

Comparing Individual-Level
Income vs. Regional-level
Income's Association with Various
Health Outcomes across the US

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AIM OF THE STUDY



SES: SocialEconomic Status



Individual-level Data not disclosed for confidential security.

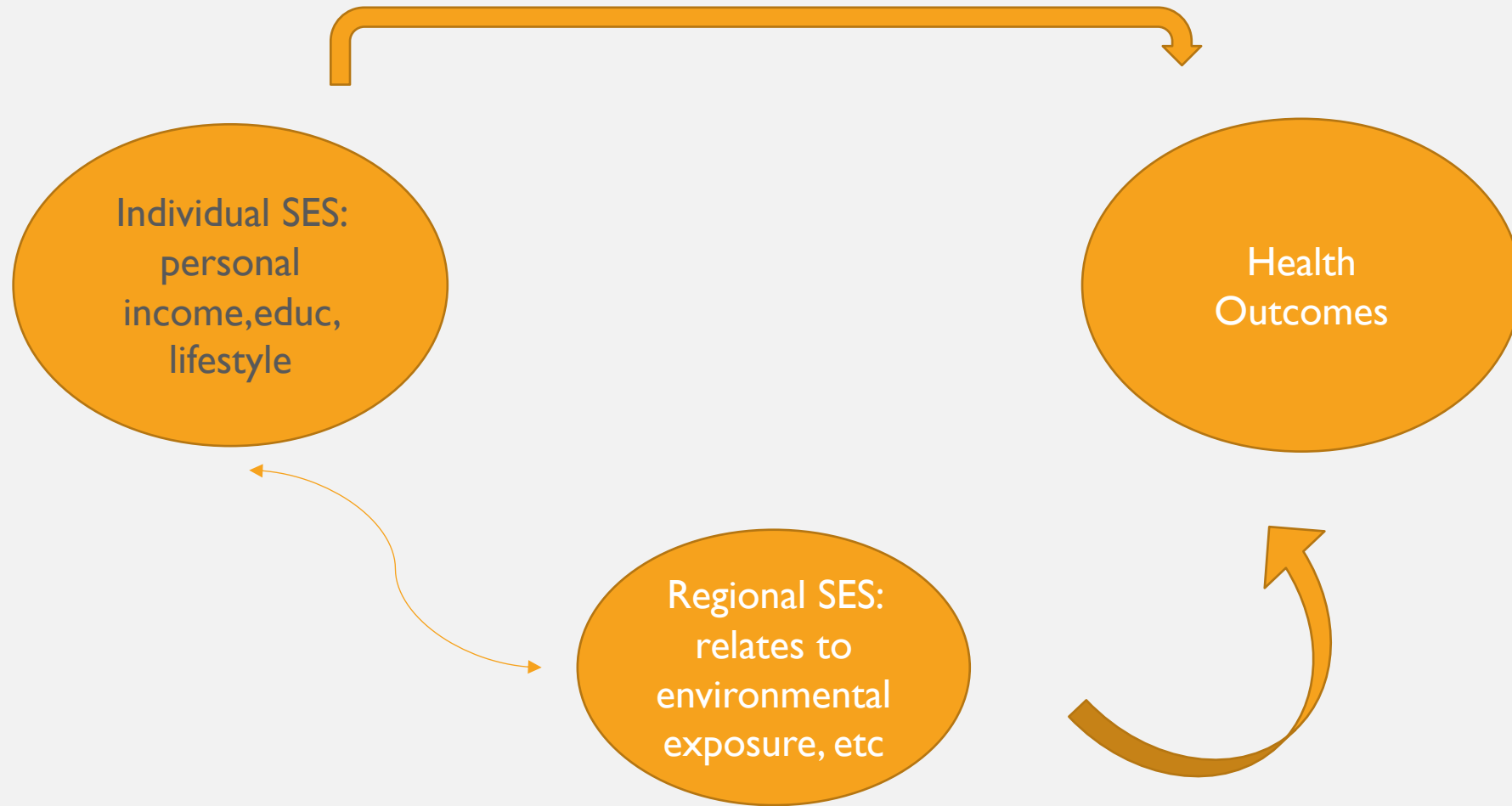


Many epidemiology studies use regional-level data to compensate for that. However, we don't know how much individual-level SES is correlated with regional-level social economic status.



Also, there might be confounding problems between Individual SES, regional SES, and final health outcomes.

Confounding Problems





GEOGRAPHICAL UNIT: MMSA

BRFSS DATA: INDIVIDUAL LEVEL

- Background The Behavioral Risk Factor Surveillance System (BRFSS) is a collaborative project between all of the states in the United States (US) and participating US territories and the Centers for Disease Control and Prevention (CDC). The BRFSS is administered and supported by CDC's Population Health Surveillance Branch, under the Division of Population Health at the National Center for Chronic Disease Prevention and Health Promotion.¹
- BRFSS's objective is to collect uniform state-specific data on health risk behaviors and use of preventive health services, chronic diseases and conditions, access to health care, related to the leading causes of death and disability in the United States. Factors assessed by the BRFSS in 2017 included health status, healthy days/health-related quality of life, health care access, exercise, inadequate sleep, chronic health conditions, oral health, tobacco use, e-cigarettes, alcohol consumption, immunization, falls, seat belt use, drinking and driving, breast- and cervical cancer screening, prostate cancer screening, colorectal cancer screening, and HIV/AIDS knowledge.¹

BRFSS 2017 SMART DATA:

- CDC analyzes BRFSS data for metropolitan and micropolitan statistical areas (MMSAs), to provide localized health information that can help public health practitioners identify local emerging health problems, plan and evaluate local responses, and efficiently allocate resources to specific needs.¹
- The Selected Metropolitan/Micropolitan Area Risk Trends of BRFSS SMART (SMART BRFSS) uses BRFSS data to provide prevalence rates for selected conditions and behaviors for cities and their surrounding counties.¹

ACS CENSUS DATA 2013- 2017 5-YEAR ESTIMATES : MEDIAN INCOME&&EDUCATIONAL ATTAINMENT

- The Census Bureau aggregates 1, 2013 to December 31, 2017.

The American Community Survey (ACS) is a nationwide survey designed to provide communities a fresh look at how they are changing. It is a critical element in the Census Bureau's decennial census program. The ACS collects information such as age, race, income, commute time to work, home value, veteran status, and other important data. As with the 2010 decennial census, information about individuals remains confidential.

- About 3.5 million housing school graduate (includes equivalency) unit addresses are selected annually, across every county in the nation.²
- The 2013-2017 American Community Survey 5-year estimates include results from both the American Community Survey and the Puerto Rico Community Survey. The statistics presented describe the entire data collection period, from January school graduate (includes equivalency)²
- Percent; Estimate; Population 25 years and over - Bachelor's degree
- Percent; Estimate; Population 25 years and over –High School Graduates
- MSA MedianIncome; MSA MedianIncome for Whites, Blacks, and Hispanic

1. 12 July 2019. *Wikipedia*. American Community Survey.
https://en.wikipedia.org/wiki/American_Community_Survey
2. 5 Oct. 2010. *American FactFinder*. American Community Survey.
<https://factfinder.census.gov/faces/nav/jsf/pages/programs.xhtml?program=acs>

BASIC DEMOGRAPHICS: POPULATION

Population Analysis

Race	White	BLACK	Other Race	Multiracial	Hispanic
Population	166,936	23,475	9,435	4,097	22,015

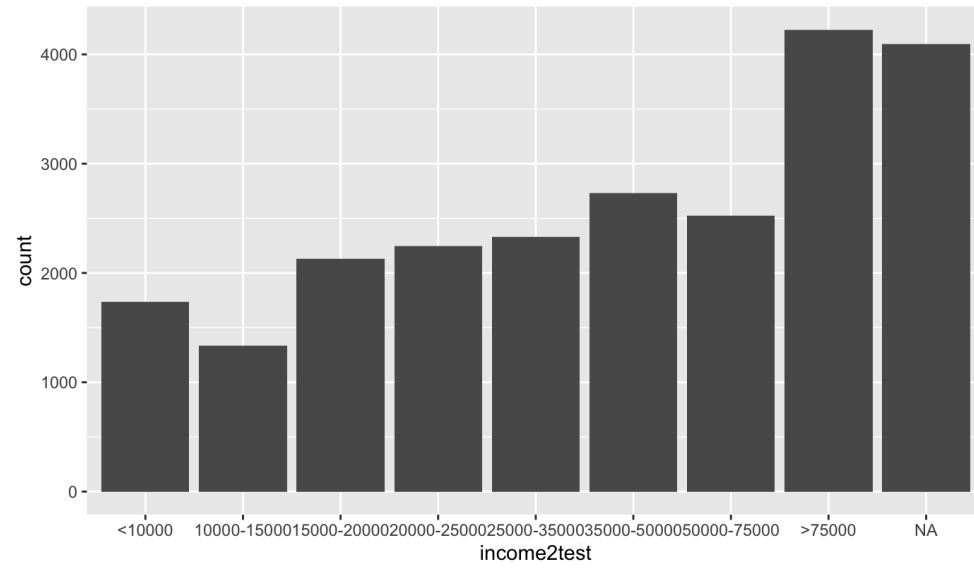
Stratified Analysis

Race	Population
White	166,906
Black	23,354
Hispanic	21,832

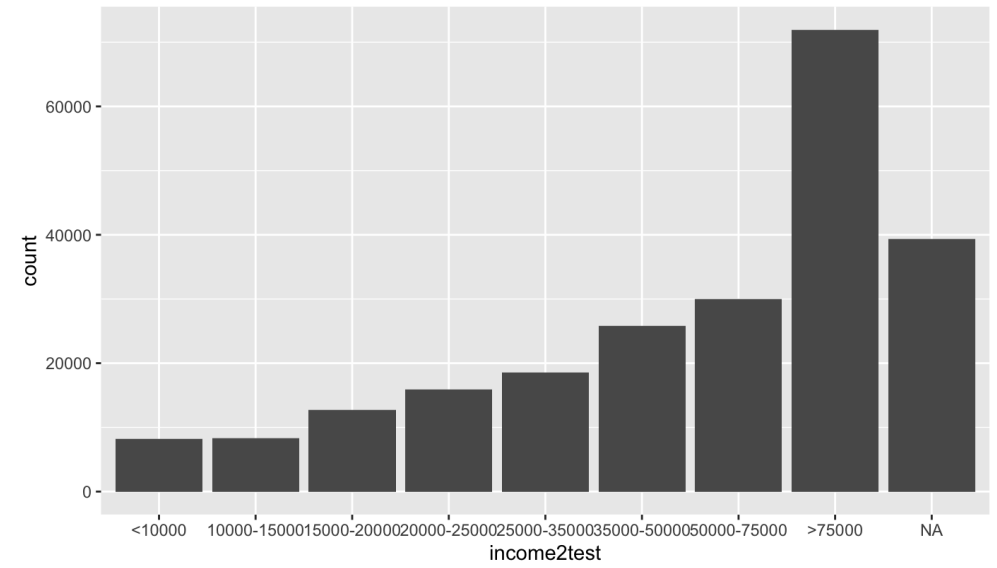
INDIVIDUAL
INCOME
DISTRIBUTION
IN BRFSS SMART
2017

Category	<10000	10000-15000	15000-20000	20000-25000	25000-35000	35000-50000	50000-75000	>75000
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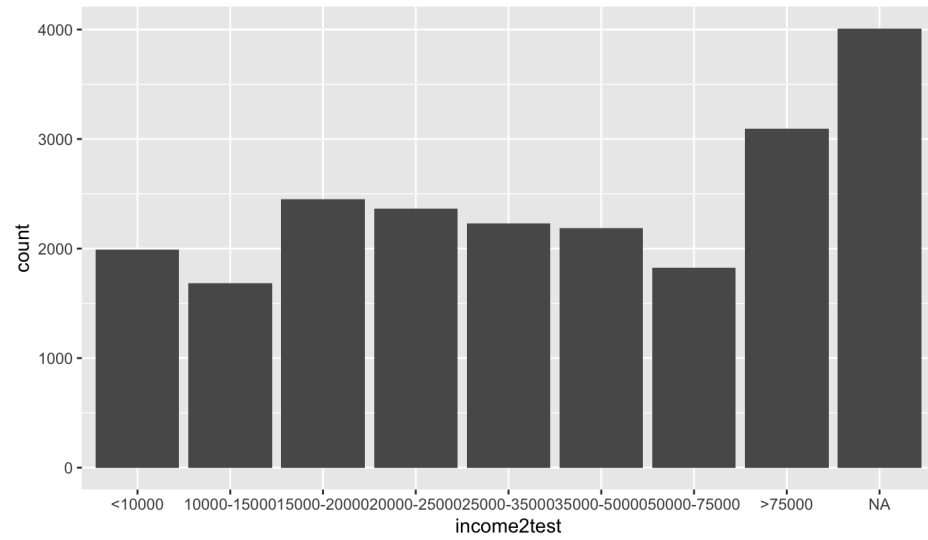
Black Individual Data: Income Distribution



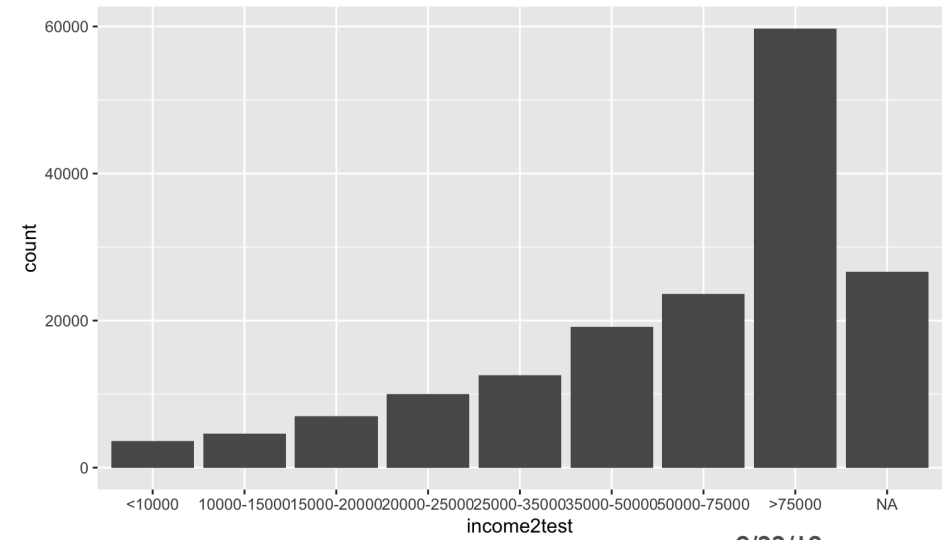
Whole Individual Data: Income Distribution



Hispanic Individual Data: Income Distribution



White Individual Data: Income Distribution

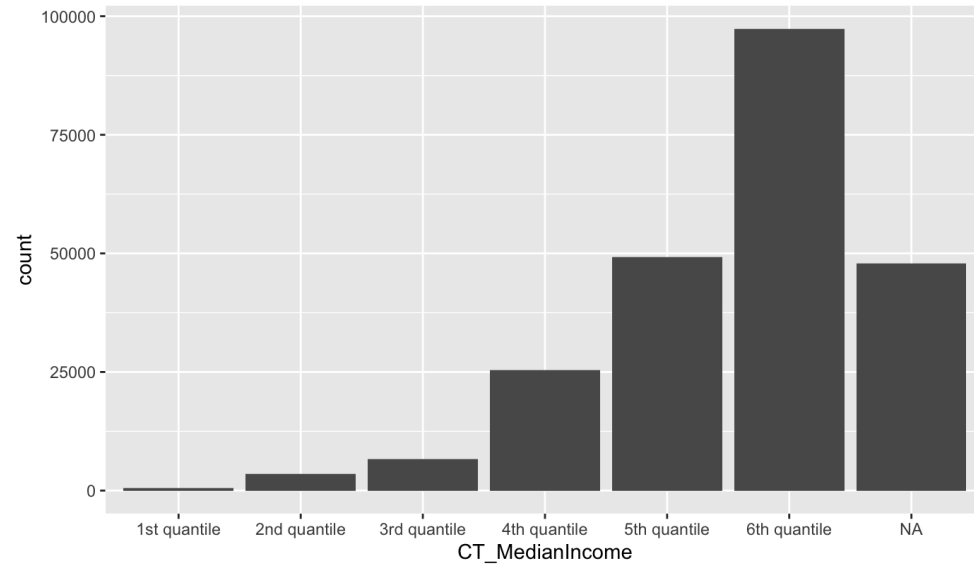


REGIONAL INCOME DISTRIBUTION

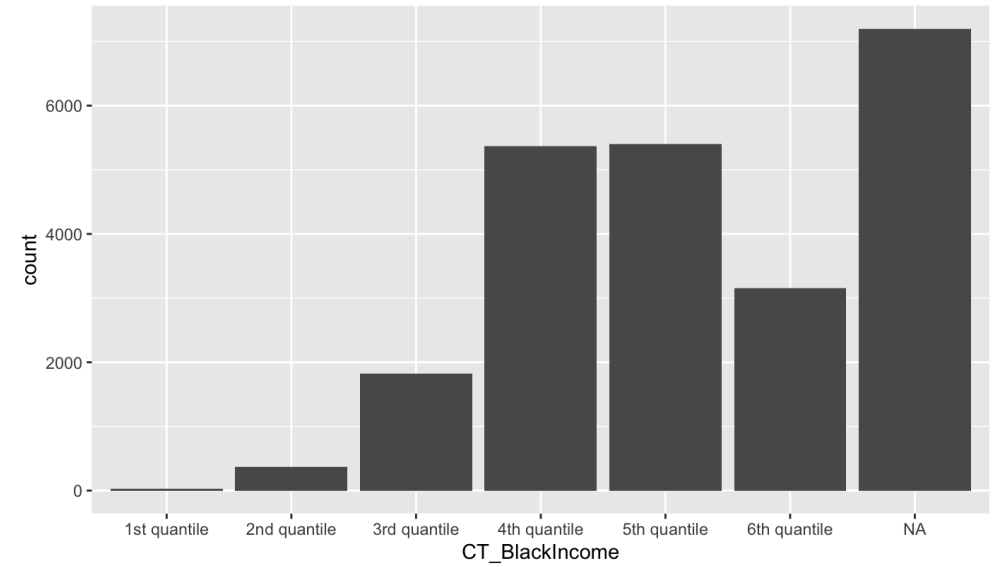
Categories: 1st to 6th Quantiles

	0%	16.66667%	33.33333%	50%	66.66667%	83.33333%	100%
Total:	23558.00,	41115.67,	45154.67,	49052.00,	52617.67,	58209.33,	110190.00,
White:	23966.00 ,	44729.67,	48907.67,	52535.50,	56412.67,	62749.50,	117009.00,
Black:	6903.00,	23960.33,	27948.67,	31152.00,	36033.00,	45102.67,	111696.00,
Hispanic:	9744,	31582,	36937,	41177,	45025,	50478,	123047

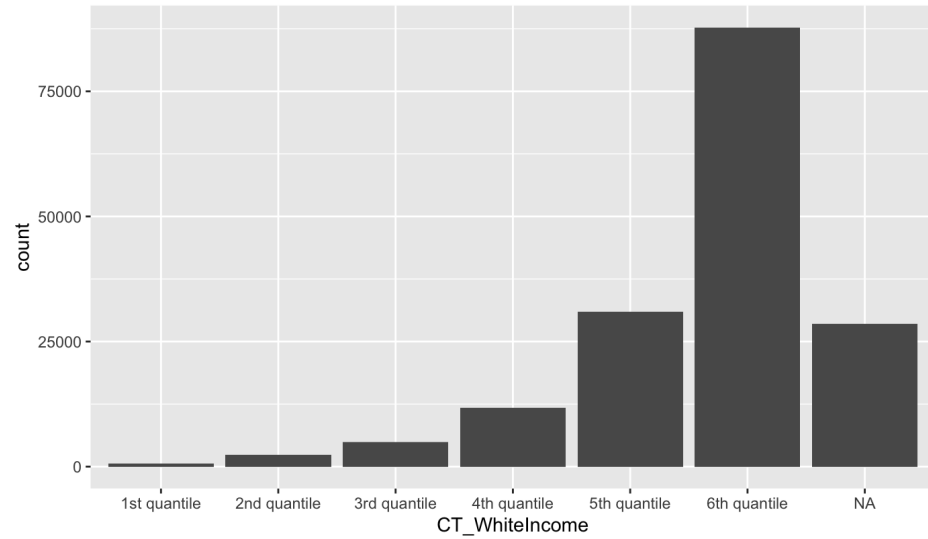
Total Regional Data: Income Distribution



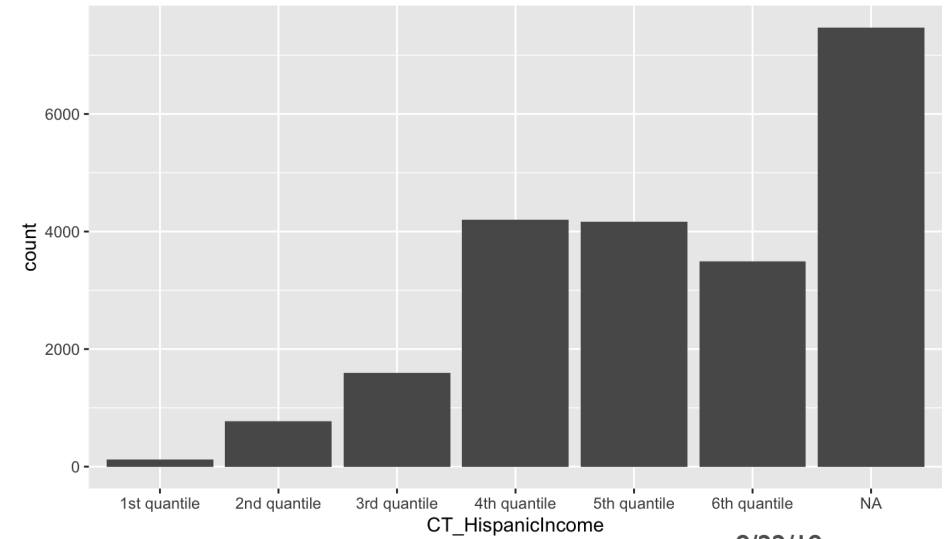
Black Regional Data: Income Distribution

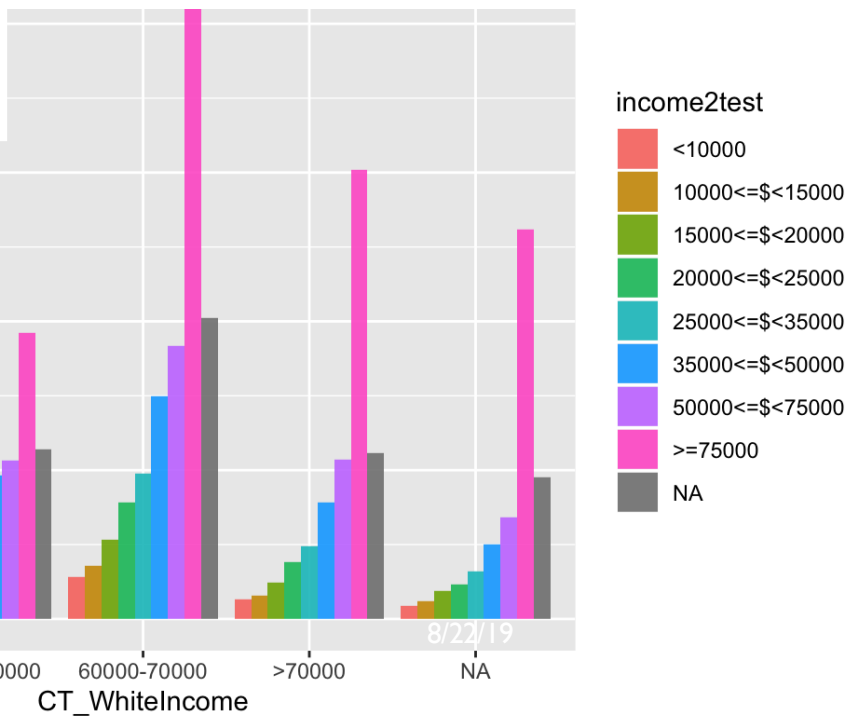
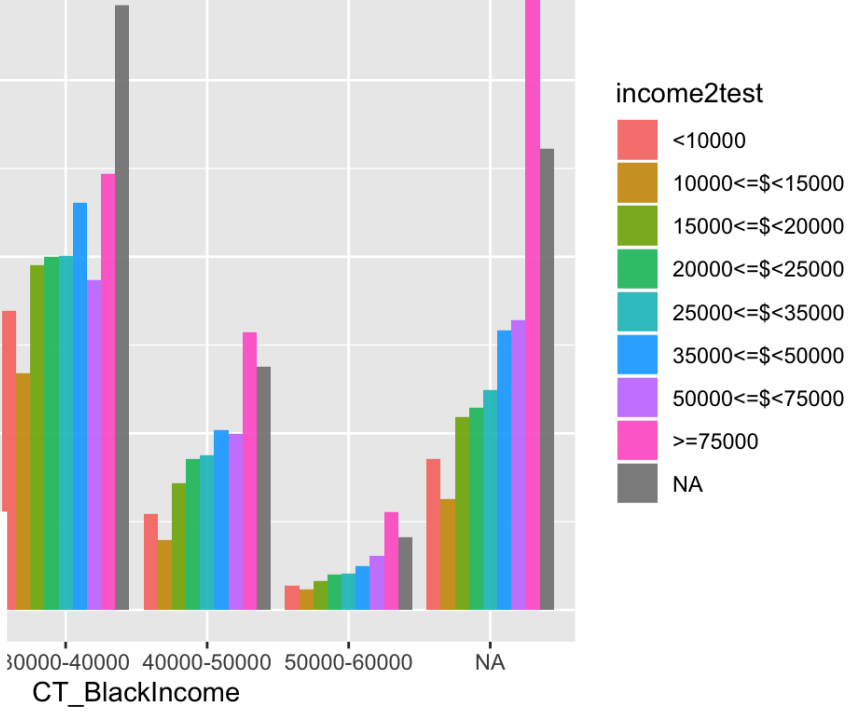
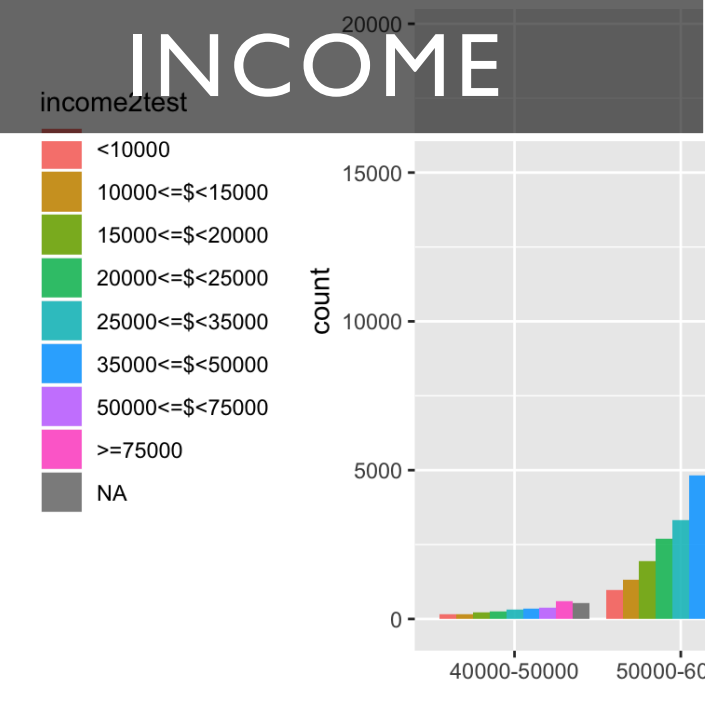
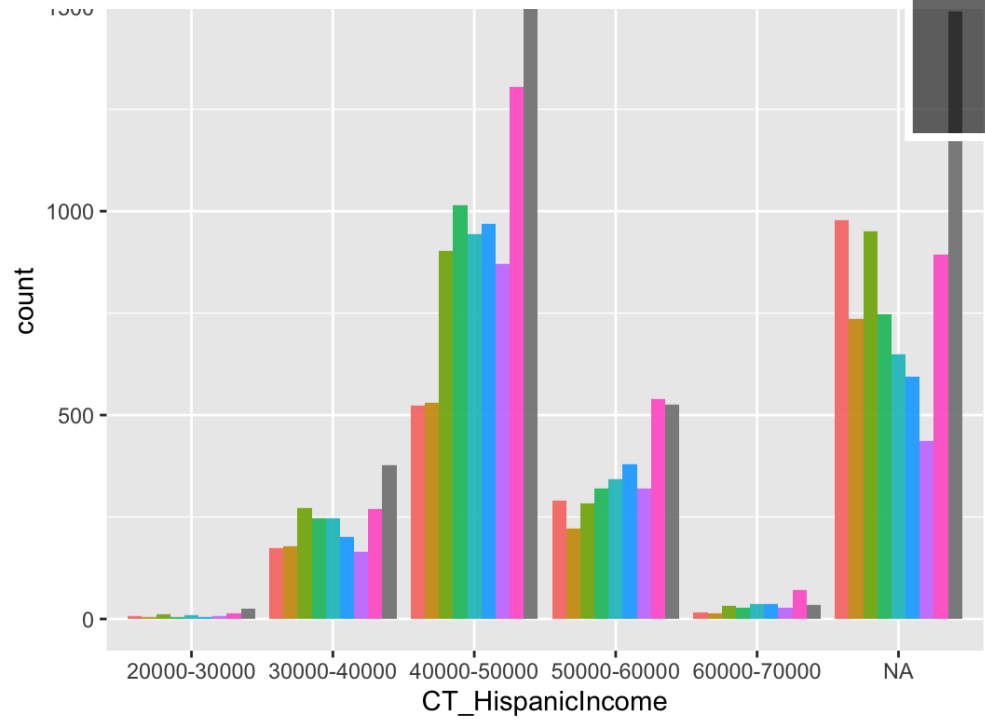
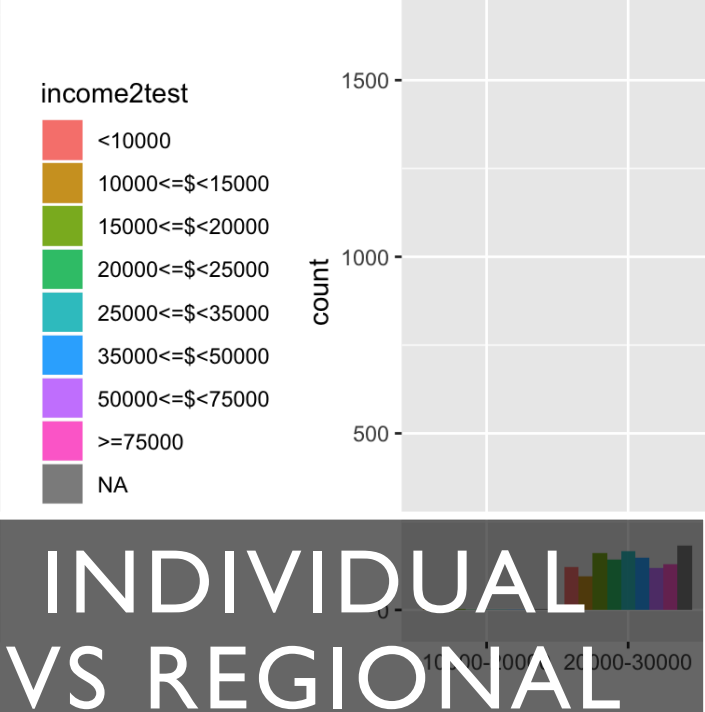
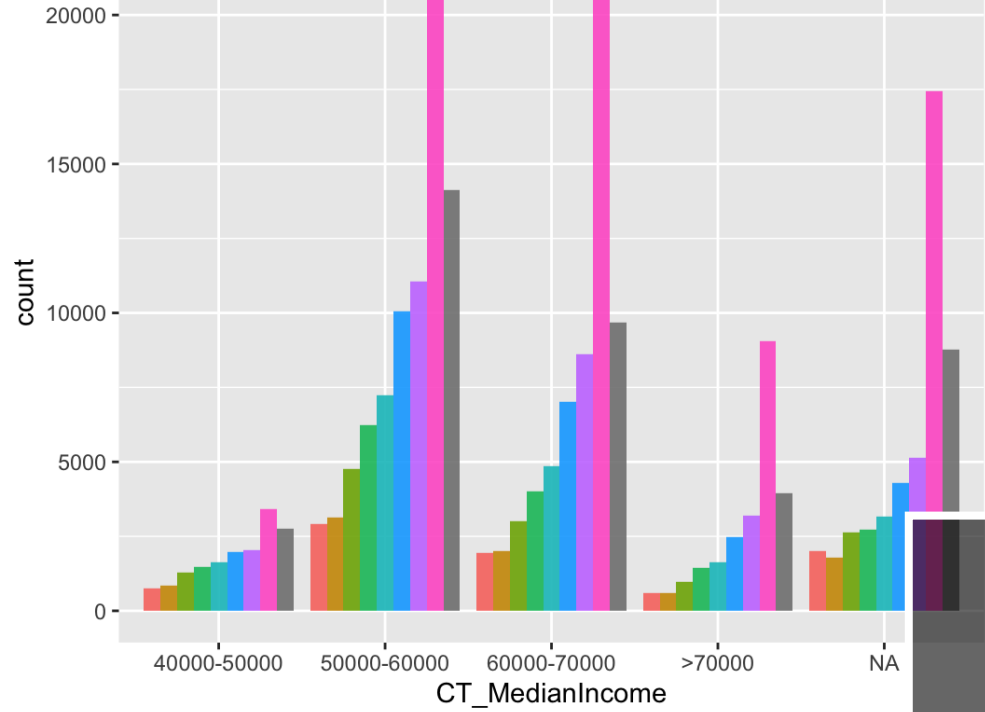


White Regional Data: Income Distribution



Hispanic Regional Data: Income Distribution





**INDIVIDUAL
VS REGIONAL
INCOME**

INDIVIDUAL EDUCATION VARS



Less than
High School;



High School;



Some
College;



College
Graduated

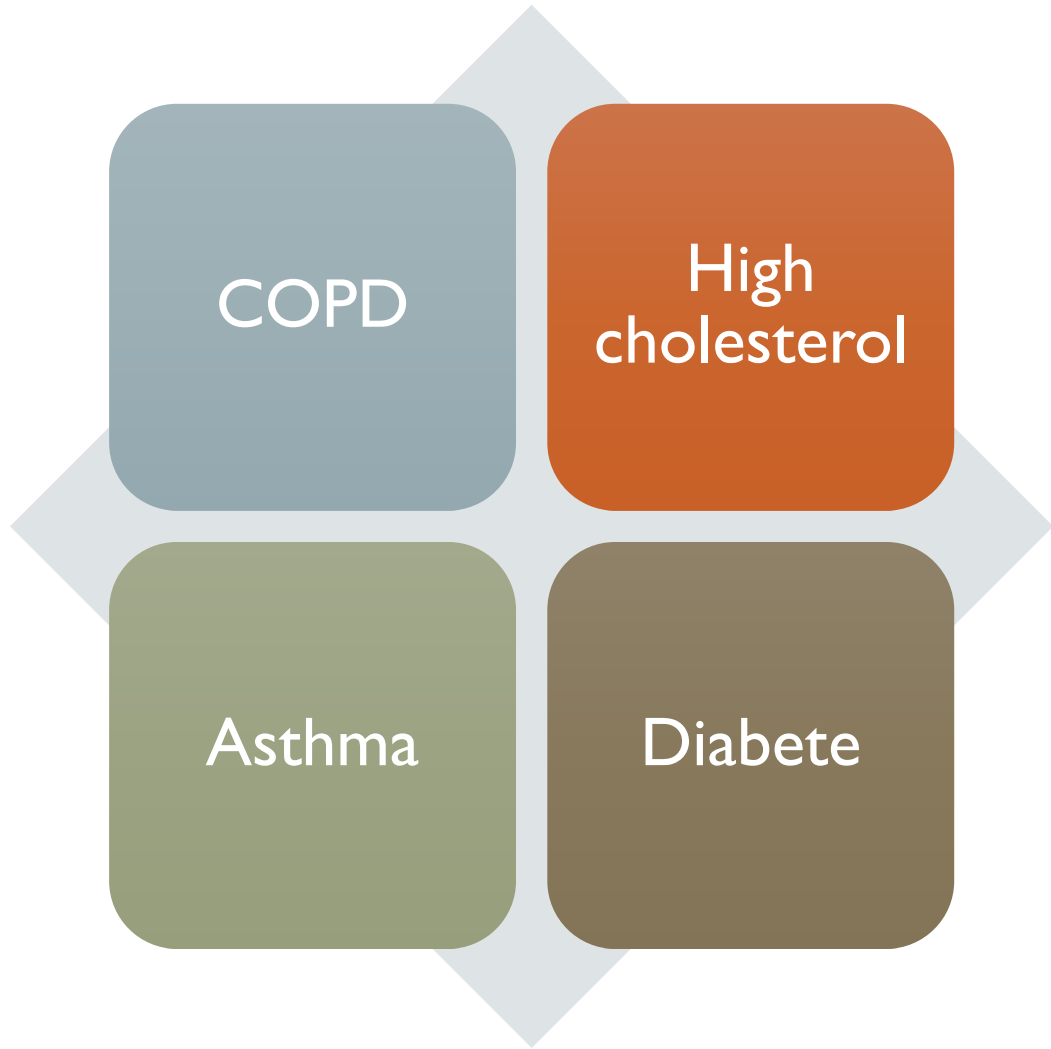
REGIONAL EDUCATION VARS

Categories: 1st-5th quantile

Percentile: 0% 20% 40% 60% 80% 100%

PctHighschool: 16.4, 23.4, 25.6, 27.2, 29.4, 39.5

PctBachelor: 11.4, 18.1, 19.5, 21.4, 22.9, 27.8



4 HEALTH
OUTCOMES

THREE TREATMENTS



Full SES Model



Controlled for Individual
SES Vars



Controlled for Regional Vars

- `svyglm(HealthOutcomes
~income2test+CT_MedianIncome+CT_age+x.educagtest+sexf+Current_Asthma
_Status+x.racegr3f+CT_PctCollege+CT_PHSGrad+BMI,design=smart217dsgn)`
- `svyglm(HealthOutcomes
~income2test+CT_age+x.educagtest+sexf+Current_Asthma_Status+x.smoker3t
est+BMI,design=Black217dsgn)`
- `svyglm(HealthOutcomes
~CT_HispanicIncome+CT_x.michd+CT_age+sexf+Current_Asthma_Status+CT
_rfchol1+CT_diabetes+CT_PctCollege+CT_PHSGrad+x.smoker3test+BMI,desig
n=Hispanic217dsgn)`

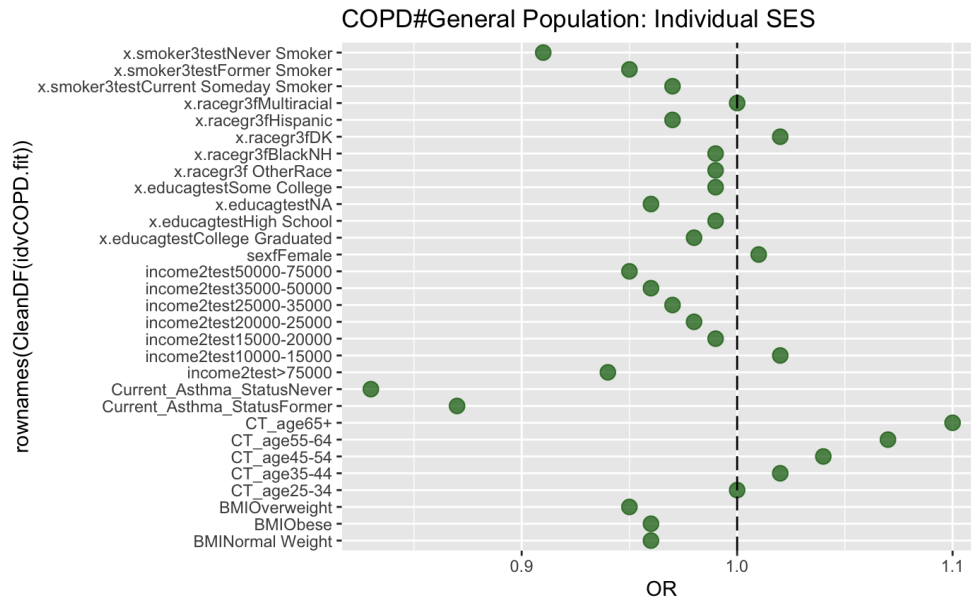


Three models: Full SES, individual SES, regional SES. If individual-level SES highly correlates with regional-level's, then coefficients of same SES Vars between Full vs idv model, or between Full vs regional, will varies a lot.

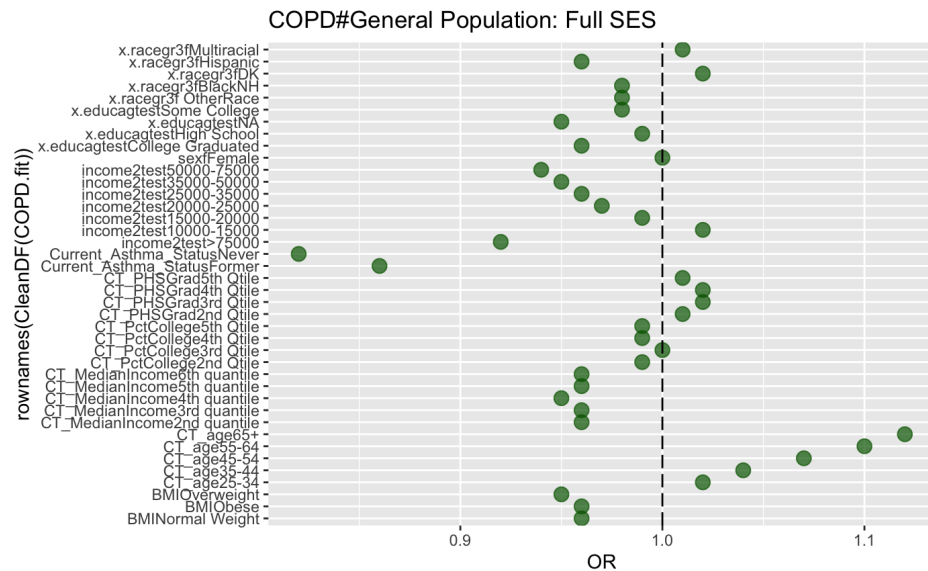
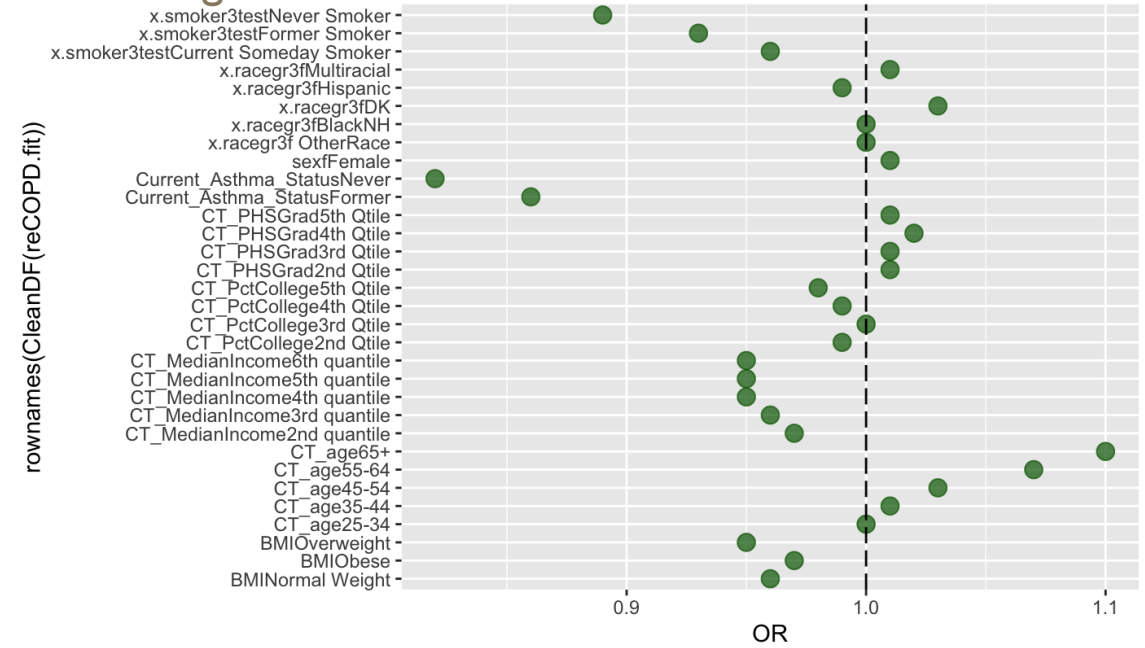


For different diseases, regional environment and individual life habits matter differently.

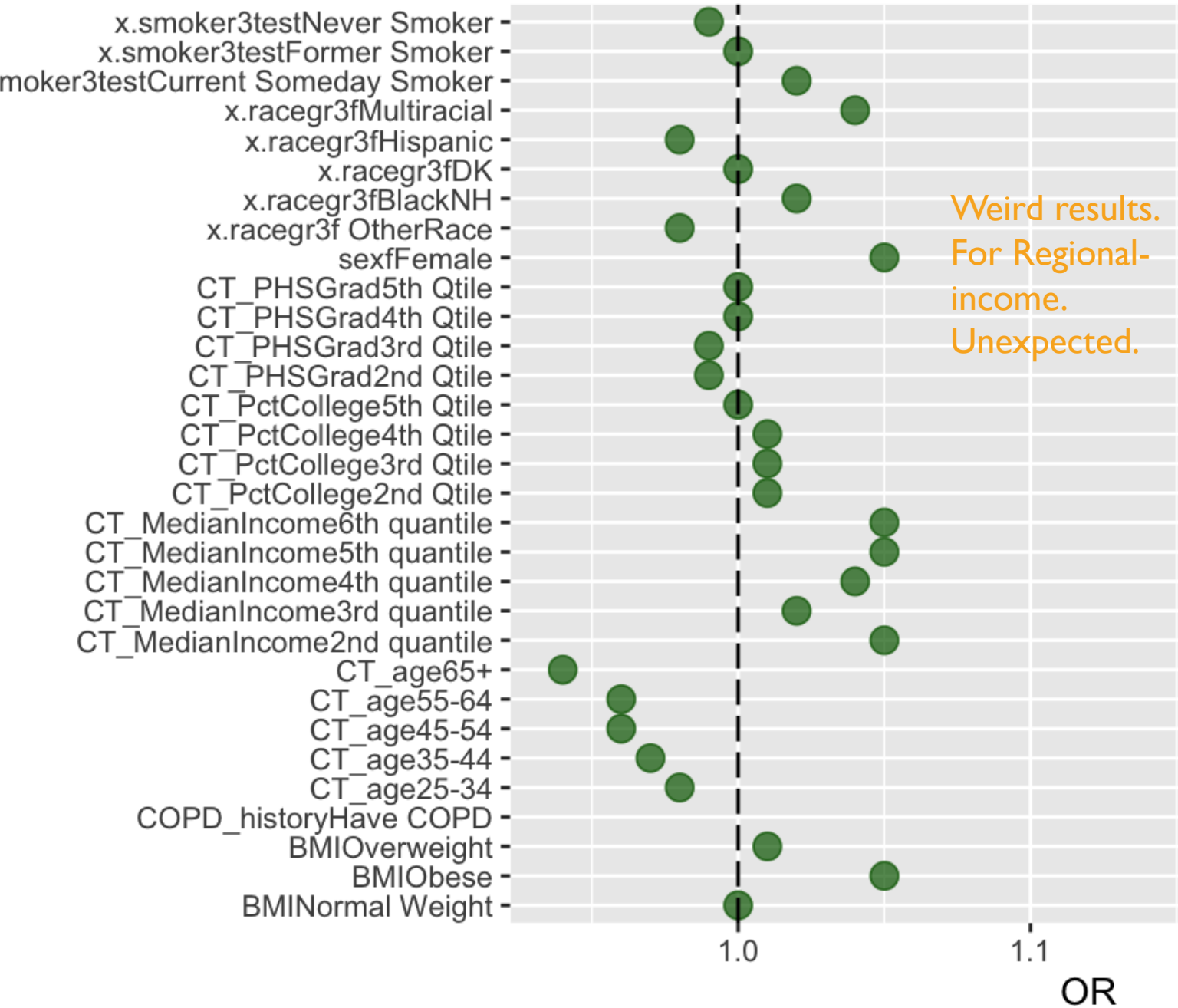
COPD for general Population:
individual income impact more
obvious effects. Regional income only
matters from 1st to 2nd/3rd quantile.
In general, income's effects more
obvious than education's. seems no
confounding effects.



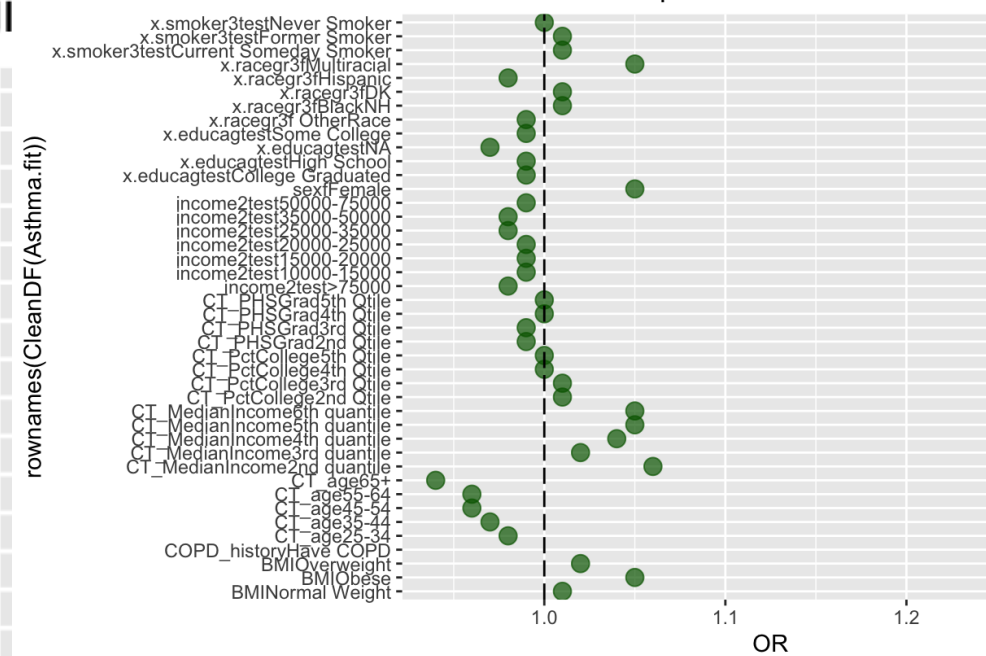
COPD#General Population: Regional SES



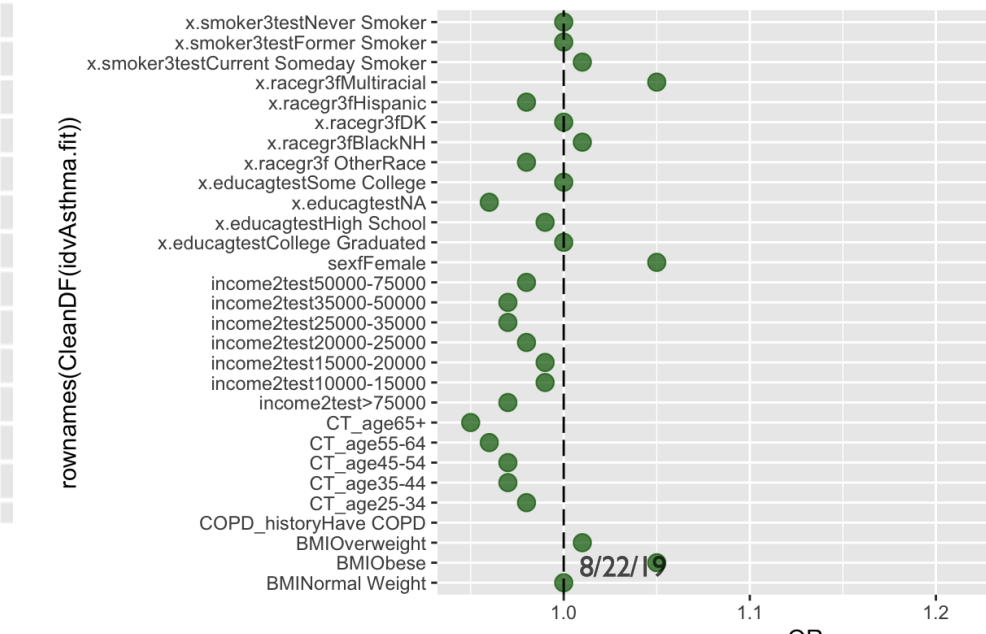
Asthma#General Population: Regi



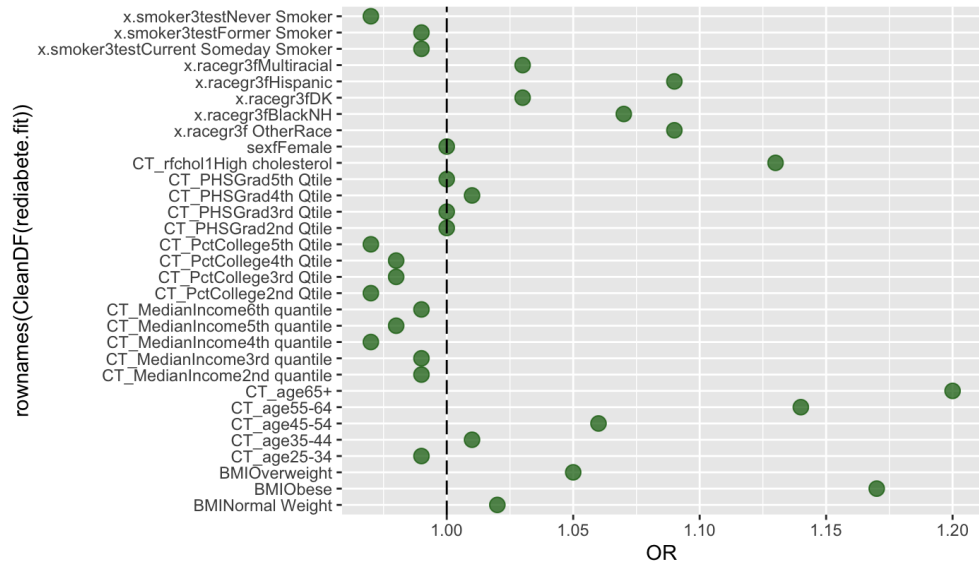
Asthma#General Population: Full SES



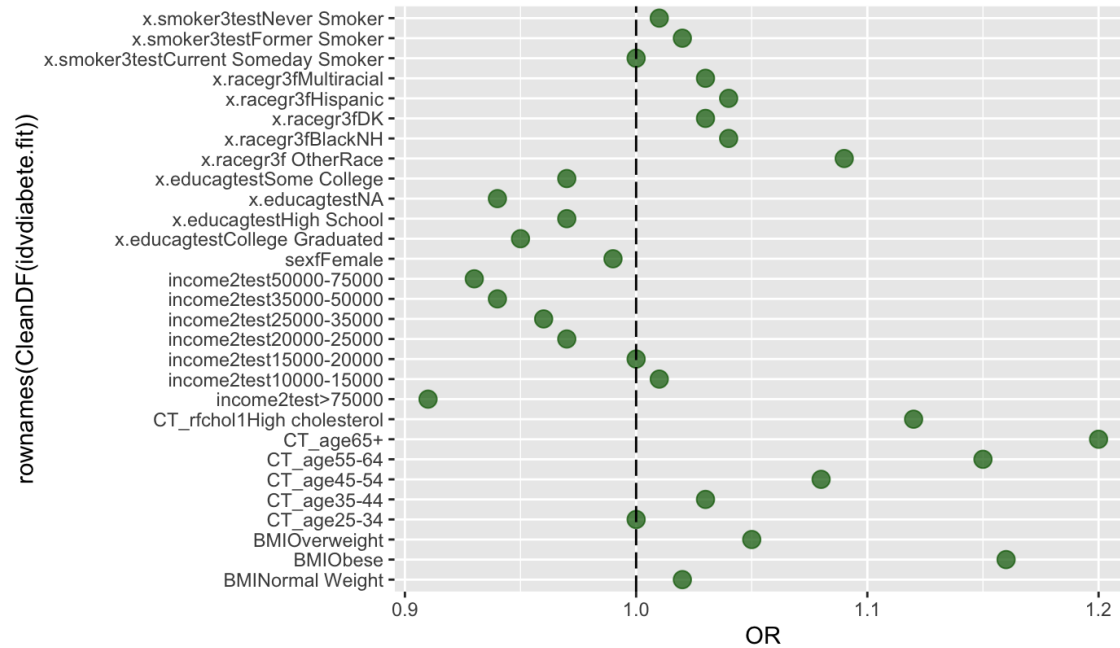
Asthma#General Population: Individual SES



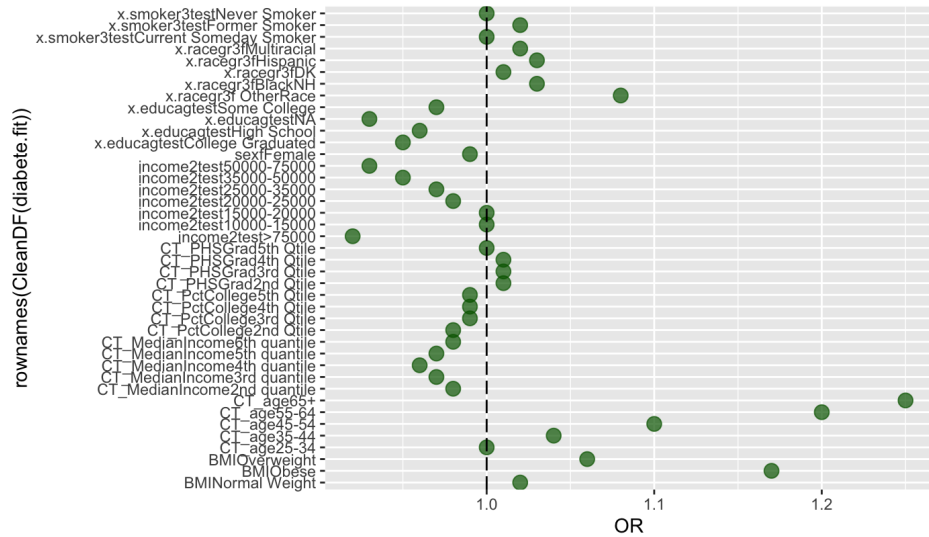
Diabete#General Population: Regional SES



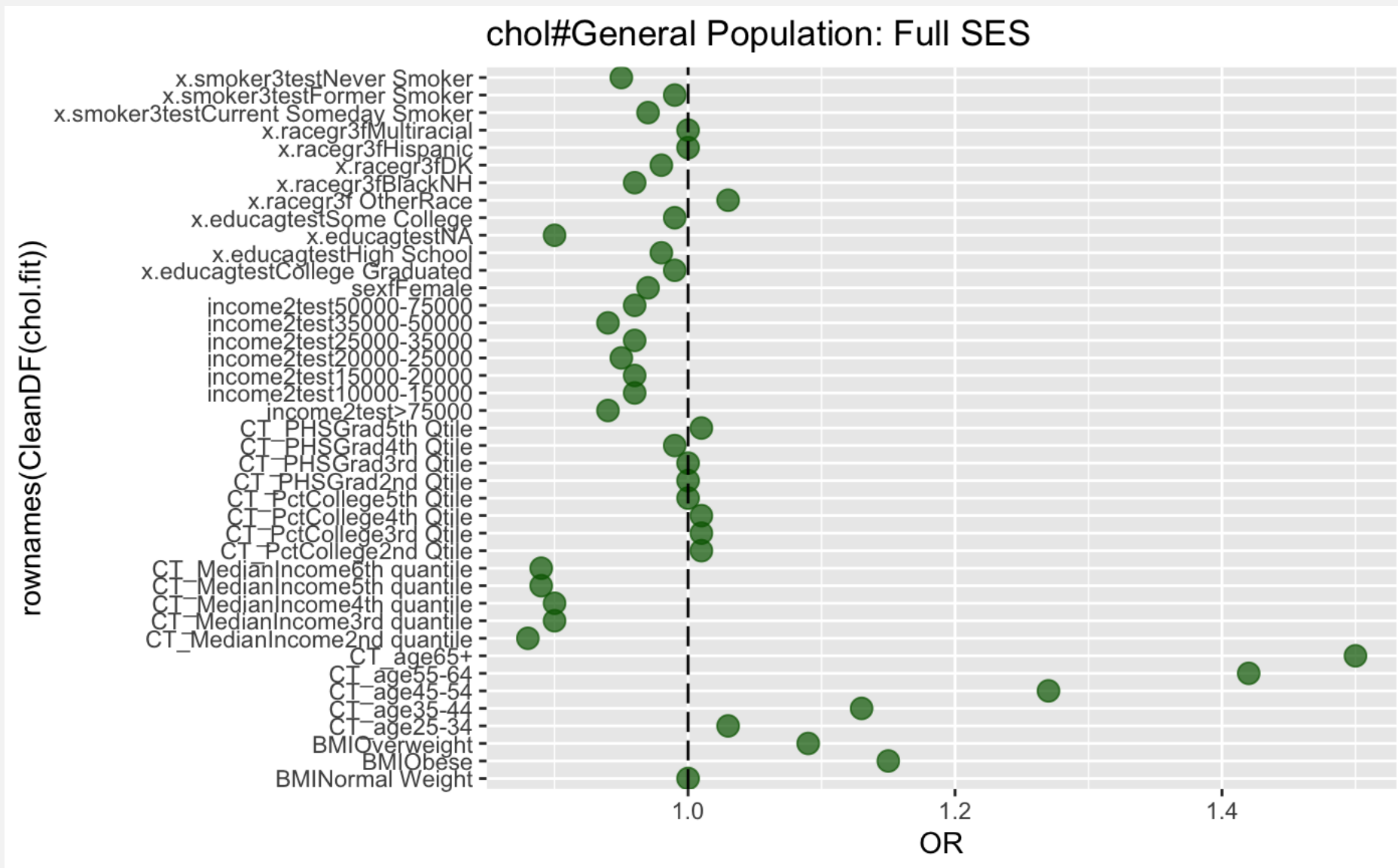
Diabete#General Population: Individual SES



Diabete#General Population: Full SES



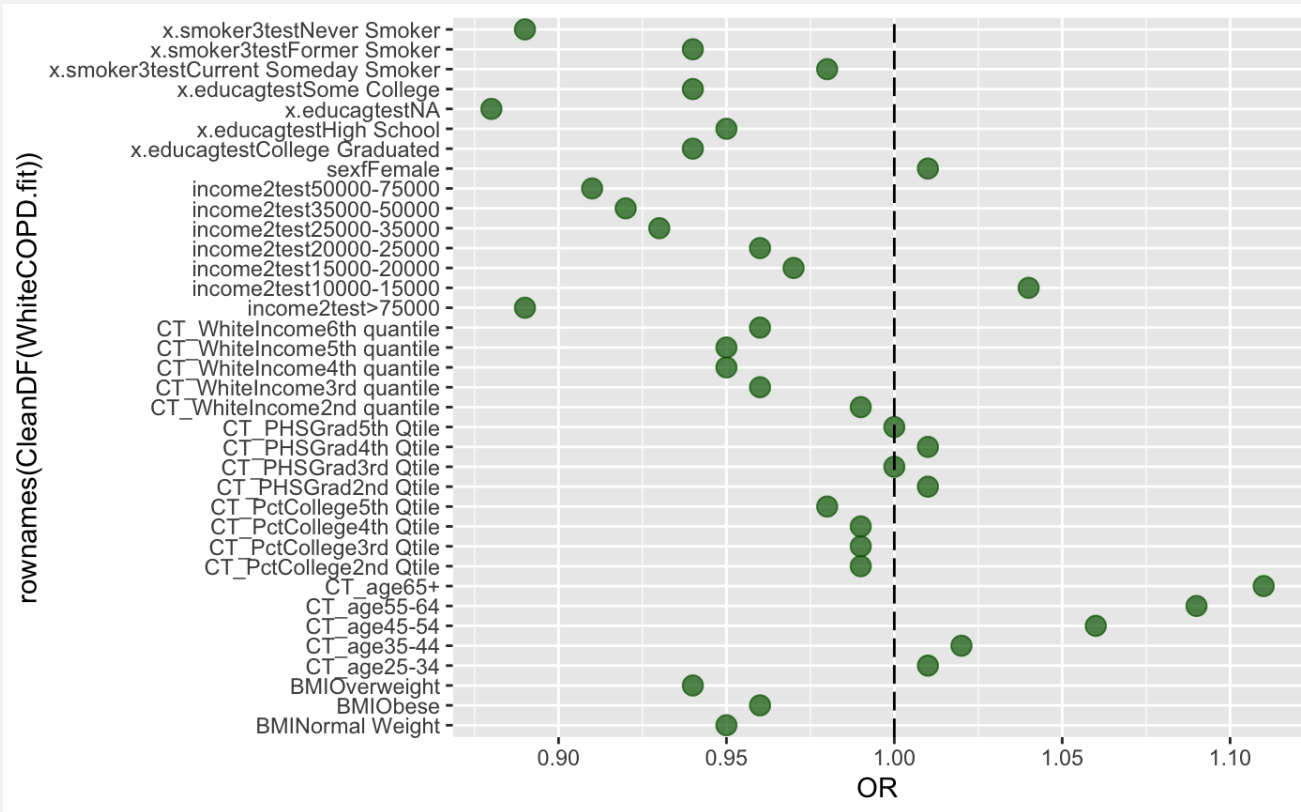
Regional
Income
more
Obvious.
Higher income,
more
likely.





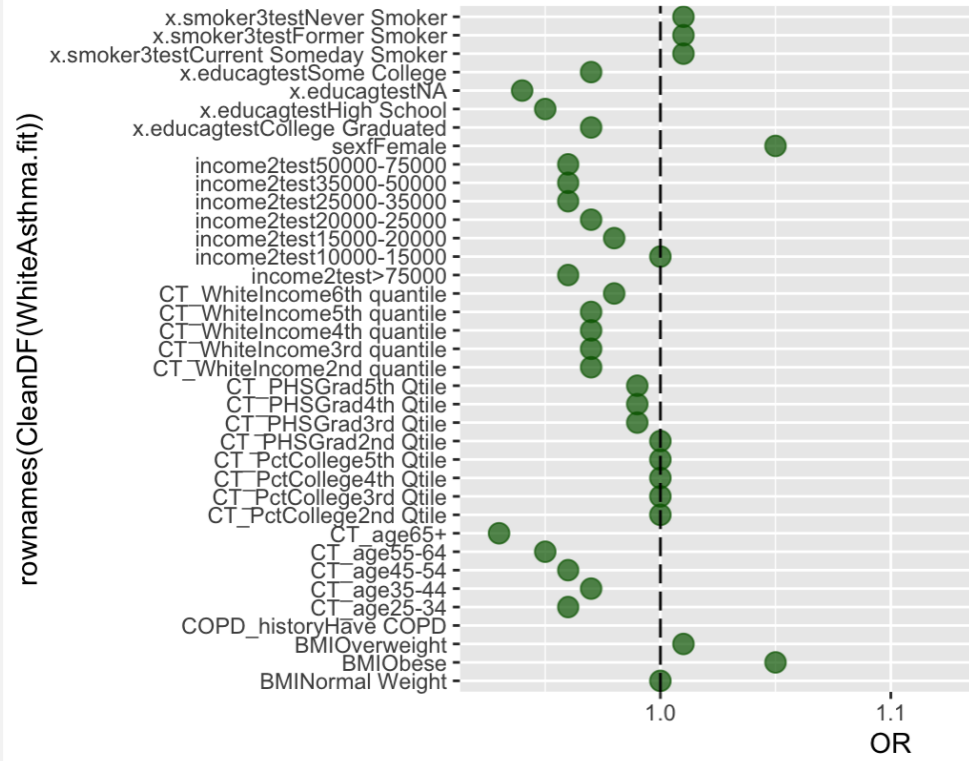
WHITE POPULATION

- Dependent Vars: Health Outcomes
- Independent Vars: Income, educ levels
- Other Controls: Demographics, smoking

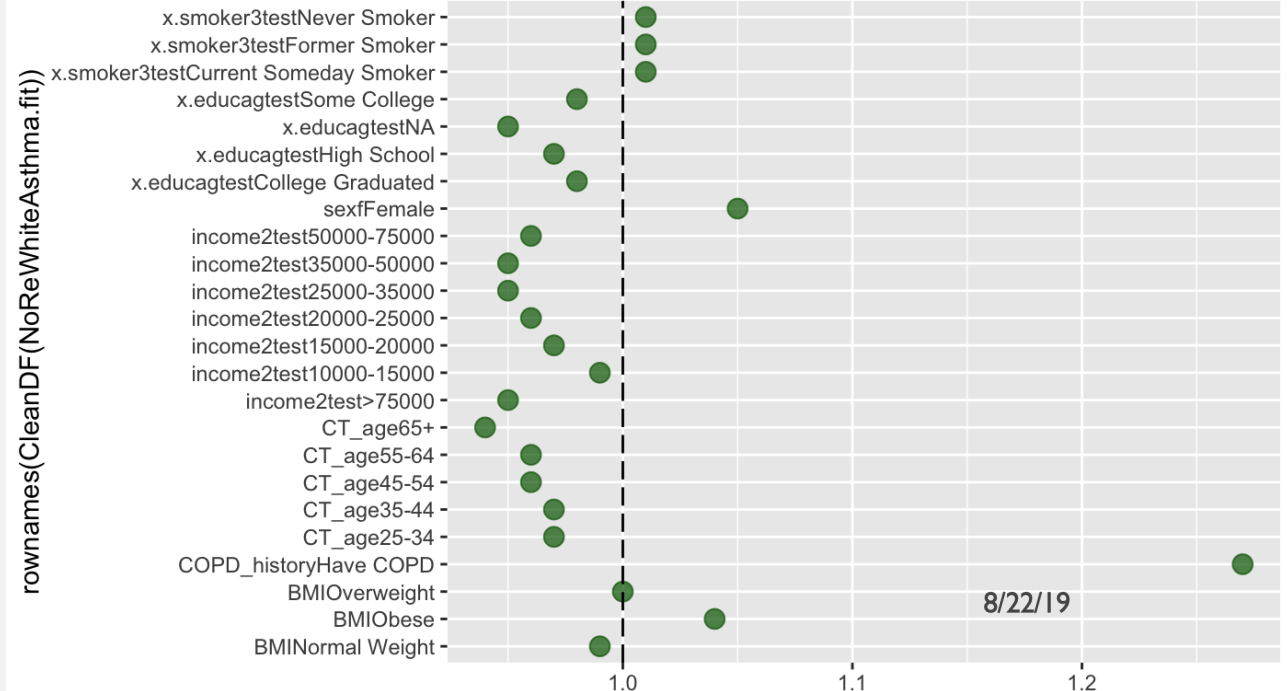


- COPD effect: A little more obvious than the general population
- OR range from 1 to .9

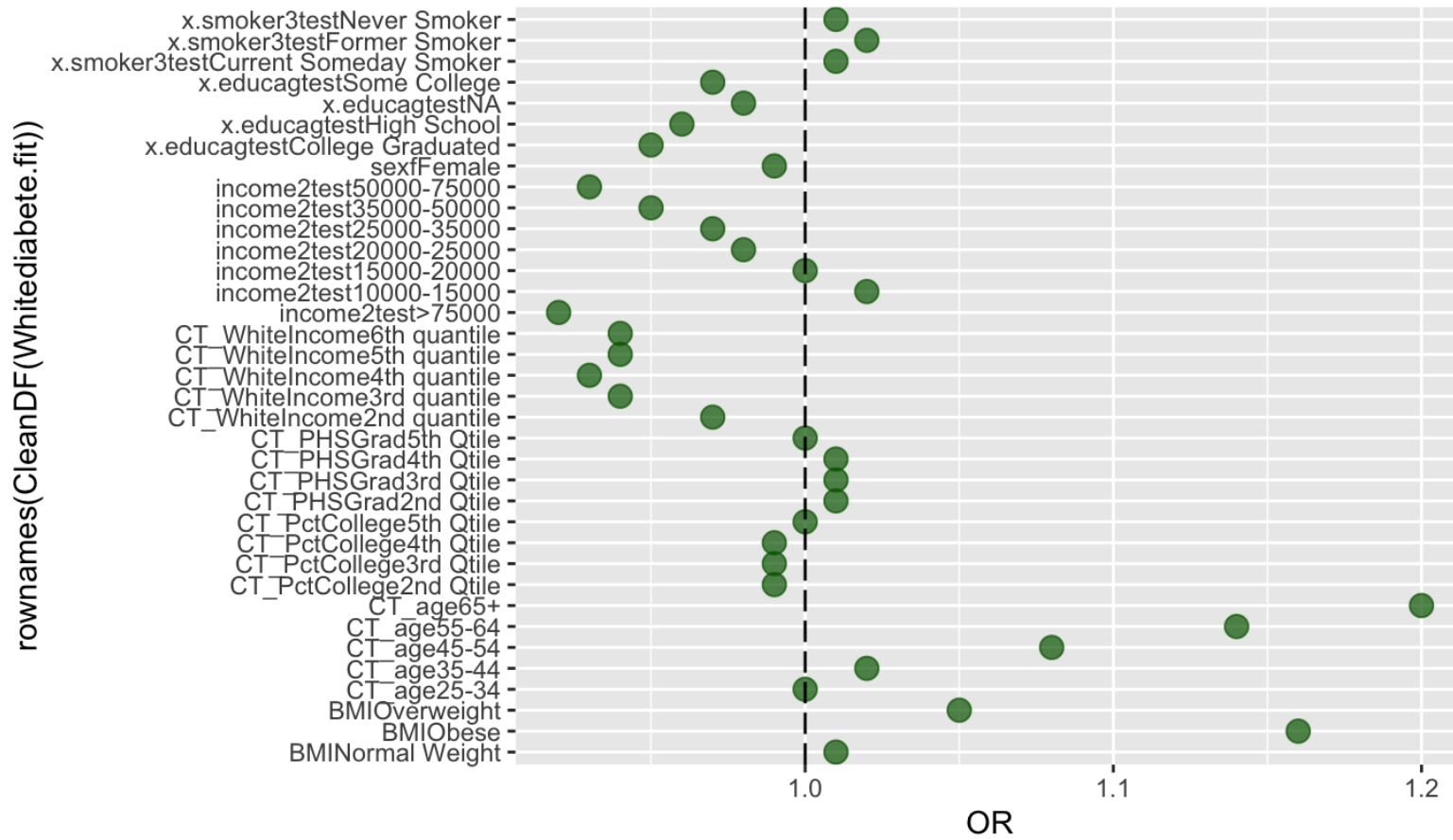
Asthma#White : Full SES



Asthma#White : Idv SES



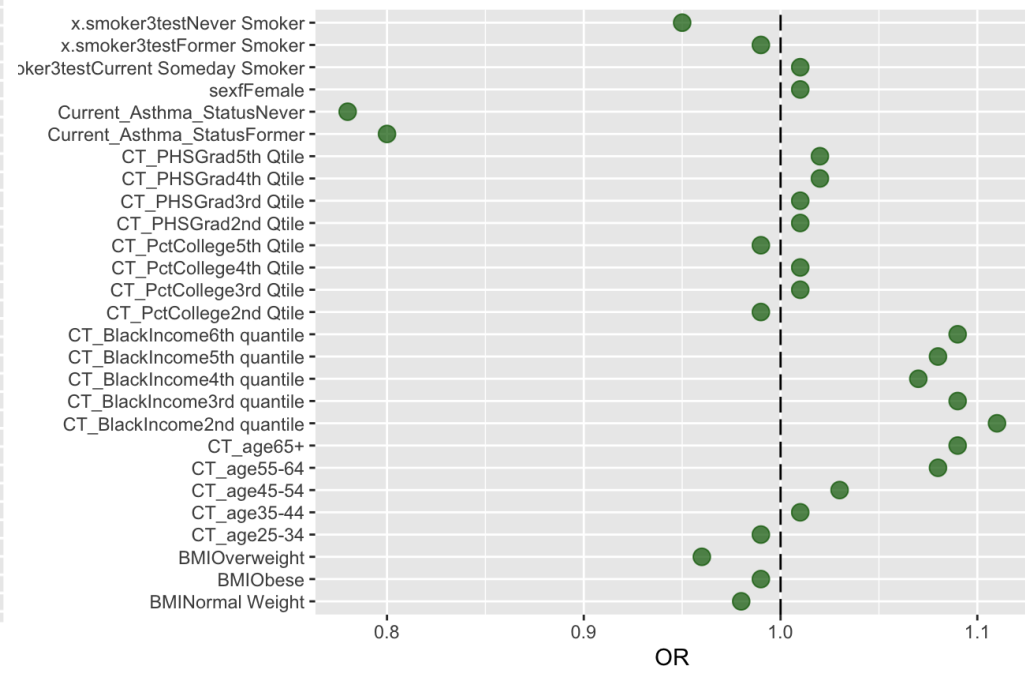
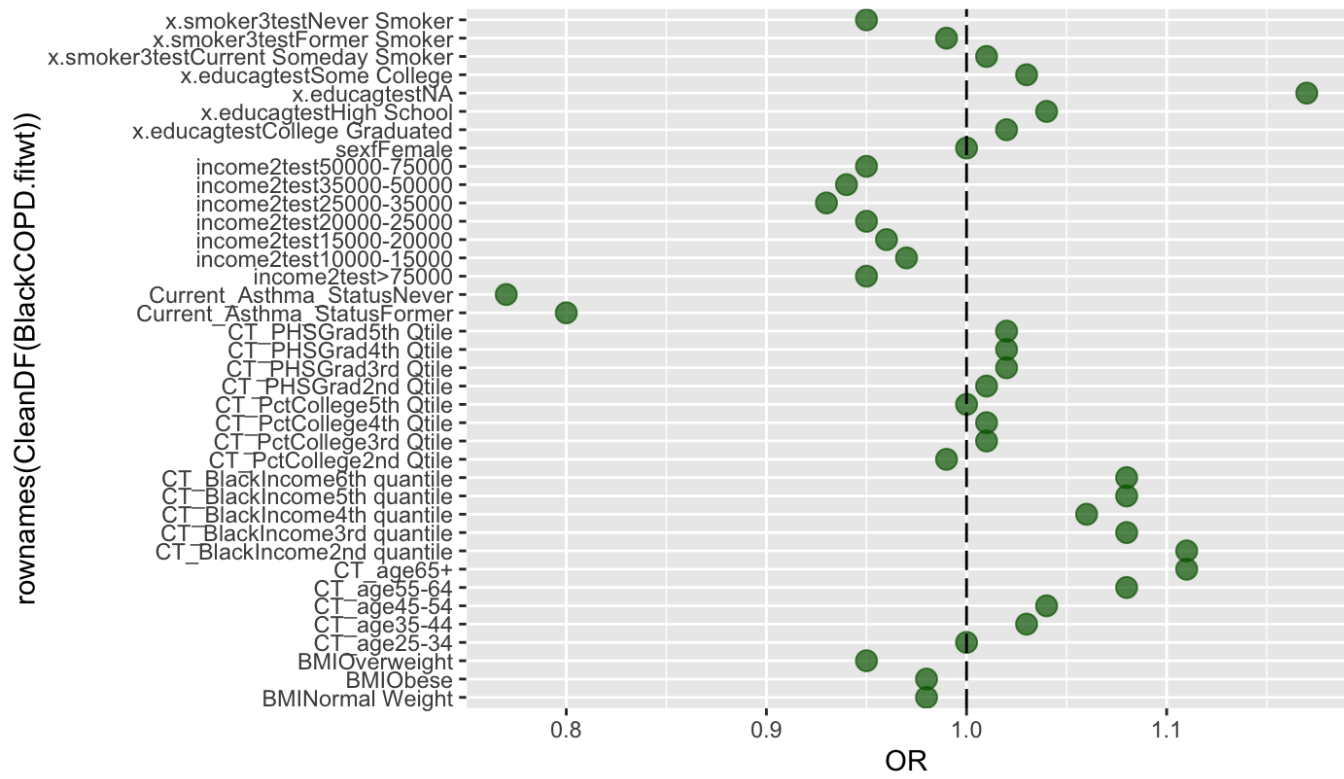
Diabete#White : Full SES



Black Population Results

- Models:
- `svyglm(Healthoutcomes ~CT_BlackIncome+CT_age+sexf+Current_Asthma_Statu
s+CT_PctCollege+CT_PHSGrad+x.smoker3test+BMI,des
ign=Black217dsgn)`

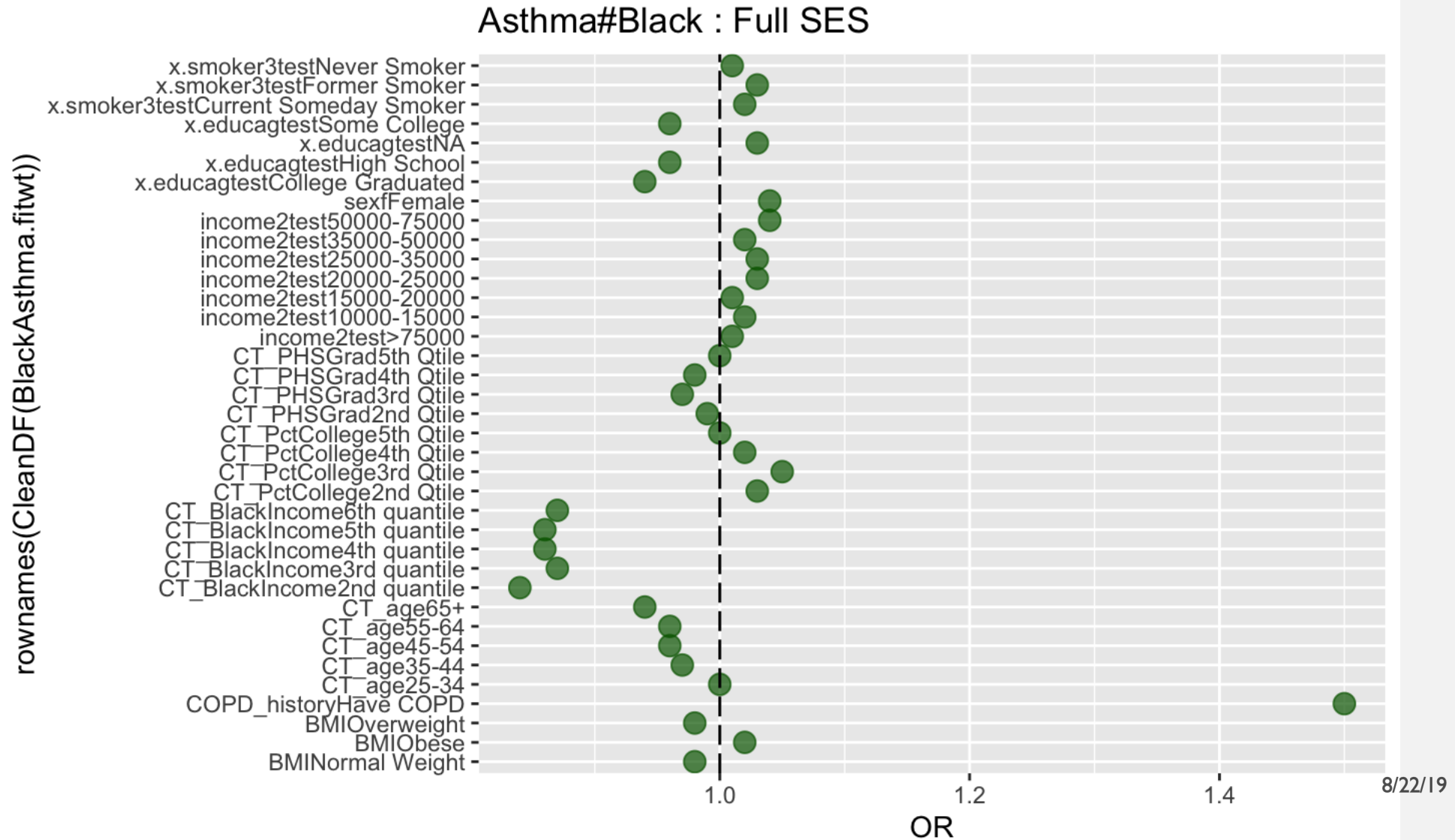
COPD#Black : Full SES

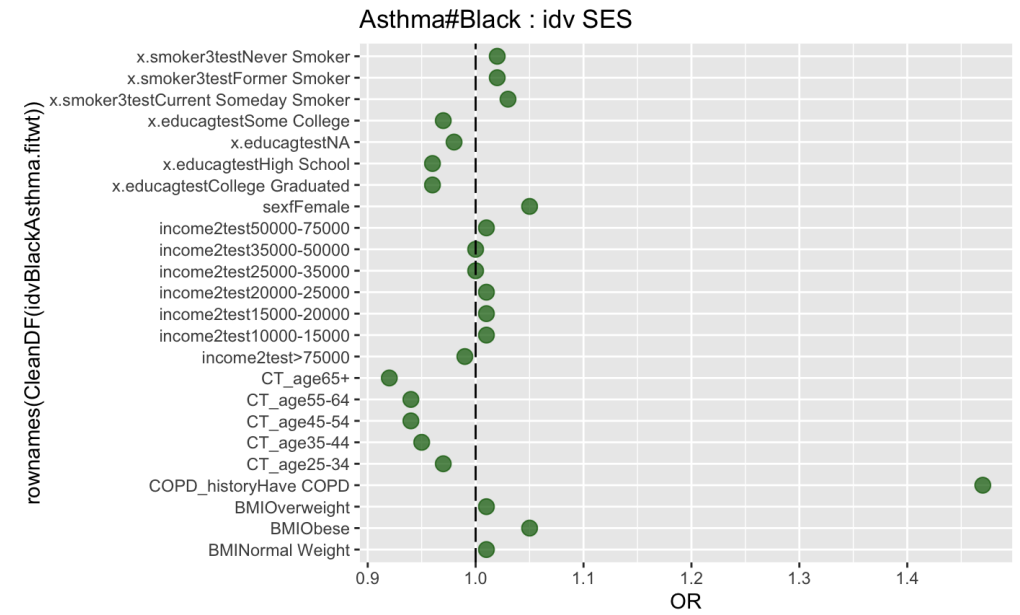
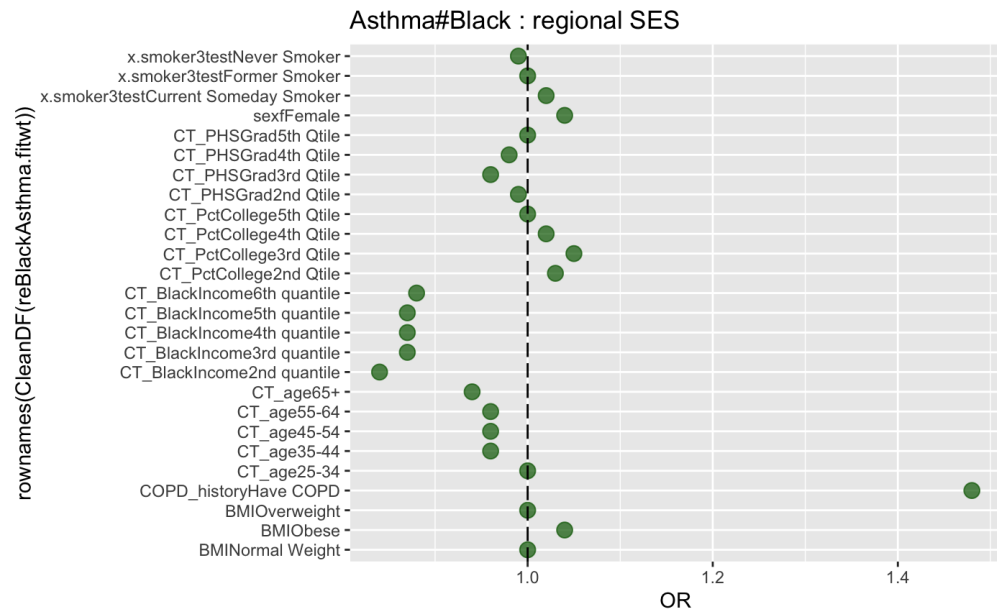


WEIRD RESULTS FOR REGIONAL LEVEL VARS;

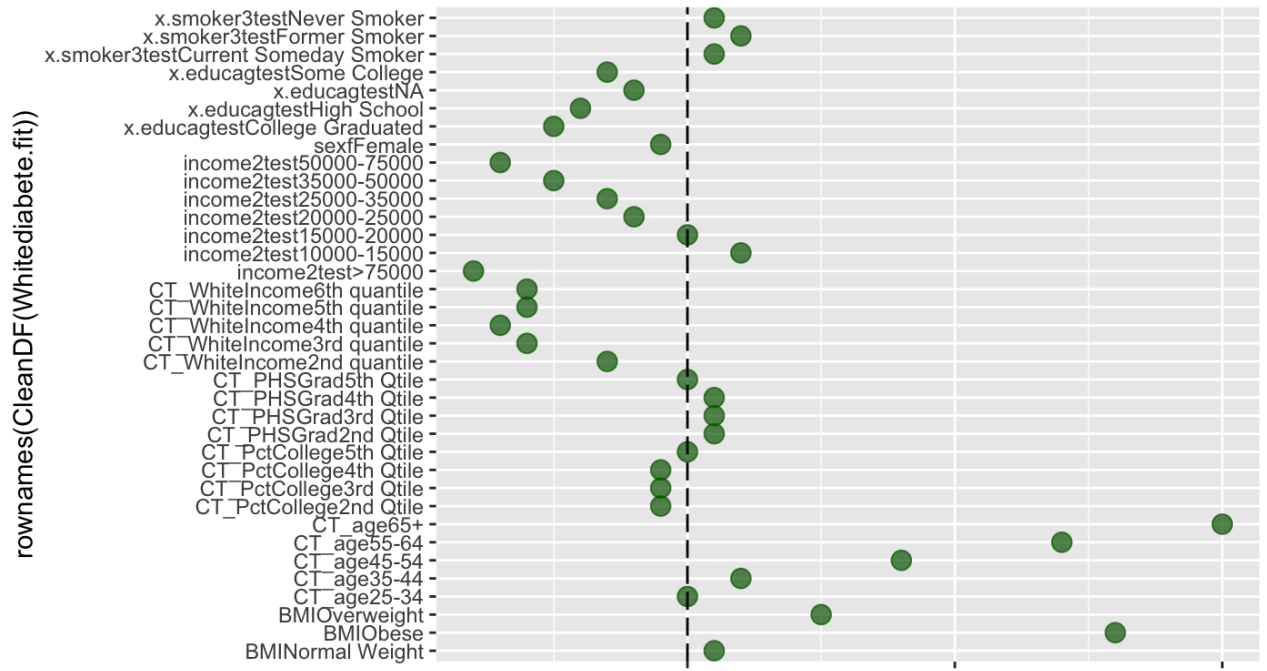
Income impacts not as obvious as that to White's population.

For Asthma: Only Regional Income Vars Matters

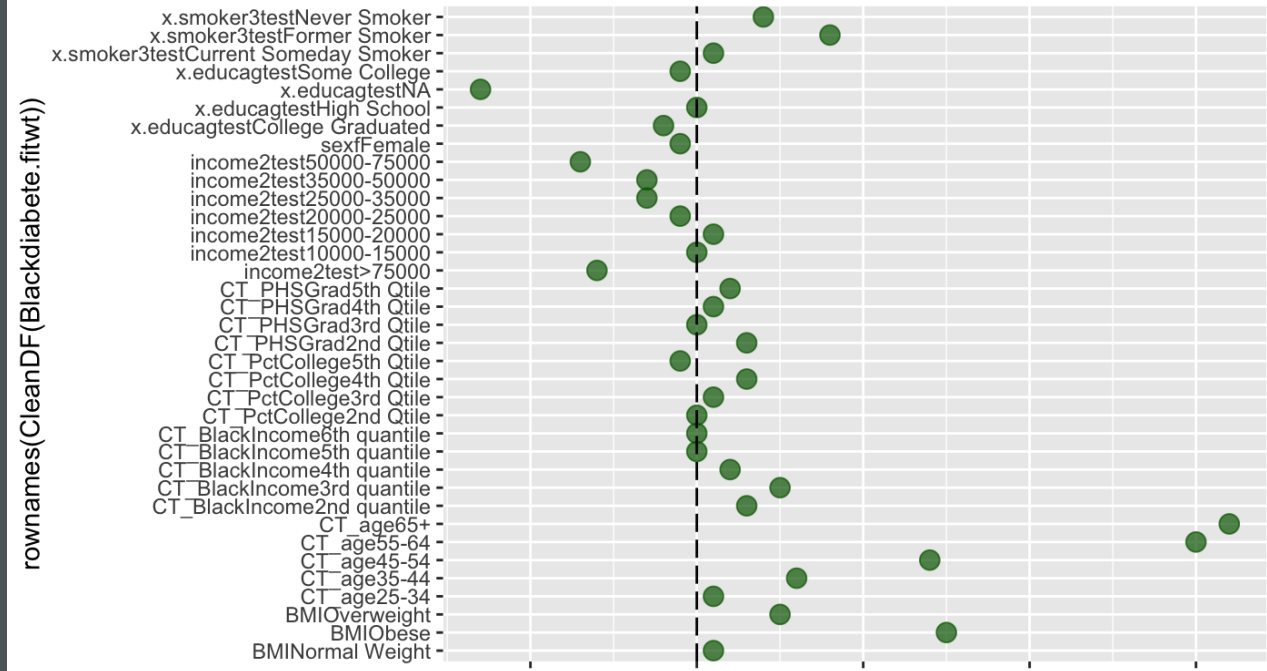




Diabete#White : Full SES



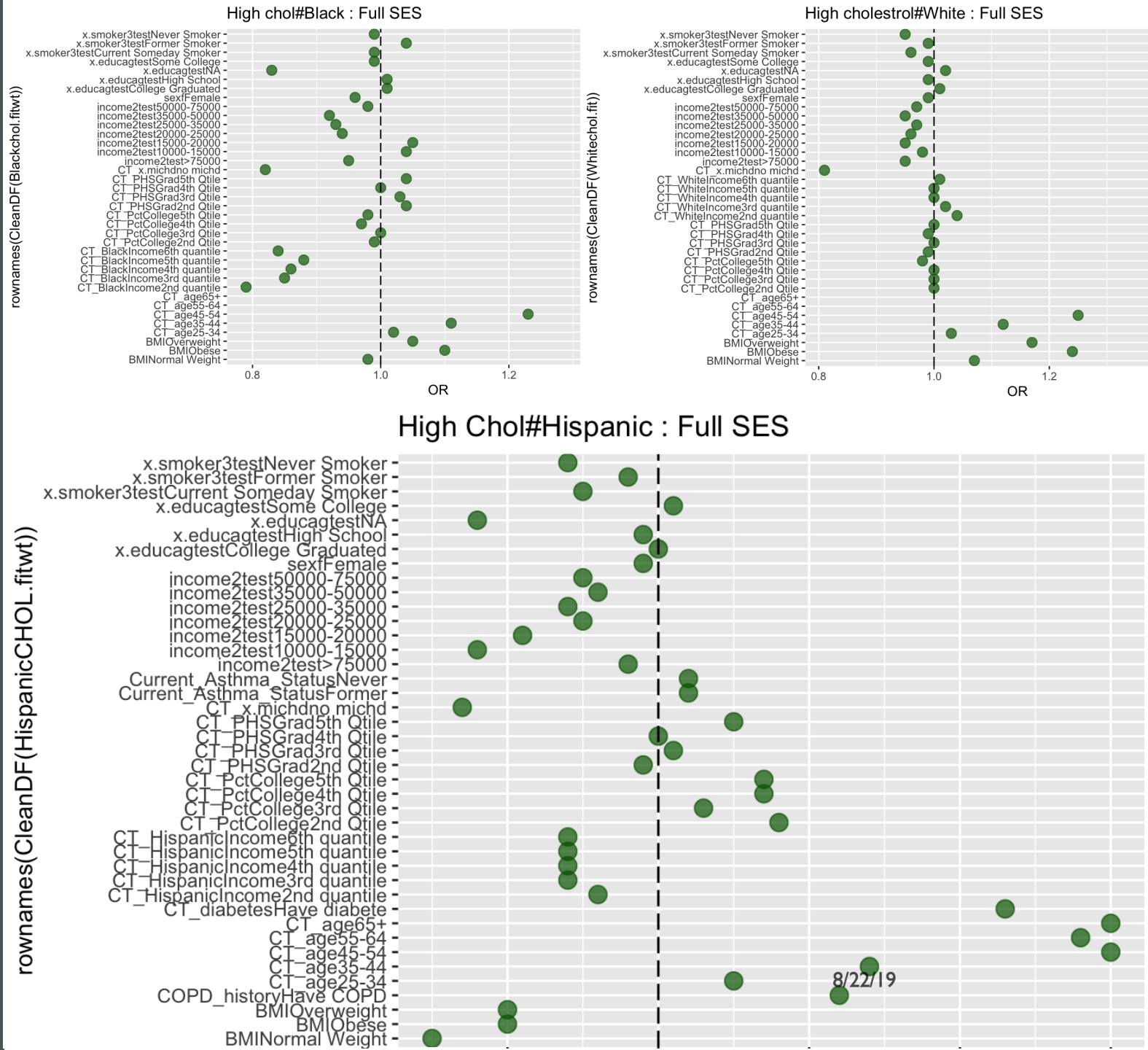
Diabete#Black : Full SES



- Diabetes: Compare Whites vs Black Population

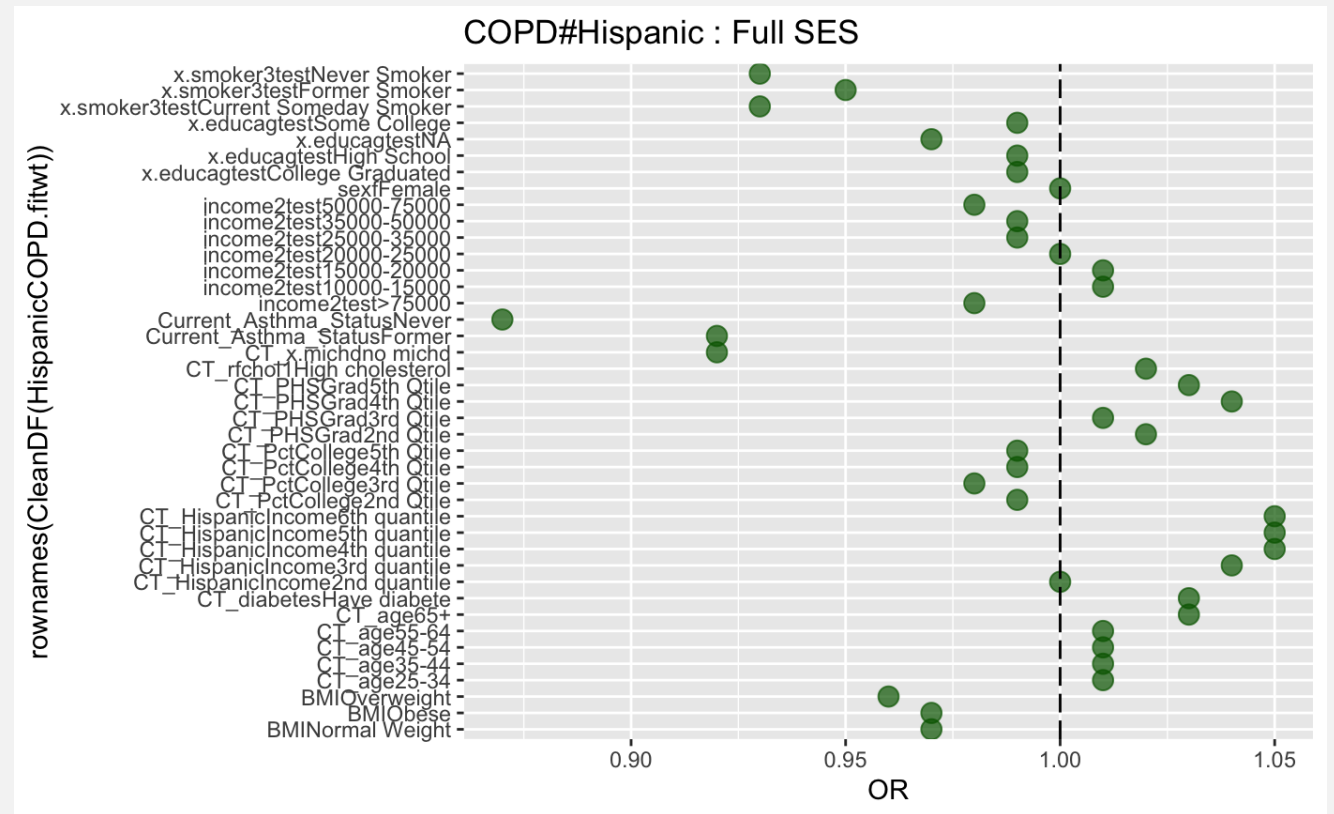
HIGH CHOLESTR OL COMPARIS ON

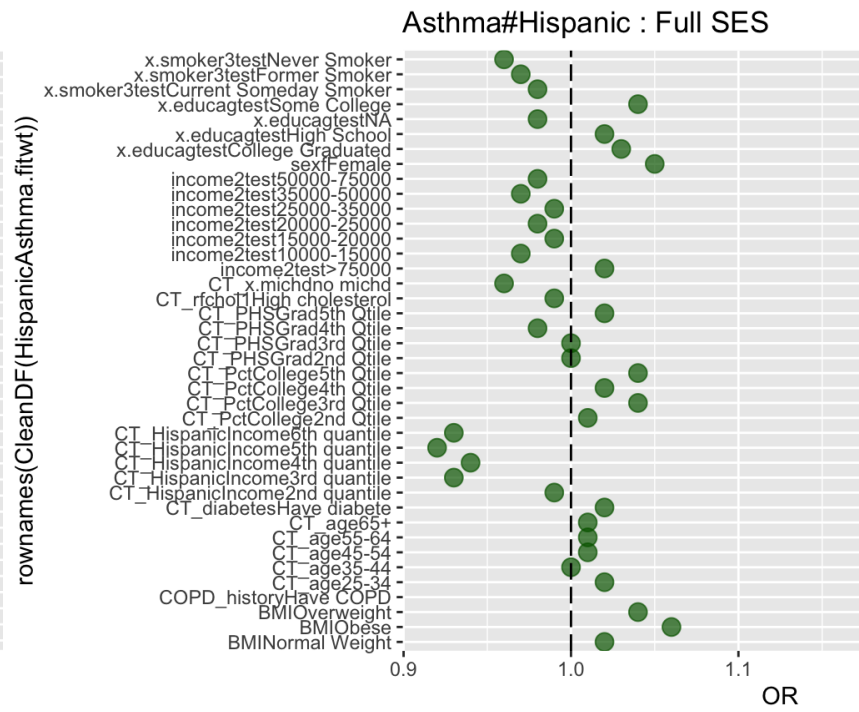
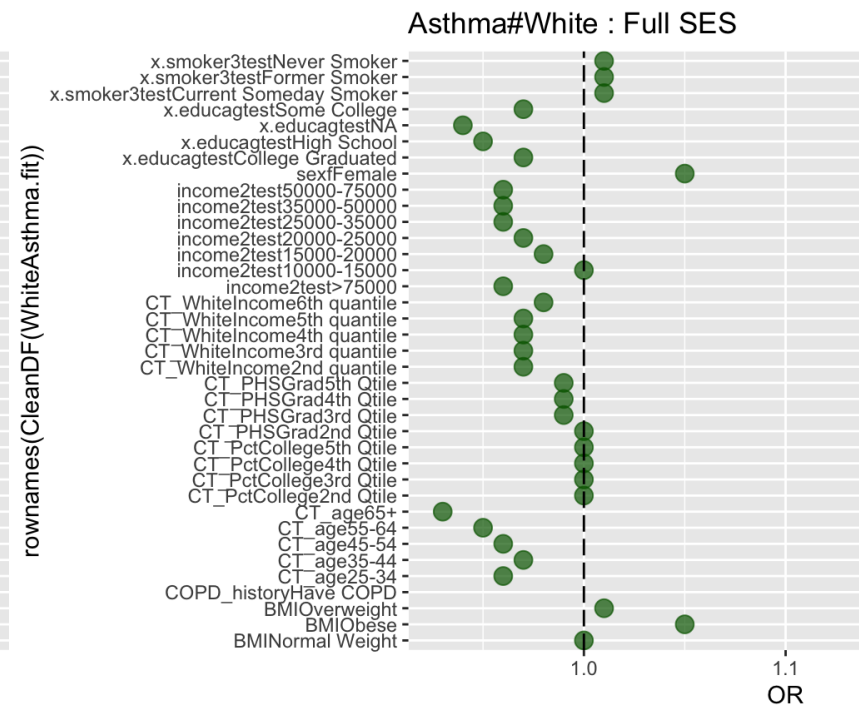
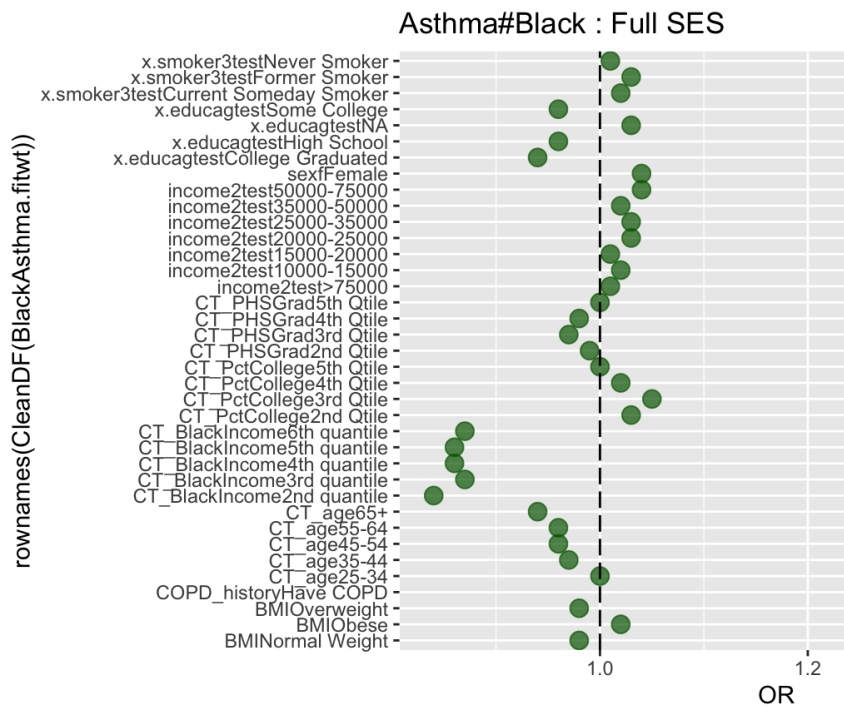
More Income, more likely
Effects on Whites not obvious



RESULTS FOR HISPANIC

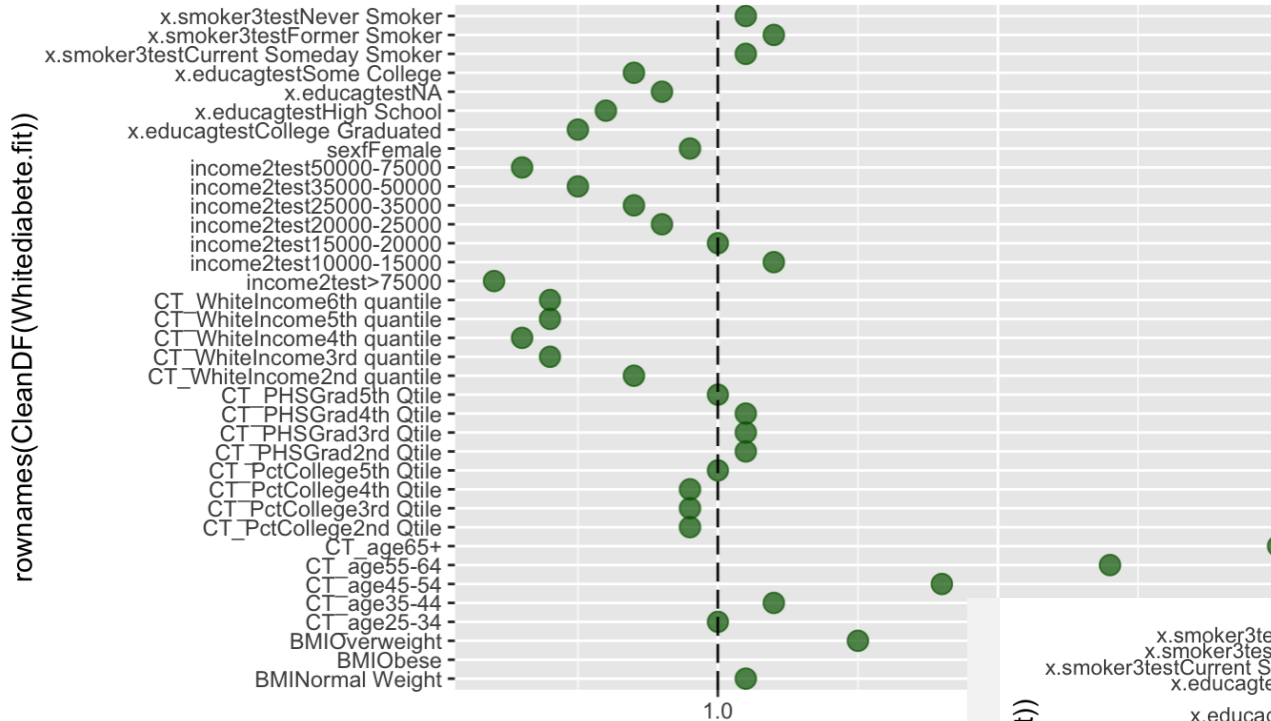
- COPD: Weird results for Regional Vars



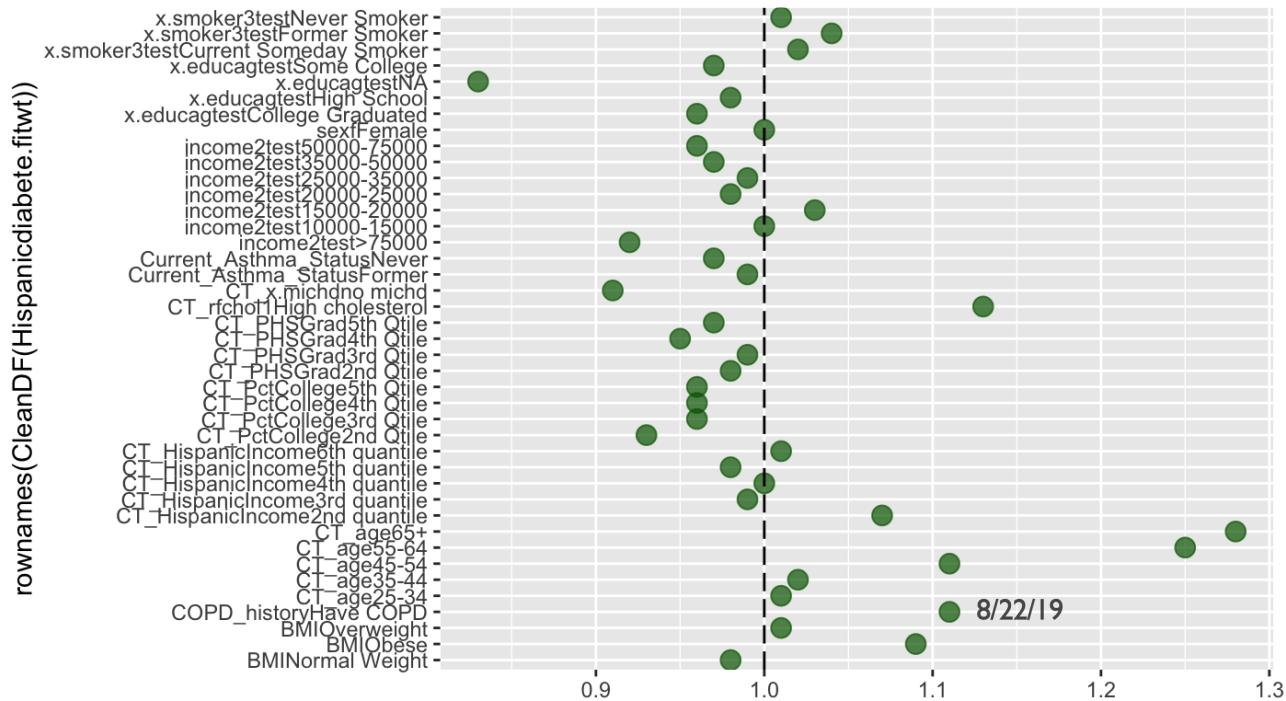


- Asthma Comparing Black vs Hispanic vs White

Diabete#White : Full SES

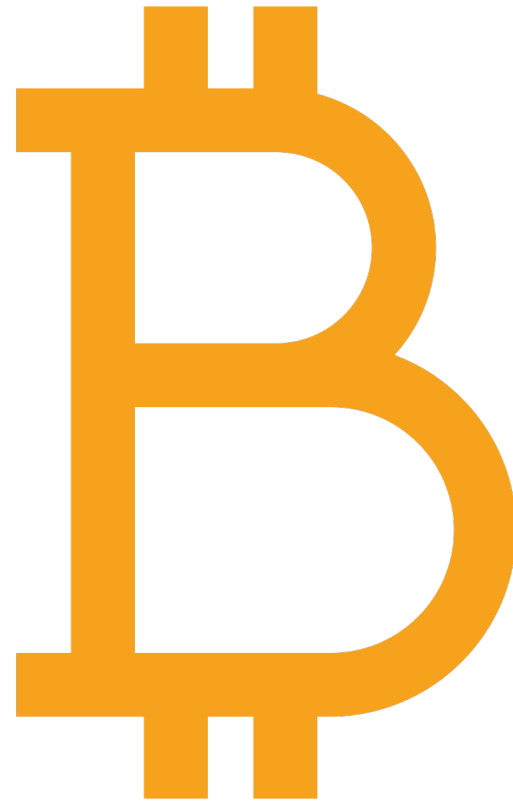


Diabete#Hispanic : Full SES



What Happens to some weird results on Regional Vars?

1. Should understand the data structure better
2. the way I quantile regional income data might have some problems: 1st quantile almost no person. The reference group weird.
3. will $OR=.95$ etc really matters?





ACKNOWLEDGEMENT
AND THANKS

- Sherrie
- Blanca