Measuring Need Using Population Health Indicators: Some Composite Methods Shortchange Rural Counties

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Composite Health Indices

Summary measure of health

 Constructed from a set of population health indicators from multiple sources that have been transformed (e.g., scaled, normalized, standardized) and aggregated together in a single measure (Rothenberg et al., 2015)

Used to monitor and compare the health between populations

- Geographical units (e.g., countries, states, counties)
- Socioeconomic groups

Rothenberg, et al. (2015). Urban health indicators and indices – current status. BMC Public Health, 15:494.





Multiple Uses of Composite Health Indices

- Public communication
- Track changes overtime
- Problem identification
- Policy design and adoption
- Stimulate efforts to
 improve population health



America's Health Rankings

E RANKINGS



RANK: 1 to 10 11 to 20 21 to 30 31 to 40 41 to 50 Not Ranke

Examples of Composite Health Indices in the United States



The United Health Foundation – America's Health Rankings. Available at https://www.americashealthrankings.org/ The University of Wisconsin Population Health Institute – County Health Rankings. Available at http://www.countyhealthrankings.org/

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County Health Rankings

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Methods

- 1. Gather data
- 2. Impute missing data using state mean
- 3. Normalize county values within each state for each measure using the average of counties in that state (z-scores)
- 4. Eliminate outliers
- 5. Multiply by scientifically-informed weights
- 6. Sum weighted scores
- 7. Rank counties by the sum of all measure scores

The University of Wisconsin Population Health Institute – County Health Rankings. Available at http://www.countyhealthrankings.org/

Distribution of Rural and Urban Counties Across the United States

Category	Number of Counties
Metropolitan	1,166
Micropolitan	641
Small Adjacent	674
Remote Rural	655

Counties were characterized based on level of rurality using Urban Influence Codes: Urban (UICs 1, 2), Micropolitan (UICs 3, 5, 8), Small Adjacent (UICs 4, 6, 7,), and Remote Rural (UICs 9, 10, 11, 12).

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Comparison of ranks for the 10 rural counties with poorest health outcomes

County	County Health Rankings (CHR)	YPLL	Age-adjusted All-cause Mortality	Absolute Difference (CHR and YPLL)	Absolute Difference (CHR and All-cause)				
Coahoma, MS	1907	1895	1872	12	35				
Wilcox, AL	1906	1898	1825	8	781				
Holmes, MS	1905	1884	1805	21	100				
McDowell, WV	1904	1901	1903	3	1				
Phillips, AR	1903	1887	1882	16	21				
Mingo, WV	1902	1891	1899	11	3				
Sharkey, MS	1901	1885	1828	16	73				
Pemiscot, MO	1900	1893	1869	7	31				
Jefferson Davis, MS	1899	1866	1603	33	296				
Jefferson, MS	1898	1848	1518	50	380				

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Construction of Composite Health Indices

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- Multiple steps in the process
- Caution required during all steps

Organisation for Economic Co-Operation and Development. (2008). Handbook on Constructing Composite Indicators – Methodology and User Guide.

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Things to Consider during Data Selection

- Availability of data at the desired geographic level of analysis
 - Use the average of multiple years of data
 - Proxy measures may be substituted
- 2. Timeliness
- 3. Accessibility
- 4. Accuracy

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The University of Wisconsin Population Health Institute – County Health Rankings. Available at http://www.countyhealthrankings.org/ Organisation for Economic Co-Operation and Development. (2008). Handbook on Constructing Composite Indicators – Methodology and Use Guide.

Focus Area	Measure	weight	Source	Year(s)	Missing
Length of life	Premature	50%	Mortality	2012-2014	9%
(50%)	death		files		(169)
Quality of life	Poor or	10%	BRFSS	2015	0
(50%)	fair health				
	Poor	10%	BRFSS	2015	0
	physical				
	health				
	days				
	Poor	10%	BRFSS	2015	0
	mental				
	health				
	days				
th	LBW	20%	Natality files	2008-2014	5%
					(93)

Example of a Summary Table of Data Characteristics from *County Health Rankings*

Imputation of Missing Data

- Types
 - 1. Case deletion
 - Ignores differences between cases with complete versus incomplete data
 - 2. Single imputation
 - Mean/median/mode substitution
 - 3. Multiple Imputation

Overuse of imputation techniques can impact the overall quality of the composite index.

Organisation for Economic Co-Operation and Development. (2008). Handbook on Constructing Composite Indicators – Methodology and User Guide.

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Example of Case Deletion

Comparison of Unranked Rural Counties (n=63) in *County Health Rankings* to State and National Averages

		Wors	e Health Outcomes
Pop	oulation Health Indicator	State Average (only) % (n)	National Average (only) % (n)
	Uninsured	8% (5)	17% (11)
	Uninsured children	0%	6% (4)
J B	Poverty	25% (16)	0%
Ca	Child poverty	11% (7)	3% (2)
ຼິສ	No primary care providers	-	78% (49)
nic	No dentists	-	86% (54)
U.	No mental health providers	-	48% (30)

Both

% (n)

52% (33)

92% (58)

8% (5)

32% (20)

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Clinical Care

Worse health outcomes compared to <u>state</u> average

Worse health outcomes compared to <u>national</u> average

Worse health outcomes compared to both <u>state</u> and <u>national</u> averages

	Bristol Bay, AK	Yakutat, AK	Alpine, CA	Cheyenne, CO	Hinsdale, CO	San Juan, CO	Camas, ID	Clark, ID	Stanton, KS	Wallace, KS	Carter, MT	Garfield, MT	McCone, MT	Petroleum, MT	Prairie, MT	Ireasure, MI	WIDAUX, WI	Banner NF	Blaine. NE	Deuel, NE	Garden, NE	Grant, NE	Hayes, NE	Keya Paha, NE	Logan, NE	Loup, NE	McPherson, NE	Sioux, NE	Thomas, NE	Wheeler, NE	Harding, NM	Billings, ND	Logan, ND Sheridan. ND	Slope, ND	Campbell, SD	Harding, SD	Hyde, SD	Jones, SD	Sully, SD	Borden, TX	Glasscock, IX	Nelleuy, I.A	Kent, IX King TV	King, IX Loving TX	McMullen TX	Motley, TX	Roberts, TX	Sterling, TX	Terrell, TX	Daggett, UT	Piute, UT
Uninsured																																								******											
Uninsured Children																																																			
Primary Care Physicians																																																			
Dentists																																																			
Mental Health Providers				NA			NA		NA		NA		NA	ſ	AA	N	A			NA	NA							NA				N	IA NA	A	NA	NA	NA		NA	Γ	A					NA		NA		NA	

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Example of Single Imputation

	Number of Rural Counties	e Years of I Life Lost PLL)	
State	Missing data	Rural Counties	All Counties
Alaska	4	9246.05	8813.51
Colorado	4	7017.81	6663.9
Kansas	18	8077.68	7749.7
Montana	8	8868.80	8648.0
Nebraska	12	6872.43	6674.7
North Dakota	16	8189.12	8482.89
South Dakota	16	9420.28	8838.4
Texas	11	8680.02	8237.0

- County Health Rankings uses single imputation methods to replace missing data
 - Use corresponding state-level means
 - Method chosen for ease of communicating methods and final rankings with the public
- Modifications are needed to accommodate the unique characteristics of data from rural counties

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Use of Indices

Pros	Cons
Can summarize several elements into a single measure.	Poorly constructed composite index may be misinterpreted or send misleading policy messages.
Easier to interpret.	May invite simplistic policy conclusions.
Can assess progress over time.	May be misused if poorly constructed or lacks transparent methodology.
Reduce the visible size of a set of indicators without dropping the underlying information base.	May disguise limitations of data.

Organisation for Economic Co-Operation and Development. (2008). Handbook on Constructing Composite Indicators – Methodology and User Guide.

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Future Directions

- Determine which method works best for rural counties with missing data.
- Identify proxy measures and determine how they may impact the ranks

Thanks!

- Our web site:
 - rhr.sph.sc.edu
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