

"Enhancing Information and Methods for Health System Planning and Research", Institute for Clinical Evaluative Sciences (ICES), January 19-20, 2004, Toronto, Canada



1

<u>Workshop:</u> Using Spatial Analysis and Maps to Understand Patterns of Health Services Utilization

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Outline:

- 9.05 9.25 AM: Review of GIS concepts, clarify issues
- 9.25 9.45 AM: Introduction of new topics; focus on analysis of spatial patterns
- 9.45 10.10 AM: Hands-on part of the workshop
- 10:10-10:30 AM: Presentations and discussion







- 1) Gain an understanding of how spatial statistics and maps can be used to examine patterns of health service use
- Learn about how geographic patterns of health care can be used to identify potential interventions and appropriate health policies





Brief Review of GIS Concepts

- What is GIS, how it can be useful
- Data Geocoding
- GIS Data Models
- Point and Area Data
- Common Areal Units
- Selected Cartographic Topics



Review of GIS Concepts



What is GIS, how it can useful

- GIS: an organized collection of computer hardware, software, geographical data and personnel designed to efficiently capture, store, update, manipulate, analyze and display all forms of geographically referenced information (WHO 1999)
- Many (if not all) human-related phenomena including health determinants and outcomes are geography-dependent
 - eg. area variation, outbreak investigation, environmental exposures
- Application of spatial analyses in health research may lead to less biased results and better inferences 5

Review of GIS Concepts





Data Geocoding

Process of registration of geographically-defined data into GIS system

- Coregistration of hard copy maps with GIS coverages
- Postal codes-to-points transfer using Postal Code Conversion File (PCCF)
- Address matching assigning of geographic coordinates to data entries based on their street addresses



+ M6R2X5



Review of GIS Concepts



GIS data models (raster and vector)

Discrete phenomena can be well represented by points, lines and polygons

Continuous phenomena can be well represented by raster

Vector Model - good for discrete features like locations or paths



Raster Model - good for continuously varying features like temperature



Review of GIS Concepts



Point and areal data

Point geographical objects (e.g.: block face) vs. areal objects (e.g.: Stats Can 2001 dissemination areas)



Review of GIS Concepts





Common Areal Units

Health units



5 in the GTA 7657 sq km

FSA



364 in the GTA 9962 sq km

Census Tracts



189 in the Inner TO

127 sq km





1399 in the Inner TO 127 sq km



Review of GIS Concepts



Selected Cartographic Topics: Types of Thematic Maps





Review of GIS Concepts



Selected Cartographic Topics





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Review of last year's conference topics



Selected Cartographic Topics







Introduction of New Topics

- Buffers
- Distance calculations
- Location Quotient (LQ)
- Spatial neighbours
- Spatial autocorrelation (global)

- Local Indicator of Spatial Association (LISA)
- Spatial regression model
- Point data cluster analysis



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Introduction of New Topics



Buffers

- Often used in the context of spread or occurrence of pollutants, diseases, areas of interest
- <u>Example of use*</u>:

Area-proportional transfer of emissions from streets to surrounding areas



Figure 2. Graphical description of exposure assessment. The exposure for an EA (EA168; total area, 1,490 m²; exposure, 32.8 g) is determined from the summation of total emissions in each overlaying buffer (B198, 215 g; B199, 994 g; B200, 2167 g), multiplied by the proportion of each buffer in the EA (B198, 0.24; B199, 0.07; B200, 0.04), weighted by the proportion of the EA occupied by each buffer (B198, 0.06; B199, 0.19; B200, 0.19).

* David Buckeridge, et at. "A Study of the Relationship Between Vehicle Emissions and Respiratory Health in an Urban Area^{1,4}, <u>Geographical & Environmental Modelling</u>, 1998. Vol. 2, No. 1, pp. 23-42 (MapInfo)



Introduction of New Topics



Distance Calculations

• Often used in the context accessibility to health care services

B = 3890 m

A = 2750 m

- Two main types:
 - Straight-line (A)
 - Along network (B)

Example of use*:

Accessibility of Ontario residents to primary care physicians

* PhD Thesis by Eleanor Boyle, Research Associate, Inner City Health Research Unit, St. Michael's Hospital, Toronto, Canada (MapInfo)





Introduction of New Topics

Location Quotient

(Comparative Rate Ratio)

- Often used in studies of area variations
- Example of use*:

 $LQ = (a_x/c)/(b_x/d)$

where a_x is the rate of rheumatology visits in a county, c is the total number of specialist visits in a county, b_x is the rate of rheumatology visits in Ontario, and d is the total number of specialist visits in Ontario.



* PhD Thesis by Eleanor Boyle, Research Associate, Inner City Health Research Unit, St. Michael's Hospital, Toronto, Canada, (SAS, SPSS)





Introduction of New Topics



Spatial Neighbours - Defining

- GIS procedure applied in the analysis of spatial autocorrelation and spatial regression models
- Neighbour can be defined in a binary way (1 or 0) or by a continuous value
- Various criteria for defining neighbours:
 - Common boundary (first order, second order)
 - Distance between centroids of regions
 - Portion of regions' area falling within a distance from a centroid or border of another region
 - Combination of above

GeoDa; S Plus 6 for ArcView; SAS (neighbour analysis based on centroids only)



Neighbours of area A based on adjacency



Neighbours of area A 1000 m distance between centroids₇



Introduction of New Topics



Spatial Autocorrelation (Global)

• Measure of the level of spatial concentrations of variables

$$MC = (\frac{n}{\sum_{i=1}^{n} \sum_{j=1}^{n} c_{ij}})(\frac{\sum_{i=1}^{n} \sum_{j=1}^{n} c_{ij}}{\sum_{i=1}^{n} (x_{i} - \overline{x})(x_{j} - \overline{x})})$$

$$GR = (\frac{n-1}{2\sum_{i=1}^{n}\sum_{j=1}^{n}c_{ij}})(\frac{\sum_{i=1}^{n}\sum_{j=1}^{n}c_{ij}(x_{i}-x_{j})^{2}}{\sum_{i=1}^{n}(x_{i}-\overline{x})^{2}})$$

- · when MC approaches +1, there is strong positive autocorrelation;
- · when MC approaches -1, there is strong negative autocorrelation;
- when MC approaches -1/(n-1) there is a random distribution of values.





Moran Coefficient = 0.375 Geary Ratio = 0.5000

Map B

Map C





Moran Coefficient = -1.000 Geary Ratio = 1.800

Moran Coefficient = -0.3625 Geary Ratio = 1.2000

Statistic\Value	-1.0	0.0	1.0	2.0
Moran Coefficient	Strong negative autocorrelation	Random distribution of values	Strong positive autocorrelation	
Geary Ratio		Strong positive autocorrelation	Random distribution of values	Strong negative autocorrelation



Introduction of New Topics



Spatial Autocorrelation (Global)

Example of use*

Numeric result (Moran's I): 0.5615, p<0.05

Graph visualization: Moran's Scatterplot



Original Map: strong spatial clustering present



* Glazier RH, Creatore MI, Gozdyra P, Matheson F, Steele L, Boyle E. Geographic methods for understanding and responding to health disparities in mammography use in Toronto, Canada. Revisions requested October 2003, Journal of General Internal Medicine.





Local Indicator of Spatial Association

- Location-specific statistic showing the pattern of heterogeneity across the study area
- Proportional to global spatial autocorrelation
- Shows statistically significant groupings of neighbours with high and with low values around each region in the study area
- Helps identify 'hot spots' or clusters of regions with similar values.

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Local Indicator of Spatial Association^{ur}

• Local Moran* $I_i = z_i \sum_{j=1}^{n} w_{ij} z_j$

where z_i and z_j are deviations from the local mean for region *i* and its *j* neighbours respectively, w_{ij} are the weights for neighbouring regions

Outputs of Analysis**

Cluster map

ding with Innovati

ST. MICHAEL'S HOSPITAL



Stat	Sti	CS
Local_Moran	Cluster	P_Value
0.0867250	0	0.422
0.1215360	2	0.044



(low-high), 0 (non-sign)





* Anselin Luc. Local Indicators of Spatial Association – LISA. Geographical Analysis, Vol. 27. No. 2 (April 1995)

** GeoDa software: freeware



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Spatial Regression Analysis

- Applied when a non-trivial portion of the model's variance can be explained by spatial distribution of input and outcome variables.
- Indication: high level of spatial autocorrelation of model's error term, e.g.: MC>=0.2
- Non-spatial regression model basic notation: $Y = X\beta + \epsilon$
- Spatial autoregressive model basic notation: $Y = X\beta + \rho Wy + \epsilon$
- SAR in SAS: Mixed procedure with Random statement for modelling spatial component as centroids

(Source: Rahim Moineddin, PhD, Department of Family & Community Medicine, University of Toronto, Toronto, Ontario, Canada)

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Spatial Regression Analysis

Example*

Health outcome: percent of women 45-64 with mammogram

	Basic notation: $Y = X\beta + \varepsilon$			
Non-spatial	Variable	Parameter Estimate	P-Value	SA Residuals
regression model	Low Income	-0.0024	<0.0001	0.48
	Rec Immig	-0.0039	<0.0001	0.63
	Any MD visit	0.3335	<0.0001	0.72
		Basic notatio	n: Y = Xβ	+ ρWy + ε
Spatial	Variable	Parameter Estimate	P-Value	SA Residuals
autoregressive	Low Income	-0.0015	<0.0001	0.01
model	Rec Immig	-0.0025	<0.0001	0.01
		0.2076	<0.0001	0.15

* Glazier RH, Creatore MI, Gozdyra P, Matheson F, Steele L, Boyle E. Geographic methods for understanding and responding to health disparities in mammography use in Toronto, Canada, Revisions requested October 2003, Journal of General Internal Medicine



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Cluster Analysis of Point Data

Using Spatial Scan Statistics*

- Detect spatial, temporal and space-time clusters of point data
- Centroids of regions can be used as proxy for point data
- Search with varying size window using either Bernoulli or Poisson process
- Other methods: quadrant, kernel estimation, K-function



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Cluster Analysis of Point Data

Example of Use

Source point data (shown on proportional symbol map)

Clusters based on point data





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Cluster Analysis of Point Data Example of Use

Overlay of point data and clusters







Hands-on Small Group Interaction

- 1. Introduce yourself to those at your table. Choose a rapporteur.
- 2. Examine hard copies and transparencies of maps.
- 3. What approaches would you use in analyzing these patterns?
 - a) What usual approach would you use?
 - b) What spatial patterns do you see (e.g. 'hot spots')?
 - c) What further maps and spatial analyses could be useful?

d) Can you use the visual patterns to identify policy and/or clinical interventions to improve mammography rates?

Resources

Reference type:	Slides:
Books	
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Cromley E. et al. <i>GIS and Publuc Health</i> . The Guilford Press, New York, 2002	5, 7, 11, 12, 24-26
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 [™] Spatial-statistical operations can be conducted using combination of these software packages [◎] Freeware 	