

ADOLESCENT HEALTH BEHAVIOR AS A MEDIATOR OF THE EFFECT OF PARENTAL INCOME ON ADULT CARDIOMETABOLIC CONDITIONS AND CANCER



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1 OBJECTIVE

To assess the mechanisms by which health-related behaviors during adolescence mediate the effect of parental socioeconomic conditions on chronic disease in adulthood.

2 BACKGROUND

3 METHODS

- Chronic diseases constitute 64% of burden of disease and 75% of mortality globally
- **Data source:** National

Longitudinal Study of



Health

- Public health recommendations to prevent chronic diseases focus on intervening on health-related behaviors without also addressing socioeconomic conditions (e.g. parental income) underlying these behaviors
- From a life course perspective, socioeconomic conditions mediated by health-related behaviors during adolescence can have an effect on chronic disease risk in adulthood. **How?**
- Two (non-mutually exclusive) pathways for how adolescent health-related behaviors mediate the effect of parental income on chronic disease in adulthood:

Adolescent to Adult Health (Add Health), nationally representative prospective cohort in US, 1994 – now National Longitudinal Study of Adolescent

Adolescence	Transition to Adulthood	Young Adulthood —	Adulthood
Wave I-II (Ages 12-20)	Wave III (Ages 18-26)	Wave IV (Ages 24-32)	Wave V (Ages 31-42)

- Variables of interest:
 - Exposure: • Mediator: • Outcomes:
- Counterfactual mediation analysis (VanderWeele)

1. Differential exposure: low parental income increases

exposure to unhealthy behaviors during adolescence

2. Differential susceptibility: low parental income

increases *effect* of unhealthy behaviors during

adolescence



- 1. Pure indirect effect (differential exposure)
- 2. Portion attributable to interaction (differential susceptibility)

4 DISCUSSION



Strengths:

Longitudinal data with regular follow up spanning over 20 years

Limitations:

Strong assumption of no unmeasured confounding \bullet

Adulthood

Misclassification bias

5 **POTENTIAL IMPLICATIONS**

Decomposing effects of differential exposure and differential susceptibility can aid decision of whether preventive intervention strategies should be targeted to specific susceptible groups or directed at the entire population.

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