

## **Uninsurance Rate Climbed to Nearly One in Four California Women in 2009, Public Health Institute Reports**

OAKLAND, CA (December 19, 2010) – The proportion of nonelderly adult California women with no health insurance coverage grew to nearly one in four between 2007 and 2009, a period that coincided with the national economic recession, a [new policy brief](#) from the Public Health Institute (PHI) reports.

The rate of women uninsured all or part of the year increased from 21 percent in 2007 to 24 percent in 2009 as women lost access to employment-based coverage, according to the authors, Roberta Wyn, PhD, and Elaine Zahnd, PhD. Altogether, approximately 2.8 million California women between the ages of 18 and 64 had no insurance for all or part of 2009.

“Clearly, the implementation of the Affordable Care Act is coming at a crucial time for California women,” said Wyn, the brief’s lead author who is a PHI consultant and an affiliate of the University of California at Los Angeles Center for Health Policy Research. “These are challenging times, and it is important to move forward in expanding coverage and access.”

The policy brief, “Almost One-Quarter of California Nonelderly Women Uninsured in 2009,” draws on data from the 2009 California Health Interview Survey (CHIS 2009), the largest state population-based health survey in the U.S.

Other key findings include:

### *Young and poor women bear the largest burden*

- The lack of insurance was highest among young California women: One-third (34 percent) of women ages 18 to 29 had no coverage for all or part of 2009. Only 37 percent of these young women had employment-based insurance, the lowest level across all age groups.
- Nearly one-half (48 percent) of women with the lowest family income were uninsured for all or part of 2009. In contrast, only 8 percent of women with high family incomes were uninsured during the same period.

### *Other disparities among women*

- Sixty-six percent of white women had employment-based insurance for all of 2009 compared to 38 percent of Latinas and 49 percent of African American women.
- Almost one-third of single mothers (32 percent) and of single women without children (31 percent) lacked insurance in 2009. Married women with and without children had significantly lower rates (14 percent to 20 percent) of uninsurance.
- The uninsured rate was high for women not working who were seeking work (46 percent) compared to women who were working full time (14 percent).

*Delayed or foregone care and safety net support*

- Thirty-one percent of uninsured women had no doctor visit in a one-year period.
- Twenty-eight percent of uninsured women reported they delayed or went without care they thought they needed in the past year.
- The state's safety net of health providers was a regular source of care for 23 percent of all nonelderly women and played an important role for many women. Forty-one percent of women on Medi-Cal and 36 percent who had no coverage at all sought care through safety net providers.

*Employer-sponsored insurance declines*

- Employment-based coverage dropped among nonelderly adult women from 56 percent in 2007 to 54 percent in 2009.

“This policy brief is a snapshot of the women who don't have health insurance coverage in California during an economic downturn and the potential repercussions to their health,” said Mary A. Pittman, DrPH, president and CEO of PHI. “Unfortunately, they are the women who already had inequitable access to health care: those who are poor, single, young or ethnic minorities.”

PHI staff work on the California Health Interview Survey, which is conducted by the UCLA Center for Health Policy Research in collaboration with the California Departments of Public Health and Health Care Services.

The policy brief was funded by a grant from The California Wellness Foundation. It is available at [http://www.phi.org/pdf-library/2011\\_12\\_16WomensInsurance.pdf](http://www.phi.org/pdf-library/2011_12_16WomensInsurance.pdf).

**About the Public Health Institute**

PHI, an independent nonprofit organization based in Oakland, California, is dedicated to promoting health, well-being and quality of life for people throughout California, across the nation and around the world. PHI's primary methods for achieving these goals include: sharing evidence developed through quality research and evaluation; providing training and technical assistance; and promoting successful prevention strategies to policymakers, communities and individuals. For more information, visit [www.phi.org](http://www.phi.org).

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