# Healthy Bodies, Bright Minds

The Impact of Healthcare Access on Children's Academic performance

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## PROBLEM AND DATA

We are interested in exploring the effect of healthcare access on academic performance.

Research shows that school absences have negative impact on grades and students' academic achievement.

The National Survey of Children's Health (NSCH) dataset





- For the health data, we use **NSCH** dataset to generate our "access to healthcare" features (e.g. children's current health care coverage, how often the child is allowed to see providers).
- Model will include other health related features

**Predicting variables:** access to healthcare features, other health-related features



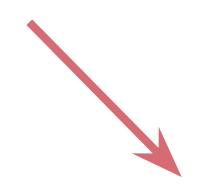
For the educational data, we use "days missed in school" from NSCH as a metric of student educational outcome, to avoid introducing bias by gluing separate datasets.

Target variable: days missed in school

## **EDA AND IMPUTING**

**Dropped** NaNs from target variable (days\_missed)

We used a random forest classifier to impute missing values in the training data



**Replaced** conditional NaN values with 0

(e.g. healthcare cost = \$0, then costs\_reasonable = NaN)



## FEATURE SELECTION: 3 METHODS



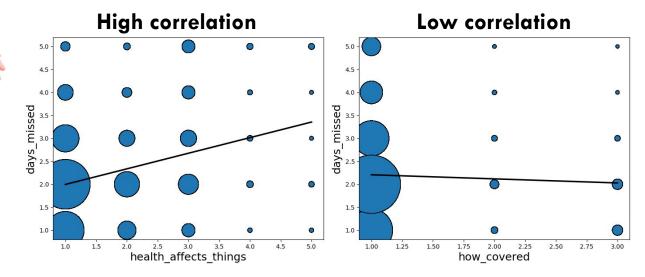
I. Handpick: We parsed through the 447 features in the NSCH dataset, picking any related to healthcare access

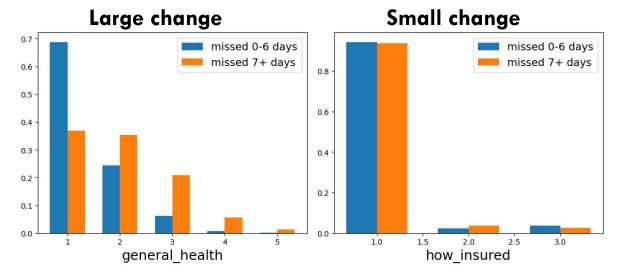
#### 2. Correlation analysis:

We computed the linear correlation between each feature and the number of days missed, keeping features with high correlation

#### 3. Histogram analysis:

For each feature, we measured the change in histogram shape among children with low and with high absenteeism, keeping features with sufficiently different histograms





## **MODEL AND FEATURE SELECTION 2.0**

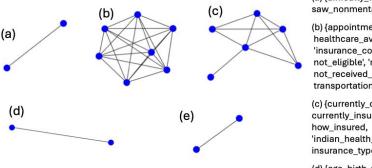
#### **Model selection**

- We trained and evaluated a **logistic regression** classifier, a **random forest** classifier, a **support** vector classifier, and a KNN classifier to predict whether children will miss more than 7 school days.
- Of these, logistic regression performed best on the metrics of **recall** and **average precision score**.

#### Feature selection 2.0

We first checked for collinearity and eliminated all but one feature from each highly co-linear "cluster" found

#### High-correlation clusters



#### Features in clusters

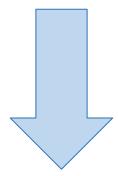
(a) {difficulty with specialist saw\_nonmental\_specialist}

(b) {appointment\_problems healthcare\_availability insurance cost issue, not\_eligible', 'not\_open, not received healthcare. transportation}

(c) {currently covered. currently insured, how covered, 'indian health services. insurance type}

(d) {age, birth\_year}

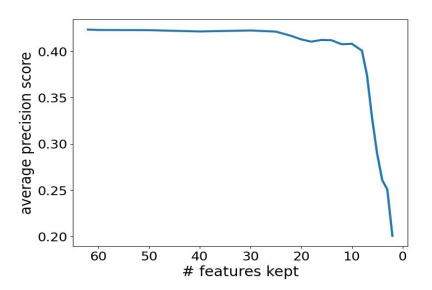
(e) {doctor\_visit, num\_checkups}



Through this process, we constructed out a model using 10 total features



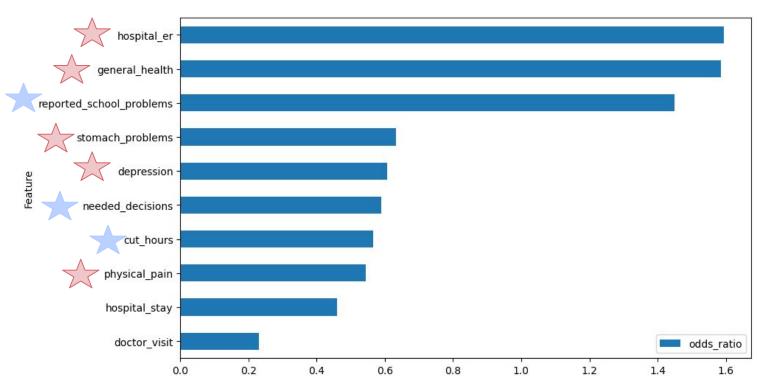
We then used recursive feature elimination (RFE) to narrow down our features until model performance was affected







#### We computed the **odds-ratios** of our ten-parameter model



Overall, we found that poor health was strongly related to absenteeism



Specifically, we found that a higher number of missed days was predicted by poorer general health and more time spent in the hospital, as well as the presence of depression, chronic physical pain, and digestive problems



Additionally, children who reported having problems at school, needed healthcare-related decisions made on their behalf, or experienced health problems for which their family needed to cut work hours were also found to be more likely to miss school



Many features related to health affect absenteeism!

But, how about the features related to health care access?

## **CONCLUSIONS AND FUTURE DIRECTIONS**



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The preliminary results suggest that access to health care is not the strongest predictor of child absenteeism

It is possible that the relationship between access to health care and absenteeism was drowned out by the more potent predictors of missed days, such as the general health of the child. A future study could control for predictors which are more related to access to healthcare

Likewise, it is possible that absenteeism is a poor metric for education outcomes; future work could try other metrics, such as grades or scores on standardized tests

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