



Work in progress

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Porto 8 October 2009



Introduction



- Socioeconomic inequality in health: concentration index (Wagstaff et al, 1991)
- New framework for measuring health inequality (Fleurbaey and Schokkaert, 2009)
 - Literature on socioeconomic inequalities and social choice theory on equity, responsibility and compensation (Roemer, 1998)
 - Total unfair inequalities vs socioeconomic-related inequalities
 - Different look at legitimate and illegitimate sources
 - Structural model → assess importance of differences sources



This paper



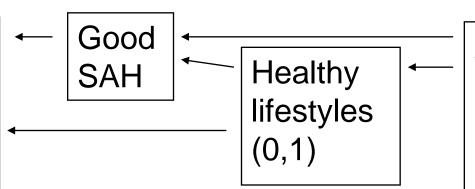
- Apply F&S framework to measurement of unfair inequalities in mortality risk in The Netherlands
- Focus on contributions of lifestyles (smoking, drinking, obesity, exercise)
- Analyse inequities under different normative choices:
 - Legitimate, illegitimate sources of inequality
 - Channels through which these sources affect health
- Some previous related literature:
 - Balia and Jones (2008): structural model
 - Rosa Dias (2008): inequality of opportunities



Structural model



MORTALITY (0,1)



X, Z, I: legitimate, illegitimate

$$d_{i}^{*} = \alpha h_{i} + \beta_{d}L_{i} + \gamma_{d}X_{i} + \varepsilon_{id}$$

$$h_{i}^{*} = \beta_{h}L_{i} + \gamma_{h}X_{i} + \delta_{h}Z_{i} + \varepsilon_{ih}$$

$$l_{ij}^{*} = \gamma_{j}X_{i} + \delta_{j}Z_{i} + \lambda_{j}I_{i} + \varepsilon_{ij}, \qquad j = 1, ..., 4$$

$$y_i = \begin{cases} 1 & \text{if } y_i^* > 0 \\ 0 & \text{otherwise} \end{cases}$$

$$\varepsilon_i \sim MVN(0,\Sigma)$$

, with
$$(y_i, y_i^*) = (d_i, d_i^*), (h_i, h_i^*), (l_{ij}, l_{ij}^*)$$



Data:



- Dutch Health interview survey (1997-2000) 40+:
 - SAH: very good or good vs fair, poor or very poor
 - Healthy lifestyles (0,1): some exercise; not overweight (BMI<25);
 non-smoker; moderate drinker (<15/week);
 - Exogenous variables:
 - Age/gender groups
 - Education: primary (ref); lower secondary; middle secondary; higher secondary; higher vocational & university
 - Health: chronic conditions, longstanding illness
 - Other: region, year dummies
 - Instruments (Z, I): House ownership (Z), marital status (Z), HH size
 (Z), degree of urbanisation (I),
 - Mortality follow-up until 2005 (cause-of-death register)



Selected results of structural model

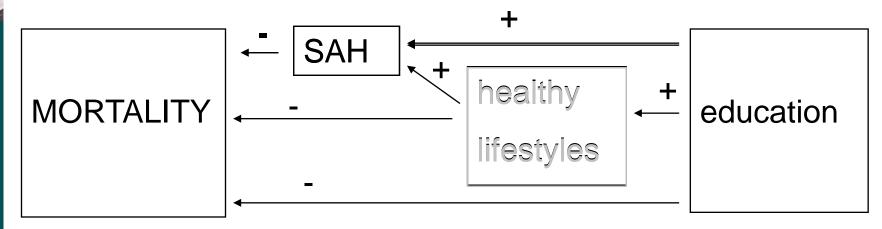


	Died	Good SAH	Exercise	Non- smoker	Moderate Drinker	BMI <25
Good SAH	-0.357***	-	-	-	-	-
Exercise	-0.176***	0.281***	-	-	-	-
Non- smoker	-0.389***	0.005	-	-	-	-
Moderate drinker	-0.344*	-0.205	-	-	-	-
BMI <25	0.079	0.042	-	-	-	-
Educ 2	-0.064	0.154***	0.222***	0.123***	0.087	0.077**
Educ 3	-0.102	0.351***	0.306***	0.146***	0.034	0.239***
Educ 4	-0.087*	0.238***	0.430***	0.149***	-0.131*	0.265***
Educ 5	-0.115*	0.417***	0.747***	0.359***	-0.092	0.374***



Example: unfair inequalities due to education







Unfair inequalities



Egalitarian – equivalent (Fleurbaey and Schokkaert, 2009):

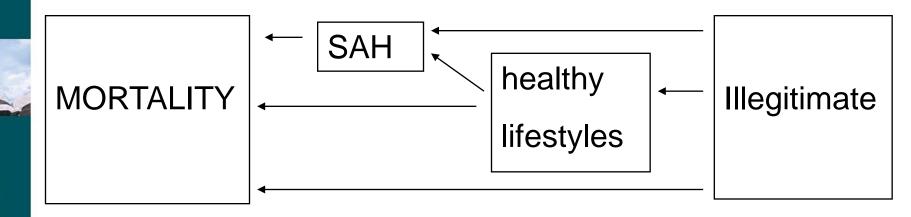
- Fairness gap:
$$d_i^{FG} = d(illeg_i, leg_i) - d(illeg^*, leg_i)$$

Unfair inequality: I(dFG)

- Modified Gini index G* (Erreygers, 2009):
 - G^* of survival (attainment) = G^* of mortality (shortfall)



Preliminary results unfair inequalities



	Legitimate	Illegitimate	Index
1	other SES	age/sex	0.119
		health, education	
2	age/sex	other SES, health, education	0.061
3	age/sex, health	education, other SES	0.033



Preliminary conclusions



- Unfair inequalities in mortality in the NL
- Normative choices matter
- Lower inequalities with "usual" standardisation variables



To be done



- Structural model:
 - Exploit other instruments
 - More detailed info on mortality (duration) and lifestyles
- Inequality measurement:
 - Consider other normative choices
 - Alternative standardisations: consider values other than average (eg: highest level of education)



Correlations of error terms



	Died	Good SAH	BMI <25	Moderate drinker	Non- smoker	Exercise
Died	1					
Good SAH	0.044	1				
BMI <25	-0.039	0.025	1			
Moderate drinker	0.057	0.096	0.014	1		
Non- smoker	0.080***	0.018	-0.107***	0.124***	1	
Exercise	-0.016	0.015	0.050***	0.016	0.166***	1

