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Explorations in Economic History 59 (2016) 114-125



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The mortality consequences of distinctively black names



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Received 1 October 2015 Available online 22 October 2015

Abstract

Race-specific given names have been linked to a range of negative outcomes in contemporary studies, but little is known about their long-term consequences. Building on recent research which documents the existence of a national naming pattern for African American males in the late nineteenth and early twentieth centuries (Cook, Logan and Parman, 2014), we analyze long-term consequences of distinctively racialized names. Using over 3 million death certificates from Alabama, Illinois, Missouri and North Carolina from 1802 to 1970, we find a robust within-race mortality difference for African American men who had distinctively black names. Having an African American name added more than 1 year of life relative to other African American males. The result is robust to controlling for the age pattern of mortality over time and environmental factors which could drive the mortality relationship. The result is not consistently present for infant and child mortality, however. As much as 10% of the historical between-race mortality gap would have been closed if every black man was given a black name. Suggestive evidence implies that cultural factors not captured by socioeconomic or human capital measures may be related to the mortality differential.

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JEL classification: I1; J1; N3 Keywords: Race; Mortality; Names

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"A good name is better than fine perfume, and the day of death better than the day of birth."

[Ecclesiastes 7:1]

1. Introduction

Numerous studies have found that those with race-specific first names are negatively affected in terms of birth outcomes, job interview callbacks, and mentoring (Busse and Seraydarian, 1977; Bertrand and Mullainathan, 2004; Figlio, 2005; Ginther et al., 2011; Milkman et al., 2012). The literature has yet to

[☆] We thank Rodney J. Andrews, Alan Barreca, William A. Darity, Robert W. Fogel, Claudia D. Goldin, Darrick Hamilton, Samuel L. Myers, Paul W. Rhode, Richard H. Steckel, seminar audiences at Harvard University, University of Minnesota, University of Wisconsin, The Ohio State University, participants in The Second Wave conference, the NBER Summer Institute, the Southern Economic Association Meetings, the editor and two anonymous reviewers for useful comments. Stanley L. Engerman provided particularly detailed comments and advice, for which we are grateful. The usual disclaimer applies.

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consider long-term consequences of distinctively racialized names. Racialized names may be related to a host of other factors that play out over the life cycle, and identifying these effects would be important as they may be cumulative. Recently, scholars have uncovered a national racial naming pattern among African Americans that predates the Civil Rights Movement (Cook et al., 2014; Goldstein and Stecklov, 2014). We now know that a distinct set of given names were used by African Americans in the late nineteenth and early twentieth centuries. While the finding of a historical racial naming pattern is inherently interesting, the implications of having a black name remain largely unexplored.

In this paper we present the first evidence of long-term consequences of distinctively black names (see Table 1). We concentrate on a straightforward outcome, mortality, using newly-available death certificate data (roughly 3 million records). Mortality is an important dimension of well-being, and data are available for many historical settings (Parman, 2012). Key for our analysis, death certificates contain reliable information about race, name, and lifespan.

Our primary objective is to examine whether there is a relationship between having one of the historical black names and *within*-race mortality. We adopt a straightforward empirical strategy, estimating the effect of names on longevity after controlling for the

Table 1
The historical African American names

The historical African American hames.
Historical African American first names
Abe
Abraham
Alonzo
Ambrose
Booker
Elijah
Freeman
Isaac
Isaiah
Israel
King
Master
Moses
Pearlie
Percy
Perlie
Purlie
Presley
Presly
Prince
Titus

time pattern of mortality and counties of birth and death. To our knowledge, this is the first study to estimate the effect of racial names on mortality or health outcomes.

We find that the effects of a distinctively African American name on mortality are quite large. Conditional on survival to age 10, African American men with distinctively black names live more than one year longer than other African American men. In elasticity terms, a black name increases lifespan by more than 10%. The correlation we find between distinctively African American names and lifespan is not sensitive to the functional form used to estimate the relationship. We find mixed evidence that possessing a black name was related to infant or child mortality. The effect was present over the entirety of adulthood, which suggests that the effect was cumulative.

We find that as much as 10% of the historical interracial mortality gap would have been closed if every black man had been given a black name. These results are robust to regional variation, holding over four distinct states — Alabama, Illinois, Missouri, and North Carolina, which guards against the finding being driven by environmental, epidemiological, or contextual factors.

In attempting to uncover evidence on mechanisms behind this mortality differential, we analyze the socioeconomic correlates of given names in census records. The census results provide little evidence that the name effect is due to socioeconomic status or to human-capital differences for those who have African American names. There are, however, demographic differences that are correlated with the names, consistent with historical narrative evidence (Gutman, 1976). While the results do uncover important demographic differences that were previously unknown, they do not conclusively uncover the source of the robust mortality difference. Importantly, men with African American names were more likely to have sons with African American names, and men with fathers who had distinctively black names lived longer than other men, even if they did not have a distinctively black name themselves. Overall, the results suggest that cultural factors may be at play in both the transmission of distinctively black names and their mortality effects.

2. Empirical strategy

We estimate the relationship between racial names and mortality in a straightforward way. Since our sample is drawn from death records, all deaths are observed.

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