

neighbourhood deprivation does not explain the higher levels of mortality in Glasgow compared to similarly the deprived post industrial cities of Liverpool and Manchester. The distribution or patterning of deprived neighbourhoods in Glasgow may in part be an explanation for differences between health outcomes in Glasgow and similar deprived post industrial cities.

Using a combination of mortality, deprivation and contextual data at a neighbourhood level this study examines: the extent to which the distribution or patterning of deprived neighbourhoods is associated with differing neighbourhood health outcomes; whether any variance in the patterning of deprived neighbourhoods in the three cities can be detected; and more specifically, whether the difference in patterning of deprived neighbourhoods is in part an explanation for the poorer health experienced in Glasgow compared to Liverpool and Manchester?

01-1.5 **EXAMINING THE DIFFERENTIAL ASSOCIATION BETWEEN SELF-RATED HEALTH AND AREA DEPRIVATION AMONG WHITE BRITISH AND ETHNIC MINORITY PEOPLE IN ENGLAND**

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Introduction Studies that have examined interactions between individual and contextual characteristics have revealed variations in the

social gradient in health depending on area-level deprivation, reporting increased health inequality in less deprived areas. The present study examines whether similar variations are found between the environment and other individual characteristics, exploring whether the link between area deprivation and self-rated health (SRH) depends on an individual's ethnicity.

Methods Data from the 2007 Citizenship Survey were geocoded to the 2001 UK census, and random effects multilevel logistic regression models were conducted to examine: whether the association between area deprivation and poor SRH differs for ethnic minority groups, as compared to white British people; and whether possible differential associations are mediated by neighbourhood characteristics.

Results A detrimental association was found between area deprivation and poor SRH across ethnic groups, but effect sizes were found to be larger for white British than for ethnic minority people. Interaction between area deprivation and ethnicity showed the detrimental association between area deprivation and SRH to be of greater magnitude for white British than for ethnic minority people. This differential association was not mediated by neighbourhood characteristics.

Conclusion The association between area deprivation and SRH was found to be less strong for ethnic minority than for white British people, but this was not mediated by neighbourhood characteristics. Other hypothesised explanations include a higher degree of deprivation in ethnic minority neighbourhoods not captured by the deprivation measures used, and habituation effects due to ethnic minority people's cumulative exposure to poverty.