CAPSTONE

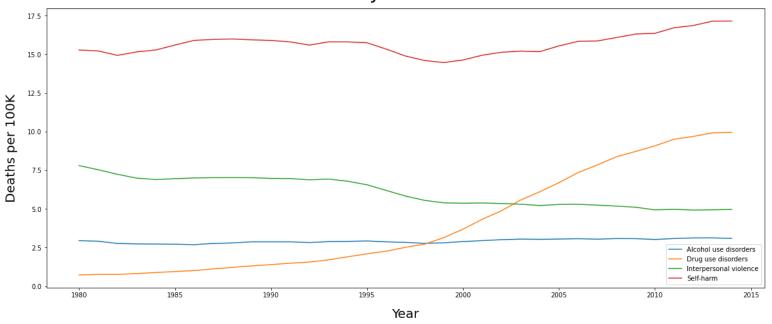
Alcohol Overuse/Abuse and Self-Harm Mortality

Kade Higgins



- 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







Clean



EDA & Visualization



Model – Univariate Regression

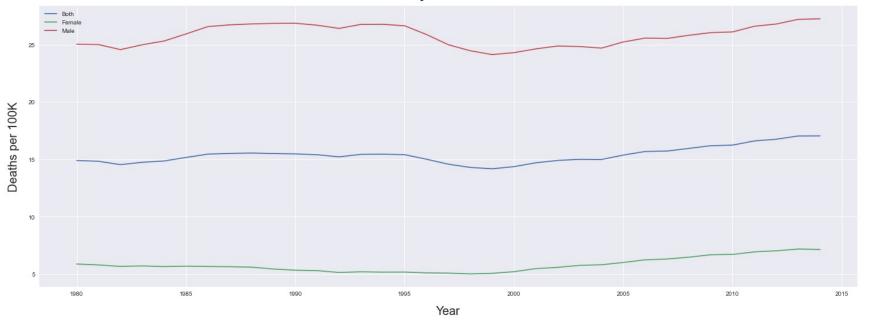


Model – Multivariate Regression



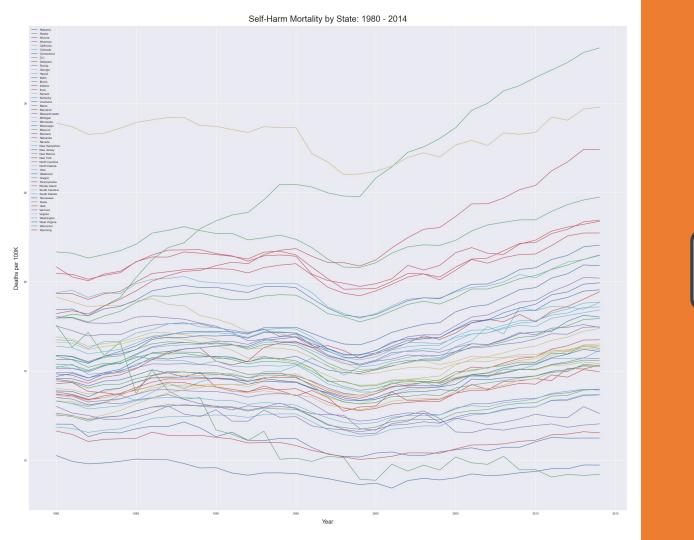
Unsupervised Learning – K-Means Clusters





SELF HARM MORTALITY

YEARLY AVERAGE BY SEX

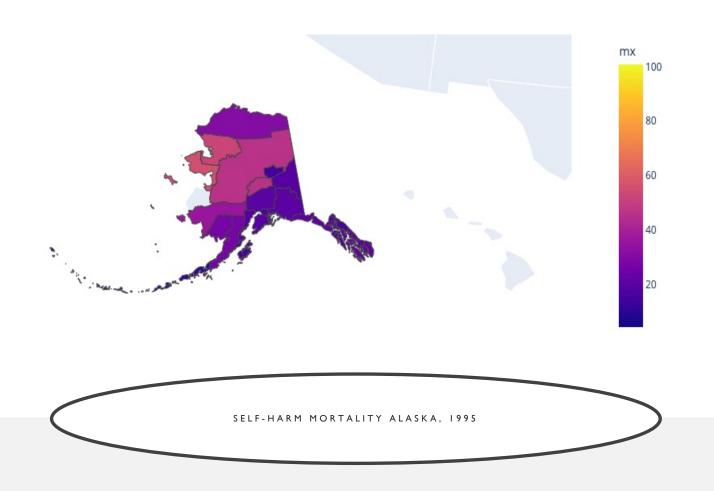


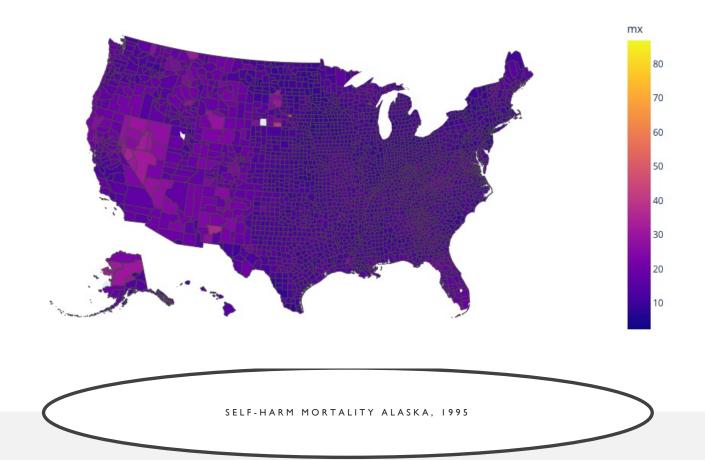
YEARLY AVERAGE SELF-HARM MORTALITY BY STATE

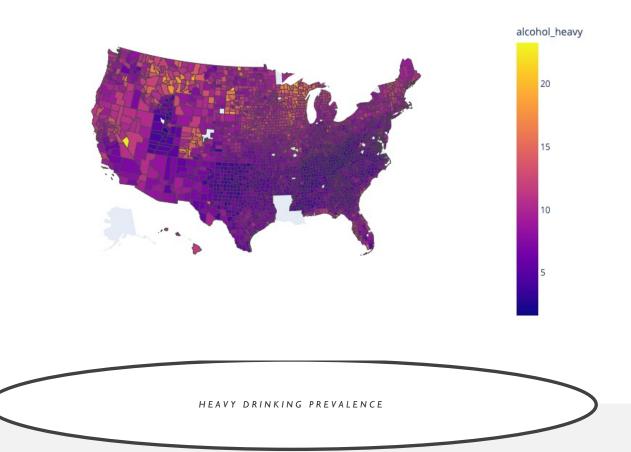
SELF-HARM MORTALITY

POINTS OF INTEREST

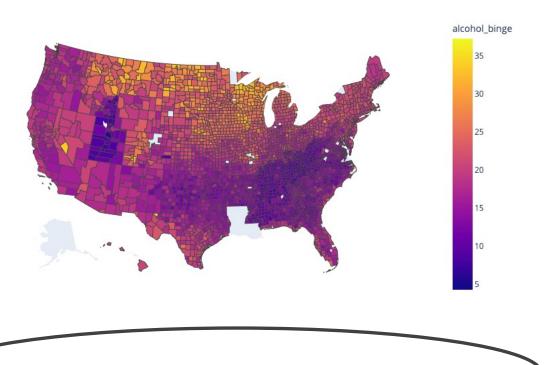
- Average 15.66 per 100K between 1980 &
 2014
- Max mortality rate 162 per 100K
- Female avg increased 5.89 7.16
- Female max increased 16.71 to 36.15
- Male avg increased 25.02 27.24
 - Male max increased 86.81 to 162.27
- The highest mortality rates for both men and women are in the Kusilvak Census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



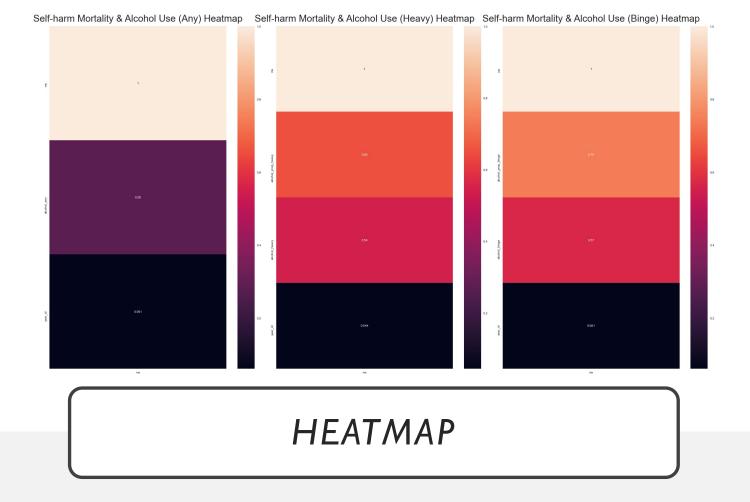




Binge Alcohol Use Prevalence by County



BINGE DRINKING PREVALENCE





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

RandomForest / Gboost tied

Test Accuracy: **0.73 Test**

RMSE: **32.16**

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

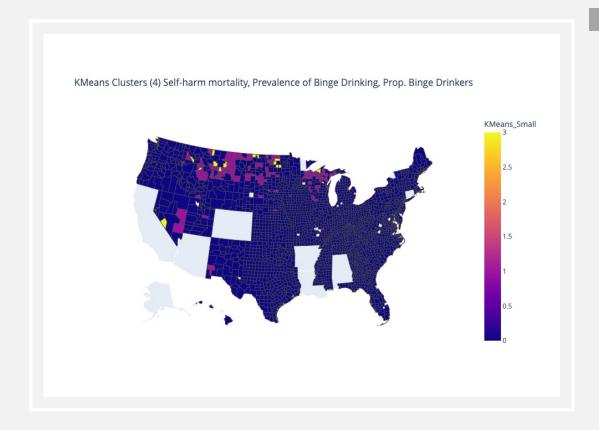
• Test Accuracy: **0.87**

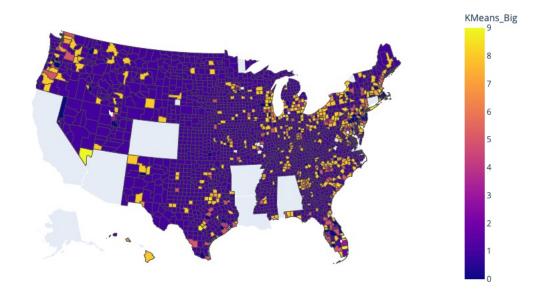
• RMSE: **15.25**



KMEANS

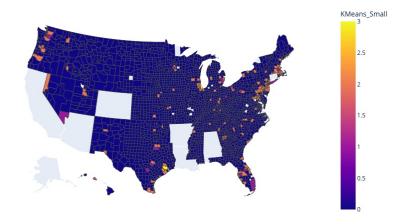
- Smaller Clusters were better (4)
- Heavy / Binge clusters with mortality rate produce silhouette scores ~0.51
- Including Labor Force and unemployment rate saw SIL score ~0.875 @ 4 clusters, ~0.73 @ 10 clusters
- Unfortunately not all states were present across all variables even with missing data,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



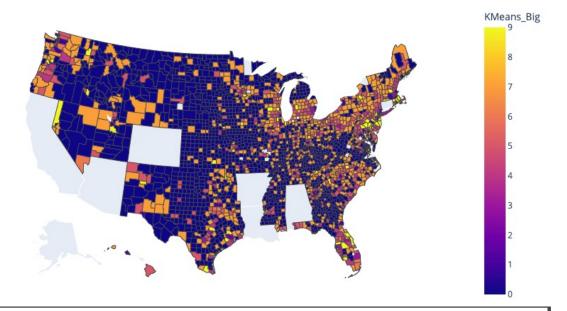


KMEANS HEAVY ALCOHOL USE & UNEMPLOYMENT

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



KMEANS BINGE USE & UNEMPLOYMENT



KMEANS BINGE USE & UNEMPLOYMENT

CONCLUSIONS

- Multivariate Regression Models Outperform
 Single Variable Regression
- If Univariate Models represent our Baseline
- 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, built 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