# USING ANALYTIC DOMAINS WITHIN THE BLACK POPULATION TO UNDERSTAND DISPARITIES IN POPULATION HEALTH

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#### **Overview**

- Importance of disaggregation of the Black Population
- Review the principal causes of population health
- Introduce and define four analytic population domains
- Describe associations between our analytic domains and the principle causes of population health
- Propose future data collection strategies

### Why Disaggregate?

- Widely documented health disparities across racialized population groups
- The mechanisms accounting for these disparities are less well understood
- Many speculate on the role that 'culture' might play in racialized health disparities
- This conflates racialization and culture in ways that limit our understanding of the role of culture in health
- Disaggregating racialized populations avoids these conflations and provides clearer insight into the link between culture and health

## **Principal Causes**

- Resources (e.g., individual and area-level measures of socioeconomic status [SES]),
- Health behaviors (e.g., exercise and diet)
- Environmental exposures (e.g., toxins and sources of stress including discrimination), and
- Biology (e.g., genetics and biomarkers).

## **Analytic Population Domains**

- Skin color (e.g., light, medium and dark),
- Internal migration (e.g., when and where respondents have lived within the U.S.),
- Birthplace (e.g., two-level distinction or multi-level reflecting country of origin) and
- Immigrant generational status (e.g., whether or not the respondent's parents and or grandparents were born in the U.S.).

# **Analytic Domains and the Principal Causes of Health**

# Resources

#### Resources

#### By skin color:

Associated with several key economic resources including, but not limited to: educational attainment (Keith and Herring 1991; Seltzer and Smith 1991) and income (Goldsmith, Hamilton, and Darity 2007; Monk 2015).

Light-skinned Black men have higher adjusted earnings than that of darker skinned Black men, and earnings that are similar to that of White men (Goldsmith, Hamilton, and Darity 2007).

#### Resources

#### By birthplace and internal:

According to the American Community Survey, 2001-14: Black immigrants earn an average of \$36.7 more per week than African Americans (collectively), amounting for about \$1,908.4 dollars more per year;

The earnings of African American movers (\$954.8) are considerably greater than those of Black immigrants (\$863.7).

# **Health Behaviors**

#### **Health Behaviors**

By skin color (self-report: light, medium, dark):

According to our analysis of the NSAL, lighter skin color is associated with: lower BMI and reduced likelihood of being a current or former smoker,

However, skin color is not associated with drinking, substance use or physical activity.

#### **Health Behaviors**

By birthplace (U.S. vs Caribbean):

According to our analysis of the NSAL, Foreign born Blacks have: lower BMI, reduced likelihood of being a current or former smoker, lower levels of drinking, lower levels of alcohol abuse and greater physical activity.

•While there are differences between African Americans and Afro Caribbeans, there are mostly small or insignificant differences between English and non-English speaking Afro Caribbeans.

By skin color (light, medium and dark):

Data from the NSAL, indicate that those with medium skin color are more likely to report having a super market in their neighborhood (76%) than are those with light (73%) or dark skin color (71%).

Those with lighter skin color report fewer experiences with major life and everyday discrimination.

#### By birthplace:

Data from the NSAL indicate that a higher percentage of Caribbean Blacks, as compared to African Americans report having (in their neighborhood):

Crime problems (86.5% vs. 73.2%, p < .001),

Drug problems (89.9% vs. 73.0%, p < .001)

Medical clinics (78.2% vs. 67.5%, p < .001)

#### Biomarkers of Stress

#### Variation by skin color and birthplace:

Evidence of darker skin tone individuals having a higher allostatic load which is a multi-system index of biological stress (Cobb et al. 2016)

Variation by birthplace: data suggest that U.S-born Black individuals had a higher allostatic load than foreign-born individuals (Doamekpor and Dinwiddie 2015)

#### Recommendations

Our empirical review has demonstrated the utility and validity of systematically collecting data to allow of disaggregating the U.S Black population along four key analytic domains:

Skin color

Internal migration status

Birthplace (a two-level measure, multi-level including characteristics of country of origin)

Immigrant generational status

Oversamples of the foreign born population

# Thanks!

- A large and growing body of research suggests that where you work, live and play are essential to health outcomes (Diez Roux 2012; Takeuchi et al. 2016; Williams and Collins 2001).
- Blacks have occupied spaces that are typically urban or rural and commonly segregated due to poor socio-economic conditions and circumstances stemming from a legacy of discrimination and practices that include restrictive zoning laws (Massey 2001; Taylor 2014).
- Residential segregation has been associated with exposure to poor housing quality and environmental hazards (i.e. toxins, poor air quality) (Williams 1999)
- Daily exposure to threatening and noxious environmental elements erodes health and causes chronic diseases and death (Ross and Mirowky 2001; Williams and Collins 2001).

• Environments can also present physical characteristics that can encourage or discourage healthy behaviors

- ☐ Parks
- ☐ Supermarkets
- ☐ Medical Clinics
- ☐ Crime
- ☐ Drug and Alcohol Density

• It is unclear how physical features or neighborhood characteristics differ by ethnicity, place of birth, and immigrant generational status among US Blacks