

# CAPSTONE

*Kade Higgins*

Alcohol Overuse/Abuse  
and Self-Harm Mortality



BUT FIRST

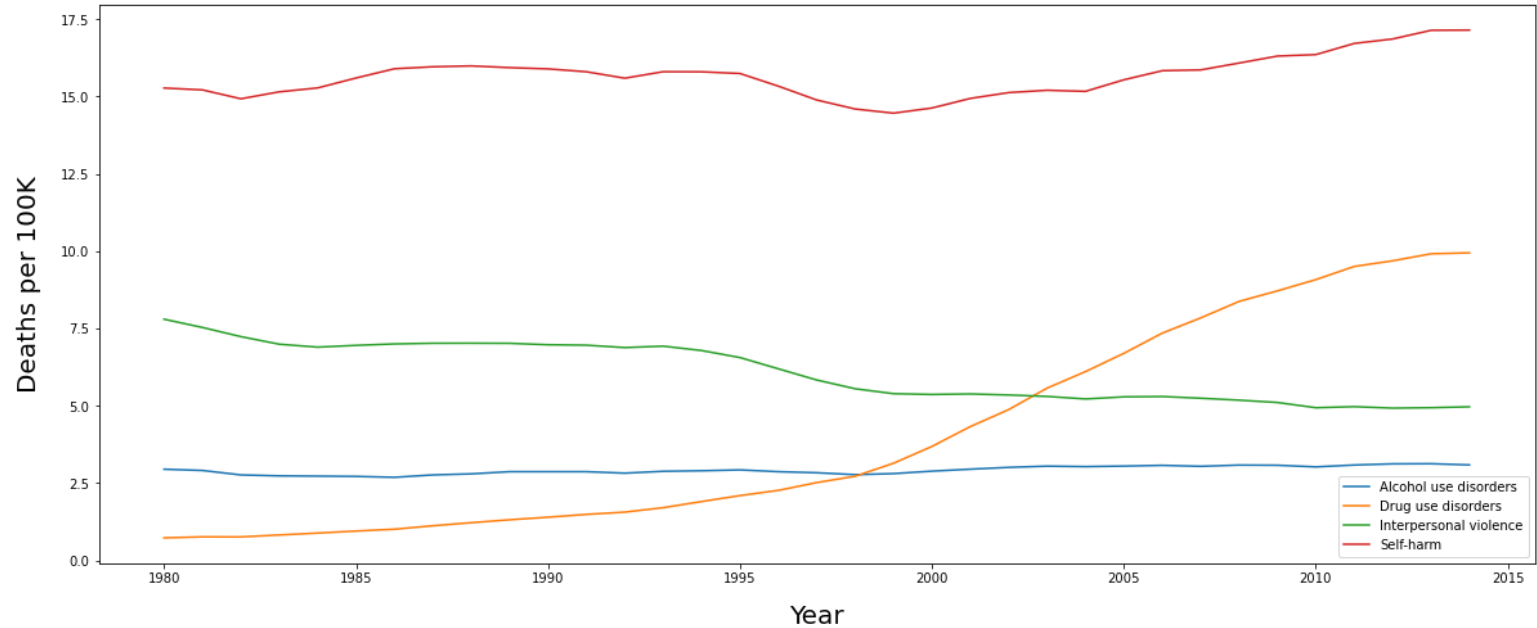
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WHY SO  
SERIOUS?

- *Self-harm / Intentional Injury Mortality rate significantly higher than other mortality categories*
- *Has surpassed the mortality rate from Diabetes*
- *Just as preventable as other mortality causes*
- *Mortality burden is not equally distributed – some communities post exponentially higher self-injury mortality rates than others*



## IMHE Mortality Rates: 1980 - 2014



EXPLORATORY DATA ANALYSIS

*THE GRAPH THAT SPARKED MY INTEREST*

# THE BURDEN OF BOOZE

- WHO - As many as 3 million deaths globally per year attributed to harmful alcohol use
- Prevalence of heavy drinking/binge drinking has increased over time
- Harmful alcohol use prevalence is also not equally distributed
- **Pro:** LOTS of funding for alcohol related mortality

# PROBLEM STATEMENT

Deaths from self harm (i.e. suicide and other intentional injuries that result in death) far outpace other mortality categories in the IMHE dataset. Knowing that substance/alcohol abuse is a factor in many diseases and mental/behavioral health disorders, I will create supervised and unsupervised model(s) to that explore the relationships between mortality rate by self-harm and other variables such as sex, year, state, unemployment and the different levels of alcohol use/abuse.

# METHODOLOGY



*Find the Data*



*Clean*



*EDA & Visualization*



*Model – Univariate  
Regression*

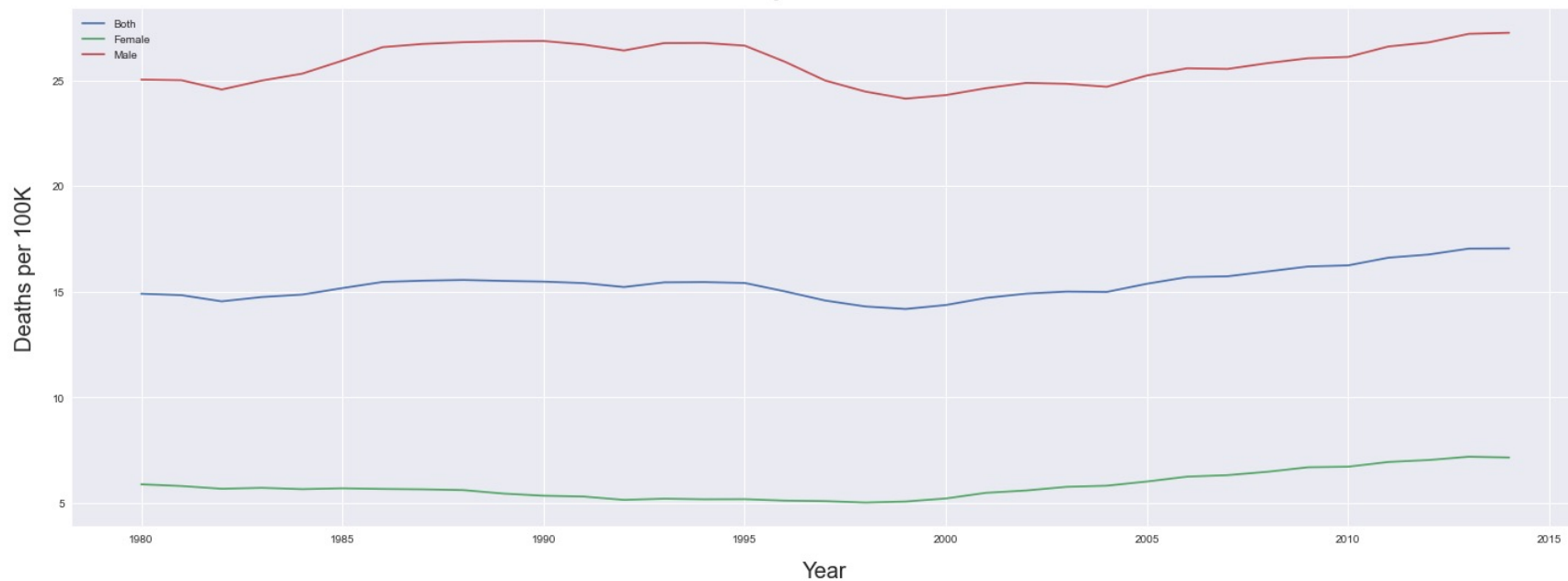


*Model – Multivariate  
Regression*



*Unsupervised  
Learning – K-Means  
Clusters*

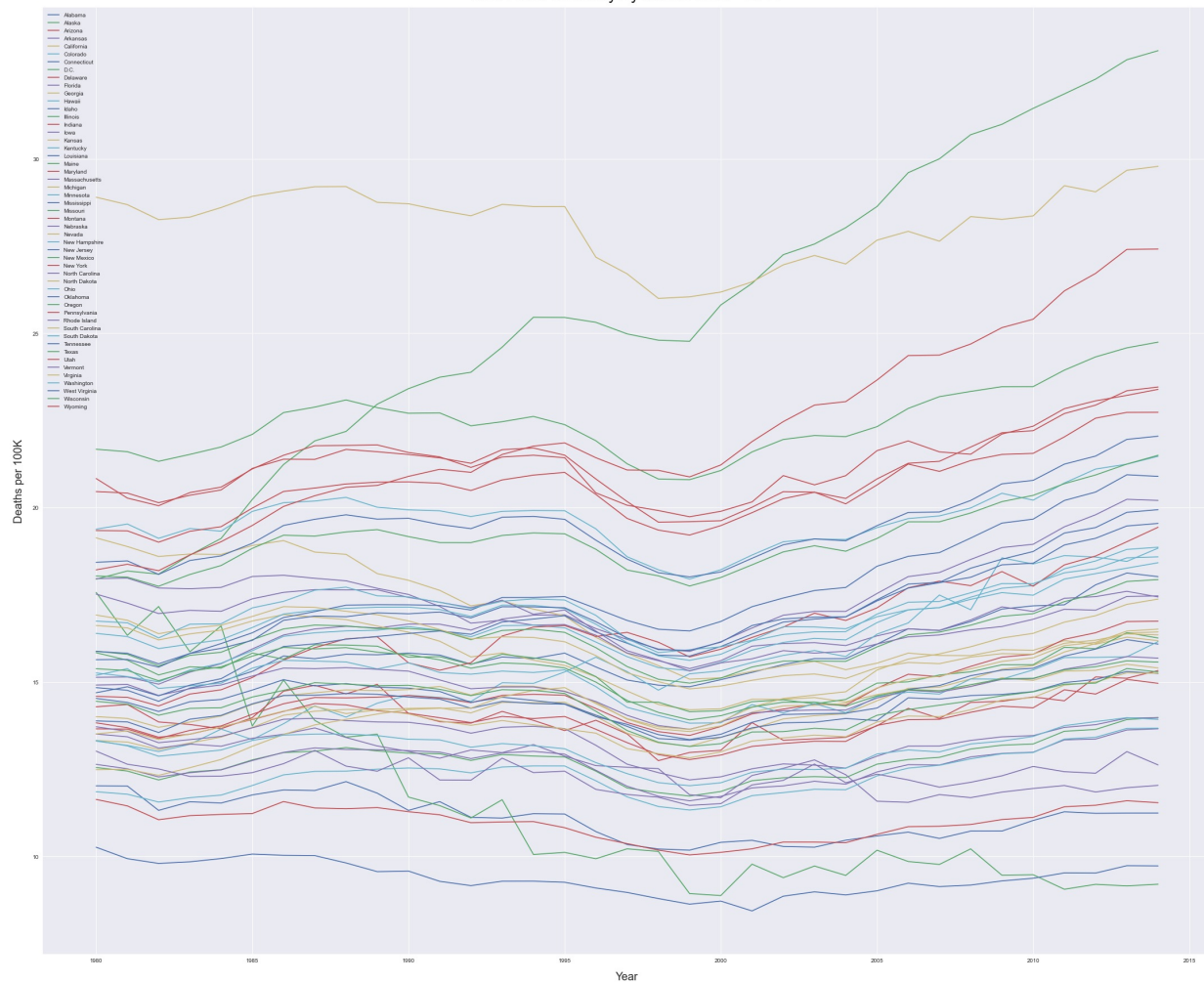
## IMHE Mortality Rates: 1980 - 2014



SELF HARM MORTALITY

YEARLY AVERAGE BY SEX

Self-Harm Mortality by State: 1980 - 2014



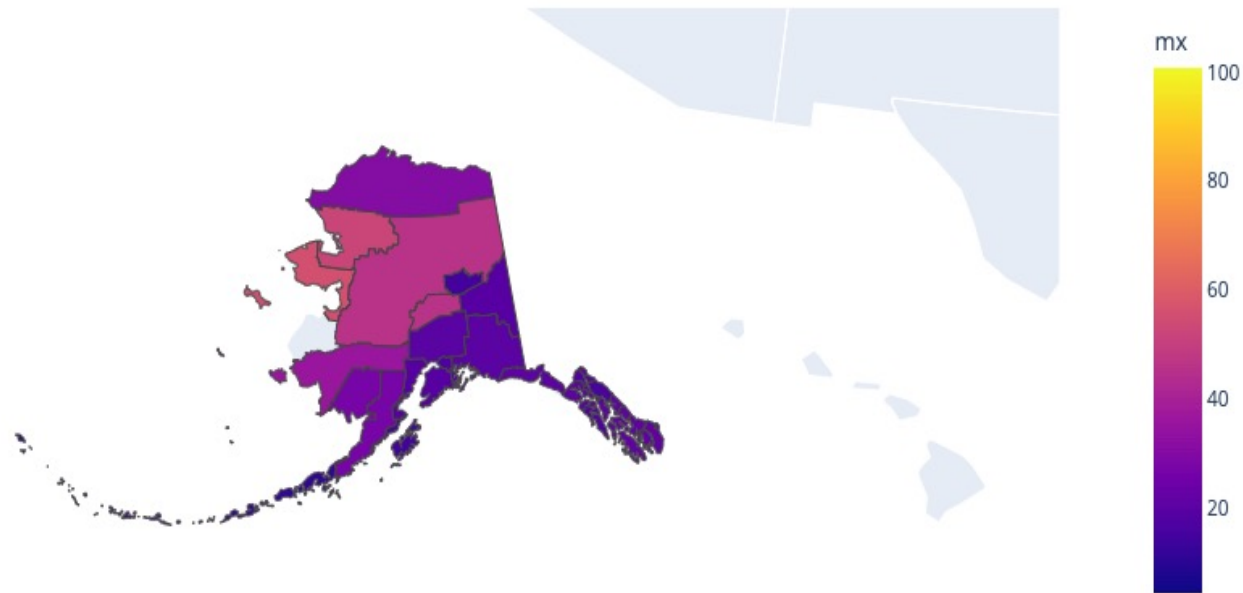
YEARLY AVERAGE SELF-HARM  
MORTALITY BY STATE



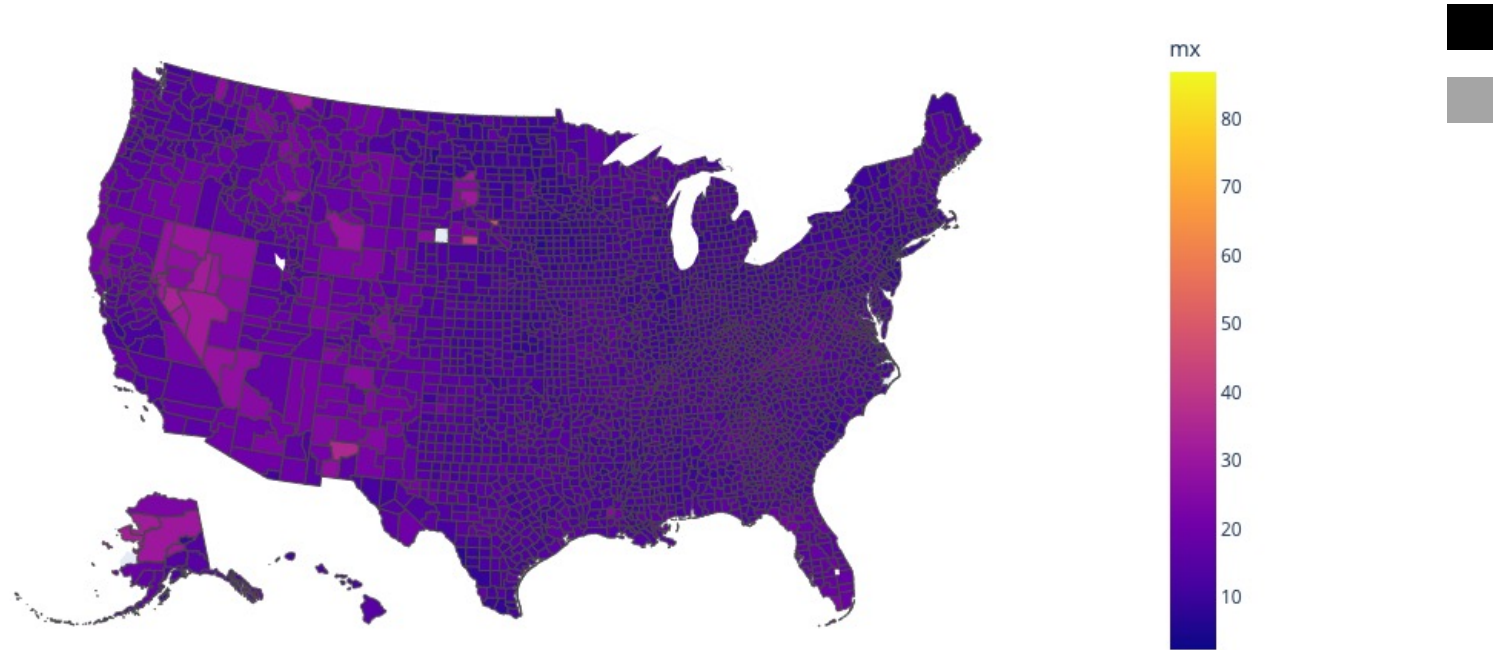
# SELF-HARM MORTALITY

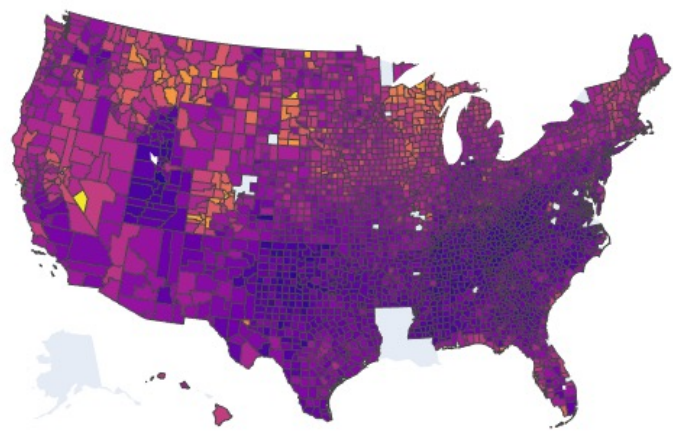
## POINTS OF INTEREST

- Average 15.66 per 100K between 1980 & 2014
- Max mortality rate **162 per 100K**
- Female avg increased 5.89 – 7.16
  - Female max increased 16.71 to 36.15
- Male avg increased 25.02 – 27.24
  - Male max increased 86.81 to 162.27
- The highest mortality rates for both men and women are in the **Kusilvak Census Area, Alaska** (county FIPS 02158)



SELF-HARM MORTALITY ALASKA, 1995





alcohol\_heavy



20

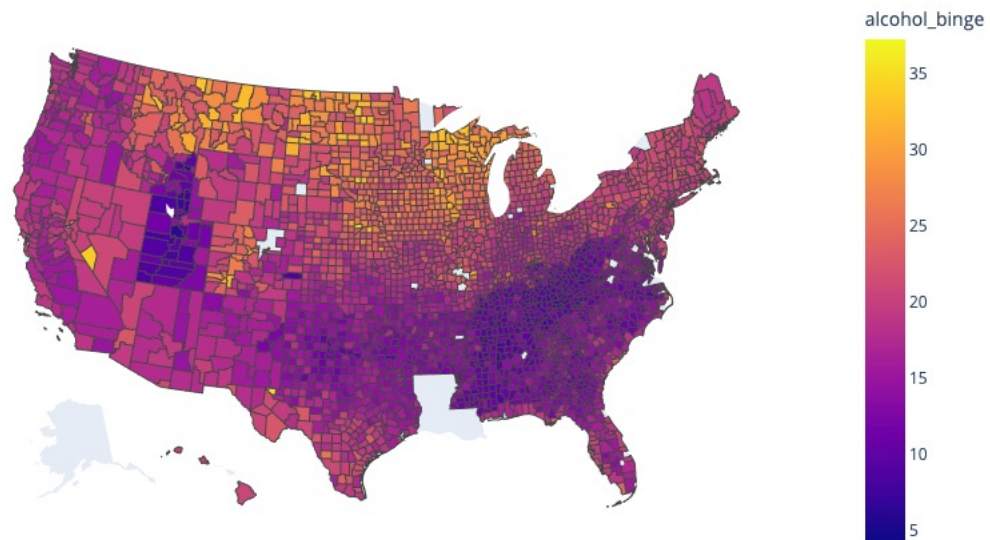
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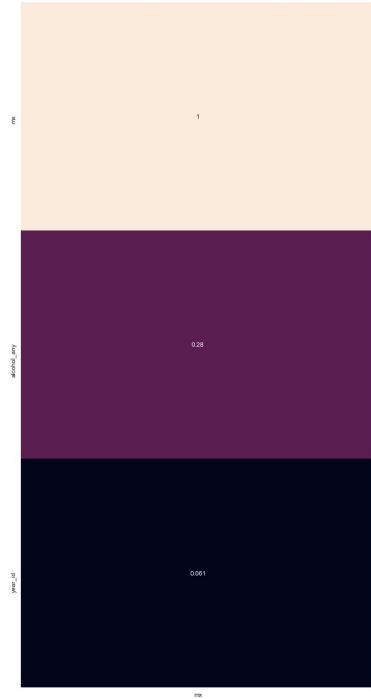
HEAVY DRINKING PREVALENCE

## Binge Alcohol Use Prevalence by County

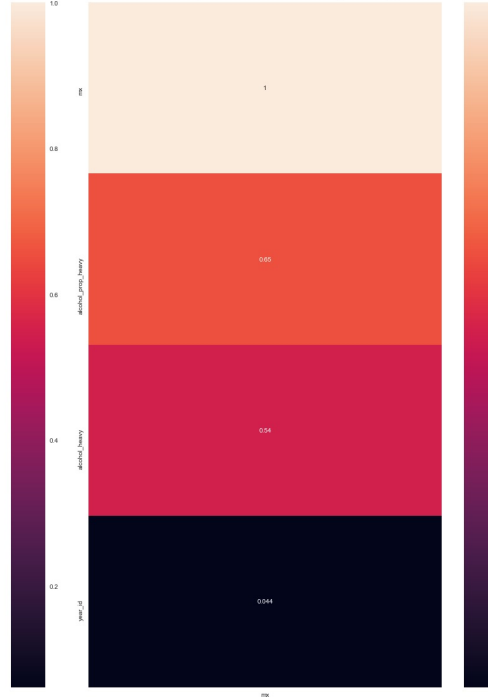


BINGE DRINKING PREVALENCE

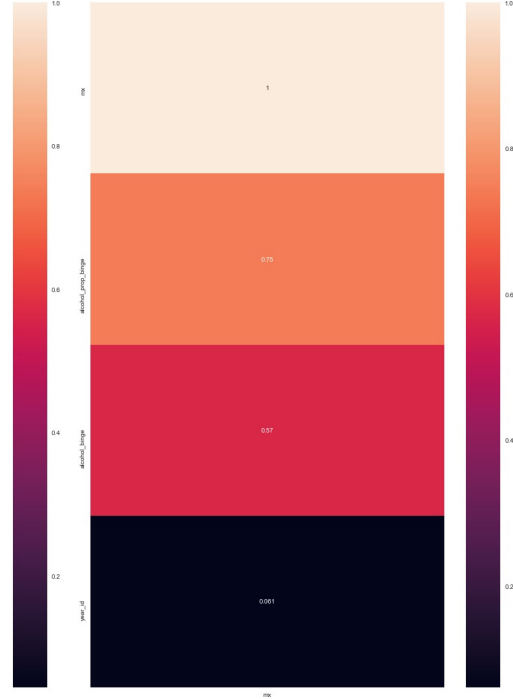
Self-harm Mortality & Alcohol Use (Any) Heatmap



Self-harm Mortality & Alcohol Use (Heavy) Heatmap



Self-harm Mortality & Alcohol Use (Binge) Heatmap



*HEATMAP*



## UNIVARIATE REGRESSION

Mortality rate vs. Proportion of Binge Drinkers had  
strongest accuracy score

- RandomForest / Gboost tied
- *Test Accuracy: **0.73 Test***
  - *RMSE: **5.67***

Including sex and state with  
proportion binge drinkers returns  
high accuracy, low RMSE

**GradientBoostRegressor** wins out,  
only barely

- If our univariate models  
represent our baseline (0.73), this  
improves
- *Test Accuracy:* **0.87**
- *RMSE:* **3.9**



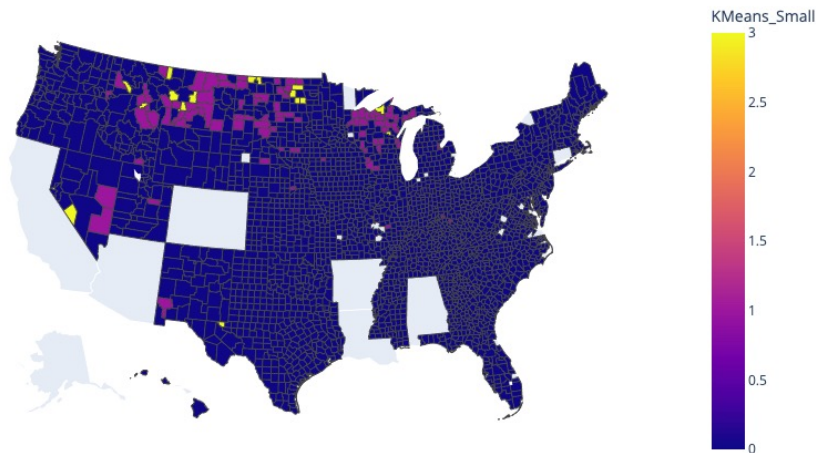
MULTIVARIATE  
REGRESSION



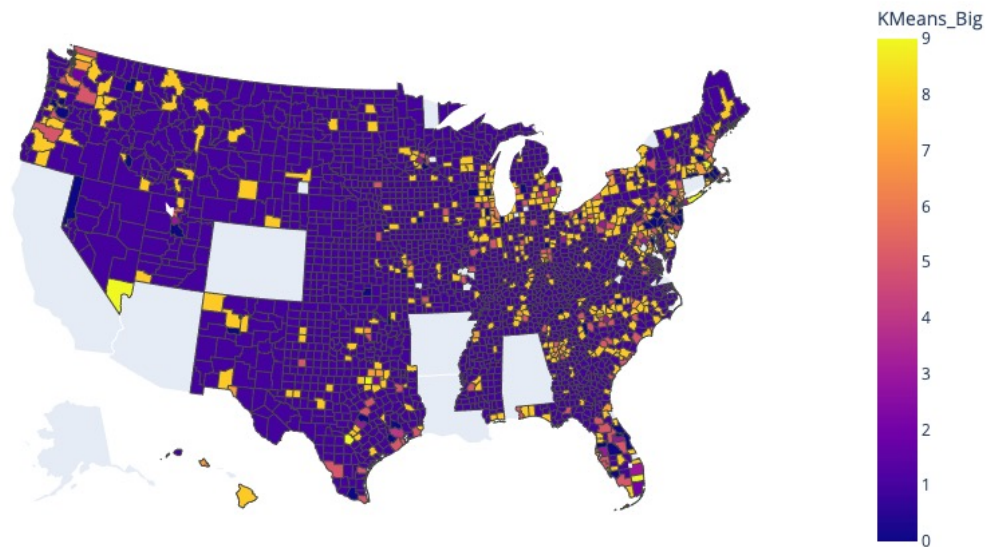
# KMEANS

- Smaller Clusters were better (4)
- Heavy / Binge clusters with mortality rate produce silhouette scores  $\sim 0.51$
- **Including Labor Force and unemployment rate** saw *SIL* score  $\sim 0.875$  @ 4 clusters,  $\sim 0.73$  @ 10 clusters
- Unfortunately not all states were present across all variables – even with missing data, it is still worthwhile to identify clusters for targeted intervention

KMeans Clusters (4) Self-harm mortality, Prevalence of Binge Drinking, Prop. Binge Drinkers

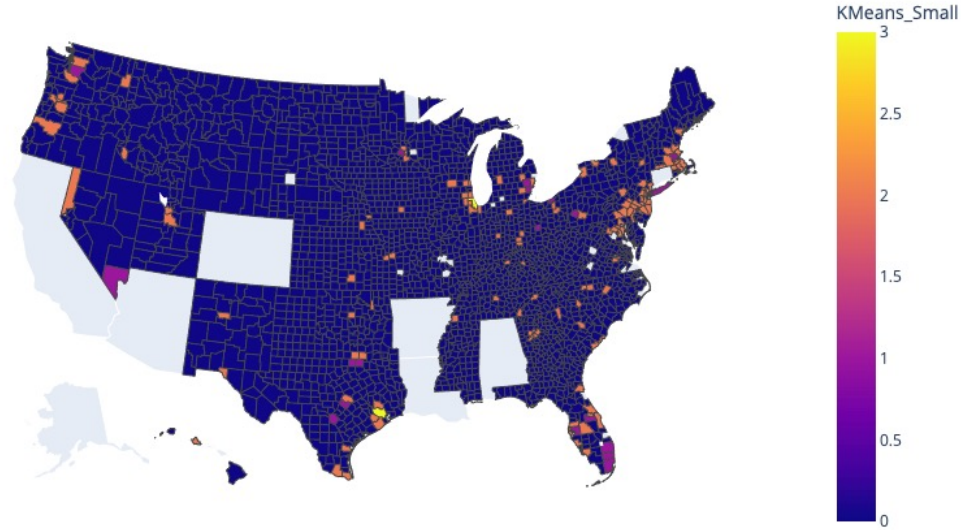


KMeans Clusters (10) Self-harm mortality, Prop. Heavy Drinkers, Labor Force & Unemployment Rate



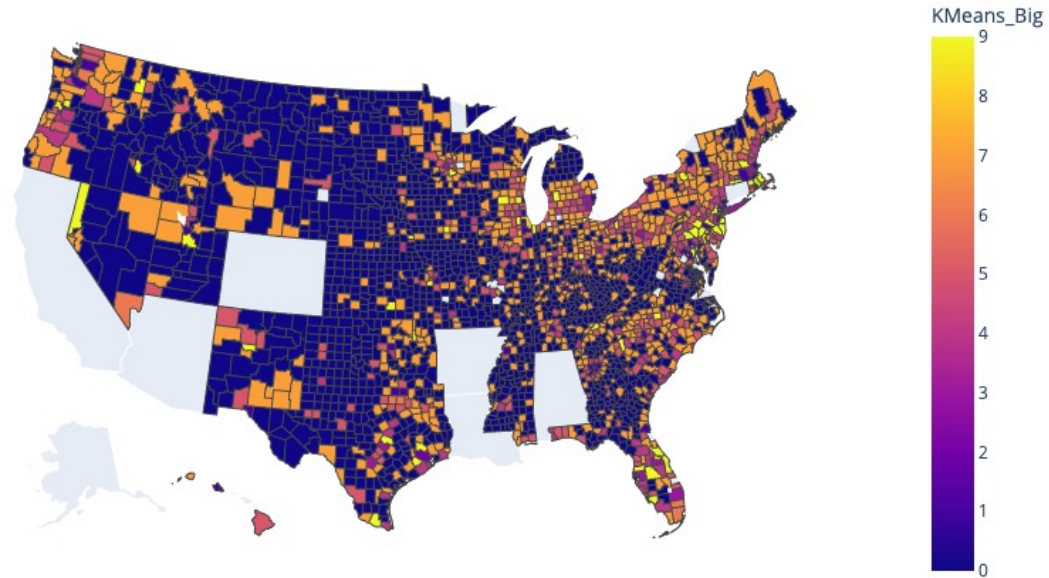
KMEANS HEAVY ALCOHOL USE & UNEMPLOYMENT

KMeans Clusters (4) Self-harm mortality, Prop. Binge Drinkers, Labor Force & Unemployment Rate



KMEANS BINGE USE &  
UNEMPLOYMENT (4 CLUSTER)

KMeans Clusters (10) Self-harm mortality, Prop. Binge Drinkers, Labor Force & Unemployment Rate



KMEANS BINGE USE &  
UNEMPLOYMENT (10 CLUSTER)

# CONCLUSIONS

- **Multivariate Regression Models Outperform Single Variable Regression**
- **K-Means Creates Meaningful Pockets of Similarly Afflicted Counties**
  - *Those interested in optimizing and more efficiently using public health research dollars can use these clusters to engage in regionally targeted intervention that addresses two mortality causes at once*
- **In the Future**
  - *Get more complete data, build out streamlit app,, examine relationships between sunlight and self-harm mortality*



# HOTLINES

***If you or someone you know is struggling***

- ***National Suicide Prevention Lifeline: 800-273-8255***
  - ***Crisis Text Line: Text "Hello" to 741741***
- ***SAMHSA National Helpline (drug / alcohol abuse):***
  - ***1-800-662-4357***

THANK YOU FOR LISTENING

I'm happy to answer any questions

*Kade Higgins*