

Creating Healthy Communities: Making Healthcare Services Accessible in San Francisco

Key Findings

- Respondents in Excelsior and Chinatown were 4 times more likely to be uninsured, compared to the average San Franciscan
- More than half of Excelsior respondents, and almost $\frac{3}{4}$ of Chinatown respondents, depend on government/publicly funded insurance
- Proximity to home, insurance coverage, and language and culture all play important roles in how residents choose their particular healthcare provider
- Many residents in Excelsior and Chinatown rely on public transportation to access their healthcare provider
- Roughly 1 in every 4 Excelsior residents and 1 in every 7 Chinatown residents regularly spends 60 minutes or more traveling to see their health provider

Residents from all neighborhoods of San Francisco deserve to have equitable access to healthcare. The answer to providing quality healthcare to all San Franciscans is not just making sure these services exist in our city, but in making sure all San Franciscans can access them.

Low-income communities of color, such as those in the Excelsior and Chinatown, face significant barriers to accessing healthcare services because of lower rates of insurance, higher dependence on public forms of insurance, and a reliance on public transit as a mode of accessing healthcare. These factors are also more likely to be impacted by government budget deficits, and result in disproportionate negative impacts to communities reliant on public services. In addition, communities in Southeast San Francisco like the Excelsior face an additional barrier to accessing services because providers are located farther from the community, requiring longer travel times. To promote truly equitable healthcare, policymakers and healthcare providers should take these factors into account when developing and planning healthcare services in San Francisco.

When deciding priorities for improving existing healthcare services and developing new services and facilities, policymakers and healthcare providers should:

- Prioritize the needs of communities who have less providers located in their neighborhoods by incentivizing the development of health care facilities that serve historically underserved and uninsured populations, including low-income, immigrant, and people of color communities
- Prioritize the needs of those who are uninsured or rely on publicly funded insurance, such as ensuring all healthcare providers serve a minimum percentage of Medi-Cal or Healthy SF patients and meet or exceed the average state levels of charity care
- Ensure health services are easily accessible by public transportation, including that transit stops are close to provider offices, that there is frequent service and several lines of service near the providers' office, and efforts are made to address affordability of public transit
- Increase the availability of interpretation services for limited English patients, particularly for common languages spoken in San Francisco (such as Chinese, Spanish, Tagalog)
- Address cultural barriers by hiring providers and staff from the communities that they are serving and/or speak the languages of communities served, and develop appropriate outreach and service programs

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Background & Methodology

Number of people surveyed:

800+

Summary of Results

In Spring 2011, the Chinese Progressive Association (CPA)'s youth leaders developed a community survey to identify and conduct an assessment of people's needs and access of health care services in San Francisco, particularly in Excelsior and Chinatown. Leaders chose to survey the Excelsior because of the large population of working class families and a lack of health providers in the Southeast compared to the Northeast¹, and Chinatown because of CPA's existing work in the neighborhood as well as the language, cultural, and generational barriers prevalent in the community.

Between April and August 2011, CPA youth leaders developed the survey questions and 70 youth members from CPA and People Organizing to Demand Environmental & Economic Rights (PODER) were trained on how to administer the survey. Members conducted surveys in English, Chinese and Spanish in the Excelsior and Chinatown neighborhoods. Between June and August 2011, members administered the survey to over 800 people. Youth leaders used a convenience sampling method and approached potential youth (ages 13-17) and adults (ages 18+) in the following locations: in the Excelsior neighborhood along Mission Street from Silver to Acton Streets; along Geneva avenue from Naples Streets to the Balboa Bart Station; and in Chinatown along Stockton Street from Vallejo to Sacramento Streets.

Youth members entered the survey data into Excel and staff tabulated survey findings to provide descriptive survey statistics. After analyzing survey results, members and staff identified the different community health needs of the Excelsior and Chinatown neighborhoods and developed recommendations to address those needs.

Demographics

Of the total people surveyed, 49% (395) live in the Excelsior (zipcode 94112); and 12% (102) live in Chinatown (zipcodes 94109, 94108, and 94133). Due to the small number of people surveyed in zipcodes outside of these neighborhoods (less than 50 per zip code), the following summary reports only on the surveys from Excelsior and Chinatown residents.

Of the total people surveyed, 10% were youth (ages 13-17), 69% were adults (ages 18-64), and 21% were seniors (age 65+). Of the total people surveyed, 58.3% identified as Asian, 42% identified as Chinese, 20.4% identified as Latino/Latina, 10.3% identified as Caucasian, 6.3% identified as African American, 3.2% identified as Mixed Ethnicity, and 1.6% identified as other.

Health Insurance Coverage

Respondents in Excelsior and Chinatown were 4 times more likely to be uninsured, compared to the average San Franciscan

- 16.3% of respondents living in the Excelsior (zip code 94112) are uninsured², which is significantly higher compared to 3.5% of San Franciscans who are uninsured.³
- 21.4% of adults surveyed living in the Excelsior (age 18-64) are uninsured.
- 15.3% of respondents living in Chinatown are uninsured.
- 17.3% of all survey respondents are uninsured.

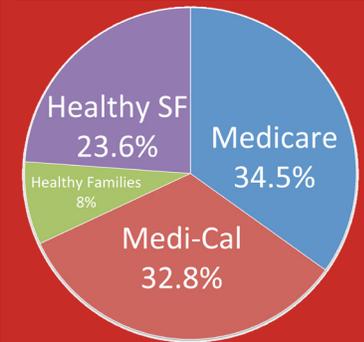
More than 1/2 of Excelsior respondents, and almost 3/4 of Chinatown respondents, depend on government/publicly funded insurance, compared to roughly 1/4 of all San Franciscans.

- 55.1% of survey respondents living in the Excelsior rely on government/publicly funded health insurance.
- 74.4% of survey respondents living in Chinatown rely on government/publicly funded health insurance.
- 61.4% of all survey respondents rely on government/publicly funded health insurance.
- 27.1% of San Franciscans rely on government/publicly funded health insurance.⁴
 - Medicare & Medicaid 5.7%
 - Medicare & Others 8.1%
 - Medicare only 1.5%
 - Medicaid 10.2%
 - Healthy Families/CHIP 0.6%
 - Other public 1%

Survey respondents' who have government/publicly funded insurance by type:

	Excelsior Respondents	Chinatown Respondents	All Survey Respondents
Medicare	34.5%	37.5%	32.6%
Medi-Cal	32.8%	37.5%	36.9%
Healthy Families	8%	6.3%	9.6%
Healthy SF	23.6%	18.5%	19.7%

Excelsior Respondents who rely on government/publicly funded health insurance



Location & Transportation

Our survey results show that proximity to home, insurance coverage, and language and culture all play important roles in how respondents decide to choose their particular healthcare provider.

In the Excelsior, which has less healthcare providers located in the neighborhood than Chinatown, insurance coverage was the primary deciding factor, while in Chinatown, proximity to home was the primary deciding factor. In addition, seniors who may have more limited mobility cited proximity to home as the primary factor for choosing a particular provider.

Survey respondents' top three reasons for choosing their particular healthcare provider:

	Excelsior Respondents	Chinatown Respondents	All Senior Respondents	All Survey Respondents
Proximity to home	32.3%	58.7%	46.8%	38.5%
Familiarity of language and culture	24.5%	41.3%	36.3%	26.2%
Insurance Coverage	42.5%	30.4%	31.5%	38.6%

Many residents in Excelsior and Chinatown rely on public transportation to access their healthcare provider.

Both communities cited public transportation as one of their top two modes of transit, but Excelsior respondents also use personal vehicles, while Chinatown respondents walk more than drive. This may be due to the proximity of healthcare providers in each neighborhood.

In San Francisco overall, public transportation and walking/riding a bike are the primary ways people get to the doctor's office.⁵

- Public transportation (77.8%)
- Walk or ride bike (15.7%)
- Personal vehicle as driver or passenger(2.8%)
- Paratransit/Trans provided by HHS (2.5%)
- Taxicab/Other (1.3%)

Survey respondents' primary ways to access their healthcare provider for non-emergency visits:

	Excelsior Respondents	Chinatown Respondents	All Survey Respondents
Public Transportation	63.7%	36.1%	60.6%
Personal Vehicle	40.9%	13.4%	34.3%
Ride from Relative/Friend	4%	3.1%	5.1%
Walking	2.7%%	54.6%	12.8%

Roughly 1 in every 4 Excelsior residents, and 1 in every 7 Chinatown residents regularly spends 60 minutes or more traveling to see their health provider.

- 25.4% of Excelsior respondents traveled for 60 minutes or more to visit their healthcare provider.
- 13.9% of Chinatown respondents traveled for 60 minutes or more to visit their healthcare provider.
- 23.9% of all survey respondents traveled for 60 minutes or more to visit their healthcare provider.

¹ Health Care Services Master Plan Taskforce data documents, "Health Care Facilities and Transit in San Francisco" and mates, 2005-2009; and California Office of Statewide Health and Planning, "2011 Proportion of Population Living at or Below 200% of the Census Poverty Threshold & Health Care Facilities", San Francisco Department of Public Health

² Uninsured is defined as not having private health insurance, nor being enrolled in government/publicly funded insurance including Medicare, Medi-Cal, Healthy Families, or Healthy San Francisco

³ Health Care Services Master Plan Taskforce data documents, "Your Neighborhood At a Glance," and Health Matters in San Francisco, www.healthmattersinsf.org

⁴ "California Health Interview Survey, 2009 "Type of current health insurance coverage - all ages compared by Age groups - 4 categorical levels". www.chis.ucla.edu/main/default.asp

⁵ "California Health Interview Survey, 2009 "Usual type of transportation to get to the doctor's office compared by Type of current health insurance coverage - all ages". www.chis.ucla.edu/main/default.asp

Founded in 1972, the Chinese Progressive Association (CPA) educates, organizes and empowers the low income and working class immigrant Chinese community in San Francisco to demand better living and working conditions and justice for all people. In 2009, youth leaders at Chinese Progressive Association formed the Youth Movement of Justice Organizing (Youth MOJO) program to empower youth to take leadership in organizing their communities for positive change.

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Endnotes

About

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