

Life expectancy fell 4.6 years in New York City in 2020

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New York City life expectancy fell by a shocking and unprecedented 4.6 years, from 82.6 to 78, between 2019 and 2020, the first year of the COVID-19 pandemic. This data is part of the Annual Summary of Vital Statistics, released last Friday by the city's Health Department. This figure is even higher than the fall in life expectancy in the hard-hit countries of Bolivia (3.4 years) and Peru (2.5 years) that saw devastating loss of life in the first year of the pandemic.

New York City, the financial capital of the world, was an early epicenter of the COVID pandemic. In April and May of 2020, the city's working class was especially hard hit by the virus. Poor and immigrant communities such as Elmhurst, Queens were devastated, with hospitals overflowing with patients and nurses reduced to wearing trash bags because of a shortage of personal protective equipment.

The most advanced capitalist state in the world was revealed to be totally unprepared for the disaster, even though there had been ample warning months earlier. Then-president Donald Trump spewed his usual stupidities, but his Democratic rivals, like then-mayor Bill de Blasio, had little else to offer, and also downplayed the already known dangers posed by the virus.

The Health Department releases a chart, titled "The Conquest of Pestilence in New York City," which compares the death rate per 1,000 population over time since 1800. The chart illustrates the spikes in deaths due to communicable diseases such as smallpox, cholera and measles, which regularly took place in the 19th century, and then dropped rapidly with the development of vaccines and other advances in public health. The influenza epidemic of 1918 was accompanied by the last such sharp increase in death rate.

That was 105 years ago. For the last century, the death rate has fallen and flattened out. It recently plateaued at the historically low level of about six per 1,000 population, compared to rates of 25 in the 19th century. But in 2020, sparked by the COVID pandemic, the rate jumped by 50 percent, to nine per 1,000. The health department calculated

that COVID had killed 241.3 per 100,000 New Yorkers, higher than the 228.9 figure for the 1918 influenza pandemic, often referred to as the Spanish Flu. This number reflects the devastating impact of the latest pandemic, as well as the appalling state of public health in the richest city of the richest country in the world, with its notorious "Billionaire's Row" of luxury high rises on West 57th Street in midtown Manhattan.

The NYC health commissioner, Dr. Ashwin Vasana, told the *New York Times* in an interview that he feared there would be no quick rise in life expectancy to levels from before the pandemic. He pointed to increases in deaths from other conditions, very likely due to neglect of medical care for diabetes and mental illness, among other conditions.

Deaths from heart disease jumped almost 20 percent in 2020 compared to 2019. Deaths from drug overdoses jumped more than 42 percent. There does not appear to have been a significant improvement in the two succeeding years of the pandemic. However, in that year, COVID quickly became the number one killer of the city's population.

The health department data raise fundamental social and political questions. To call the decline in life expectancy unprecedented hardly begins to convey what it demonstrates about the current international economic and social crisis.

The same mainstream news outlets that were screaming about the alleged torture and suffering of the Chinese people, because of temporary and targeted lockdowns to prevent the spread of COVID-19 outbreaks, are now obliged to report the ruinous consequences of unchecked COVID-19 in the US.

The decline of public health mirrors the economic decline of American capitalism. The rising economic power that 100 and 150 years ago was able to make significant advances in this area has now plunged back toward the 19th century. The conditions exposed by Karl Marx's collaborator Frederick Engels in 1845, in *The Condition of the Working Class in England*, find an echo nearly 180 years later.

Above all the data show how the working class, exploited on the job, is also made to pay for the capitalist crisis

through illness and premature death. The pandemic was caused by a virus, but its social impact was the direct consequence of the system of private property and of rival capitalist nation-states.

Premature deaths, defined as deaths in people under 65—the usual marker of old age—also jumped in 2020, and COVID was the leading cause of premature death among certain racial and ethnic groups, including Hispanics, Asians, and blacks, as reflected in data collected by the health department. The *Times* report showed that premature deaths occurred at nearly ten times the rate in poor neighborhoods, such as Brownsville in Brooklyn (541.7 deaths per 100,000), compared to wealthier ones, like Greenwich Village in Manhattan (59.7 deaths per 100,000). Median income is five times higher in Greenwich Village, and its wealthier occupants had ample time to head out of the city and wait out the wave of infections while working securely in their homes.

The capitalist government and the media highlight what they term the “racial disparities” contained in the devastating COVID statistics. This calls to mind the famous saying attributed to Mark Twain, “Figures don’t lie, but liars figure.”

There are almost no references to the working class or inequality when it comes to the impact of COVID, or the prevalence of other chronic illnesses, for that matter. Instead, the ruling class, through the *Times* and elsewhere, uses racial divisions to obscure the fundamental issue of class.

All racial and ethnic groups are divided by class, and it is the working class of all races and ethnicities, in the US and indeed all over the world, that is paying by far the highest price for the pandemic. Life expectancy in the US fell for two years in succession, in 2020 and 2021.

The greater percentage of illness and premature deaths among immigrants, blacks and Hispanics reflects their increased percentages in the working class and has nothing to do with their skin color. Obsession with race to the exclusion of class can only serve to stoke divisions within the working class, and that is its aim.

Another consequence of the pandemic in the US and elsewhere has been an increased death rate among the elderly. This is another aim of capitalist policy in relation to COVID-19. The pandemic has been used to cull the elderly, and there are those who openly celebrate the fact that premature deaths in nursing homes and elsewhere translate into lower expenditures for pension payments, Social Security, Medicare and other social programs.

The political establishment, including its public health authorities, have nothing to offer but empty platitudes and vague promises in the face of the astounding decrease in life expectancy. Little is even being said about the fact that at the

present rate, more than 100,000 Americans, predominately elderly, can expect to die from COVID every year, not to say anything about the long-term health consequences posed by Long COVID and its impact on nearly every organ system in the body.

Health Commissioner Vasan issued a statement declaring, “The pain and trauma experienced by our city is still very real to so many of us... It is the great challenge of our time, our city, and our Department to lay out an agenda for the next era of public health, to reverse these trends, and set us out on a new path where all New Yorkers can lead healthier, longer lives. We are putting every ounce of ourselves into achieving that goal, and honor the memory of those lost, as we do.”

As far as specific policies, all that New York City mayor Eric Adams can come up with is a proposal to reduce overdose deaths 15 percent by 2025, as well as to double the provision of mental health services. Considering the economic devastation being felt by the youth whose future prospects under capitalism remain grim, how he proposes to do so and which financial purse strings he hopes to tap into are left purposely unclear.

Dr. Vasan told the *Times*, referring to the latest data, “When you see this spike, there is a sense of ‘Have we gone backwards?’”

The answer to this ingenuous question should be obvious. Indeed, we have gone backward. The assaults on public health are part of the social counterrevolution that has taken place over nearly the last 50 years. The working class must develop its own reply. It must answer the attempt to drag it back to conditions of the 19th century with an organized political struggle for socialism. This battle is beginning, in the struggles that are developing in every corner of the globe.



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