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# Access to Health Care Among Hispanic or Latino Women: United States, 2000–2002

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### Abstract

*Objective*—This report presents national estimates on access to health care for the following five subgroups of Hispanic or Latino women aged 18 years and over in the United States: Mexican, Puerto Rican, Cuban, Central or South American, and other Hispanic. For comparison, estimates are also presented for non-Hispanic white women and non-Hispanic black women.

*Methods*—Data for persons of all ages in the U.S. civilian noninstitutionalized population are collected each year in the National Health Interview Survey (NHIS), which is conducted by the Centers for Disease Control and Prevention's National Center for Health Statistics. Each year, data are collected for approximately 100,000 persons in 40,000 households. In the 2000–2002 surveys combined, data were collected for 54,763 women aged 18 years and over (9,082 Hispanic or Latino women), with an overall response rate of 73.4%. Estimates in this report are presented as annual estimates, averaged over the 3 survey years. Estimates were age adjusted to the 2000 U.S. standard population to permit comparison among the various race and ethnic subgroups.

*Results*—Among the 33.4 million Hispanic or Latino women in the United States, 31% lacked health insurance coverage at the time of interview, 20% had no usual place to go for medical care during the past year, and 22% experienced unmet health care needs during the past year due to cost. Of the five subgroups of Hispanic or Latino women, Mexican women (35%) and Central or South American women (36%) were more likely than Puerto Rican women (14%) and Cuban women (23%) to lack health insurance coverage. Mexican women (78%) and Central or South American women (78%) were less likely to have a usual place to go for health care compared with Puerto Rican women (90%), Cuban women (82%), and other Hispanic women (90%). The percentage of Hispanic or Latino women (24%) and lowest among Cuban women (14%). Lack of access to health care was most prevalent among Hispanic or Latino women who had poor or near poor poverty status, had less than a high school diploma, or were foreign born.

*Conclusion*—Access to health care varied among subgroups of Hispanic or Latino women. Understanding these subgroup differences may help community-based programs improve access to care among Hispanic or Latino women.

**Keywords**: access to health care • Hispanic or Latino women • National Health Interview Survey



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### Introduction

Access to health care plays an important role in the quality of health care, the quality and years of healthy life, and the presence or absence of health disparities (1). Although efforts have been made to eliminate inequality in health and health care, disparities in access to health care continue to exist in the United States. In 2000, the U.S. Department of Health and Human Services called for a national plan, Healthy People 2010, to eliminate health disparities among the different segments of the U.S. population (2). A recent study indicated that race/ethnicity is one of the key factors that contribute to disparities in health and health care utilization (3). To improve understanding of the disparities among the race/ethnicity subpopulations of U.S. women, this study describes differences in access to health care and health care utilization among Hispanic or Latino women in the United States.

The U.S. Hispanic or Latino population is projected to grow from 31.7 million (12% of the population) in 1999 to 98.2 million (24% of the U.S. population) by 2050. Over the same period, the non-Hispanic white population is projected to decrease from 72% to 53%, and the non-Hispanic black population is projected to increase slightly from 13% to 15% in 2050 of

the total U.S. population (4,5). Despite the rapid growth in the Hispanic or Latino population, access to health care among the subgroups of this population has only recently started to receive attention. Previous reports indicated that Hispanic or Latino women were less likely to have health insurance coverage and less likely to have a usual place of health care compared with non-Hispanic white women and non-Hispanic black women (6-11). Hispanic or Latino women were also more likely to experience difficulties in obtaining needed health care than non-Hispanic white women (12). These observations indicate a need to improve access to health care among Hispanic or Latino women and non-Hispanic black women. To target programs to these populations, a better understanding about the differences in access to health care across the ethnic groups is needed.

The U.S. Hispanic or Latino population consists of individuals originally from various countries in North America, Central or South America, the Caribbean, and Europe. Although these women in the United States may share a common language, there is considerable variation among subgroups in terms of cultural background, socioeconomic status, and care-seeking behaviors. Understanding this diversity can help identify and target groups for improving access to health care.

This study assesses subgroup differences in access to health care among Hispanic or Latino women by examining health insurance coverage, having a usual place of health care, and experiencing unmet medical needs due to cost. Differences in having a usual place to go for routine or preventive care and time since last contact with a health care professional were also assessed. For comparison, estimates are also presented for non-Hispanic white women and non-Hispanic black women.

### Methods

### Data source

Data from the 2000–2002 National Health Interview Surveys (NHIS) were analyzed for this study. NHIS is

conducted by the Centers for Disease Control and Prevention's National Center for Health Statistics (NCHS). The annual sample consists of about 100,000 persons of all ages in approximately 40,000 households representing the civilian noninstitutionalized resident population of the United States. Using computerassisted personal interviewing (CAPI), trained interviewers from the U.S. Census Bureau conduct the in-person interviews for NCHS. The CAPI version of the NHIS questionnaire is administered using laptop computers, which allow interviewers to read questions from and enter responses directly into the computer during the interviews.

The NHIS survey design has been revised every 10-15 years, and the latest revision occured in 1997 (13). Both the black and Hispanic or Latino populations are oversampled to increase the precision of estimates for those subgroups (14). NHIS consists of a set of core questions that remain unchanged from year to year in addition to supplemental questions that vary annually in response to current needs for data. The Core Module has three components: the Family Core, the Sample Adult Core, and the Sample Child Core. The Family Core collects information on everyone in the family about household composition, sociodemographic characteristics, health status, and utilization of health care services (13,14). Additionally, one adult and one child are randomly selected from each family, and information on each is collected with the Sample Adult Core and the Sample Child Core questionnaires. Those questionnaires collect more detailed information on health status, utilization of health care services, and health behaviors. For the Sample Adult Core, the individual adult responds for himself or herself.

This study analyzed data from the Sample Adult Core components of the 2000–2002 NHIS. Three years of data were combined to obtain a larger sample size for each Hispanic or Latino subgroup. In the 2000–2002 surveys combined, data were collected for 54,763 women aged 18 years and over (9,082 Hispanic or Latino women). The overall response rate for the Sample Adult component of the 2000–2002 NHIS was 73.4%.

### Classification of Hispanic or Latino women

The questionnaire included the following two questions about Hispanic origin: "Do/does [you/name] consider [yourself/himself/herself] Hispanic or Latino?" and "Please give me the (number of the group) that represents your Hispanic Origin or ancestry." During the interview, the respondent was shown a flash card listing the following response categories: Puerto Rican, Cuban/Cuban American, Dominican, Mexican, Mexican American, Central or South American, Other Latin American, and Other Hispanic or Latino. Women reporting any Hispanic or Latino ethnicity were classified as "Hispanic or Latino" regardless of their race identification.

This report presents data for five Hispanic or Latino subgroups: Mexican (comprising Mexicans and Mexican Americans), Puerto Rican, Cuban (comprising Cubans and Cuban Americans), Central or South American, and other Hispanic. The other Hispanic subgroup includes women classified as Dominican, other Latin American, or other Hispanic or Latino origin. Estimates are also presented for non-Hispanic white women and non-Hispanic black women.

### Measurement of access to health care

Access to health care was described using three measures: health insurance status, having a usual place to go for health care, and experiencing unmet medical needs due to cost. In this analysis, a woman is classified as having health insurance coverage if she has a comprehensive health insurance plan, including private health insurance, and public health plans (such as Medicaid or military health care) but not plans that pay for only one type of service such as dental or vision care plans. Women who had only Indian Health Service coverage are considered uninsured.

Women were classified as having a usual place of health care if they reported that they had one or more places other than a hospital emergency room to go when sick or in need of advice about their health. Women were classified as having unmet medical needs due to cost if, in the past 12 months, they failed to receive or delayed medical care, dental care, mental health care, or counseling due to financial barriers.

Contact with a health care professional was defined as a visit to or conversation with a doctor or other health care professional in person or by telephone for health treatment or advice of any type. Information on time since last contact with a health care professional is categorized as: Never; 6 months or less; more than 6 months, but not more than 1 year; more than 1 year, but not more than 2 years; more than 2 years, but not more than 5 years; and more than 5 years. Respondents were also asked whether they had a usual place for routine preventive care. The NHIS questions used to define measures of access to health care are included in the "Technical Notes." Definitions of selected sociodemographic terms used in this report are also included in the "Technical Notes."

#### Statistical analysis

Estimates shown in this report were calculated using sample adult weights that are based on the 2000 census totals for sex, age, and race/ethnicity of the civilian noninstitutionalized population of the United States (14). The Taylor series linearization method was chosen for variance estimation. All analyses were conducted using the SUDAAN software package to account for the complex sample design of NHIS (15). Estimates with relative standard errors of greater than 30% are considered to be unreliable and are indicated with an asterisk (\*). Differences between percentages were evaluated using two-sided t-tests at the 0.05 level. No adjustments were made for multiple comparisons. Terms such as "greater than" and "less than" imply that differences are significant, and terms such as "similar" or "no difference"

mean that no significant difference between the estimates was found. Lack of comments regarding the difference between estimates does not mean that the difference was tested and found to be not significant. Estimates were age adjusted to the 2000 U.S. standard population. Age adjustment was used to permit comparison among the various racial and ethnic subgroups that may have different age structures (16). The age groups used for age adjustment in this report are 18-44 years, 45-64 years, and 65 years and over. Education is restricted to certain age groups and is, therefore, adjusted accordingly (see relevant footnotes on tables for age groups).

### Results

Table 1 and Figure 1 present the percent distributions of selected sociodemographic characteristics among the different subgroups of Hispanic or Latino women, non-Hispanic white women, and non-Hispanic black women.

With the exception of Cuban women, Hispanic or Latino women were generally younger than non-Hispanic white women and non-Hispanic black women. Among the five subgroups of Hispanic or Latino women, Cuban

women had the highest percentage of adults aged 65 years and over and lowest percentage of adults aged 18-44 years. Hispanic or Latino women were 2.6 times as likely as non-Hispanic white women to be living below the Federal poverty level (Figure 2). Cuban women (13.8%) and Central or South American women (12.3%) were less likely than Puerto Rican women (20.5%) to be living below the Federal poverty level. The subgroups of Hispanic or Latino women were concentrated in different geographic regions. The majority of Mexican women lived in the West (55.5%), the majority of Puerto Rican women (60.3%) lived in the Northeast, and most Cuban women (75.9%) lived in the South. Hispanic or Latino women had lower levels of educational attainment compared with non-Hispanic white women and non-Hispanic black women. Among the five subgroups of Hispanic or Latino women, Mexican women (52.1%) were more likely than Puerto Rican (33.0%), Cuban (34.1%), Central or South American (33.3%), and other Hispanic women (28.0%) to have a less than high school education. Hispanic or Latino women (38.4%) were more likely than non-Hispanic white women (34.0%) and non-Hispanic black women (29.7%) to

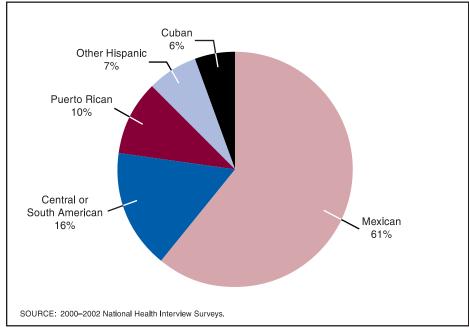


Figure 1. Percentage of Hispanic or Latino women by origin: United States, 2000–2002

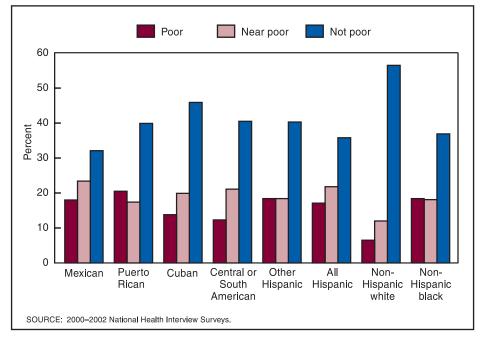


Figure 2. Percentage of Hispanic or Latino women in five subgroups, of non-Hispanic white women, and of non-Hispanic black women by poverty status: United States, 2000–2002

be unemployed. Among the subgroups of Hispanic or Latino women, Cuban women were most likely to be currently unemployed. Hispanic or Latino women (55.9%) were more likely to be married compared with non-Hispanic black women (31.2%). Hispanic or Latino women were also less likely than non-Hispanic black women to be divorced or separated or never married. Overall, approximately 54% of Hispanic or Latino women were foreign born. Last, only two-thirds of Hispanic or Latino women have health insurance compared with 81% of non-Hispanic black women and 90% of non-Hispanic white women. Private insurance coverage was far less common among Hispanic or Latino women (46%) compared with non-Hispanic white women (78%), and slightly less common than among non-Hispanic black women (56%). The percentage of Hispanic women with public health insurance coverage varied widely among the different subgroups, from 14% of Central and South American women to 35% of Puerto Rican women.

### Health insurance coverage

As shown in Table 2, 30.9% of Hispanic or Latino women did not have health insurance coverage at the time of interview compared with 10.3% of non-Hispanic white women and 17.2% of non-Hispanic black women. Of the five subgroups of Hispanic or Latino women, Mexican (34.8%) and Central or South American women (36.1%) were more likely than Puerto Rican (14.3%), Cuban (22.9%), and other Hispanic women (18.2%) to be uninsured. The percentage of Hispanic or Latino women who did not have health insurance coverage decreased with age from 39.6% for ages 18–44 years to 5.9% for ages 65 and over.

In terms of poverty status, 15.7% of Hispanic or Latino women who were not poor were uninsured, 41.1% of near poor Hispanic or Latino women were uninsured, and 44.2% who were poor were uninsured. Among Hispanic or Latino women in poverty, Mexican women (53.3%) were most likely to be uninsured, followed by Central or South American women (48.5%) and Cuban women (33.6%). Similar to non-Hispanic white women and non-Hispanic black women, Hispanic or Latino women living in the South were more likely than those living in the other regions to lack health insurance coverage. Among those living in the South, Mexican women (42.1%) and Central or South American women (40.3%) were more likely to lack health

insurance coverage than Puerto Rican women (15.8%), Cuban women (21.9%), and other Hispanic women (19.0%). In terms of education, lack of health insurance coverage decreased with higher educational attainment. Overall, 41.0% of Hispanic or Latino women with less than a high school diploma had no insurance compared with 15.9% of Hispanic or Latino women with more than a high school education.

More than 27% of currently employed and 38% of currently unemployed Hispanic or Latino women were uninsured. Among both the currently employed and unemployed Hispanic or Latino women, Mexican and Central or South American women were more likely to be uninsured than Puerto Rican, Cuban, and other Hispanic women. Almost one-third of married Hispanic or Latino women did not have health insurance coverage compared with 7.5% of married non-Hispanic white women and 11.6% of married non-Hispanic black women. Married Mexican women (33.7%) and Central or South American women (34.1%) were more likely to be uninsured compared with married Puerto Rican (9.9%), Cuban (20.2%), and other Hispanic women (14.4%).

Foreign-born Hispanic or Latino women were 2.3 times as likely as U.S-born Hispanic or Latino women to lack health insurance coverage. For foreign-born Hispanic or Latino women, lack of health insurance coverage decreased with the number of years they resided in the United States. As shown in Figure 3, foreign-born Hispanic or Latino women who were not citizens of the United States (51.9%) were more likely than their U.S. citizen counterparts (22.0%) to be uninsured.

# Usual place to go for health care

Table 3 presents the percentage of Hispanic or Latino women, non-Hispanic white women, and non-Hispanic black women who had a usual place to go for health care by selected demographic characteristics. Overall, the percentage of Hispanic or Latino women who had a usual place to go for health

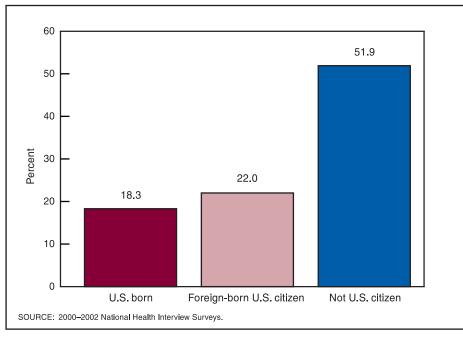


Figure 3. Percentage of Hispanic or Latino women who lacked health insurance coverage, by nativity and citizenship: United States, 2000–2002

care was 80.2%, significantly lower than non-Hispanic white women (91.7%) and non-Hispanic black women (89.5%). Mexican women (77.6%) and Central or South American women (78.1%) were less likely to have a usual place to go for health care compared with Puerto Rican women (89.8%) and other Hispanic women (89.7%). The percentage of Hispanic or Latino women who had a usual place to go for health care increased with age from 73.8% for ages 18–44 years to 93.4% for ages 65 and over.

Among poor and near poor Hispanic or Latino women, Mexican and Central or South American women were less likely to have a usual place to go for health care compared with non-Hispanic white women, non-Hispanic black women, Puerto Rican women, and other Hispanic women. In terms of region, Hispanic or Latino women living in the Northeast (87.1%) and Midwest (86.9%) were more likely to have a usual place of health care than Hispanic or Latino women living in the South (75.9%) and West (79.8%). Among those in the South, Mexican women (73.6%) and Central or South American women (74.4%) were less likely than non-Hispanic white women (90.2%), non-Hispanic black women (87.7%), Puerto Rican women (82.6%), Cuban

women (81.9%), and other Hispanic women (83.5%) to have a usual place to go for health care.

The percentage of Hispanic or Latino women who have a usual place to go for health care increased with education from 75.3% for women with less than a high school diploma to 88.5% for women with more than a high school education. Having a usual place to go for health care was related to employment status. Currently employed Hispanic or Latino women (81.7%) were more likely than currently unemployed Hispanic or Latino women (77.0%) to have a usual place of health care.

Foreign-born Hispanic or Latino women were more likely than their U.S-born counterparts to lack a usual place of health care. Among foreignborn Hispanic or Latino women, Mexican women (71.7%) were less likely to have a usual place to go for health care compared with Cuban (79.3%), Central or South American (76.8%), and other Hispanic women (85.4%). The longer foreign-born Hispanic or Latino women resided in the United States, the more likely they were to have a usual place to go for health care. As shown in Figure 4, foreign-born Hispanic or Latino women who were not citizens of the United States (67.9%) were less likely than foreign-born Hispanic or Latino women who were citizens of the United States (86.6%) to have a usual place to go for health care.

Over 90% of all women who were insured had a usual place of health care, but uninsured women were far less likely to have a usual place of health care (Figure 5). Among uninsured women, a greater percentage of Hispanic

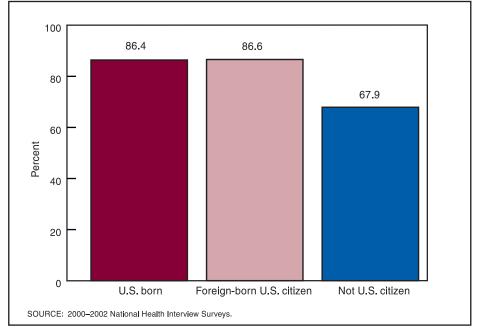


Figure 4. Percentage of Hispanic or Latino women who had a usual place of heatlh care, by nativity and citizenship: United States, 2000–2002

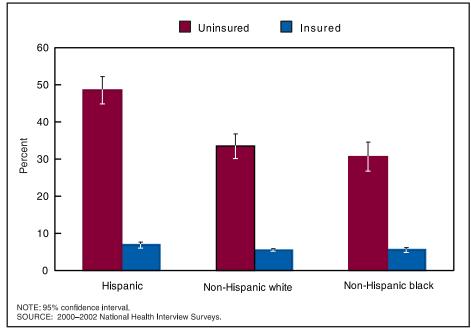


Figure 5. Percentage of women with no usual place of care (or only hospital emergency room) by race or ethnicity and insurance status: United States, 2000–2002

or Latino women (48.5%) did not have a usual place of health care compared with non-Hispanic white women (33.8%) and non-Hispanic black women (30.8%).

Table 4 presents percent distributions of type of usual place of health care for Hispanic or Latino women, non-Hispanic white women, and non-Hispanic black women by type of health insurance coverage. Although the most common place for Hispanic or Latino women to go for health care was a doctor's office or HMO (69.2%), this was less common than among non-Hispanic white women (83.6%) and non-Hispanic black women (74.4%). Hispanic or Latino women (1.5%) as well as non-Hispanic black women (1.8%) were more likely than non-Hispanic white women (0.5%) to use a hospital emergency department as their usual place of health care. Hispanic or Latino women with public health insurance coverage were less likely to seek health care in a doctor's office or HMO (55.6%) than non-Hispanic white women (73.0%) and non-Hispanic black women (62.8%) with public coverage. Over one-third of Hispanic or Latino women with public coverage and almost one-half of Hispanic or Latino women with no health insurance coverage sought medical care in a clinic or health

center compared with almost 12% of Hispanic or Latino women with private health insurance coverage. In contrast, far fewer non-Hispanic white and non-Hispanic black women with public health insurance coverage or without health insurance coverage utilized clinic or health center as a usual place of health care, although utilization by those women with private health insurance coverage was similar to that among Hispanic or Latino women.

Table 5 presents percent distributions of the usual place of care Hispanic or Latino women, non-Hispanic white women, and non-Hispanic black women used when they needed routine or preventive care. Compared with non-Hispanic white women, Hispanic or Latino women were more likely to receive routine or preventive care in a clinic or health center and less likely to receive such care in a doctor's office. Overall, 56.4% of Hispanic or Latino women did not get routine preventive care anywhere compared with 41.4% of non-Hispanic white women and 40.9% of non-Hispanic black women. Among the five subgroups of Hispanic or Latino women, Mexican women (12.2%) were less likely to get routine or preventive care in a doctor's office or HMO compared with Puerto Rican women (18.9%),

Cuban women (26.8%), and other Hispanic women (33.1%). The percentage of women who did not receive routine or preventive care was highest among Mexican women (61.9%) and lowest among Cuban women (40.7%).

# Unmet medical needs due to cost

Table 6 presents the percentages of Hispanic or Latino women, non-Hispanic white women, and non-Hispanic black women who had unmet medical needs due to cost in the past 12 months by selected demographic characteristics. An estimated 21.9% of Hispanic or Latino women experienced an unmet medical need due to cost. This was highest among Mexican women (24.1%) and lowest among Cuban women (13.8%). About one-third of poor and near poor Hispanic or Latino women experienced an unmet medical need during the past year. Among poor Hispanic or Latino women, Mexican (34.5%) and Central or South American women (35.0%) were more likely than Puerto Rican women (19.8%) to have an unmet medical need due to cost. More than one in five unemployed Hispanic or Latino women had experienced an unmet medical need due to cost. Married Hispanic or Latino women (19.8%) were more likely than married non-Hispanic white women (14.1%) and non-Hispanic black women (16.6%) to have an unmet medical need due to cost. A higher percentage of Hispanic or Latino women who were not U.S. citizens (24.6%) had unmet medical needs compared with Hispanic or Latino women who were U.S. citizens (21.2%). The percentage of women experiencing an unmet medical need due to cost was higher for U.S.-born Hispanic or Latino women (23.2%) than for foreign-born Hispanic or Latino women (20.9%). However, among foreign-born Hispanic or Latino women, those who were not U.S. citizens (24.3%) were more likely than those who were U.S. citizens (16.4%) to experience an unmet medical need due to cost (Figure 6).

Less than 20% of all women who were insured had unmet medical needs due to cost, but 40% of uninsured

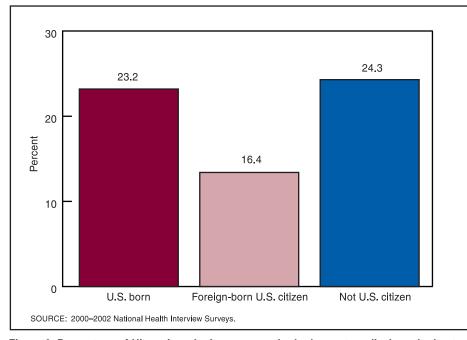


Figure 6. Percentage of Hispanic or Latino women who had unmet medical needs due to cost by nativity and citizenship: United States, 2000–2002

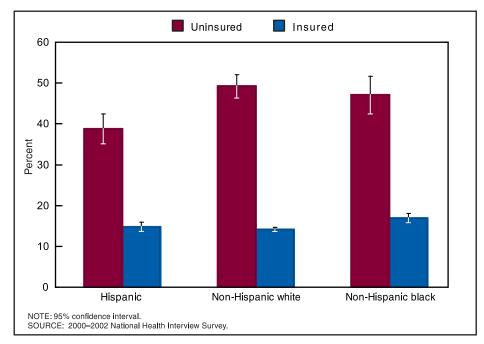


Figure 7. Percentage of women with unmet medical needs due to cost by race or ethnicity and insurance status: United States, 2000–2002

women had unmet medical needs due to cost (Figure 7). Among uninsured women, a lower percentage of Hispanic or Latino women (38.8%) had unmet medical needs due to cost compared with non-Hispanic white women (49.3%) and non-Hispanic black women (47.3%). Uninsured Hispanic or Latino women were more likely than insured Hispanic or Latino women to have an unmet medical need due to cost.

Table 7 presents percentage of Hispanic or Latino women, non-Hispanic white women, and non-Hispanic black women who delayed medical care for a variety of reasons. Among Hispanic or Latino women as well as non-Hispanic white women and non-Hispanic black women, the most common reasons for delaying medical care were not getting an appointment soon enough or the wait was too long to see the doctor. Differences among the Hispanic or Latino subgroups were minimal.

Table 8 presents percent distributions of the length of time since last contact with a health care professional for Hispanic or Latino women, non-Hispanic white women, and non-Hispanic black women. The percentage of Hispanic or Latino women who had never seen a physician (2.9%) and the percentage who had last seen a health care professional more than 5 years ago (2.4%) was significantly higher than for non-Hispanic white women and non-Hispanic black women (about 1%). About two-thirds of Hispanic or Latino women (67.7%) had seen or contacted a health care professional within the past 6 months compared with 78.0% of non-Hispanic white women and 76.9% of non-Hispanic black women.

### Discussion

This report provides national estimates of access to health care by selected sociodemographic characteristics for five subgroups of Hispanic or Latino women 18 years of age and over in the United States. Analyses revealed that Hispanic or Latino women were at greater risk of lacking access to health care compared with non-Hispanic white women and non-Hispanic black women. The study results also indicated a disparity in access to health care among the five subgroups of Hispanic or Latino women. Compared with other Hispanic or Latino women, Mexican and Central or South American women were more likely to lack health insurance coverage and less likely to have a usual place of health care. Mexican and Central or South American women were also most likely to experience an unmet medical need due to cost. Among all women, lack of access to health care was most prevalent among those who were poor or near poor, who had less than a high school diploma, who were foreign born, and who were not U.S. citizens. Many of these "higher risk" socioeconomic

characteristics such as poverty, low education, and noncitizen status were prevalent among Hispanic or Latino women, particularly among Mexican and Central or South American women—the largest segments of the U.S. Hispanic or Latino population.

As stated earlier, access to health care plays an important role in the quality of health care, the quality and years of healthy life, and the presence or absence of health disparities (1). Lack of health insurance coverage is associated with reduced access to health care and poorer medical outcomes. Several studies show that uninsured persons are less likely to have a regular source of care, less likely to receive preventive and primary care, less likely to receive required preventive services, and more likely to delay needed medical care than insured persons (17–27). Another study found that uninsured persons are more likely to be in poor health and to die earlier, even when analyses controlled for other sociodemographic factors (28). A previous study of low and moderate income Hispanic or Latino people found that the high cost of health insurance was the primary reason for the high percentage of uninsured people (29). In addition, Hispanic or Latino people often encounter difficulties in accessing the health care system because many of them are employed in lower paid sectors of the economy where employers do not provide health insurance coverage (30).

This study revealed a diverse sociodemographic background for these five subgroups of Hispanic or Latino women, which is important for understanding the health care access needs in the Hispanic community. Among Hispanic or Latino women in the United States, Mexican women were most likely to have lower levels of educational attainment. Lower levels of educational attainment are related to less favorable occupational status and poverty. This study also showed that approximately 90% of Mexican women lived in the South and West, where, overall, the percentage of uninsured was higher compared with the Northeast and Midwest. This may be due partly to differentials in eligibility criteria for government-sponsored health plans and the types of plans available.

Additionally, a large number of Mexicans live along the U.S.-Mexico border stretching from California to Texas. It has been reported that health care entitlements are extremely meager along the entire border and that only one fully supported public hospital was available to serve as a facility of last resort for the poor (31).

This study found that nearly onethird of all Hispanic or Latino women lacked health insurance, three times the rate among non-Hispanic white women and almost twice that among non-Hispanic black women, which is similar to recent findings elsewhere (11). The Federal Medicaid program has offered health insurance coverage to certain individuals and families with low incomes and resources since 1965 (32). Although it is an important source of health insurance coverage for many poor Hispanic or Latino people, only 4 in 10 Hispanic or Latino people with low incomes are covered (33). Medicare is also another source of health insurance for persons aged 65 and over and some persons under 65 years with disabilities. It is a critical source of national health insurance coverage for one in seven Americans (34,35). Despite these programs, the results of this study indicate that nearly half of poor Hispanic or Latino women (44.2%) and 41.1% of near poor Hispanic or Latino women lacked health insurance coverage. Analyses also revealed that among poor and near poor women, Mexican women and Central or South American women were more likely to lack health insurance coverage compared with the other three Hispanic or Latino subgroups. A recent study suggested that a lengthy, complex, and burdensome enrollment process; lack of overall knowledge of available programs; and lack of translators and interpreter service are significant barriers to enrollment in Medicaid and other public programs (32).

Consistent with previous studies, this study revealed that foreign-born Hispanic or Latino people were at greater risk for lack of access to health care than their U.S-born counterparts (36–39). Previous reports have shown that lack of access to health care for foreign-born Hispanic or Latino people

may be associated with language barriers and cultural differences (40,41). For example, foreign-born Hispanic or Latino people who have limited English proficiency were more likely to be uninsured and less likely to use U.S. health care services than English speaking U.S.-born Hispanic or Latino people (42). Furthermore, compared with non-Hispanic white women, Hispanic or Latino women were more likely to feel that doctors did not take the time to answer their questions and were more likely to leave the doctor's office without understanding the information they had received (43). This analysis also revealed that foreign-born Hispanic or Latino women who were not U.S. citizens were at greater risk of experiencing lack of access to health care compared with their counterparts who were U.S. citizens. This may be partially explained by ineligibility of most foreign-born Hispanic or Latino women for Medicaid and Medicare unless they are U.S. citizens or lawful permanent residents.

NHIS is one of the largest health surveys conducted in the United States. It provides annual data to identify and monitor trends in the Nation's health and health care. Its sample design makes it possible to combine years of data to produce more reliable estimates, thus providing national estimates of access to health care for subgroups of Hispanic or Latino women. Although data from the 2000-2002 NHIS were combined to increase sample size, the sample sizes for some groups of Hispanic or Latino women are still small. This limited the ability to produce reliable estimates for all Hispanic or Latino subgroups. Despite these limitations, the study identified significant disparities among subpopulations of Hispanic or Latino women, who make up over 10% of women living in the United States. Mexican and Central or South American women, who make up over threequarters of the female Hispanic or Latino population, were disproportionately represented among Hispanic or Latino women who lacked health insurance coverage, a usual place to go for health care, who had unmet medical needs due to cost, and who share a disproportionate percentage of

"higher risk" sociodemographic characteristics. Much of the disparity in access to health care between Hispanic or Latino women and non-Hispanic white and non-Hispanic black women is driven by lack of access to health care among Mexican and Central or South American women in the United States. The information from this study may be useful to programs that seek to improve access to health care among subgroups of Hispanic or Latino women.

### References

- National Health Disparities Report. U.S. Department of Health and Human Services. Agency for Healthcare Research and Quality. Rockville, MD. 2003.
- U.S. Department of Health and Human Services. Healthy People 2010. 2nd ed. With understanding and improving health and objectives for improving health; 2 vols. Washington: U.S. Government Printing Office. 2000.
- Keppel K, Pearcy J, Wagener D. Trends in racial and ethnic specific rates for the health status indicators: United States, 1990–98. Healthy People Statistical Notes, No 23. Hyattsville, MD: National Center for Health Statistics. 2002.
- Ramirez RR. The Hispanic population in the United States: March 1999, Current Population Reports, P20–527, U.S. Census Bureau, Washington. 2000.
- Census Bureau projects doubling of Nation's population by 2100. U.S. Census Bureau. Public Information Office. Available from: www.census.gov/Press-Release/www/ 2000/cb00–05.html.
- Highlights and Chartpack. The Kaiser Family Foundation D.C. Health Care Access Survey, 2003. Publication 6108. Washington. 2003.
- Quinn K. Working without benefits: the health insurance crisis confronting Hispanic Americans. Publication 370. The Commonwealth Fund. 2000.
- Hogue CJR, Hargraves MA, Collins KS. (eds). Minority health in America. Findings and policy implications from the Commonwealth Fund Minority Health Survey. 2000.
- Uninsured workers Demographic characteristics, 1996. MEPS Highlights No 7. Rockville, MD:

Agency for Health Care Policy and Research. AHCPR Pub No 99–0007. 1998.

- Lucas JW, Schiller JS, Benson VE. Summary health statistics for U.S. Adults: National Health Interview Survey, 2001. National Center for Health Statistics. Vital Health Stat. 10(218). 2004.
- Salganicoff A, Beckerman JZ, Wyn R, Ojeda VD. Women's health in the United States: Health coverage and access to care. The Henry Kaiser Family Foundation. May 2002. Publication 6027. Washington. 2002.

12. Health care for minority women. Program Brief. Agency for Health Care Policy and Research. Rockville, MD. 2002. AHCPR Pub No 03-P020. Available from: http:// www.ahcpr.gov/research/

### minority.htm.

- Botman S, Moore T, Moriarity C. Design and estimation for the National Health Interview Survey, 1995–2004. National Center for Health Statistics. Vital Health Stat. 2(130). 2000.
- 14. National Center for Health Statistics. 2001 National Health Interview Survey (NHIS) Public-Use Data Release, NHIS Survey Description. Vol 2001. Hyattsville, MD: 2000. Available from: ftp://ftp.cdc.gov/pub/ health\_statistics/NCHS/ dataset\_documentation/NHIS/2001/ srvydesc.pdf.
- Shah BV, Barnwell BG, Bieler GS. SUDAAN User's Manual, Release
  Research Triangle Park, NC: Research Triangle Institute. 1996.
- Klein RJ, Schoenborn CA. Age adjustment using the 2000 projected U.S. population. Healthy People Statistical Notes, no. 20. Hyattsville, MD: National Center for Health Statistics. 2001.
- Bindman AB, Grumbach K, Osmond D, Vranizan K, Stewart AL. Primary care and receipt of preventive services. J Gen Intern Med. 11(5):269–76. 1996.
- Franks P, Clancy CM, Gold MR, Nutting PA. Health insurance and subjective health status: Data from the 1987 National Medical Expenditure Survey. Am J Public Health. 83(9):1295–99. 1993.
- Freeman HE, Aiken LH, Blendon RJ, Corey CR. Uninsured working-age adults: Characteristics and consequences. Health Services Research. 24(6): 811–23. 1990.

- Hafner-Eaton C. Physician utilization disparities between the uninsured and insured. Comparisons of the chronically ill, acutely ill, and well nonelderly populations. JAMA 269(6):787–92. 1993.
- Bindman AB, Grumbach K, Osmond D, et al. Preventable hospitalizations and access to health care. JAMA 274(4):305–11. 1995.
- Demographic characteristics of persons without a regular source of medical care—Selected states, 1995. MMWR. 47(14):277–79. 1998.
- Newacheck PW, Brindis CD, Cart CU, et al. Adolescent health insurance coverage: Recent changes and access to care. Pediatrics. Vol. 104 No 2. 195–202. 1999.
- Newacheck PW, Stoddard JJ, Hughes DC, Pearl M. Health insurance and access to primary care for children. N Engl J Med. 338(8): 513–19. 1998.
- Zuvekas SH, Weinick RM. Changes in access to care, 1997–1996. The role of health insurance. Health Serv Res. 34(1):271–9. 1999.
- 26. Ayanian JZ, Kohler BA, Abe T, Epstein AM. The relation between health insurance coverage and clinical outcomes among women with breast cancer. N Engl J Med. 329(5):326–31. 1993.
- Roetzheim RG, Pal N, Tennant C, et al. Effects of health insurance and race on early detection of cancer. J Natl Cancer Inst. 91(16) :1409–15. 1999.
- 28. American College of Physicians-American Society of Internal Medicine: No health insurance? It's enough to make you sick. Latino community at great risk. Philadelphia: American College of Physicians- American Society of Internal Medicine; White Paper. 2000.
- 29. Perry M, Kannel S, Castillo E. Barriers to health coverage for Hispanic workers: Focus group findings. Publication No 425. The Commonwealth Fund. 2000.
- Valdez RB, Morgenstern H, Brown ER, et al. Insuring Latinos against the costs of illness. JAMA 269(7): 889–94. 1993.
- Warner DC. Health issues at the U.S.-Mexican border. JAMA 265(2):242–7. 1991.
- Perry M, Kannel S, Valdez RB, Chang C. Medicaid and children. Overcoming barriers to enrollment.

Findings from a National survey. The Kaiser Commission on Medicaid and the uninsured. 2000.

- 33. Health insurance coverage and access to care among Latinos. The Kaiser Commission on Medicaid and the Uninsured. Key Facts. 2000.
- Medicare. Medicare at a glance. Fact sheet. The Henry J. Kaiser Family Foundation. Publication No 1066–08. 2004.
- The faces of Medicare. Medicare and low-income beneficiaries. The Henry J. Kaiser Family Foundation. 1999.
- 36. Macias EP, Morales LS. Utilization of health care services among adults attending a health fair in South Los Angeles County. J Community Health. 25(1):35–46. 2000.
- Thamer M, Richard C, Cassebeer AW, Ray NF. Health insurance coverage among foreign-born U.S. residents: the impact of race, ethnicity, and length of residence. Am J Public Health. 87(1):96–102. 1997.
- 38. Schur CL, Feldman J. Running in place: how job characteristics, immigrant status, and family structure keep Hispanics uninsured. Publication no 453. The Commonwealth Fund. 2001.
- Guendelman S, Schauffler HH, Pearl M. Unfriendly shores: how immigrant children fare in the U.S. health system. Health Aff. 20 (1):257–66. 2001.
- 40. Feld P, Power B. Immigrants' access to health care after welfare reform: Findings from focus groups in four cities. The Kaiser Commission on Medicaid and the Uninsured. Publication no 1608. Washington. 2000.
- 41. Ku, L, Freilich A. Caring for Immigrants: Health care safety nets in Los Angeles, New York, Miami, and Houston. The Kaiser Commission on Medicaid and the uninsured. 2001.
- 42. Ku L, Waidman T. How race/ ethnicity, immigration status and language affect health insurance coverage, access to care and quality of care among the low-income population. The Kaiser Commission on Medicaid and the uninsured. August 2003. Publication no 4132. Washington.
- Key facts, race, ethnicity & medical care. The Henry J. Kaiser Family Foundation. Publication no 7018. 1999.

Table 1. Number and percent distribution (with standard errors) for Hispanic or Latino women in five subgroups and for non-Hispanic white women and non-Hispanic black women aged 18 and over, by selected demographic characteristics: United States, 2000–2002

Selected characteristic	Mexican	Puerto Rican	Cuban	Central or South American	Other Hispanic	All Hispanic	Non- Hispanic white	Non- Hispanic black
				Num	nber			
nweighted sample size	5,418	1,011	559	1,327	767	9,082	35,431	8,40
eighted size	6,547,202	1,221,754	650,924	1,903,536	835,672	11,159,088	77,839,666	12,830,58
				Percent distributio	n (standard error)			
ıtal	100.0 (0.00)	100.0 (0.00)	100.0 (0.00)	100.0 (0.00)	100.0 (0.00)	100.0 (0.00)	100.0 (0.00)	100.0 (0.00
Age								
3–44 years	69.1 (0.84)	61.8 (1.96)	38.8 (2.58)	67.0 (1.65)	57.8 (2.74)	65.3 (0.71)	47.9 (0.38)	59.3 (0.77
5–64 years	22.4 (0.73)	27.3 (1.75)	29.4 (2.31)	24.7 (1.46)	29.5 (2.14)	24.3 (0.59)	32.0 (0.32)	28.0 (0.65
years and over	8.5 (0.46)	10.9 (1.32)	31.8 (2.51)	8.3 (0.93)	12.6 (1.58)	10.4 (0.44)	20.1 (0.31)	12.7 (0.49
Family income								
20.000 or above	63.4 (0.93)	60.1 (2.02)	68.0 (3.04)	70.4 (1.56)	62.4 (2.10)	64.4 (0.72)	75.7 (0.34)	58.5 (0.83
ess than \$20,000	29.2 (0.90)	36.2 (1.94)	26.0 (2.93)	23.8 (1.37)	32.0 (1.91)	29.0 (0.69)	18.1 (0.30)	33.7 (0.79
nknown	7.4 (0.55)	3.7 (0.64)	6.1 (1.37)	5.8 (0.74)	5.6 (1.04)	6.5 (0.38)	6.1 (0.19)	7.8 (0.46
Poverty status <sup>1</sup>								
por	18.0 (0.71)	20.5 (1.51)	13.8 (2.55)	12.3 (0.98)	18.4 (1.57)	17.1 (0.53)	6.5 (0.20)	18.4 (0.56
ear poor	23.4 (0.79)	17.4 (1.35)	19.9 (2.07)	21.1 (1.33)	18.4 (1.68)	21.8 (0.58)	12.0 (0.22)	18.1 (0.53
ot poor	32.1 (0.92)	39.9 (2.03)	45.9 (2.74)	40.5 (1.80)	40.3 (2.27)	35.8 (0.74)	56.5 (0.43)	36.9 (0.81
nknown	26.6 (0.95)	22.1 (1.76)	20.4 (2.35)	26.1 (1.62)	22.8 (2.11)	25.4 (0.70)	25.0 (0.40)	26.6 (0.75
Region								
ortheast	1.4 (0.23)	60.3 (2.29)	16.2 (3.53)	28.5 (1.81)	42.2 (3.93)	16.4 (0.64)	20.7 (0.40)	17.8 (0.77
idwest	9.0 (0.68)	9.6 (1.43)	*2.0 (0.81)	4.4 (0.70)	4.0 (0.98)	7.5 (0.47)	28.7 (0.49)	19.1 (0.89
outh	34.1 (1.51)	21.8 (1.87)	75.9 (3.59)	39.1 (1.95)	18.1 (2.31)	34.8 (1.05)	34.3 (0.50)	56.6 (1.19
est	55.5 (1.47)	8.3 (1.33)	5.9 (1.25)	28.0 (1.72)	35.6 (5.23)	41.3 (0.99)	16.3 (0.37)	6.6 (0.40
Place of residence <sup>2</sup>								
SA	90.3 (1.02)	98.6 (0.84)	97.0 (1.07)	98.0 (0.47)	89.2 (6.53)	92.8 (0.64)	75.2 (0.59)	85.6 (1.42
Central city	47.6 (1.81)	58.2 (2.54)	25.2 (3.89)	43.4 (2.25)	53.5 (4.77)	47.2 (1.33)	21.6 (0.65)	51.6 (1.50
Not central city	42.7 (1.76)	40.4 (2.50)	71.8 (4.03)	54.6 (2.25)	35.8 (3.78)	45.7 (1.31)	53.6 (0.78)	33.9 (1.39
Not MSA	9.7 (1.02)	*1.4 (0.84)	*3.0 (1.07)	2.0 (0.47)	*10.8 (6.53)	7.2 (0.64)	24.8 (0.59)	14.4 (1.42
Urban or rural								
ban	89.2 (1.11)	95.4 (0.92)	97.7 (0.69)	95.2 (0.82)	92.9 (2.17)	91.7 (0.73)	67.3 (0.72)	85.7 (1.05
ural	10.8 (1.11)	4.6 (0.92)	*2.3 (0.69)	4.8 (0.82)	*7.1 (2.17)	8.3 (0.73)	32.7 (0.72)	14.3 (1.05
Highest education <sup>3</sup>								
ess than high school diploma	52.1 (1.00)	33.0 (2.07)	34.1 (2.43)	33.3 (1.82)	28.0 (2.10)	43.6 (0.80)	12.6 (0.28)	23.1 (0.75
gh school or GED <sup>4</sup>	22.5 (0.75)	28.1 (1.90)	25.0 (2.05)	22.8 (1.58)	26.5 (2.18)	23.6 (0.60)	32.6 (0.36)	29.6 (0.67
ore than high school	25.5 (0.89)	38.9 (2.18)	40.9 (2.57)	43.9 (1.92)	45.5 (2.55)	32.7 (0.75)	54.8 (0.45)	47.3 (0.89
Employment status <sup>5</sup>								
rrently employed	60.7 (0.85)	60.5 (1.96)	53.5 (2.48)	67.1 (1.52)	64.1 (2.23)	61.6 (0.65)	66.0 (0.35)	70.3 (0.7
urrently unemployed	39.3 (0.85)	39.5 (1.96)	46.5 (2.48)	32.9 (1.52)	35.9 (2.23)	38.4 (0.65)	34.0 (0.35)	29.7 (0.71

See footnotes at end of table.

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Table 1. Number and percent distribution (with standard errors) for Hispanic or Latino women in five subgroups and for non-Hispanic white women and non-Hispanic black
women aged 18 and over, by selected demographic characteristics: United States, 2000–2002—Con.

Selected characteristic	Mexican	Puerto Rican	Cuban	Central or South American	Other Hispanic	All Hispanic	Non- Hispanic white	Non- Hispanic black
Family size				Percent distribution	on (standard error)			
1–3 members	43.0 (0.95)	62.1 (1.98)	67.0 (2.77)	49.4 (1.72)	61.7 (2.27)	49.0 (0.77)	74.2 (0.31)	67.2 (0.76)
1–5 members	38.2 (0.91)	30.8 (1.90)	26.5 (2.37)	36.5 (1.63)	30.6 (1.98)	35.8 (0.67)	22.8 (0.30)	25.2 (0.67)
or more members	18.8 (0.82)	7.2 (1.25)	6.5 (1.45)	14.1 (1.43)	7.7 (1.60)	15.2 (0.60)	3.0 (0.13)	7.6 (0.45)
Marital status								
/arried	59.8 (0.82)	42.6 (2.03)	53.0 (2.97)	57.7 (1.63)	43.2 (2.31)	55.9 (0.68)	59.4 (0.38)	31.2 (0.69)
Vidowed	5.4 (0.37)	8.3 (1.21)	14.1 (2.03)	5.1 (0.69)	7.8 (1.29)	6.3 (0.33)	11.0 (0.19)	10.6 (0.41)
Divorced or separated	11.2 (0.45)	16.2 (1.17)	14.7 (1.58)	12.7 (1.00)	20.1 (1.91)	12.9 (0.38)	10.8 (0.18)	18.2 (0.46)
lever married	17.2 (0.68)	25.2 (1.61)	13.9 (2.10)	19.0 (1.38)	21.2 (1.79)	18.5 (0.54)	13.4 (0.32)	34.1 (0.71)
/ith partner	6.4 (0.45)	7.7 (1.06)	4.3 (1.05)	5.5 (0.71)	7.8 (1.55)	6.4 (0.34)	5.4 (0.15)	5.8 (0.33)
Citizenship								
J.S. citizen	61.6 (1.19)	99.1 (0.36)	72.7 (2.57)	43.6 (1.68)	78.1 (2.48)	64.5 (0.89)	98.2 (0.09)	95.9 (0.33)
lot U.S. citizen	38.4 (1.19)	*0.9 (0.36)	27.3 (2.57)	56.4 (1.68)	21.9 (2.48)	35.5 (0.89)	1.8 (0.09)	4.1 (0.33)
Nativity <sup>6</sup>								
J.S. born	47.5 (1.22)	98.4 (0.46)	14.6 (1.94)	11.6 (1.16)	58.5 (3.83)	45.9 (0.96)	95.8 (0.14)	91.5 (0.53)
oreign born	52.5 (1.22)	*1.6 (0.46)	85.4 (1.94)	88.4 (1.16)	41.5 (3.83)	54.1 (0.96)	4.2 (0.14)	8.5 (0.53)
Years in U.S. <sup>7</sup>								
ess than 5 years	19.8 (1.26)	6.5 (1.20)	11.6 (2.04)	22.3 (1.75)	11.0 (2.15)	18.0 (0.84)	14.3 (1.18)	17.3 (1.99)
–10 years	18.3 (0.96)	5.4 (1.02)	9.5 (1.53)	18.2 (1.39)	18.4 (2.52)	16.3 (0.65)	11.1 (0.96)	15.7 (1.75)
0 years or more	61.8 (1.58)	88.1 (1.60)	78.9 (2.43)	59.5 (1.87)	70.6 (3.02)	65.7 (1.05)	74.6 (1.39)	67.0 (2.32)
Health Insurance								
Ininsured	38.9 (1.00)	15.1 (1.31)	18.8 (1.95)	38.1 (1.69)	19.1 (1.86)	33.5 (0.76)	9.7 (0.21)	18.0 (0.54)
nsured	60.6 (1.01)	84.4 (1.32)	80.4 (2.00)	61.3 (1.70)	80.7 (1.82)	66.0 (0.76)	89.9 (0.21)	80.8 (0.57)
Private	43.8 (0.98)	49.3 (2.19)	48.8 (2.81)	47.7 (1.79)	53.3 (2.28)	46.1 (0.77)	78.0 (0.32)	55.5 (0.76)
Public	16.8 (0.65)	35.2 (2.11)	31.6 (2.48)	13.7 (1.11)	27.3 (1.89)	19.9 (0.56)	11.9 (0.24)	25.3 (0.69)

\* Estimate has a relative standard error of 30% or higher and should be used with caution as it does not meet the standard of reliability or precision.

<sup>1</sup>Poverty status is based on family income and family size using the U.S. Census Bureau's poverty thresholds for the previous calendar year. "Poor" persons are defined as below the poverty threshold. "Near poor" persons have incomes of 100% to less than 200% of the poverty threshold. "Not poor" persons have incomes that are 200% of the poverty threshold or greater.

<sup>2</sup>MSA is metropolitan statistical area.

<sup>3</sup>Highest education attainment is shown only for persons aged 25 and over.

<sup>4</sup>GED is General Educational Development high school equivalency diploma.

<sup>5</sup>Employment status is shown for those persons aged 18 and over.

<sup>6</sup>U.S. born refers to persons born in the 50 States of the United States, the District of Columbia, Puerto Rico, Guam, and other outlying territories of the United States. Foreign born refers to persons born outside the 50 States of the United States, the District of Columbia, Puerto Rico, Guam, and other outlying territories of the United States.

<sup>7</sup>Includes only those who were not born in the United States.

DATA SOURCE: 2000-2002 National Health Interview Surveys. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

Table 2. Age-adjusted percent (with standard errors) of Hispanic or Latino women in five subgroups and of non-Hispanic white women and non-Hispanic black women aged 18 and over who did not have health insurance coverage at the time of interview, by selected demographic characteristics: United States, 2000–2002

Selected characteristic	Mexican	Puerto Rican	Cuban	Central or South American	Other Hispanic	All Hispanic	Non- Hispanic white	Non- Hispanic black
				Age-adjusted percer	ht <sup>1</sup> (standard error)			
otal	34.8 (0.87)	14.3 (1.32)	22.9 ( 2.33)	36.1 (1.76)	18.2 (1.71)	30.9 (0.67)	10.3 (0.22)	17.2 (0.51
Age								
8–44 years	45.1 (1.21)	17.3 (1.73)	27.9 ( 3.88)	41.4 (2.01)	24.3 (2.55)	39.6 (0.94)	14.2 (0.33)	22.6 (0.78
5–64 years	33.6 (1.58)	15.0 (2.53)	26.5 ( 4.10)	36.8 (3.30)	15.8 (3.03)	29.7 (1.18)	9.1 (0.31)	16.1 (0.80
5 years and over	5.3 (1.27)	*3.7 (3.57)	*1.1 ( 0.75)	18.2 (5.30)	*3.4 (2.26)	5.9 (1.11)	0.6 (0.11)	2.5 (0.59
Family income								
20,000 or above	27.9 (1.11)	14.2 (2.17)	20.1 ( 2.54)	30.7 (2.37)	14.1 (1.92)	25.4 (0.85)	7.9 (0.22)	12.1 (0.59
ess than \$20,000	49.9 (1.39)	15.5 (1.96)	32.7 ( 4.74)	50.3 (2.72)	24.9 (3.13)	42.6 (1.10)	23.1 (0.77)	27.0 (0.91
nknown	46.9 (3.10)	*17.1 (6.27)	23.3 ( 8.13)	51.5 (6.14)	30.0 (8.91)	43.0 (2.38)	15.1 (1.06)	21.1 (2.12
Poverty status <sup>2</sup>								
oor	53.3 (1.64)	14.1 (2.50)	33.6 ( 5.91)	48.5 (3.50)	22.4 (3.82)	44.2 (1.38)	22.2 (1.08)	27.8 (1.22
ear poor	42.9 (1.51)	23.7 (3.93)	39.1 ( 6.73)	50.4 (3.90)	27.8 (4.21)	41.1 (1.28)	23.5 (0.86)	25.3 (1.34
ot poor	16.1 (1.16)	11.2 (1.90)	13.8 ( 2.55)	20.8 (2.59)	8.8 (1.98)	15.7 (0.86)	6.2 (0.20)	9.0 (0.6
nknown	39.8 (1.62)	12.5 (2.54)	24.5 ( 5.47)	43.4 (3.36)	25.1 (4.33)	36.2 (1.26)	12.5 (0.50)	17.5 (1.02
Region								
ortheast	53.1 (9.80)	13.4 (1.49)	32.8 (7.04)	31.4 (2.88)	21.2 (2.88)	22.6 (1.33)	7.7 (0.45)	14.0 (1.14
lidwest	27.5 (2.78)	*18.8 (5.97)	30.0 ( 7.18)	22.0 (5.86)	*13.6 (7.39)	25.6 (2.42)	8.1 (0.37)	12.5 (0.82
outh	42.1 (1.70)	15.8 (2.68)	21.9 ( 2.56)	40.3 (3.34)	19.0 (3.84)	36.5 (1.24)	13.6 (0.42)	20.2 (0.74
/est	31.4 (1.05)	*11.3 (3.51)	*17.0 ( 7.41)	37.0 (3.05)	14.6 (2.37)	30.6 (1.02)	10.8 (0.47)	13.8 (1.62
Place of residence <sup>3</sup>								
SA	34.3 (0.90)	14.5 (1.33)	22.4 ( 2.40)	36.3 (1.78)	18.5 (1.84)	30.5 (0.67)	9.3 (0.24)	15.9 (0.50
Central city	37.0 (1.31)	14.5 (1.58)	21.5 ( 3.65)	38.2 (2.19)	20.6 (2.44)	32.5 (0.93)	10.4 (0.42)	16.2 (0.68
Not central city	31.2 (1.26)	14.3 (2.27)	22.5 ( 2.87)	34.4 (2.55)	15.5 (2.74)	28.3 (0.96)	8.8 (0.30)	15.5 (0.77
ot MSA	39.3 (3.14)	0.0 (0.00)	42.8 (11.30)	26.0 (7.49)	15.8 (2.70)	35.2 (3.65)	13.7 (0.54)	25.2 (1.81
Urban or rural								
rban	34.4 (0.91)	14.3 (1.32)	22.9 ( 2.39)	35.9 (1.74)	19.0 (1.79)	30.6 (0.68)	9.5 (0.25)	16.3 (0.52
ural	38.0 (2.81)	*16.0 (7.61)	*26.8 (13.45)	35.9 (6.91)	7.2 (1.63)	34.6 (2.64)	12.0 (0.45)	22.7 (1.4
Highest education <sup>4</sup>								
ess than high school diploma	43.1 (1.23)	19.3 (2.98)	32.1 ( 5.41)	51.1 (3.13)	25.0 (4.03)	41.0 (1.05)	20.8 (0.94)	24.9 (1.25
ligh school or GED <sup>5</sup>	25.7 (1.59)	10.7 (2.50)	25.1 ( 5.16)	30.4 (3.23)	16.6 (3.29)	23.8 (1.15)	11.2 (0.41)	17.6 (0.93
ore than high school	15.7 (1.19)	9.9 (1.56)	13.9 ( 2.88)	23.0 (2.73)	11.2 (1.95)	15.9 (0.91)	6.1 (0.21)	14.4 (0.64
Employment status <sup>6</sup>								
urrently employed	31.0 (1.61)	14.8 (1.49)	20.8 ( 2.67)	30.1 (1.76)	19.8 (2.49)	27.4 (0.98)	10.0 (0.24)	16.9 (0.83
urrently unemployed	44.5 (1.35)	12.1 (2.09)	28.9 ( 4.91)	43.4 (2.84)	15.9 (2.76)	38.4 (1.08)	11.9 (0.50)	20.1 (1.14
Family size								
-3 members	30.6 (1.14)	15.2 (1.51)	19.5 ( 2.53)	33.6 (1.99)	18.5 (2.03)	27.2 (0.81)	11.0 (0.27)	16.6 (0.54
-5 members	38.5 (1.98)	14.2 (3.87)	27.0 ( 4.43)	38.4 (3.45)	21.5 (4.74)	34.4 (1.44)	8.6 (0.41)	17.0 (1.28
or more members	46.5 (3.09)	*18.6 (6.39)	*21.4 ( 8.23)	44.3 (6.14)	*13.6 (5.18)	42.9 (2.54)	15.6 (2.08)	24.5 (2.86

See footnotes at end of table.

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Table 2. Age-adjusted percent (with standard errors) of Hispanic or Latino women in five subgroups and of non-Hispanic white women and non-Hispanic black women aged 18 and over who did not have health insurance coverage at the time of interview, by selected demographic characteristics: United States, 2000–2002—Con.

Selected characteristic	Mexican	Puerto Rican	Cuban	Central or South American	Other Hispanic	All Hispanic	Non- Hispanic white	Non- Hispanic black		
Marital status	Age-adjusted percent <sup>1</sup> (standard error)									
Married	33.7 (1.12)	9.9 ( 1.72)	20.2 (2.83)	34.1 (2.61)	14.4 ( 2.17)	29.8 (0.89)	7.5 (0.25)	11.6 (0.75)		
Widowed	44.3 (6.27)	*32.2 (13.72)	*17.8 (9.66)	60.4 (8.96)	49.6 (13.74)	44.2 (4.86)	17.2 (2.54)	23.7 (4.76)		
Divorced or separated	33.0 (1.80)	16.2 ( 2.82)	25.7 (4.78)	36.6 (4.15)	22.2 ( 3.39)	29.7 (1.37)	14.7 (0.55)	17.9 (1.10)		
Never married	36.3 (2.75)	13.6 ( 2.42)	32.2 (7.29)	38.9 (3.87)	16.6 ( 3.19)	30.7 (1.62)	11.7 (0.54)	22.5 (1.62)		
With partner	39.4 (3.09)	*24.7 ( 7.90)	*22.5 (8.99)	39.4 (8.24)	*27.3 ( 9.91)	34.2 (2.59)	20.6 (1.03)	20.7 (2.06)		
Citizenship										
U.S. citizen	23.2 (0.96)	13.8 ( 1.31)	14.1 (2.36)	16.6 (1.78)	14.7 ( 1.72)	19.5 (0.67)	10.2 (0.22)	16.3 (0.51)		
Not U.S. citizen	54.1 (1.65)	73.2 (17.55)	41.1 (4.70)	52.2 (2.51)	30.4 ( 4.81)	52.0 (1.30)	20.1 (1.97)	43.1 (3.88)		
Nativity <sup>7</sup>										
U.S. born	21.2 (1.02)	13.6 ( 1.31)	*11.5 (5.24)	18.5 (4.13)	13.5 ( 1.87)	18.3 (0.74)	10.1 (0.22)	16.4 (0.52)		
Foreign born	46.9 (1.22)	58.1 ( 9.65)	26.1 (2.77)	38.3 (1.86)	24.0 ( 2.89)	41.2 (0.93)	14.6 (1.17)	26.5 (2.15)		
Years in U.S. <sup>8</sup>										
Less than 5 years	71.9 (4.52)	*15.8 ( 5.86)	57.9 (6.56)	69.4 (3.78)	41.6 ( 6.13)	66.4 (3.26)	34.8 (5.16)	45.9 (6.63)		
5–10 years.	66.2 (4.51)	*12.4 ( 4.82)	51.2 (6.21)	48.6 (5.43)	*12.0 ( 3.85)	52.2 (3.09)	14.2 (3.01)	40.2 (6.58)		
10 years or more	39.6 (1.43)	15.3 ( 2.30)	16.1 (3.32)	26.8 (1.89)	23.6 ( 3.25)	31.1 (1.01)	11.9 (1.24)	19.3 (1.98)		

\* Estimate has a relative standard error of 30% or higher and should be used with caution as it does not meet the standard of reliability or precision.

<sup>1</sup>Age-adjusted estimates for women aged 18 and over are adjusted to the year 2000 standard U.S. population using three age groups: 18–44, 45–64 years, and 65 and over.

<sup>2</sup>Poverty status is based on family income and family size using the U.S. Census Bureau's poverty thresholds for the previous calendar year. "Poor" persons are defined as below the poverty threshold. "Near poor" persons have incomes of 100% to less than 200% of the poverty threshold. "Not poor" persons have incomes that are 200% of the poverty threshold or greater.

<sup>3</sup>MSA is metropolitan statistical area.

<sup>4</sup>Educational attainment is shown only for persons aged 25 and over.

<sup>5</sup>GED is General Educational Development high school equivalency diploma.

<sup>6</sup>Employment status is shown for those persons aged 18 and over.

<sup>7</sup>U.S. born refers to persons born in the 50 States of the United States, the District of Columbia, Puerto Rico, Guam, and other outlying territories of the United States. Foreign born refers to persons born outside the 50 States of the United States, the District of Columbia, Puerto Rico, Guam, and other outlying territories of the United States.

<sup>8</sup>Includes only those who were not born in the United States.

DATA SOURCE: 2000-2002 National Health Interview Surveys. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

Table 3. Age-adjusted percent (with standard errors) of Hispanic or Latino women in five subgroups and of non-Hispanic white women and non-Hispanic black women aged 18 and over who had a usual place to go for health care, by selected demographic characteristics: United States, 2000–2002

Selected characteristic	Mexican	Puerto Rican	Cuban	Central or South American	Other Hispanic	All Hispanic	Non- Hispanic white	Non- Hispanic black
			A	ge-adjusted percen	t <sup>1</sup> (standard error)			
otal	77.6 (0.74)	89.8 (1.03)	82.0 ( 2.03)	78.1 (1.39)	89.7 (1.15)	80.2 (0.53)	91.7 (0.19)	89.5 (0.42
Age								
8–44 years	70.2 (1.03)	86.3 (1.57)	77.1 ( 3.37)	73.3 (1.87)	87.6 (1.88)	73.8 (0.78)	88.9 (0.31)	85.8 (0.63
5–64 years	82.6 (1.23)	91.6 (1.83)	82.0 ( 3.52)	79.1 (2.54)	92.4 (1.97)	84.0 (0.89)	93.9 (0.26)	92.4 (0.60
5 years and over	91.9 (1.66)	97.6 (1.54)	97.3 ( 1.13)	91.0 (3.73)	91.7 (3.15)	93.4 (1.02)	96.2 (0.24)	95.8 (0.68
Family income								
20,000 or above	81.9 (0.98)	92.4 (1.13)	82.4 ( 2.45)	82.5 (1.75)	90.3 (1.53)	84.0 (0.65)	93.0 (0.19)	91.7 (0.52
ess than \$20,000	68.3 (1.37)	85.7 (1.96)	80.2 ( 4.19)	66.1 (2.59)	89.2 (1.66)	72.5 (0.99)	85.2 (0.53)	85.4 (0.73
nknown	68.8 (2.82)	88.2 (4.53)	82.4 ( 6.96)	67.9 (4.91)	86.8 (5.79)	71.8 (2.10)	89.0 (1.05)	88.6 (1.56
Poverty status <sup>2</sup>								
oor	66.8 (2.01)	90.6 (2.05)	77.6 ( 5.64)	68.6 (3.16)	89.3 (2.26)	72.3 (1.42)	86.0 (0.72)	85.6 (0.98
ear poor	74.4 (1.30)	81.0 (3.07)	74.0 ( 5.31)	70.7 (3.41)	83.6 (3.10)	75.1 (1.07)	86.1 (0.61)	86.2 (1.0
ot poor	87.8 (1.21)	94.7 (1.23)	86.8 ( 2.59)	86.0 (2.15)	92.2 (1.84)	88.8 (0.75)	93.6 (0.21)	93.1 (0.56
nknown	74.1 (1.41)	86.6 (2.89)	78.1 ( 5.89)	75.4 (2.75)	90.4 (2.54)	76.7 (1.08)	91.0 (0.43)	89.1 (0.83
Region								
ortheast	72.9 (8.42)	91.8 (1.22)	87.3 ( 4.93)	81.4 (2.49)	88.7 (2.15)	87.1 (1.09)	93.2 (0.41)	92.4 (0.8
lidwest	86.5 (2.10)	90.3 (3.54)	70.1 ( 7.18)	82.1 (4.65)	94.8 (4.89)	86.9 (1.66)	92.6 (0.32)	91.6 (0.7
outh	73.6 (1.41)	82.6 (2.69)	81.9 ( 2.19)	74.4 (2.49)	83.5 (3.53)	75.9 (0.99)	90.2 (0.36)	87.7 (0.6
/est	78.6 (0.92)	94.4 (2.38)	69.0 (10.78)	79.2 (2.47)	93.1 (1.29)	79.8 (0.82)	91.0 (0.45)	90.7 (1.2
Place of residence <sup>3</sup>								
SA	77.6 (0.79)	89.7(1.04)	82.0 ( 2.09)	77.9 (1.42)	90.4 (1.27)	80.3 (0.55)	91.8 (0.21)	89.7 (0.46
Central city	75.3 (1.21)	90.0 (1.38)	76.5 ( 4.19)	77.9 (1.83)	89.5 (1.69)	78.9 (0.82)	90.3 (0.39)	89.4 (0.56
Not central city	80.2 (1.04)	89.2 (1.67)	83.8 ( 2.40)	78.0 (2.05)	91.8 (1.93)	81.7 (0.77)	92.4 (0.25)	90.2 (0.74
ot MSA	77.5 (2.26)	100.0 (0.00)	76.7 (10.51)	84.8 (4.66)	83.0 (5.63)	79.0 (2.15)	91.3 (0.43)	87.8 (1.05
Urban or rural								
rban	77.4 (0.79)	89.7 (1.06)	81.6 ( 2.09)	77.5 (1.45)	89.9 (1.25)	80.1 (0.56)	91.6 (0.22)	89.4 (0.45
ural	78.7 (2.17)	90.5 (5.05)	88.9 ( 9.43)	85.7 (5.13)	86.9 (3.36)	81.0 (1.87)	91.7 (0.35)	89.7 (1.08
Highest education <sup>4</sup>								
ess than high school diploma	73.9 (1.13)	86.3 (2.40)	76.9 ( 4.81)	72.7 (2.57)	85.6 (2.90)	75.3 (0.92)	88.0 (0.74)	85.4 (1.08
igh school or GED <sup>5</sup>	84.7 (1.48)	93.2 (1.53)	82.4 ( 4.53)	81.8 (3.05)	89.6 (2.03)	85.6 (0.97)	91.7 (0.32)	89.7 (0.77
ore than high school	88.9 (1.04)	92.7 (1.35)	85.4 ( 2.89)	83.0 (2.22)	93.8 (1.51)	88.5 (0.74)	93.8 (0.20)	92.9 (0.5
Employment status <sup>6</sup>								
urrently employed	79.4 (1.45)	85.7 (3.37)	82.9 ( 2.50)	80.7 (1.58)	89.9 (1.23)	81.7 (0.85)	91.6 (0.24)	89.5 (0.5
urrently unemployed	73.3 (1.20)	92.8 (1.68)	79.4 ( 4.42)	74.1 (2.41)	92.5 (1.99)	77.0 (0.88)	91.5 (0.39)	88.5 (0.8
Family size								
-3 members	79.3 (0.99)	88.4 (1.33)	84.9 ( 2.24)	80.1 (1.60)	87.4 (1.53)	81.8 (0.67)	90.5 (0.25)	89.0 (0.40
-5 members	76.8 (1.61)	92.3 (2.12)	75.9 ( 4.81)	75.9 (2.90)	91.6 (3.36)	79.1 (1.15)	93.0 (0.56)	91.1 (1.0
or more members	68.6 (2.94)	89.3 (3.94)	88.5 ( 6.45)	74.8 (4.53)	95.9 (2.48)	73.3 (2.08)	90.8 (1.47)	86.2 (2.18

See footnotes at end of table.

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Table 3. Age-adjusted percent (with standard errors) of Hispanic or Latino women in five subgroups and of non-Hispanic white women and non-Hispanic black women aged 18
and over who had a usual place to go for health care, by selected demographic characteristics: United States, 2000–2002—Con.

Selected characteristic	Mexican	Puerto Rican	Cuban	Central or South American	Other Hispanic	All Hispanic	Non- Hispanic white	Non- Hispanic black		
Marital status	Age-adjusted percent <sup>1</sup> (standard error)									
larried	80.2 (0.92)	93.1 ( 1.32)	82.3 (2.93)	80.3 (1.74)	90.7 ( 1.88)	82.0 (0.68)	93.8 (0.22)	92.7 (0.67)		
/idowed	70.1 (6.94)	93.4 ( 2.72)	81.7 (9.68)	70.2 (9.83)	62.9 (14.11)	73.5 (5.17)	89.5 (2.18)	86.4 (3.47)		
ivorced or separated	75.8 (1.76)	87.0 ( 2.53)	77.8 (4.80)	77.0 (3.89)	89.9 (2.55)	79.2 (1.29)	88.9 (0.53)	89.1 (0.94)		
lever married.	73.3 (2.10)	89.6 ( 1.87)	79.2 (5.51)	73.8 (3.76)	89.9 ( 2.41)	77.6 (1.40)	89.5 (0.55)	87.8 (0.75)		
/ith partner	77.9 (2.58)	85.1 ( 6.10)	92.9 (5.28)	77.3 (5.11)	88.4 ( 6.29)	81.1 (1.90)	86.0 (0.92)	89.0 (1.54)		
Citizenship										
.S. citizen	84.0 (0.76)	89.8 ( 1.04)	87.5 (2.42)	90.9 (1.37)	91.5 ( 1.10)	86.8 (0.52)	91.8 (0.19)	90.0 (0.40)		
ot U.S. citizen	67.8 (1.45)	89.4 (10.23)	69.5 (4.43)	67.3 (2.26)	81.9 ( 4.10)	68.3 (1.15)	82.8 (1.80)	76.6 (3.25		
Nativity <sup>7</sup>										
.S. born	84.5 (0.89)	89.9 ( 1.04)	89.6 (5.14)	87.3 (3.30)	92.2 ( 1.20)	86.7 (0.62)	91.8 (0.19)	90.1 (0.41)		
preign born	71.7 (1.12)	78.0 (12.19)	79.3 (2.44)	76.8 (1.51)	85.4 ( 2.36)	74.7 (0.80)	87.0 (1.09)	83.1 (1.89		
Years in U.S. <sup>8</sup>										
ess than 5 years	52.6 (4.94)	85.6 ( 5.76)	50.0 (8.39)	43.7 (5.44)	73.6 ( 3.90)	50.7 (3.37)	68.5 (4.82)	63.8 (5.31)		
–10 years	65.3 (4.34)	82.5 ( 8.72)	61.2 (7.18)	72.7 (4.60)	85.9 ( 5.00)	69.5 (2.48)	90.1 (2.41)	86.8 (3.73)		
0 years or more	76.5 (1.25)	87.7 ( 2.00)	87.7 (2.82)	86.0 (1.47)	87.3 ( 2.42)	81.5 (0.81)	90.4 (1.07)	87.6 (1.89)		
Health Insurance9										
ninsured	51.5 (2.40)	64.8 ( 3.98)	31.8 (4.94)	52.2 (3.46)	56.3 ( 4.84)	51.5 (1.88)	66.2 (1.66)	69.2 (1.98		
sured	92.3 (0.55)	94.6 ( 0.93)	95.1 (1.55)	92.6 (1.18)	95.6 ( 0.94)	93.2 (0.39)	94.5 (0.17)	94.5 (0.36		
Private	93.1 (0.68)	95.8 ( 1.02)	93.8 (1.92)	92.9 (1.35)	95.6 ( 1.23)	93.6 (0.49)	94.6 (0.17)	95.3 (0.38		
Public	90.9 (1.11)	92.9 ( 1.62)	99.7 (0.16)	90.3 (2.60)	94.9 ( 1.97)	92.1 (0.78)	94.4 (0.50)	93.2 (0.66		

\* Estimate has a relative standard error of 30% or higher and should be used with caution as it does not meet the standard of reliability or precision.

<sup>1</sup>Age-adjusted estimates for women aged 18 and over are adjusted to the year 2000 standard U.S. population using three age groups: 18–44, 45–64 years, and 65 years and over.

<sup>2</sup>Poverty status is based on family income and family size using the U.S. Census Bureau's poverty thresholds for the previous calendar year. "Poor" persons are defined as below the poverty threshold. "Near poor" persons have incomes of 100% to less than 200% of the poverty threshold. "Not poor" persons have incomes that are 200% of the poverty threshold or greater.

<sup>3</sup>MSA is metropolitan statistical area.

<sup>4</sup>Educational attainment is shown only for persons aged 25 and over.

<sup>5</sup>GED is General Educational Development is high school equivalency diploma.

<sup>6</sup>Employment status is shown for those persons aged 18 and over.

<sup>7</sup>U.S. born refers to persons born in the 50 States of the United States, the District of Columbia, Puerto Rico, Guam, and other outlying territories of the United States. Foreign born refers to persons born outside the 50 States of the United States, the District of Columbia, Puerto Rico, Guam, and other outlying territories of the United States.

<sup>8</sup>Includes only those who were not born in the United States.

<sup>9</sup>Health insurance coverage is based on a hierarchy of mutually exclusive categories. The category "Uninsured" includes women who had no coverage as well as those who had only Indian Health Service coverage or had only a private plan that paid for one type of service.

DATA SOURCE: 2000-2002 National Health Interview Surveys. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

Table 4. Age-adjusted percent distributions (with standard errors) of usual place of health care for Hispanic or Latino women in five subgroups and for non-Hispanic white women
and non-Hispanic black women aged 18 years and over by type of health insurance coverage: United States, 2000–2002

Health care coverage and usual place of health care	Mexican	Puerto Rican	Cuban	Central or South American	Other Hispanic	All Hispanic	Non- Hispanic white	Non- Hispanic black
			Age-	adjusted percent dis	tribution <sup>1</sup> (standard	error)		
With all types of health insurance coverage								
Total	100.0 (0.00)	100.0 (0.00)	100.0 (0.00)	100.0 (0.00)	100.0 (0.00)	100.0 (0.00)	100.0 (0.00)	100.0 (0.00)
Clinic or health center	26.2 (1.09)	23.6 (1.87)	15.5 (2.51)	24.9 (1.76)	24.1 (2.17)	24.9 (0.76)	14.1 (0.40)	19.3 (0.61)
Doctor's office or HMO <sup>2</sup>	69.3 (1.11)	68.8 (2.07)	80.5 (2.87)	66.6 (1.91)	67.5 (2.61)	69.2 (0.80)	83.6 (0.42)	74.4 (0.70)
Emergency department	1.1 (0.21)	2.1 (0.52)	1.3 (0.60)	1.6 (0.43)	2.5 (0.73)	1.5 (0.17)	0.5 (0.05)	1.8 (0.19)
Outpatient	1.7 (0.23)	5.0 (0.80)	1.7 (0.73)	3.7 (0.65)	4.6 (0.95)	2.7 (0.22)	0.8 (0.08)	3.6 (0.28)
Some other place	*0.6 (0.18)	*0.2 (0.22)	0.1 (0.14)	*1.2 (0.50)	*0.8 (0.36)	0.7 (0.13)	0.6 (0.05)	0.4 (0.08)
Does not go to one place most often	1.1 (0.19)	*0.3 (0.16)	0.9 (0.45)	2.1 (0.55)	*0.7 (0.38)	1.1 (0.15)	0.4 (0.04)	0.5 (0.11)
With private coverage								
Total	100.0 (0.00)	100.0 (0.00)	100.0 (0.00)	100.0 (0.00)	100.0 (0.00)	100.0 (0.00)	100.0 (0.00)	100.0 (0.00)
Clinic or health center	12.1 (1.06)	10.7 (1.60)	8.7 (2.51)	12.7 (2.12)	11.1 (2.13)	11.9 (0.79)	12.3 (0.43)	13.2 (0.67)
Doctor's office or HMO <sup>2</sup>	85.7 (1.09)	87.3 (1.69)	89.7 (2.68)	84.4 (2.29)	86.1 (2.38)	85.8 (0.83)	86.3 (0.43)	84.1 (0.72)
Emergency department	*0.4 (0.14)	*0.4 (0.35)	*0.5 (0.46)	*0.1 (0.10)	*0.2 (0.12)	*0.3 (0.10)	0.2 (0.03)	0.5 (0.11)
Outpatient	1.1 (0.26)	*1.7 (0.56)	*1.2 (0.94)	*1.6 (0.80)	*0.8 (0.40)	1.2 (0.20)	0.5 (0.07)	1.6 (0.22)
Some other place	*0.3 (0.14)	0.0 (0.00)	0.0 (0.00)	*0.4 (0.29)	*1.0 (0.68)	*0.4 (0.13)	0.5 (0.06)	*0.3 (0.09)
Does not go to one place most often	*0.5 (0.19)	0.0 (0.00)	0.0 (0.00)	*0.7 (0.41)	*0.9 (0.61)	0.5 (0.14)	0.3 (0.04)	*0.3 (0.10)
With public coverage								
Total	100.0 (0.00)	100.0 (0.00)	100.0 (0.00)	100.0 (0.00)	100.0 (0.00)	100.0 (0.00)	100.0 (0.00)	100.0 (0.00)
Clinic or health center	37.0 (2.35)	36.6 (3.25)	31.5 (6.10)	34.0 (4.46)	40.6 (3.81)	36.7 (1.57)	22.2 (0.90)	28.6 (1.22)
Doctor's office or HMO <sup>2</sup>	59.2 (2.31)	53.2 (3.48)	66.2 (6.32)	50.6 (4.86)	46.3 (4.20)	55.6 (1.58)	73.0 (0.99)	62.8 (1.38)
Emergency department	*1.0 (0.38)	*2.3 (0.79)	0.0 (0.00)	*3.7 (2.13)	*2.2 (1.61)	1.7 (0.42)	1.1 (0.26)	1.6 (0.32)
Outpatient	2.1 (0.54)	7.7 (1.51)	*2.2 (1.35)	*10.4 (3.13)	9.5 (2.48)	5.3 (0.66)	2.9 (0.45)	6.5 (0.71)
Some other place	*0.1 (0.08)	0.0 (0.00)	*0.2 (0.15)	*0.8 (0.57)	*1.3 (0.81)	*0.4 (0.15)	0.6 (0.15)	*0.4 (0.14)
Does not go to one place most often	*0.6 (0.27)	*0.3 (0.25)	0.0 (0.00)	*0.5 (0.50)	*0.2 (0.14)	*0.4 (0.19)	0.3 (0.08)	*0.1 (0.06)
With no health insurance coverage								
Total	100.0 (0.00)	100.0 (0.00)	100.0 (0.00)	100.0 (0.00)	100.0 (0.00)	100.0 (0.00)	100.0 (0.00)	100.0 (0.00)
Clinic or health center	48.9 (2.88)	47.6 (5.21)	38.7 (9.62)	51.2 (4.98)	38.7 (6.44)	49.7 (2.56)	23.2 (1.92)	29.2 (2.20)
Doctor's office or HMO <sup>2</sup>	40.9 (3.03)	35.4 (5.26)	44.2 (9.21)	30.2 (4.24)	30.3 (4.74)	36.4 (2.28)	68.6 (2.08)	53.5 (2.72)
Emergency department	2.3 (0.44)	*8.7 (2.77)	*7.3 (3.92)	*3.8 (1.18)	21.5 (4.66)	4.3 (1.02)	2.7 (0.63)	7.9 (1.58)
	*3.0 (1.27)	*5.1 (2.19)	*2.2 (1.30)	4.7 (1.17)	*9.1(3.43)	3.5 (0.67)	1.6 (0.43)	6.6 (1.22)
Some other place	*1.5 (0.60)	*1.8 (1.72)	0.0 (0.00)	*4.5 (3.24)	0.0 (0.00)	*2.6 (1.37)	1.8 (0.51)	*1.2 (0.52)
Does not go to one place most often	*3.4 (1.05)	*1.4 (1.04)	*7.6 (3.75)	*5.7 (1.71)	*0.4 (0.36)	3.4 (0.67)	2.1 (0.54)	1.7 (0.48)

\* Estimate has a relative standard error of 30% or higher and should be used with caution as it does not meet the standard of reliability or precision.

<sup>1</sup>Age-adjusted estimates for women aged 18 and over are adjusted to the year 2000 standard U.S. population using three age groups: 18–44, 45–64 years, and 65 and over.

<sup>2</sup>HMO is health maintenance organization.

DATA SOURCE: 2000-2002 National Health Interview Surveys. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

Table 5. Age-adjusted percent distributions (with standard errors) of usual place of health care for Hispanic or Latino women in five subgroups and non-Hispanic white women and non-Hispanic black women aged 18 and over, by usual place of care when they needed routine or preventive care: United States, 2000–2002

Usual place of care	Mexican	Puerto Rican	Cuban	Central or South American	Other Hispanic	All Hispanic	Non- Hispanic white	Non- Hispanic black			
	Age-adjusted percent distribution <sup>1</sup> (standard error)										
Total	100.0 (0.00)	100.0 (0.00)	100.0 (0.00)	100.0 (0.00)	100.0 (0.00)	100.0 (0.00)	100.0 (0.00)	100.0 (0.00)			
Clinic or health center	16.1 (1.72)	24.7 (5.08)	*11.3 (3.44)	16.0 (2.98)	16.1 (3.22)	16.0 (1.27)	10.0 (0.55)	15.0 (1.17)			
Doctor's office or HMO <sup>2</sup>	12.2 (1.16)	18.9 (3.16)	26.8 (4.76)	18.0 (3.67)	33.1 (4.74)	15.7 (1.13)	37.1 (0.92)	29.7 (2.46)			
Emergency department	*1.5 (0.55)	*4.6 (2.65)	*5.8 (2.32)	*4.5 (1.45)	*2.4 (0.97)	2.5 (0.50)	2.1 (0.25)	4.5 (0.83)			
Outpatient	*0.7 (0.28)	*7.1 (3.64)	*1.5 (1.37)	*1.2 (0.50)	*3.2 (2.25)	1.5 (0.43)	0.8 (0.15)	3.6 (0.67)			
Some other place	*1.7 (0.66)	0.0 (0.00)	0.0 (0.00)	*0.8 (0.62)	*1.0 (0.96)	*1.2 (0.42)	1.8 (0.24)	*0.7 (0.24)			
Does not go to one place most often	6.0 (0.77)	*2.7 (1.07)	14.0 (3.97)	8.4 (1.47)	*1.5 (0.77)	6.7 (0.66)	6.9 (0.45)	5.7 (0.77)			
Does not get preventive care anywhere	61.9 (1.94)	42.0 (4.32)	40.7 (5.73)	51.1 (4.06)	42.8 (4.72)	56.4 (1.50)	41.4 (1.02)	40.9 (2.27)			

\* Estimate has a relative standard error of 30% or higher and should be used with caution as it does not meet the standard of reliability or precision.

<sup>1</sup>Age-adjusted estimates for women aged 18 and over are adjusted to the year 2000 standard U.S. population using three age groups: 18–44, 45–64 years, and 65 and over.

<sup>2</sup>HMO is health maintenance organization.

Table 6. Age-adjusted percent (with standard errors) of Hispanic or Latino women in five subgroups and of non-Hispanic white women and non-Hispanic black women aged 18 and over who had unmet medical needs due to cost in the past 12 months, by selected demographic characteristics: United States, 2000–2002

Selected characteristic	Mexican	Puerto Rican	Cuban	Central or South American	Other Hispanic	All Hispanic	Non- Hispanic white	Non- Hispanic black
			Age-a	adjusted percent distri	bution <sup>1</sup> (standard err	or)		
tal	24.1 (0.83)	18.2 (1.53)	13.8 ( 2.00)	21.6 ( 1.41)	20.0 ( 1.92)	21.9 (0.62)	18.3 (0.29)	22.6 (0.57
Age								
-44 years	22.6 (0.95)	20.3 (1.96)	13.7 ( 2.78)	21.6 ( 1.61)	21.8 ( 2.63)	21.8 (0.73)	21.5 (0.42)	23.1 (0.73
–64 years	28.8 (1.62)	20.3 (3.16)	16.1 ( 3.66)	25.2 ( 2.78)	18.5 ( 3.11)	25.3 (1.18)	17.7 (0.44)	24.4 (1.03
years and over	20.4 (2.13)	*8.0 (2.73)	*10.2 ( 3.16)	15.1 ( 4.17)	17.3 ( 4.69)	16.2 (1.45)	9.3 (0.35)	18.0 (1.14
Family income								
0,000 or above	21.0 (1.05)	15.2 (1.95)	11.1 ( 2.23)	17.4 ( 1.75)	16.2 ( 2.43)	18.5 (0.73)	14.8 (0.28)	17.0 (0.69
ss than \$20,000	31.6 (1.56)	22.9 (2.28)	24.5 ( 4.67)	33.9 ( 2.62)	26.7 ( 2.94)	29.8 (1.12)	36.7 (0.87)	32.7 (1.01
known	24.0 (2.73)	20.5 (6.44)	10.6 ( 5.38)	22.3 ( 5.11)	17.2 ( 5.81)	22.0 (2.19)	16.5 (1.05)	20.9 (2.26
Poverty status <sup>2</sup>								
or	34.5 (1.88)	19.8 (2.82)	25.1 ( 5.82)	35.0 ( 3.70)	26.9 ( 3.74)	31.2 (1.42)	38.1 (1.31)	32.9 (1.44
ear poor	30.4 (1.66)	30.0 (3.86)	16.8 ( 4.78)	29.0 ( 3.27)	34.6 ( 5.23)	29.1 (1.30)	37.4 (0.89)	32.1 (1.3
ot poor	15.1 (1.09)	15.2 (2.50)	10.6 ( 2.58)	14.3 ( 2.07)	10.9 ( 2.33)	14.3 (0.81)	14.1 (0.30)	15.3 (0.80
ıknown	22.3 (1.57)	13.7 (2.57)	*9.9 ( 3.04)	21.9 ( 2.92)	19.7 ( 3.87)	20.6 (1.17)	15.1 (0.53)	19.6 (1.04
Region								
ortheast	36.7 (8.90)	15.3 (1.73)	*19.4 ( 6.35)	18.5 ( 2.23)	13.8 ( 2.39)	16.5 (1.14)	15.3 (0.65)	16.1 (1.1
dwest	28.3 (3.22)	29.2 (5.48)	59.6 (16.45)	*19.6 ( 5.91)	48.2 (11.71)	28.5 (2.63)	16.0 (0.50)	23.1 (1.2
outh	28.8 (1.39)	19.9 (3.61)	11.1 ( 1.99)	20.6 ( 2.43)	23.1 ( 4.96)	23.9 (1.03)	20.7 (0.54)	23.9 (0.8
est	20.4 (1.11)	21.0 (6.11)	*18.0 ( 7.41)	26.1 ( 2.60)	22.7 ( 3.90)	21.2 (1.04)	21.1 (0.67)	27.4 (2.10
Place of residence <sup>3</sup>								
SA	23.5 (0.83)	18.5 (1.54)	12.4 ( 1.95)	21.4 ( 1.41)	19.5 ( 1.96)	21.4 (0.60)	17.2 (0.32)	22.1 (0.6
Central city	24.6 (1.16)	18.0 (1.86)	13.7 ( 3.39)	24.4 ( 2.22)	20.1 ( 2.60)	22.6 (0.84)	18.7 (0.55)	23.3 (0.78
Not central city	22.3 (1.24)	19.4 (2.63)	12.0 ( 2.35)	19.1 ( 1.84)	18.6 ( 2.99)	20.2 (0.89)	16.6 (0.40)	20.2 (0.98
Not MSA	29.7 (3.62)	0.0 (0.00)	52.8 (11.48)	*28.3 ( 9.47)	*26.1 (10.35)	28.8 (4.14)	21.6 (0.65)	25.9 (1.67
Urban or rural								
ban	23.5 (0.84)	18.1 (1.55)	13.1 ( 1.98)	22.4 ( 1.48)	20.8 ( 1.90)	21.6 (0.61)	17.7 (0.32)	22.4 (0.6
ıral	29.4 (2.83)	*23.8 (8.51)	*34.9 (12.12)	*7.9 ( 4.12)	*9.2 ( 4.12)	25.1 (2.57)	19.4 (0.55)	23.7 (1.48
Highest education <sup>4</sup>								
ss than high school diploma	26.8 (1.21)	17.4 (2.51)	16.9 ( 4.94)	26.9 ( 2.70)	24.9 ( 3.69)	25.1 (0.99)	31.2 (1.08)	27.7 (1.37
gh school or GED <sup>5</sup>	21.0 (1.82)	19.1 (3.17)	14.1 ( 4.17)	21.2 ( 2.92)	17.3 ( 4.13)	19.9 (1.25)	18.2 (0.47)	23.3 (1.0
pre than high school	24.2 (2.20)	16.3 (2.65)	11.6 ( 2.84)	17.5 ( 2.39)	15.4 ( 2.69)	19.4 (1.20)	15.0 (0.32)	20.0 (0.90
Employment status <sup>6</sup>								
rrently employed	25.6 (1.74)	16.2 (1.71)	18.3 ( 3.52)	21.3 ( 2.78)	21.7 ( 3.31)	23.6 (1.33)	18.1 (0.35)	20.1 (0.78
rrently unemployed	24.5 (1.22)	18.4 (2.53)	11.8 ( 2.90)	22.7 ( 2.34)	16.8 ( 2.56)	22.2 (0.91)	20.3 (0.63)	28.1 (1.2
Family size								
3 members	23.5 (1.04)	19.8 (1.76)	14.7 ( 2.61)	23.8 ( 1.78)	21.1 ( 2.26)	22.1 (0.74)	19.1 (0.35)	23.3 (0.65
5 members	27.8 (1.95)	15.2 (3.68)	*12.6 ( 3.85)	19.3 ( 2.75)	20.0 ( 4.77)	22.8 (1.33)	16.5 (0.70)	20.1 (1.4

See footnotes at end of table.

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Table 6. Age-adjusted percent (with standard errors) of Hispanic or Latino women in five subgroups and of non-Hispanic white women and non-Hispanic black women aged 18
and over who had unmet medical needs due to cost in the past 12 months, by selected demographic characteristics: United States, 2000–2002—Con.

Selected characteristic	Mexican	Puerto Rican	Cuban	Central or South American	Other Hispanic	All Hispanic	Non- Hispanic white	Non- Hispanic black	
Marital status	Age-adjusted percent distribution <sup>1</sup> (standard error)								
Married	21.7 (1.11)	15.9 ( 2.30)	13.3 ( 2.82)	19.2 ( 2.14)	16.6 ( 2.64)	19.8 (0.84)	14.1 (0.33)	16.6 (0.92)	
Vidowed	20.9 (3.46)	*17.3 ( 5.96)	*3.8 ( 2.88)	37.4 (10.09)	*43.0 (14.61)	23.5 (3.41)	27.1 (2.81)	27.2 (4.77)	
Divorced or separated	33.7 (2.05)	17.9 ( 2.73)	20.5 ( 4.26)	28.8 ( 3.95)	25.7 ( 3.73)	29.1 (1.45)	31.7 (0.76)	28.3 (1.31)	
lever married.	23.7 (2.54)	15.2 ( 2.37)	*6.4 ( 2.80)	21.3 ( 3.02)	11.3 ( 2.53)	19.1 (1.44)	19.2 (0.69)	23.7 (1.24)	
Vith partner	26.7 (3.35)	*24.8 ( 8.01)	*32.6 (11.56)	28.9 ( 7.66)	*33.7 (10.83)	27.7 (3.15)	29.2 (1.32)	28.1 (3.64)	
Citizenship									
J.S. citizen	24.2 (0.98)	18.2 ( 1.54)	13.5 ( 2.39)	15.5 ( 1.72)	21.0 ( 2.32)	21.2 (0.73)	18.3 (0.29)	22.6 (0.58)	
lot U.S. citizen	25.5 (1.56)	*17.2 (12.29)	14.7 ( 3.11)	26.6 ( 2.16)	22.5 ( 4.08)	24.6 (1.13)	19.6 (1.93)	27.0 (3.25)	
Nativity <sup>7</sup>									
J.S. born	25.6 (1.12)	18.2 ( 1.55)	21.6 ( 6.30)	20.5 ( 5.17)	23.3 ( 2.99)	23.2 (0.90)	18.3 (0.30)	23.0 (0.60)	
oreign born	23.0 (1.12)	*21.7 (12.13)	11.5 ( 2.07)	21.8 ( 1.47)	15.6 ( 2.39)	20.9 (0.78)	17.7 (1.24)	19.4 (1.83)	
Years in U.S. <sup>8</sup>									
ess than 5 years	22.8 (4.26)	*24.1 ( 8.93)	*18.4 ( 6.34)	27.3 ( 5.09)	21.3 ( 2.93)	24.1 (2.96)	21.3 (4.26)	29.3 (6.86)	
–10 years.	29.0 (5.39)	*25.3 ( 8.68)	*15.7 ( 6.26)	19.9 ( 3.49)	*9.9 ( 3.69)	22.0 (2.42)	18.9 (3.59)	20.2 (5.62)	
0 years or more	24.3 (1.41)	19.4 ( 2.44)	10.8 ( 2.44)	19.8 ( 1.70)	17.6 ( 3.07)	20.8 (0.88)	19.0 (1.44)	18.6 (2.10)	
Health Insurance <sup>9</sup>									
Ininsured	40.7 (2.43)	41.4 ( 3.94)	25.9 ( 4.92)	38.8 ( 3.31)	46.6 ( 6.55)	38.8 (1.88)	49.3 (1.43)	47.3 (1.46)	
nsured	17.0 (0.84)	13.2 ( 1.44)	8.9 ( 1.82)	11.4 ( 1.33)	15.1 ( 1.95)	14.7 (0.56)	14.2 (0.26)	17.2 (0.56)	
Private	15.7 (1.17)	12.3 ( 1.81)	8.2 ( 2.40)	10.6 ( 2.09)	11.8 ( 2.20)	13.4 (0.79)	12.3 (0.26)	14.3 (0.62)	
Public	22.1 (1.69)	15.0 ( 2.56)	17.0 ( 4.97)	21.5 ( 3.60)	18.9 ( 2.84)	19.7 (1.17)	28.0 (0.94)	24.3 (1.23)	

\* Estimate has a relative standard error of 30% or higher and should be used with caution as it does not meet the standard of reliability or precision.

<sup>1</sup>Age-adjusted estimates for women aged 18 and over are adjusted to the year 2000 standard U.S. population using three age groups: 18–44, 45–64 years, and 65 and over.

<sup>2</sup>Poverty status is based on family income and family size using the U.S. Census Bureau's poverty thresholds for the previous calendar year. "Poor" persons are defined as below the poverty threshold. "Near poor" persons have incomes of 100% to less than 200% of the poverty threshold. "Not poor" persons have incomes that are 200% of the poverty threshold or greater.

<sup>3</sup>MSA is metropolitan statistical area.

<sup>4</sup>Educational attainment is shown only for persons aged 25 and over.

<sup>5</sup>GED is General Educational Development high school equivalency diploma.

<sup>6</sup>Employment status is shown for those persons aged 18 and over.

<sup>7</sup>U.S. born refers to persons born in the 50 States of the United States, the District of Columbia, Puerto Rico, Guam, and other outlying territories of the United States. Foreign born refers to persons born outside the 50 States of the United States, the District of Columbia, Puerto Rico, Guam, and other outlying territories of the United States.

<sup>8</sup>Includes only those who were not born in the United States.

<sup>9</sup>Health insurance coverage is based on a hierarchy of mutually exclusive categories. The category "Uninsured" includes women who had no coverage as well as those who had only Indian Health Service coverage or had only a private plan that paid for one type of service.

DATA SOURCE: 2000-2002 National Health Interview Surveys. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

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### Table 7. Age-adjusted percent (with standard errors) of Hispanic or Latino women in five subgroups and of non-Hispanic white women and non-Hispanic black women aged 18 and over who delayed medical care in the past 12 months, by reason for the delay: United States, 2000–2002

Reason for delaying medical care <sup>1</sup>	Mexican	Puerto Rican	Cuban	Central or South American	Other Hispanic	All Hispanic	Non- Hispanic white	Non- Hispanic black	
	Age-adjusted percent <sup>2</sup> (standard error)								
Could not get through on the telephone	3.1 (0.30)	2.8 (0.61)	*2.0 (0.95)	2.1 (0.50)	*2.2 (0.93)	2.7 (0.21)	3.0 (0.11)	2.8 (0.21)	
Could not get an appointment soon enough	6.3 (0.44)	6.2 (0.84)	*3.6 (1.24)	5.0 (0.80)	5.3 (1.16)	5.7 (0.31)	6.5 (0.17)	5.6 (0.30)	
Wait too long to see the doctor	6.4 (0.43)	5.4 (0.97)	*2.6 (1.01)	5.3 (0.71)	5.3 (0.90)	5.8 (0.31)	4.2 (0.14)	5.1 (0.30)	
The clinic or doctor's office was not open	3.0 (0.32)	2.8 (0.58)	*2.0 (0.95)	2.2 (0.48)	2.8 (0.79)	2.7 (0.22)	3.3 (0.12)	2.6 (0.21)	
Did not have transportation	3.1 (0.31)	3.0 (0.73)	*1.4 (0.65)	2.4 (0.63)	1.6 (0.44)	2.7 (0.22)	1.3 (0.07)	3.3 (0.26)	

\* Estimate has a relative standard error of 30% or higher and should be used with caution as it does not meet the standard of reliability or precision.

<sup>1</sup>Respondents could choose more than one reason.

<sup>2</sup>Age-adjusted estimates for women aged 18 and over are adjusted to the year 2000 standard U.S. population using three age groups: 18–44, 45–64 years, and 65 and over.

DATA SOURCE: 2000-2002 National Health Interview Surveys. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

Table 8. Age-adjusted percent distribution (with standard errors) for Hispanic or Latino women in five subgroups and for non-Hispanic white women and non-Hispanic black
women aged 18 and over, by length of time since last contact with a health care professional and age: United States, 2000–2002

Length of time since last contact with health care professional and age	Mexican	Puerto Rican	Cuban	Central or South American	Other Hispanic	All Hispanic	Non- Hispanic white	Non- Hispanic black	
	Age-adjusted percent distribution <sup>1</sup> (standard error)								
Length of time									
tal	100.0 (0.00)	100.0 (0.00)	100.0 (0.00)	100.0 (0.00)	100.0 (0.00)	100.0 (0.00)	100.0 (0.00)	100.0 (0.00	
ever	2.8 (0.28)	*2.2 (0.74)	7.0 (1.59)	3.0 (0.58)	*0.7 (0.32)	2.9 (0.26)	0.5 (0.06)	1.0 (0.13	
months or less	65.6 (0.79)	75.7 (1.76)	65.6 (2.58)	67.5 (1.59)	76.1 (1.91)	67.7 (0.60)	78.0 (0.27)	76.9 (0.58	
pre than 6 months, but not more than 1 year ago	13.2 (0.62)	11.6 (1.24)	16.2 (2.18)	14.9 (1.22)	14.6 (1.63)	13.6 (0.46)	13.0 (0.22)	13.1 (0.45	
ore than 1 year, but not more than 2 years ago	9.5 (0.48)	7.1 (1.21)	5.7 (1.20)	8.4 (0.95)	5.2 (0.85)	8.6 (0.37)	5.2 (0.14)	5.5 (0.32	
pre than 2 years, but not more than 5 years ago	5.8 (0.38)	2.2 (0.57)	4.4 (0.95)	4.2 (0.64)	2.8 (0.64)	4.9 (0.27)	2.3 (0.10)	2.4 (0.23	
pre than 5 years	3.0 (0.32)	*1.3 (0.44)	*1.2 (0.55)	1.9 (0.41)	*0.7 (0.38)	2.4 (0.20)	1.1 (0.07)	1.1 (0.12	
Length of time by age group									
-44 years:									
Total	100.0 (0.00)	100.0 (0.00)	100.0 (0.00)	100.0 (0.00)	100.0 (0.00)	100.0 (0.00)	100.0 (0.00)	100.0 (0.00	
Never	4.0 (0.45)	*1.5 (0.55)	9.1 (2.38)	4.0 (0.83)	*1.1 (0.58)	3.7 (0.36)	0.6 (0.08)	1.2 (0.18	
6 months or less	57.8 (1.02)	72.9 (2.07)	60.6 (3.64)	62.2 (2.10)	77.2 (2.63)	61.5 (0.80)	74.6 (0.41)	71.4 (0.81	
More than 6 months, but not more than 1 year ago	15.3 (0.76)	12.4 (1.53)	18.9 (3.18)	17.1 (1.58)	14.2 (2.39)	15.3 (0.60)	15.1 (0.32)	16.6 (0.66	
More than 1 year, but not more than 2 years ago	12.8 (0.75)	8.9 (1.38)	6.0 (1.51)	10.7 (1.22)	5.4 (1.11)	11.3 (0.54)	6.3 (0.23)	7.2 (0.48	
More than 2 years, but not more than 5 years ago	7.0 (0.48)	2.8 (0.78)	4.7 (1.24)	4.7 (0.80)	*1.9 (0.71)	5.8 (0.36)	2.6 (0.15)	2.9 (0.31	
More than 5 years.	3.1 (0.37)	*1.6 (0.65)	*0.8 (0.80)	*1.3 (0.48)	*0.2 (0.15)	2.4 (0.25)	0.8 (0.08)	0.9 (0.17	
-64 years:									
Total	100.0 (0.00)	100.0 (0.00)	100.0 (0.00)	100.0 (0.00)	100.0 (0.00)	100.0 (0.00)	100.0 (0.00)	100.0 (0.00	
Never	1.7 (0.39)	*1.6 (0.83)	*5.4 (1.96)	*2.7 (1.10)	*0.2 (0.22)	2.0 (0.35)	0.4 (0.08)	0.8 (0.22	
6 months or less	70.1 (1.61)	74.7 (3.54)	64.0 (4.68)	63.9 (3.26)	74.0 (3.36)	69.5 (1.22)	78.8 (0.48)	79.9 (0.98	
More than 6 months, but not more than 1 year ago	12.7 (1.26)	14.7 (2.78)	17.0 (3.69)	16.0 (2.55)	14.7 (2.95)	14.0 (0.95)	12.5 (0.39)	11.0 (0.74	
More than 1 year, but not more than 2 years ago	7.0 (0.87)	*6.1 (1.95)	*7.2 (2.96)	8.0 (1.92)	6.0 (1.74)	7.0 (0.69)	4.6 (0.21)	4.8 (0.50	
More than 2 years, but not more than 5 years ago	5.4 (0.77)	*2.2 (1.24)	5.2 (2.22)	5.9 (1.54)	*4.9 (1.79)	5.0 (0.56)	2.3 (0.17)	2.3 (0.34	
More than 5 years.	3.0 (0.60)	*0.8 (0.63)	*1.3 (0.97)	3.6 (1.07)	*0.3 (0.27)	2.5 (0.38)	1.5 (0.13)	1.2 (0.21	
years and over:	. /		. /	. ,			· · · /	<u>, -</u>	
	100.0 (0.00)	100.0 (0.00)	100.0 (0.00)	100.0 (0.00)	100.0 (0.00)	100.0 (0.00)	100.0 (0.00)	100.0 (0.00	
Never	*1.0 (0.48)	*5.2 (3.77)	*3.2 (1.39)	*0.6 (0.63)	0.0 (0.00)	*1.7 (0.57)	0.3 (0.08)	*0.8 (0.25	
6 months or less	82.1 (1.97)	86.3 (5.16)	84.1 (3.02)	90.5 (3.05)	76.7 (4.77)	83.6 (1.38)	87.0 (0.41)	89.1(0.88	
More than 6 months, but not more than 1 year ago	7.5 (1.37)	*3.6 (2.47)	6.2 (1.74)	*6.1 (2.56)	15.8 (4.18)	7.4 (0.94)	7.4 (0.32)	6.0 (0.71	
More than 1 year, but not more than 2 years ago	3.7 (0.86)	*3.7 (3.31)	*2.1 (1.27)	*2.1 (1.50)	*3.1 (1.85)	3.2 (0.67)	2.8 (0.20)	1.7 (0.36	
More than 2 years, but not more than 5 years ago	*2.9 (0.92)	*0.3 (0.28)	*2.1 (1.60)	0.0 (0.00)	*1.6 (0.95)	1.9 (0.54)	1.3 (0.13)	*1.1 (0.35	
more than 2 years, but not more than 5 years ayo	2.8 (0.82)	*1.0 (0.68)	*2.3 (1.09)	*0.7 (0.52)	*2.9 (2.22)	1.3 (0.34)	1.4 (0.14)	1.3 (0.34	

\* Estimate has a relative standard error of 30% or higher and should be used with caution as it does not meet the standard of reliability or precision.

<sup>1</sup>Age-adjusted estimates for women aged 18 and over are adjusted to the year 2000 standard U.S. population using three age groups: 18–44, 45–64 years, and 65 and over.

DATA SOURCE: 2000-2002 National Health Interview Surveys. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

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Region

### **Technical Notes**

#### **Definitions of selected terms**

#### Sociodemographic status

Hispanic or Latino origin and race-Hispanic or Latino origin and race are two separate and distinct concepts. Persons of Hispanic or Latino origin may be of any race. Hispanic or Latino origin includes persons of Mexican, Puerto Rican, Cuban, Central and South American, or Spanish origins. Respondents who were classified "Not Hispanic or Latino, Black or African American, single race" and "Not Hispanic or Latino, White American, single race" are referred to in this report as non-Hispanic black and non-Hispanic white. This report used the race/ethnicity variable HISCOD\_I to identify these categories. More information about race and ethnicity in the National Health Interview Survey can be found in Appendix II at the following website: ftp://ftp.cdc.gov/pub/Health\_Statistics/ NCHS/Dataset\_Documentation/NHIS/ 2002/srvydesc.pdf.

*Age*—The age recorded for each adult is the age at the last birthday. Age is recorded in single years and divided for this analysis into three groups: 18–44, 45–64, and 65 and over.

Poverty status—Poverty status is based on family income and family size using the U.S. Census Bureau's poverty thresholds. The "poor" category includes families who are defined as below the poverty threshold. The "near poor" category includes families with incomes of 100% to less than 200% of the poverty threshold. The "not poor" category includes families with incomes that are 200% or more of the poverty threshold. "Unknown" was analyzed as a separate poverty status category because of the relatively large percentage of families for whom family income is unknown in the NHIS and other similar surveys.

*Geographic region*—In the geographic classification of the U.S. population, States are grouped into the four regions used by the U.S. Census Bureau:

#### States included

- Northeast Maine, Vermont, New Hampshire, Massachusetts, Connecticut, Rhode Island, New York, New Jersey, and Pennsylvania;
- Midwest Illinois, Indiana, Iowa, Kansas, Michigan, Minnesota, Missouri, Nebraska, North Dakota, Ohio, South Dakota, and Wisconsin;
- South Alabama, Arkansas, Delaware, District of Columbia, Florida, Georgia, Kentucky, Louisiana, Maryland, Mississippi, North Carolina, Oklahoma, South Carolina, Tennessee, Texas, Virginia, and West Virginia;
- West Alaska, Arizona, California, Colorado, Hawaii, Idaho, Montana, New Mexico, Nevada, Oregon, Utah, Washington, and Wyoming.

Place of residence-Place of residence in NHIS is classified as either inside a metropolitan statistical area (MSA) or outside an MSA. Place of residence inside an MSA is further subdivided as either central city or not central city. Generally, an MSA consists of a county or group of counties containing at least one city (or twin cities) having a population of 50,000 or more plus adjacent counties that are metropolitan in character and economically and socially integrated with the central city. In New England, towns and cities rather than counties are the units used in defining MSAs. There is no limit to the number of adjacent counties included in the MSA if they are integrated with the central city, nor is an MSA limited to a single State; MSA boundaries may cross State lines. Central city includes the largest city in a metropolitan statistical area. One or two additional cities may be secondary central cities on the basis of either of the following criteria: (a) the additional city or cities must have a population one-third or more of that of the largest city and a minimum population of 25,000, and (b) the additional city or cities must have at least 250,000

inhabitants. Noncentral city includes all of the MSA that is not part of the central city itself. Not MSA generally refers to persons not living in an MSA area.

Education-Education level in NHIS is assessed based on the highest grade in school completed or highest degree obtained. Only years completed in regular school, where persons are given a formal education, are included. A "regular" school is defined as one that advances a person toward an elementary or high school diploma or a college, university, or professional degree. Furthermore, education outside the regular school system, such as vocational, trade, or business school, is not included in determining the highest grade of school completed. In addition, participation in adult education classes not taken for credit in a regular school system is not included.

Employment status-Persons 18 years of age and over were classified as currently employed if they reported that they either worked at or had a job or business at any time during the 1-week period preceding the interview. Current employment includes paid work as an employee in business, farming, or professional practice, and unpaid work in a family business or farm. Persons absent from a job or business because of a temporary illness, vacation, strike, or bad weather were considered currently employed if they expected to work as soon as the particular event causing the absence no longer existed. Freelance workers were considered currently employed if they had a definite arrangement with one or more employers to work for pay according to a weekly or monthly schedule, either full time or part time. Excluded from the currently employed population are persons who have no definite employment schedule, but work only when their services are needed. Also excluded from the currently employed population were (a) persons receiving revenue from an enterprise, but not participating in its operation; (b) persons doing housework or charity work for which they received no pay; (c) seasonal workers during the portion of the year when they were not working; and (d) persons who were not working, even

though they had a job or business, but were laid off and looking for work. This report combines adults currently employed, as defined above, with those who were not employed in the week preceding the interview, but who were employed within the past 12 months, to estimate the number of employed and unemployed adults for the year.

*Marital status*—Respondents were asked to choose a marital status category. Adults could select the category they believed most appropriate for their marital situation. In NHIS, marital status is classified into the following five categories:

> *Currently married*—This category includes all persons not separated from their spouses for reasons of marital discord. Persons living apart because of circumstances of their employment are considered married. Persons living together as husband and wife are also considered married, regardless of their legal status.

Separated and divorced—This category includes persons who are legally separated or divorced or who are living apart for reasons of marital discord.

*Widowed*—This category includes persons who have lost their spouse due to death.

*Never married*—This category includes persons who were never married and persons whose only marriage was annulled.

*Living with partner*—This category includes persons who are not married, but living together regardless of sex.

*Nativity*—In this analysis, nativity is categorized as U.S. born or foreign born. The foreign-born category includes women born outside the 50 States of the United States, the District of Columbia, Puerto Rico, Guam, and other outlying territories of the United States. The U.S.-born category refers to women who were born in the 50 States of the United States, the District of Columbia, Puerto Rico, Guam, and other outlying territories of the United States. *Citizenship*—Citizenship is categorized as to whether a person is a citizen of the United States. The former category includes all women born in the 50 States, the District of Columbia, as well as women born in the U.S.-held territories, born abroad to U.S. parents, and naturalized citizens.

Years in the United States—Number of years residing in the United States were analyzed for persons who were not born in the United States.

### Access to health care

Health insurance coverage—NHIS respondents were asked if they are covered by any kind of health insurance or health care plan at the time of the interview. Respondents reported whether they were covered by private health insurance (obtained through an employer or workplace, purchased directly, or through a local or community program), Medicare, Medigap (supplemental Medicare coverage), Medicaid, military coverage (including VA, CHAMPUS, TRICARE, or CHAMP-VA), a Statesponsored health plan, or another government program or single service plans. In this report, the category "private coverage" includes any comprehensive private health insurance plan (including health maintenance organizations and preferred provider organizations). These plans include those obtained through an employer and those purchased directly or through local or community programs. The category "public coverage" includes those with Medicaid, Medicare, or other Statesponsored health plans, including military health plans. The category "uninsured" includes persons who indicated that they were not covered at the time of the interview. This category also includes persons who were only covered by Indian Health Service or only had a plan for one type of service such as accidents or dental care.

Usual place to go for health care—Usual place to go for health care was based on a question that asked whether respondents had a place that they usually went to when they were sick or needed advice about their health. A list of health care places is read to respondents. These include a clinic or health center, doctor's office or HMO, hospital emergency room or outpatient clinic.

Usual place to go for routine or preventive care—Usual place to go for routine or preventive care was obtained from a question in the survey that asked respondents, "What kind of place do you usually go to when you need routine preventive care, such as a physical examination or check-up?"

*Reason for delaying care*—The respondents were also asked whether at any time during the past 12 months they delayed getting care for any reason. The multi-part question about the reason for delaying care focused on transportation difficulties, getting an appointment, and waiting time prior to actually seeing the doctor.

Contact with a health care professional—A contact with a health care professional is defined as a visit to or conversation with a doctor or other health care professional in person or by telephone for health treatment or advice of any type. These contacts include home visits, office visits, or telephone calls for medical advice, prescription, or test results. A telephone call to schedule an appointment with a health care professional is not included as a contact. An emergency room visit is included as a contact, but overnight hospital stays are excluded as contacts.

Unmet medical needs-In NHIS, respondents are asked: "During the past 12 months, was there any time when you needed any of the following, but did not get it because you could not afford it?" The possible answer categories for this NHIS question were "prescription medicine," "mental health care or counseling," "dental care (including check-ups)," and "eyeglasses." In addition, the following two questions were used: "During the past 12 months, has medical care been delayed for (person) because of worry about the cost?" and "During the past 12 months, was there any time when (person) needed medical care, but did not get it because (person) couldn't afford it?" Sample adults who delayed or were not able to afford medical care, prescription medicine, mental health care or counseling, dental care, or eyeglasses were defined as having

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unmet needs for medical care due to cost.

# Questions on access to health care

The Core Module of NHIS is divided into various sections that group questions into broad and specific categories. Each section is designated by a section title and corresponding section code; questions are numbered sequentially within their respective sections. AAU is the acronym for the Adult Health Care Access and Utilization section of the Sample Adult Core, and FAU is the acronym for the Health Care Access and Utilization section of the Family Core.

# Section, number, and question name

AAU.020/AUSUALPL Is there a place that you USUALLY go to when you are sick or you need advice about your health?

AAU.030/APLKIND What kind of place is it — a clinic, doctor's office, emergency room, or some other place? (or, alternatively, if the answer to AUSUALPL was more than one place: What kind of place do you go to most often — a clinic, doctor's office, emergency room, or some other place?

AAU.037/AHCPLKND What kind of place do you USUALLY go to when you need routine preventive care, such as a physical examination or check-up?

AAU.061/AHCDLYR1–5 There are many reasons people delay getting medical care. Have you delayed getting care for any of the following reasons in the past 12 months? (couldn't get through on telephone, couldn't get appointment soon enough, once there had to wait too long to see doctor, clinic/doctor's office wasn't open when you could get there, didn't have transportation).

AAU.111/AHCAFYR1–4 During the past 12 months, was there any time when you needed any of the following but did not get it because you couldn't afford it? (prescription medicine, mental health care/counseling, dental care, eyeglasses). AAU.305/ADNLONGR About how long has it been since you last saw or talked to a doctor or other health care professional about your own health? Include doctors seen while a patient in a hospital.

FAU.020/PDMED12M has medical care been delayed for [person] because of worry about the cost? (Do not include dental care.)

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