

Disparities in Access to Care among Latino Subpopulations in Los Angeles County, California

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BACKGROUND

- Approximately 9% (4.8 million) of the Latino population in the U.S. live in Los Angeles County (LAC), California.
- □ Latinos account for 48% of the total population in LAC.
- Latino population is very diverse, and subgroups differ with respect to country of origin, genetic ancestry, immigration history, and geographic distribution.
- Studying Latinos as a whole masks critical disparities among these subgroups.

OBJECTIVES

- To assess disparities in access to health care among adult Latino subpopulations
- To examine potential contributing factors to the disparities

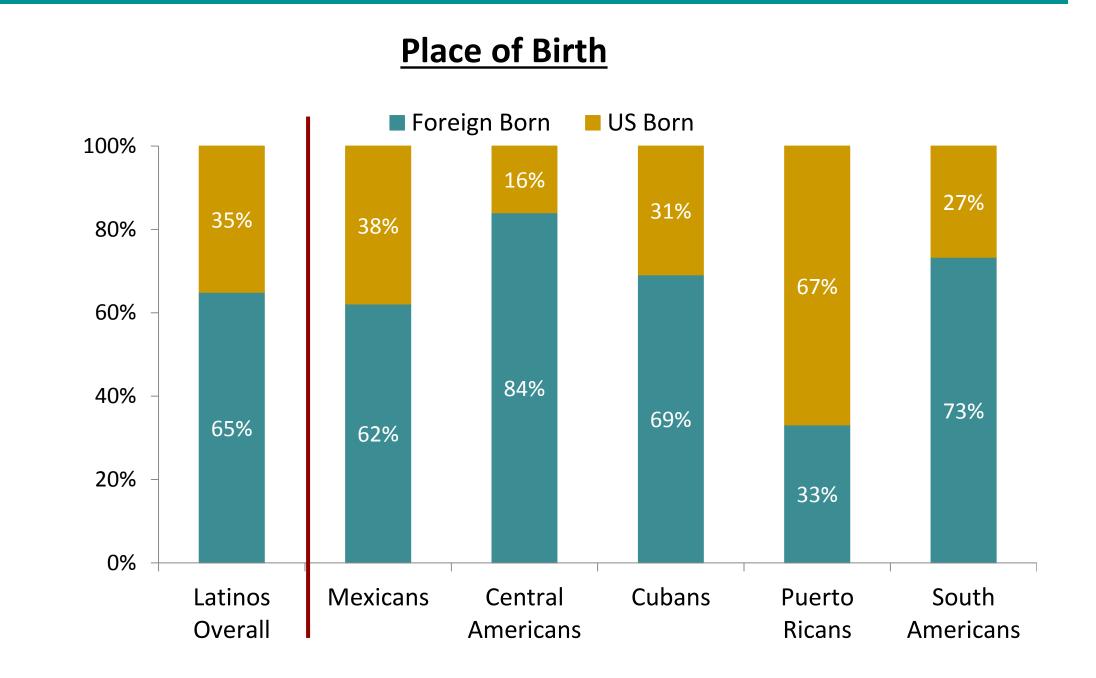
METHODS

- Data were analyzed from 4 cycles of the Los Angeles County Health Survey (2002, 2005, 2007, & 2011).
- Respondents in the surveys were selected using an unrestricted random digit dial (RDD) sampling methodology.
 Cell phone interviews were included in the 2011 survey.
- One adult in each sampled household was randomly selected.
- Interviews were conducted in English, Spanish, and 4 Asian Languages.
- Based on country of origin, we categorized Latinos into 5 major subgroups: Mexicans, Central Americans, Cubans, Puerto Ricans, and South Americans.
- Sample Size:

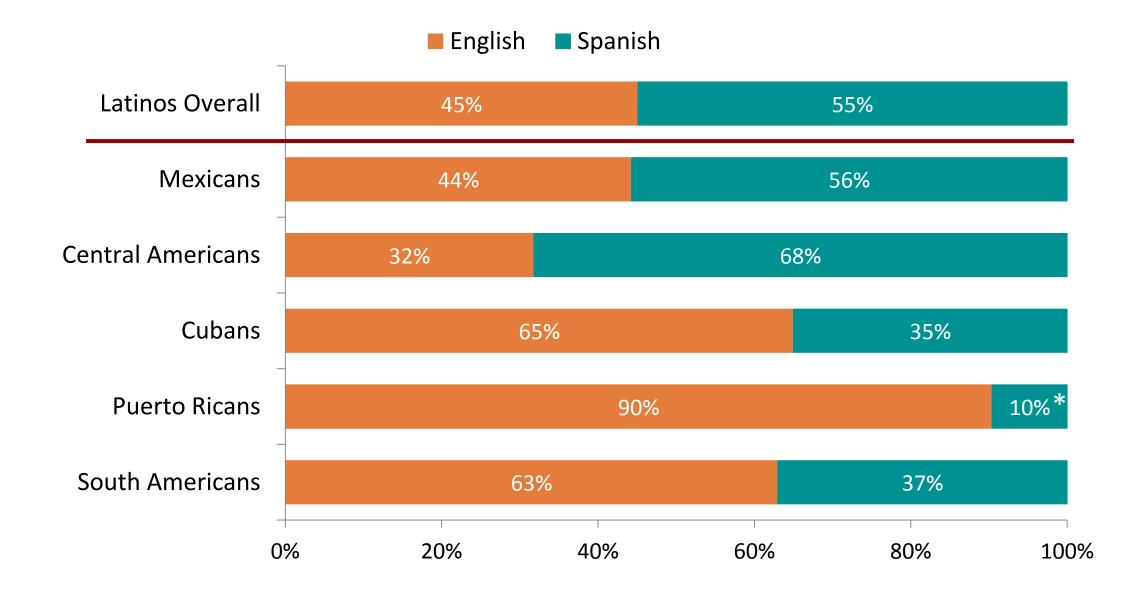
Data Year	Mexicans	Central Americans	Cubans	Puerto Ricans	South Americans
2002	2,308	447	30	42	85
2005	2,282	560	30	39	97
2007	1,957	441	24	33	88
2011	1,969	504	27	37	91
Total	8,516	1,952	111	151	361

- □ Variables on access to health care that were examined:
 - health insurance coverage
- dental insurance coverage
- difficulty accessing medical care
- whether respondents could afford needed health care
- Data analyses
- Used PROC SURVEYMEANS to calculate weighted percentages among Latino subgroups
- Used weight-adjusted logistic regression models to further examine disparities among subgroups
- All analyses were conducted using SAS 9.3 (SAS Institute Inc., Cary, NC).

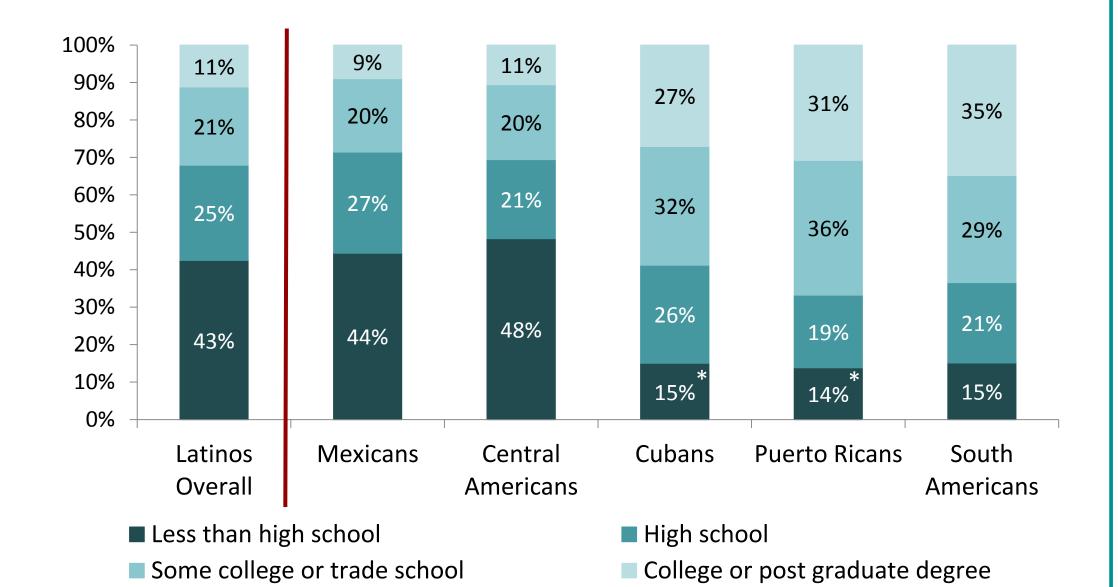
RESULTS: Demographics



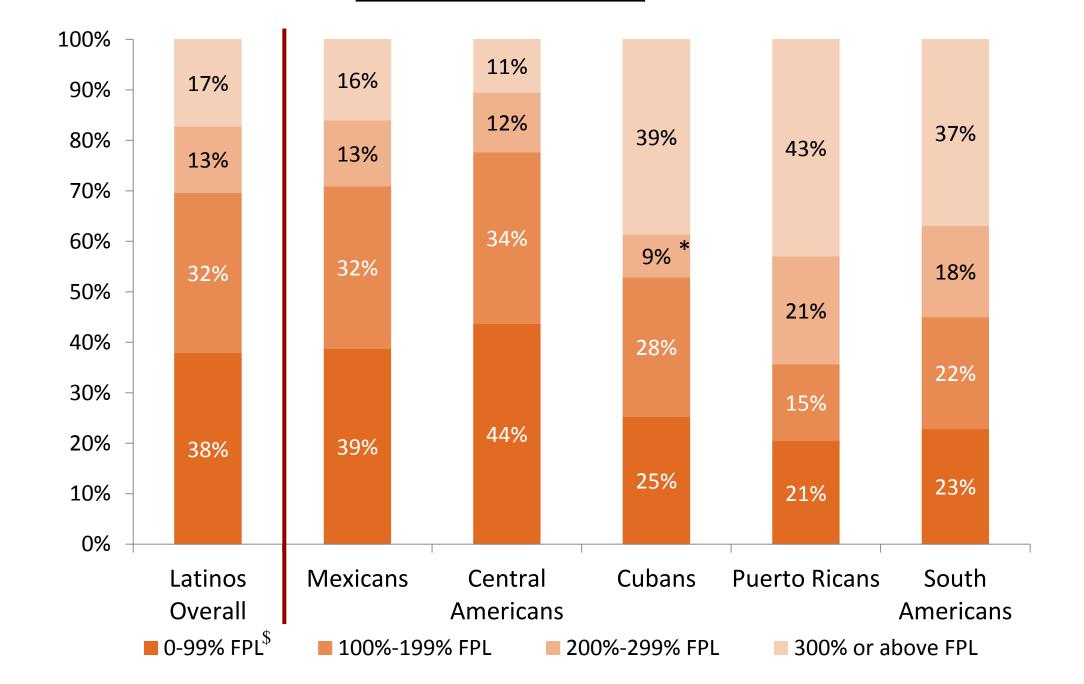
Language of Interview



Education



Household Income

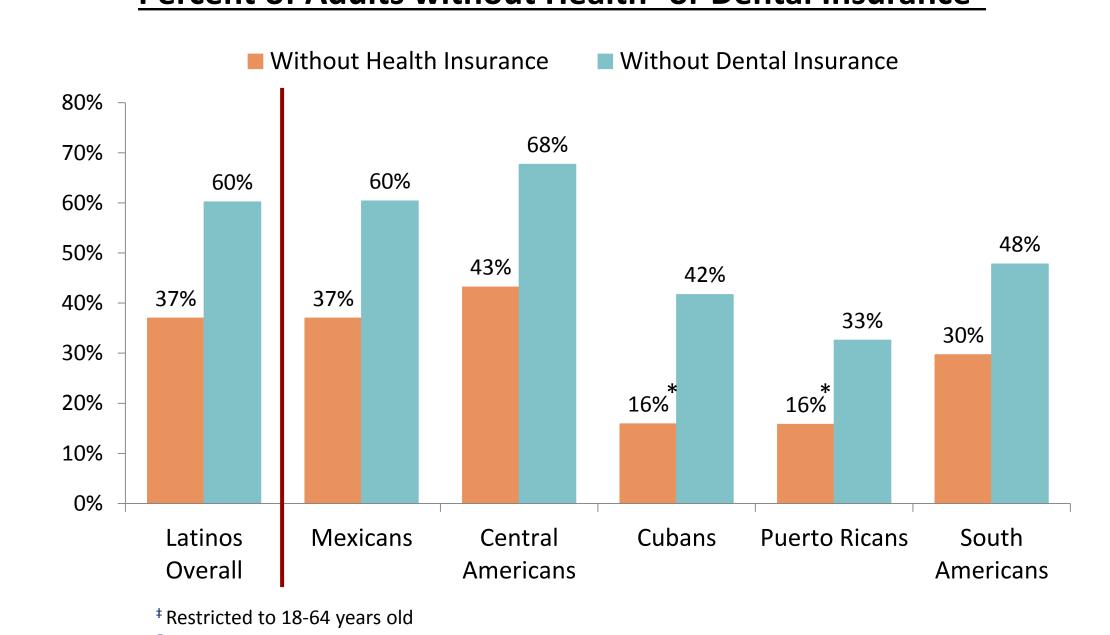


* Unstable Estimate (relative standard error ≥23%)

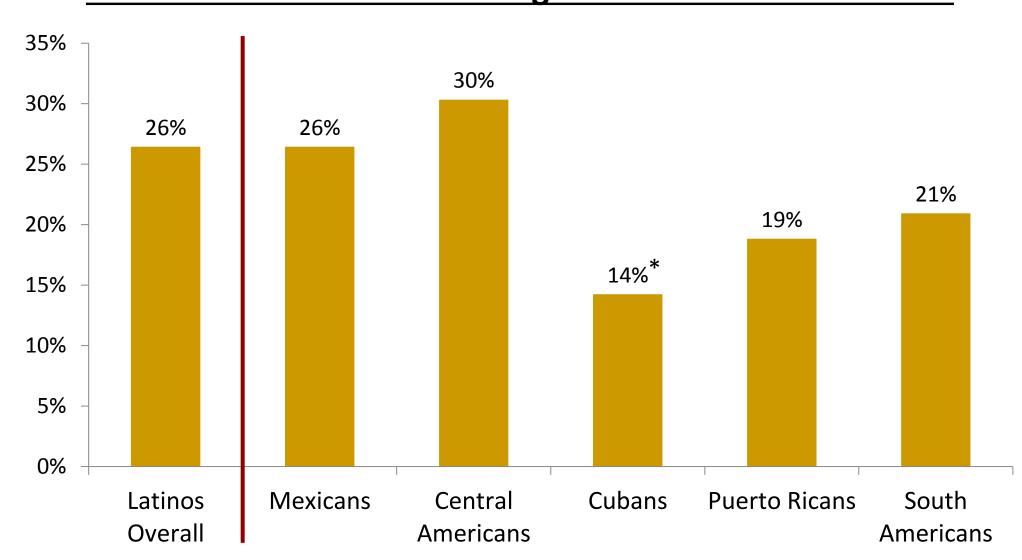
\$ FPL (Federal Poverty Level) at the time of survey interviewing. The 100% FPL threshold for a family of four (2 adults, 2 dependents) corresponds to annual incomes of \$21,756 in the 2011 survey.

RESULTS: Access to Health Care

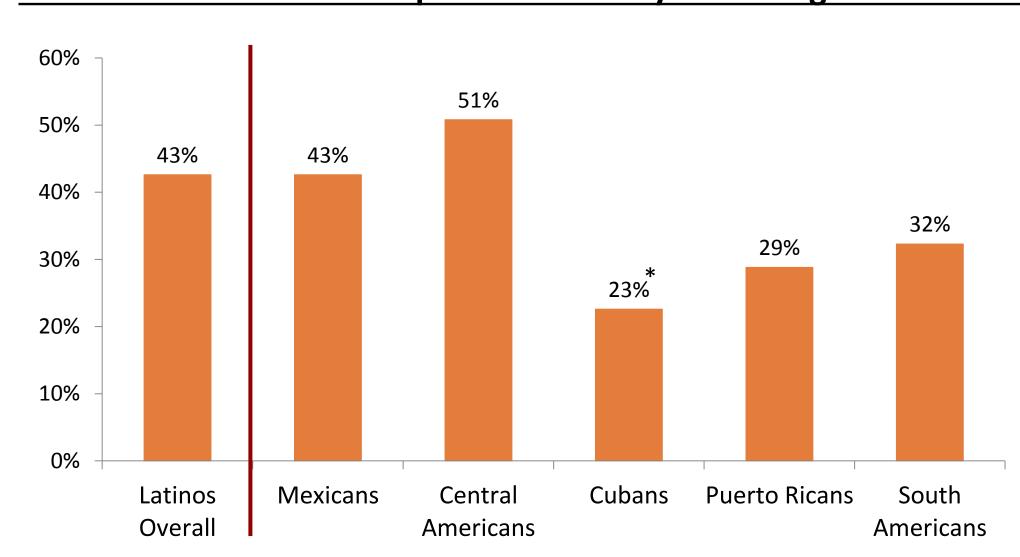
Percent of Adults without Health[‡] or Dental Insurance[¶]



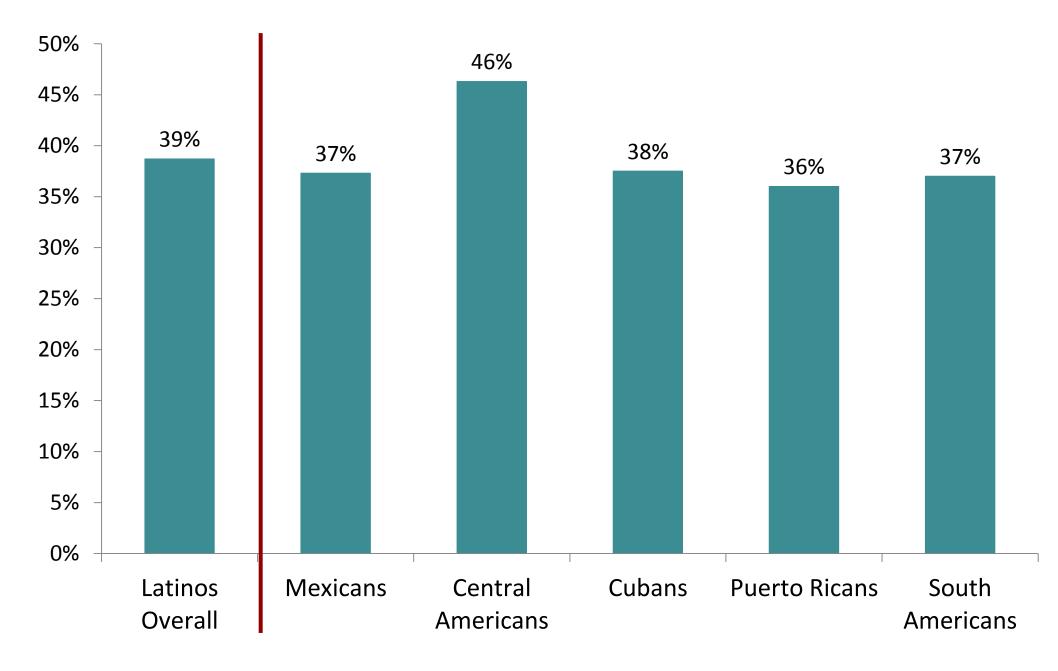
Percent of Adults with No Regular Source of Health Care



Percent of Adults Who Reported Difficulty Accessing Medical Care



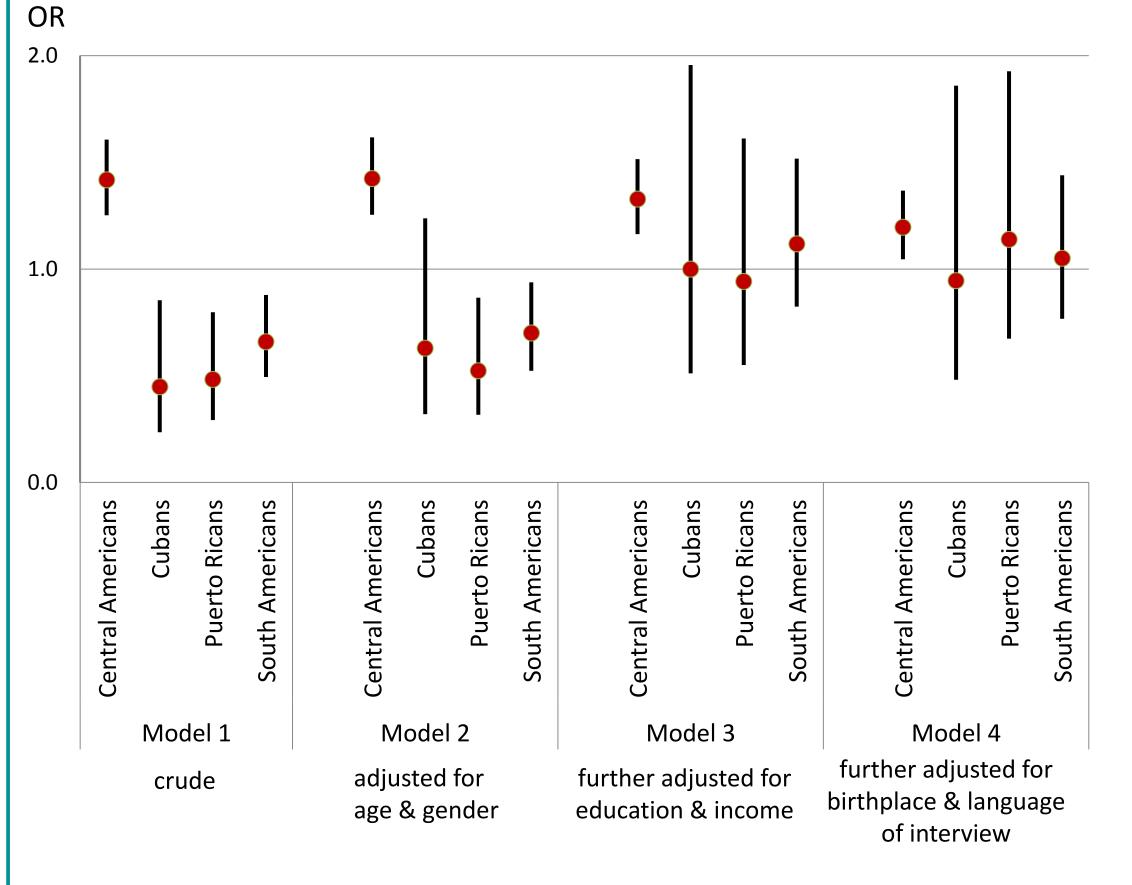
Percent of Adults Who Did Not Obtain Needed Health Care[§] in the Past Year Because They Could Not Afford It



§ Could not afford at least one of the following: prescription medication, mental health care, seeing a doctor for a health problem, or dental care.

RESULTS: Model Results





- Socioeconomic status appears to be an important contributing factor to the disparities in difficulty accessing medical care among Latino subgroups.
- After adjusting for all covariates, Central Americans were still more likely to report difficulty accessing medical care compared to Mexicans.

LIMITATIONS

- Self-reported data
- Does not represent persons living in group quarters
- □ Relatively low response rate (RR3=28% for 2011 survey)
- Pooling multiple years of data masks time-trend.
- Limited sample sizes for some subgroups

CONCLUSIONS

- Marked disparities in access to care were observed.
- Socioeconomic status accounted for most of the disparities in access to care among Latino Subgroups.
- To improve health, we need to work across sectors to address underlying determinants of health such as poverty and education.

CONTACT INFORMATION

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