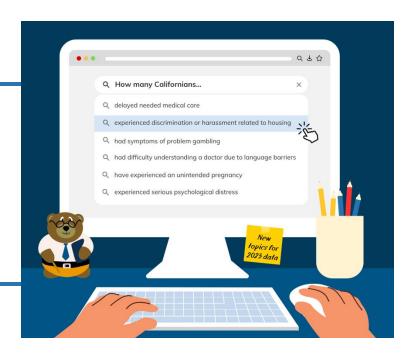


October 3, 2024

California Health Interview Survey (CHIS) 2023 Data Release



Ninez A. Ponce and Todd Hughes

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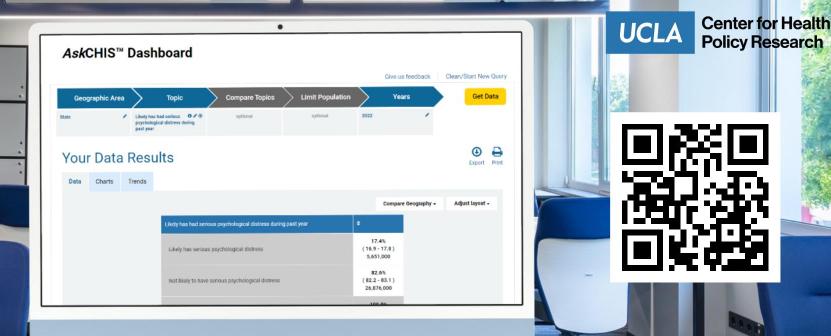










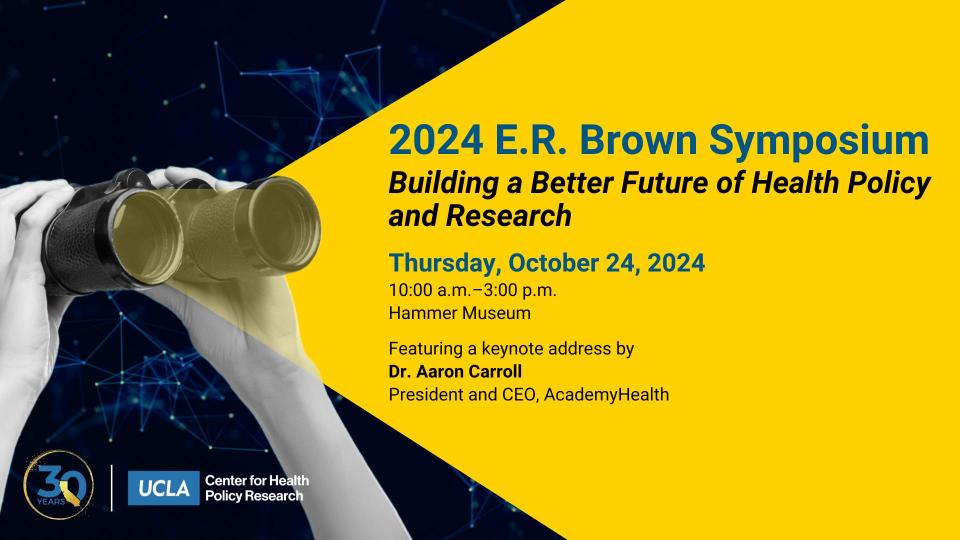




california health interview survey

CALIFORNIA HEALTH INTERVIEW SURVEY DATA USER TRAINING

THURSDAY, OCTOBER 17, 2024 | NOON-1:30 P.M. PT







Center for Health Policy Research

30th Anniversary Gala and Awards Dinner NOVEMBER 13, 2024

UCLA Luskin Conference Center

What Is CHIS?

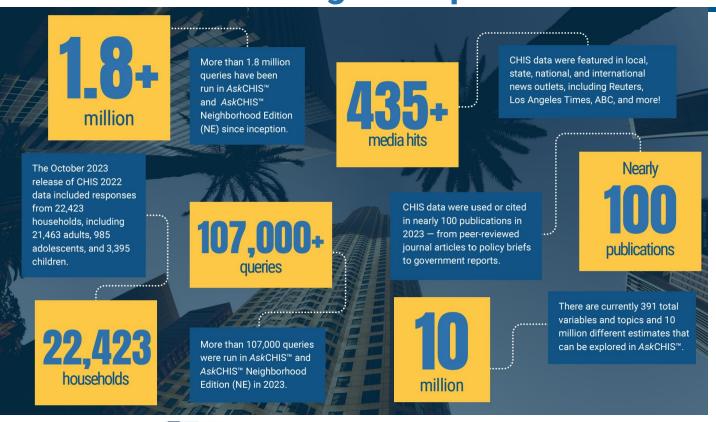
- Nation's largest state health survey
- Most comprehensive source of health information on Californians
- Comprehensive range of health topics

 - Mental Health
- Health Status Oral Health
- Health Conditions Health Behaviors
 - Employment

- Access to & Use of Health Care
- Health Insurance
- Respondent Characteristics
- CHIS is a collaborative project, funded by federal and state health agencies, California and national foundations, and others



CHIS 2023 Making an Impact



A report of 2023 CHIS impact through:

- Access to data tools
- Legislation and advocacy
- Seminars, events, and presentations
- Journal articles and publications
- Media coverage



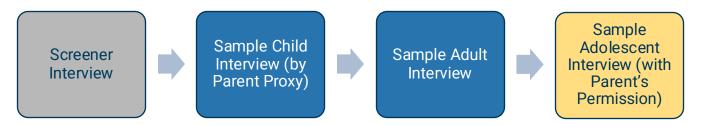




CHIS Design

CHIS interviews

 An adult (ages 18+) in the household, adolescent (ages 12−17) if present, and child (ages 0−11) if present



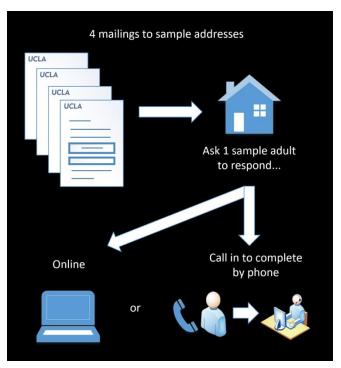
CHIS conducted in multiple languages

 English, Spanish, Chinese (both Cantonese and Mandarin dialects), Korean, Vietnamese, and Tagalog



CHIS 2023 Data Collection Method for Adults: Address-Based Sampling with Web and Telephone Response

Phase 1: Push-to-Web

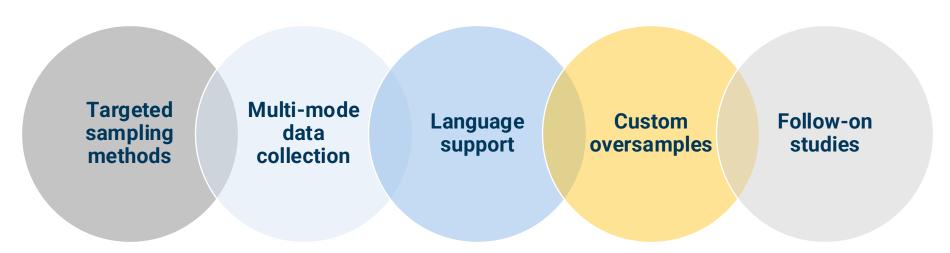


Phase 2: Telephone Nonresponse Follow-up





CHIS Methods to Reflect California's Diversity



CHIS received the American Association for Public Opinion Research's 2024 Inclusive Voices Award, which recognizes important data sets, research, and survey methods that have improved the ability to study complex social phenomena related to understudied populations.





2023 Data Collection Results

CHIS 2023 RACIAL/ETHNIC GROUP SAMPLES BY AGE

	ADULT (Age 18+)	ADOLESCENT (Age 12-17)	CHILD (Age 0-11)
Total Sample Size	21,671	968	3,377
RACE*			
African American	1,064	38	155
American Indian/Alaska Native	529	36	73
Asian	3,407	138	523
Native Hawaiian/Pacific Islander	77	6	18
Other single race	1,538	78	255
Two or More Races	1,079	100	422
White	13,977	572	1,931
LATINO ETHNICITY			
Latino	6,000	393	1,529
Non-Latino	15,671	575	1,848

CHIS 2023 includes interviews conducted between January and December 2023

See: https://healthpolicy.ucla.edu/our-work/california-health-interview-survey-chis/chis-design-and-methods

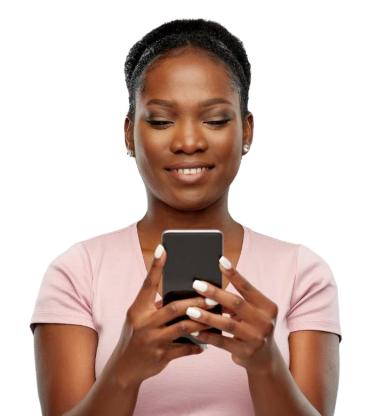




Supplemental Sampling Methods for 2023 CHIS

Prepaid Cell Phone Sample

- Target of 450 completes
- Objective to increase representation from respondents who were:
 - Age 18 to 24
 - Hispanic or Latinx
 - Black or African American
 - Prefer to take the survey in one of the non-English languages offered







Supplemental Sampling Methods for 2023 CHIS



Other Targeted Oversamples

- San Diego County Health and Human Services oversample
- City of Long Beach Health and Human Services (additional 500 adults)
- Santa Clara County Public Health Department (additional 1,925 adults)



How Much CHIS 2023 Data Is Now Available?

536 total variables/topics are included in the AskCHIS system for 2023...

...which can
each be used
for two-way
cross
tabulations with
each other...

...which can each be examined for

different geographic areas in CA means...

...approximately

19

MILLION

different CHIS estimates can be explored in AskCHIS!

*Plus, CHIS 2023 Public Use Files contain 1,493 detailed variables for research!





Noteworthy Additions to CHIS 2023

- Housing Discrimination
- Gambling
- Unintended Pregnancy
- Adolescents' College Plans
- Adolescent Sexual Orientation
- Many other topics, too!



See the "What's New" document on the CHIS Methodology Reports Repository for details on new topics and identification of which data are available in *Ask*CHIS or the Public Use File (PUF).



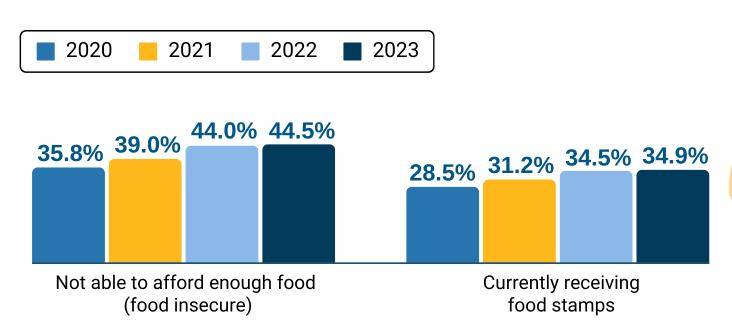
Highlights from the 2023 CHIS







Of California adults earning less than 200% of the federal poverty level











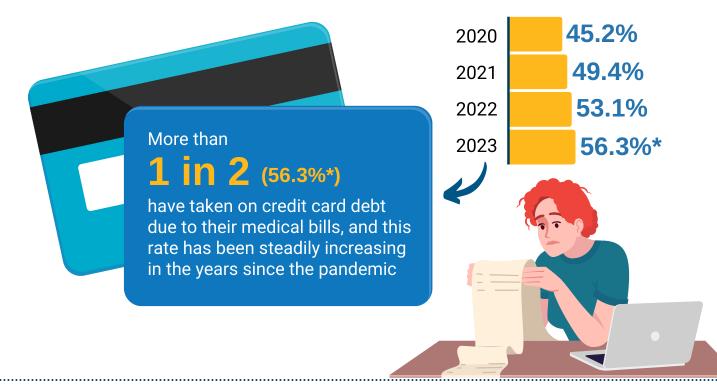
Among adults who had problems paying medical bills in the past year:



More than

1 in 3 (36.4%)

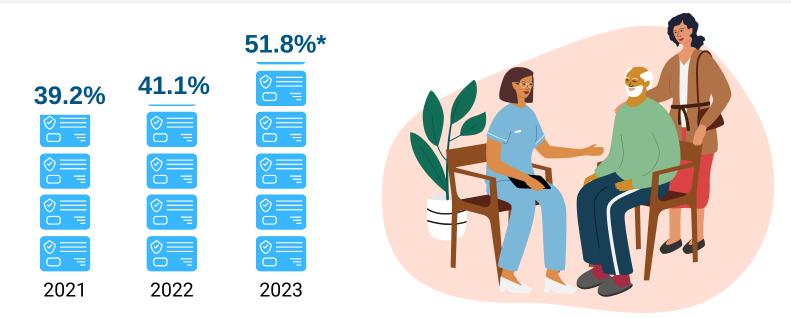
have been unable to pay for basic necessities due to their medical debt







In May 2022 a new law in California gave full scope Medi-Cal to adults 50 years of age or older who qualify, without regard to immigration status. The rate of noncitizen adults (including those with green cards) age 50 and older covered by Medi-Cal has seen a significant increase in 2023 as a result.







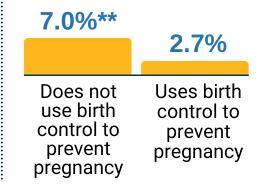
Unintended Pregnancy

4.4% of sexually active adult women* age 18-44 became pregnant with an unintended pregnancy in the past 12 months

Those with lower incomes were more than twice as likely to experience an unintended pregnancy in the past 12 months:



Those who do not use birth control to prevent pregnancy were more than twice as likely to experience an unintended pregnancy in the past 12 months:



FPL = Federal Poverty Level

UCLA Center for Health Policy Research



^{*}Assigned female at birth with a male or female sexual partner in the past 12 months, who are able to get pregnant

^{**}Statistically significantly higher than the associated comparison group



The need for adults to seek mental health care for mental/emotional or alcohol/drug related problems remains higher after the pandemic, as does the difficulty in getting appointments.

	2019	2020	2021	2022	2023
Needed help for emotional/mental health or alcohol/drug problem in the past year	21.6%	20.9%	25.0%*	25.4%*	24.7%*
Saw a counselor, psychiatrist, or social worker in past year for mental/emotional or alcohol/drug problems	11.6%	11.3%	12.9%	14.5%*	14.4%*
Difficulty in getting an appointment was the reason why they didn't get the emotional help needed	23.3%	22.7%	24.4%	33.3%*	30.6%*







One positive finding is that the rates of adults reporting serious psychological distress and severe social life and family life impairment due to emotions are all now trending back down to pre-pandemic levels after 2022 highs.

	2019	2020	2021	2022	2023
Likely had serious psychological distress in the past year	13.0%	12.2%	17.0%*	16.4%*	13.9%
Severe social life impairment due to emotions in the past 12 months	10.3%	9.9%	12.8%*	13.0%*	10.9%
Severe family life impairment due to emotions in the past 12 months	8.3%	7.9%	10.5%*	10.8%*	8.7%







There is a correlation between economic instability and poor mental health—those who report housing instability and those with income below 200% FPL have higher rates of serious psychological distress and suicide ideation.

	Has stable housing	Has unstable housing	\$ 0-199% FPL	\$\$ 200%+ FPL
Likely had serious psychological distress in the past year	13.1%	30.0%*	17.5%*	14.4%
Ever seriously thought about committing suicide	19.2%	28.2%*	21.0%*	19.1%







The 2023 CHIS includes modified response categories for the sexual orientation question, and added the question for the first time to the adolescent survey.



	Straight	Gay or Lesbian	Bisexual or Pansexual	Use a different term	Don't know	Prefer not to answer
Adolescents (11–17)	76.8%	2.5%	9.8%	1.0%	6.7%	3.2%
Adults (18+)	84.4%	3.4%	5.1%	0.8%	1.8%	4.5%

More than

1 in 8 (13.3%)

adolescents report that they are gay, lesbian, bisexual, pansexual, or use a different term, compared to 9.3% of adults







Y Adolescent Sexual Orientation and Mental Health

Adolescents who don't identify as straight or heterosexual report much higher rates of serious psychological distress during the past year, needing help for emotional/mental health problems, and receiving psychological/emotional counseling in the past year.

	Straight	Gay or Lesbian	Bisexual or Pansexual	Use a different term	Don't know	Prefer not to answer	All Adolescents
Likely had serious psychological distress during the past year	23.2%	67.8%*	57.6%*	82.1 % [!]	37.4%*	25.8%	29.3%*
Needed help for emotional/mental health problems	23.3%	97.4 % [!]	64.3%*	91.5 % [!]	29.9%	22.3%	30.3%*
Received psychological/ emotional counseling in the past year	13.7%	28.8%	39.3%*	36.3 % [!]	35.1%*	24.0%	18.6%*

^{*}Statistically significantly higher than the rate for straight or heterosexual [!]Unstable estimate

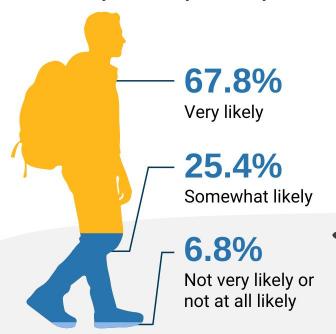
Source: 2023 California Health Interview Survey







Among California adolescents age 12-17, how many think they are likely to attend college?



Adolescent rates of being very or somewhat likely to attend college

By sex

96.8%* **Female**

89.8%

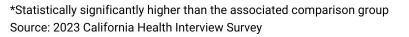
By family type

96.2%*

Married parents 86.8%

Single parents









Adolescent College Plans

In the context of CHIS questions on Adverse Childhood Experiences (ACEs), adolescents with zero ACEs reported being very or somewhat likely to attend college at higher rates than those with one or more ACEs reported.

95.2%*

0 ACEs

VS.

90.5%

1 or more ACFs

Similarly, those reporting three or more **Positive Childhood Experiences**(PCEs) were more likely to plan to attend college than those with less than three.

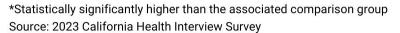
94.5%*

3 or more PCEs

VS.

88.0%

Less than 3 PCEs







Stronger community engagement was also associated with higher rates of being very or somewhat likely to go to college:

98.8%*

Ever volunteered to solve a problem in the community

91.5%

Has not ever volunteered to solve a problem in the community



Strongly
agrees/agrees
that people in
neighborhood
can be trusted

87.5%

Strongly disagrees/disagrees that people in neighborhood can be trusted



94.8%*

Strongly/somewhat agrees that they can make a difference in the community

89.3%

Strongly/somewhat disagrees that they can make a difference in the community





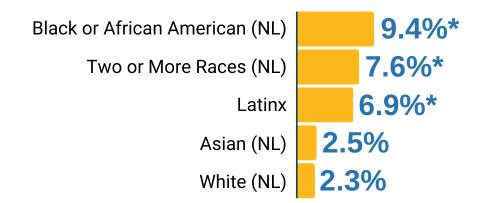


Housing Discrimination



4.6%

of adults in California report experiencing discrimination or harassment related to housing in the past 2 years Rates for experiencing housing discrimination/ harassment are higher among Black or African American, Latinx, or multiracial Californians than among non-Latinx white or Asian adults:



NL = Non-Latinx

Source: 2023 California Health Interview Survey





^{*}Statistically significantly higher than the rate for Asian (Non-Latinx) or white (Non-Latinx). Estimates for AIAN and NHPI were not statistically stable.



Rates for experiencing housing discrimination/harassment are higher for adults that are noncitizens, speak a language other than English at home, have lower incomes, and are renters.

By citizenship status

6.6%* 4.3%

Noncitizens U.S.-born or

naturalized citizens

By federal poverty level (FPL)

8.0%* 3.1%

Income Income

<200% FPL ≥200% FPL

By language spoken

6.0%*

Speak one or more languages other than English at home

3.5%

Speak English only at home

By type of residence

8.8%*

Renting in multiunit building Renting in single-

unit building

3.9%

Homeowner in multi-unit building

2.1%

Homeowner in single-unit building

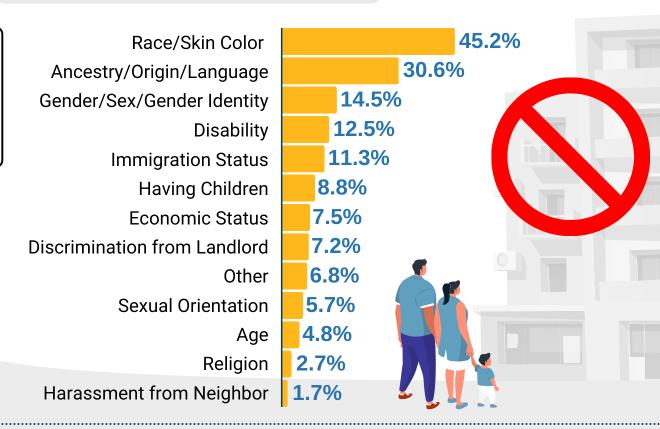


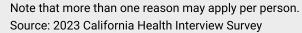


Housing Discrimination

Of those that report experiencing housing discrimination/harassment, they believe the treatment is due to these reasons:





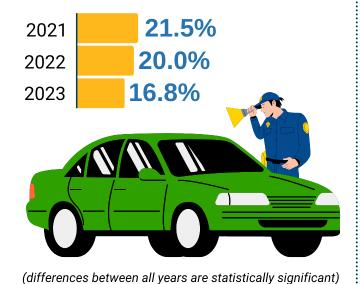




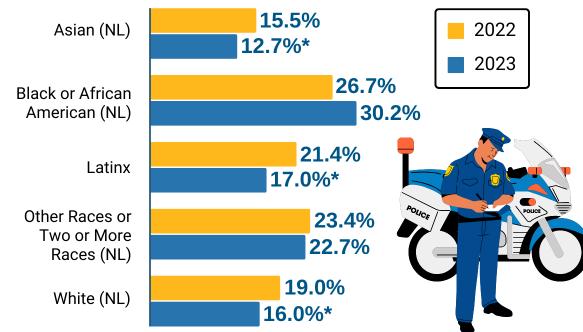




The rate of California adults that report being stopped at least once by police in the past three years has dropped again in 2023.



However, drops in these rates were only experienced by Latinx, white (non-Latinx), and Asian (non-Latinx) adults.









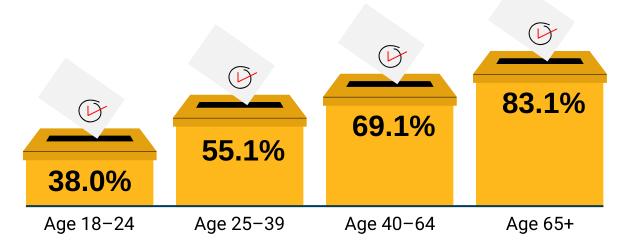




Nearly

2 in 3 (65%)

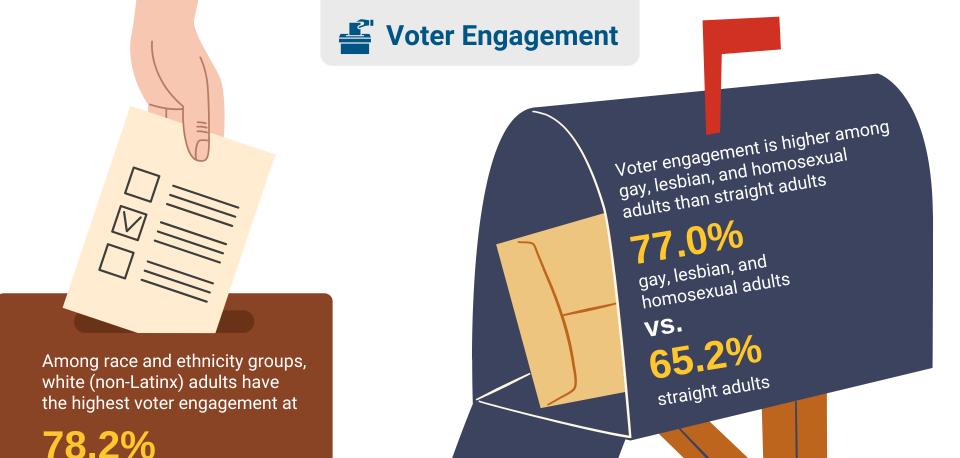
U.S. citizen adults in California report being either always or frequently engaged in national, state, and local elections Rates of voter engagement increase with age. Percent of U.S. citizen adults in California that report being either always or frequently engaged in national, state, and local elections:



(Differences between all age groups are statistically significant)













Voter Engagement and Issues Impacting Health

Those with characteristics associated with poorer health outcomes or adversely impacted by some election issues are sometimes also less likely to be engaged in national, state, and local elections.

Percent of U.S. citizen adults in California that report being either always or frequently engaged in national, state, and local elections:

By birth control usage

61.3%*

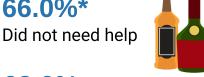
Uses birth control to prevent pregnancy (sexually active females)

38.8%

Does not use birth control to prevent pregnancy (sexually active females)

By help needed for emotional/mental health problems or use of alcohol/drugs

66.0%*



62.0%

By serious psychological distress (SPD) in the past year

66.8%* Not likely to have had SPD

53.6%

Likely to have had SPD By access to care

70.8%*

Has a usual place to go when sick or need health advice

45.7%

Does not have a usual place to go when sick or need health advice









Voter Engagement and Issues Impacting Health

Those with characteristics associated with poorer health outcomes or adversely impacted by some election issues are sometimes also less likely to be engaged in national, state, and local elections.

Percent of U.S. citizen adults in California that report being either always or frequently engaged in national, state, and local elections:

By housing stability



65.7%*

Has stable housing



48.8%

Has unstable housing

By federal poverty level (FPL)



71.8%*

Income >200% FPI



47.1%

Income <200% FPL

By food security



50.8%*

Able to afford enough food (Income < 200% FPL)



42.3%

Not able to afford enough food (Income < 200% FPL)







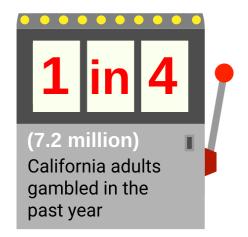












Of those who reported gambling in the past year:

6.7% (488,000)

reported they had symptoms of problem gambling

California adults who reported gambling in the past year:

By gender

28.1%* 21.7%
Men Women

By age

17.6%Young adults ages 18–24 **29.1%***Adults ages 50–64

By veteran status

32.0%* 24.4% Veterans Non-veterans

By race or ethnicity

40.4%*
American Indian and

Alaska Native adults

34.0%*

Black or African American adults

24.8%

White adults

19.9% Asian adults

By employment status

27.5%*
Adults who work full time

19.6% Adults who work part time

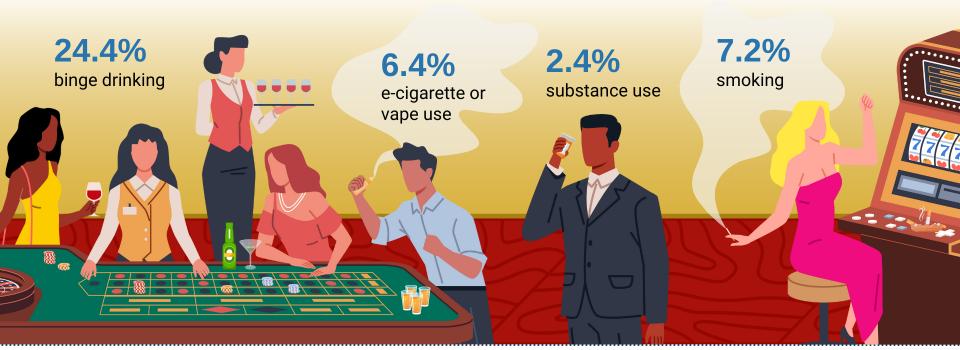
19.0%

Adults who were unemployed but looking for work

^{*}Statistically significantly higher than the associated comparison group Source: 2023 California Health Interview Survey



Adults who reported any gambling in the past year also reported other types of behaviors associated with increased risk of poor health outcomes.



^{*}Rates listed are statistically significantly higher than the rates for adults who did not gamble in the past year. Source: 2023 California Health Interview Survey







Among California adults who gambled in the past 12 months:

1.6% (112,000)

reported that they needed help with living expenses from friends, family members, or public assistance programs because of gambling 3.8% (274,000)

reported that they had kept their friends or family from knowing how much they gambled

4.7% (341,000)

reported feeling restless, irritable, or anxious when trying to quit or cut down on gambling







California adults with symptoms of problem gambling reported experiencing serious psychological distress in the past year:



1 in 4 (24.9%)

gambling adults with symptoms of problem gambling



Nearly

1 in 7 (13.5%)

gambling adults without symptoms of a gambling problem







Gambling adults with problem gambling who saw any health care provider to discuss their mental health or alcohol or drug use in the past year:





32.9%

of adults who kept their family or friends from knowing how much they gamble



27.6%

of adults who became restless, irritable, or anxious when trying to quit or cut down on gambling



18.4%

of adults who sought financial help from family or friends because of their gambling



28.2%

of gambling adults with any symptoms of problem gambling





How to Access CHIS Data





What Are the CHIS Dissemination Aims?

- 1. Protect respondent confidentiality
- 2. Democratize access to data put data into the hands of those who can use it
- 3. Reach a large and diverse audience across divides of technology, skills, and resources



CHIS Dissemination

CHIS DATA

Data Access Center (DAC)

Secure network that holds data and analysis, protecting confidentiality.

Public Use File (PUF)

Available as free download in SAS and STATA format.

AskCHIS

Premier online health data query tool. (Health Data All-Star – 2013)

AskCHIS Neighborhood Edition and AskCHIS NE en Español Granular health data beyond counties (Small Area Estimates).

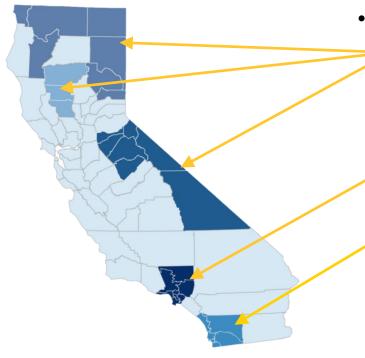
Health Profiles

Reports on CHIS' most requested health topics.

Data user support and



Geographic Sample Design to Produce Direct Estimates for Each Sampling Stratum

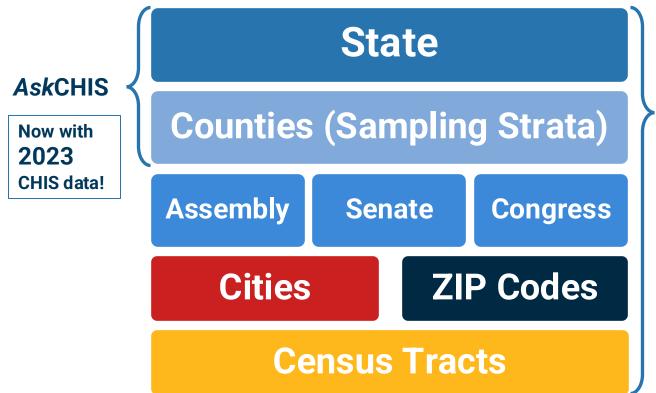


- 56 total geographically defined strata
 - 3 grouped county strata containing the 17 smallest counties (by population)
 - 2 counties with sub-county strata
 - Los Angeles: 8 Service Planning Areas (SPAs)
 - San Diego: 6 Health Regions
 - Remaining 39 counties each form their own individual strata
 - Lower levels of geography require 2 years of data to produce modeled estimates





Data Across Geographies



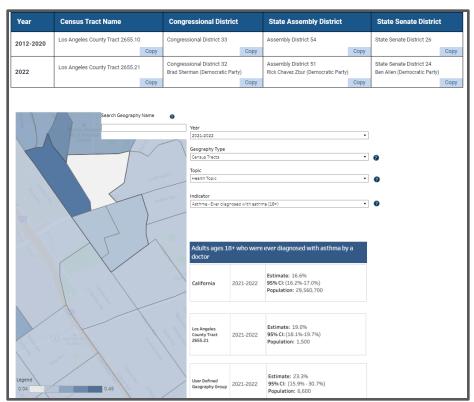
AskCHIS

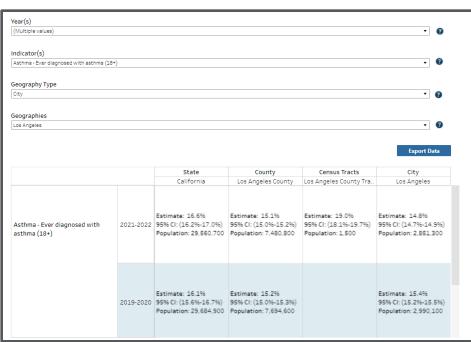
Neighborhood Edition (updated every two years)

Now with 2021 – 2022 CHIS data in a newly designed platform!



Census Tract Estimates in AskCHIS Neighborhood Edition



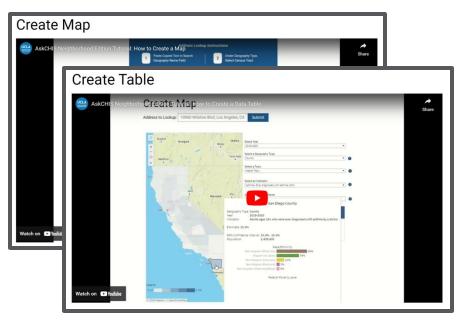




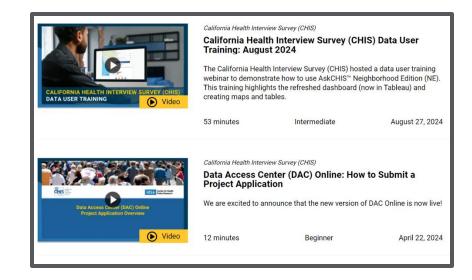


Video Training on CHIS Data Tools

Tutorials within AskCHIS Neighborhood Edition



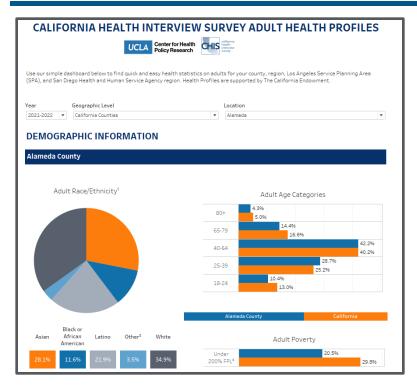
Training Library at https://healthpolicy.ucla.edu/our-work/training







2021-2022 CHIS Adult and Race/Ethnicity Health Profiles



https://healthpolicy.ucla.edu/our-work/health-profiles

- Simple dashboards providing health estimates from the CHIS on various key health topics:
 - By county, region, LA SPA, and San Diego health regions
 - By racial and ethnic group and many Latino and Asian subgroups

Can be downloaded as PDF and CSV formats





Thank You

Special thanks to our data collection partner SSRS, our content partner PHI, the members of our Advisory Board and committees, and the rest of the UCLA CHPR CHIS team:

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Jiangzhou Fu Jacob Rosalez Xinyu Zhang

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Zebry Jiang Flor Vásquez

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Thank You

