

California Health Interview Survey



california
health
interview
survey

Results of Health Survey Widely Used

California Health Interview Survey (CHIS) data and results are used extensively by many researchers, State, federal and local public health agencies, organizations and foundations. They use this information in their analyses and publications to assess public health and health care needs, and to develop and advocate policies to meet those needs.

The CHIS team invests substantial resources to making the information accessible to others as quickly as possible, through its user-friendly online data query system, AskCHIS, and its data files for researchers and analysts. The UCLA Center for Health Policy Research also uses CHIS data to produce policy-relevant publications on key public health and health care issues and disseminates them widely in print and through the Center's Web site. CHIS publications, results and data from the first survey, CHIS 2001, have already resulted in important changes that enhance the health and access to care for children and adults throughout the state.

Health Insurance Expansion Initiatives

CHIS data has been used most extensively to support policy development by the State government and legislature, local agencies and advocacy groups in expanding coverage for the uninsured, especially uninsured children. Statewide, CHIS data are used to estimate the number of uninsured children and adults who are eligible for Medi-Cal or Healthy Families. These estimates are used by State agencies and the Legislature to understand the magnitude of California's large uninsured population and to plan and budget resources. At the local level, CHIS 2001 results are used in several counties to document the need for, and to develop, new public-private expansion programs for children who do not qualify for private health insurance or public programs such as Medi-Cal or Healthy Families. Community clinics and local health departments use CHIS data

to obtain local-level estimates of the uninsured and to document local needs in funding proposals to support expanded access for uninsured residents in many communities throughout the state.

Insurance Expansion and Access Initiatives

Several State, county, and local agencies or organizations use CHIS data for health insurance expansion and access initiatives.

- The California Department of Health Services, the state's Managed Risk Medical Insurance Board (MRMIB), other agencies and the Legislature rely on CHIS data to assess and track health insurance coverage, and estimate the number of uninsured children and adults eligible for Medi-Cal and the Healthy Families Program. They craft new policies and allocate scarce State fiscal resources based on these estimates.
- The Los Angeles County Children's Health Initiative, a large coalition of public and private groups and foundations, launched a new expansion program to ensure that all children through age 18 have access to coverage. The Initiative relied on CHIS data to estimate the number of children who are uninsured and would benefit from the expansion.
- The San Francisco Community Clinic Consortium and San Francisco Department of Public Health used CHIS data to develop its two-year federal Community Access Program, a project to improve access to and quality of care for San Francisco's indigent and uninsured. The CHIS data helped identify the needs of the target population, enabling the organizations to focus their interventions.
- The Santa Cruz County Health Services Agency used CHIS data to develop a health insurance plan for all children up to age 18.

Making
California's
Voices Heard
on Health

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- The Santa Cruz County Health Department relied on CHIS data in their successful application for a federal Community Access Program grant that provided three years of funding for expanded clinic services, outreach to enroll eligible uninsured residents in public health insurance programs, and creation of a Health Improvement Partnership Council.
- The Community Clinic Association of Los Angeles County uses CHIS data in their advocacy and planning activities, and in their proposals to government agencies and foundations in support of their 41 member community clinics and health centers.
- The Tulare County Health and Human Services Agency and a variety of Tulare community groups use CHIS data for their grant requests.
- The Contra Costa County Office of Education's *Children's Report Card* used CHIS 2001 data to compare health insurance coverage of children in Contra Costa County to children statewide.

First 5 Child Health Insurance Expansion Programs

First 5 California, also known as the California Children and Families Commission, and its 58 First 5 county commissions carry out the mandate of Proposition 10. Passed by California voters, Proposition 10 added a cigarette tax to fund education, health, child care and other programs for expectant parents and children up to five years of age. At the local level, more than a dozen First 5 county commissions used CHIS 2001 data to justify their need for, and to plan and develop, new public-private expansion

programs for children ineligible for private insurance, Medi-Cal, or Healthy Families—in most cases the only data available to use in such projections:

- First 5 Fresno
- First 5 Kern
- First 5 Los Angeles
- First 5 Riverside
- First 5 San Joaquin
- First 5 Marin
- First 5 San Luis Obispo
- First 5 Tulare
- First 5 Sacramento, First 5 Colusa, First 5 El Dorado, First 5 Yolo, and First 5 Yuba in a collaboration

More Child Health-Related Uses of CHIS Data

In addition to child health expansion efforts, several First 5 county commissions use CHIS data for strategic planning, and deciding how much of their resources to spend in which programming areas.

- **First 5 Marin** used CHIS data to inform its efforts focused on children's health issues, such as asthma rates and obesity.
- **First 5 Riverside** used CHIS data to help assess its performance on issues affecting children and families in the county and as the basis of for future grants.
- **First 5 San Diego** used CHIS data in planning to allocate \$6 million to enroll uninsured eligible children in Medi-Cal and Healthy Families.
- **First 5 San Joaquin** used CHIS data to examine health indicators.
- **First 5 Tulare** used CHIS data in its First 5 strategic plan as the baseline for discussion and evaluation to compare actual enrollment numbers.

Asthma, Diabetes and Other Health Needs

CHIS is widely used both to track chronic diseases and to stimulate and guide prevention action and policies. Asthma control agencies and organizations use CHIS data to track state- and local-level prevalence and to focus attention on prevention. State, county and local researchers rely on CHIS data to track prevalence and to encourage prevention of diabetes, obesity, food insecurity, lack of physical activity, and other key public health problems.

- The California Department of Health Services produces *County Health Facts*, a series of reports using CHIS 2001 data to describe the prevalence of key health indicators in California's counties. The Department has published county data reports relying on CHIS 2001 data on the prevalence of diabetes, obesity and health weight, arthritis, binge drinking, and heart disease.
- The Community Action to Fight Asthma (CAFA) relies on CHIS data and estimates to support the work of a dozen grantees of The California Endowment in addressing the multiple environmental triggers of asthma symptoms among school-aged children around the state.
- Statewide, CHIS 2001 data are being recommended to be used in California's environmental health tracking system that is being developed by the California Department of Health Services with funding from CDC's National Center for Environmental Health.
- The California Health Benefits Review Program (CHBRP) is tasked by the State Legislature to provide independent

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- analysis of the medical, financial and public health impacts of proposed health insurance benefit mandates. The CHBRP uses CHIS data in its analyses of a number of legislative bills, including bills that would mandate childhood asthma management programs.
- Researchers from the Integrating Medicine and Public Health Program at the University of California, San Francisco used CHIS 2001 data for a report on *The State of the Great Central Valley—Public Health and Access to Care*. CHIS 2001 data were used for information on asthma prevalence, uninsured children, older adult immunization rates, and the prevalence of binge drinking among adults in California.
 - The Central California Children’s Institute used CHIS data in reports on the prevalence of childhood asthma, childhood obesity and physical inactivity in the Central California Region, and a report entitled, *Children Count 2002-2003: Report Card on the Well-Being of Children in Fresno County*. Another report, *Children in Jeopardy: A Sourcebook for Community Action*, used CHIS data for its child health insurance access, asthma and dental health indicators.
 - Community advocates in Solano County successfully argued against developing a new truck stop along I-80 in the county, based on published CHIS 2001 estimates that showed Solano County to have the state’s highest rate of asthma symptom prevalence overall and one of the highest rates for children.
 - CHIS data helped the Fresno Metro Ministry secure funding from the USDA for its Food Security Project.
 - First 5 Marin used CHIS data in its efforts focused on children’s health issues, such as asthma rates and obesity.
 - *Health in the Heartland: The Crisis Continues*, a report on health status and access to care in the San Joaquin Valley, was produced by the Central Valley Health Policy Institute at California State University, Fresno. The report relied on CHIS data to estimate adults diagnosed with diabetes, insurance status, and—using CHIS and other sources—health status in San Joaquin Valley Counties.
 - Using CHIS data, the Fresno County public health officer has identified obesity, diabetes and asthma as the most important public health issues in that county and obtained additional resources to address these issues.
 - The Fresno Metro Ministry Hunger and Nutrition Project used CHIS data in its advocacy to Fresno community leaders, state agencies, and the American Heart Association Minority Summit on Health Disparities.
 - The Mendocino County Public Health Department *Community Health Status Report 2004* used CHIS estimates for Lake/Mendocino counties for many health indicators, including diabetes, asthma and health insurance coverage.
 - The Santa Barbara County Public Health Department, which sponsored a CHIS 2001 county oversample, relied on CHIS data on obesity and many other health indicators in its report on *The Health and Well-Being of the People of Santa Barbara County*.
 - The Santa Barbara County KIDS Network and First 5 Santa Barbara used CHIS data in their collaborative *Santa Barbara County Children’s Scorecard 2003* to compare the overweight and obesity of adults in Santa Barbara County and California overall.
 - The 2003 Kern County Assessment used CHIS data on diabetes prevalence to compare Kern County with other counties in the San Joaquin Valley.

Research and Publications on Health Needs and Disparities

Researchers in the California Department of Health Services, other State agencies, the National Cancer Institute, the Centers for Disease Control and Prevention, the federal Agency for Healthcare Research and Quality (AHRQ), universities and other research organizations have been using CHIS 2001 data for studies on many important health issues.

CHIS was selected by AHRQ as the only subnational population survey to be included in its Congressionally mandated National Healthcare Disparities Report. AHRQ selected CHIS because it provides uniquely adequate samples of Asian and Latino ethnic groups that are unavailable in national surveys, and cutting-edge measures related to ethnicity, immigration and culture.

More than 100 studies using CHIS 2001 data have been listed on the Web-based CHIS Research Clearinghouse, including:

Health Needs of Racial/Ethnic Groups

- Racial/ethnic disparities in access to ambulatory care services among Medi-Cal beneficiaries
- Racial/ethnic disparities in access to preventive dental services in California
- Health disparities among Asian and Pacific Islander children and adolescents in California

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Research and Publications on Health Needs and Disparities

Health Needs of Racial/Ethnic Groups (continued)

- Racial/ethnic disparities in cancer screening in California
- Barriers to mental health care access and utilization by Latinos and Asian Americans
- The relationship between socioeconomic position and health among Asian- American ethnic groups
- Language, cultural and systemic barriers to mental health care among racial and ethnic groups
- Latina adolescents' utilization of reproductive health care services
- Alcohol use, health risks and child health among Asian Americans
- Ethnic enclaves and cardiovascular risk factors in Asian Americans
- Effect of language on health access and utilization among Asian-American children and subgroups
- Language barriers to health care access among the elderly
- Smoking prevalence among Asian Americans in California
- Obesity, diet and physical activity in Asian Americans
- Oral cancer screening of Asian Americans

Children's Health and Health Care Needs

- Health of young children in California
- Disparities in primary care access for California's vulnerable children
- Access to specialty care for California's children with special health care needs
- Asthma in children in the Central San Joaquin Valley

- Health, nutritional and lifestyle behaviors of children of immigrants living in San Joaquin Valley
- Healthcare access for children of the working poor
- Sexually transmitted disease-related behavior among California adolescents

Health Insurance Coverage and Access to Care

- Long-term and intermittent lack of health insurance coverage in California
- Health insurance status of immigrant farm workers and their families
- California's crisis confronting Hispanics' lack of insurance
- Impact of private and public health insurance on medication use for adults with chronic diseases
- Profile of mental health in California's counties
- Availability of dental providers in California
- Dental check-up of the Healthy Families Program
- Use of hospital emergency rooms for routine care

Diabetes, Asthma, Cancer and Other Chronic Health Needs and Their Prevention

- Diabetes in California
- Asthma in California
- Uncontrolled asthma and exposure to air pollution
- Access to cancer screening among persons with disabilities
- Cancer screening in California
- Colorectal cancer test use in California
- Prostate cancer screening in California
- Estimates of fruit and vegetable consumption in California

- Regional variations in estimates of fruit and vegetable consumption and physical activity
- Effects of street connectivity and land use characteristics on non-leisure time walking and bicycling
- Ecological correlates of obesity and physical activity in California
- Social capital and cardiovascular disease in California
- Californians with activity limitations

Sexual Orientation

- Disparities in health insurance coverage among lesbian, gay and bisexual Californians
- Effect of sexual orientation on women's access to healthcare, preventive care and health risk behaviors
- Cigarette smoking behavior among lesbians, gays and bisexuals

In sum, an extraordinary number and range of constituencies are intensively using CHIS data for public health policy development, funding of services and programs, and research to improve health and health care.

CHIS is a collaboration of the UCLA Center for Health Policy Research, the California Department of Health Services and the Public Health Institute.

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