

WASHINGTON STATE POPULATION SURVEY

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Self-Reported Health Status: Social and Demographic Characteristics

By Wei Yen

THE 1998 WASHINGTON STATE POPULATION SURVEY asked respondents to rate their own health and other household members' health as being excellent, very good, good, fair, or poor. Their responses show that 91 percent of Washington residents consider themselves to be in good health or better.¹ However, their responses also show that self-reported health status varies with age, race and ethnicity, household income, education, health insurance coverage, and employment status. Gender does not appear to be a factor in self-reported health status, since the survey found no statistically significant health differences between males and females in any of the three age classifications used — children (ages 0-18), non-elderly adults (ages 19-64), and the elderly (age 65 and older). Throughout this Research Brief, the term “good health” refers to those who consider themselves to be in *good health or better*, which includes responses of excellent, very good, or good health. The remaining respondents reported their health as fair or poor.

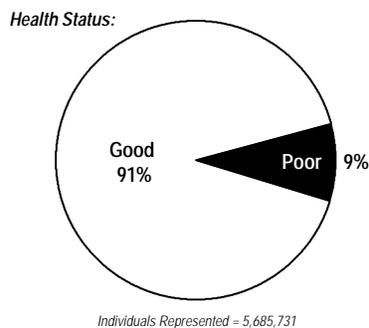
Findings

Health status is clearly influenced by age.

- Overall, 91 percent of the state's population consider themselves in good health.
- While the rate for the non-elderly adult population resembles that of the state overall, children in Washington State enjoy better health, with nearly 97 percent in good health.
- The elderly population, on the other hand, has about 78 percent in good health.

The lower proportion of the elderly population reporting good health is expected because of age-related health factors among this group. The estimates for children and non-elderly adults are comparable to those from a 1997 national survey by the Urban Institute,² which places Washington above the national average.

91 Percent of the State's Population Report to be in Good Health



Children Have the Highest Percentage, With 97 Percent Reported in Good Health

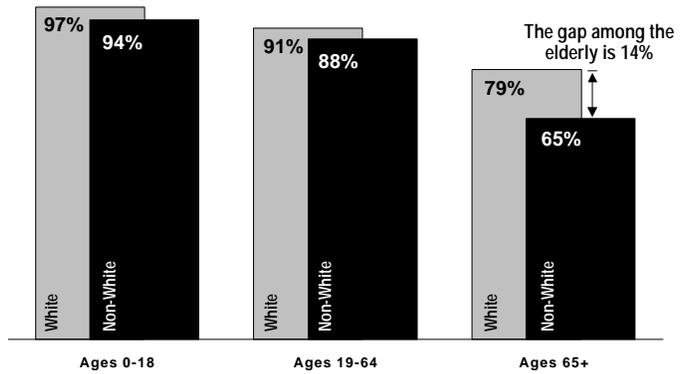


The **Washington State Population Survey** was conducted in the spring of 1998 to provide social, demographic, and economic information about Washington. Responses were obtained from telephone interviews of **7,279 households** that represented the state as a whole. The survey was designed by the Office of Financial Management (OFM) and conducted by the Washington State University Social and Economic Sciences Research Center. Data are subject to sampling variability and other sources of error. More information about the state survey is available under “Population/Data” at: <http://www.wa.gov/ofm/>.

White residents report being in slightly better health than non-White residents overall.

- White children (97 percent) and non-elderly adults (91 percent) lead their non-White counterparts by 3 and 4 percentage points, respectively, in having good health.
- However, the difference between the White and non-White elderly is almost 14 percentage points, with the former at 79 percent and the latter at 65 percent.

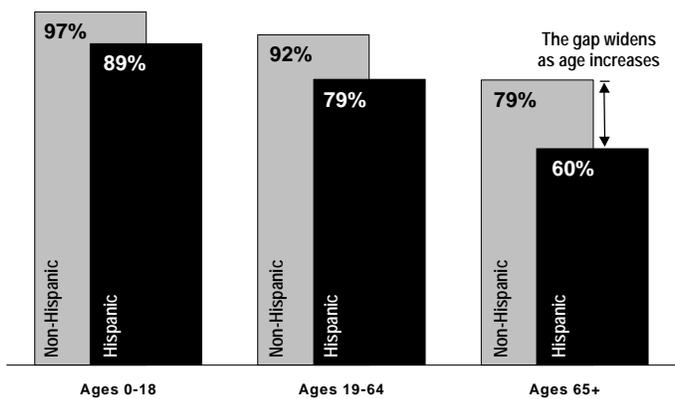
Percent of Whites and Non-Whites Reporting Good Health



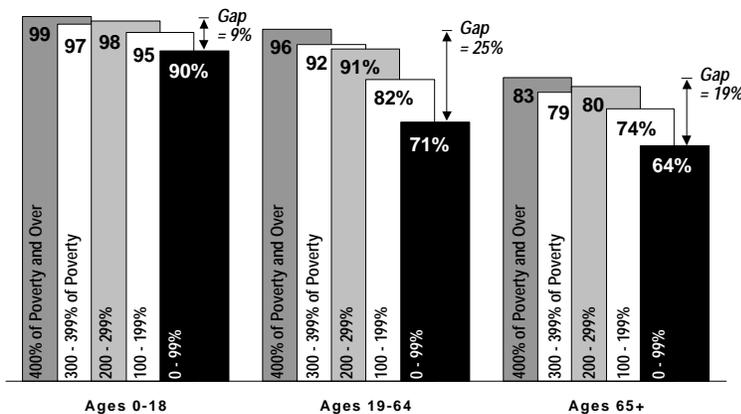
Residents of Hispanic Origin report a lower percent in good health than non-Hispanic residents across all age groups.³ The gap between Hispanics and non-Hispanics widens as age increases:

- 89 percent of Hispanic children are reported to be in good health compared to 97 percent of non-Hispanic children.
- 60 percent of the Hispanic elderly are in good health compared to 79 percent of the non-Hispanic elderly, a difference of almost 20 percentage points.

Hispanics and Non-Hispanics Reporting Good Health



Percent in Good Health by Age and Poverty Level

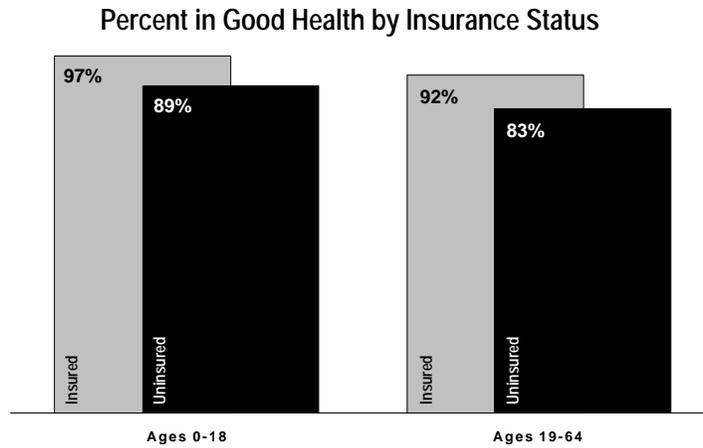


Higher household income is associated with better health.

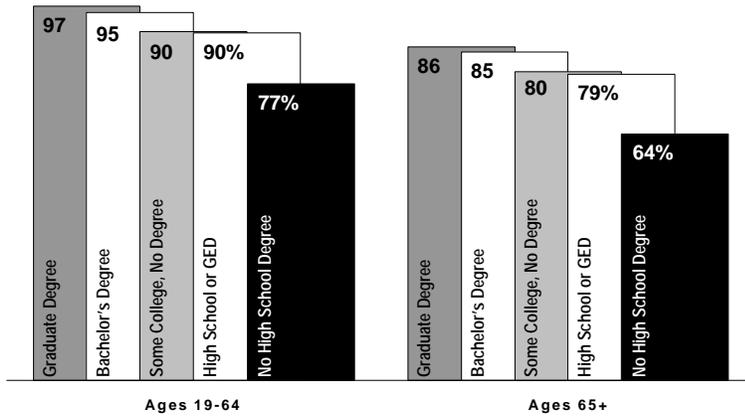
- Children below the poverty level⁴ are reported to have a 90 percent rate of good health while the rate is almost 100 percent for children at the highest income level.
- The health disparity between low income and high income is most striking among non-elderly adults, where only 71 percent of those below poverty have good health, compared to 96 percent of those at the highest income level.
- The elderly in poverty are also behind those at the high end of the income scale, by about 19 percentage points.

Lack of health care coverage is associated with a lower rate of good health among children and non-elderly adults.⁵

- About 97 percent of the children with insurance are reported to be in good health compared to 89 percent of the children without insurance.
- Similarly, 92 percent of the insured non-elderly adults and 83 percent of those without insurance are in good health.



Percent in Good Health by Education Level



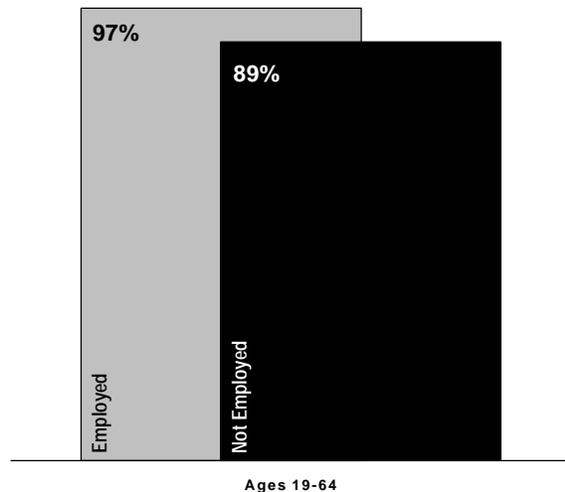
Education is an important factor associated with adult health. Adults without a high school education report lower levels of health.

- Non-elderly adults without a high school diploma score 13 percentage points lower than high school graduates and GED holders.
- Similarly, the elderly without a high school diploma score 15 points lower than the high school graduates and GED holders.
- The highest percentage of good health is found in the groups with a four-year college degree or higher for both groups of adults.

Employment is favorably associated with good health.

- Among non-elderly adults, 94 percent of those working at a job report good health — 3 percentage points above the state average. Those who are not employed report a rate lower than the state average at 87 percent.

Percent in Good Health by Employment Status



NOTES

¹ Total individuals represented in this survey = 5,685,731 (Children, Age 0-18 = 1,515,309; Non-Elderly Adults, Age 19-65 = 3,471,727; Elderly, Age 65+ = 698,695).

² Stephen Zuckerman and Stephen Norton, *Health Status of Nonelderly and Children*, [Snapshots of America's Families](#), Urban Institute, 1999.

³ Hispanic Origin reflects an ethnic heritage, not a racial group. Thus, a person can be both Hispanic and Black, or Hispanic and Asian. In the 1998 Washington State Population Survey, information on Hispanic Origin and race was collected through separate questions. Hispanic Origin information was collected by asking whether the respondent or a household member was of Hispanic Origin. Race information was collected by asking what race the respondent considered him/herself or a household member to be. Five response categories were offered to the race question: Black, Native American/Aleut/Eskimo, Asian/Pacific Islander, White, and Other. The "Other" category was later recoded to either Black, Native American/Aleut/Eskimo, Asian/Pacific Islander, or White. For information on the recoding of the "Other" category, see the section "Data Imputation of Control Variables" in *1998 Washington State Population Survey Technical Report #2 — Weighting Procedure* which can be accessed at <http://www.wa.gov/ofm/sps/technical.htm> or by contacting OFM at (360) 902-0599.

⁴ Household poverty is based on 1997 income and Federal Poverty Level (FPL). For a typical household of four, this was \$16,400 in 1997.

⁵ The elderly group is omitted in this discussion because of the small number of uninsured elderly.

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