

Assessing Cross-Cultural Comparability of Self-Rated Health and Its Conceptualization through Web Probing

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INTRODUCTION

Motivation

- Self-rated health (SRH):
 - "How would you rate your health in general, excellent, very good, good, fair or poor?"
- The mostly widely used health question across various fields due to its simplicity and utility in predicting mortality
- What makes SRH so useful?
 - Unclear; Answers may be in the cognitive process of SRH response
 - Few studies have attempted to understand this process
 - Fewer among diverse populations

Research Aims

To assess the comparability of cognitive process of SRH across cultural groups by investigating the content and its tone that respondents consider when answering SRH through the following aims:

Aim 1: Investigate what respondents consider when answering SRH

- 1.A. What type of content do respondents consider on SRH?
- 1.B. How many attributes do respondents consider?

Aim 2: Examine the tone associated with the content of SRH process

How do respondents mix different tones?

Our Study

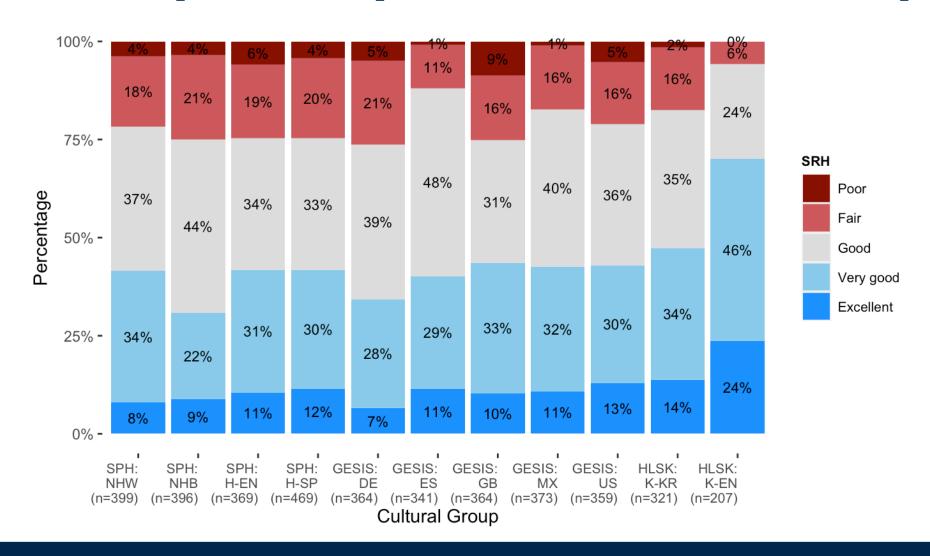
- Probing on SRH answers "You said your health is {SRH ANSWER}. What are the factors you considered to say your health is {SRH ANSWER}?"
- Implemented in 3 Web surveys targeting diverse groups
- Answers to the probing question are coded for the content and tone

DATA and METHODS

Data Sources

	Survey 1. Study on Perceptions of Health (SPH)	Survey 2. GESIS Web Survey	Survey 3. Health and Life Study of Koreans (HLSK)
Recruitment Method	Non-probability web sample	Non-probability web sample	Respondent Driven Sampling
Target cultural group	 US only Non-Hispanic White (NHW) Non-Hispanic Black (NHB) English-dominant Hispanic (H-EN) Spanish-dominant Hispanic (H-SP) 	 Germany (DE) Spain (ES) Great Britain (GB) Mexico (MX) United States (US) 	 US only Korean-dominant Koreans (K-KR) English-dominant Koreans (K-EN)
Sample size	1,633	1,801	633
Avg. age	47 years old	41 years old	38 years old
% Female	50%	49%	59%

SRH by Survey and Cultural Group



Examples of Responses to SRH and Probe

Very Good -- "I generally have really good health and no major health problems. The only thing I have run into is I get kidney stones anywhere from every year to every 3 years. It just depends. I also need work on losing weight."

Excellent -- "I'm in my early twenties, I don't smoke, I don't drink excessively, I don't get ill often, and I have very little history of serious illness within my family."

Buena -- "Intento seguir una dieta equilibrada y a veces no la sigo y eso afecta a mi salud. Y ultimamente hago poco ejercicio." / Good — "I try to follow a balanced diet but sometimes I don't do that and that affects my health. And lately I have not been exercising much"

Coding of SRH Probe

- Coding scheme developed for English responses and adapted for other languages by 3 PhD-level researchers, all fluent in English and each fluent in one of the non-English languages
- Non-English responses were translated into English and coded on English
- Coded on content, allowing multiple attributes; and tone of each attribute (favorable, unfavorable or neutral to health)
- 5 bilingual coders
 - Trained by the PhD-level researchers
 - All coded English responses; 3 Spanish; 2 German; 1 Korean
 - Inter-coder reliability: 0.77

Attribute Codes
10 — Health Behaviors
100 - In/Out of Shape
101 - Diet
102 - Exercise
103 - Weight
104 – Activity Level
105 – Substance Use
106 — Other Health Behavior
11 – Affective response
12 — Health service usage
14 — Physical performance or ability
15 – Absence or Presence of Illness
150 — General absence or presence of illness
151 — Physical absence or presence of illness
152 — Mental absence or presence of illness
153 — Other absence or presence of illness
16 – General health comment
17 – Societal/Demographic reasons
18 — Family history
20 - Desire
24 — Life situation
98 – Other
99 – Non-response

Example of SRH Probe Response Coding

"I generally have really good health and no major health problems. The only thing I have run into is I get kidney stones anywhere from every year to every 3 years. It just depends. I also need work on losing weight."

Codable text	Coded attribute	Tone
"have really good health"	16: General health comment	1: favorable to health
"no major health problems"	150: General absence or presence of illness	1: favorable to health
"get kidney stones"	151: Physical specific absence or presence of illness	-1: unfavorable to health
"need work on losing weight"	103: Weight	-1: unfavorable to health

RESULTS

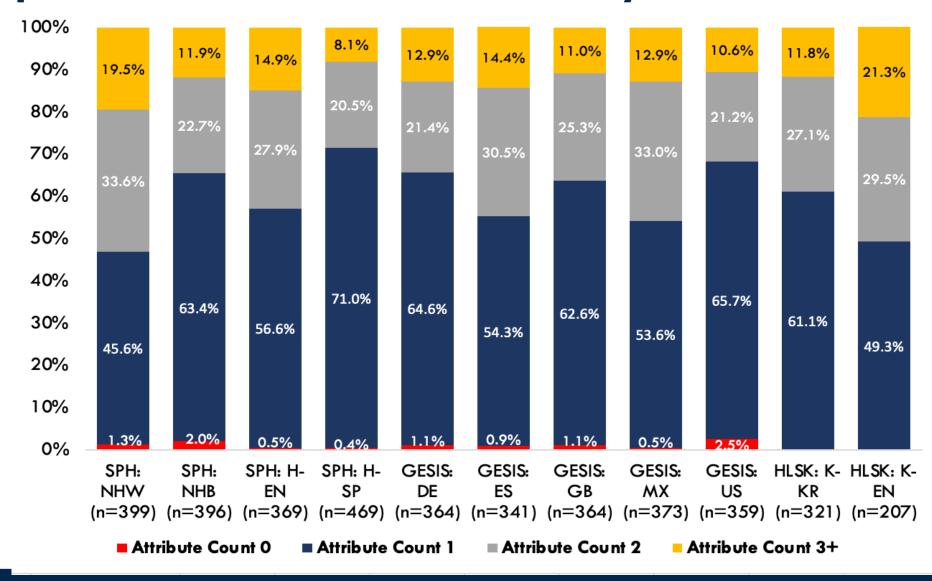
Aim 1.A. What type of content do respondents consider on SRH?

Top 5 Attributes Considered by Respondents

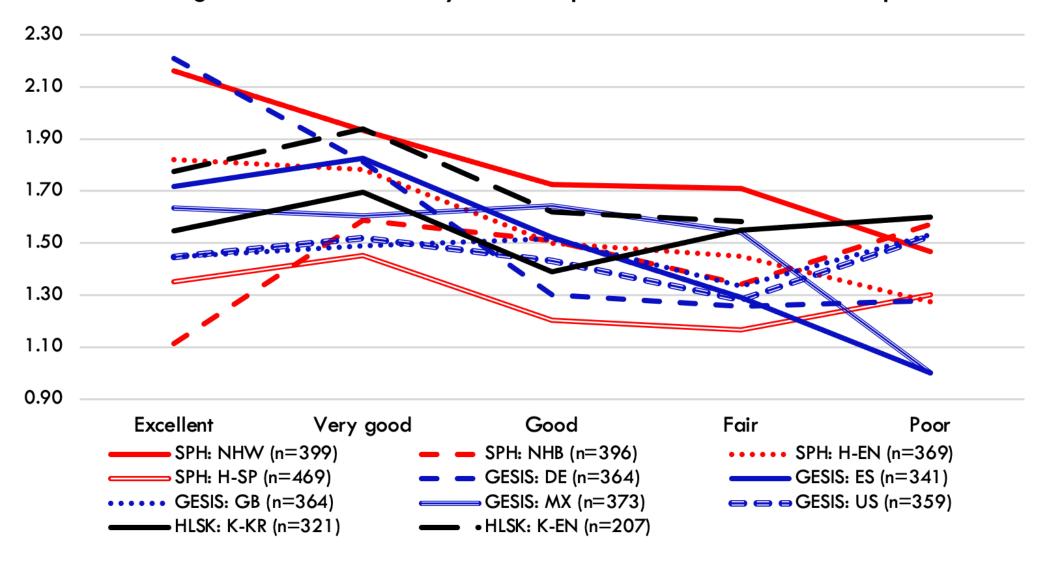
SPH: NHW (n=394)	SPH: NHB (n=388)	SPH: H-EN (n=367)	SPH: H-SP (n=467)	GESIS: DE (n = 360)	GESIS: ES (n=338)	GESIS: GB (n=360)	GESIS: MX (n=371)	GESIS: US (n=350)	HLSK: K-KR (n=321)	HLSK: K-EN (n=207)
Illness — physical (43%)	Illness – physical (29%)	Illness – physical (35%)	Gen. health comment (29%)	IIIness — general (34%)	Illness – general (47%)	Illness – physical (30%)	Illness – general (44%)	Illness – General (27%)	Illness – general (57%)	lllness - general (45%)
Physical performance / ability (23%)	Gen. health comment (18%)	Illness — general (25%)	Illness — physical (24%)	Gen. health comment (34%)	Gen. health comment (34%)	Illness — general (29%)	Gen. health comment (27%)	Gen. health comment (27%)	Illness – physical (29%)	Exercise (29%)
Gen. health comment (19%)	Illness — general (18%)	Physical performance / ability (11%)	Illness — general (14%)	Illness physical (24%)	Illness physical (20%)	Gen. health comment (22%)	Illness physical (26%)	Illness physical (25%)	Exercise (14%)	Diet (22%)
Illness — general (15%)	Physical performance / ability (16%)	Exercise	Physical performance / ability (11%)	In/out of shape (7%)	Societal/de m. reasons (9%)	Exercise (8%)	Health service usage (13%)	Exercise (11%)	Diet (9%)	Illness – physical (19%)
Weight (12%)	Diet (10%)	Weight (11%)	Exercise (9%)	Exercise (7%)	Substance use/other health behaviors (8%)	Weight (8%)	Substance use/other health behaviors (8%)	Weight (9%)	Substance use/other health behaviors (8%)	Substance use/other health behaviors (14%)

Aim1.B. Do respondents consider multiple factors?

Proportion of Attribute Counts by Cultural Group



Avg Attribute Counts by SRH Response and Cultural Group

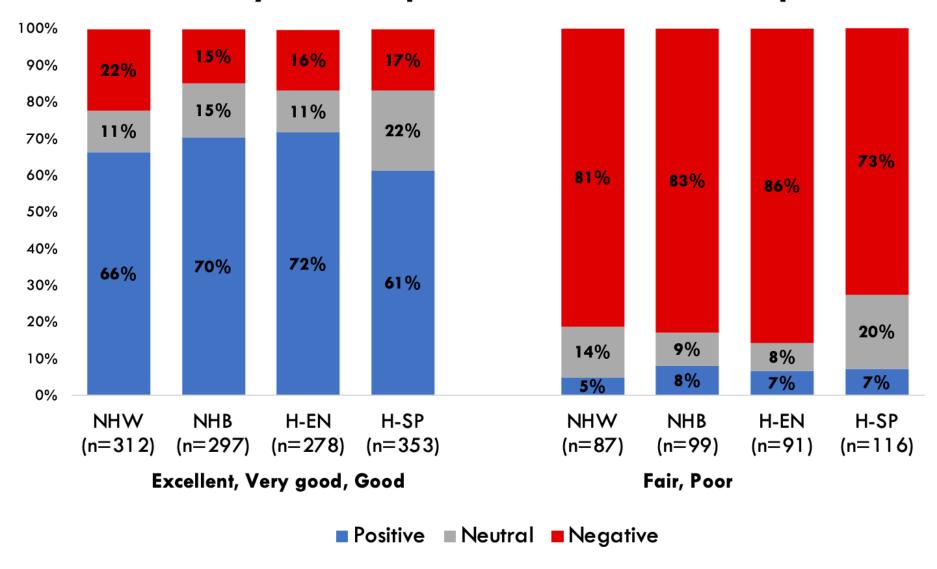


Aim 1 Summary

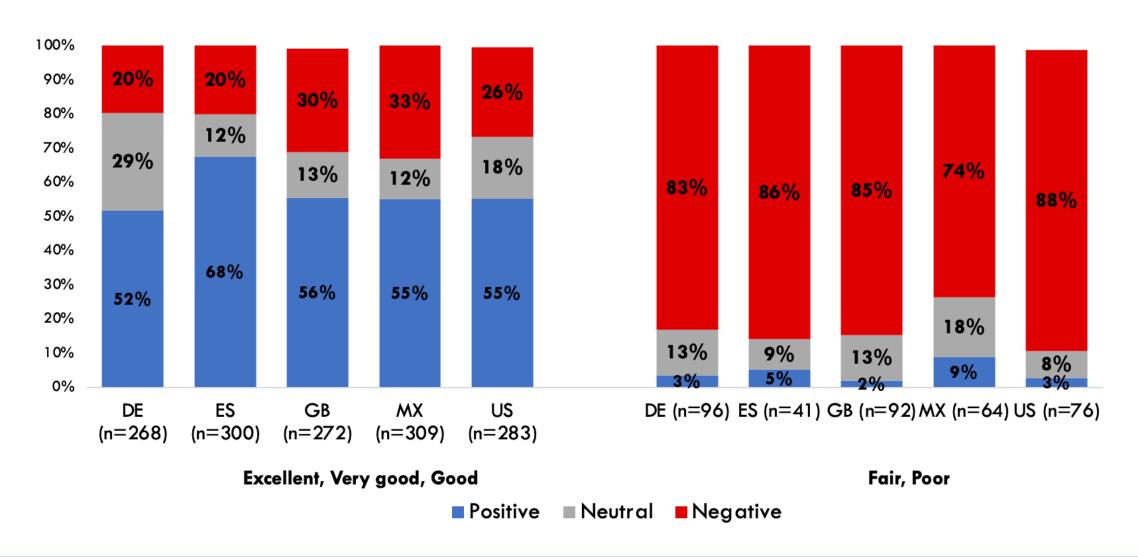
- Aim 1.A. What type of content do respondents consider on SRH?
 - Similarities across groups: Absence or presence of illness and general health comments
 - Differences across groups: Exercise, diet, health service usage, societal demographic reasons
- Aim 1.B. Do respondents consider multiple factors?
 - Some groups reported fewer attributes (i.e., H-SP) while others reported more attributes (i.e., K-EN & NHW)
 - Respondents with better health reported more attributes than respondents with poorer health

Aim 2. How do respondents mix different tones?

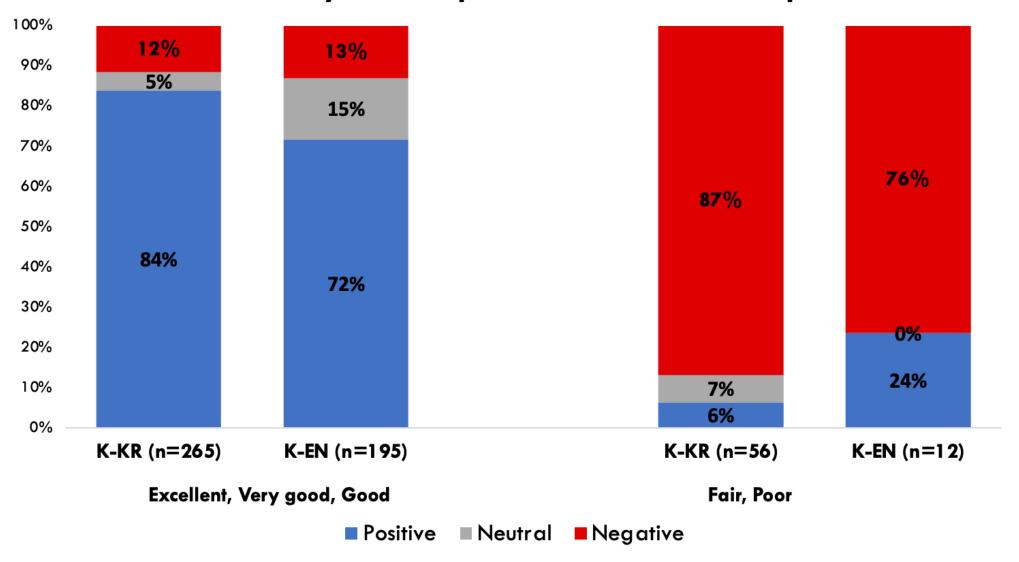
SPH: By SRH Response and Cultural Group



GESIS: By SRH Response and Cultural Group



HLSK: By SRH Response and Cultural Group



Summary Aim 2

- Aim 2. How do respondents mix different tones?
 - Differences between cultural groups
 - Some groups mixed tone more than others (i.e., GB, MX, US)
 - Other groups mixed tones less and were either more positive or negative (i.e., K-KR, K-EN)

Conclusion

Conclusion

- Exploratory analysis reveals some similarities and differences between cultural groups
- Future Directions
 - Control for age, sex and other demographics
 - Analyze by adjacent categories (i.e., SRH=Good vs. SRH=Fair)
 - Address non-probability aspect of study

Thank you stephmo@umich.edu