

CHAO ZHOU

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CURRENT POSITION

Lecturer, Department of Economics, Central Michigan University, August 2009~

EDUCATION

Ph.D., Economics, Boston University, Boston MA, December 2009 (expected)
Dissertation Title: *Essays on the economics of race and health care*
Dissertation Committee: Robert Margo, Randall P. Ellis and Daniele Paserman

M.A., Economics, Central Michigan University, Mount Pleasant MI, 2002
B.A., International Trade and Business, University of International Business and Economics,
Beijing, China, 2000

FIELDS OF INTEREST

Applied Microeconomics, Health Economics, Economic History

TEACHING EXPERIENCE

Instructor, Master level Economics of health care, Central Michigan University, Fall 2009
Instructor, Principle of Microeconomics for Business, Central Michigan University, Fall 2009
Teaching Assistant, Game Theory, Boston University, Spring 2004
Teaching Assistant, Money and Banking, Boston University, Spring 2003

WORK EXPERIENCE

School of Medicine, Boston University
Research Assistant at Health Care Research Unit 2007-2009
Center for Energy & Environmental Studies, Boston University
Research Assistant to Professor Ian Sue Wing 2004-2005
School of Management, Boston University
Research Assistant to Professor Iain Cockburn 2004

FELLOWSHIPS AND AWARDS

Institute for Economic Development Travel Grant, Boston University, January 2009
Institute for Economic Development Travel Grant, Boston University, June 2008
Research Assistant Fellowship, Boston University, 2004-2005
Graduate Student Teaching Fellowship, Boston University, 2003-2004
Graduate Student Fellowship, Central Michigan University, 2000-2001

WORKING PAPERS

“The Impact of Hospital Integration on Black-White Differences in Mortality: A Case Study of Motor Vehicle Accident Death Rates (Job Market Paper)” November 2009.

“Racial differences in hospice utilization among patients with heart failure” with Jane Givens, Jennifer Tjia, Ezekiel Emanuel and Arlene Ash, Forthcoming, *Archives of Internal Medicine*, April 2009.

WORK IN PROGRESS

“Surviving breast cancer in Boston: The impact of racial disparities in health care access”

“Racial discrimination in access to medical care: The South in the post Civil Rights Era”

“The Impact of hospital integration on the employment of African-American physicians”

“The employment of Asian Americans: The public vs. the private sector, 1960-2000”

ACADEMIC EXPERIENCE

2009 International Health Economics Association Scientific Committee (for 2009 and 2011)

CONFERENCES AND PRESENTATIONS

The Northeast Universities Development Consortium Conference, Boston, MA (November 2009)

7th World Congress on Health Economics, Beijing, China (July 2009)

AEA/ASSA Annual Meeting, San Francisco, CA (January 2009)

The 2008 Economic History Association Meetings Poster Session, New Haven, CT (September 2008)

National Bureau of Economic Research Summer Institute–Development of the American Economy Poster Session, Cambridge, MA (July 2008)

2nd Biennial Conference of the American Society of Health Economists, Durham, NC (June 2008)

Economic History Tea, Harvard University, (November 2008 April 2008)

Empirical Micro Lunch, Brown University, (November 2008)

LANGUAGES

Fluent in English and Chinese

COMPUTER SKILLS: STATA, SAS, MATLAB, Microsoft Office

CITIZENSHIP/VISA: CHINA/F-1 STUDENT

REFERENCES

Professor Robert Margo

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Boston University

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Professor Randall Ellis

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Professor Daniele Paserman

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October 2009

The Impact of Hospital Integration on Black-White Differences in Mortality: A Case Study of Motor Vehicle Accident Death Rates (Job Market Paper)

One major result of the civil rights movement of the 1960s was the desegregation of hospitals in the U.S. south. We show that, on average, distance to nearest hospital fell by 50 miles for blacks after integration. We test the impact of this drastic change on accident mortality rates. It seems like the civil rights movement and hospital integration would lead to a decrease in mortality rates for blacks, especially from causes such as car accidents, where timely care is critical. However, we find that car accident mortality rates among southern blacks jumped by almost 30%. This jump was not reflected in mortality rates from other causes. We show that this increase is largely due to higher income resulting from other civil rights measures, which allowed cars to become much more prevalent among southern blacks. We then decompose the overall change into two pieces. First, the income effect caused accident mortality rates to jump. Second, integration improved access to care for southern blacks, which decreased car accident mortality rates by 15%.

Surviving Breast Cancer in Boston: The Impact of Racial Disparities in Health Care Access

In the United States, breast cancer is the most common cancer among women. Although the incidence of breast cancer is higher among white than among black women, blacks suffer worse cancer outcome. Early detection of breast cancer requires medical intervention in the form of screening and clinical examination, as well as monitoring and follow-through on ambiguous findings. This paper studies how racial differences on medical access affect their survival from breast cancer. The data analyzed in the paper were collected at a hospital-based diagnostic breast health practice at a major academic medical center which is also the major safety net hospital in Boston in 2006-2007. Patients served include those who receive their primary care at the academic medical center and those from over 20 affiliated community health centers throughout Boston. Using GIS techniques I measure the distance from each patient's home to the health centers. I show that, on average, black patients had to travel longer distances to obtain treatment. This finding highlights important features of medical access. Some of those disparities were driven by long-standing patterns of racial segregation in housing. But there are more profound forces at play beyond residential segregation. These involve the confluence of patient race, culture barriers, and health care financing.

Employment of Asian Americans: the Public vs. the Private Sector, 1960-2000

The analysis will focus on the different evolution of the wage structures in the public and private sectors for Asian-American men. These differential changes in the wage structure between the public and private sectors sort different skilled workers across sectors. My hypothesis is that the decline in working in public sector reflects the significant improvement in economic opportunities that Asian American workers experienced in private sector in recent decades.