





THE CALIFORNIA HEALTH INTERVIEW SURVEY (CHIS)

AskCHIS Neighborhood Edition (NE)©: Using ACS Data to Construct and Visualize Small Area Estimates for The California Health Interview Survey

Todd Hughes, CHIS Director 2019 ACS Data Users Conference May 14-15, 2019





California Health Interview Survey (CHIS) Main Objectives

- California's assessment tool to meet state and local needs for population-based health data
- Provide Health and Health-related Estimates
 - 1) at local-level for counties, cities with health departments, and statewide
 - 2) for adults, teens, and children
 - 3) for California's major race/ethnic groups and (if possible) some smaller ethnic groups
 - 4) to wide audiences





CHIS Content

- Rich demographic data
- Health behaviors
- Health conditions
- Access to and use of health care services
- Health insurance coverage
- Social determinants of health
- ... and numerous other topics

See CHIS Questionnaire Topics

http://healthpolicy.ucla.edu/chis/design/Pages/survey-topics.aspx

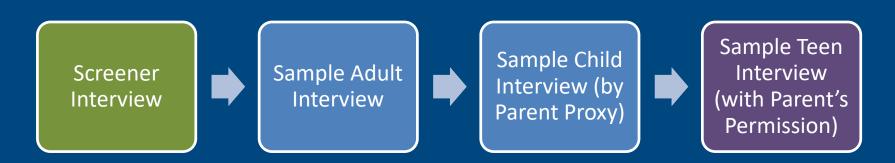




How is CHIS conducted?

- Through 2018 used RDD sampling (landline and cell) and Computer-Assisted Telephone Interview (CATI), switching to an ABS, push-to-Web + CATI design starting in 2019
- CHIS collects detailed information for:

One adult (age 18+) in the household, One adolescent (age 12-17) if present, and One child (age 0-11) if present (by parent proxy)







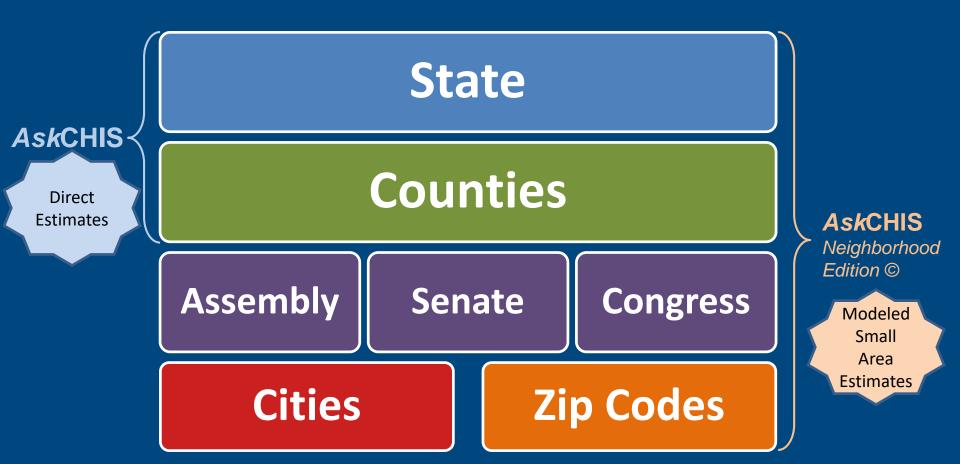
Sample Design of the CHIS

- Geographic stratification allows for direct estimates for 56 strata:
 - 8 Service Planning Areas in Los Angeles County
 - 6 Health Regions in San Diego County
 - 39 County strata (excluding LA and San Diego)
 - 3 County-group strata with the 17 smallest counties (by population)
- In total, ~20,000 adults per year are included in the sample
- Our challenge: How do we generate health estimates for lower geographic levels—ideally down to the ZIP code level?





CHIS Data Across Geographies







Approach for CHIS SAEs

Build models for CHIS data "borrowing strength" from other sources

Survey Data: CHIS

CHIS outcome variable and covariates of interest

Auxiliary Data: American Community Survey

 ACS 5-year summary tables, especially sociodemographic variables at the neighborhood level. We initially included 236 variables, condensed through a 2-step principal component analysis (PCA), ending with two principal components.

Population Data: Nielsen-Claritas

 Nielsen-Claritas data, including same covariates of interest as in CHIS. We augmented this with modeled income-to-poverty ratios from CHIS, and adjusted to CHIS weighting dimensions through iterative proportional fitting.





Approach for CHIS SAEs

Modeling Indicators



Calibration and Validation



- Begin with unit-level generalized linear mixed model
- Add a non-parametric function of census tract level auxiliary variables
- Apply model parameters to population dataset
- Aggregate predicted values into area level estimates

Include a random intercept from each stratum to account for sample design and softcalibrate to direct estimates

- When predicted values fell outside limits, hardcalibrate by applying proportions of direct estimates to modeled estimates
- Validate by checking against larger areas and external information

Stability and Pooling

- Calculate coefficients of variation (CVs)
- Suppress point estimates with CV>=30%, or areas with a population universe < 1,000
- Geographic estimates may be combined to pass stability criteria (pooled estimates are population-weighted averages of originals)





Detailed Description of the Methodology

- "Generating Health Estimates by Zip Code: A
 Semiparametric Small Area Estimation Approach Using the California Health Interview Survey"
 - Yueyan Wang, et al. American Journal of Public Health.
 December 2015, Vol 105, No. 12
- "A design-based approach to small area estimation using a semiparametric generalized linear mixed model"
 - Hongjian Yu, et al. Journal of the Royal Statistical Society,
 Series A. 2018, Vol 181, Part 4.





AskCHIS Neighborhood Edition[©]

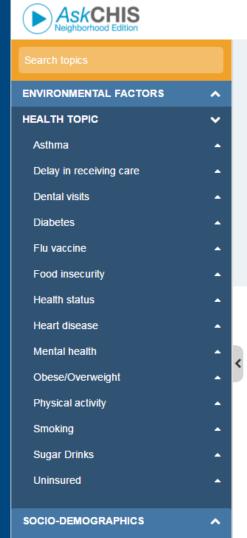
Available at askchisne.ucla.edu

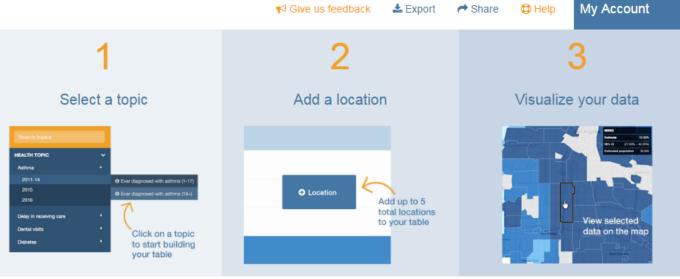
- Online platform for CHIS SAE dissemination and visualization
- Design informed by data user surveys and focus groups
- Developed thanks to grants from Kaiser Permanente and The California Wellness Foundation





Granular Health Estimates





AskCHIS Neighborhood Edition



AskCHIS Neighborhood Edition is an online data dissemination and visualization platform that provides health estimates at sub-county geographic regions. With AskCHIS NE, you can access and visualize authoritative health data at zip code, city, county, and legislative district levels.

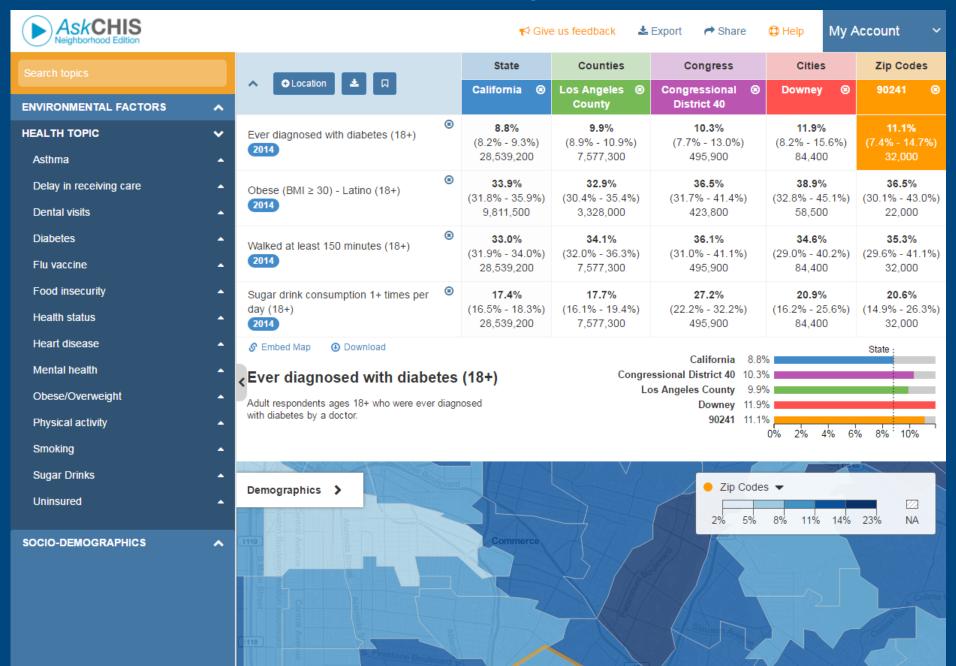


UCLA

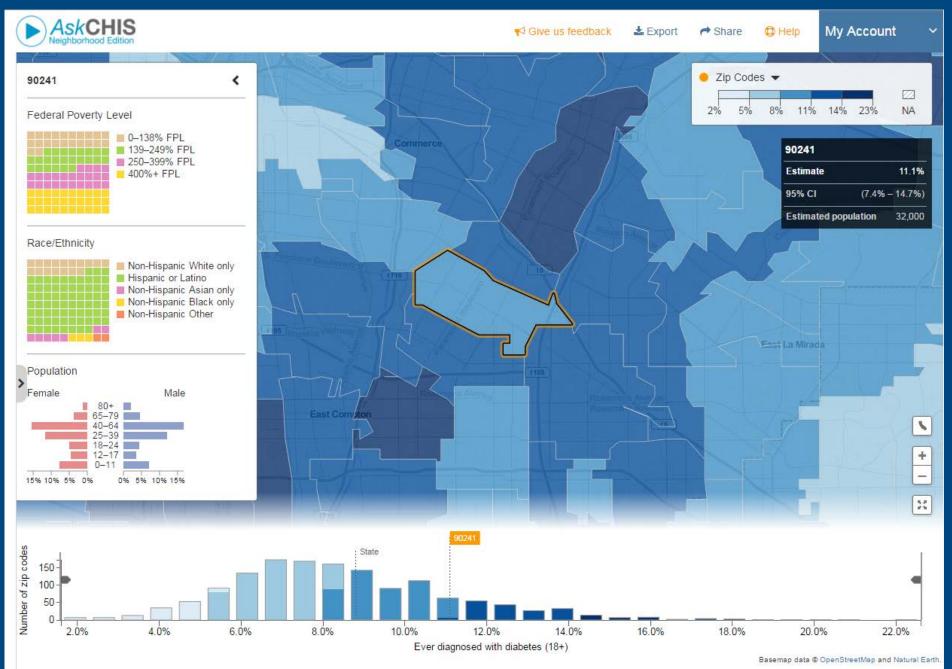
Health estimates are powered by data from the California Health Interview Survey (CHIS) and are created through a sophisticated modeling technique called small area estimation (SAE). For more information about the methodology behind our data, click here.

Learn about our methodology

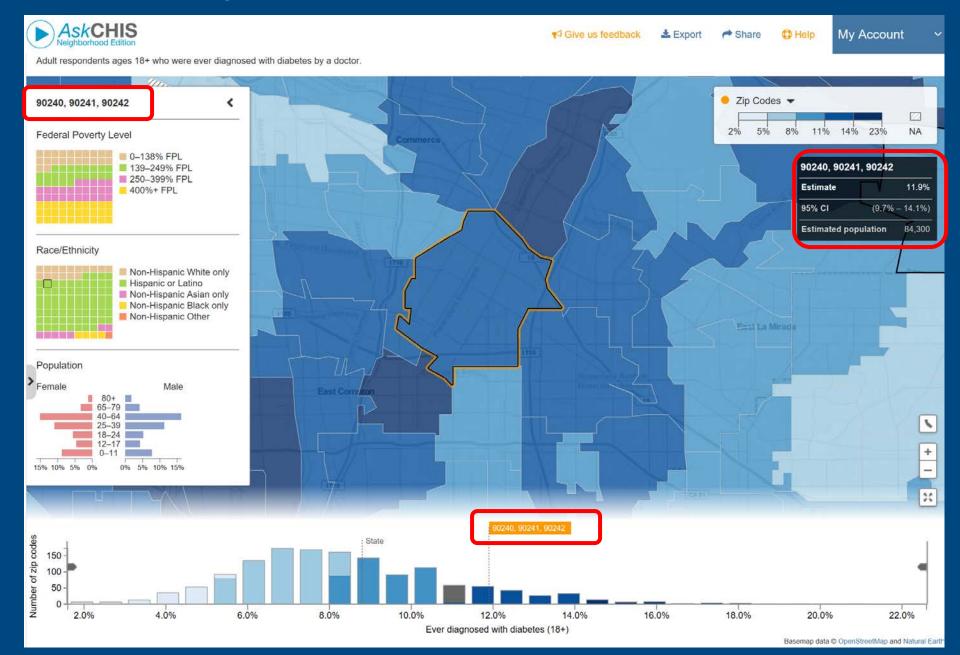
Estimates for Zip Codes, Cities, Counties, Legislative Districts



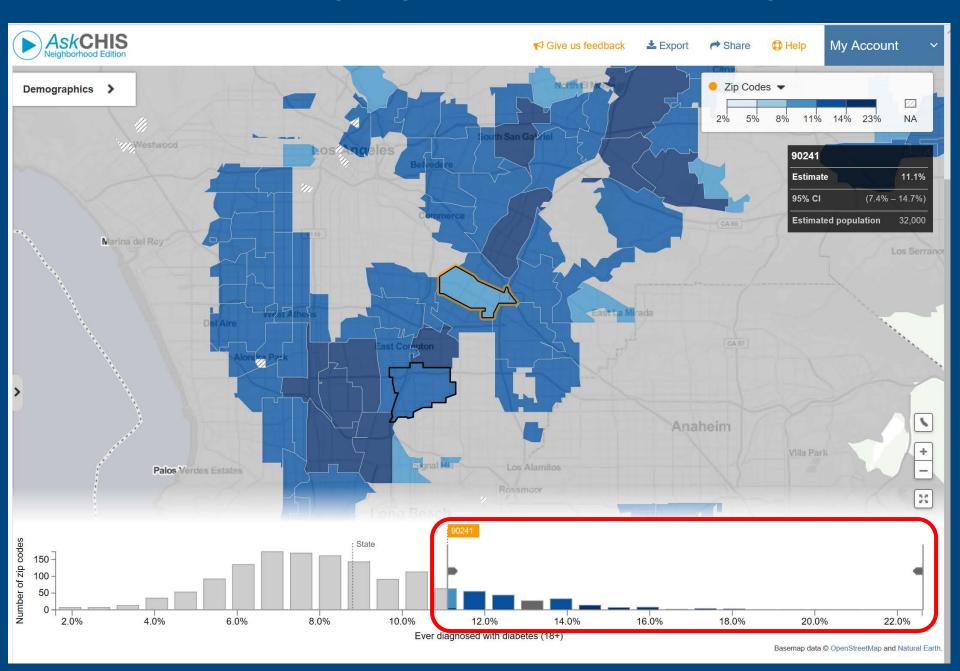
Powerful Visualization Tools



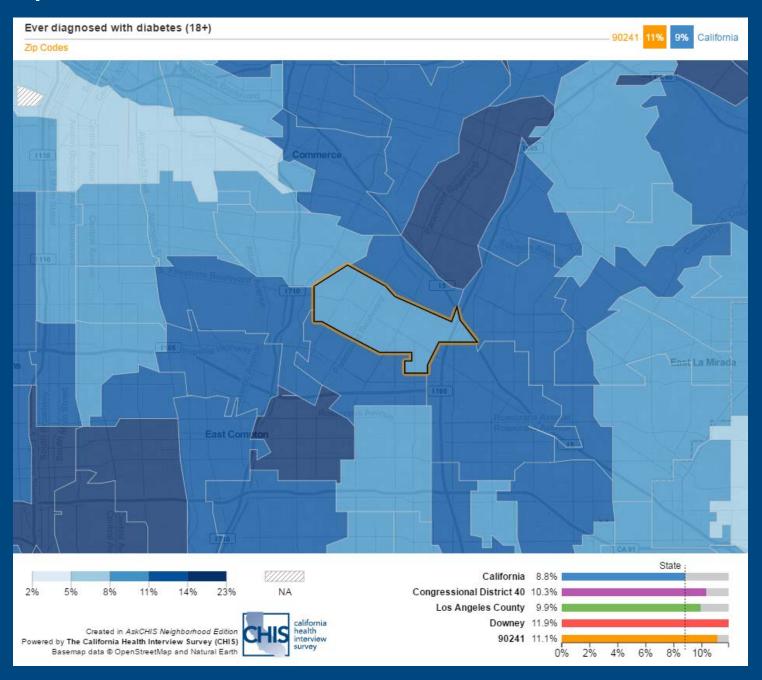
User-Defined Geographic Areas: Groups of Zip Codes



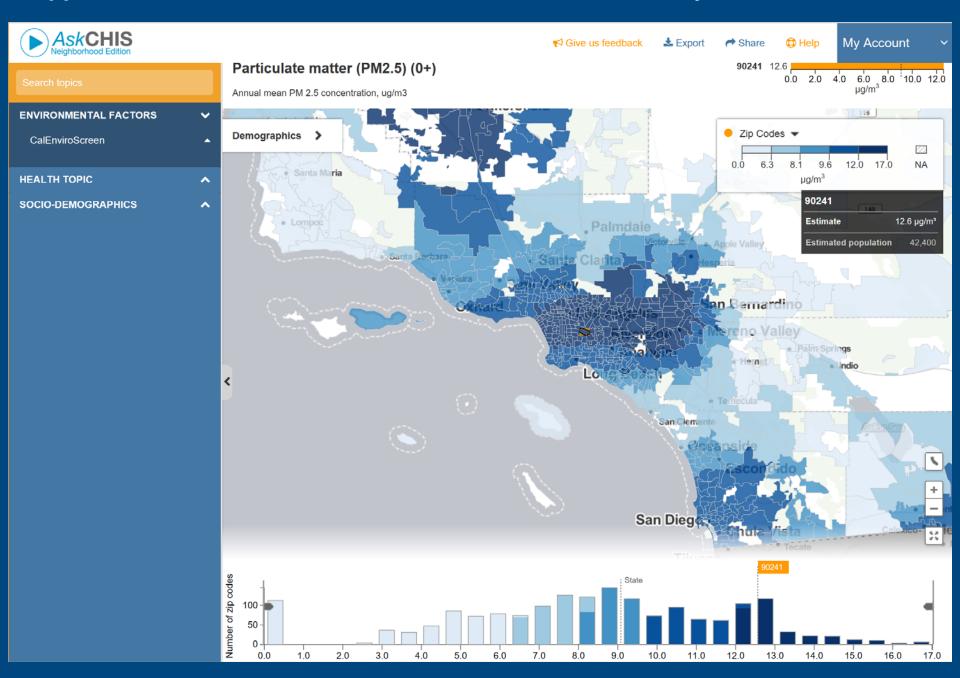
Custom Visualizations Using Ranges Defined on Interactive Histogram



Export Maps, Charts, and Data

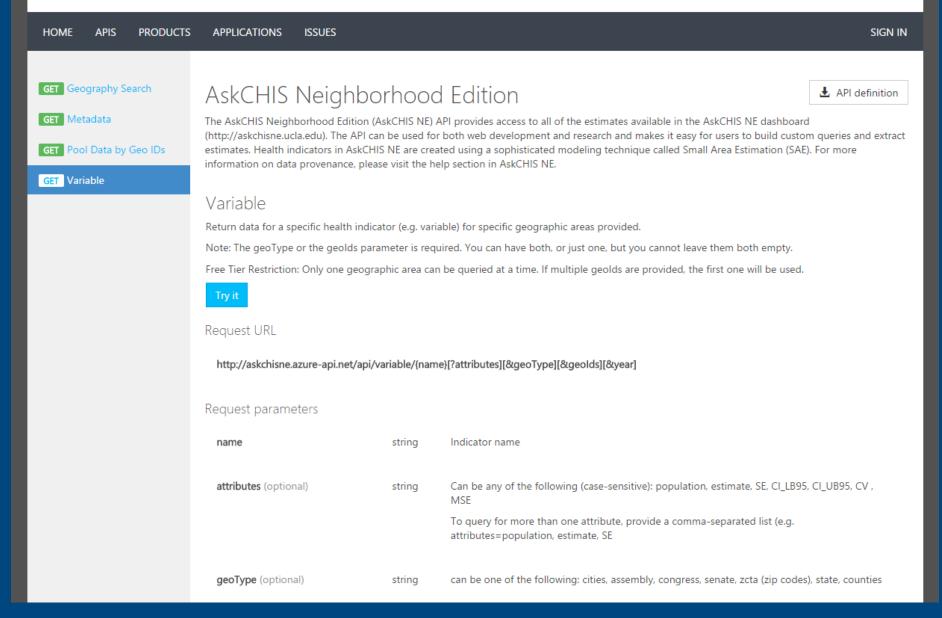


Supplemental Data Sources: CalEnviroScreen for Air Quality, Pollution



NE Developer API for Web Development and Data Science

California Health Interview Survey (CHIS) API







AskCHIS On-Demand Learning Center

http://healthpolicy.ucla.edu/chis/Pages/CHISTraining.aspx



Introduction to AskCHIS NE

AskCHIS Neighborhood Edition allows you to access hyper-local California health data, including ZIP code, legislative district, city and more!



How to build a basic Community Profile

Learn how to select a health topic and up to five hyper-local geographical locations.



How to adjust and visualize your data

Learn how to adjust results, visualize your data, and more!

Fast, free tutorials on how to use AskCHIS and AskCHIS Neighborhood Edition®





Thank you!

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