

Behavioral Risk Factors Data: Health-Related Quality of Life

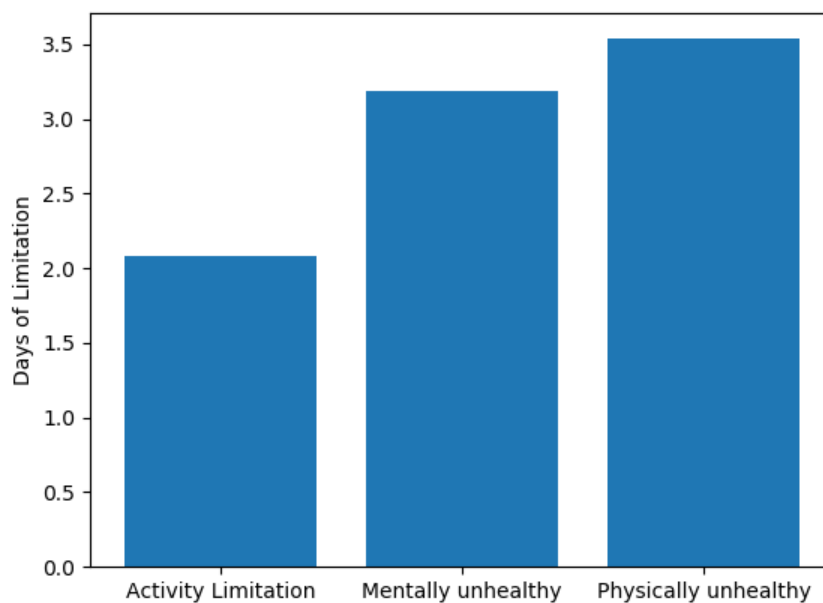
Analysis Part 1: How are people being affected by their poor health?

Big Questions:

- 1-How is the average person affected by their health?
- 2-How many people are most affected by their poor health, and how much are they affected?
- 3-How many people think that they have poor health, and how does this compare to relatively objective numbers?

Q: How is the average person affected by their health?

A: We will answer this through analysis of mean days of activity limitation, mean mentally unhealthy days, mean physically or mentally unhealthy days, and mean physically unhealthy days.

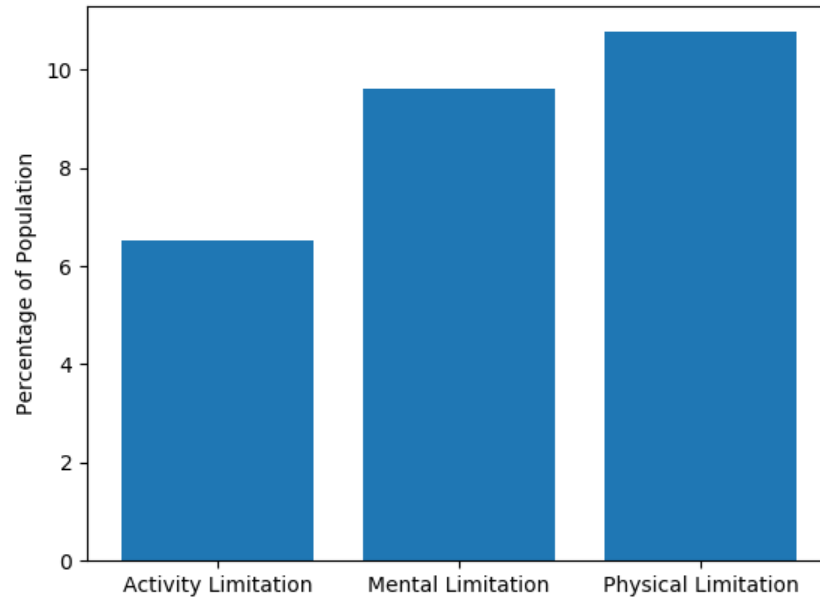


Conclusions

- 1-No significant amount of days lost from any category.
- 2-Physically unhealthy days more than mentally unhealthy days.
- 3-Very few days of activity limitation, overall.

Q: How many people are most affected by their poor health, and how much are they affected?

A: We will answer this through analysis of percentage with 14 or more activity limitation days, percentage with 14 or more mentally unhealthy days (Frequent Mental Distress), and percentage with 14 or more physically unhealthy days.



Conclusions

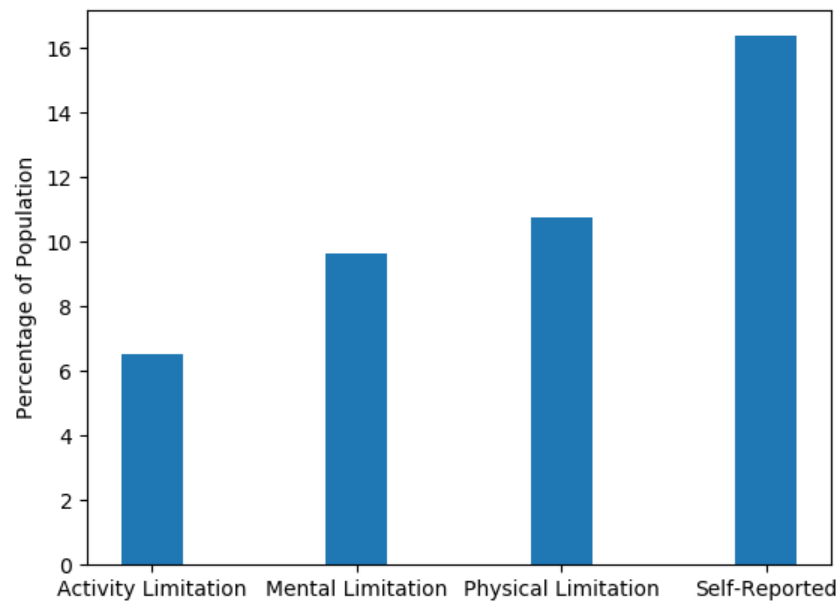
1-Activity limitation minimal--few people suffer from it.

2-Not a big difference between mental and physical limitation.

3-Those who suffer do so greatly--14 is significantly more than 3.5, the max suffered by the average person, and 10% is still a significant amount of the population. There's clearly room for improvement.

Q: How many people think that they have poor health, and how does this compare to relatively objective numbers?

A: We will answer this through analysis of percentage with fair or poor self-rated health.



Conclusions

1-More people self-report poor health than suffer from mental or physical health limitations.

2-Implies obsession with health and wellness

Insights from Part 1:

1-The average person doesn't lose much from poor health, in terms of days made inactive, etc. due to suffering.

2-There are a not-inconsiderable amount of people who do lose a lot from poor health; though they are relatively few, their loss is significant.

3-More people believe that they belong to this category than actually do, leaning toward the conclusion of some sort of nation-wide hypochondriacy.

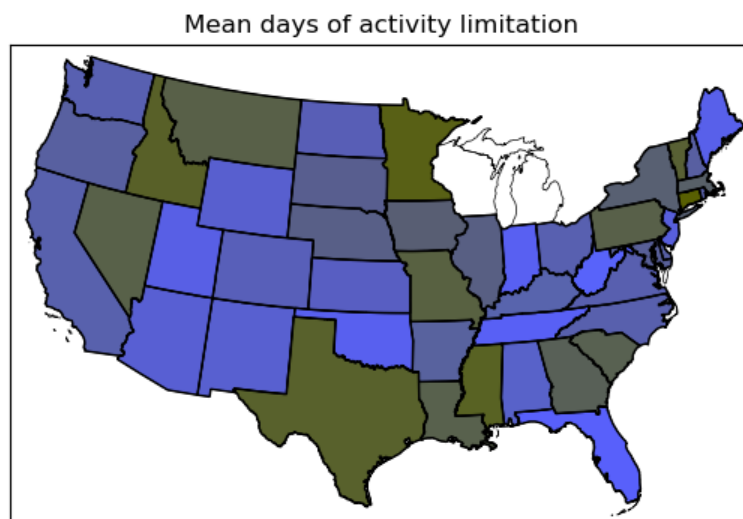
Analysis Part 2: Health differences

Big Questions:

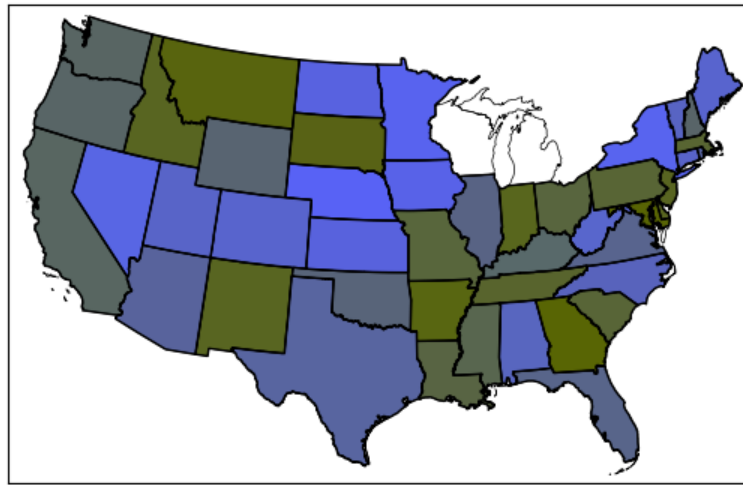
- 1-How does health differ by state?
- 2-How does health differ by age group?
- 3-How does health differ by race?
- 4-How does health differ by biological sex?

Location Data.

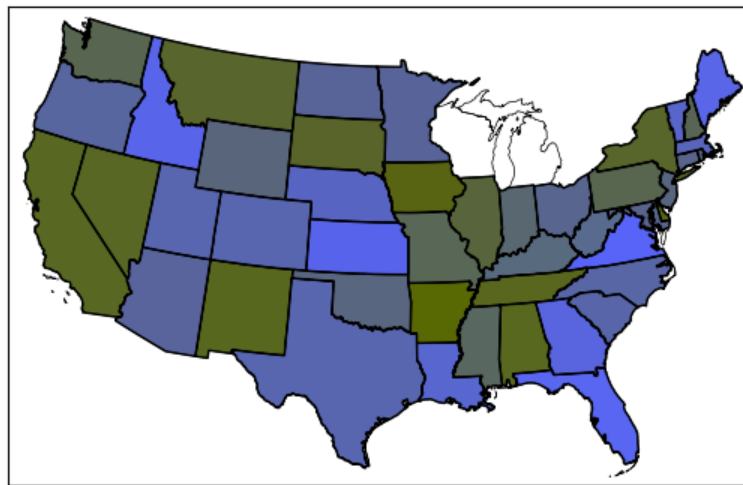
The brighter and more blue the color, the higher the number.



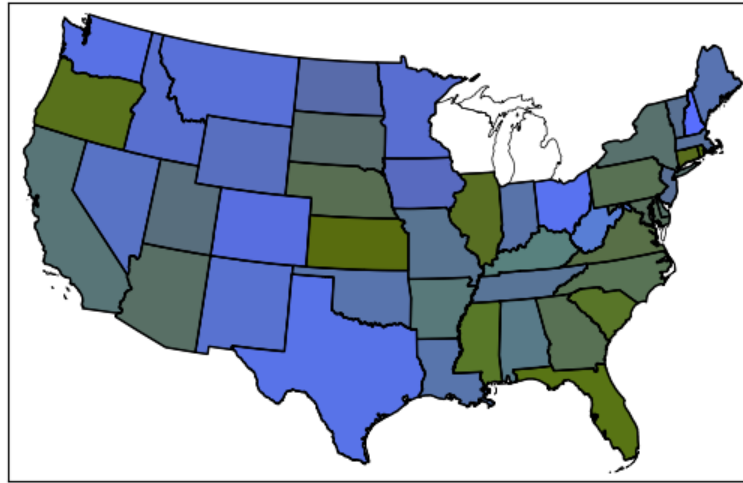
Mean mentally unhealthy days



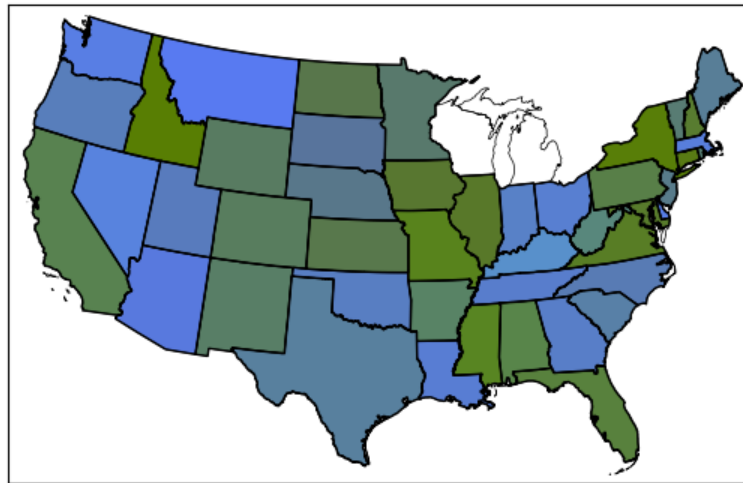
Mean physically unhealthy days



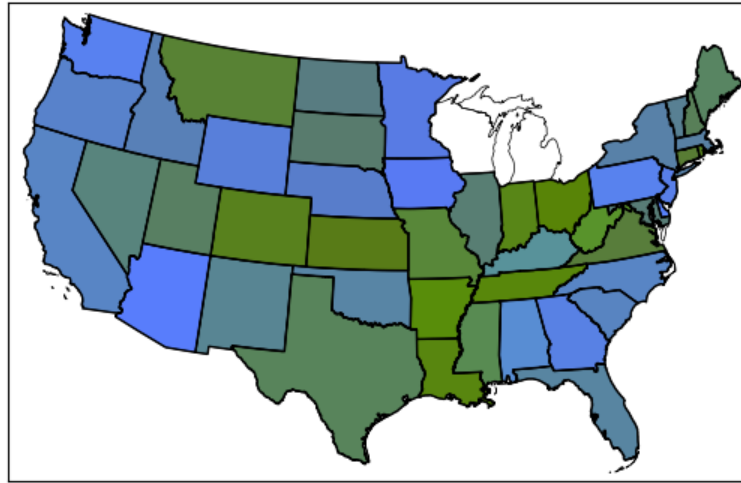
Percentage with 14 or more activity limitation days



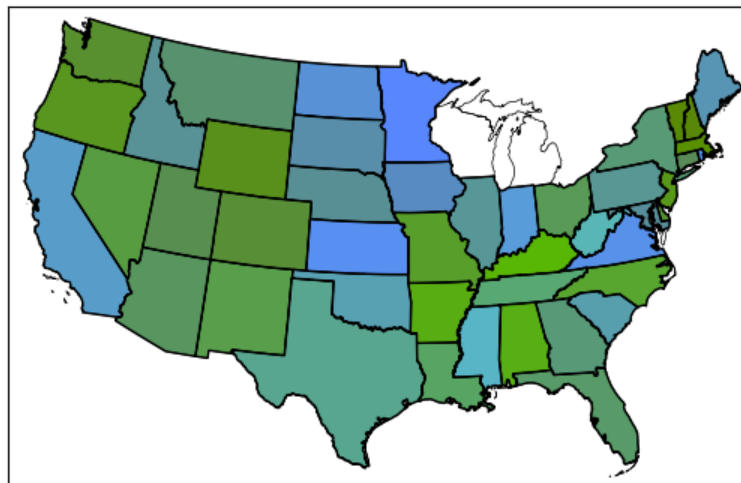
percentage with 14 or more mentally unhealthy days (Frequent Mental Distre



Percentage with 14 or more physically unhealthy days



Percentage with fair or poor self-rated health



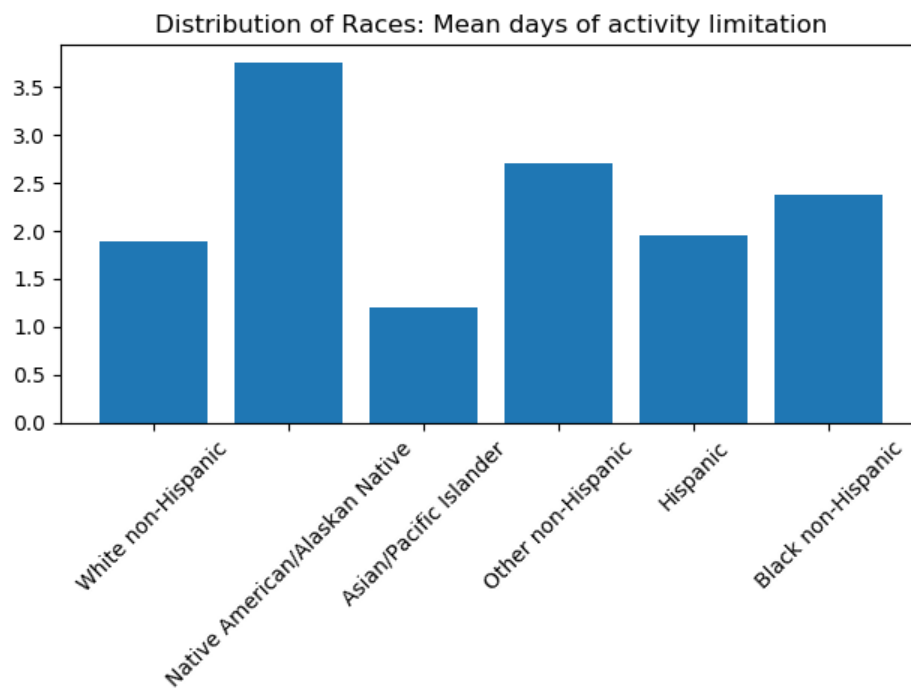
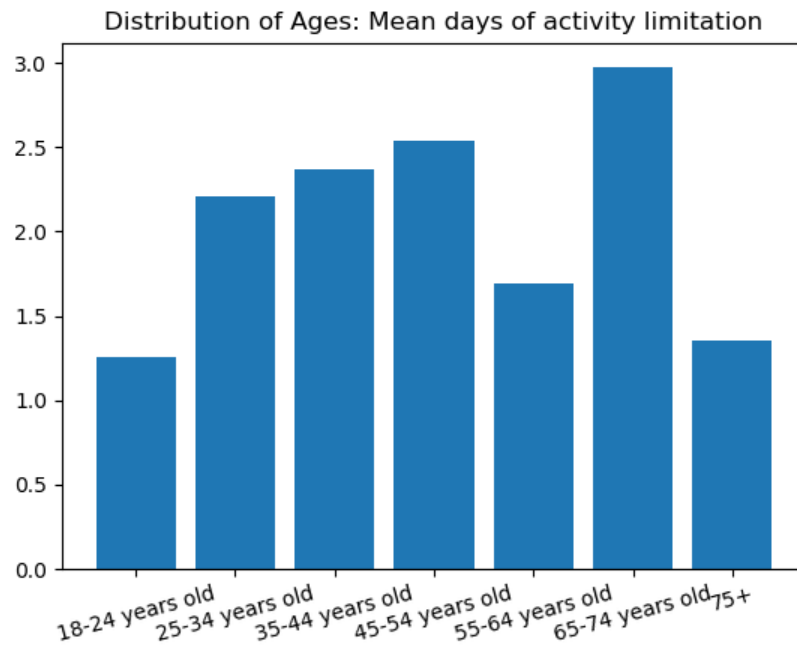
Conclusions

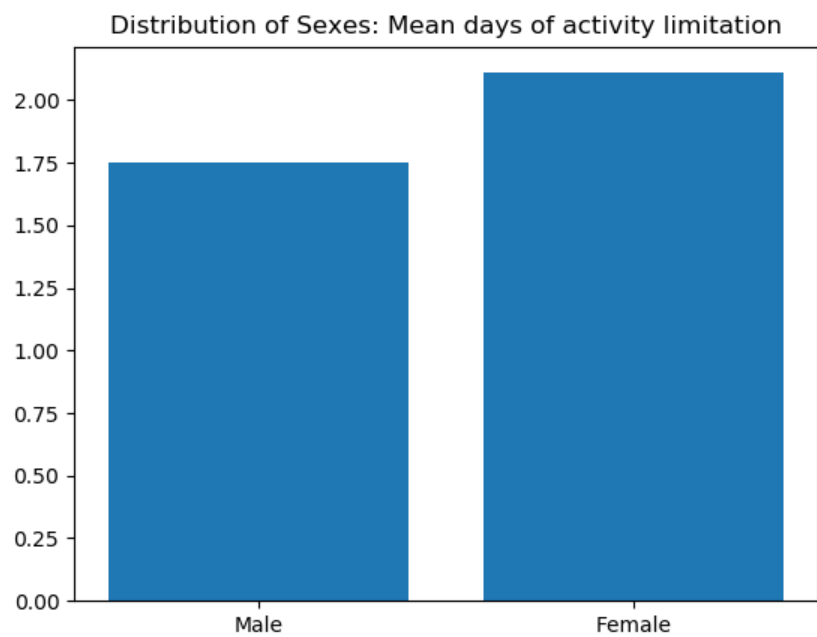
1-Higher frequencies of each category tend to occur in the east coast states and California. This may have less to do with actual occurrence and more to do with general medical practice and, perhaps, population. Or maybe cities are just dirty and unhealthy.

2-The states that have lower actual occurrences of each category also have less self-reported occurrences. This is interesting, as it means that, as actual occurrences go up, self-reported

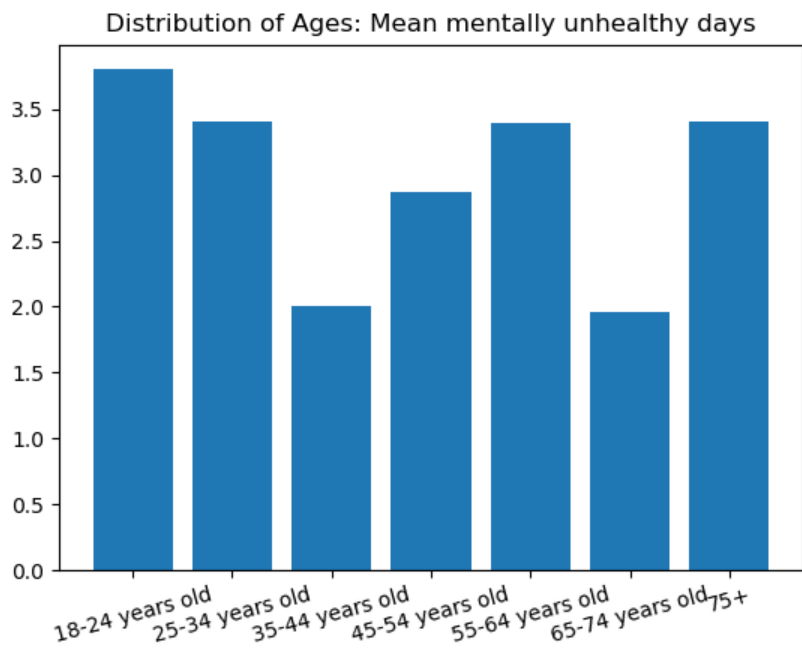
occurences go up at a higher rate.
Other Data

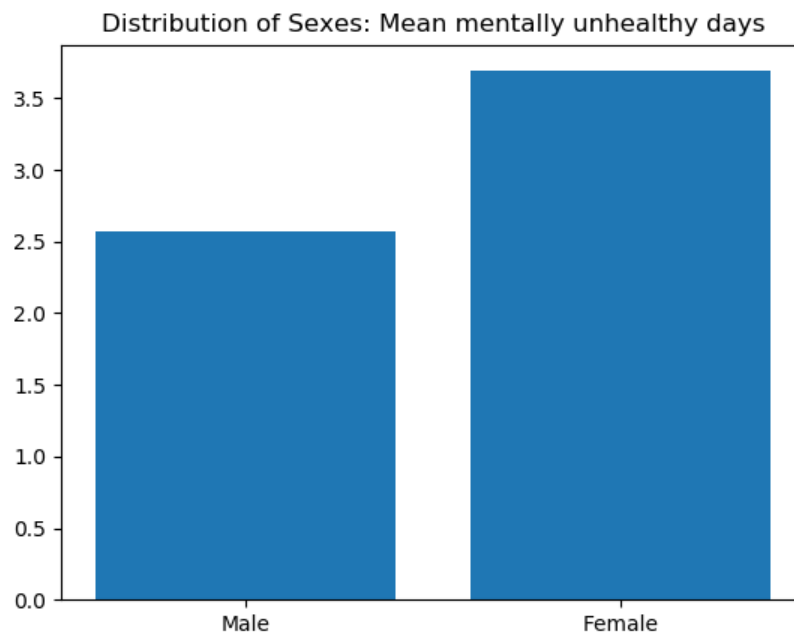
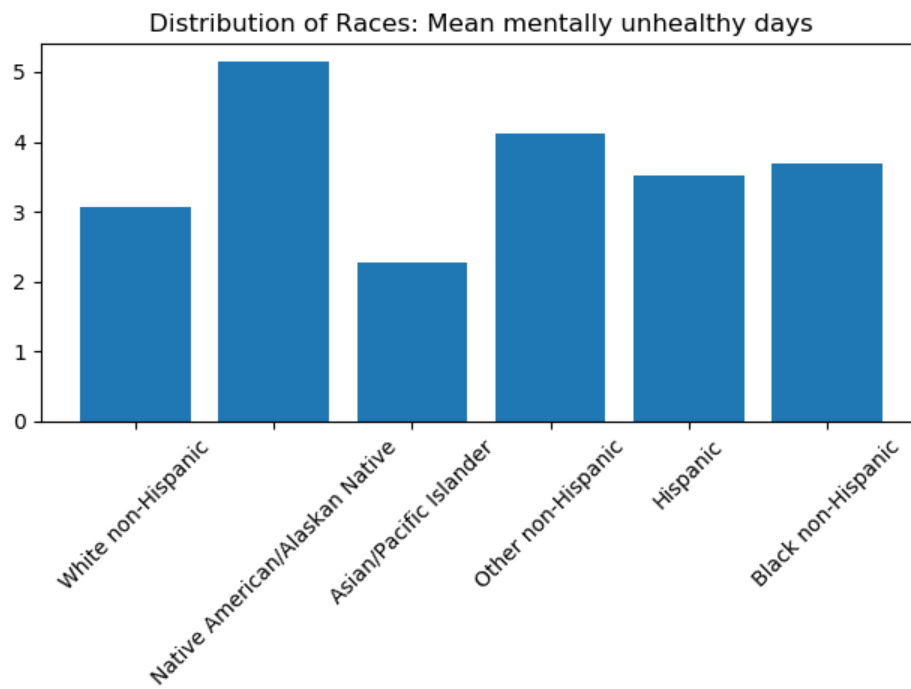
Mean days of activitv limitation





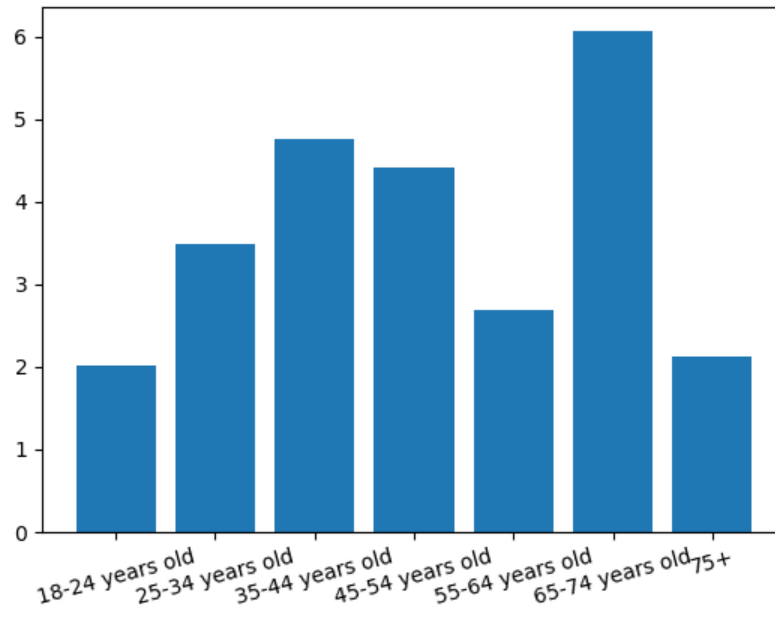
Mean mentally unhealthy days



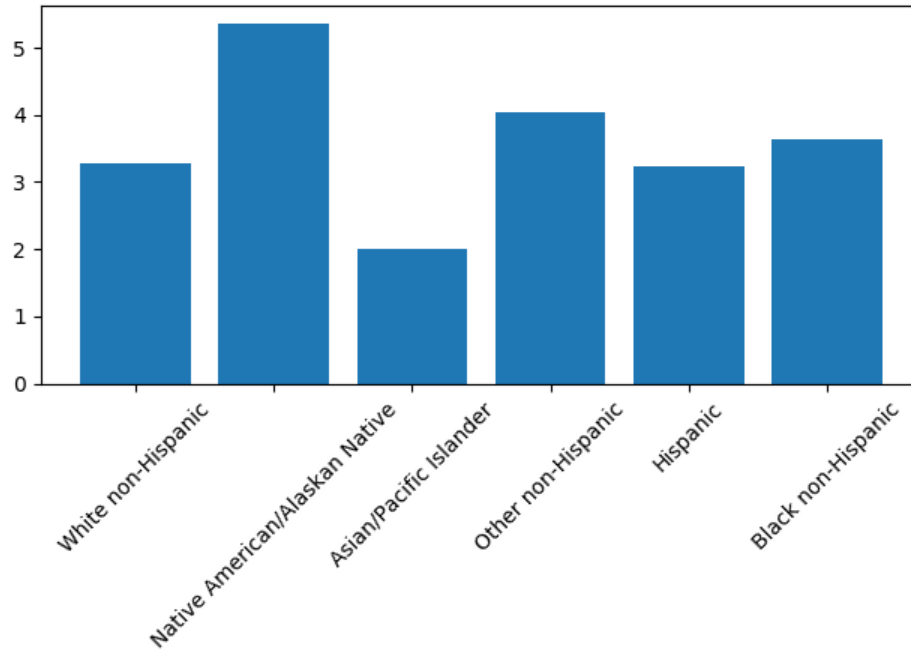


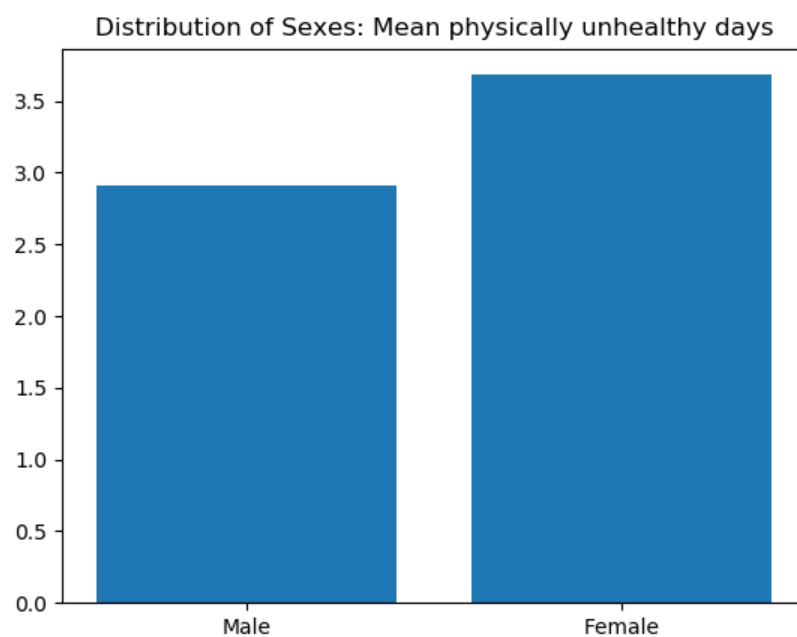
Mean physically unhealthy days

Distribution of Ages: Mean physically unhealthy days

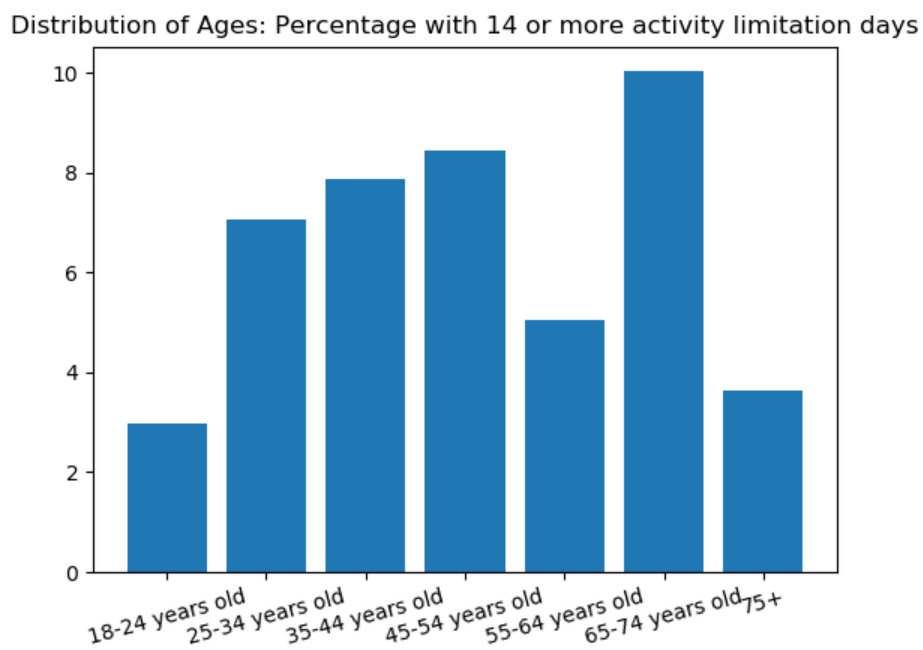


Distribution of Races: Mean physically unhealthy days

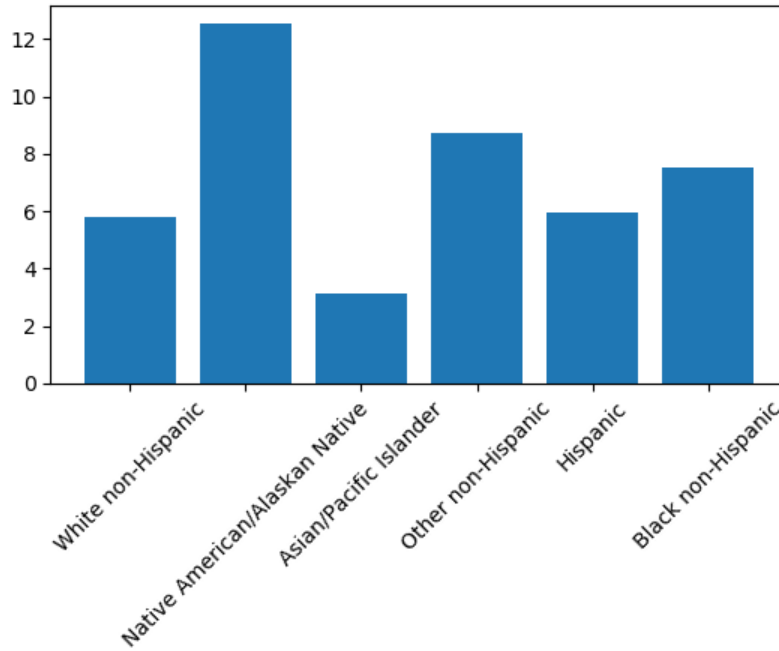




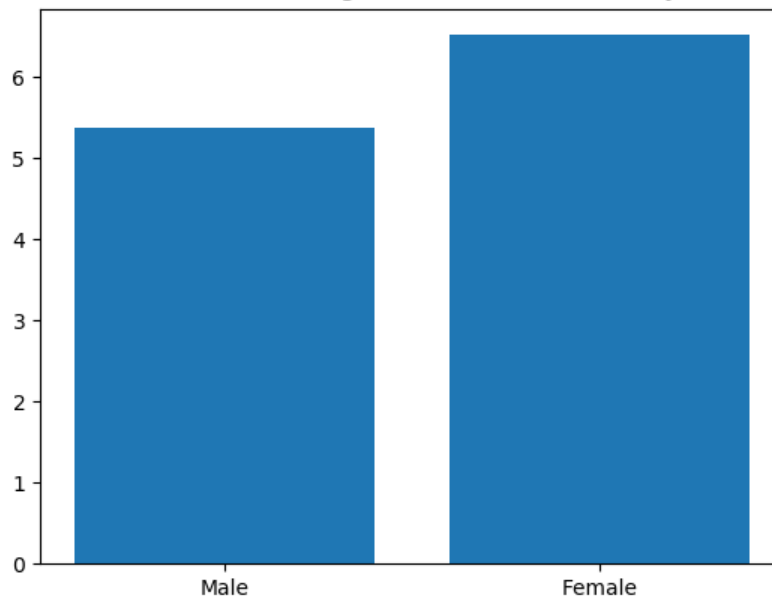
Percentage with 14 or more activity limitation days



Distribution of Races: Percentage with 14 or more activity limitation days

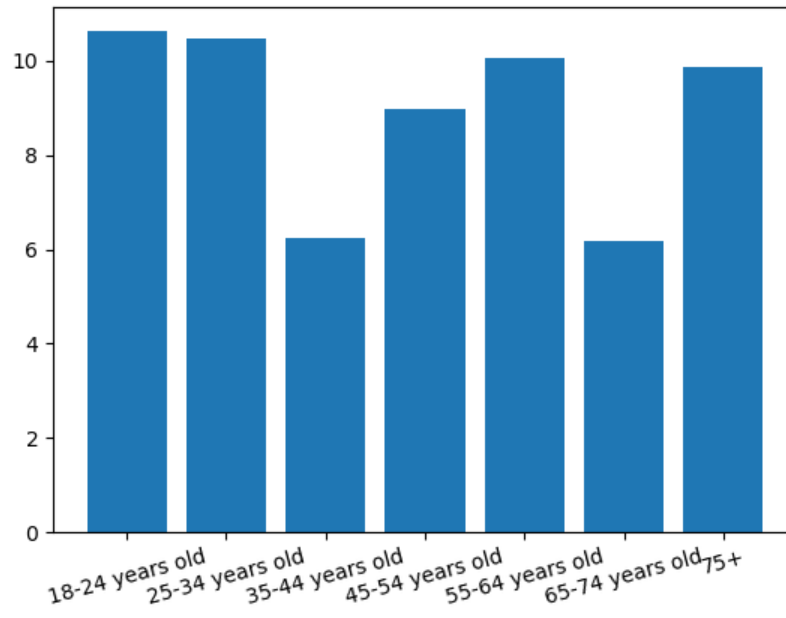


Distribution of Sexes: Percentage with 14 or more activity limitation days

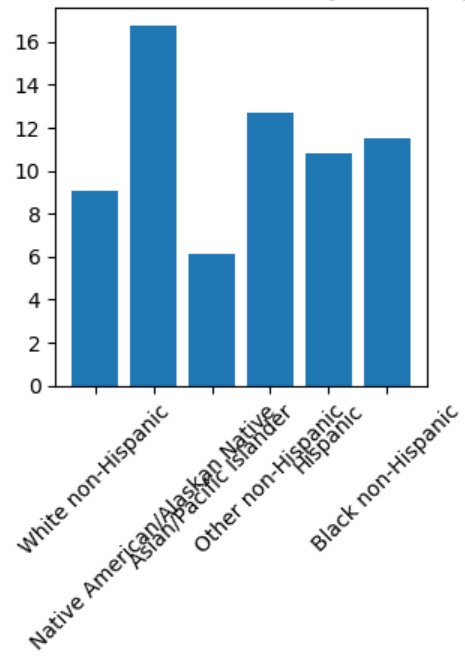


Percentage with 14 or more mentally unhealthy days (Frequent Mental Distress)

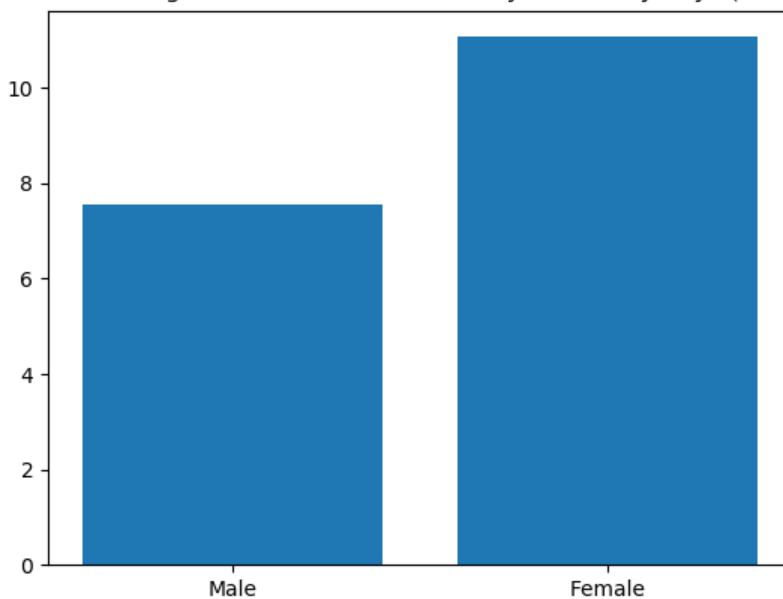
of Ages: Percentage with 14 or more mentally unhealthy days (Frequent Me



of Races: Percentage with 14 or more mentally unhealthy days (Frequent Me

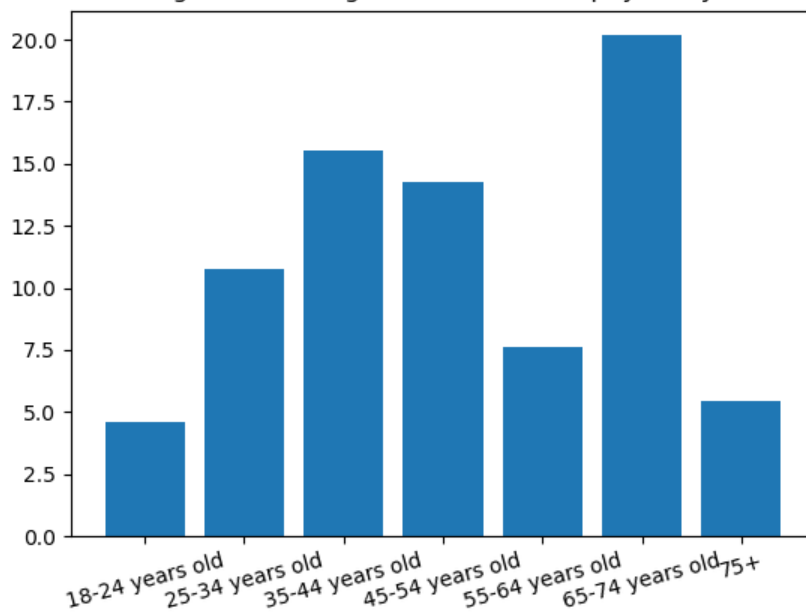


of Sexes: Percentage with 14 or more mentally unhealthy days (Frequent Me

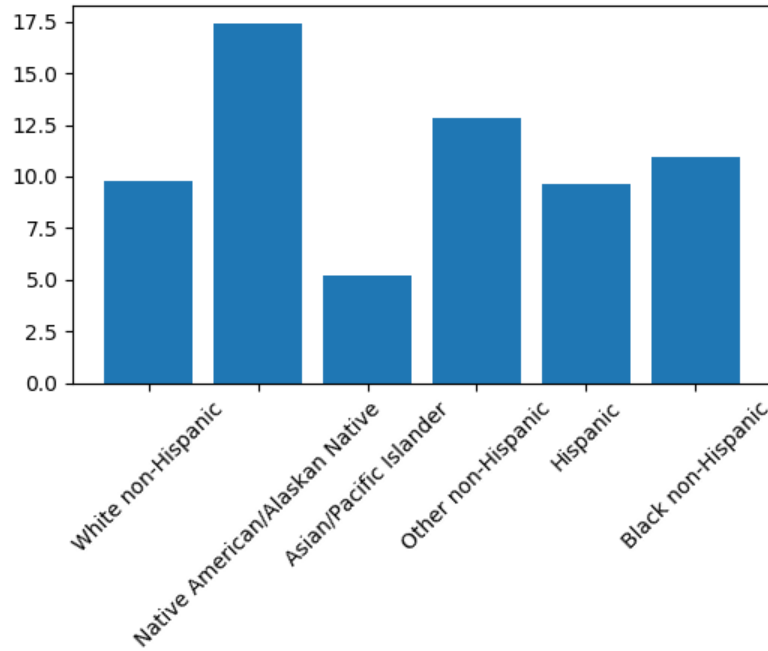


Percentage with 14 or more physically unhealthy days

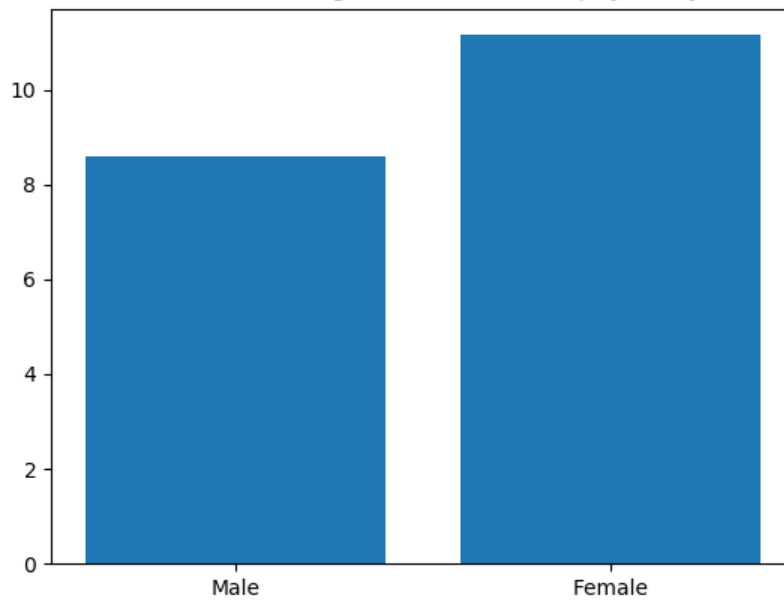
Distribution of Ages: Percentage with 14 or more physically unhealthy days



Distribution of Races: Percentage with 14 or more physically unhealthy days

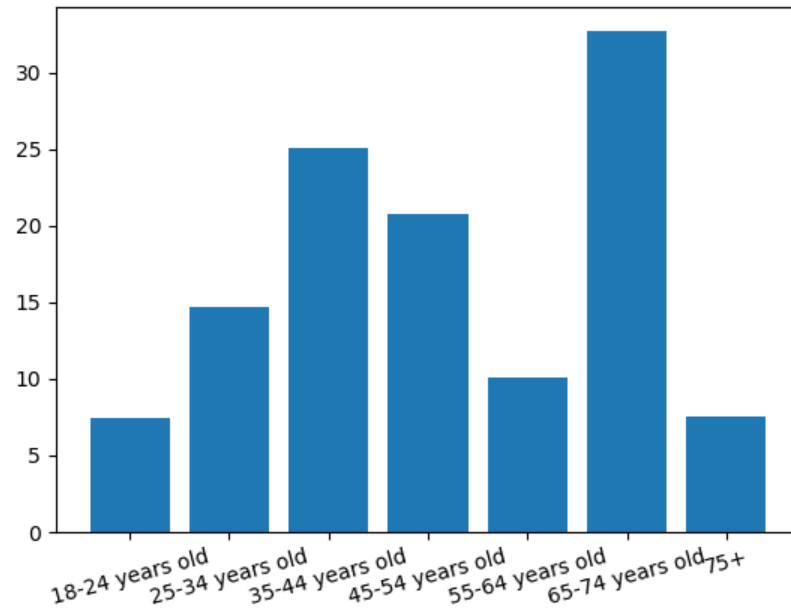


Distribution of Sexes: Percentage with 14 or more physically unhealthy day

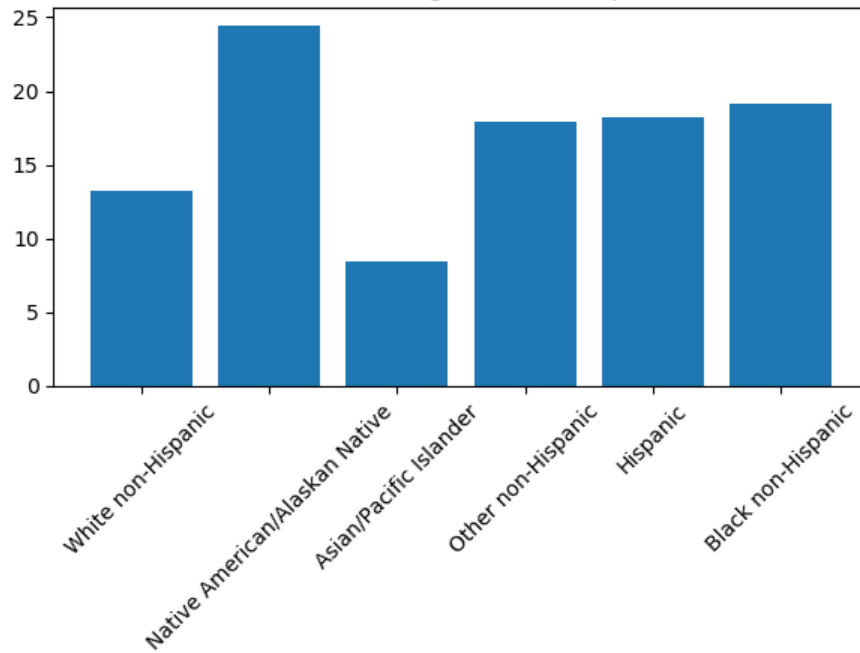


Percentage with fair or poor self-rated health

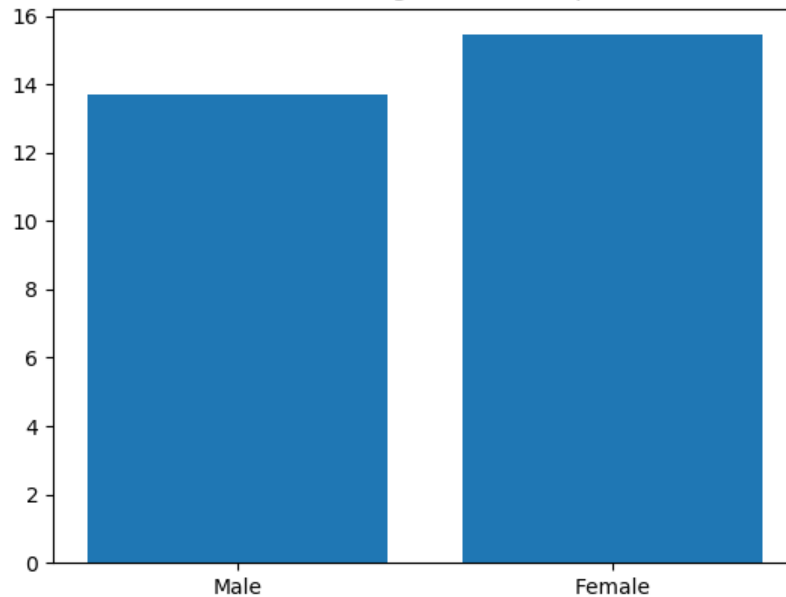
Distribution of Ages: Percentage with fair or poor self-rated health



Distribution of Races: Percentage with fair or poor self-rated health



Distribution of Sexes: Percentage with fair or poor self-rated health



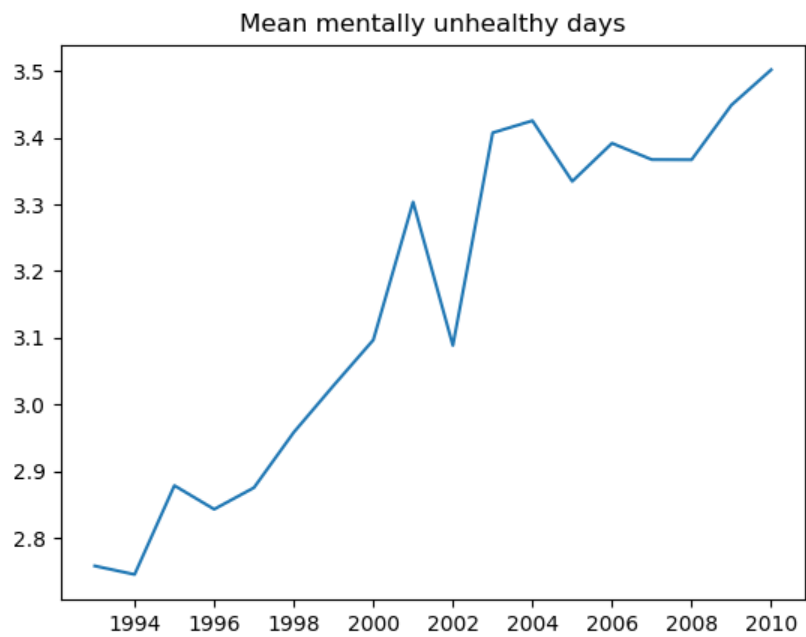
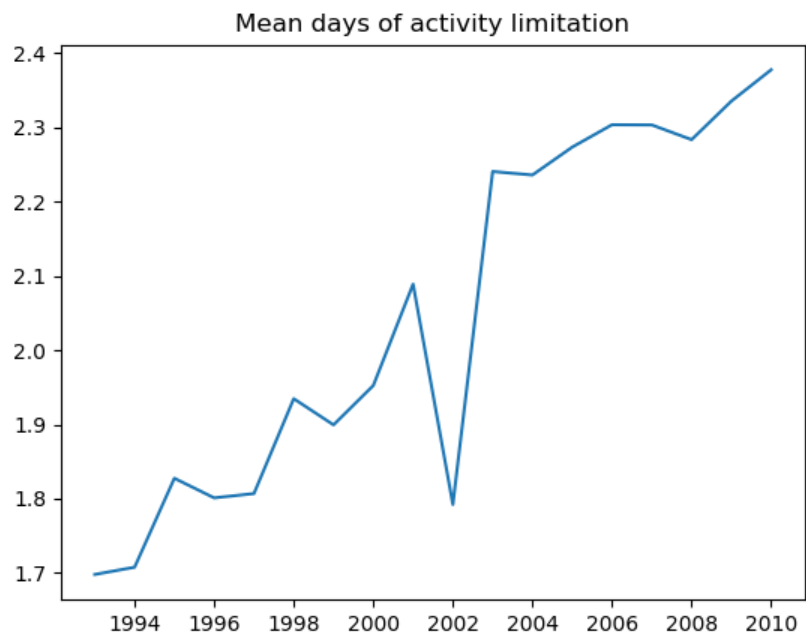
Insights from Part 1:

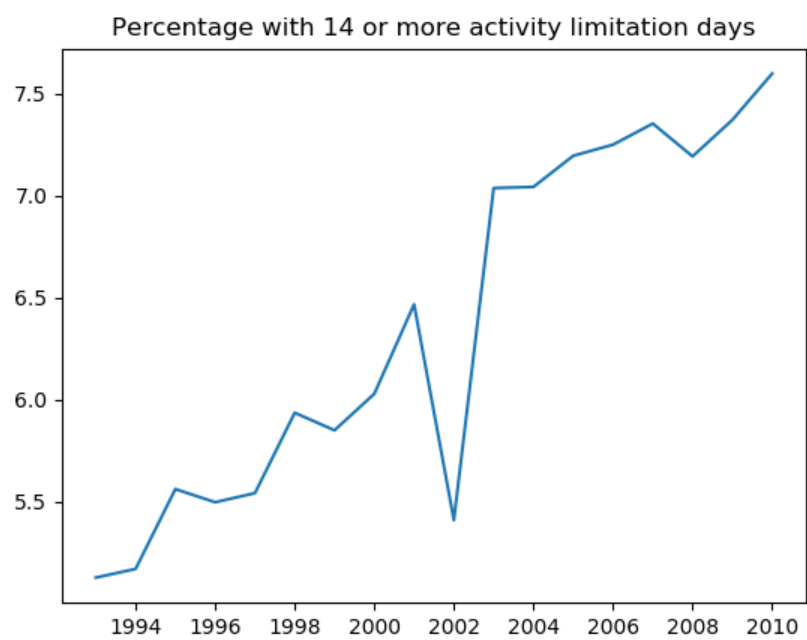
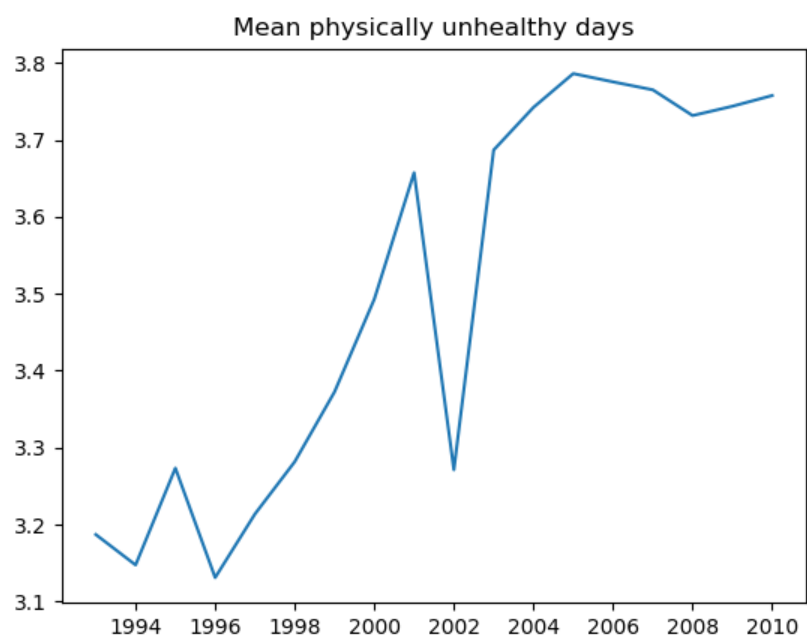
1-Highest physical health issues not among 75+, but 65-74 year old crowd. And even then, not by much. Mental health issues, unsurprisingly, dominated by the 18-24 crowd, but again, not by the percentage you would expect. Perhaps age isn't as big a factor as I thought

2-Native American/Alaskan Native doing worse by a lot in every category. Asian/Pacific Islander doing best. All other races sort of the same.

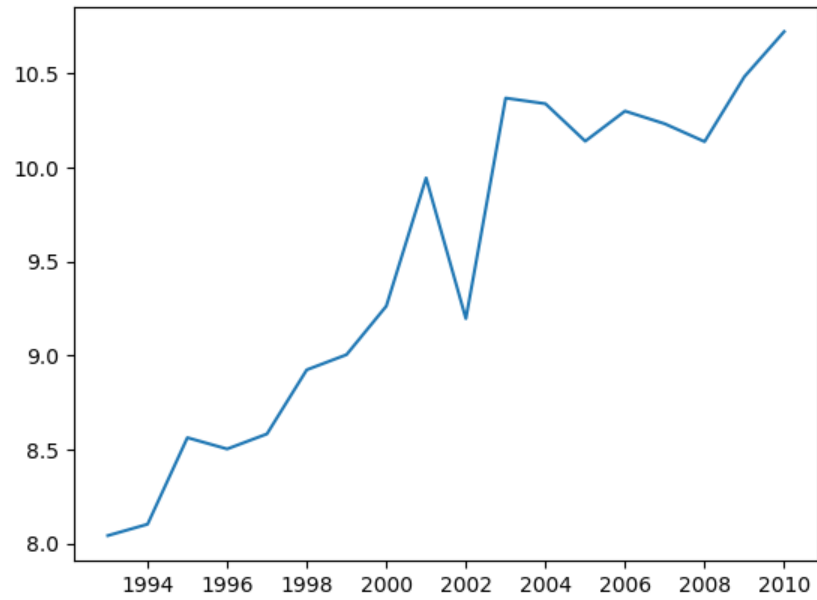
3-Females always a percent or two above males in terms of lack of health. Not a large of distinction to be statistically significant, given the imprecise data.

Analysis Part 3: Health Changes Over Time

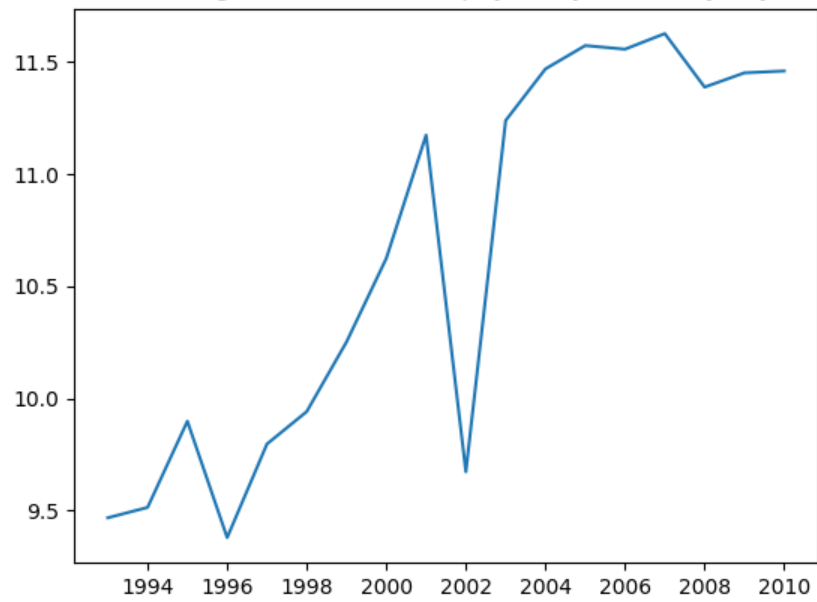


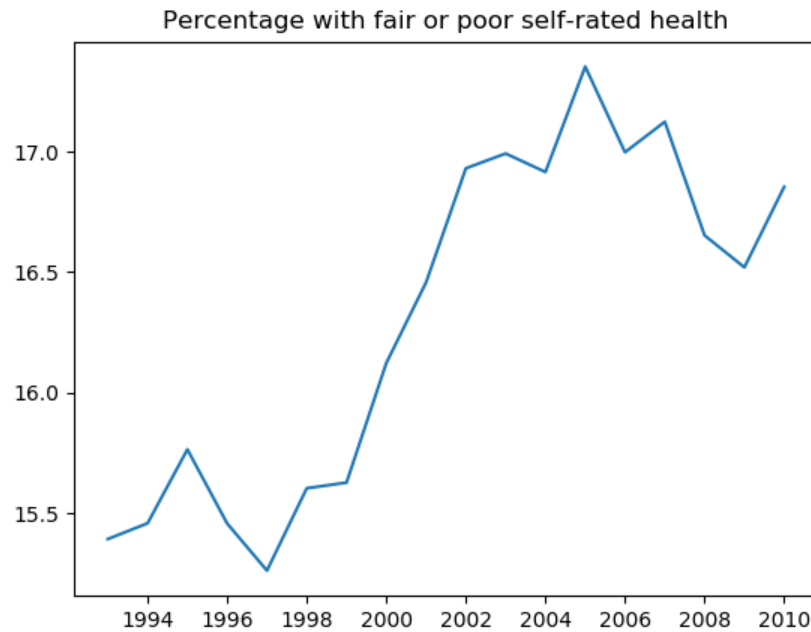


percentage with 14 or more mentally unhealthy days (Frequent Mental Distre



Percentage with 14 or more physically unhealthy days





Insights from Part 3:

While all numbers have gone up (unsurprising, as medicine evolves), poor self-reported health seems to have risen much more, particularly around the year 2000. We can likely attribute this, at least in part, to the rise of internet self-diagnosis, from websites such as WebMD, and likely means good things for our market. If people trust the internet to diagnose them, certainly they'll trust AI.

There's a weird dip in 2002 that I can't account for. 2002 was a bad year for health.