

Why Are the Courses You Take in High School Important for Your Health at Midlife?

Jamie M. Carroll, Chandra Muller, Eric Grodsky, and John Robert Warren

INTRODUCTION

Individuals with higher levels of education live longer and report better health than those with less education. Research suggests that education improves health and longevity by way of improving skills such as literacy and problem solving and the sense that one can control what happens in life. Higher levels of education also provide access to jobs with higher earnings and fewer hazards of illness or injury. In addition, more education can lead to more advantageous social positions that can help people avoid processed foods, immobility, and an overreliance on medications.

However, even students who have the same level of education may have different experiences in school, including what they learn and how they learn it. The courses students take in high school affect whether they will attend and complete college and the jobs they will have in adulthood. In addition, the development of skills in more advanced courses (such as calculus, physics, or advanced foreign language) can enhance people's capacities to make choices that lead to better health. For example, people who are more adept in written and verbal communication and problem solving are better able to understand and use new information about health. Therefore, the courses students take in high school will likely affect their health as they age.

Using data from the High School and Beyond cohort of high school sophomores, this brief reports on the relationship between high school course-taking and self-reported health thirty years after high school. High School and Beyond data set includes interviews from around 15,000 high school sophomores in 1980 and from several points in the 1980s and 1990s; it also includes high school and postsecondary transcripts. In 2014, when participants were about to turn fifty years old, they were asked to report on their health, which is a subjective measure of overall wellbeing that captures the presence of mental and physical conditions. The authors examine how the level of coursework students took in high school shapes their health in midlife. They also analyze how midlife health would change if all students had taken at least the highest level of coursework for which they were prepared, based on their skills as measured during their sophomore year of high school.

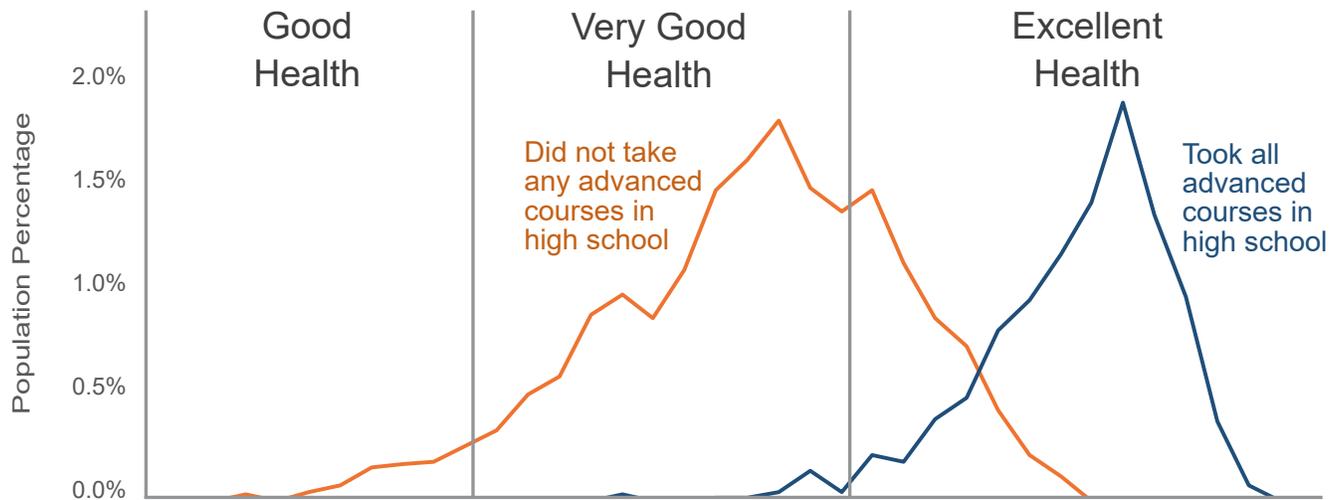
POLICY IMPLICATIONS

Educational policies often only refer to preparing students for "college and careers," but policymakers would do well to promote high school courses that could improve health well beyond high school. Though the reasons advanced courses improve health are not certain, improved health is likely connected to pedagogical practices that empower students to become independent and creative thinkers. While these practices are often reserved for advanced courses, students could be taught similar strategies across all levels, subjects, and grades, thereby potentially improving all students' future health. Therefore, encouraging more access to advanced coursework in high school, as well as pedagogical strategies that empower independent thinking, could greatly improve our population's health.

KEY FINDINGS

- > **Taking advanced courses in high school appears to improve health 30 years later** (*see figure*). Indeed, taking just one advanced course in high school improves self-reported health in midlife, even taking into account skills developed in high school and educational and occupational attainment in early adulthood.
- > If under-placed students had taken at least the highest level of coursework for which they were prepared, their health in midlife would be better.

PEOPLE WHO TOOK ADVANCED COURSES IN HIGH SCHOOL REPORT BETTER HEALTH AT MIDLIFE



This figure shows that, even after taking into account background characteristics and baseline skills, people who took all advanced courses in high school (such as calculus, physics, and advanced foreign language) reported better health when they were about 50 years old, compared to those who took only low-level classes in high school (such as general math, general science, and no foreign language).

REFERENCE

Carroll, J.M., Muller, C., Grodsky, E. & Warren, J.B. (2017). Tracking health inequalities from high school to midlife. *Social Forces* 96(2):591-628. <https://doi.org/10.1093/sf/sox065>

SUGGESTED CITATION

Carroll, J.M., Muller, C., Grodsky, E. & Warren, J.B. (2018). Why are the courses you take in high school important for your health at midlife? *PRC Research Brief* 3(9). DOI: 10.15781/T2KK94W4V.

ABOUT THE AUTHORS

Jamie M. Carroll (jmcarroll@utexas.edu) is a doctoral candidate in the department of sociology and a National Institute of Child Health and Human Development trainee at the Population Research Center at The University of Texas at Austin. **Chandra Muller** is the Alma Cowden Madden Professor in the sociology department and a faculty research associate in the PRC at UT Austin. **Eric Grodsky** is a professor of sociology and educational policy studies at the University of Wisconsin–Madison. **John Robert Warren** is a professor of sociology at the University of Minnesota and director of the Minnesota Population Center.

ACKNOWLEDGEMENTS

This material is based upon work supported by the Alfred P. Sloan Foundation under grant number 2012-10-27, the National Science Foundation under grant numbers HRD 1348527 and HRD 1348557, and the Institute for Education Sciences of the US Department of Education under grant number R305U140001. This research was also supported by the Eunice Kennedy Shriver National Institute of Child Health and Human Development under grant numbers 5 R24 HD042849 and 5 T32 HD007081 (Training Program in Population Studies). The publication on which this brief is based has been subject to disclosure review and has been approved by the US Department of Education's Institute for Education Sciences in line with the terms of the High School and Beyond restricted use data agreement. Any opinions, findings, and conclusions or recommendations expressed in this material are those of the authors and do not necessarily reflect the views of the National Science Foundation.