Paradox between Immigrant Advantages in Morbidity and Mortality: Dynamic Patterns and Tentative Explanations

Recent studies indicate that immigrants are more susceptible to diseases and disabilities than natives in older ages, yet they continue to exhibit lower overall mortality, thus suggesting a “morbidity-mortality paradox.” In this study, we utilize the IPUMS National Health Interview Survey 2002-2018 with linked mortality data through 2019 (n=405,270) and find an even more perplexing pattern: Immigrants’ advantages in chronic conditions and disabilities narrow or even completely disappear in old ages, whereas their mortality advantages continuously increase with age. These patterns exist for immigrants of different ethnoracial, gender, and educational groups. The decomposition analysis reveals that the narrowing gap in disability is due to immigrants’ increasing prevalence of mental illness and diabetes, shrinking advantages in lung diseases and musculoskeletal conditions, and increasing vulnerability to the disabling effects of major chronic conditions. However, immigrants are less likely to die from chronic diseases and disabilities, and this advantage strengthens with age, resulting in a widening nativity gap in mortality risk with age. Taken together, our results suggest that health-based selection may simultaneously postpone the onset of diseases and disabilities to later ages for immigrants and enable them to better weather the mortality consequences of the diseases and disabilities.