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Medically Underserved AAPI Communities

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BACKGROUND

Asian American and Pacific Islanders (AAPIs) are among the fastest growing minority groups in the nation, increasing 48% between 1990 and 2000 and expected to reach 41 million or 11% of the U.S. population by 2050. With 14% poverty, 17% uninsured, and 40% limited English proficient (LEP) national rates, AAPIs are socioeconomically disadvantaged compared to non-Hispanic Whites. In addition, AAPIs experience health disparities, including higher prevalence rates of tuberculosis and hepatitis B than other racial groups. Despite their underprivileged status, health data on AAPIs is limited and often represents the group as a whole, masking the more meaningful and documented differences among the numerous subgroups, especially those who are recent immigrants. In total, AAPIs represent more than 49 ethnic groups and 100 languages and are extremely diverse in health and socioeconomic status. The rapidly growing population, poverty, and poor health status of AAPIs combined with scarcity of data are an increasing public health concern. More research is needed to provide a better understanding of the health needs of AAPIs to support health centers as they strive to improve AAPI health.

AAPCHO identifies medically underserved AAPI communities across the nation. AAPCHO's Geographic Information Systems (GIS) project provides a county-level assessment of where AAPIs lack access to health care and thus helps government agencies and public health workers effectively address AAPI needs. The project also contributes to Presidential and Congressional Initiatives to improve the participation of underserved AAPIs in federal programs and to double the number of people served by community health centers by 2006.

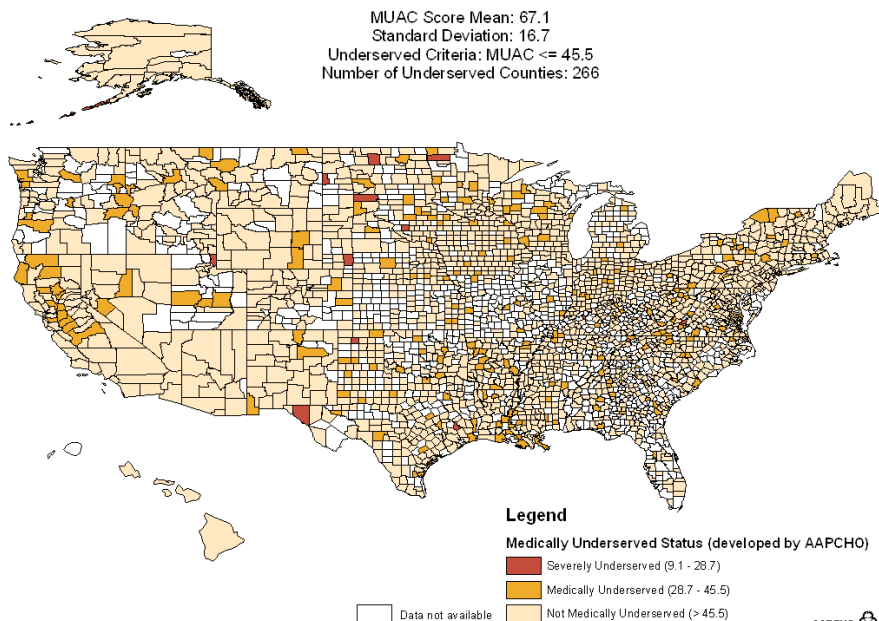
SUMMARY

We identified a total of 266 or 12.1% Medically Underserved AAPI Communities (MUACs), with Aleutians East, Alaska county as most underserved (MUAC=9.1). We classified 16 or 1.0% of counties as severely underserved. Among them, Philadelphia, PA county had the highest AAPI population of 68,383. See map below for counties ranked by MUAC.

Table 1

County	# AAPI	# LEP	# below Poverty	FTE/Pop Ratio	MUAC Score
San Francisco, CA	243,409 31.3%	120,459 51.6%	26,429 10.9%	0.0603 1:16,600	33.1
Kings, NY	187,283 7.6%	105,215 60.3%	48,464 26.0%	0.1927 1:5,200	33.7
Alameda, CA	304,360 21.1%	111,945 40.0%	33,487 11.2%	0.0506 1:19,800	41.3
New York, NY	145,607 9.5%	67,988 48.8%	32,742 23.5%	0.2129 1:4,700	42.1
Queens, NY	392,831 17.6%	183,346 49.5%	62,460 15.8%	0.264 1:3,800	44.9

Medically Underserved AAPI Communities by County



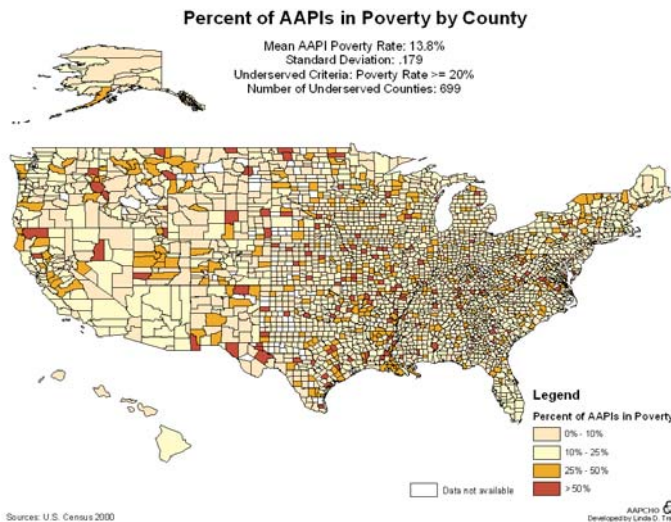
Top 5 MUACs with Greatest AAPI Population

The five MUACs with the greatest AAPI population are found on Table 1, ranked by MUAC score. Among these five MUACs, San Francisco, CA was the most medically underserved with a MUAC score of 33.1, a 52% AAPI LEP rate, and 1:16,600 FTE/Patient ratio, ranked in the 1st percentile in the nation. Kings, NY was the 2nd most medically underserved with a MUAC score of 33.7 and 26% AAPI poverty and 60% AAPI LEP rates, the highest rates among the top five. Alameda, CA, New York, NY, and Queens, NY follow closely behind as MUACs. See maps below for classifications of other indicators used in the MUAC formula.

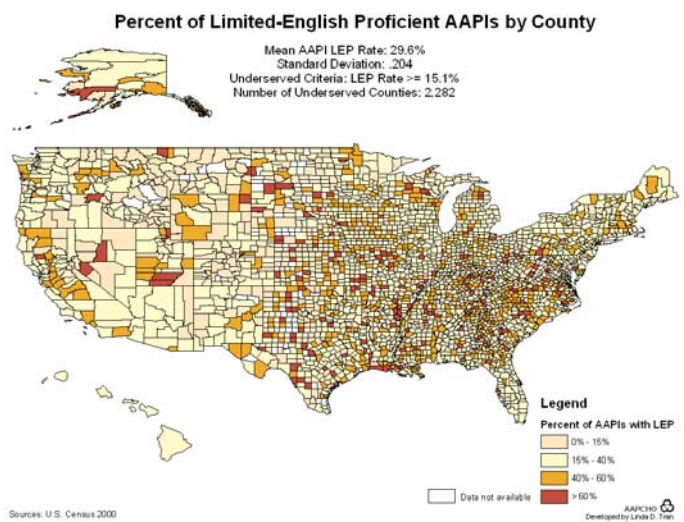
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Percent of AAPIs in Poverty



Percent of Limited-English Proficient AAPIs



Comparison with Bureau of Primary Health Care (BPHC) Medically Underserved Areas (MUAs)

Nationally, 138 (52%) MUAC whole counties* were not designated as BPHC MUA counties and require further examination of health resource needs for AAPIs. Of these 138 AAPCHO MUAC counties, 20 (14%) had an AAPI population of 10,000 or greater, and 29 (21%) counties had an AAPI population of 5,000 or greater. Counties consisting of 5,000 or greater AAPIs had a mean MUAC score of 38.8, including a very high poverty rate averaging 29% and LEP rate averaging 45%. See Table 2 for individual data by county.

*Units smaller than county levels (e.g. census tracts) may have been designated as BPHC MUA.

CONCLUSIONS & IMPLICATIONS

♦ Increasing community health services in medically underserved AAPI communities is critical to reducing health disparities for AAPIs. This project provides a preliminary assessment of counties needing expanded health services for underserved AAPIs.

♦ With health center care expected to double by 2006 under Presidential and Congressional initiatives, results can be used to address and prioritize AAPI health center expansion areas.

♦ There are many AAPI medically underserved areas in the nation that require more comprehensive examination. Select MUACs, such as San Francisco, CA and Kings, NY will be explored at a more detailed level (e.g. census tract), and their scope of health resources will be examined to more comprehensively validate their medical underservice.

♦ Disaggregated AAPI data collection will also be critical to better assess the wide socioeconomic and health disparities across AAPI ethnicities.

Table 2: High Risk AAPI Counties

County	# AAPI	# LEP	# below Poverty	FTE/Pop Ratio	MUAC Score
Queens, New York	392,831 17.6%	183,346 49.5%	62,460 15.8%	0.26402 1:3,788	44.9
Alameda, California	304,360 21.1%	111,945 39.6%	33,487 11.2%	0.05057 1:19,775	41.3
San Francisco, California	243,409 31.3%	120,459 51.6%	26,429 10.9%	0.06026 1:16,595	33.1
Kings, New York	187,283 7.6%	105,215 60.3%	48,464 26.0%	0.19272 1:5,189	33.7
New York, New York	145,607 9.5%	67,988 48.8%	32,742 23.5%	0.21293 1:4,696	42.1
Sacramento, California	142,163 11.6%	54,739 41.7%	28,878 20.6%	0.56669 1:1,764	44.8
Philadelphia, Pennsylvania	68,383 4.5%	31,002 50.4%	18,738 29.8%	0.06979 1:14,329	28.4
San Joaquin, California	66,238 11.8%	27,772 44.8%	18,530 28.1%	0.47126 1:2,122	38.7
Fresno, California	65,362 8.2%	28,637 48.2%	24,626 38.5%	0.48361 1:2,068	32.5
Suffolk, Massachusetts	48,728 7.1%	24,030 52.1%	13,874 30.4%	1.09915 1:910	31.0
Ramsey, Minnesota	45,159 8.8%	20,628 52.6%	11,994 27.4%	0.88135 1:1,135	36.7
Stanislaus, California	20,377 4.6%	7,613 40.3%	5,108 25.4%	0.42999 1:2,326	41.9
Oklahoma, Oklahoma	19,085 2.9%	8,527 48.9%	3,665 20.3%	0.11129 1:8,986	40.5
Providence, Rhode Island	18,442 3.0%	7,665 44.1%	4,498 26.2%	0.80197 1:1,247	43.1
Yolo, California	17,121 10.2%	4,385 27.6%	6,130 40.7%	0.49627 1:2,015	39.8
Dane, Wisconsin	14,868 3.5%	5,201 38.5%	3,577 25.6%	0.80043 1:1,249	45.3
Merced, California	14,717 7.0%	6,477 47.7%	5,604 37.9%	0.37663 1:2,655	32.1
Orleans, Louisiana	11,081 2.3%	4,637 46.5%	3,051 30.0%	1.22021 1:820	40.8
Ingham, Michigan	10,416 3.7%	3,949 41.3%	2,578 27.8%	1.46857 1:681	43.4
Baltimore, Maryland	10,207 1.6%	3,541 36.1%	2,865 30.2%	0.18199 1:5,495	36.3

METHOD

Sample

- 2,191 U.S. Counties
- Selection Criteria: Counties with data for the following indicators: Poverty, LEP, AAPI population, & Primary Care Physician to Patient Ratio. Counties with one or more missing indicators were omitted.

MUAC Definition

MUAC = AAPI Poverty + AAPI LEP + AAPI Population Size + Physician-to-Patients Ratio

A Medically Underserved AAPI Community (MUAC) is defined as a county in which the AAPI population is underserved in terms of ability to access health care, including facilities and providers. Medical underservice is a function of limited health care resources, financial, language, and cultural barriers, and poor health status.

Indicators & Sources

- AAPI Poverty Rate (Census, 2000, SF3)
- AAPI Limited-English Proficiency Rate (LEP) (Census, 2000, SF3)
- AAPI Alone Population, 2000 (Census 2000, SF1)
- Primary Care Physician FTEs per 1,000 Patients (Bureau of Primary Health Care, 2004)

Table 3

Indicator	Weight
Poverty %	.40
LEP %	.25
AAPI % Population	.20
Provider to Patient Ratio	.15
Total	100%

Analysis

- MUAC scale ranged from 0-100 (most underserved to best served or least underserved).
- MUAC Mean = 67.1; Range = 9.1-98.2; SD = 16.7
- Sum of weights provided the MUAC score for each county.
- Corresponding weights for underserved criteria were summed, producing a total of 45.5. Counties with scores less than or equal to 45.5 are considered medically underserved.
- An underserved criterion was created for each variable (e.g., AAPI Poverty Rate = 20%)
- Corresponding weights were calculated for each variable. See Table 3.