

# Effect of College Selectivity on Later-Life Health and Mortality: Evidence From the Wisconsin Longitudinal Study

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## Question/Hypothesis

**Question:** Does college selectivity affect later-life health and mortality?

**Hypothesis:** Those who attend more selective colleges will rate their health as better, will have fewer health conditions, and will have lower mortality than those who attend less selective colleges

## Motivation

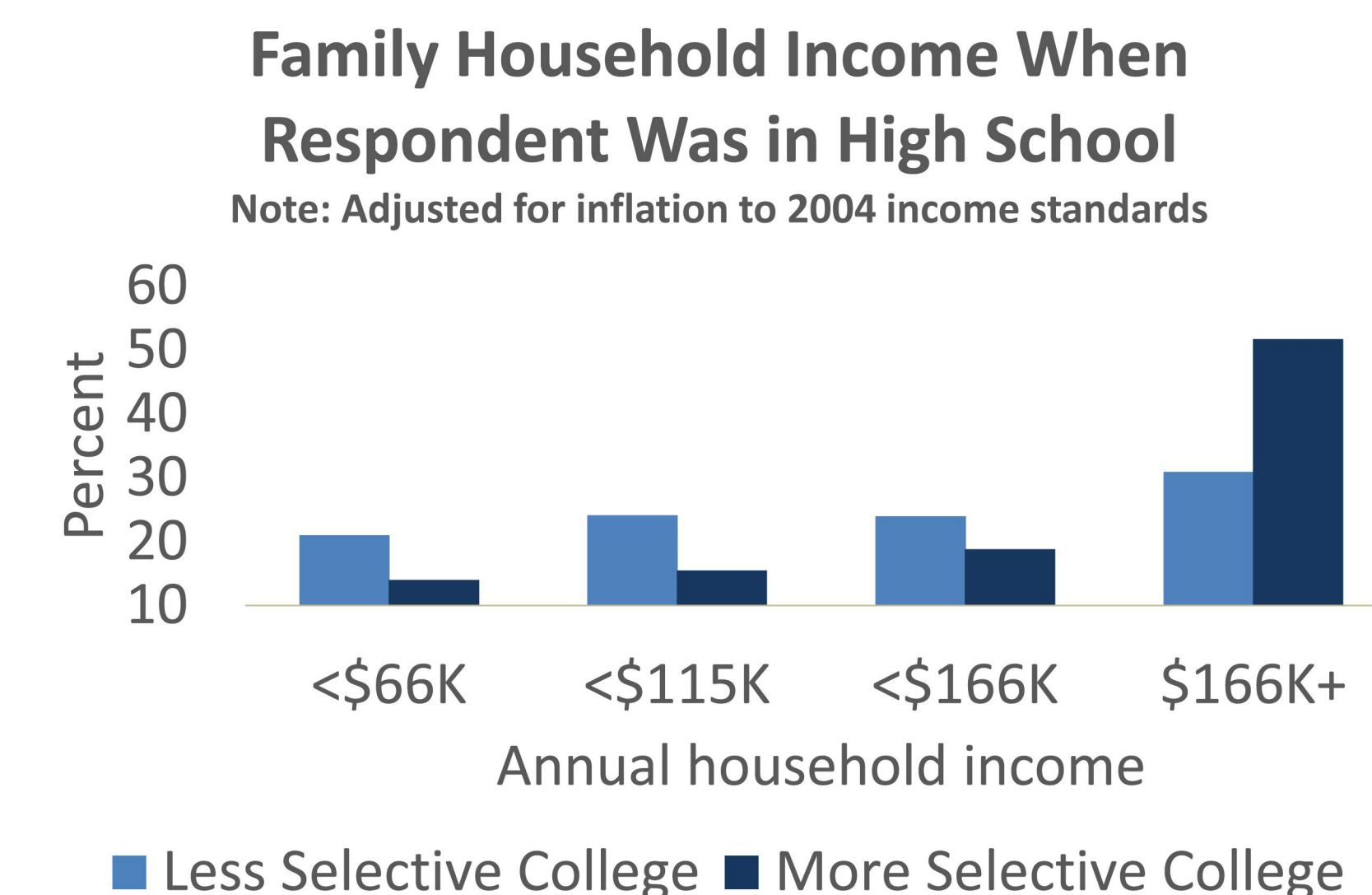
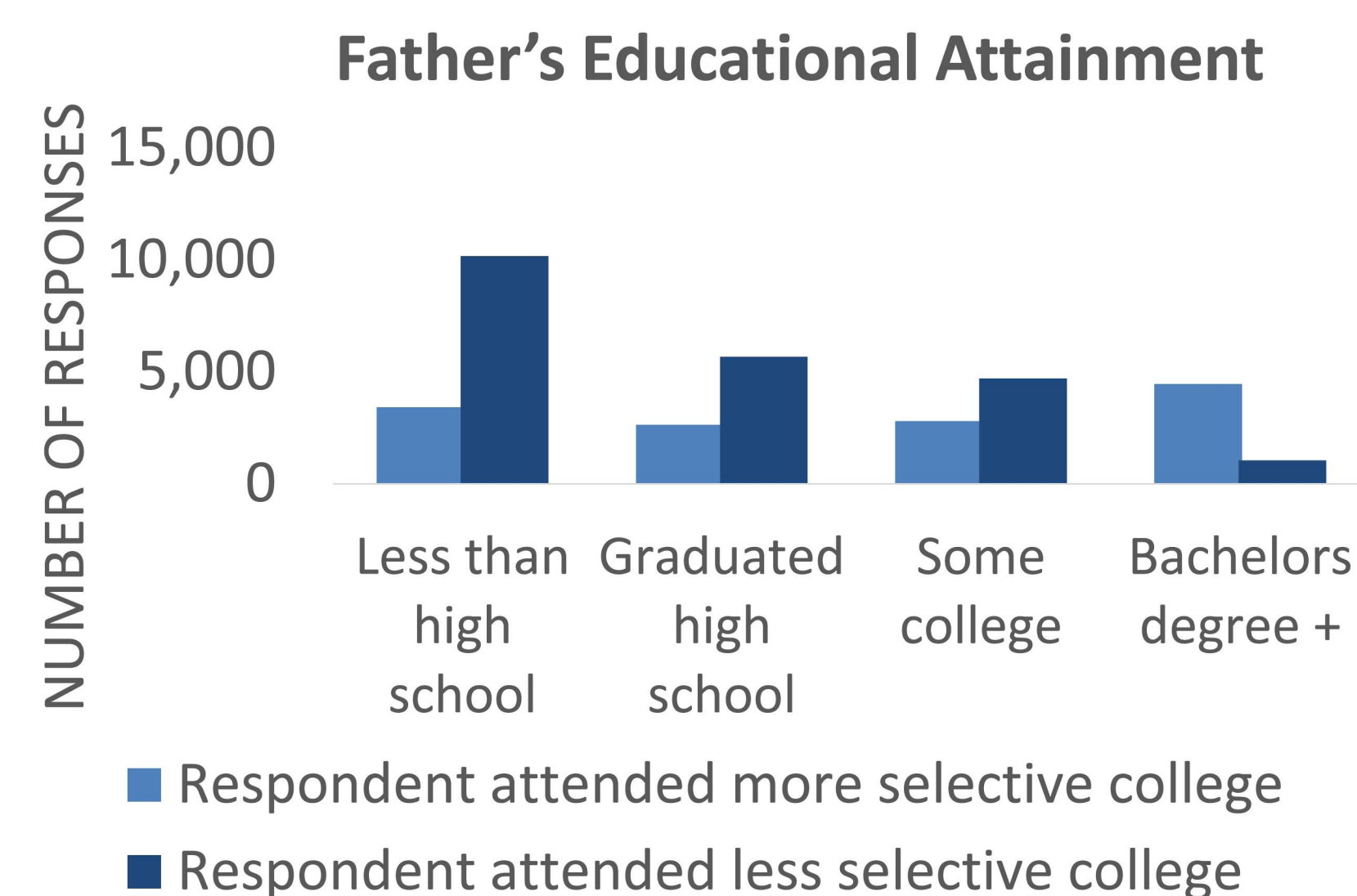
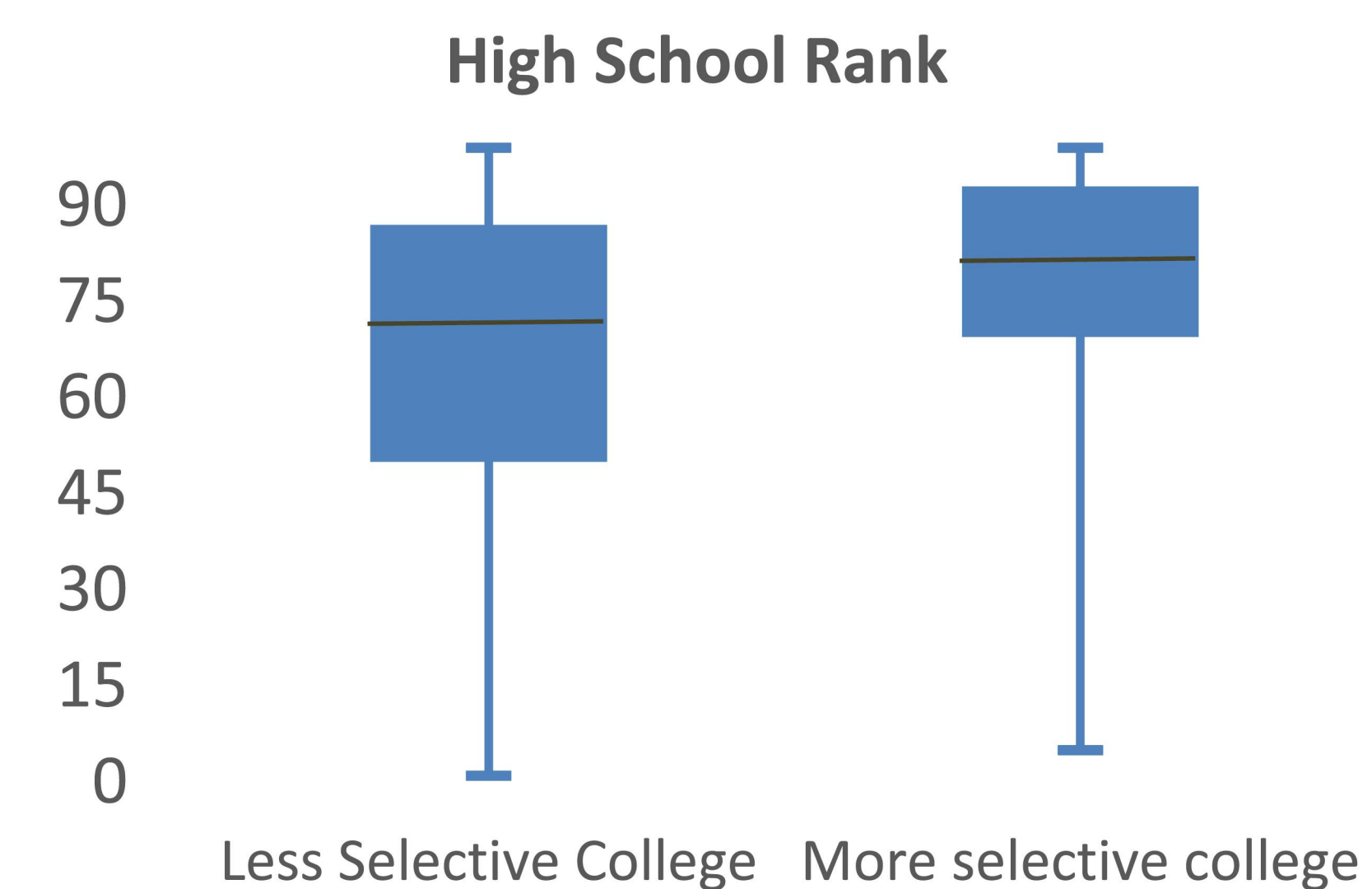
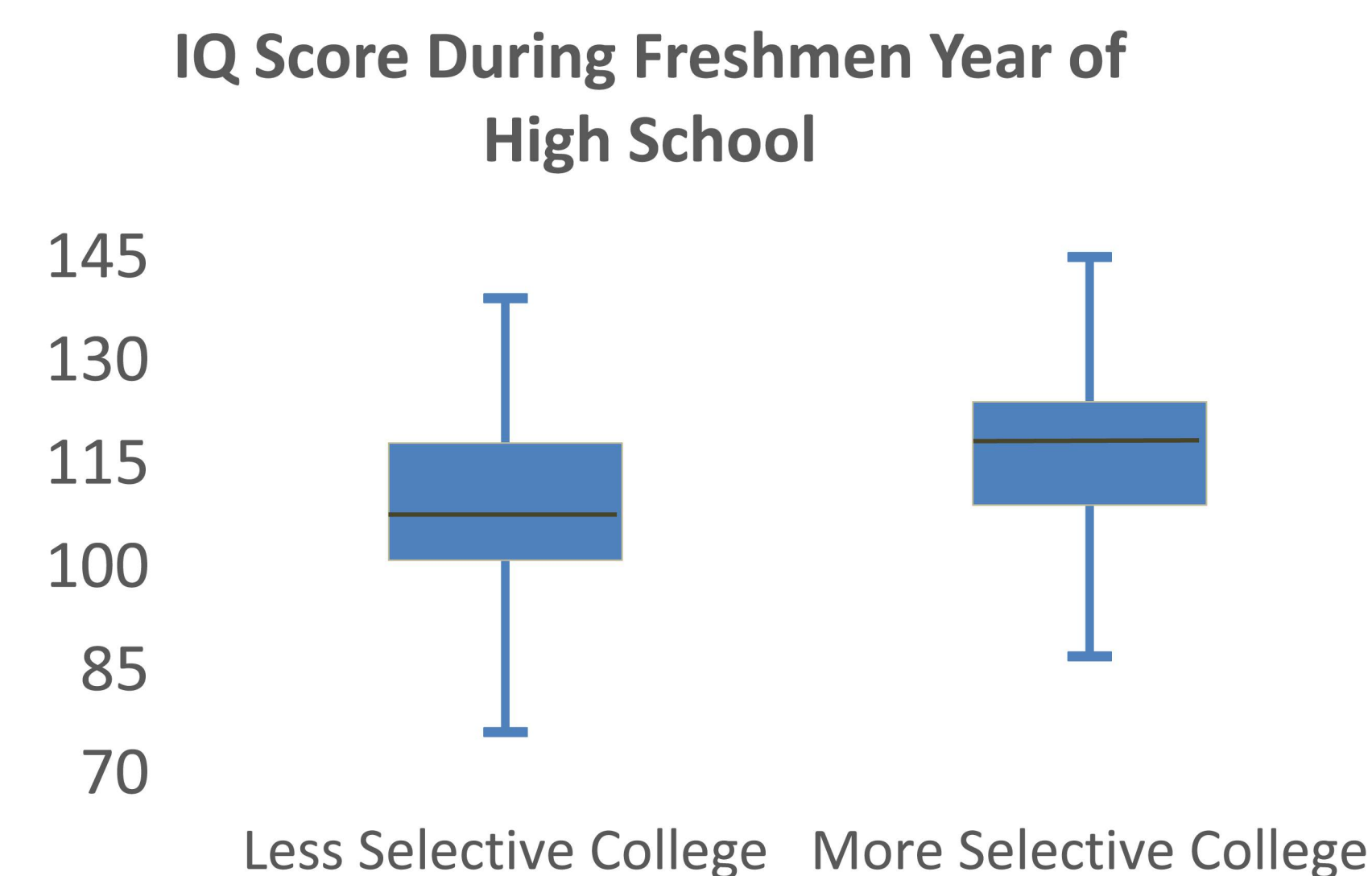
While educational attainment remains a persistent predictor of health and mortality, quality of education has been overlooked as a potentially important component in the education-health and mortality relationship

Motives for exploring educational quality:

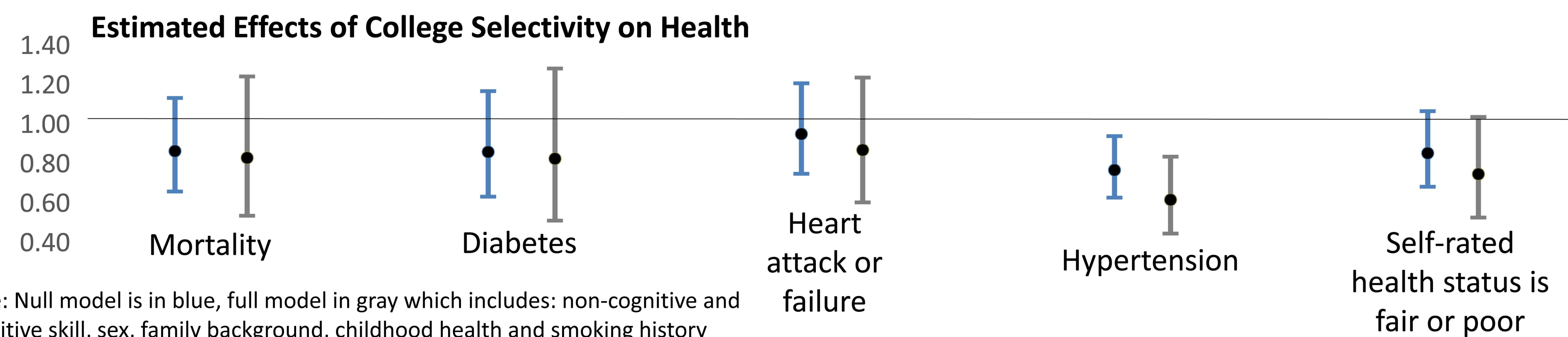
- School quality, and college selectivity in particular, has been shown to significantly impact post-education labor market outcomes and earnings
- College selectivity may provide better future employment opportunities through social contacts, better jobs, and different cultural norms surrounding health behaviors
- Research has shown that college selectivity affects health behaviors and reduces health disparities

I improve on previous work by Fletcher and Frisvold (2014) to determine whether college selectivity matters for later-life health and mortality

## Descriptive Results



## Multivariate Results



Note: Null model is in blue, full model in gray which includes: non-cognitive and cognitive skill, sex, family background, childhood health and smoking history

## Data and Study Design

- Used data from the Wisconsin Longitudinal Study merged with Barron's Profile of American Colleges to determine college selectivity
- Controlled for non-cognitive and cognitive traits in adolescence, childhood health, family background, sex and smoking status
- Estimated later-life health and mortality using logistic regression models for respondents who graduated from more or less selective four year colleges

## Findings

**There are no statistically significant relationships between college selectivity and health with the exception of hypertension. All relationships are in the expected hypothesized directions.**

## Conclusions

Factors that affect educational attainment and health--such as family socioeconomic status, cognitive ability and non-cognitive skill--also appear to affect college selectivity. College selectivity does not appear to affect health outcomes such as mortality, diabetes, heart attack or heart failure, hypertension or self-rated health.

### Acknowledgements

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