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Number	394,019	148,497	86,128
РТВ	8.25%	12,27%	6.92%
.BW	5.38%	11.33%	4.93%
SGA	7.28%	15,23%	8.96%



36 58,405 0.74) 0.33 (0.60) 1.50 -1.29, 1.50
9413 0.60) 0.47 (0.64) 1.31 -1.74, 1.31
7 3299 (.54) 0.37(0.30) 1.54 -0.25, 1.01

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proto EQI - conclusion summary of findings

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- Among women living in the most urban NC counties (RUCC 1) higher values of the proto-EQI was associated with lower odds of all three birth outcomes (PTB, LBW, SGA) for white non-Hispanic women
- Among women living in non-urbanized NC metropolitan counties (RUCC 2), higher values of the proto-EQI was associated with increased odds of PTB for white and black non-Hispanic women and LBW for white non-Hispanic women

proto EQI - conclusion summary of findings

- There appeared to be no association between environmental quality (as measured by the proto-EQI) and adverse birth outcomes for women living in the RUCC 3 NC counties (less urban) counties
- Among women living in the most rural areas (RUCC
 4), higher values of the proto-EQI were associated with lower odds of PTB and LBW among Hispanic women



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Potentially limited exposure ranges

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"County" may be too diffuse for meaningful associations

+ proto EQI - discussion strengths Proto-EQI construction strengths First attempt to model the multifactorial nature of environmental exposures Able to incorporate multiple variables representing multiple domains Appropriate urban-rural distinctions in variable loadings Proto-EQI - birth outcome analyses strengths Large numbers of women distributed across NC's 100 counties Large numbers of adverse birth outcomes to allow observation of small effects

Analyses brought insight for future explorations

proto EQI - discussion future directions

Finalize EQI construction

- Conduct sensitivity analyses
- Construct index at lower levels of geographic aggregation
- Develop regional indices
- Consider associations with other health outcomes



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	Thank you.	
+	Any questions?	