

# Asian-American and Pacific Islander Experiences in Texas

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# Annual Texas Health Tracking Survey – 2023



EPISCOPAL HEALTH  
FOUNDATION



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## Executive Summary

The population of Asian Americans in Texas has grown at a faster rate than any other race or ethnic group over the past 20 years and state officials project this group to continue to outpace growth of any other race or ethnic group over the next 30 years.<sup>1</sup> Moreover, first Asian American Pacific Islander (AAPI) caucus was introduced to the Texas legislature in 2023 to promote issues and policy specifically for the AAPI population in the state. Within this changing landscape, the Episcopal Health Foundation and SSRS conducted the *Texas Health Tracking Survey* with a specific focus on understanding the health care priorities of the AAPI adult population in the state including perspectives on health policy, experiences accessing and affording health care, and perspectives on non-medical drivers of health (NMDH).

Results from the survey reveal high levels of support for Medicaid and its expansion under the affordable care act among AAPI residents. Two-thirds support expanding Medicaid to cover more low-income people in the state (64%). Additionally, just over half say the state is not doing enough to ensure its most vulnerable residents can get the health care they need including low income adults (55%), children (54%), pregnant women (54%), and immigrants (52%).

Affordability of health care is an issue for four in 10 AAPI residents who say it's somewhat (24%) or very difficult (17%) to afford health care for them and their family. One fifth also say they have had problems paying medical bills in the previous 12 months (22%). Additionally, almost half have skipped or postponed some sort of health care due to the cost in the previous 12 months (48%).

Previous research shows that non-medical factors can impact individuals' overall health. For AAPI residents in Texas, two major non-medical drivers of health (NMDH) emerge as major issues in this survey: affordable housing and public transportation.

Sixty-eight percent say their community does not have enough public transportation. Overall, a third of AAPI adults say it is difficult to travel to at least one type of medical facility or other needed resource (34%) including a hospital (21%), the places they usually go for health care (19%), parks and recreation

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<sup>1</sup>

[https://demographics.texas.gov/Resources/publications/2019/20190128\\_PopProjectionsBrief.pdf](https://demographics.texas.gov/Resources/publications/2019/20190128_PopProjectionsBrief.pdf)

facilities (14%), clinics (12%), pharmacies (11%), grocery stores and places for healthy food (5%). Additionally, nearly all AAPI residents view rising housing costs in the state as a problem (98%) with 83 percent saying it is a major problem.

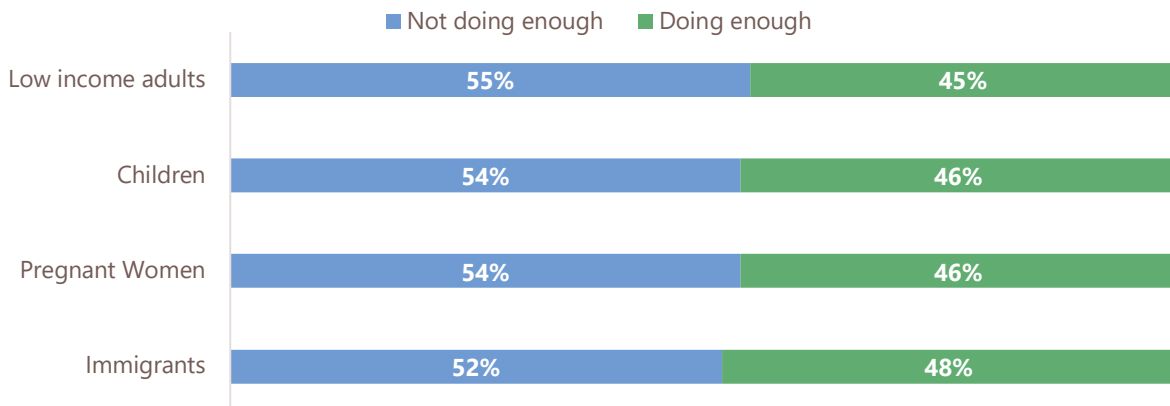
## Medicaid and the Role of State Government in Health Care

Texas is one of only ten states that has not expanded Medicaid coverage to include more low-income adults under the 2010 Affordable Care Act. AAPI residents have relatively favorable views of the program and its ability to help low-income people. About a quarter have a very favorable opinion of the program (26%) and 53 percent have a somewhat favorable opinion.

Moreover, 55 percent of AAPI say the state is not doing enough to ensure low-income adults can get the health care they need (chart 1). A similar amount also think the state is not doing enough for children (54%), pregnant women (54%) and immigrants (52%).

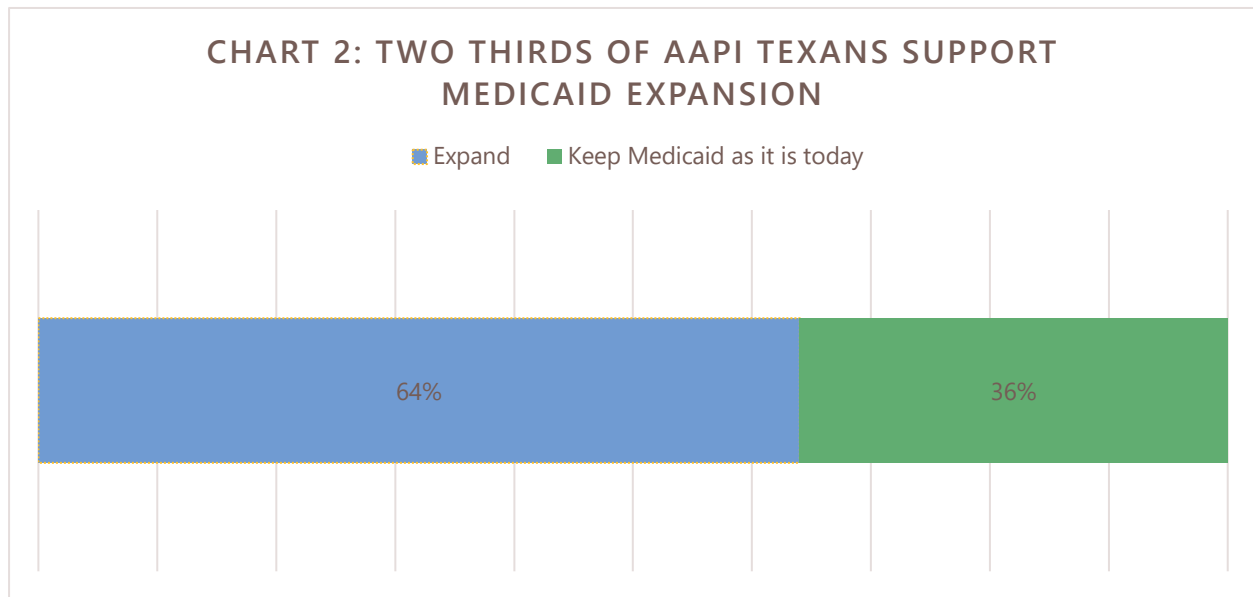
**CHART 1: MOST AAPI RESIDENTS THINK THE STATE IS NOT DOING ENOUGH TO ENSURE MOST VULNERABLE GROUP CAN GET NEEDED HEALTH CARE**

Q: Do you think the Texas state government is doing ENOUGH or NOT doing enough to make sure each of the following can get the health



## Support for Medicaid Expansion

Support for expanding Medicaid to cover more low-income individuals is also relatively high among AAPI Texans with just under two-thirds in support (64%) and 36 percent wanting to keep the program as it is today (chart 2).



## Health Care Access and Affordability

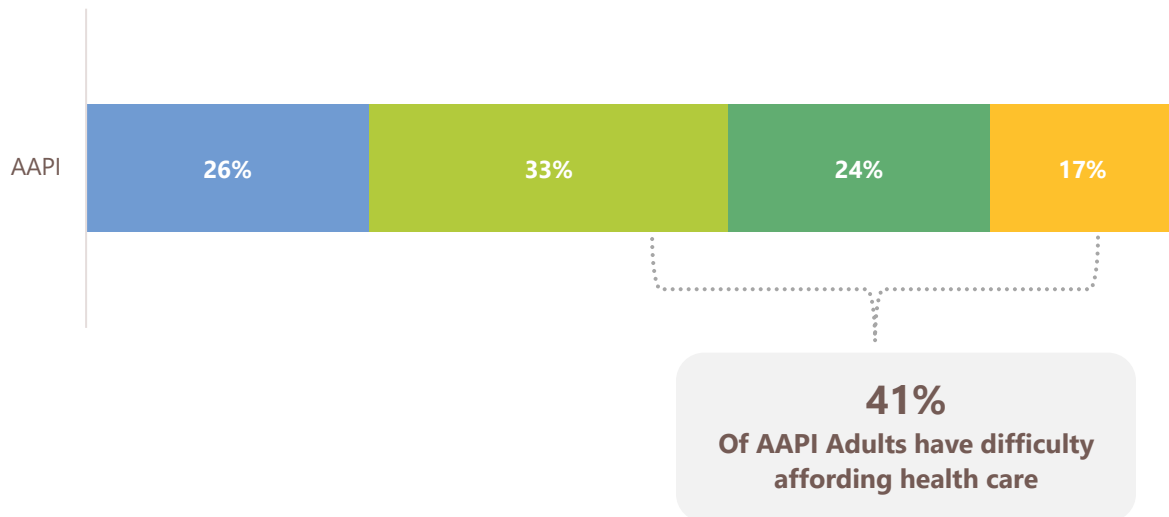
### Difficulty Affording and Accessing Health Care

Four in ten AAPI adults in Texas (41%) have difficulty affording health care with 17 percent saying it is very difficult (chart 3).

### CHART 3: FOUR IN TEN AAPI RESIDENTS STRUGGLE AFFORDING HEALTHCARE

Q: In general, how easy or difficult is it for you and your family to afford health care?

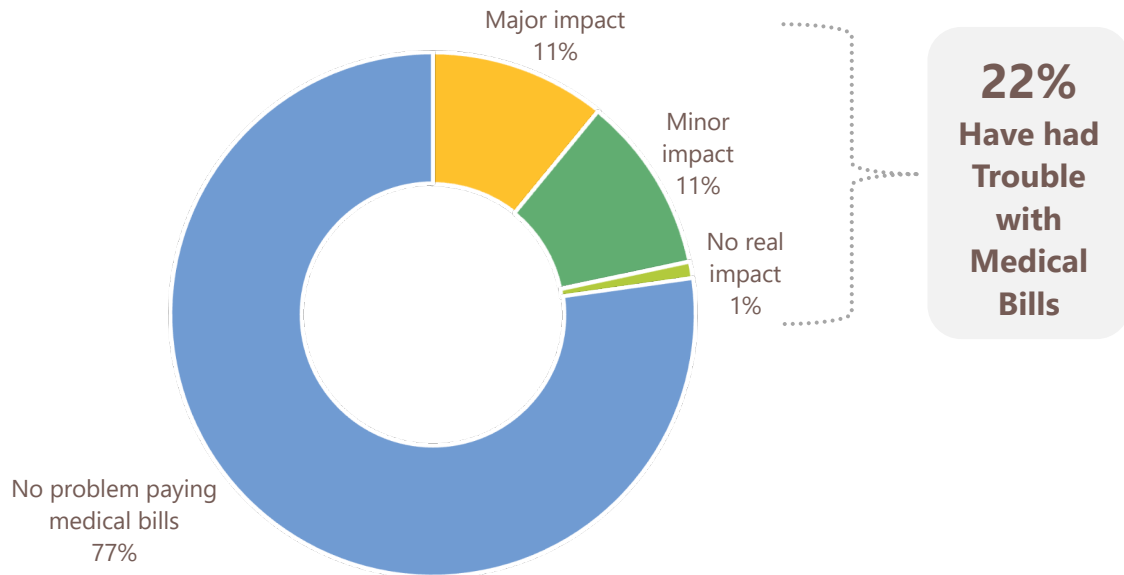
■ Very easy ■ Somewhat easy ■ Somewhat difficult ■ Very difficult



Additionally, a fifth of AAPI adults have had problems paying medical bills in the past 12 months and one in ten say this problem has had a major impact on them and their household (chart 4).

#### CHART 4: ONE IN FIVE HAVE DIFFICULTY PAYING MEDICAL BILLS

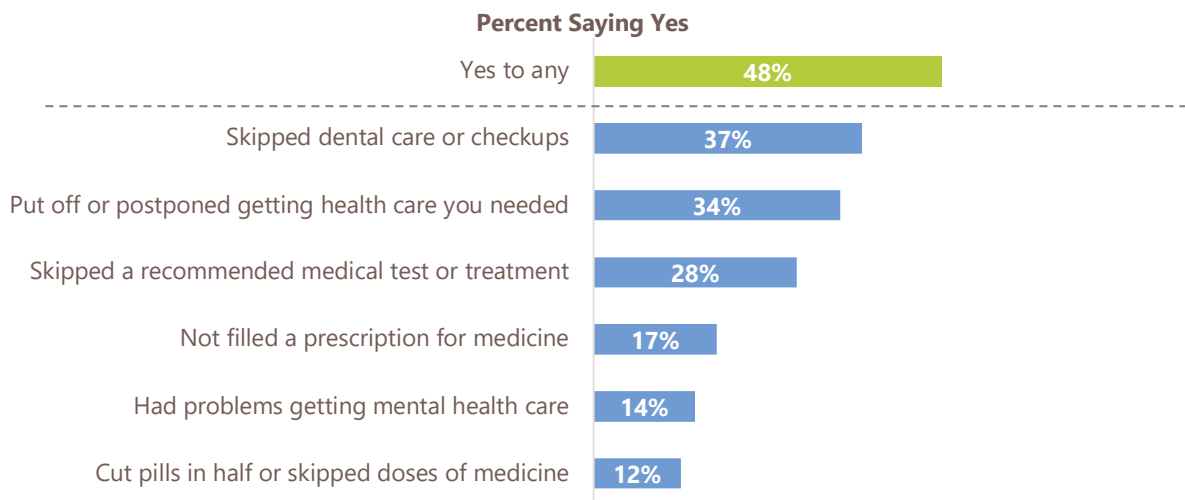
Q: In the past 12 months, did you or anyone in your household have problems paying or an inability to pay any medical bills... How much of an impact have these medical bills had on you and your fami



The high costs of medical care leads many AAPI residents to skip or postpone getting the healthcare they need. More than a third say they have skipped dental care or check-ups in the past 12 months due to the cost (37%), put off getting health care they need (34%), or skipped a recommended medical test or treatment (35%) due to the cost. Almost a fifth say they have skipped getting a prescription filled due to the cost (17%). Finally, more than one in ten say they have cut pills in half or skipped doses (12%) or had problems getting mental health care (14%) because of the cost. Overall, almost half of Texas AAPI adults have skipped or postponed some sort of health care because of the cost (48%) in the past 12 months (chart 5).

## CHART 5: NEARLY HALF OF AAPI RESIDENTS HAVE SKIPPED OR POSTPONED CARE DUE TO COST IN PAST YEAR

Q: In the past 12 months, have you or another family member living in your household (ITEM) because of the COST?



Lacking a primary care provider or usual source of care as well as being uninsured may have major impacts on one's health status. One in ten AAPI adults in Texas do not have a primary care provider or usual place they go for health care (10%). A similar number of AAPI adults under age 65 are uninsured (10%).

## Non-Medical Drivers of Health

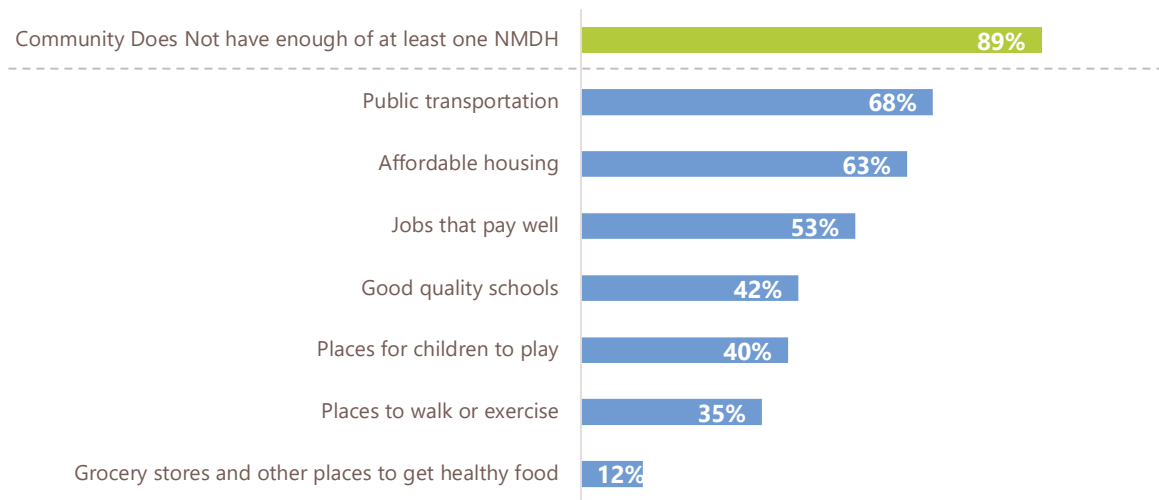
Growing evidence suggests that the conditions under which people live affect a wide range of health outcomes. Addressing deficiencies in these areas may improve health outcomes for individuals and communities. Nine in ten AAPI adults think it is at least somewhat important for the Texas Medicaid Program to address these Non-Medical Drivers of Health (NMDH) for those enrolled in the program (92%) with 34 percent saying it is extremely important.

Two important NMDH for AAPI residents are affordable housing and public transportation. About two-thirds say their community does not have enough public transportation (68%) or affordable housing (63%). Additionally, about

half say their community does not have enough well-paying jobs (53%). Four in ten say their community lacks good quality schools (42%) and places for children to play (40%) (chart 6).

## CHART 6: THE VAST MAJORITY OF AAPI ADULTS LIVE IN COMMUNITIES WITHOUT ENOUGH NON-MEDICAL RESOURCES THAT IMPACT HEALTH

Percent Who Say Their Community Does Not Have Enough...

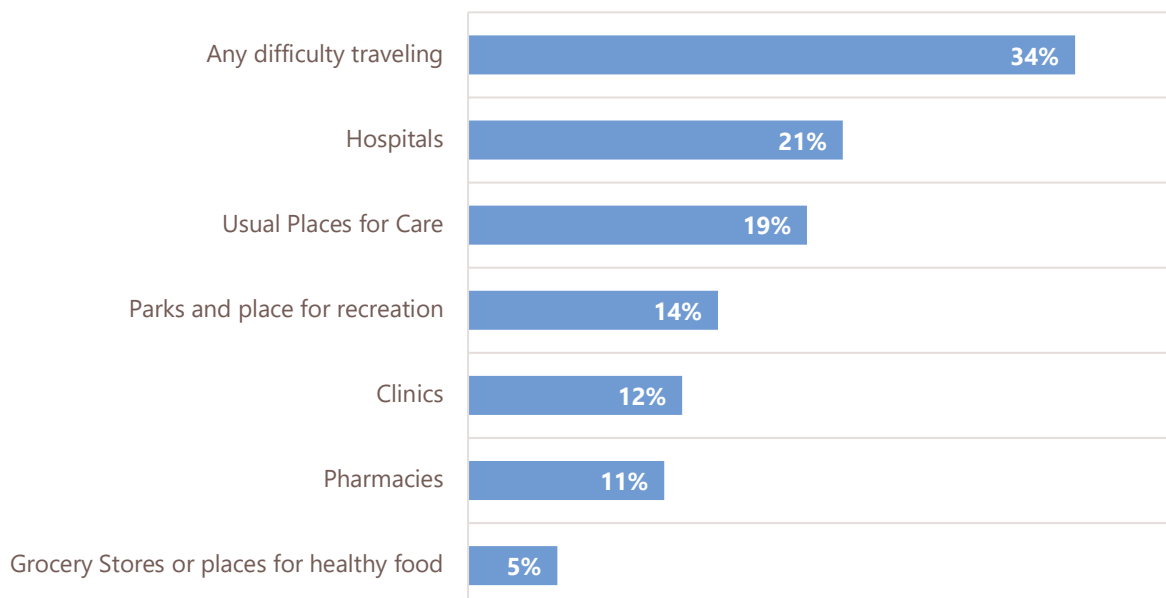


## Transportation

Hand in hand with a majority of AAPI saying their communities lack enough public transportation (68%) is difficulty affording gasoline and transportation costs. One quarter of AAPI residents find it difficult for their family to afford gasoline and transportation costs (24%).

A lack of affordable or easily accessible transportation can have impacts on individuals' ability to get needed health care. Overall, a third of AAPI adults say it is difficult to travel to at least one type of medical facility or other needed resource (34%) including a hospital (21%), the places they usually go for health care (19%), parks and recreation facilities (14%), clinics (12%), pharmacies (11%), grocery stores and places for healthy food (5%) (chart 7).

**CHART 7: A THIRD OF AAPI RESIDENTS FACE DIFFICULTIES TRAVELING TO NEEDED RESOURCES**



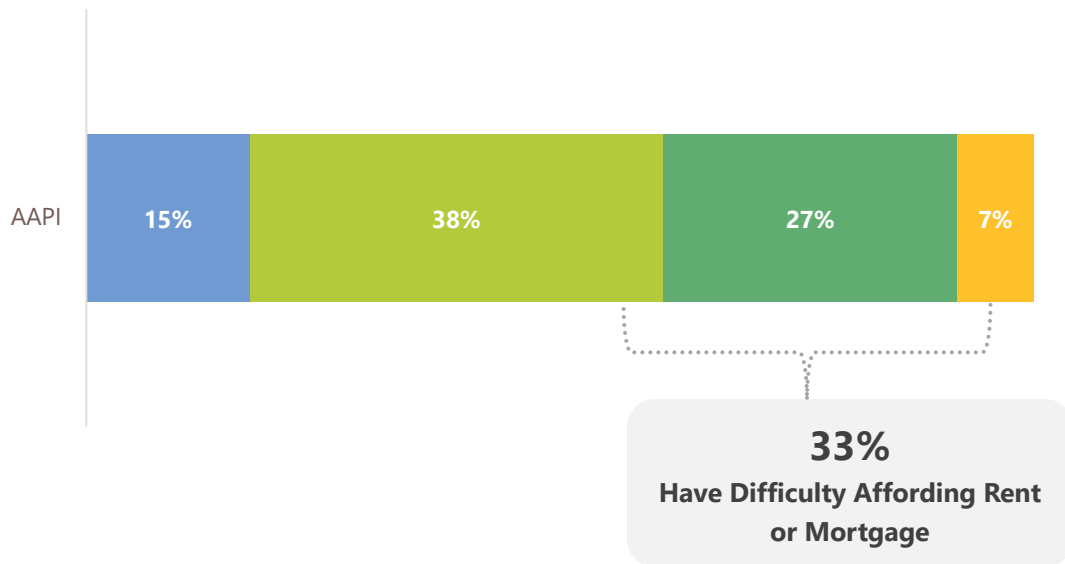
## Housing

Nearly all AAPI residents view rising housing costs as a problem (98%) in Texas with 83 percent saying it is a major problem. Moreover, a third of AAPI residents say it is at least somewhat difficult to afford their rent or mortgage (33%) (chart 8).

**CHART 8: A THIRD OF AAPI RESIDENTS FIND IT SOMEWHAT OR VERY TO AFFORD RENT OR MORTGAGE**

Q: In general, how easy or difficult is it for you and your family to afford your rent or mortgage?

■ Very easy ■ Somewhat easy ■ Somewhat difficult ■ Very difficult

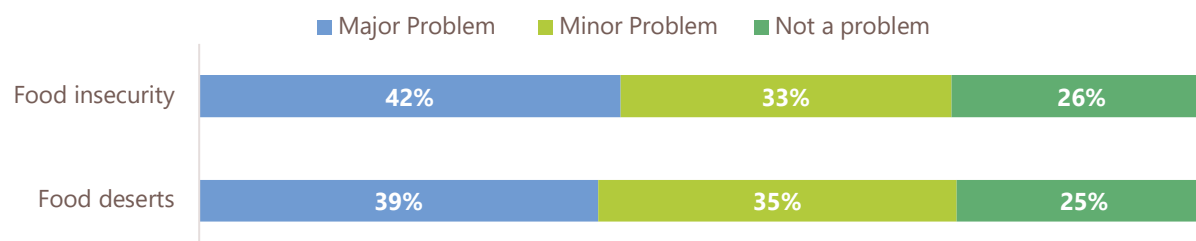


## Food Deserts and Food Insecurity

Three quarters of AAPI Texans view food deserts (74%) and food insecurity (74%) as problems in the state. Food deserts, or areas with little access to fresh and healthy food, are viewed as a major problem for 39 percent of adults. A similar number (35%) say food deserts are a minor problem. For food insecurity, an inability to consistently access and afford adequate food, four in ten residents view this as a major problem (42%). Another third say food insecurity is a minor problem (33%) (chart 9).

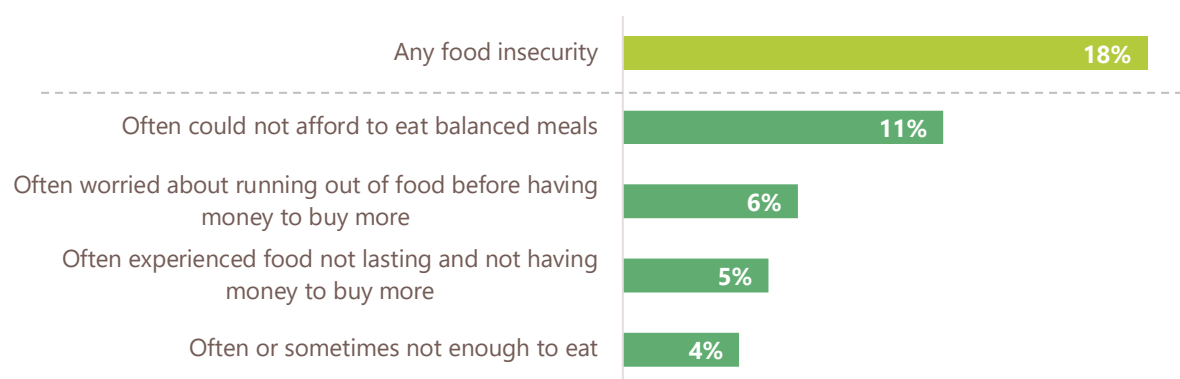
### CHART 9: THREE QUARTERS OF AAPI TEXANS VIEW FOOD INSECURITY AND FOOD DESERTS AS PROBLEMS IN THE STATE

Q: In general, how much of a problem do you think each of the following is in Texas today?



Nearly two in ten AAPI residents say that over the previous 12 months their household experienced some form of food insecurity meaning that they (1) sometimes or often did not have enough to eat, (2) often worried whether food would run out before they had money to buy more (3) often experienced that food did not last and they did not have money to buy more, or, (4) could not afford to eat balanced meals (chart 10).

### CHART 10: THREE IN TEN TEXANS EXPERIENCED AT LEAST ONE FOOD INSECURITY ISSUE IN PREVIOUS 12 MONTHS



## About the Survey

SSRS conducted the *2023 Texas Health Tracking Survey* on behalf of the Episcopal Health Foundation (EHF) from October 18 through December 19, 2023. Similar studies have been fielded on behalf of the EHF since 2018. The 2023 survey was conducted online and by telephone with a representative sample of 1,956 Texas adults (age 18 or older) including 301 who identify as Asian American or Native Hawaiian/Pacific Islander. Interviews were administered in English ( $n=1,843$ ), Spanish ( $n=87$ ), Chinese ( $n=19$ ) and Vietnamese ( $n=7$ ). The sample includes 938 Texas adults reached through the SSRS Opinion Panel<sup>2</sup> online ( $n=875$ ) and by phone ( $n=63$ ) as well as adult Texas residents reached through an address-based sample (ABS) and completed the survey online ( $n=937$ ) or by phone ( $n=81$ ).

Weighting is generally used in survey analysis to compensate for sample designs and patterns of non-response that might bias results. The survey data are weighted to match the sample demographics to estimates for the Texas adult population. The margin of sampling error for this study is +/- 3 percentage points for results based on the total sample.

## About EHF

The [Episcopal Health Foundation \(EHF\)](#) is committed to transforming the health of our communities by going beyond the doctor's office. By providing millions of dollars in grants, working with congregations and community partners, and providing important research, we're supporting solutions that address the underlying causes of poor health in Texas. EHF was established in 2013, is based in Houston, and has more than \$1.2 billion in estimated assets. **#HealthNotJustHealthcare**

## About SSRS

SSRS is a full-service public opinion and survey research firm with a dedicated team of critical thinkers. We have genuine enthusiasm for our work and a shared goal to connect people through research. SSRS solutions include groundbreaking approaches fit for purpose: the SSRS Opinion Panel and Omnibus, Encipher, additional online solutions, and custom research

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<sup>2</sup> <https://ssrs.com/ssrs-solutions/ssrs-opinion-panel/>



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