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American Indian Health Access in California

February 19, 2020

1.

1) The dependent variable is health coverage; this interests me because I would like to see what differences exist in American Indian health coverage.
2) My independent variables will be race/ethnicity and education (as a control).
3) Existing literature broadly makes the relationship. However, I would like to know if there is a statistical relationship between health care coverage and identifying as American Indian.
4) My control variable will be education. Outside of AI health, education is a predictor of health coverage. Is this the same for AIs? I will also control for age.

2.

cd "C:\Users\Amanada Conley\Documents\Amanda\UC Merced\Soc 211\IPUMS"

capture log close

set more off

log using hw4.log, append

use usa_00002.dta

3.

```
. describe

(in log file)

Identifier: Serial—unique household ID

The dataset that I am using was cleaned of missing data last November

Tab racamind (Dummy variable for American Indian)

Tab hcovany (Health care of any type)

Tab educ
```

sum racamind, d

sum hvocany, d
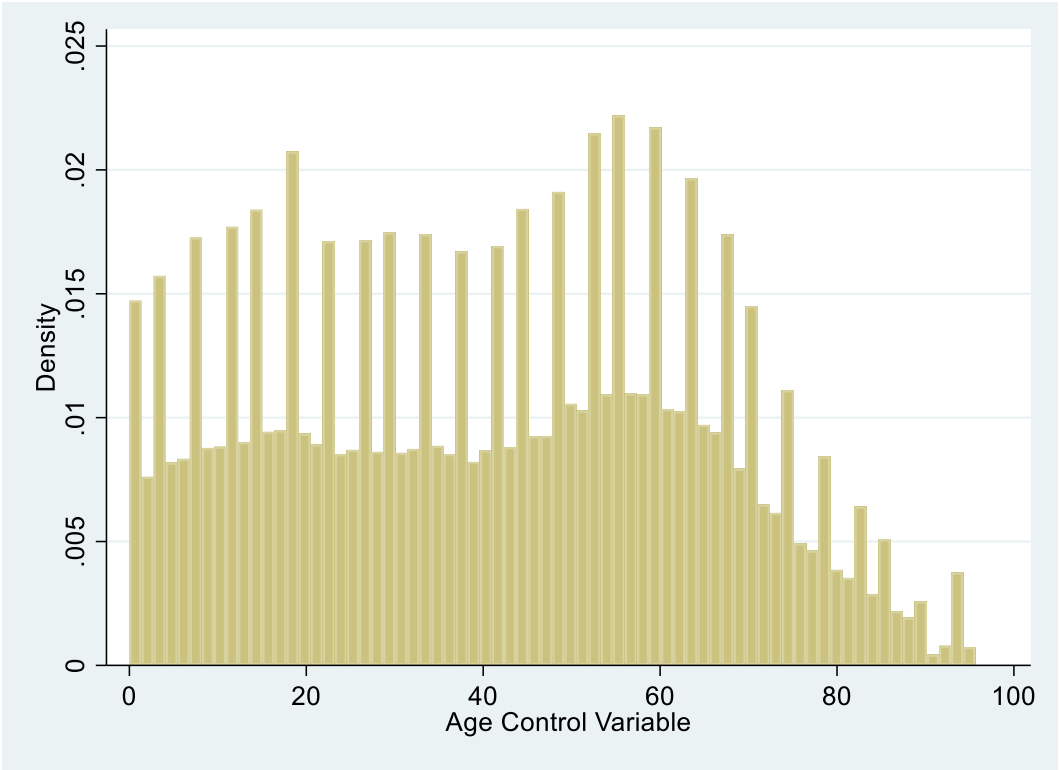
tab educ

tab age

4.

American Indians represent a small percentage of the total observation. Education is higher than I expected. There are a lot of remaining uninsured across the country.

4.

5.

```
       race: |
   american |
  indian or |
     alaska |
     native |       Freq.       Percent          Cum.
------------+---------------------------------
         no |  15,443,292         98.00         98.00
        yes |     315,645          2.00        100.00
------------+---------------------------------
      Total |  15,758,937        100.00
```

```
. tab educ


   educational attainment |
          [general version] |      Freq.      Percent        Cum.
-------------------------+---------------------------------
      n/a or no schooling |    975,826         6.19         6.19
nursery school to grade 4 |  1,233,154         7.83        14.02
      grade 5, 6, 7, or 8 |  1,119,406         7.10        21.12
                  grade 9 |    367,443         2.33        23.45
                 grade 10 |    412,257         2.62        26.07
                 grade 11 |    454,614         2.88        28.95
                 grade 12 |  4,660,856        29.58        58.53
        1 year of college |  1,937,032        12.29        70.82
       2 years of college |    989,567         6.28        77.10
       4 years of college |  2,231,358        14.16        91.26
      5+ years of college |  1,377,424         8.74       100.00
-------------------------+---------------------------------
                    Total | 15,758,937       100.00


. tab hcovany


 any health insurance coverage |      Freq.      Percent        Cum.
-----------------------------+---------------------------------
    no health insurance coverage |  1,465,829         9.30         9.30
with health insurance coverage | 14,293,108        90.70       100.00
-----------------------------+---------------------------------
                        Total | 15,758,937       100.00
```

6.

```
. table hcovany racamind educ, contents(freq)
```

| educational attainment [general version] and race: american indian or alaska native

| - n/a or no sc -   - nursery scho -   - grade 5, 6, -   ---- grade 9 ---   --- grade 10 ---

 any health insurance coverage | no   yes   no   yes   no   yes   no   yes   no   yes

-------------------------------+--

  no health insurance coverage | 69,385   3,229   65,540   3,899 124,586   4,424   56,882   2,268   55,918   2,831

with health insurance coverage | 879,783   23,429 1133642   30,073 965,497   24,899 300,102   8,191 343,876   9,632

| educational attainment [general version] and race: american indian or alaska native

| --- grade 11 ---   --- grade 12 ---   - 1 year of co -   - 2 years of c -   - 4 years of c -

 any health insurance coverage | no   yes   no   yes   no   yes   no   yes   no   yes

-------------------------------+--

  no health insurance coverage | 66,470   3,655 568,217   23,226 189,400   8,529   73,418   2,940 103,848   2,384

with health insurance coverage | 373,937   10,552 4000145   69,268 1704468   34,635 897,804   15,405 2105120   20,006
```

. tab race age_r


```
       race [general |                categorize variable age
           version] |      0-18       19-24       25-40       41-65         65+ |
Total
--------------------+--------------------------------------------------------+-------
---

             white | 2,511,455     822,462   2,169,306   4,265,817   2,304,305
|12,073,345

black/african america |   394,072     147,926     322,643     550,915     217,816 |
1,633,372

american indian or al |    53,643      14,555      35,072      55,145      18,507 |
176,922

           chinese |    40,486      20,793      45,700      71,158      25,292 |
203,429

          japanese |     4,070       2,078       6,669      16,410      11,376 |
40,603

other asian or pacifi |   134,204      48,458     150,011     190,404      58,371 |
581,448

     other race, nec |   179,543      61,510     150,203     161,172      33,637 |
586,065

       two major races |   189,522      40,835      74,793      80,126      24,047 |
409,323

three or more major r |    26,171       5,550      10,166       9,964       2,579 |
54,430

--------------------+--------------------------------------------------------+-------
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             Total | 3,533,166   1,164,167   2,964,563   5,401,111   2,695,930
|15,758,937
```


7. Yes, there is a relationship between identifying as American Indian and health
insurance coverage, though age does seem to have some impact on health coverage. So
far, this is consistent with the literature in that AIAN children and elders have more
coverage than their counterparts who fall between the categories of children and

elders. Young adults seem most vulnerable with this group being more likely than the others to lack health insurance coverage. Because this dataset allows for household level analysis, it would be interesting to see if young adults who share homes with parents and child siblings who are covered by health insurance are still uninsured—meaning, does family insurance status impact young adult coverage? There is another issue that is harder to get at—as the ACS has allowed for IHS to be considered as health coverage to some degree, though it is a fund and not a health insurance plan. Because of this, if young adults, who may be in better health, have not needed to access IHS for a calendar year, it may affect their responses to the health coverage question.