

# Health Policy 201– disparities

Ellen Andrews, PhD  
CT Health Policy Project  
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# Disparities exist

- US blacks are almost ten times as likely to be diagnosed with HIV/AIDS as whites
  - US Hispanics are diagnosed 3.3 times more often
- Blacks are 1.5 times as likely as white to be diagnosed with colon cancer
- Hispanics are 1.8 times less likely to get a pneumococcal vaccination
- Poor parents are 3 times more likely to report poor communication with their child's providers as wealthy parents
  - 1.7 times more likely for Hispanic parents
- Poor women are half as likely to get mammograms

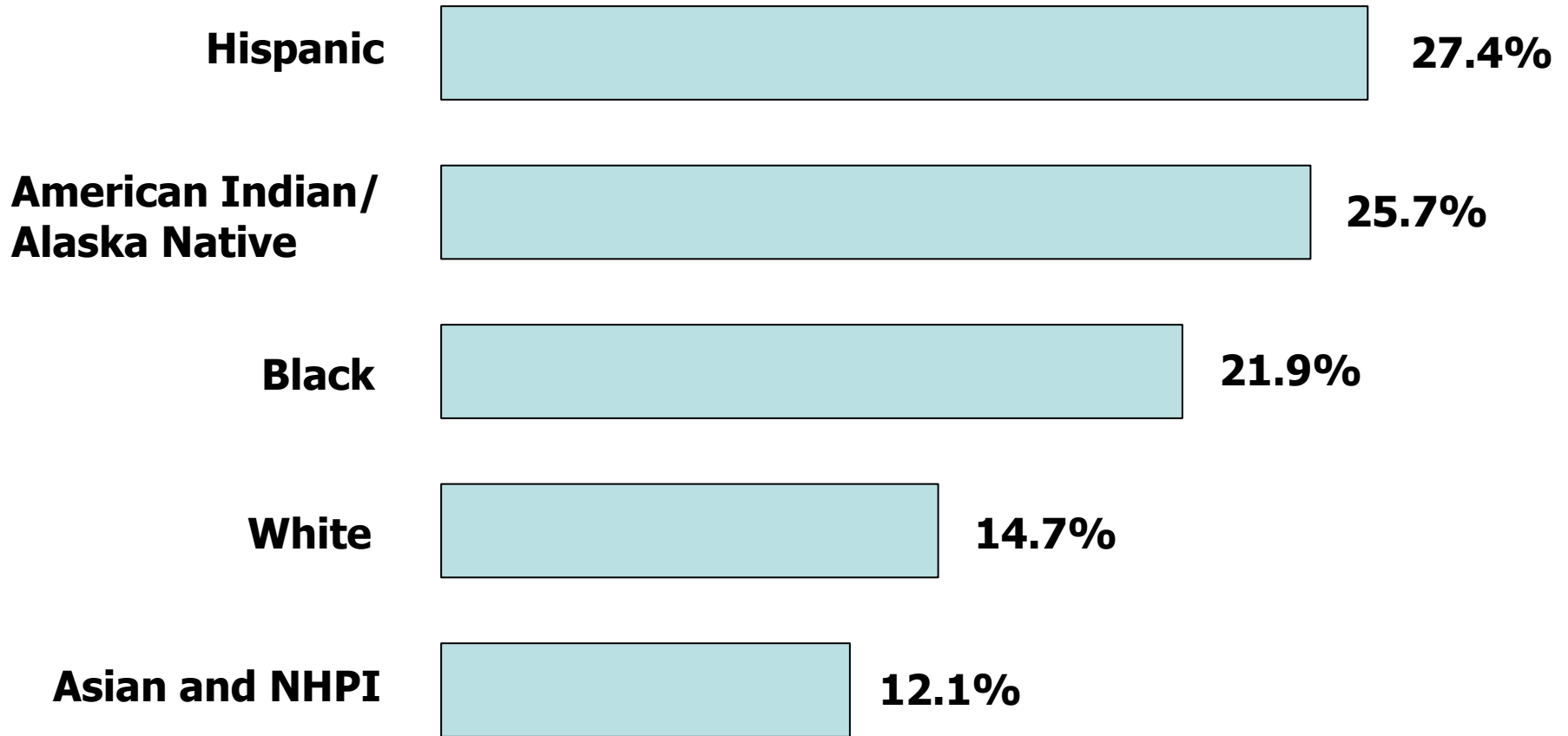
# disparities

- Lung cancer is second most frequently diagnosed cancer and greatest cause of cancer deaths, 1998 - 2006
  - Blacks 76.1/100,000 population
  - Whites 69.7
  - Hispanics 37.3
  - Non-Hispanics 71.9
- Poor and working class patients are less likely to respond to depression treatments – medication and therapy
- Blacks are less likely than whites or Hispanics to get evidence-based stroke care

# Disparities exist

- Many measures are getting worse over time
- Lack of insurance is a major contributor
- Some causes:
  - Lack of access to care
  - Provider biases
  - Poor provider-patient communication
  - Poor health literacy
  - Environmental threats
  - Behavioral factors
  - Educational inequities
- Based on race, ethnicity, gender, income, geography (rural vs. urban), sexual orientation, age, people with disabilities

# Percent of Nonelderly Women Reporting No Doctor Visit in Past Year Due to Cost, by Race/Ethnicity



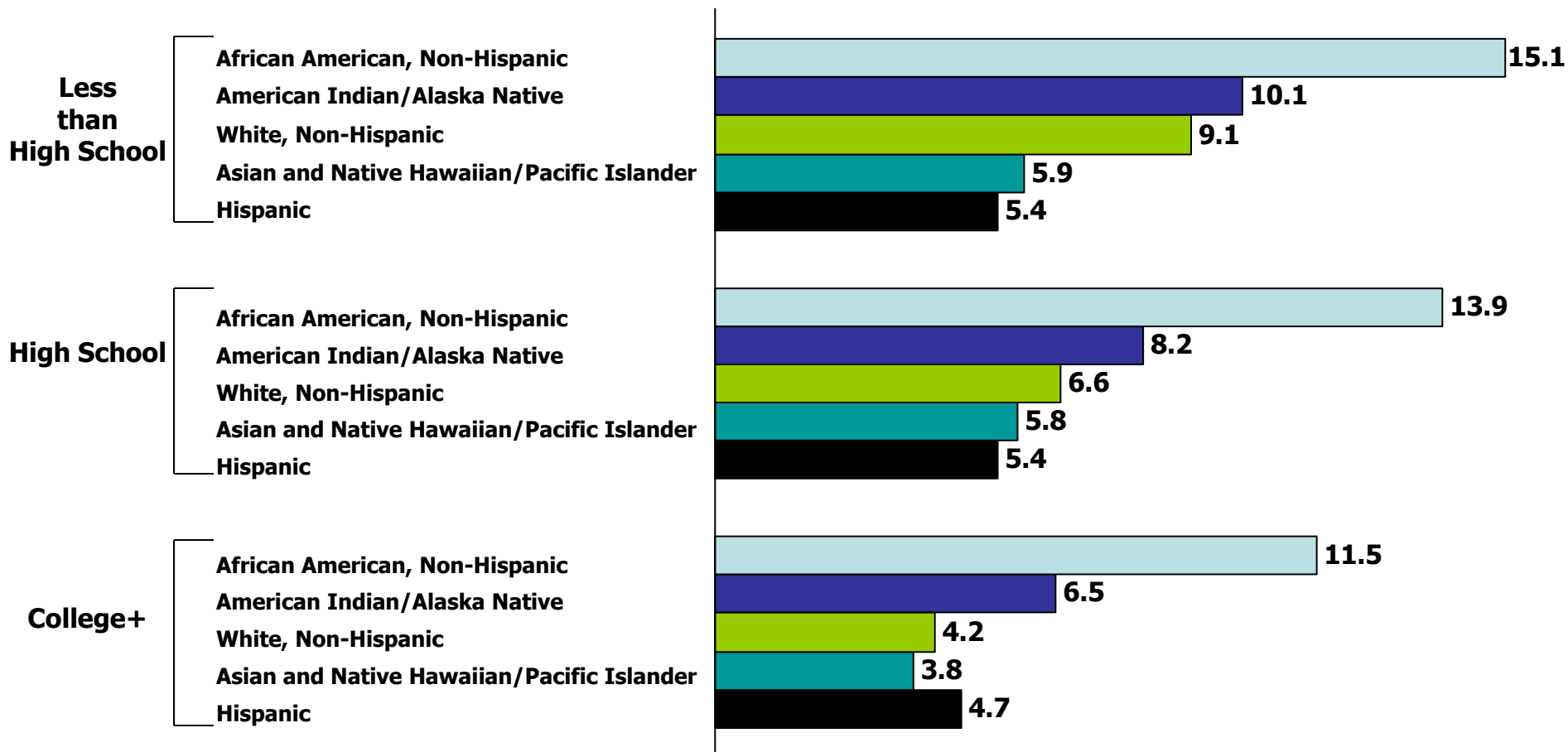
Data: BRFSS, 2004-2006.

Source: The Kaiser Family Foundation, *Putting Women's Health Care Disparities on the Map*, available at:

[www.kff.org/womensdisparities/](http://www.kff.org/womensdisparities/).

# Infant Mortality Rates for Mothers Age 20+, by Race/Ethnicity and Education, 2003-2005

Infant deaths per 1,000 live births:



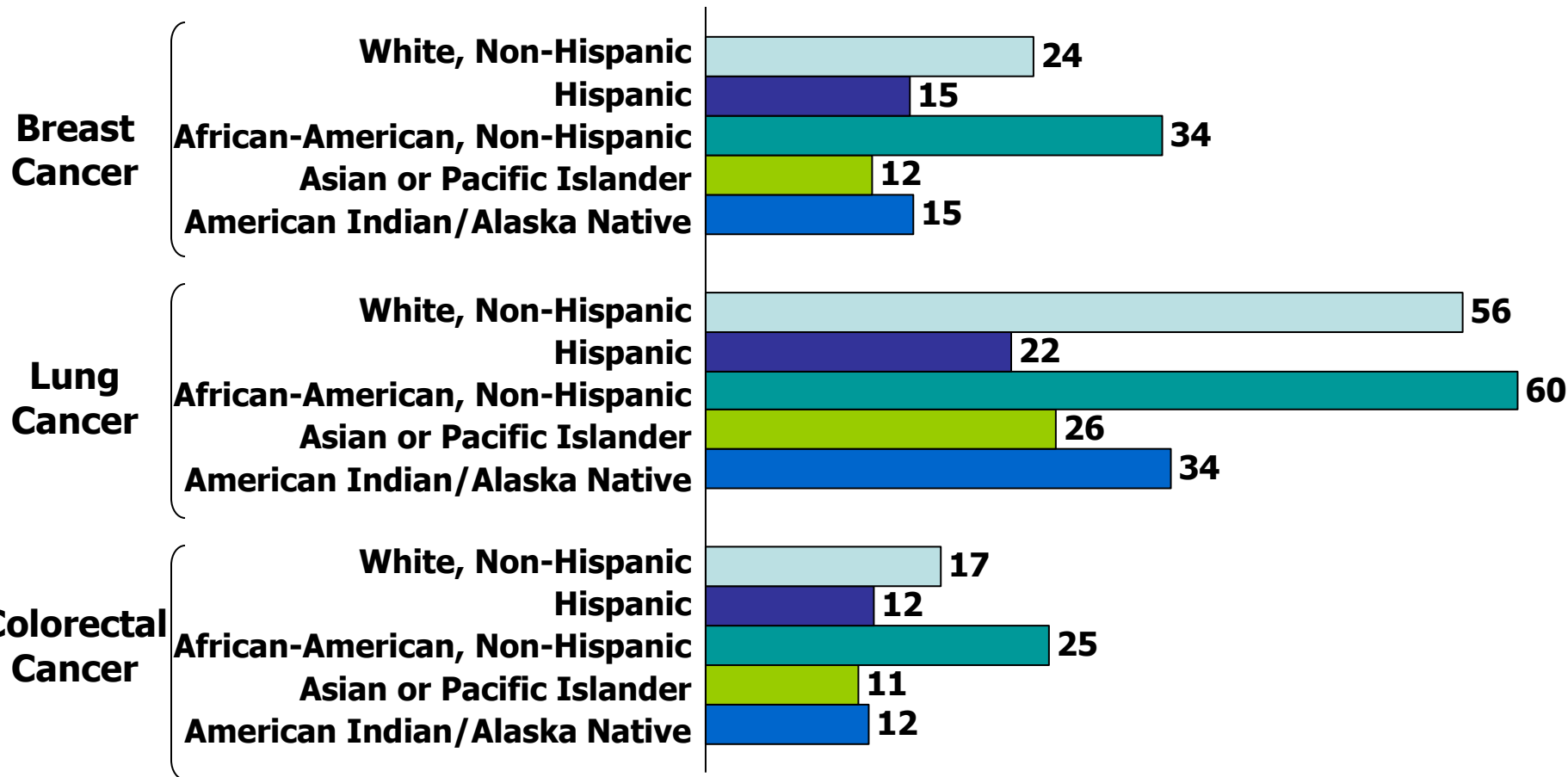
NOTES: Data reported for 37 states, DC, and NYC.

DATA: Centers for Disease Control and Prevention/National Center for Health Statistics, National Vital Statistics System, Linked Birth/Infant Death Data Set.

SOURCE: *Health, United States, 2008*, Table 19.

# Cancer Death Rates by Race/Ethnicity, 2005

Deaths per 100,000 population:



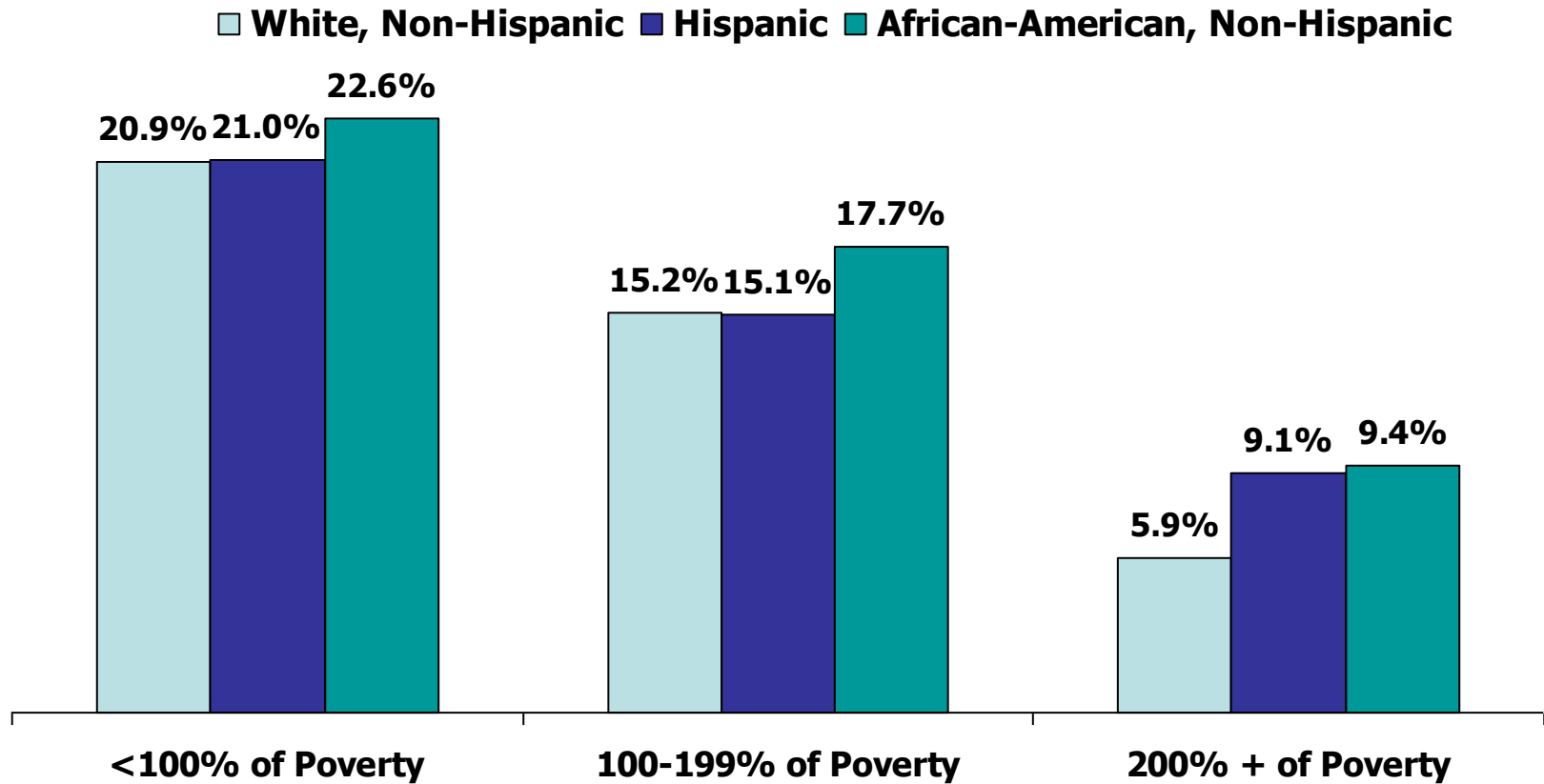
NOTES: Breast cancer rate is per 100,000 female population; other rates are for both genders.

DATA: Centers for Disease Control and Prevention, National Center for Health Statistics, National Vital Statistics System - Mortality.

SOURCE: National Healthcare Disparities Report, 2008, available at: <http://www.ahrq.gov/qual/qdr08.htm>.

# Fair or Poor Health Status by Race/Ethnicity and Income, 2007

Share reporting fair or poor health:



NOTES: Respondents assessed their health status as excellent, very good, good, fair, or poor. The federal poverty level for a family of four in 2007 was \$21,203 (<http://www.census.gov/hhes/www/poverty/threshld/thresh07.html>).

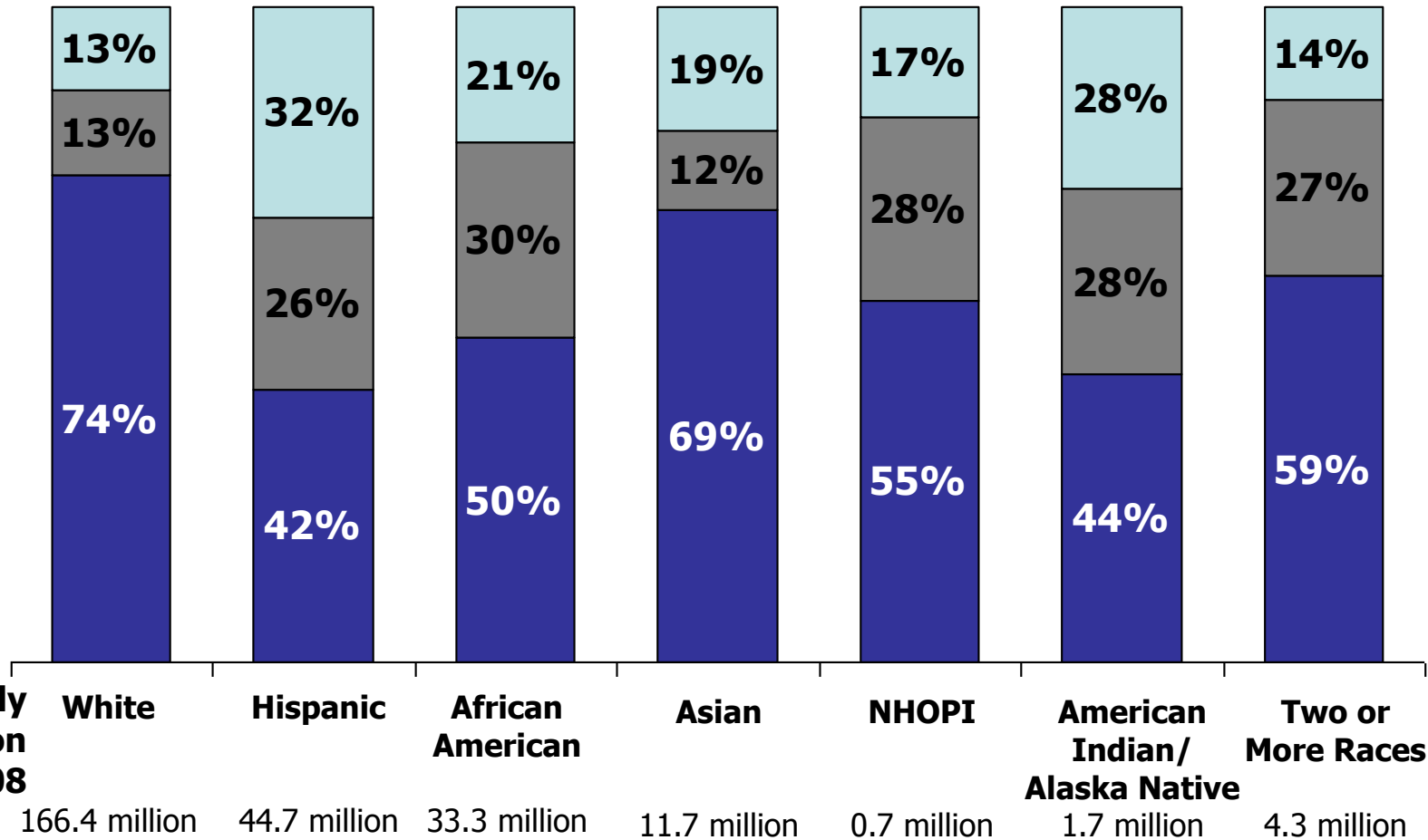
DATA: Centers for Disease Control and Prevention/National Center for Health Statistics, National Health Interview Survey.

SOURCE: *Health, United States, 2009*, Table 57.



# Health Insurance Coverage of the Nonelderly Population by Race/Ethnicity, 2008

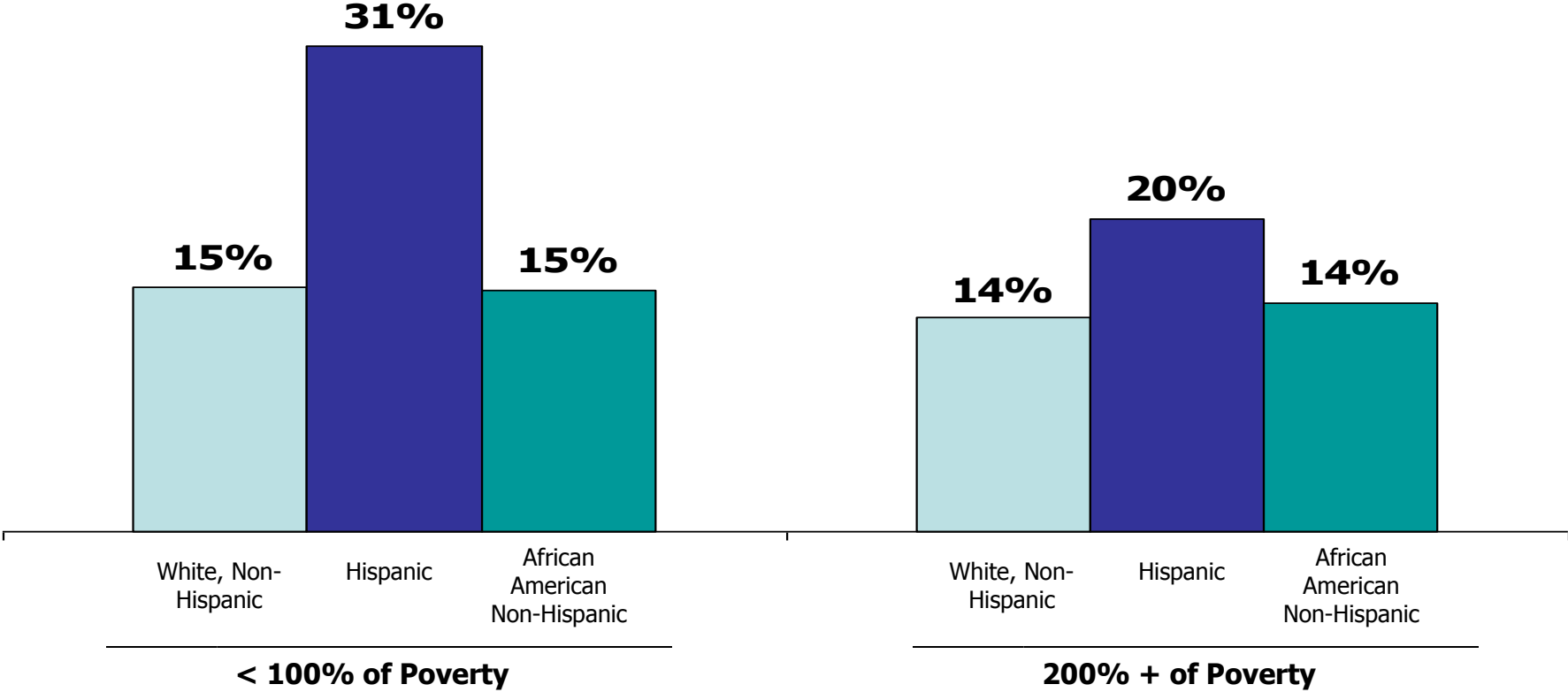
■ Private (Employer and Individual)
 ■ Medicaid and Other Public
 ■ Uninsured



Nonelderly Population 2008

NOTES: "Other Public" includes Medicare and military-related coverage. All racial groups non-Hispanic. NHOPI= Native Hawaiian or other Pacific Islander. SOURCE: Urban Institute and Kaiser Commission on Medicaid and the Uninsured analysis of the March 2009 Current Population Survey.

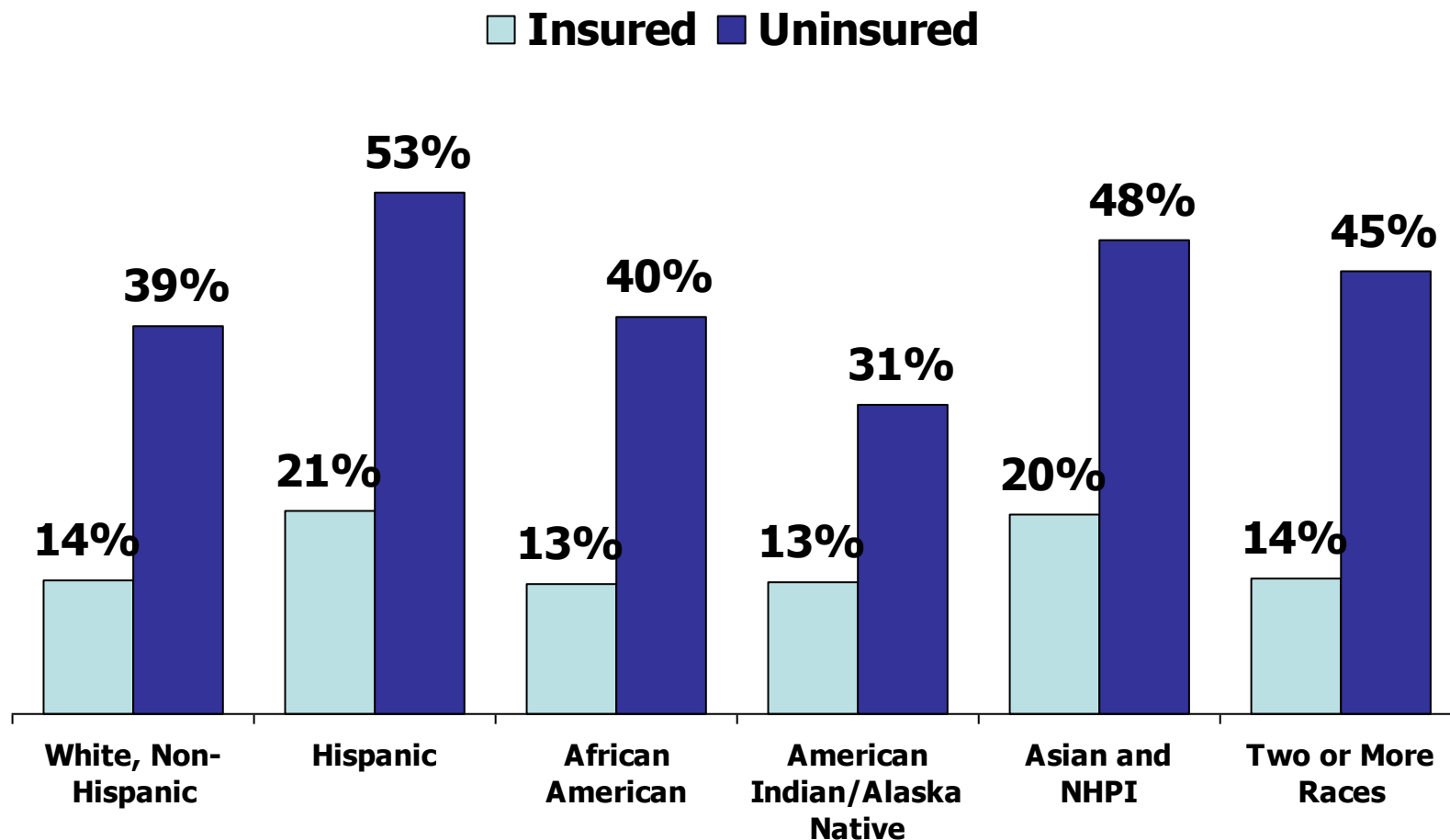
# No Health Care Visits Within the Past 12 Months, by Race/Ethnicity and Poverty Status, 2007



DATA: Centers for Disease Control and Prevention/National Center for Health Statistics, National Health Interview Survey, family core and sample adult questionnaires.  
SOURCE: *Health, United States, 2009*, Table 80.



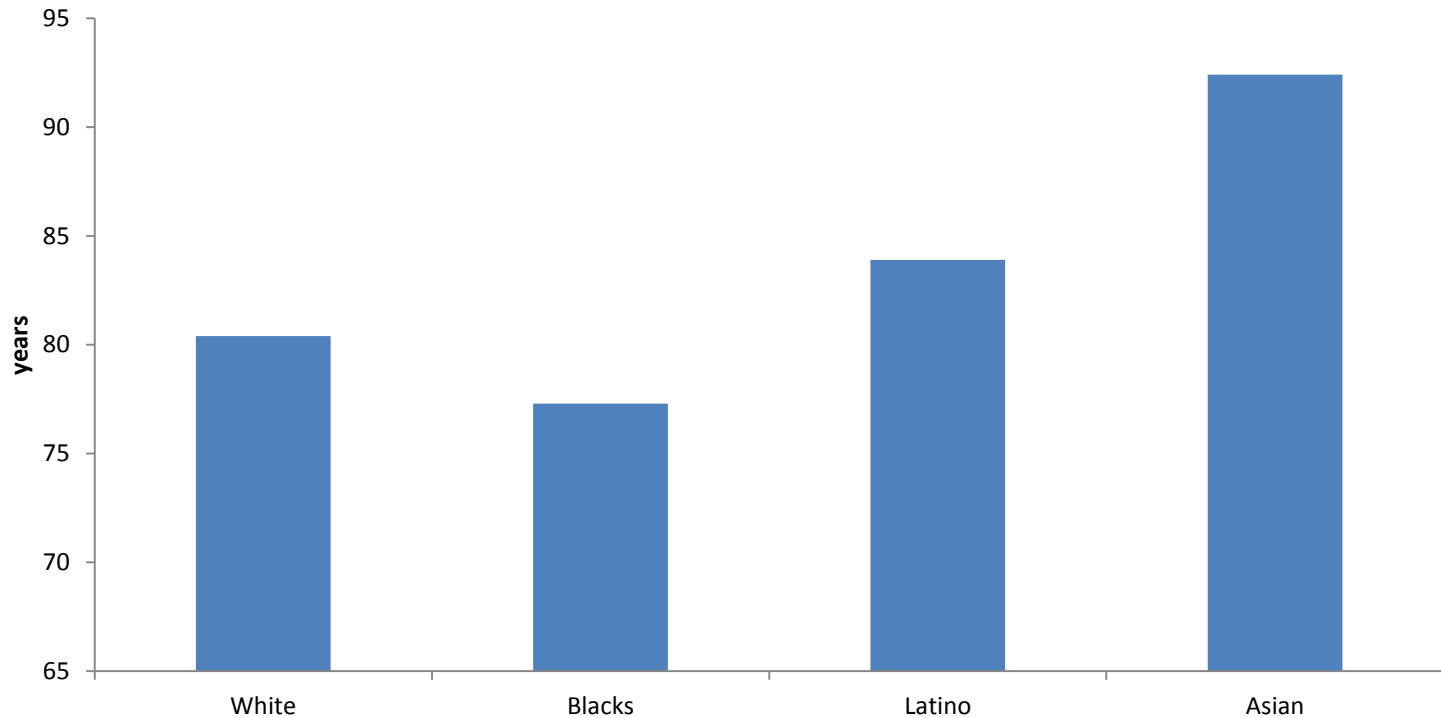
# No Doctor Visit in Past Year for Nonelderly Adults by Race/Ethnicity and Insurance Status, 2005-2006



SOURCE: Kaiser Family Foundation and Urban Institute analysis of the National Health Interview Survey, 2005 and 2006, two-year pooled data.

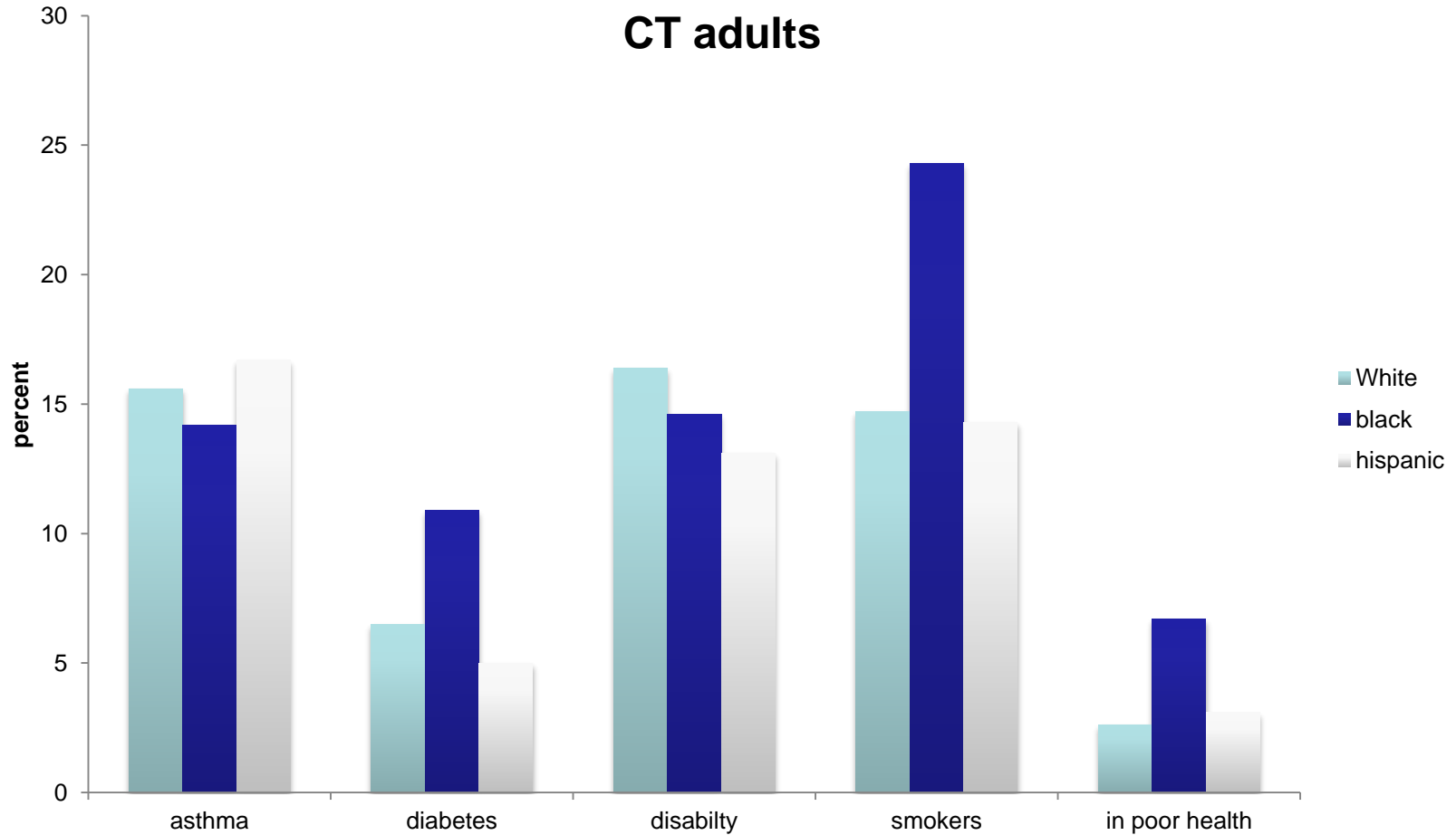
# CT racial and ethnic disparities

Life expectancy at birth, 2007



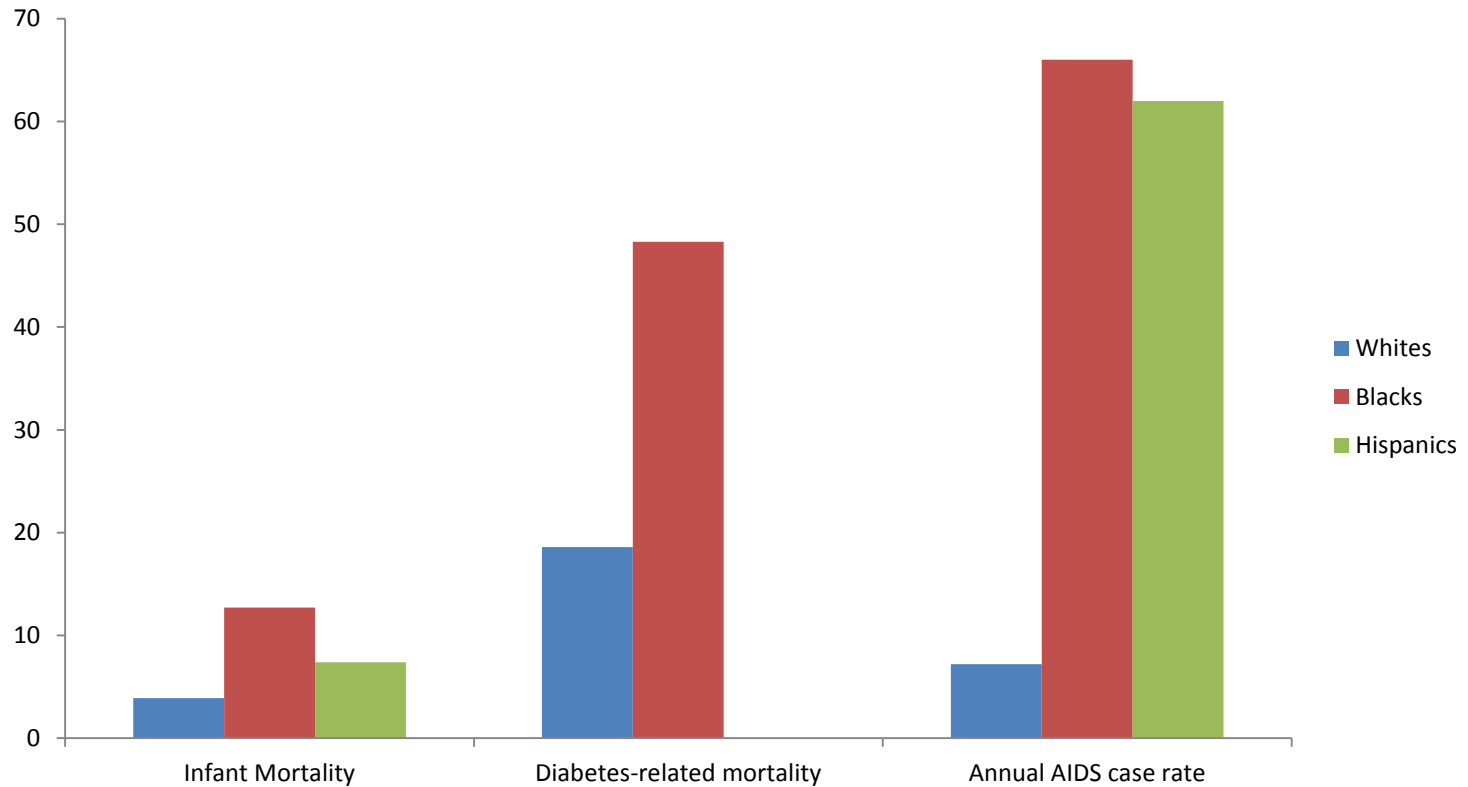
Source: Kaiser State Health Facts Online

# CT racial and ethnic disparities



Source: 2009 BFSS, CDC

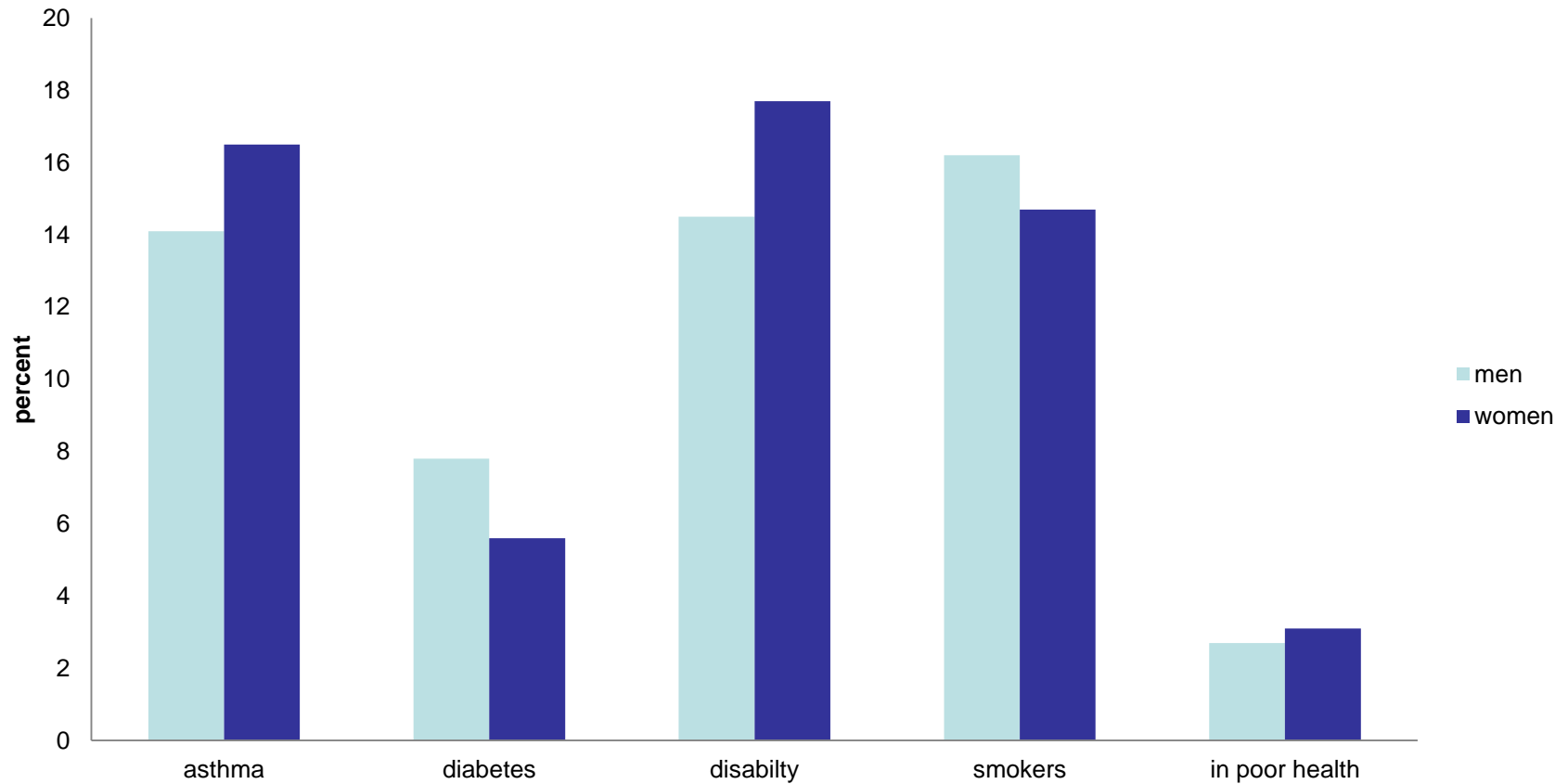
# CT racial and ethnic disparities



Source: Kaiser State Health Facts Online, 2009

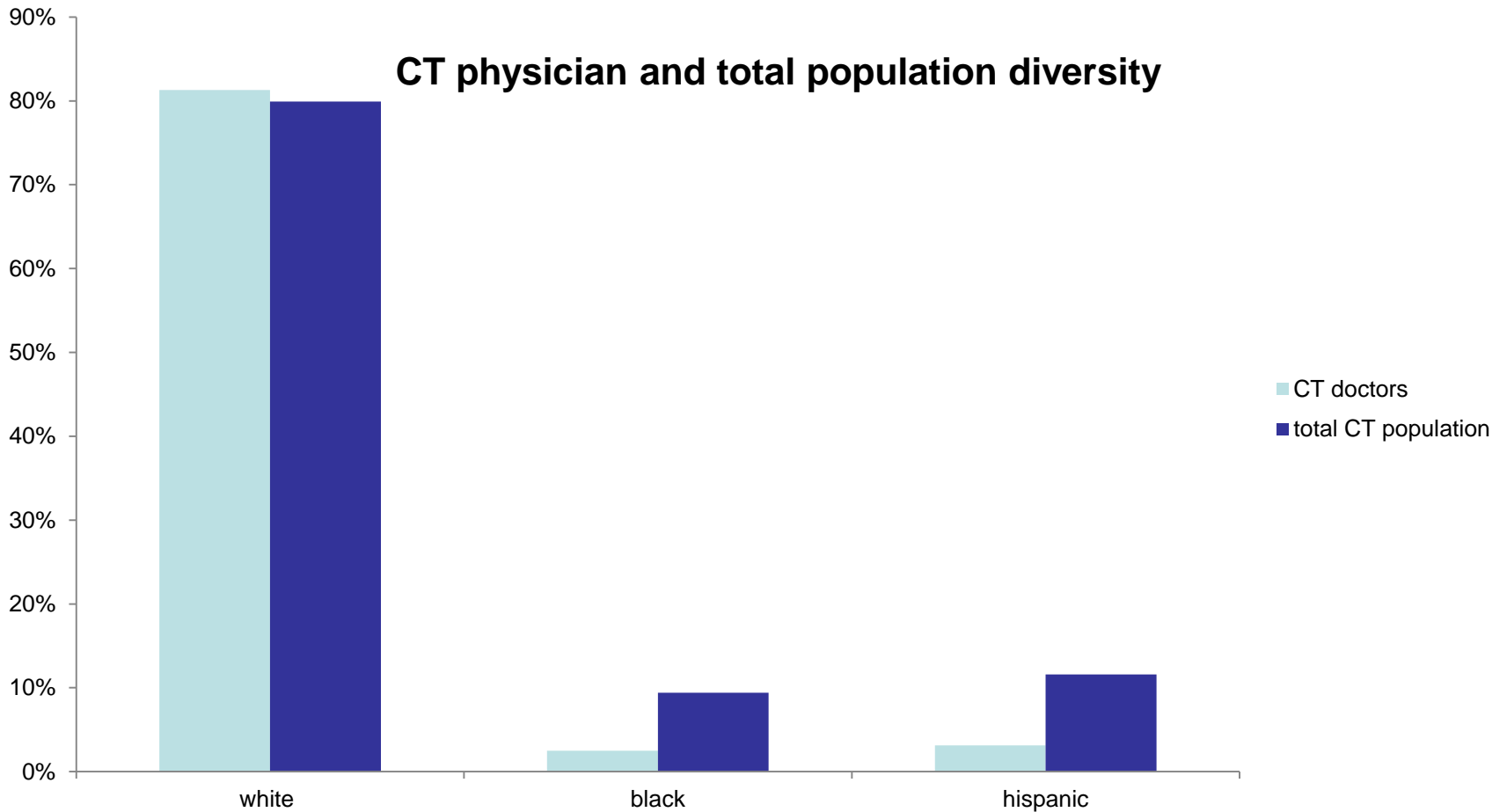
# CT gender disparities

## CT adults



Source: 2009 BFSS, CDC

# CT physicians/population



Sources: Assoc. American Medical Colleges, US Census



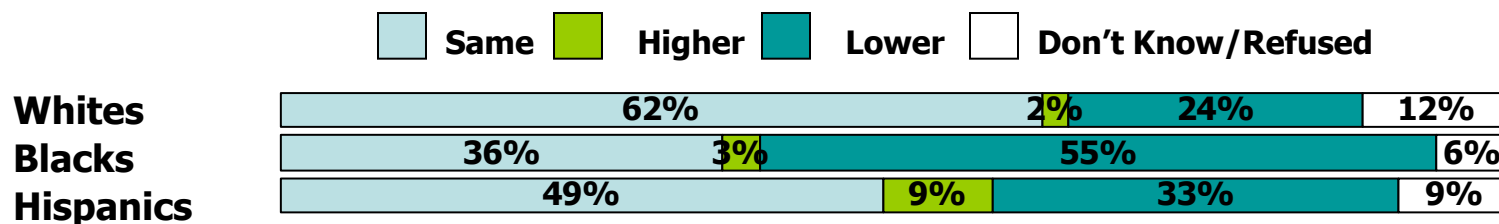
# however

- Black and Hispanic physicians are under-represented compared to population in CT and US
- But we are better than the rest of the US

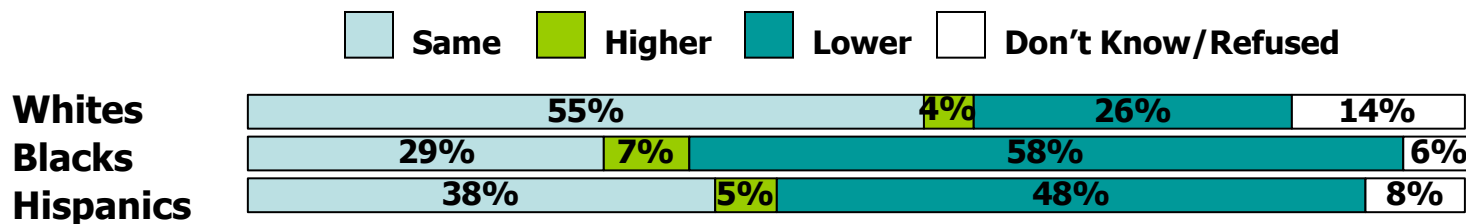
Physicians/ 100,000 population same race	CT	US
Black	83	81
Hispanic	63	51
White	203	171

# Perceptions of Disparities in Health Care

When going to a doctor or health clinic for health care services, do you think most African Americans receive the same quality of health care as whites, higher quality of care or lower quality of health care as most whites?



When going to a doctor or health clinic for health care services, do you think most Latinos receive the same quality of health care as whites, higher quality of care or lower quality of health care as most whites?



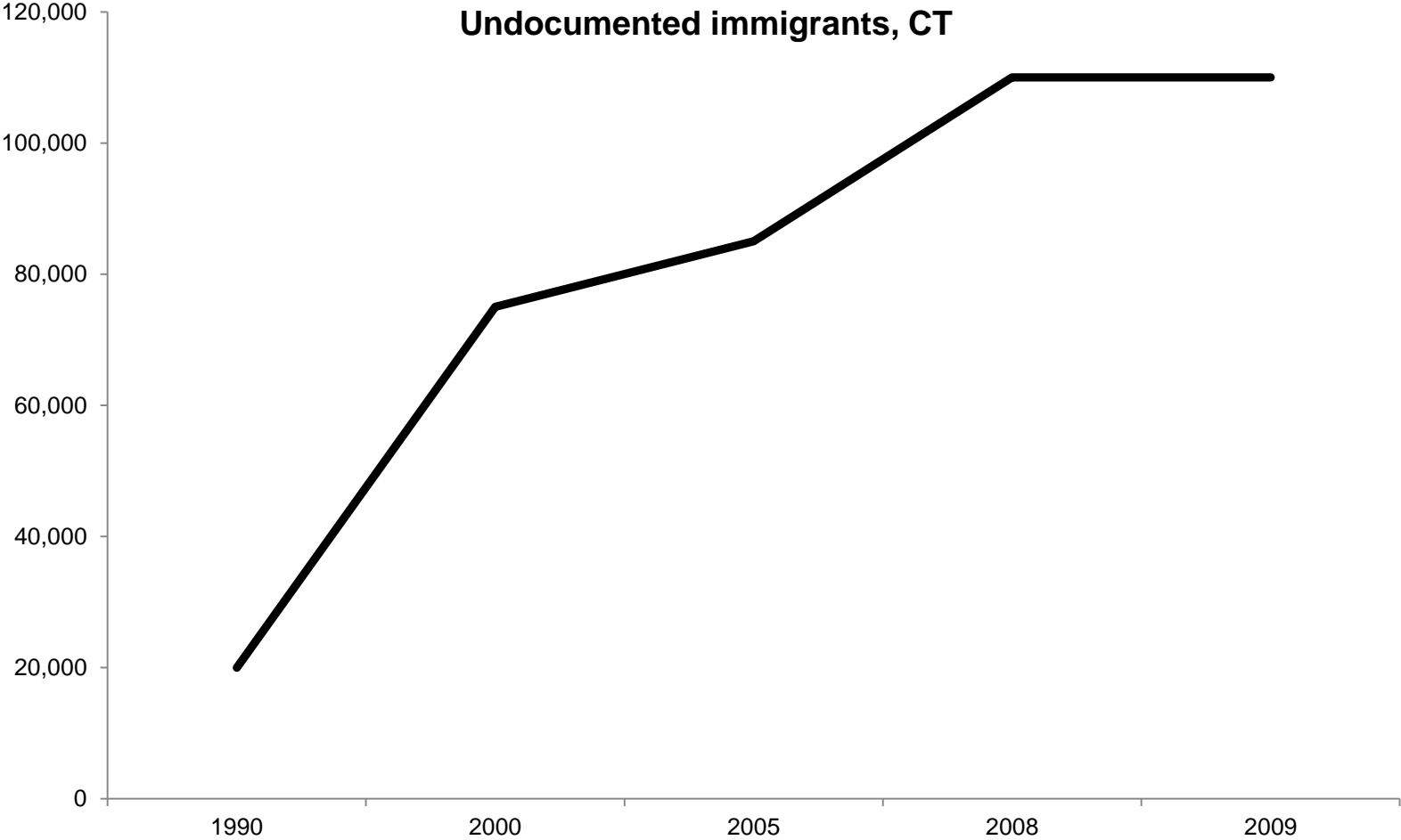
# Undocumented immigrants

- Enter US without approval or overstay temporary admission
- 10.4 million in US
- 4% of US population, 5% of workforce
- 59% from Mexico
- More likely to be women, age 18 to 34, married, have children in the household, less than a high school education
- 69% are uninsured
- 81% live in working families
- 27% incomes <50% FPL, 37% 50 to 99% FPL, 36% >100% FPL

# Undocumented immigrants

- Estimated 110,000 undocumented immigrants in CT (2009)
- More live in Fairfield County
- Excluded from health reform subsidies, buying through exchanges, individual mandate
- Not eligible for Medicaid, except emergency labor and delivery
- Most will remain uninsured, need safety net

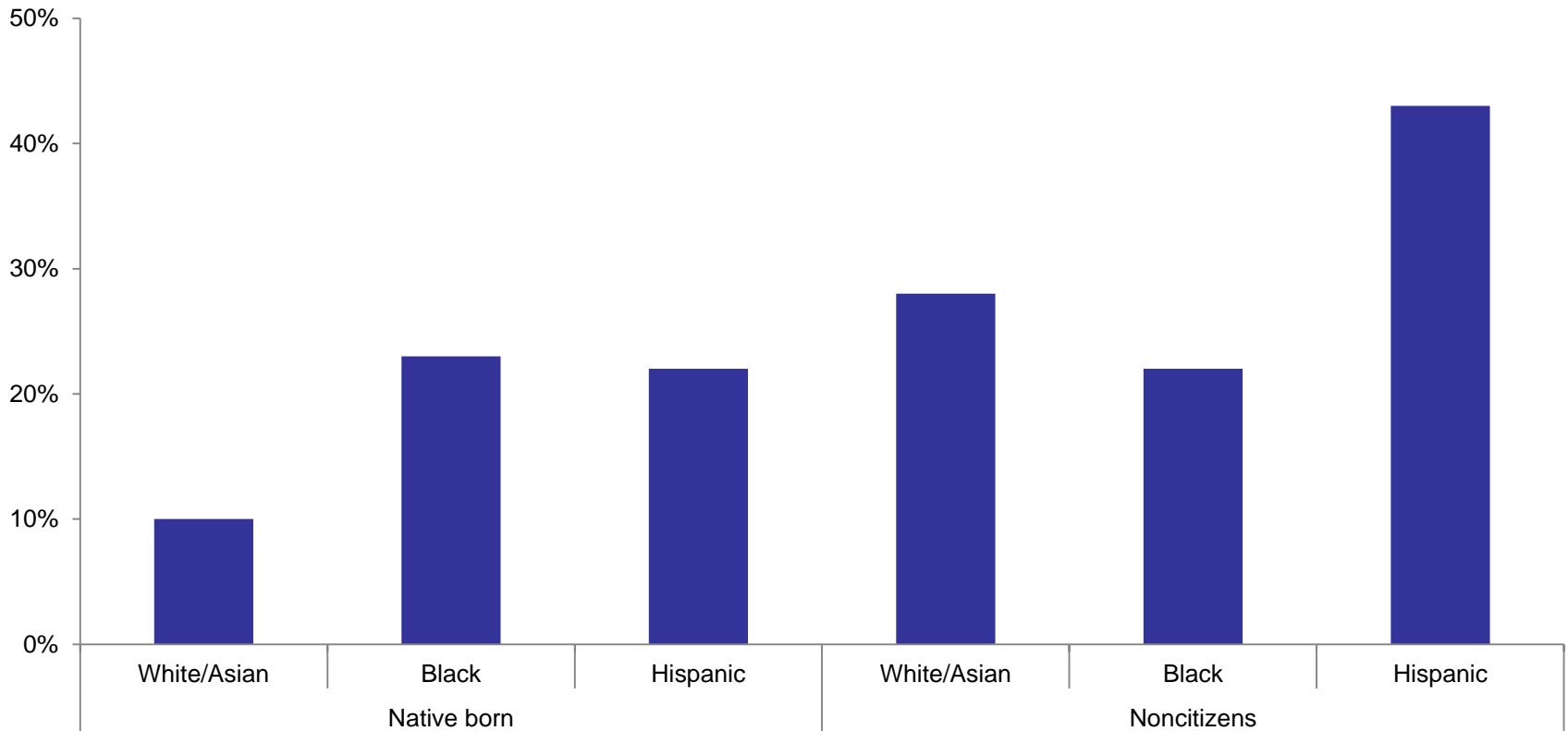
# Undocumented immigrants in CT



Source: Pew Research Center, September 2010

# Undocumented immigrants in CT

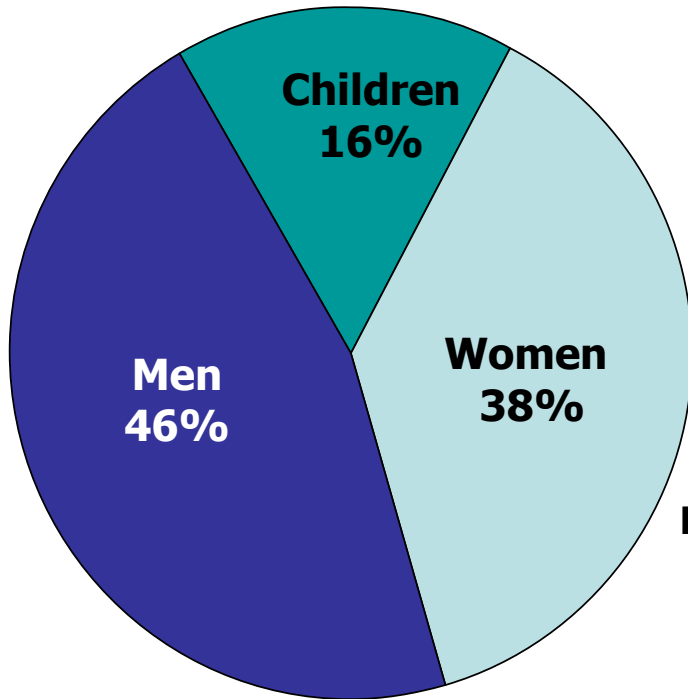
**CT uninsured adults  
(2002-2004)**



Source: R. Capps, et al, Democracy Works, 2005

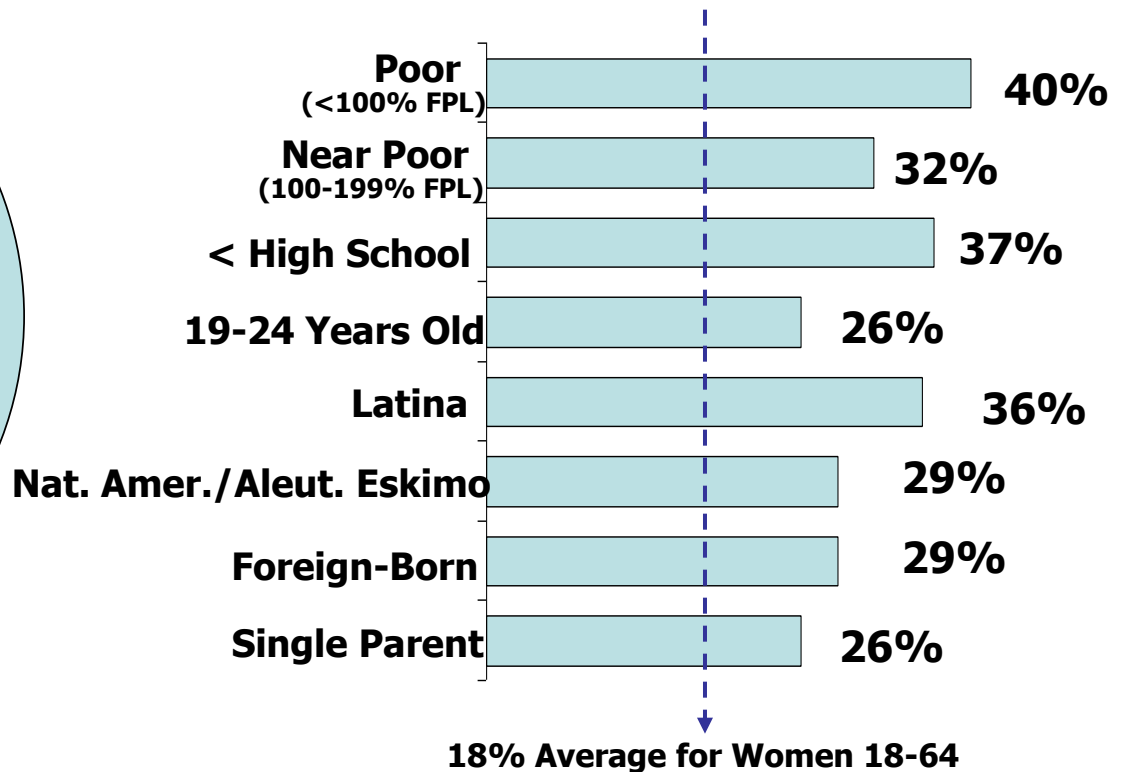
# Uninsured Women: Who is at Risk?

**Distribution of Uninsured, 2008**



**Total = 45.4 Million**

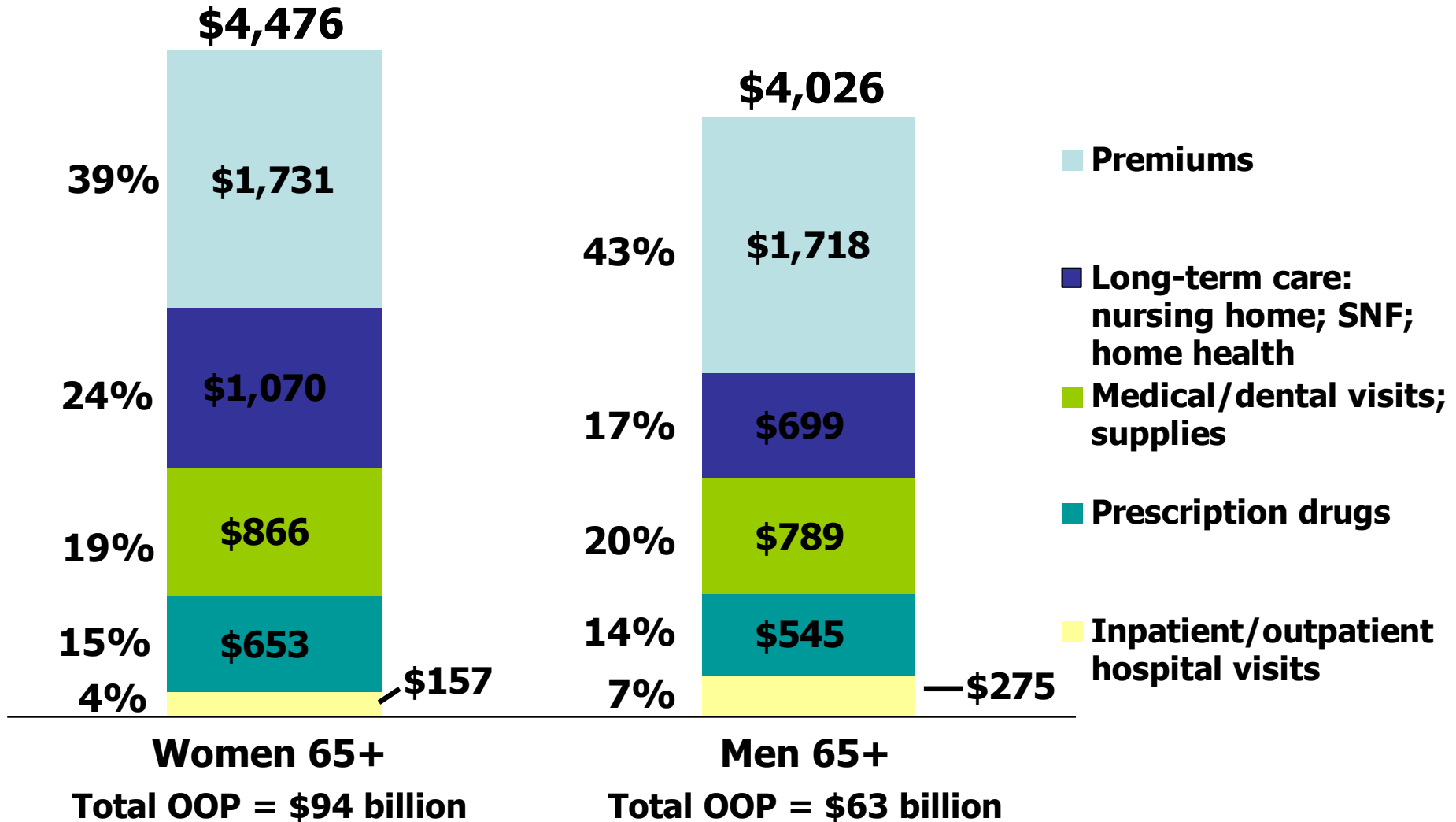
**Percentage of Women Who Are Uninsured, 2008:**



SOURCE: Kaiser Family Foundation estimates of Urban Institute tabulations of 2008 ASEC Supplement to the CPS.

The Federal Poverty Threshold for a family of three in 2008 was \$17,600.

# Out-of-pocket health spending by Medicare beneficiaries age 65+, 2005



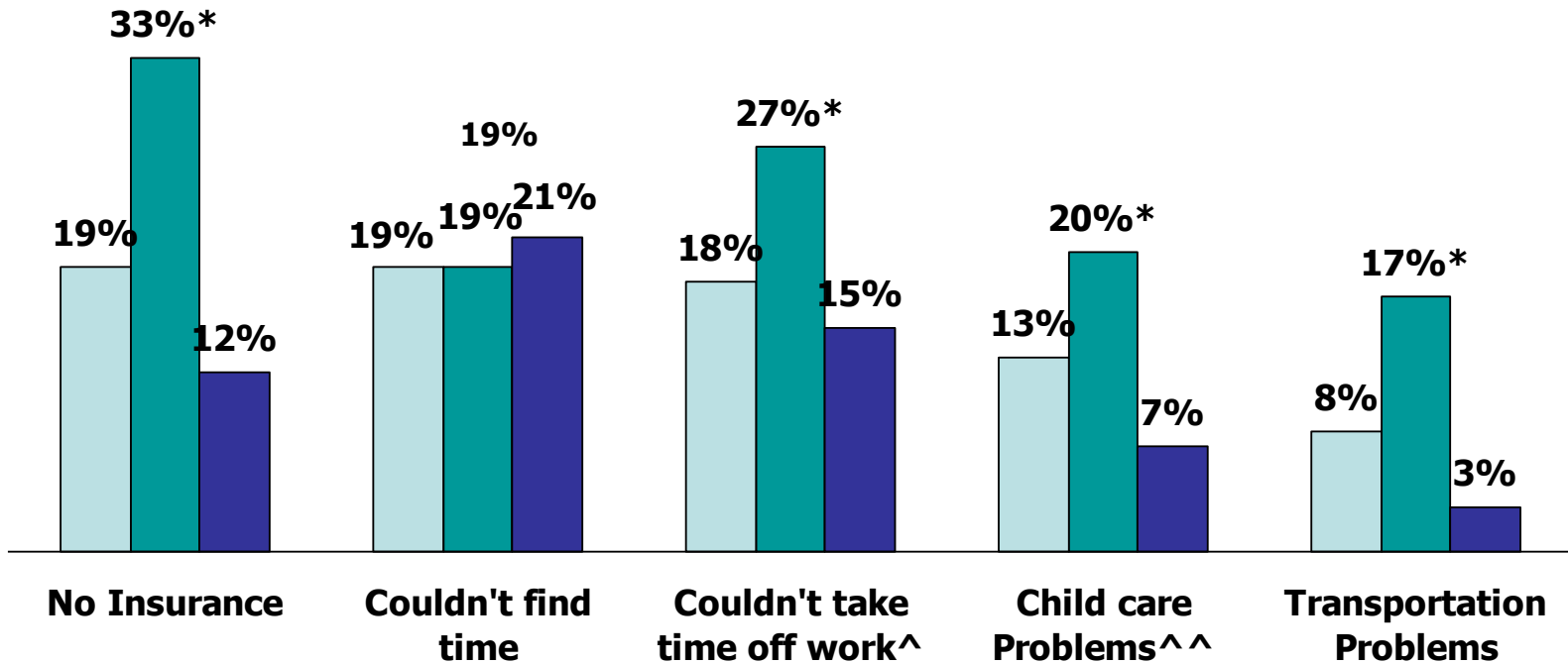
NOTES: Estimates reflect mean out-of-pocket spending for Medicare and private insurance premiums and health care services.  
 SOURCE: Kaiser Family Foundation analysis of the 2005 Medicare Current Beneficiary Survey Cost and Use File.



# Women's Barriers to Health Care by Income, 2004

Percent Reporting Delaying or Forgoing Needed Care in the Past 12 Months Due to:

■ All Women     
 ■ Low-income <200% FPL     
 ■ Non-Poor 200%+ FPL



NOTE: Includes women ages 18 and older. 200% of the FPL was \$29,552 for a family of three in 2004.

\*Significantly different from 200% of poverty and higher,  $p < .05$ .

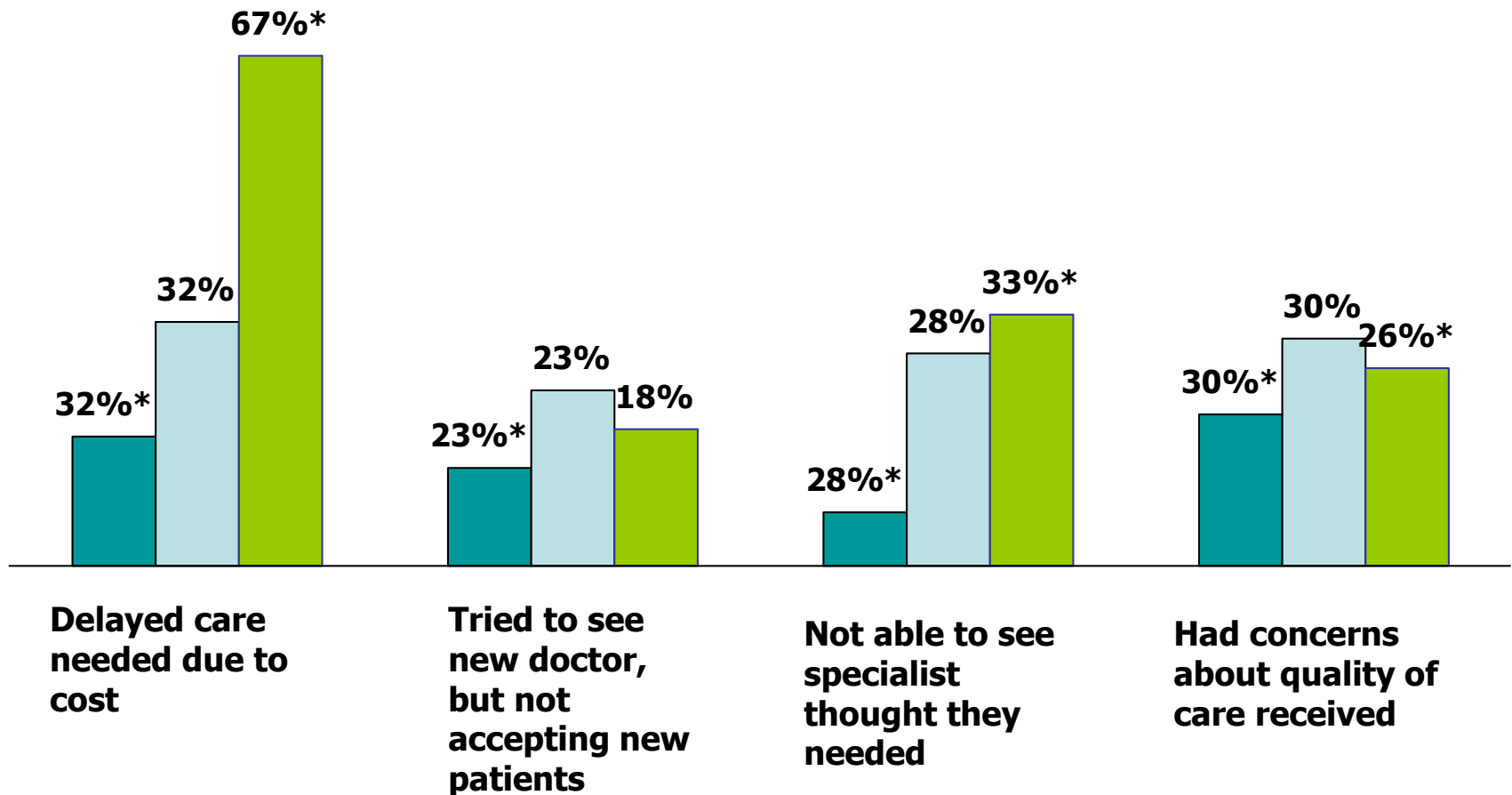
<sup>^</sup>Among women who are employed. <sup>^^</sup> Among women with children younger than 18 years living in household.

SOURCE: Kaiser Family Foundation, 2004 Kaiser Women's Health Survey.

# Women's Barriers to Health Care, by Insurance Status, 2004

Percentage of Nonelderly Women Reporting in the Past Year They:

■ Private    ■ Medicaid    ■ Uninsured



NOTE: Includes women 18 to 64.

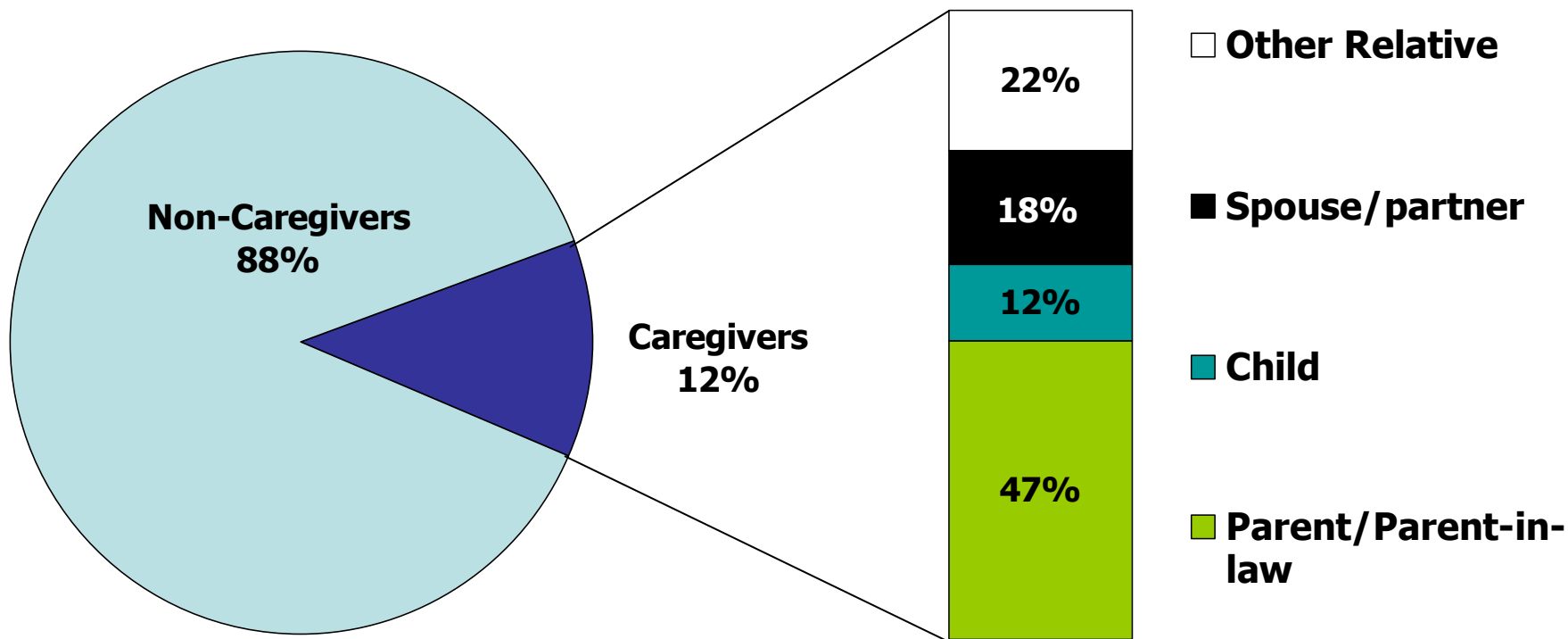
\*Significantly different from Private,  $p < .05$ .

SOURCE: Kaiser Family Foundation, 2004 Kaiser Women's Health Survey.

# Women's Caregiving Responsibilities, 2004

**More than One in Ten Women Have Caregiving Responsibilities:**

**Relationship of Care Recipient to Caregiver:**



NOTE: Includes women ages 18 and older.

SOURCE: Kaiser Family Foundation, *Kaiser Women's Health Survey*, 2004.