

California's declining life expectancy driven by a public health crisis

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A recent research letter published July 9 in the *Journal of the American Medical Association* (JAMA), titled “The Failure of Life Expectancy to Fully Rebound to Pre-pandemic Levels,” paints a damning picture of the public health crisis in California, the wealthiest and most populous US state.

The study, authored by top researchers from Northwestern, Yale, UCLA and Virginia Commonwealth University, confirms that despite the supposed end of the COVID-19 emergency, life expectancy in California remains significantly below pre-pandemic levels, having recovered only two-thirds of what was lost during the initial years of the pandemic.

Previous research showed that life expectancy in the United States fell by over two years between 2019 and 2021—from 78.8 to 76.4 years—but began to rebound slightly in 2022; by 2023 it had rebounded to 78.4 years, just 0.4 years below the 2019 pre-pandemic level.

In California, it declined from 81.4 years in 2019 to 78.4 years in 2021. As of 2024, Californians live on average 0.86 years less than in 2019. This points to a slower recovery than the national average—which, while still trailing behind other advanced capitalist countries, has nearly returned to pre-pandemic norms.

While nationwide data for 2024 is not yet available, California’s recently published vital statistics provided researchers an early look into the trajectory of recovery—and it is a sobering one.

This data reveals a society in profound and accelerating decay. California, long heralded as a model of innovation and progress, has become a place where working class people are dying earlier, suffering more and reaping none of the benefits of medical science and economic development. The gap in life expectancy is a social catastrophe rooted in a capitalist system that subordinates every aspect of life—including life itself—to private profit.

The causes identified in the JAMA report—drug overdoses, cardiovascular disease, delayed medical care and mental health deterioration—expose the failure of the system to

provide for human well-being. These are systemic expressions of a ruling class that has consciously gutted public health infrastructure and allowed corporations to profit off of illness, misery and death.

The outcomes are predictable in a society where billions are funneled to Wall Street, war and police repression, while millions are denied housing, nutritious food, preventive healthcare and mental health services.

California’s life expectancy crisis obliterates the narrative of progress peddled by the state’s political establishment. The JAMA report lays bare a landscape of deep inequality. The life expectancy gap between the poorest and wealthiest quartiles stands at a whopping 5.77 years. Black and Hispanic Californians, largely workers and immigrants, who experienced the steepest drops in life expectancy during the pandemic, now remain more than 1.4 years below their 2019 levels.

Life expectancy has always reflected the brutal reality of class society. People die earlier because of poverty, overwork, pollution, inaccessible healthcare and systemic neglect.

Drug overdoses—particularly involving fentanyl—are now among the primary drivers of premature death. The opioid epidemic was engineered by pharmaceutical corporations like Purdue Pharma, which profited enormously while inflicting mass death with the protection and complicity of government regulators. The current overdose crisis is the direct outcome of this corporate criminality.

The assault on immigrant workers further exposes the cracks. Reports are emerging daily that Immigration and Customs Enforcement (ICE) agents are conducting raids in hospitals and outpatient surgery centers across the country, including in California. These brutal operations have a chilling effect far beyond those directly targeted.

Thousands of undocumented and mixed-status families are now avoiding medical care altogether—canceling doctor visits, skipping surgeries and refusing to seek treatment for chronic or acute conditions—for fear of detention or deportation. This state-sanctioned terror campaign will have

devastating public health consequences, disproportionately affecting immigrant workers already burdened by poverty, overwork and hazardous conditions.

The result will be an increase in preventable illness, untreated disease and premature death among some of the most vulnerable sections of the working class. It is a stark example of how the machinery of repression operates in tandem with the destruction of public health.

Mental illness has also become a leading factor in premature death. Nearly 30 percent of Californians report symptoms of anxiety or depression. These symptoms stem from social dislocation, economic despair and political disenfranchisement.

Trump's "Big Beautiful Bill" marks an intensification of brutal attacks on Medicaid. The bill will cause millions to lose health insurance and represents the biggest rollback ever of health insurance coverage due to federal policy changes.

The negative effects will be devastating: reduced access to mental health and substance use disorder treatment, a disproportionate impact on children, people with disabilities, those with mental health conditions and low-income adults.

The report's warnings about California's aging population further illuminate the scale of the crisis. By 2040, the number of residents over 65 will increase by 59 percent. This demographic shift will place immense pressure on the healthcare system. The growing need for long-term care, culturally responsive services and medical infrastructure stands in stark contradiction to the current trajectory of policy.

Instead of expanding healthcare, the state is slashing it. The Democratic governor's 2025–2026 budget includes \$5 billion in cuts, targeting Medi-Cal and associated programs. These cuts include enrollment freezes, new premiums and the elimination of dental and long-term care for undocumented adults. Services under In-Home Supportive Services (IHSS) are also being reduced. These attacks will disproportionately harm low-income communities, accelerating the death toll and deepening already existing disparities.

This bipartisan assault on public health is a defining feature of the capitalist system. The dismantling of scientific infrastructure and public institutions has proceeded for decades under both Republican and Democratic administrations. The normalization of mass death under Biden—declaring the pandemic over, ending testing and tracking, pioneering "forever COVID" policy and downplaying the long-term effects of COVID-19—has enabled dangerous and reactionary policies.

Figures like Robert F. Kennedy Jr. and Dr. Mehmet Oz now spearhead the anti-scientific backlash under the banner

of "health freedom." Their policies threaten the lives of millions, particularly the working class, who rely on public health systems for preventive medicine, vaccination and accurate information. Their anti-vaccine demagoguery has fueled crises such as the outbreak of measles—an entirely preventable disease, now reaching a three-decade high, due to falling immunization rates.

COVID-19 itself continues to spread unchecked. Reinfection has been normalized, despite growing evidence of long-term cardiovascular and neurological damage caused by the virus. Each new infection increases the risk of chronic illness. Yet the state has dismantled every mechanism for public awareness, testing or mitigation. Even yearly vaccination is now being restricted.

California exemplifies the response of the capitalist system to these dangers: indifference and concealment. Health policy has been stripped of its scientific foundation and handed over to corporate lobbies. The result is a society in which millions live in a state of unmanaged chronic illness, addiction, untreated mental suffering and premature death.

The persistent life expectancy gap reflects the deep decay of capitalism, which offers no path to equitable recovery—only worsening inequality and mass suffering. To reverse this crisis, public health must be rebuilt as part of a socialist reorganization of society that guarantees universal access to care as a basic social right.

This demands a break from both capitalist parties and the creation of a mass, independent working class movement. The fight for public health is inseparable from the broader struggle against war, exploitation and environmental collapse. Humanity faces a stark choice: socialism or barbarism. The future depends on action now.



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