Health Inequality and Economic Disparities by Race, Ethnicity, and Gender

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Presented by Jake Harmon

Introduction: Objective

 How unequally distributed is health by race, ethnicity, and gender?

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- How unequally distributed is health by race, ethnicity, and gender?
- How can these disparities explain differences in key economic outcomes such as:
 - Disability
 - · Length of working life
 - · Nursing home entry
 - · Duration of life spent in poor health
 - · Lifespan

Data

Health and Retirement Study (HRS)

- Longitudinal survey of a representative sample of Americans over age 50
- · Participants interviewed every 2 years
- Participants provide data on health care, housing, assets, pensions, employment and disability

Data

RAND HRS Longitudinal File combines individual survey data into single 1992-2018 dataset

- · Data used is 1996-2018 (key variables not tracked until 1996)
- Looking only at participants under age 100 who identify as non-Hispanic White, non-Hispanic Black, or Hispanic
- · Sample consists of 216,166 individual-year observations

Methodology

- Construct measure of frailty (fraction of one's possible health deficits)
- 2. Correct for under-reporting of medical diagnoses for Black and Hispanic individuals
- 3. Estimate differences in key economic outcomes

Methodology I: Frailty

Table 1: Health deficits

| Deficit | Deficit |
|---|--|
| ADLs | Difficulty lifting a weight heavier than 10 lbs |
| Difficulty bathing | Difficulty lifting arms over the shoulders |
| Difficulty dressing | Difficulty picking up a dime |
| Difficulty eating | Difficulty pulling/pushing large objects |
| Difficulty getting in/out of bed | Difficulty sitting for two hours |
| Difficulty using the toilet | |
| Difficulty walking across a room | Diagnoses |
| Difficulty walking one block | Diagnosed with high blood pressure |
| Difficulty walking several blocks | Diagnosed with diabetes |
| | Diagnosed with cancer |
| IADLs | Diagnosed with lung disease |
| Difficulty grocery shopping | Diagnosed with a heart condition |
| Difficulty making phone calls | Diagnosed with a stroke |
| Difficulty managing money | Diagnosed with psychological or psychiatric problems |
| Difficulty preparing a hot meal | Diagnosed with arthritis |
| Difficulty taking medication | |
| Difficulty using a map | Healthcare Utilization |
| | Has stayed in the hospital in the previous two years |
| Other Functional Limitations | Has stayed in a nursing home in the previous two years |
| Difficulty climbing one flight of stairs | |
| Difficulty climbing several flights of stairs | Addictive Diseases |
| Difficulty getting up from a chair | Has BMI larger than 30 |
| Difficulty kneeling or crouching | Has ever smoked cigarettes |

Notes: Each deficit takes a value of 0 (if the respondent reports not having it) or 1 (if the respondent reports having it).

Methodology II: Correct for Under-Reporting

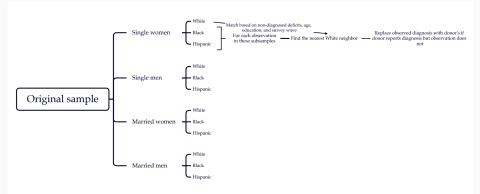
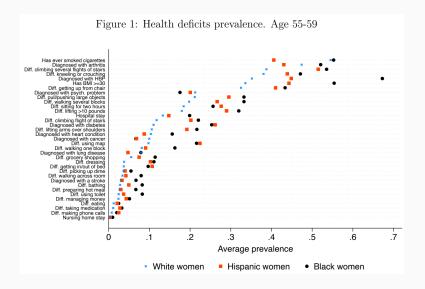


Figure A-1: Summary of our imputation procedure.



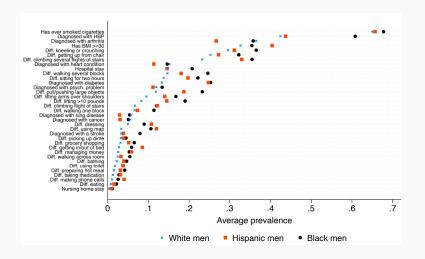


Figure 2: Differences in health deficits prevalence. Age 55-59. Positive values indicate a deficit is more common among White individuals, while negative values show higher prevalence among non-White individuals.

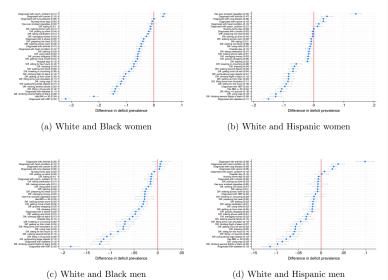
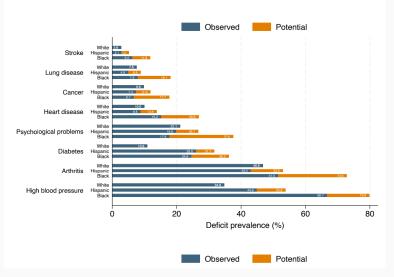


Figure 3: Potential health deficits prevalence. Age 55-59



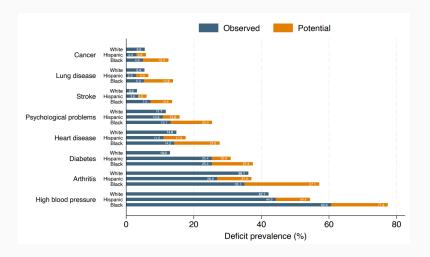


Table 2: Pseudo- \mathbb{R}^2 table

| | | | Women | | | Men | |
|---------------------------------|------------------|-------|-----------|----------|-----------|------------|-------|
| | | White | Hispanic | Black | White | Hispanic | Black |
| | Basic Controls | 0.048 | 0.046 | 0.036 | 0.045 | 0.022 | 0.032 |
| | SRHS | 0.212 | 0.122 | 0.129 | 0.186 | 0.112 | 0.122 |
| SDI Recipient Next Wave | Frailty | 0.244 | 0.193 | 0.185 | 0.245 | 0.222 | 0.175 |
| | Frailty and SRHS | 0.268 | 0.202 | 0.199 | 0.264 | 0.241 | 0.196 |
| | Basic Controls | 0.118 | 0.081 | 0.083 | 0.134 | 0.101 | 0.120 |
| | SRHS | 0.128 | 0.110 | 0.102 | 0.140 | 0.128 | 0.126 |
| SS Benefits Recipient Next Wave | Frailty | 0.126 | 0.091 | 0.097 | 0.142 | 0.112 | 0.139 |
| | Frailty and SRHS | 0.132 | 0.123 | 0.114 | 0.147 | 0.145 | 0.145 |
| | Basic Controls | 0.241 | 0.172 | 0.169 | 0.220 | 0.144 | 0.122 |
| | SRHS | 0.285 | 0.209 | 0.206 | 0.266 | 0.194 | 0.176 |
| NH Entry Next Wave | Frailty | 0.315 | 0.231 | 0.214 | 0.303 | 0.272 | 0.234 |
| | Frailty and SRHS | 0.319 | 0.250 | 0.227 | 0.308 | 0.291 | 0.244 |
| | Basic Controls | 0.166 | 0.157 | 0.120 | 0.140 | 0.157 | 0.109 |
| | SRHS | 0.240 | 0.194 | 0.169 | 0.219 | 0.212 | 0.151 |
| Death Next Wave | Frailty | 0.266 | 0.221 | 0.189 | 0.237 | 0.244 | 0.176 |
| | Frailty and SRHS | 0.276 | 0.230 | 0.201 | 0.251 | 0.253 | 0.182 |
| | | | Percentag | e change | from basi | c controls | |
| | SRHS | 341% | 166% | 260% | 318% | 412% | 283% |
| SDI Recipient Next Wave | Frailty | 407% | 320% | 416% | 450% | 916% | 449% |
| | Frailty and SRHS | 458% | 341% | 454% | 492% | 1,005% | 514% |
| | | | Percentag | e change | from basi | c controls | |
| | SRHS | 9% | 37% | 23% | 5% | 27% | 5% |
| SS Benefits Recipient Next Wave | Frailty | 7% | 13% | 17% | 6% | 11% | 16% |
| | Frailty and SRHS | 12% | 53% | 38% | 10% | 43% | 21% |
| | | | Percentag | e change | from basi | c controls | |
| | SRHS | 18% | 21% | 22% | 21% | 35% | 44% |
| NH Entry Next Wave | Frailty | 31% | 34% | 27% | 38% | 89% | 92% |
| | Frailty and SRHS | 32% | 45% | 34% | 40% | 102% | 102% |
| | | | Percentag | e change | from basi | c controls | |
| | SRHS | 45% | 24% | 41% | 57% | 35% | 39% |
| Death Next Wave | Frailty | 60% | 41% | 57% | 69% | 55% | 62% |
| | Frailty and SRHS | 66% | 47% | 67% | 79% | 61% | 61% |
| | | | | | | | |

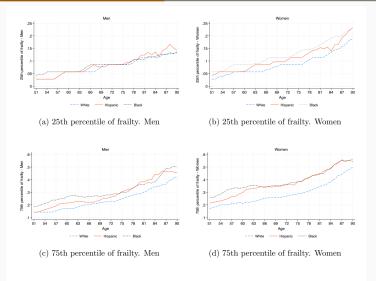


Figure 5: 25th (first row) and 75th (second row) frailty percentile by age. Men (left column) and women (right column). Each statistic is smoothed using a three-year moving average.

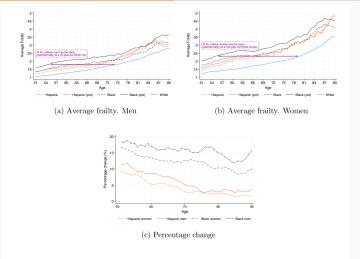


Figure 6: Comparison between observed and potential frailty for men (Panel (a)) and women (Panel (b)) and within-race percentage change between observed and potential frailty (Panel (c)). The averages in Panels (a) and (b) are smoothed using a three-year moving average. The percentage change in Panel (c) is computed using the smooth averages from Panels (a) and (b).

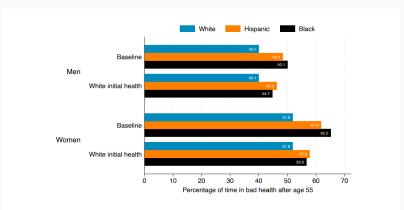


Figure 8: Average fraction of remaining life spent in bad health starting from age 55. This is computed as the fraction of remaining life spent in one of the two lowest health states ("poor" and "fair" health, or frailty quintiles), conditional on remaining alive

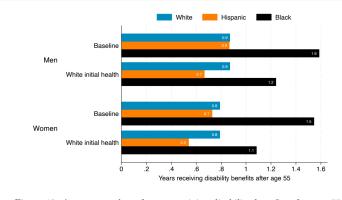
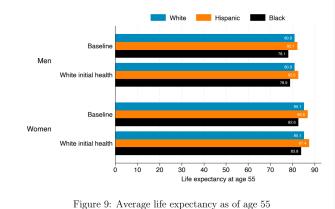


Figure 10: Average number of years receiving disability benefits after age 55



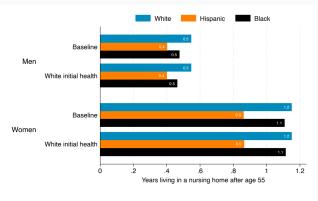


Figure 13: Average number of years in a nursing home after age 55

- 1. Evidence of substantial health inequality
- 2. White men and women also have much lower frailty (i.e., better health), on average, than Hispanic and Black ones

Limitations: Nursing Home

"Factors like informal care from extended family may have a greater impact. For instance, Almeida, Molnar, Kawachi, and Subramanian (2009) shows that Hispanic Americans have large family networks and high levels of social support, which may explain why they spend less time in nursing homes than their White and Black counterparts."

Extension: Objective

- 1. Incorporate additional measures of family structure
- 2. Incorporate additional measures of income and assets
- 3. Improve existing predictions of nursing home entry with additional measures
- 4. Logistic regression v. machine learning

Extension: Model

$$Pr(nursinghome_{i,t+1} = 1) = NH(h_{it}, X_{i,t})$$

Where

- h is estimated health transition probabilities
- X is the set of basic controls, self reported health status, and frailty

Extension: Model

$$Pr(nursinghome_{i,t+1} = 1) = NH(h_{it}, X_{i,t}, \frac{Z_{i,t}}{Z_{i,t}})$$

Where

- · h is estimated health transition probabilities
- X is the set of basic controls, self reported health status, and frailty
- Z is the set of variables measuring family structure and income and assets

Extension: Data

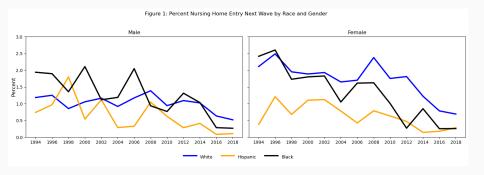
| | Table 1: Su | mmary Statis | stics | | | |
|--------------------------------------|-------------|--------------|----------|----------|-------|----------|
| | White | | Hispanic | | Black | |
| | Mean | Std. Dev | Mean | Std. Dev | Mean | Std. Dev |
| Family Structure | | | | | | |
| Number of Living Children | 2.996 | 1.923 | 3.820 | 2.411 | 3.663 | 2.509 |
| Number of Living Siblings | 2.421 | 2.083 | 4.551 | 3.068 | 3.859 | 2.939 |
| Income and Assets | | | | | | |
| Total Non-Housing Wealth (thousands) | 343.9 | 1076 | 69.64 | 436.7 | 57.71 | 316.4 |
| Total Household Income (thousands) | 70.20 | 196.7 | 38.59 | 132.1 | 40.95 | 55.96 |
| Poverty Status (binary) | 5.8% | | 26.8% | | 22.5% | |
| Parents | | | | | | |
| Mother's Age (or age at death) | 76.50 | 13.95 | 73.84 | 15.70 | 71.77 | 15.89 |
| Father's Age (or age at death) | 71.93 | 14.01 | 72.50 | 15.16 | 69.93 | 14.99 |
| Mother's Education (years) | 10.20 | 3.10 | 5.57 | 4.35 | 9.15 | 3.48 |
| Father's Education (years) | 9.92 | 3.51 | 5.86 | 4.59 | 8.38 | 3.69 |
| Other | | | | | | |
| Veteran Status (binary) | 23.1% | | 8.8% | | 14.6% | |
| Residing in Urban area (binary) | 44.9% | | 56.9% | | 62.4% | |
| Residing in Rural area (binary) | 32.2% | | 13.1% | | 16.9% | |

Note: summary statistics computed across male and female respondents and across waves 2 through 14.

Extension: Methodology

- Exclude individuals that lived in nursing home last wave or before
- · Oversampling the minority group of nursing home entrants

Extension: Methodology



Extension: Results

| | Table 2: Pseudo | R-squared | | | | |
|-------------------------------------|-----------------|-----------|--------------|-------------|----------|-------|
| | | | Men | | | |
| | White | Hispanic | Black | White | Hispanic | Black |
| Basic Controls | 0.241 | 0.172 | 0.169 | 0.220 | 0.144 | 0.122 |
| SHRS | 0.285 | 0.209 | 0.206 | 0.266 | 0.194 | 0.176 |
| Frailty | 0.315 | 0.231 | 0.214 | 0.303 | 0.272 | 0.234 |
| Frailty and SHRS | 0.319 | 0.250 | 0.227 | 0.308 | 0.291 | 0.244 |
| and Household Characteristics (HC)* | 0.319 | 0.259 | 0.242 | 0.310 | 0.334 | 0.253 |
| and Income and Assets (I&A)* | 0.320 | 0.246 | 0.239 | 0.311 | 0.309 | 0.256 |
| and both HC and I&A* | 0.323 | 0.262 | 0.251 | 0.313 | 0.335 | 0.264 |
| | | Percent | t Change fro | om Basic Co | ontrols | |
| SHRS | 18% | 21% | 22% | 21% | 35% | 44% |
| Frailty | 31% | 34% | 27% | 38% | 89% | 92% |
| Frailty and SHRS | 32% | 45% | 34% | 40% | 102% | 102% |
| and Household Characteristics (HC) | 32% | 50% | 43% | 41% | 132% | 108% |
| and Income and Assets (I&A) | 33% | 43% | 41% | 41% | 114% | 110% |
| and both HC and I&A | 34% | 52% | 48% | 42% | 133% | 117% |

^{*}Average Pseudo R-squared across 4 folds of 75%/25% stratified K-Fold cross validation training/test sets

Extension: Machine Learning

- L1/L2 Regularization (Elastic Net)
- · Random Forest
- Gradient Boosting

| Table 3: Model | Comparisons | (Pseudo R-s | quared) | | | | | |
|---|-------------|-------------|---------|--------|----------|--------|--|--|
| | | Women | | | Men | | | |
| | White | Hispanic | Black | White | Hispanic | Black | | |
| Logistic Regression | 0.323 | 0.262 | 0.251 | 0.313 | 0.335 | 0.264 | | |
| Logistic Regression with $\rm L1/L2$ Regularization | 0.323 | 0.258 | 0.251 | 0.314 | 0.329 | 0.265 | | |
| Random Forest | 0.490 | 0.532 | 0.469 | 0.491 | 0.624 | 0.511 | | |
| XGBoost | 0.616 | 0.8919 | 0.739 | 0.6393 | 0.9129 | 0.8274 | | |

 $Note: Average\ Pseudo\ R-squared\ across\ 4\ folds\ of\ 75\%/25\%\ stratified\ K-Fold\ cross\ validation\ training/test\ sets$

| Table 3: Model Comparisons (Pseudo R-squared) | | | | | | | | |
|---|-------|----------|-------|--------|----------|--------|--|--|
| | | Women | | | Men | | | |
| | White | Hispanic | Black | White | Hispanic | Black | | |
| Logistic Regression | 0.323 | 0.262 | 0.251 | 0.313 | 0.335 | 0.264 | | |
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Note: Average Pseudo R-squared across 4 folds of 75%/25% stratified K-Fold cross validation training/test sets

"McFadden (1977) argues that values between 0.2 and 0.4 denote an "excellent fit" of the full model."

$$F_1$$
 score = $2 \cdot \frac{\text{Precision} \cdot \text{Recall}}{\text{Precision} + \text{Recall}}$

Where:

$$\begin{aligned} \text{Precision} &= \frac{\text{True Positives}}{\text{True Positives} + \text{False Positives}} \\ \text{Recall} &= \frac{\text{True Positives}}{\text{True Positives} + \text{False Negatives}} \end{aligned}$$

Table 4: Model Comparisons (F1 Score)

| | Women | | | | Men | | | |
|---------------------|---|----------|--------|--------|----------|--------|--|--|
| | White | Hispanic | Black | White | Hispanic | Black | | |
| Logistic Regression | 0.974 | 0.992 | 0.982 | 0.985 | 0.992 | 0.983 | | |
| Random Forest | 0.8869 | 0.9327 | 0.9107 | 0.892 | 0.9553 | 0.9321 | | |
| XGBoost | 0.9104 | 0.9728 | 0.9422 | 0.9195 | 0.9818 | 0.9645 | | |
| | Percent Change from Logistic Regression | | | | | | | |
| Random Forest | -9.0% | -5.9% | -7.2% | -9.5% | -3.7% | -5.1% | | |
| XGBoost | -6.6% | -1.9% | -4.0% | -6.7% | -1.0% | -1.8% | | |

 $Note: Average \ Pseudo \ R-squared \ across \ 4 \ folds \ of \ 75\%/25\% \ stratified \ K-Fold \ cross \ validation \ training/test \ sets$

Extension: Summary

- 1. Incorporate additional measures of family structure
- 2. Incorporate additional measures of income and assets
- 3. Improve existing predictions of nursing home entry with additional measures
- 4. Logistic regression v. machine learning