PolicyMap Session 1
May 3, 2017

Listed as a database
www.library.shu.edu/policymap (SHU subscription, free version available)
www.library.shu.edu/policymapgs (Research Guide)

Who is using PolicyMap on campus?

Exercise 1:
Find 3 counties in New Jersey that have high obesity rates and 3 counties that have a low obesity rate. Can you make any conclusions based on geography or income?

Exercise 2:
Veterans and Depression – is there a relationship?
Look at the number of vets in Union vs. Warren County, NJ
Where did you find the data for depression?

For next session:

Watch: Mapchats - PolicyMap In the Classroom 2017 with Anne Hewitt (SHMS)

Assignment: Create one shaded map and one table that you could show a faculty member in one of your departments. You can use regular maps (one data point) or 3 Layer Map for the map. Use Table to create a table. Download the file (Print icon) into a Word document. Be prepared to share your findings.
Examining Chlamydia in Pennsylvania Amongst College Age Students, more prevalent among women compared Philadelphia vs. Centre counties

Google search prevalence for “chlamydia symptoms”

Cross sectional data can be limited

Showed purple shading, made it easy to identify trends

Showed table too

Risk Factors Associated with Obesity

3 High Obese Counties – Cumberland, Glouster, Camden

Low obese – Hunterdon, Morris, Somerset

11th lowest obesity in country

Contrast – Philly – Montgomery County – county by county contrast –

Somerset county – 27% or less,

Camden county – linked to poverty – dark purple areas have both in common, looked at Farmers Markets (fewer in Camden)

Obesity linked to limited service grocery (bodega) and food stamps

Stateofobesity.org

Food Insecurity

Low income, lack of transportation, little access to food markets (nutritional value); food deserts – little or no access to fresh fruit and vegetables, if public transportation, can be expensive

Might be on SNAP or WIC but can find places who accept them

Looked at state – about ¼ food insecure

Focused on Essex County – wished could zoom in by city – looked at county level only

Filtered Farmers Market Locations to see if they accept SNAP, only S Orange does

Cash welfare – 17B business

Food stamps – 80B business

Pop Distribution and Individuals Diagnosed with Diabetes in Essex County

Association physical activity and inactivity (correlation coefficient)

Dietary habits – access to fruits and veg (correlation coef) – recommended daily dosage

Food access problems

Correlation bet physical activity and diabetes

Correlation between vegetable consumption and diabetes

Want census tract level data for fast food consumption

RWJ Foundation underwrote non profit grocery store in Chester, PA.
Diabetes and Income in Cape May and Essex County
Role of income and chronic diseases; role of social determinants
% of adults in Cape May county – look at shading
Two layer map – hh income <50K, diabetes and education
See something beyond race fueling diabetes rates. (Cape May, 4% Afam, Essex 40 Afam, but both have same diabetes rates 12-13%
Other social determinants that contribute to diabetes rates

Veterans and Depression: An Associative Relationship?
On you tube Leslie Landym and Alexandr Z
Union (<7%) vs Warren County NJ – more vets in Warren (30%)
Medicare beneficiaries with depression

Smoking cigarettes and rates of lung/bronchus cancer
Showed maps side by side in US map
Maps show single point in time, so can be limited
Florida, New York State
Then looked at smokers and level of education
% of ppl in each county with at least bachelors degree
Dixie County Fl, Orange County NY
Impact of excise tax (higher in NYS, 4.35 vs 1.34 in Florida)

Effect of Per Capita Income on Mental Health
Union and Springfield townships (both in Union County)
Per Captia Income
% of adults reporting 7 or more Mental Health days a month
Showed golf clubs
Springfield – double per capita income from Union, all dark purple – could change scale
Set less than median to show boundaries
Can draw theoretical region
Limitations – can only work with the data that you have

General
Maps as first step of research, not last
Drill down with data – township and borough level
Gives students data for health intervention – only had dast food data for county level not census tract
Maps are snapshot in time, may not show how population etc is impacted by tourism (or college towns); Cape May is tourist based – so residents face seasonal flows, flat wage structure, tip dependent
For librarians –
Watch tutorials prior to session
A few scenarios, discussion
Then create 2 scenarios for their areas – what do maps show

Tried to upload data – not easy – want coordinates
Compare 2 maps in same screen
Orange blends in for markers
Thick black border for country
Thinner color to see country too
Cut out areas on map
Black out areas you don’t want, excise area you are interested in
Ranges – more color choices
Food insecurity – only vounty level, want to city
MORE CONSITENCY – show 2015 only or
Cross sectional data too complicated – want guide

Would use in their day job
How to guide and workshops for internships – half class would use – w Dr. Hewitt

What is most commonly used mapping tool in healthcare

RWJ - $$ in county health data – can we upload into PolicyMap