
- ü Are (adult education level-tertiary, tertiary school life expectancy, NEET) associated w/ Positive, Positive & negative
- ü Are (tertiary) and (Tertiary) assoc w/ s? Figure 5 - Positive
- ü Is NEET rate (15–19; 20–24) assoc w/ infant mortality rates? Figure 6 - Positive
- ü Is NEET rate assoc w/ Compulsory Health Expenditure (Figure 9) – No association
- ü Is NEET rate assoc w/ Child Vaccination Rate rates – Figure 13 - Positive



ü For one, the number of countries is limited, and being that the data are primarily drawn from OECD, they pertain to the continent of Europe

ü We considered a limited set of variables.

ü The variable potential years of life lost is affected by premature deaths that may be caused by non-health related factors too.

ü Lastly, while our study explores associations between variables it does not explore the causality.

- Both education and health are at the of individual as well as population health and well-being.
- In order to extend people's life expectancy, governments should try to improve , and control the number of youths dropping out of school and ending up unemployed (the).
- NEET rates can be reduced through that include training and certifications [7]. Additionally, they can offer and companies to offer more resources to raise general health awareness in people.
- Governments can frame

- Conceptualizations of both phenomena should go beyond the individual focus to incorporate and consider the and within which the education–health relationship is embedded.
- In developing interventions and policies, governments would do well to keep in mind the played by education—as a as well as a (Zajacova & Lawrence, 2018).
- Reducing these macro-level inequalities requires interventions directed at a .
- In terms of investment in education, we make a call for governments to focus on education in the to prevent the reproduction of social inequalities and change upcoming educational trajectories.
- There is a also need to look at circumstances that can of youth so as to improve their health (& reduce NEET).

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- Harper AC, Lambert LJ. The health of populations: an introduction. New York: Springer Publishing Company; 1994.
- Lynch SM. Cohort and life-