Highlighting Factors Contributing to Women’s Health Inequities

Findings from the Health Indicators for Women in Los Angeles County Report

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Advancing Women's Health Equity and Financial Literacy
March 28, 2017
Health Indicators for Women in Los Angeles County

• 4th Edition of this report:
  • 100+ standard health indicators
  • By race/ethnicity and federal poverty level
  • Special health topics

• Data Sources – 2013 to 2016
  • Population based surveys
    • LACHS, LAMB, CHIS
  • Public Health Disease Reporting Systems and Registries
  • CA State Birth, Death, ER and Hospital Discharge Data
  • US Census Bureau – American Community Survey
  • Los Angeles Housing Services Authority - Homeless Count
Demographics
Highlighting Factors Contributing to Women’s Health Inequities
Diversity of Women in LA County

- 3.5 million adult women
- 70% are women of color
- About 46% of women are foreign-born
  - 76% of Asian women
  - 64% of Latinas
- 37% mostly speak a language other than English at home
- 17% single adults with children

Source: 2015 Los Angeles County Health Survey
Women in Los Angeles County by Age and Race/Ethnicity, 2015

Source: 2015 Los Angeles County Health Survey
Determinants of Health
Highlighting Factors Contributing to Women’s Health Inequities
Education Level Among Women

- 25% of women have a less than high school education compared to 20% of men
- And 24% of women compared with 30% of men have a college or higher degree
- Half of women living in poverty have a less than high school education
- 45% of Latinas have a less than high school education

`Source: 2015 Los Angeles County Health Survey`
Percent of Women Who Live Below 200% of the Federal Poverty Level (FPL) in Los Angeles County by Race/Ethnicity, 2015

- 1 in 4 women live in poverty (< 100% FPL) and over half of women live at < 200% FPL.
- Over 70% of Latinas and 60% of black women live at < 200% FPL.

Source: 2015 Los Angeles County Health Survey
Determinants of Health and Health Outcomes for Women in Los Angeles County by Federal Poverty Level (FPL), 2015

- Poverty is linked to higher food insecurity and women reporting living in unsafe neighborhoods.
- Low-income women have higher prevalence of obesity and diabetes than women living at higher incomes.

* Food insecurity reported for adults with household incomes < 300% FPL only

Source: 2015 Los Angeles County Health Survey
Health Status
Highlighting Factors Contributing to Women’s Health Inequities
Average Life Expectancy at Birth among Females in Los Angeles County by Race/Ethnicity, 2004-2013

* Data Includes NHOPI, not just Asian women alone

Source: Office of Health Assessment & Epidemiology, Los Angeles County Department of Public Health
Self-Reported Health Status

• About 22% of women in LA County report a fair or poor health status.

• A significantly higher percent of Latinas report a fair or poor health (28%).

• Among those living in poverty, 37% report a fair or poor health status.

Source: 2015 Los Angeles County Health Survey
Health Care Coverage & Access
Highlighting Factors Contributing to Women’s Health Inequities
Change in Percent of Uninsured Women (18-64 years) in Los Angeles County by Race/Ethnicity from 2011 to 2015

- Percent of uninsured women decreased by more than half from 26% in 2011 to 10% in 2015.
- Largest decrease was among Latinas. (41% to 14%)

Source: 2011, 2015 Los Angeles County Health Survey
Change in Percent of Women (18-64 years) Covered by Medi-Cal in Los Angeles County by Race/Ethnicity from 2011 to 2015

- Percent of women covered by Medi-Cal increased from 20% in 2011 to 36% in 2015.
- Largest increase was among Latinas (27% to 47%) and black women (33% to 51%).

Source: 2011, 2015 Los Angeles County Health Survey
Health Behaviors

Highlighting Factors Contributing to Women’s Health Inequities
Soda Consumption and Aerobic Inactivity among Women in Los Angeles County by Education Level, 2015

**Source:** 2015 Los Angeles County Health Survey
Soda Consumption and Aerobic Inactivity among Women in Los Angeles County by Federal Poverty Level (FPL), 2015

- **<100% FPL**
  - Drink at least 1 soda/sweetened drink a day: 32%
  - No weekly aerobic activity: 16%

- **100-199% FPL**
  - Drink at least 1 soda/sweetened drink a day: 29%
  - No weekly aerobic activity: 12%

- **200-299% FPL**
  - Drink at least 1 soda/sweetened drink a day: 23%
  - No weekly aerobic activity: 13%

- **≥ 300% FPL**
  - Drink at least 1 soda/sweetened drink a day: 16%
  - No weekly aerobic activity: 10%

*Source: 2015 Los Angeles County Health Survey*
Health Conditions
Highlighting Factors Contributing to Women’s Health Inequities
Percent of Women with Obesity in Los Angeles County by Race/Ethnicity, 1997-2015

- Black
- Latina
- White
- Asian & NHOPI

*Estimate is statistically unstable
†Data includes NHOPI, not just Asian women alone

Source: 1997-2015 Los Angeles County Health Survey
## Ranking of Causes of Death and Premature Death Among Women, 2013

<table>
<thead>
<tr>
<th>Death</th>
<th>Premature Death</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Coronary Heart Disease</td>
<td>1 Coronary Heart Disease</td>
</tr>
<tr>
<td>2 Stroke</td>
<td>2 Breast Cancer</td>
</tr>
<tr>
<td>3 Alzheimer’s Disease</td>
<td>3 Lung Cancer</td>
</tr>
<tr>
<td>4 Emphysema/COPD</td>
<td>4 Unintentional Drug OD</td>
</tr>
<tr>
<td>5 Lung Cancer</td>
<td>5 Stroke</td>
</tr>
<tr>
<td>6 Pneumonia/Influenza</td>
<td>6 Diabetes</td>
</tr>
<tr>
<td>7 Breast Cancer</td>
<td>7 Motor Vehicle Crash</td>
</tr>
<tr>
<td>8 Diabetes</td>
<td>8 Liver Disease</td>
</tr>
<tr>
<td>9 Hypertension</td>
<td>9 Colorectal Cancer</td>
</tr>
<tr>
<td>10 Colorectal Cancer</td>
<td>10 Suicide</td>
</tr>
</tbody>
</table>

Source: 2013 Los Angeles County Mortality data, OHAE
Selected Leading Causes of Death among Women in Los Angeles County, 2004-2013

Source: 2004-2013 Los Angeles County Mortality Data, OHAE
Economic Security & Well-Being

Highlighting the Factors Contributing to Women’s Health Inequities
Median Annual Earnings of Women and Men in Los Angeles County by Race/Ethnicity, 2014

- Latinas have the largest wage gap, making only 38% of the median earnings of white men, followed by black women at 58%, Asian women at 67% and white women at 80%.

Source: 2014 American Community Survey, US Census Bureau
Percent of single female household renters that spend more than 30% of their gross income on rent

- 70% of women compared with 58% of men who are single family householders are spending more than 70% of their gross income on rent.

Source: 2014 American Community Survey, US Census Bureau
Homelessness and Women

Highlighting Factors Contributing to Women’s Health Inequities
The number of women experiencing homelessness increased by 55% from 2013 to 2016.

Approximately 70% of homeless women in LA County (9,923 women) are unsheltered.

Black women (40%), Latinas (29%) and white women (23%) make up the majority of homeless women.

More homeless women are living in families than homeless men.

Source: 2013, 2015, 2016 Homeless Count, Los Angeles Housing Services Authority
Selected Health and Social Characteristics of Homeless Women in Los Angeles County by Sheltered Status, 2016

- **Mental Illness**
  - Unsheltered: 37%
  - Sheltered: 12%

- **Experienced domestic violence**
  - Unsheltered: 35%
  - Sheltered: 20%

- **Substance abuse**
  - Unsheltered: 26%
  - Sheltered: 5%

- **Physically disabled**
  - Unsheltered: 20%
  - Sheltered: 6%

Source: 2016 Homeless Count, Los Angeles Housing Services Authority
Trauma, Violence & Stress
Highlighting Factors Contributing to Women’s Health Inequities
Percent of Women who Report Ever Experiencing Physical and/or Sexual Violence by an Intimate Partner in Los Angeles County, 2015

Sources: 2015 Los Angeles County Health Survey
Percent of Women with a Recent Live Birth who Report a Stressful Event During Pregnancy and Experiencing Discrimination, 2014

- Almost 80% of black women with a recent live birth report experiencing a stressful event during their last pregnancy.
- Over 50% of black women with a recent live birth report experiencing at least one incident of discrimination over their lifetime.

Source: 2014 Los Angeles Mommy and Baby Survey
American Indian/Alaskan Native Women
Highlighting Factors Contributing to Women’s Health Inequities
Percent of Women Reporting a Disability and Fair or Poor Health Status in Los Angeles County by Race/Ethnicity, 2011-2014

- 73% of AI/AN women report a disability, far higher than women from other race/ethnic groups.
- 37% of AI/AN women report a fair or poor health status.

Source: California Health Interview Survey, 2011-2014 Pooled Data
Percent of Women with Overweight or Obesity and High Blood Pressure in Los Angeles County by Race/Ethnicity, 2011-2014

- AI/AN women have the highest rates of poor health outcomes such as overweight or obesity and high blood pressure.

- Mortality rates from coronary heart disease and diabetes are higher among AI/AN women than women of other race/ethnic groups.

Source: California Health Interview Survey, 2011-2014 Pooled Data
Conclusions

- Diverse population with unique health needs
  - Projected to become more diverse

- Evidence of gains made in health
  - Health insurance coverage, obesity, leading causes of death

- Significant health inequities remain
  - Multitude of social, physical and economic factors

- Impact of deep-rooted determinants of health
  - Trauma, discrimination, racial bias, homelessness
Looking to the Future

• How to protect, preserve and advance Women’s Health in the current environment?

• Protecting the most vulnerable
• Preserving the gains made through ACA
• Advancing our understanding of factors contributing to women’s health inequities
Thank You!

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