

CUNY INSTITUTE FOR HEALTH EQUITY

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LATINOS, IMMIGRANTS AND ACCESS TO HEALTH CARE

By

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- I want to acknowledge that the research in this presentation was funded by the Dominican Studies Institute (DSI) at CUNY.
- It is co-authored with **Dr. Ramona Hernández**, Director of DSI and a Distinguished Professor at City College, as well as with **Sidie Sisay** and **Ebrahim Ebrami**, both of whom are researchers at DSI.
- The presentation is based on a research report to be made available by DSI in early 2024.

- **This workshop seeks to inform you about the latest data available through the U.S. Bureau of the Census for the analysis of the Hispanic/Latino/Latinx population of the United States and its access to health care.**
- **In particular, we will focus on discussing and using the **American Community Survey**, which is the most expansive annual survey of the U.S. population.**

THE MAIN SOURCE OF INFORMATION ON THE NUMBER AND CHARACTERISTICS OF VARIOUS POPULATIONS WITHIN THE UNITED STATES IS THE **U.S. BUREAU OF THE CENSUS.**

IN THE PAST, THE CENSUS BUREAU COLLECTED THIS INFORMATION EVERY TEN YEARS, BASED ON THE DECENNIAL CENSUS.

- **THE SURVEY ADMINISTERED BY THE DECENNIAL CENSUS TO ALL THE POPULATION INCLUDES A SIMPLE FORM (**SHORT FORM**), WITH BASIC POPULATION DATA.**
- **IN THE PAST, A MORE COMPLETE FORM (**THE LONG FORM**), WHICH HAS A VARIETY OF QUESTIONS ON DEMOGRAPHICS, INCOME, ETC., WAS ADMINISTERED TO A SAMPLE OF HOUSEHOLDS IN THE COUNTRY.**

- **USING THE LONG-FORM SAMPLE, THE CENSUS BUREAU THEN CALCULATED A VARIETY OF INDICATORS OF SOCIOECONOMIC STATUS FOR VARIOUS GROUPS IN THE POPULATION.**
- **RESEARCHERS WERE ALLOWED TO USE THE DATA PROVIDED FROM THESE LONG-FORM QUESTIONNAIRES FOR RESEARCH PURPOSES AND THEY WERE GIVEN ACCESS TO ONE-PERCENT AND FIVE-PERCENT SAMPLES OF THE U.S. POPULATION TO STUDY ITS INFORMATION.**
- **EVER SINCE THAT TIME, THESE SAMPLES OF THE POPULATION HAVE BEEN CALLED THE **PUBLIC USE MICRO-DATA SAMPLES (PUMS).****

- In 2001, however, the Census Bureau decided to **end** collecting information through the decennial Census long-form questionnaire.

- **So, the decennial census PUMS ended with the 2000 Census.**
- **How do we have detailed information about the U.S. population since that time?**

- The Census Bureau replaced the decennial Census PUMS with data provided by another source: the **American Community Survey (ACS)**.
- The ACS is an **annual** household survey of the U.S. population and reproduces the format followed by the decennial Census of Population long-form used in the past.
- Detailed data on geography, demography and socioeconomic status is available from the ACS and the corresponding **one percent PUMS** for the years of 2001 through 2022.

- **Can this information be accessed?**
- **First, the Census Bureau has its own website, which provides all the information you need to access its data products.**
- **The website is:**
- **<https://www.census.gov/programs-surveys/acs>**

- **Second, the Census Bureau also produces its own set of publications reporting on the results of the yearly ACS.**
- **See:**
- **<https://www.census.gov/data/tables/time-series/demo/health-insurance/acs-hi.2021.html#list-tab-776654388>**
- **But these reports are usually very data-oriented, providing stylized Excel tables with very general information regarding Latinos and other groups in the population (although they do produce more detailed analysis on specific subjects).**

- **Third, the Census Bureau makes available its Public Use Microdata Samples (PUMS) yearly database through their website, for researchers to examine it in more detail.**
- **But it is cumbersome to lookup these data for each year, to download it, make sure the yearly questions are compatible with each other, etc.**

- **Because of this, a non-profit data collection institution emerged about 25 years ago to provide integrated census data over time.**
- **It is called **the Integrated Public Use Microdata Samples (IPUMS)** and it affiliated with the University of Minnesota.**
- **The IPUMS makes it easier to study changes over time using Census and other data, conduct comparative research, merge information across data types, and analyze individuals within family and community contexts.**
- **Its database and services are available free of charge.**

- **To analyze the PUMS databases, you generally need to use a statistical software package, such as STATA, SAS, etc.**
- **However, the Census Bureau has available a data analysis and extraction tool that allows users to generate custom ACS estimates online without the use of statistical software. This tool is, however, limited since it is still under development.**

- **We will use the American Community Survey data in this presentation, based on the IPUMS database.**
- **We will use years 2008 to 2022 (the latest year available).**
- **The reason we choose 2008 is because that was the first year that the ACS incorporated questions regarding health insurance coverage.**
- **Since that is one of the interests of this workshop, we will focus on that period.**

**THE AMERICAN COMMUNITY SURVEY
IS NOT THE ONLY POTENTIAL
SOURCE OF DATA ON THE U.S.
POPULATION AND HEALTH-RELATED
INFORMATION.**

**BUT IT IS THE MOST NUMEROUS
SAMPLE OF THE U.S. POPULATION
AND BECAUSE OF THIS IT ALLOWS
RELIABLE ANALYSIS OF
COMPARATIVELY SMALL GROUPS
WITHIN THE POPULATION.**

FOR EXAMPLE, ANOTHER SOURCE OF INFORMATION –INCLUDED HEALTH-RELATED INFORMATION-- IS THE **CURRENT POPULATION SURVEY (CPS).**

THE CPS ADMINISTERS A DETAILED QUESTIONNAIRE EVERY YEAR TO A SAMPLE OF THE U.S. POPULATION

- **BUT THE CPS SAMPLE IS REALLY SMALL COMPARED TO THE AMERICAN COMMUNITY SURVEY.**
- **CURRENTLY, ABOUT 60,000 HOUSEHOLDS, OR ABOUT **150,000 PERSONS**, ARE SAMPLED BY THE CPS.**
- **BY COMPARISON, THE 1% YEARLY SAMPLE USED BY THE AMERICAN COMMUNITY SURVEY INCLUDES ABOUT 3.5 MILLION HOUSEHOLDS AND **8.8 MILLION PEOPLE!!!****

- As with any survey data, the data presented below are **estimates** and are subject to a **margin of error**.
- Given the comparatively large samples and its strong collection methods, the ACS has relatively small sampling and measurement errors.
- For the large groups of the population considered in the presentation below, the confidence interval range well below 1%.
- However, as the groups analyzed get smaller and smaller (say uninsured Cuban immigrants in New York City), the margin of error can increase.

- **Remember that these are estimates.**
- **Even the decennial Census counts are estimates because not everybody is counted.**
- **In fact, for the Latino population, estimates are that there was a close to 5% undercount in the 2020 U.S. Census.**

- **Note also that ACS seeks to sample everybody residing in the country. No one should be excluded.**
- **But some populations may be harder to reach, whether because there are not enough Census staff to do the job (if persons do not respond to the questionnaires sent by mail, there are supposed to be follow-up interviews), because of interviewing difficulties (as with the 2020 pandemic) or because some populations –such as the undocumented– stay away from either filling out the forms or being interviewed by Census staff.**
- **The Census has provided estimates of the ACS undercount for various populations, which may range from 1% to 5% for Latinos, depending on the year.**

**But measurement issues are always a problem in any data analysis,
and we must go on with the most reliable data sources available,
and the ACS is one of the best...**

- **One of the objectives of our research is to identify the access to healthcare insurance of the Latino population in the United States.**
- **But, first, how are Latinos specified as a group in the American Community Survey and the U.S. Census of Population?**

The 1970 U.S. Census of population was the first one to ask persons to self-identify as to whether they were of **Spanish origin or descent.**

It also asked persons to identify with specific categories (Mexican, Puerto Rican, Cuban, Central or South American, Other), which were included as part of the questionnaire.

The 1980 Census changed the question to “Is this person of **Hispanic/Spanish Origin**?”

Separate categories were also included as well for people to identify as part of a specific group (Mexican/Mexican-American/Chicano, Puerto Rican, Cuban, Other).

The 2000 Census added the term **Latino** to the Hispanic/Spanish Origin category and that is the way it has remained.

American Community Survey Questionnaire Hispanic/Latino Identity Question, 2023.

5 Is Person 1 of Hispanic, Latino, or Spanish origin?

- No, not of Hispanic, Latino, or Spanish origin
- Yes, Mexican, Mexican Am., Chicano
- Yes, Puerto Rican
- Yes, Cuban
- Yes, another Hispanic, Latino, or Spanish origin – *Print origin, for example, Argentinean, Colombian, Dominican, Nicaraguan, Salvadoran, Spaniard, and so on.* ↴

- **The term Latinx is now used frequently, especially by younger generations.**
- **Should we use Latinx instead of Latinos?**
- **Why does the ACS not use the term?**

The **Pew Research Center, an outstanding non-profit social science research organization that has had a very active research agenda on Hispanics/Latinos/Latinx populations, decided to explore this issue and asked a sample of persons who identified themselves as Hispanic/Latino/Latinx, what was their ethnic identity preference among these three terms.**

- **These are the answers:**

The terms Hispanic, Latino or Latinx are used to describe people who are of Hispanic or Latino origin or descent. Which of these terms do you prefer?

Term	% of the Total
Hispanic	53%
Latino	26
Latinx	2
No Preference	18
No Answer	1

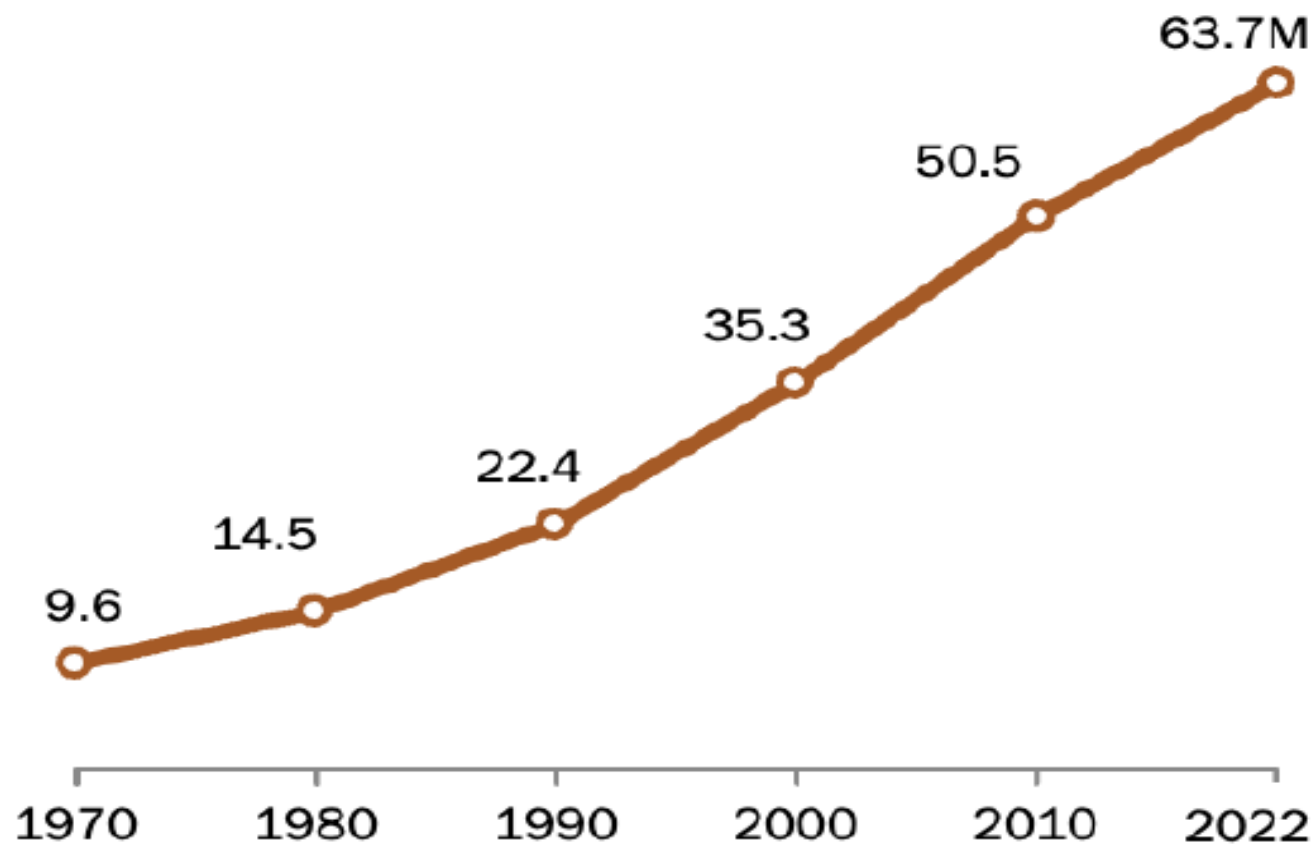
Total	100%

Source: 2022 National Latino Survey, Pew Research Center, 2022.

- **Based on the Census Bureau Questions, both as posed by the decennial U.S. Census of Population as well as the American Community Survey, how many Latinos/Hispanics/Latinx are residing in the US currently?**

U.S. Hispanic population reached nearly 64 million in 2022

Population of Hispanics in the United States, 1970-2022, in millions



- **How does the Latino population compare to overall population of the United States?**
- **The next Table shows you the decomposition.**

The Population of the U.S., by Race and Ethnicity 2022

Group	Population	% of Total
Latino/Hispanic	63,657,923	19.1%
United States Total	333,287,557	100.0%

Source: 2022 American Community Survey.

- **Health insurance is a gateway for access to health care services in the U.S.**
- **And **health care** is one of the key issues affecting Latinos and every other population in the country.**
- **The following Table shows the significance of health care for Latinos.**

Among the Issues facing you, is healthcare...?

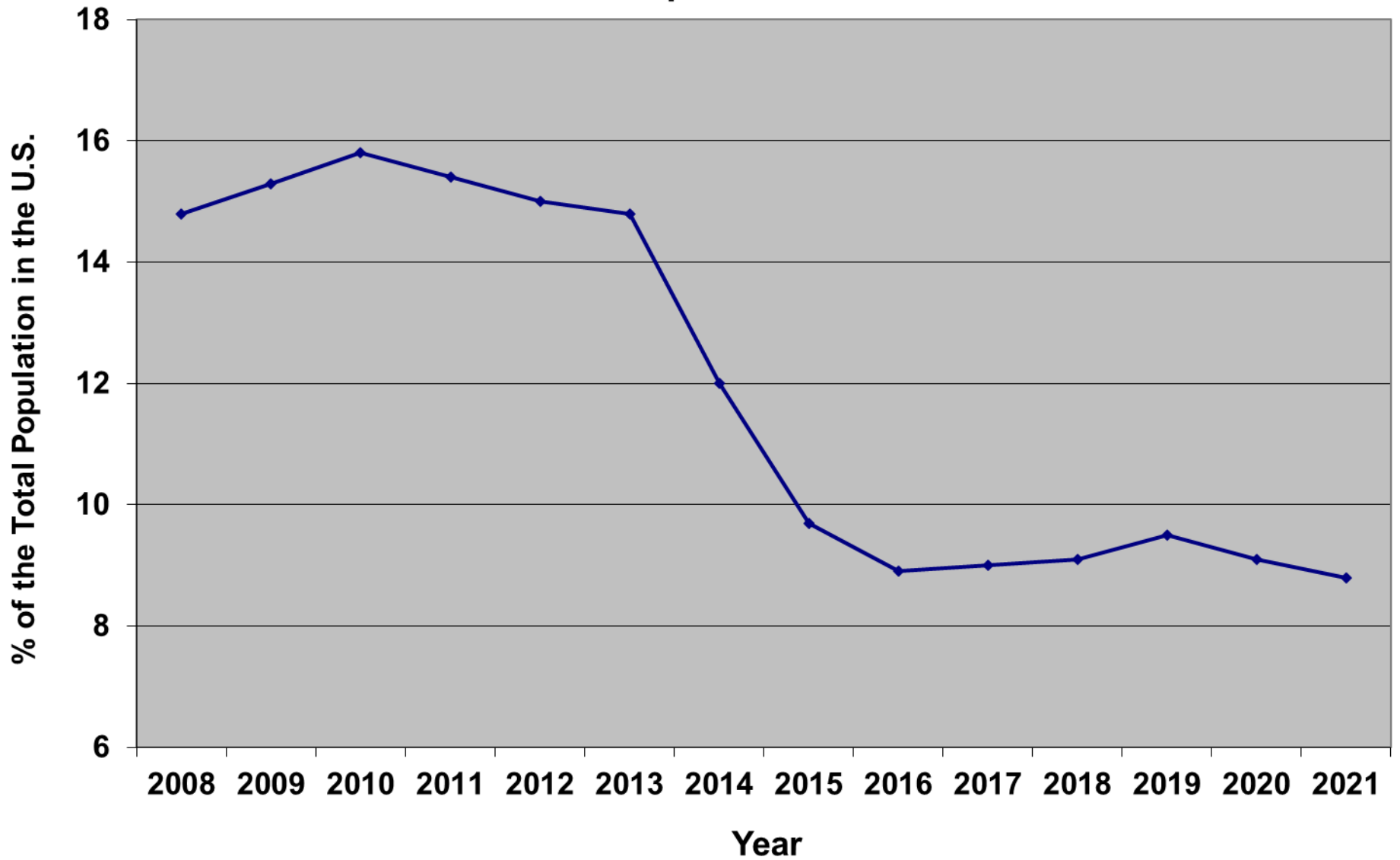
Opinion	Latinos	Overall Population
Very important	71%	60%
Somewhat important	21%	29%
Not too Important	6%	7%
Not at all important	2%	3%
No Answer	0%	0%
	-----	-----
Total	100%	100%

Source: 2022 National Latino Survey, Pew Research Center, 2022.

- **As noted before, since 2008 the American Community Survey (ACS) includes a set of questions regarding **health insurance coverage**.**
- **Dr. Ramona Hernández, and myself, together with two researchers at the Dominican Studies Institute, Sidie Sisay and Ebrahim Ebrami, have been researching health insurance coverage among Latinos using the ACS.**

- **First, let us look at the United States in general.**
- **The ACS asks individuals sampled whether they had any health insurance coverage at the time of interview, as measured by either privately-purchased insurance (through employer-provided or union-provided plans) or public insurance (such as Medicare, Medicaid or other governmental insurance).**
- **The following Figure shows you the % of persons who answered that they **do not have any health insurance at all.****

Persons with no Health Insurance , as a % of the Total Population in the U.S.



- **There is a clear break: before and after 2013-2014.**
- **What happens after 2013-14, which caused such a big drop in the % of the population without health care insurance in the US??**

- **As you know, the reduced number of uninsured is due to the **Affordable Care Act (ACA)**, or Obamacare, one of the landmark achievements of the administration of President Barack Obama.**

- **The ACA was signed into law on March 23, 2010, and its main provisions were implemented in 2014.**
- **It constitutes the most significant increase in access to health care in the U.S. since the enactment of Medicare and Medicaid in 1965.**

Population with **No Health Insurance** in the U.S.

Year	Number of Persons	% of the Total
2010	48 Million	15.8%
2022	31 million	8.2%

Source: American Community Survey (ACS), as tabulated by the authors.

- **How did the ACA manage to increase access to health care insurance?**
- **These are some of the provisions:**

- **The ACA expanded Medicaid eligibility.**
- **The ACA required everyone to have insurance or pay a penalty.**
- **It required that states make available health insurance exchanges, with the goal of offering lower-cost health insurance plans.**
- **Prohibited insurers from denying coverage to persons who have preexisting conditions.**
- **It obliged states to ensure the availability of insurance for individual children who did not have coverage via their families.**

- **I emphasize the positive impact of the ACA because some of the recent and current proposals by the Republican party in control of the U.S. House of Representatives would, over the next decade, reverse some of its policies, including its expansion of Medicaid and its support for the Children's Health Insurance Program (CHIP) .**
- **Although these proposals will not currently pass the Democratic-controlled Senate and President Biden's signature, they probably would under if there is a Republican-controlled Congress and a President Trump White House in 2025.**

On his social media platform last week, candidate Donald Trump said: “The cost of Obamacare is out of control, plus, it’s not good Healthcare,” ... “I’m seriously looking at alternatives. We had a couple of Republican Senators who campaigned for 6 years against it, and then raised their hands not to terminate it. It was a low point for the Republican Party, but we should never give up!”

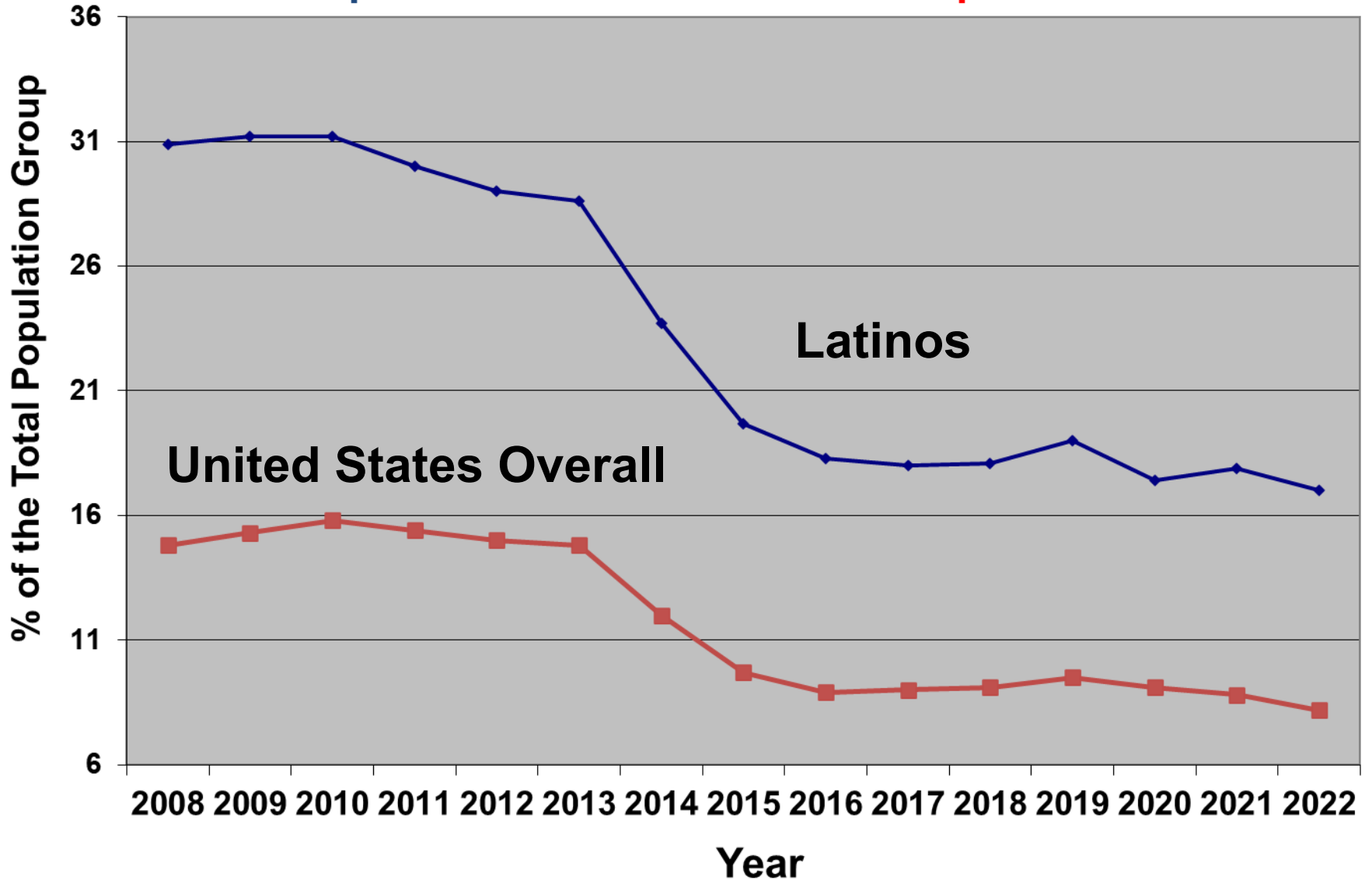
- **Getting back to our results: despite the major impact that the ACA has had on access to health care insurance, there are still over 30 million persons (close to ten percent) of the population without health insurance.**
- **Although health insurance rates have increased for everyone since 2014, some population groups still have much greater rates than the averages stated above.**

Let us look at the case of Latinos.

**The following figure shows the %
of Latinos who say they **do not**
have any type of health insurance.**

Uninsured as a % of the Population Group

Hispanics/Latinos versus Total Population in the US



Latinos with **No Health Insurance,
vs. Total US Population with **NO** Health Insurance
(as a percentage of the population in each group)**

Year	Latinos	U.S. Population
2010	31.2%	15.8%
2022	16.8%	8.2%

**Source: American Community Survey (ACS), as
tabulated by the authors.**

- **Latinos have the lowest access to health insurance among the major racial and ethnic groups in the U.S.**
- **How do we examine these groups?**
- **The American Community Survey includes a question that asks the person's race.**

6 What is Person 1's race? Mark (X) one or more boxes.

White

Black or African Am.

American Indian or Alaska Native — *Print name of enrolled or principal tribe.* ↘

Asian Indian

Japanese

Native Hawaiian

Chinese

Korean

Guamanian or Chamorro

Filipino

Vietnamese

Samoan

Other Asian — *Print race, for example, Hmong, Laotian, Thai, Pakistani, Cambodian, and so on.* ↘

Other Pacific Islander — *Print race, for example, Fijian, Tongan, and so on.* ↘

Some other race — *Print race.* ↘

We decompose the sample into those who are Hispanics and those who ARE NOT Hispanics/Latinos, as identified in the earlier ACS question as to whether they identify themselves as Hispanic/Latino/Spanish Origin or not.

We then disaggregate the NON-HISPANIC group into the racial categories they identify with: White, Black, Asian or Other/Multiracial category.

The Population of the U.S., by Race and Ethnicity 2022

Group	Population	% of Total
Latino/Hispanic	63,657,923	19.1%
Non-Hispanic White	196,306,371	58.9%
Non-Hispanic Black or African American	45,327,108	13.6%
Non-Hispanic Asian	20,997,116	6.3%
Non-Hispanic Other	6,999,039	2.1%
	-----	-----
United States Total	333,287,557	100.0%

Source: 2022 American Community Survey.

- **Using these same groups, we can compute the rates of uninsured persons, disaggregated by race and ethnicity.**
- **The following table shows the results.**

Persons with **No Health Insurance in the U.S.
By Race/Ethnicity**

Racial and Ethnic Group	% of the group without Health Insurance	
	2010	2022
Hispanic/Latinos	31.2%	16.8%
Non-Hispanic White	15.6%	5.4%
Non-Hispanic Black	19.1%	9.5%
Non-Hispanic Asian	11.1%	5.6%
Other Race/Ethnicity and Multiple Races	18.1%	8.4%

Source: American Community Survey (ACS), as tabulated by the authors.

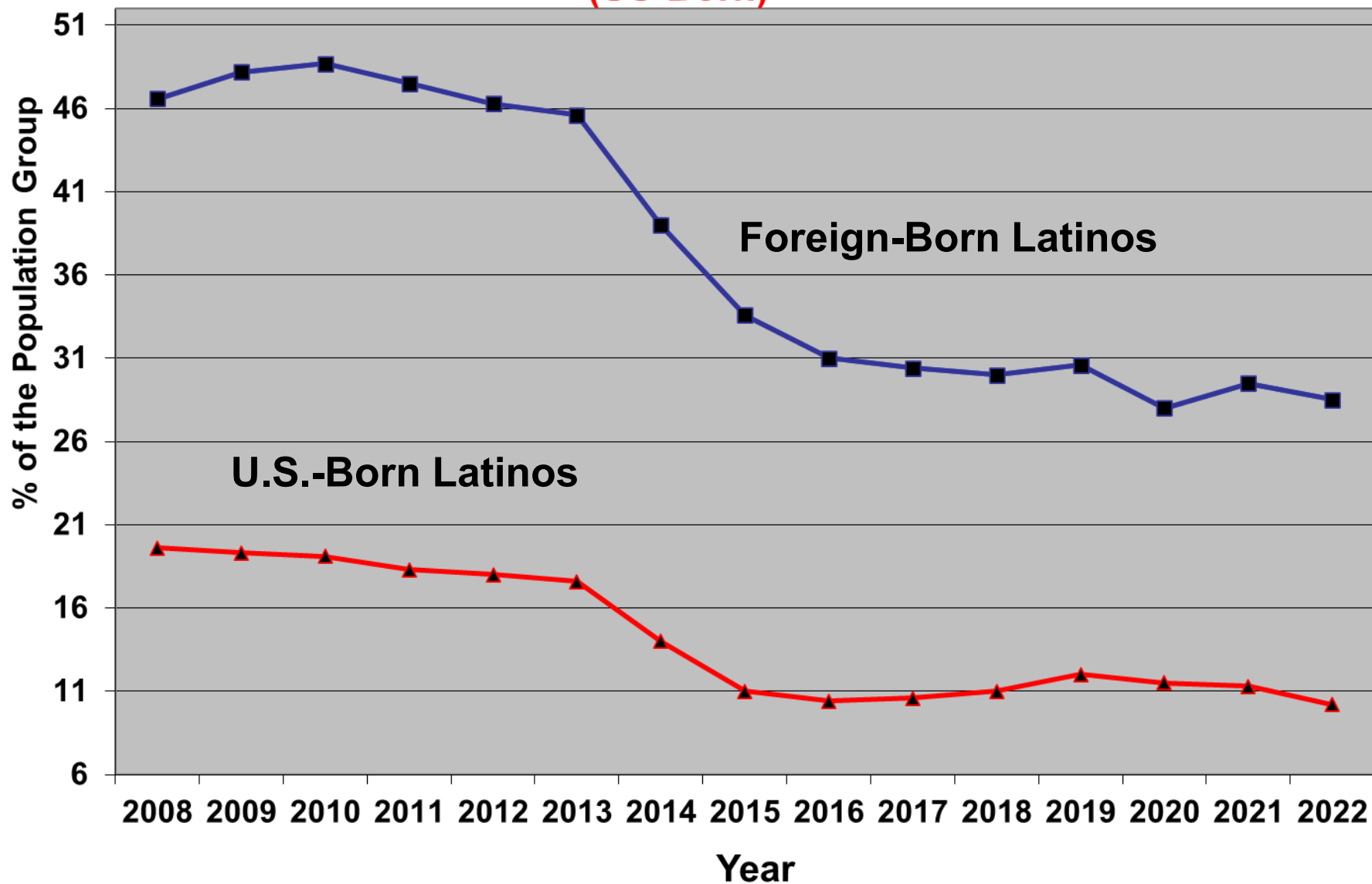
- **We could disaggregate Hispanics as well into various racial categories, but this is part of a separate research project that we are carrying out on the impact of race on the socioeconomic status of various Hispanic/Latino groups in the U.S.**
- **This is work in progress but hope to release the study sometime in early 2024.**

- **But even within the Latino population, there are huge differences among various groups in terms of their access to health insurance.**

- **There is substantial variation in health insurance access among various Latino populations.**
- **For instance, one source of variation lies on whether the person was born in the US or not.**

- **The American Community Survey (ACS) can be used to determine the differential access to health insurance by **foreign-born** persons (persons born outside the U.S.) and the **native-born** (persons born in the U.S.).**
- **These are the data for the Latino population, according to our tabulations.**

Uninsured Persons, as a Percentage of the Group: Latino **Foreign-Born (Immigrants)** versus Latino **Native-Born (US-Born)**



**Latinos with No Health Insurance,
Foreign-Born versus U.S.-born
(As a percentage of the population in the group)**

Year	Foreign-Born	U.S.-Born
2010	48.7%	19.1%
2022	28.5%	10.2%

**Source: American Community Survey (ACS), as
tabulated by the authors.**

- **As can be seen, Latino immigrants tend to have almost twice the health care uninsurance rate than those born in the United States.**
- **Why the difference?**

- **A significant proportion of the immigrant population in the U.S. consists of undocumented immigrants.**
- **And undocumented immigrants are not eligible to enroll in federally funded coverage including Medicaid, the Children Health Insurance Program (CHIP), or Medicare, or to purchase coverage through the ACA Marketplaces.**

- **I said that the undocumented represent a significant proportion of the immigrant population in the US.**
- **How many? Any idea how many undocumented immigrants residing in the US today?**

**Estimate of the number of
undocumented immigrants =**

total number of immigrants who are counted
in the recipient country at any given moment
in time (for instance, in the U.S., through
Census data, which asks whether the person
was born outside the US or not)

minus

number of legal immigrants residing in the
country, as counted or estimated by
immigration authorities (in the U.S., from
data collected by the Department of
Homeland Security)

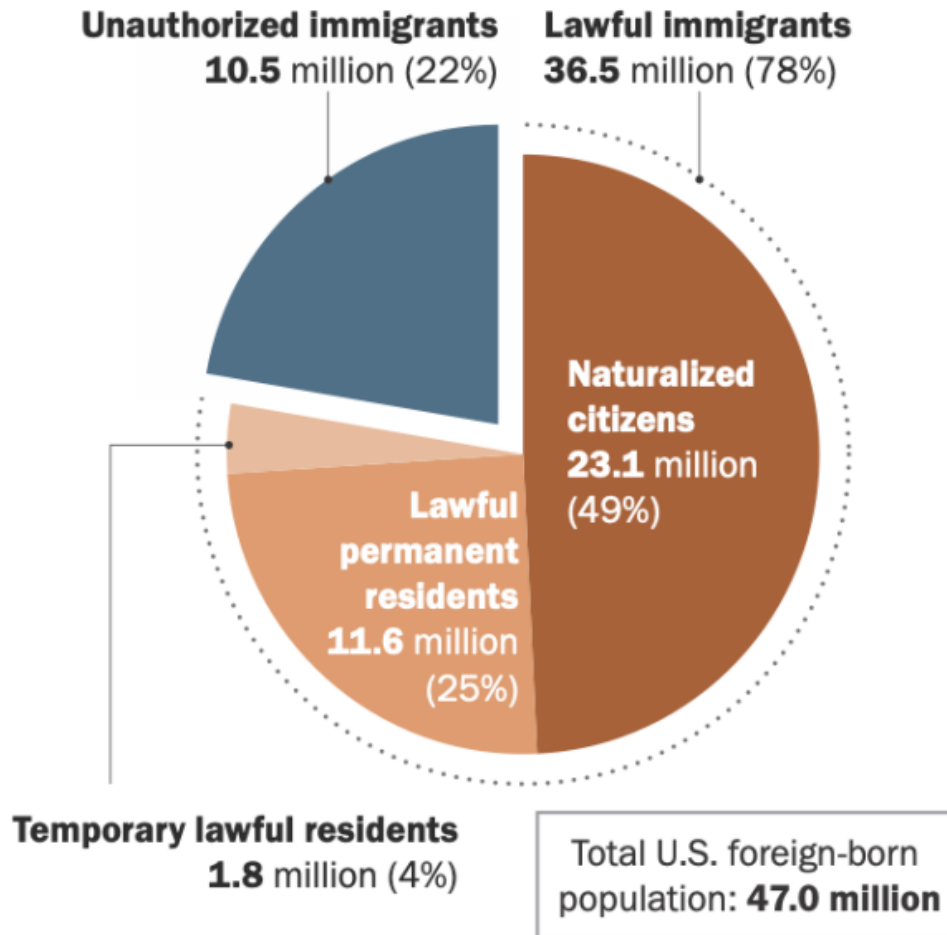
Estimates of the Stock of Illegal Immigrants Residing in the U.S., 1980-2019

Year	Illegal Immigrants
1980	2,100,000
1990	3,525,000
1995	5,146,000
2000	8,375,000
2005	11,100,000
2007	12,200,000
2019	11,047,000
2021	10,500,000

Source: Pew Research Center (2023).

Unauthorized immigrants were 22% of the U.S. foreign-born population in 2021

Foreign-born population estimates, 2021



Source: J. Passel and J.M. Krogstad, What we Know about Unauthorized Immigrants Living in the U.S., Pew Research Center, November 13, 2023.

- **But even among immigrants who are permanent residents and have a green card --who are generally eligible for Medicaid, CHIP, and other programs-- many remain uninsured.**
- **This may be because of language and literacy issues, fear, confusion about the eligibility requirements, and difficulties navigating the enrollment process.**

- **Income can also be a major source of differences in health insurance coverage.**
- **Consider the differences among Latinos who live in families below the poverty rate, compared to those who are above the poverty level.**

Poverty is measured relative to a **poverty threshold, which is the amount of money necessary for a person to meet what is considered to be the minimum standard of living in the country.**

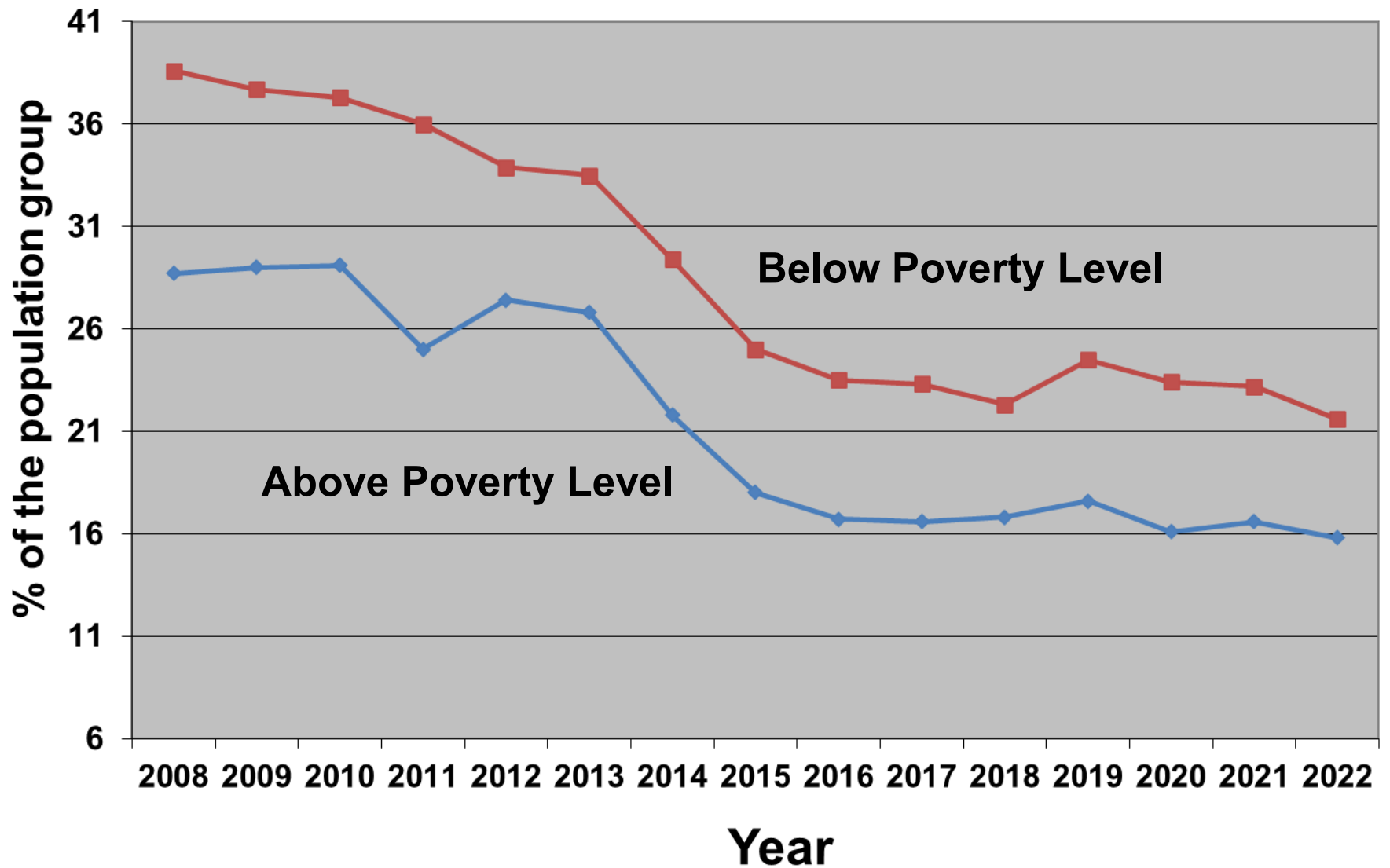
Poverty levels in the U.S. are calculated by the U.S. Bureau of the Census and this is used to guide eligibility to government programs targeting the poor.

In 2022, the official poverty threshold for a family of 5 in the United States was equal to \$32,470.

It is higher for larger families.

- **The following Table shows the percentage of Latinos who do not have any health insurance, decomposed by whether they are:**
- **poor** (their family income is below the poverty level) or
- **not poor** (their family income is above the poverty level).

**Among Latinos: Uninsured as a % of the Group's Population:
Below Poverty Level versus Above Poverty Level**



**Latinos with No Health Insurance,
Poor versus Not Poor
(As a percentage of the population in the group)**

Year	Below Poverty Level	Above Poverty Level
2010	37.3%	29.1%
2022	21.6%	15.8%

**Source: American Community Survey (ACS), as
tabulated by the authors.**

- **There are also big differences in health insurance participation by age group.**
- **Older persons (over 64) have much lower uninsured rates because of the presence of Medicare.**

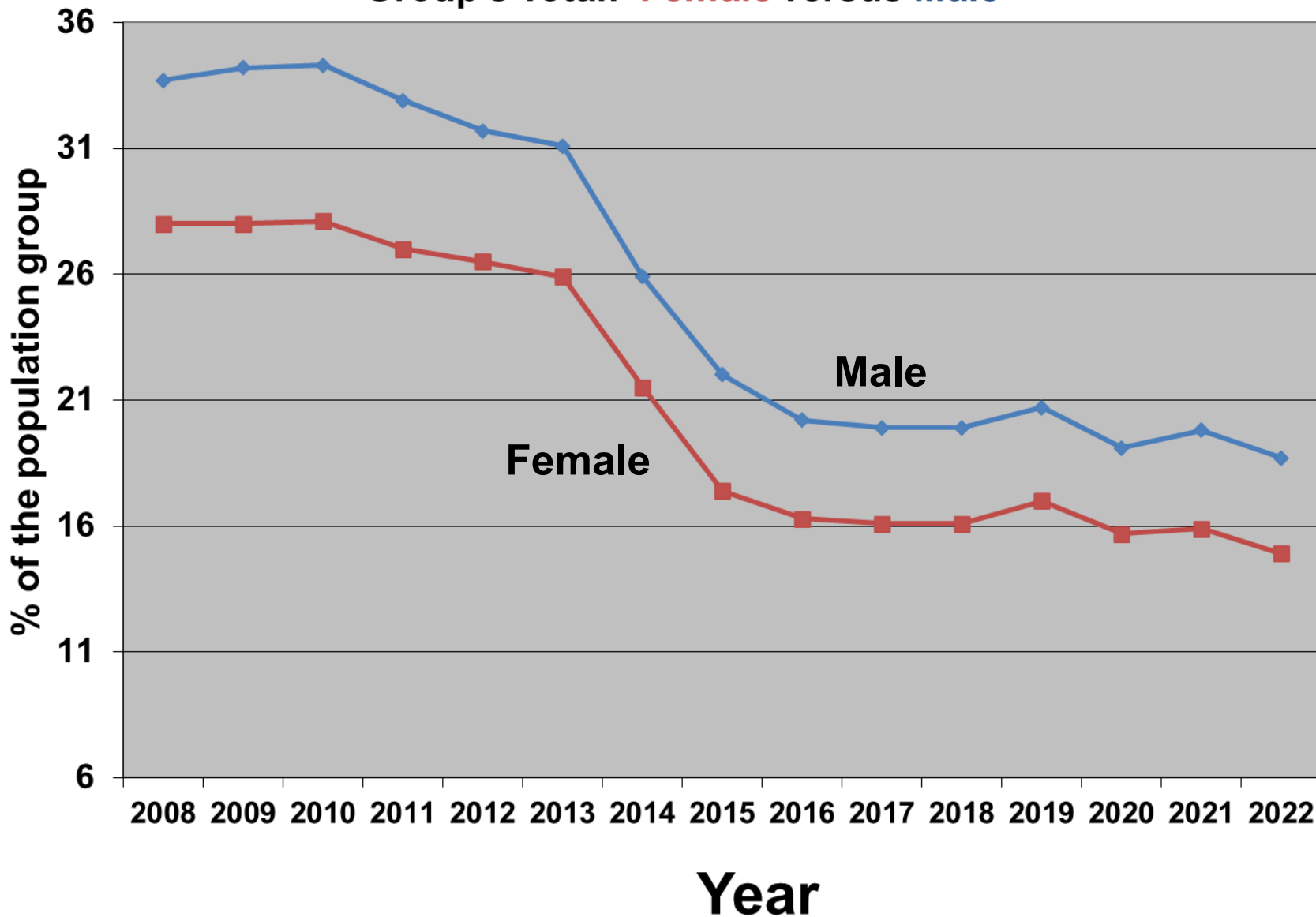
Latinos with **No Health Insurance** in the U.S. By Age Group

Age Group	% of the category without Health Insurance			
	Latinos		U.S. Population	
	2010	2022	2010	2022
Less Than 16	13.3%	7.2%	8.1%	4.7%
16 to 24	42.3%	19.1%	25.7%	11.0%
25 to 44	53.9%	25.5%	25.2%	13.5%
45 to 64	34.0%	20.2%	15.4%	9.1%
Over 64	5.3%	3.7%	1.0%	0.9%

Source: American Community Survey (ACS), as tabulated by the authors.

- **Is there a difference between Latinas and Latinos in terms of access to health insurance?**
- **That is, is there a difference based on sex?**
- **Yes, there is.**

Among Hispanics/Latinos: Uninsured as a % of the Group's Total: Female versus Male



- This pattern, with women having **lower rates of health uninsurance rates** than men, holds as well for the overall U.S. population.
- This is shown in the next Table.

Persons with No Health Insurance, Female versus Male

(As a percentage of the population in the group)

Year	Latinos		Overall U.S. Population	
	Male	Female	Male	Female
2010	34.3%	28.1%	17.7%	13.9%
2022	18.7%	14.9%	9.5%	7.0%

Source: American Community Survey (ACS), as tabulated by the authors.

- **Why this pattern?**
- **Adult women are more likely to be enrolled in Medicaid than men.**
- **This is partly because women have lower income than men and are therefore more eligible to qualify for Medicaid than men.**
- **There are also more women under Medicaid's eligibility categories of being pregnant, being a parent of children under 18, disabled, or over 65.**

- **The poverty rate among women is 20% higher than among men.**
- **And a significant proportion of women living in poverty reside in female-headed households with children and no spouse present.**
- **In 2019, 17.7% of the Latino population resided in female-headed households.**
- **Latinos residing in female-headed households have a poverty rate of 32.6%, while other households (male-headed households and couples) have a poverty rate of 16.8%.**

- **The percentage of Latinos with health insurance varies by location as well.**
- **Some states have substantially higher rates of uninsured persons.**
- **These are the top ten states in terms of Latino populations in the U.S.**

Top 10 Latino Populations in the U.S., By State

State	Population in 2020
California	15,979,652
Texas	11,941,717
Florida	5,997,240
New York	3,948,032
Illinois	2,337,410
Arizona	2,192,253
New Jersey	2,002,575
Georgia	1,323,457
Colorado	1,293,390
Washington	1,259,213

Source: 2020 U.S. Census of Population.

Latinos with **No Health Insurance** in the U.S. in 2022
Top 10 Latinos Populations, By State

State	% of the category without Health Insurance	
	Latinos	U.S. Population
United States	16.8%	8.2%
California	10.7%	6.6%
Texas	26.3%	17.0%
Florida	17.0%	11.5%
New York	9.7%	4.9%
Illinois	15.1%	6.7%
Arizona	17.5%	10.6%
New Jersey	17.1%	6.9%
Georgia	29.1%	12.1%
Colorado	14.1%	7.3%
Washington	15.0%	6.0%

Source: American Community Survey (ACS), as tabulated by the authors.

- **New York state has a comparatively lower rate of uninsured Latinos relative to the United States.**
- **This is also reflected in the data for Latinos in New York City, which shows lower uninsured rates compared to the United States overall, as the next Table shows.**

Latinos with **No Health Insurance** in the U.S. in 2022

Selected Cities

City	% of the category without Health Insurance	
	Latinos	Overall City
Los Angeles, CA	14.0%	9.7%
Boston, MA	4.2%	2.8%
Miami, FL	19.8%	17.7%
New York, NY	10.0%	5.9%
Chicago, IL	14.7%	8.8%
Paterson, NJ	23.5%	19.4%

Source: American Community Survey (ACS), as tabulated by the authors.

- **Limitations of the analysis based on the U.S. Bureau of the Census data:**
- **1. No questions were asked on the affordability and cost of the health insurance provided.**
- **2. No questions were asked about problems with the coverage of the health insurance programs, that is, what procedures, medicines, etc. are refused.**

**Thank you for attending
this workshop!!!!**