# Asian-American and Pacific Islander Experiences in Texas

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### **Executive Summary**

The population of Asian Americans in Texas continues to grow. For the second year in a row, 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).

This report details the findings for the AAPI adult population in Texas and notes areas where there are statistically significant differences between this group and the overall Texas adult population.

Affordability of health care is an issue for nearly half of AAPI residents who say it's somewhat (31%) or very difficult (15%) to afford health care for them and their family. Over a fifth also say they have had problems paying medical bills in the previous 12 months (22%). Additionally, 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. Similar to the 2023 survey, affordable housing and transportation are still major issues for AAPI residents. Sixty-one percent say their community does not have enough public transportation. Overall, three in ten AAPI adults say it is difficult to travel to at least one type of medical facility or other needed resource (31%) including a hospital (14%), the places they usually go for health care (13%), parks and recreation facilities (16%), clinics (15%), pharmacies (18%), as well as grocery stores and places for healthy food (16%). Additionally, nearly all AAPI residents view rising housing costs in the state as a problem (97%) with 75 percent saying it is a major problem.

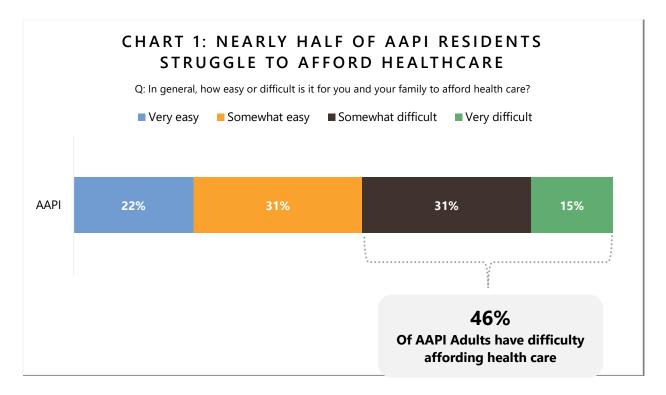
Results from the survey also reveal 69% say the state is not doing enough to ensure its most vulnerable residents can get the health care they need including low income adults (69%). Majorities also think the state is not doing enough to meet the health care needs of children (50%), pregnant women (64%), and immigrants (51%).



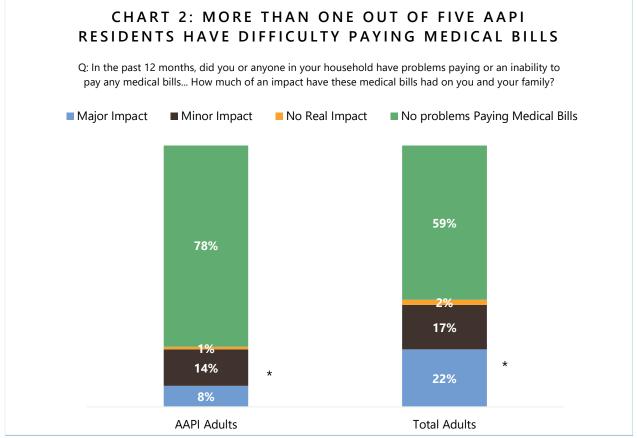
## **Health Care Access and Affordability**

#### **Difficulty Affording and Accessing Health Care**

Results from the survey find that nearly half of AAPI residents have trouble affording health care (46%) with 15 percent saying it is very difficult (chart 1). This is on par with the proportion of Texas adults overall who say it is difficult to afford health care (46%). However, just 22 percent of AAPI adults have had problems paying medical bills in the past 12 months and 8 percent say this problem has had a major impact on them and their household (chart 2). In comparison, 41 percent of Texas adults have had problems paying medical bills and 22 percent say it has had a major impact on them and their household.



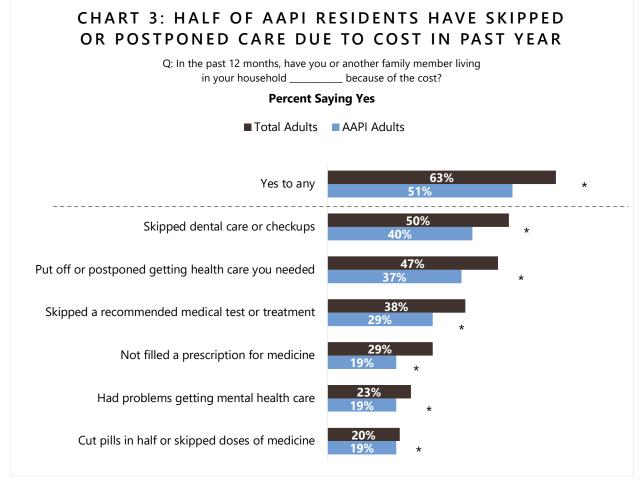
## SSI'S redefining research



\* statistically significant difference at p<.05

The high costs of medical care leads many to skip or postpone getting the healthcare they need. About four in ten AAPI residents say they have skipped dental care or check-ups in the past 12 months due to the cost (40%) or put off getting health care they need (37%). Three in ten have skipped a recommended medical test or treatment (29%) due to the cost. Almost a fifth say they have skipped getting a prescription filled due to the cost (19%). Finally, almost one fifth say they have cut pills in half or skipped doses (19%) or had problems getting mental health care (19%) because of the cost. Overall, almost half of Texas AAPI adults have skipped or postponed some sort of health care because of the cost (51%) in the past 12 months (chart 3). In comparison, 63 percent of Texas adults overall say they have skipped or postponed some form of health care because of the cost.





\* statistically significant difference at p<.05

Lacking a primary care provider or usual source of care as well as being uninsured may have major impacts on one's health status. Nearly one in ten AAPI adults in Texas do not have a primary care provider or usual place they go for health care (8%). Additionally, nearly one in five AAPI adults under age 65 are uninsured (19%).

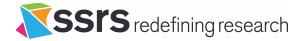


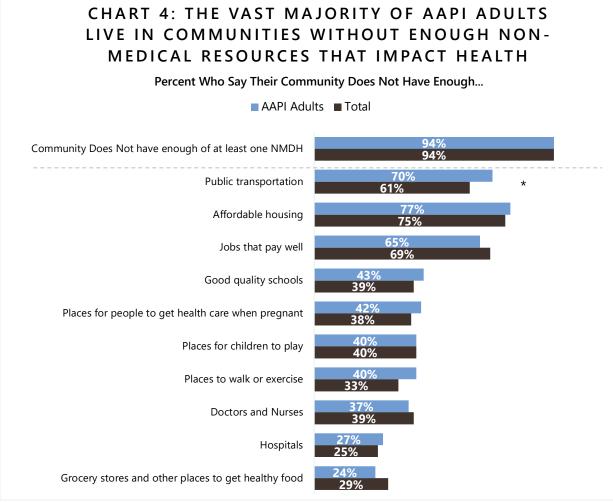
## **Non-Medical Drivers of Health**

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 out of ten AAPI adults think it is important for the Texas Medicaid Program to address these Non-Medical Drivers of Health (NMDH) for those enrolled in the program (90%) with 28 percent saying it is extremely important.

Two important NMDH for AAPI residents are affordable housing and public transportation. Seventy percent say their community does not have enough public transportation (70%). This is 9 percentage points higher than the share of Texas adults overall who say the same (61%).

The next resource reported by most AAPI residents as lacking in their communities is affordable housing. Over three quarters of AAPI residents (77%) say their community does not have enough affordable housing. Additionally, about two-thirds say their community does not have enough well-paying jobs (65%). Four in ten say their community lacks good quality schools (43%) and places for people to get healthcare when pregnant (42%) (chart 4).



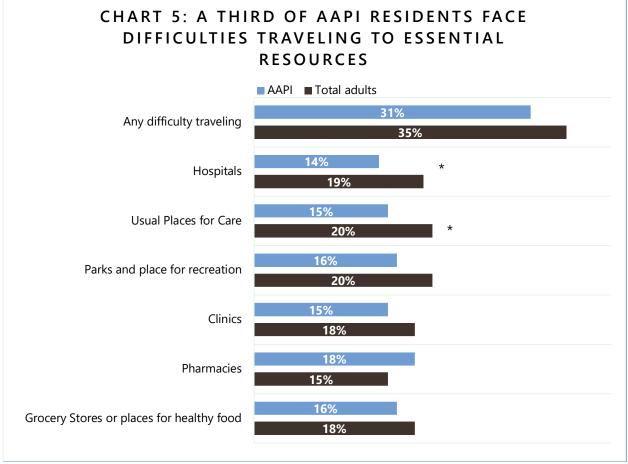


\* statistically significant difference at p<.05

#### **Transportation**

Hand in hand with a majority of AAPI saying their communities lack enough public transportation (70%) is difficulty affording gasoline and transportation costs. One quarter of AAPI residents find it difficult for their family to afford gasoline and transportation costs (25%).

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 (31%) including a hospital (14%), the places they usually go for health care (13%), parks and recreation facilities (16%), clinics (15%), pharmacies (18%), grocery stores and places for healthy food (15%) (chart 5). This is about on par with the share of Texas adults overall who experience these difficulties. However, fewer AAPI adults are likely to say it is difficult to travel to hospitals (14% vs. 19%) and usual places for care (13% vs. 19%).



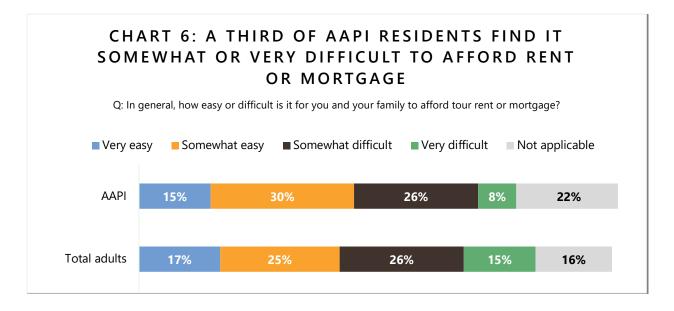
\* statistically significant difference at p<.05

#### Housing

Nearly all AAPI residents view rising housing costs as a problem (97%) in Texas with 75 percent saying it is a major problem. This is in line with the perspectives of Texans overall where 98 percent also view rising housing costs as a problem in the state.

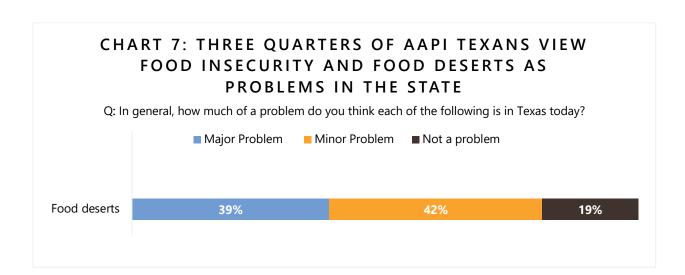
When it comes to affording housing, nearly a third of AAPI residents say it is at least somewhat difficult to afford their rent or mortgage (33%) (chart 6). This is lower than the share of Texas adults overall who note this as a challenge (42%).





#### **Food Deserts**

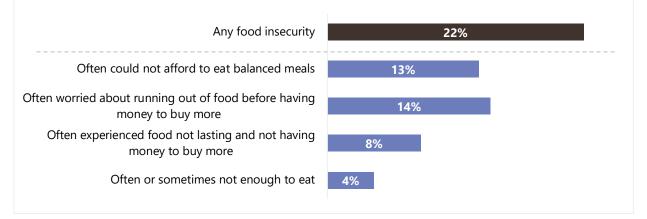
A large majority of AAPI Texans view food deserts or areas with little access to fresh and healthy food, as a problem in the state (81%) with 39 percent saying it is a major problem and 42 percent saying it is a minor problem (chart 7).



More than one in five AAPI residents (22%) 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 8).



#### CHART 8: MORE THAN ONE IN FIVE AAPI TEXANS EXPERIENCED AT LEAST ONE FOOD INSECURITY ISSUE IN PREVIOUS 12 MONTHS

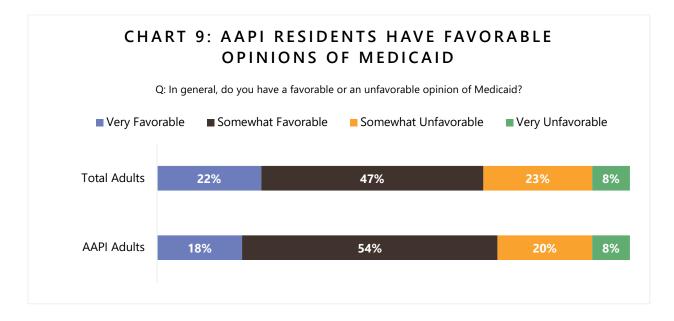


While still an issue for many AAPI residents, experiences with food insecurity are more prevalent in the Texas adult population overall where 32 percent have had a food insecurity experience in the previous 12 months.



## The Role of State Government in Health Care

Texas is one of only ten states that has not expanded Medicaid coverage to include more lowincome adults under the 2010 Affordable Care Act. AAPI residents have slightly more favorable views of the program and its ability to help low-income people compared to Texas adults overall. While 72 percent of AAPI adults have a favorable view of the program (18% very favorable; 54% somewhat favorable), 69 percent of Texas adults overall have a favorable view (22% very favorable; 47% somewhat favorable) (chart 9).

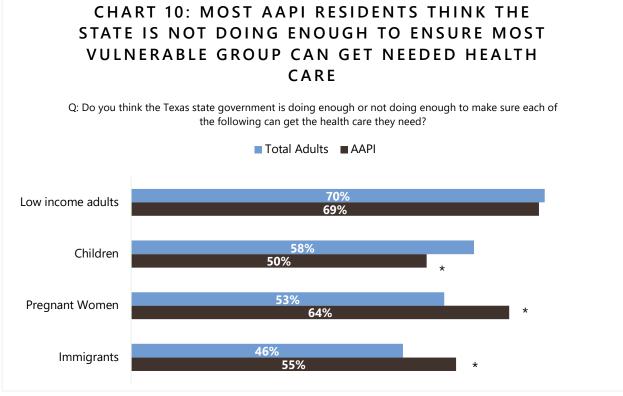


Moreover, 69 percent of AAPI say the state is not doing enough to ensure low-income adults can get the health care they need (chart 10). This is on par with the number of Texas adults overall who say the state is not doing enough in this area (70%).

Nearly two-thirds of AAPI residents think that the state is not doing enough for pregnant women (64%), This is significantly higher than those in the Texas adult population overall who say the same thing. Just over half of Texas adults say the state is not doing enough to make sure pregnant women can get the health care they need (53%).

A similar pattern emerges when it comes to immigrants. Compared to the overall adult population, higher number of AAPI residents note the state is not doing enough to meet the health care needs immigrants (46% vs. 55%) (chart 10).





\* statistically significant difference at p<.05



## **About the Survey**

SSRS conducted the 2024 Texas Health Tracking Survey on behalf of the Episcopal Health Foundation (EHF) from November 11 through December 20, 2024. Similar studies have been fielded on behalf of the EHF since 2018. The 2024 survey was conducted online and by telephone with a representative sample of 2,008 Texas adults (age 18 or older) including 361 who identify as Asian American or Native Hawaiian/Pacific Islander. Interviews were administered in English (n=1,855), Spanish (n=126), Chinese (n=13) and Vietnamese (n=14). The sample includes 869 Texas adults reached through the SSRS Opinion Panel<sup>1</sup> online (n=789) and by phone (n=80) as well as 1,139 adult Texas residents reached through an address-based sample (ABS) and completed the survey online (n=1092) or by phone (n=47).

For the AAPI sample, 334 completed in English, 13 in Chinese and 14 in Vietnamese. 287 were reached through ABS (286 online, 1 by phone) and 74 were reached through the SSRS Opinion panel online.

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 <u>Episcopal Health Foundation (EHF)</u> 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 programs. Our research areas include Health Care and Health Policy, Public Opinion and Policy, Lifestyle, and Sports and Entertainment. SSRS projects include complex strategic and tactical initiatives in the US and more than 40 countries worldwide. Visit <u>ssrs.com</u> for more information.

<sup>&</sup>lt;sup>1</sup> https://ssrs.com/ssrs-solutions/ssrs-opinion-panel/