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Health Care Access and Utilization Among Native Hawaiian and Pacific Islander Persons in the United States, 2014



U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Centers for Disease Control and Prevention
National Center for Health Statistics

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Data From the Native Hawaiian and Pacific Islander
National Health Interview Survey

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Centers for Disease Control and Prevention
National Center for Health Statistics

Hyattsville, Maryland
August 2017
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Health Care Access and Utilization Among Native Hawaiian and Pacific Islander Persons in the United States, 2014

by Carla E. Zelaya, Ph.D., Adena M. Galinsky, Ph.D., Catherine Simile, Ph.D., and Patricia M. Barnes, M.A.

Abstract

Objectives

The body of nationally representative health statistics for the Native Hawaiian and Pacific Islander (NHPI) population is limited, because even the largest health surveys generally do not have an adequate NHPI sample to calculate reliable NHPI statistics. Using data from the Native Hawaiian and Pacific Islander National Health Interview Survey (NHPI NHIS) from the National Center for Health Statistics (NCHS), this report fills this gap by presenting statistics on health care access and utilization for (a) the total NHPI population and the multiple- and single-race NHPI populations in comparison with other federal race groups and the total U.S. population; (b) single-race NHPI persons compared with multiple-race NHPI persons; and (c) detailed NHPI race groups in comparison with each other and the total U.S. population.

Methods

The NHPI statistics were calculated using 2014 NHPI NHIS data, while the other race group statistics were calculated using 2014

data from NCHS' annual National Health Interview Survey.

Results

NHPI adults aged 18–64 were more likely to be insured and have public health coverage, and those aged 18 and over were more likely to have a usual place of care and an influenza vaccination in the past 12 months compared with all U.S. adults. However, NHPI adults aged 18–64 were less likely to have private insurance, and those aged 65 and over were less likely to have ever received a pneumococcal vaccination compared with all U.S. adults. Compared with Asian adults, NHPI adults were more likely to have a usual place of care but were also more likely to have an unmet dental need. Within the NHPI population, Pacific Islander adults and children were each more likely to be uninsured and less likely to have a usual place of care compared with Native Hawaiian adults and children.

Keywords: Samoan • Guamanian or Chamorro • disparities • health insurance

Key Findings

Health Care Access: Health Insurance

Native Hawaiian and Pacific Islander (NHPI) adults aged 18–64 in the United States were less likely to be uninsured (12.9%) compared with adults in the total U.S. population (16.3%) (Figure 27), but differences were observed among NHPI detailed race groups.

- Single-race NHPI adults were more likely to be uninsured (16.0%) compared with multiple-race NHPI adults (9.0%) (Figure 27).

- Native Hawaiian adults were less likely to be uninsured (8.6%) compared with all Pacific Islander adults (18.2%) (Figure 28).
- Among Pacific Islander detailed race groups, the percentages of those who were uninsured was 16.1% among Samoan, 15.1% among Guamanian or Chamorro, and 21.3% among Other Pacific Islander adults—all of which were higher than the percentage among Native Hawaiian adults (8.6%) (Figure 28).

NHPI adults aged 18–64 were more likely to have public health care coverage (23.4%) and less likely to have private insurance (63.8%) compared with Asian adults (13.0% and 74.2%, respectively) and adults in the

total U.S. population (16.3% and 67.4%, respectively) (Figures 29 and 31). However, differences were observed among NHPI detailed race groups.

- Single-race NHPI adults were less likely to have private insurance (59.7%) compared with multiple-race NHPI adults (68.8%). However, a similar percentage of multiple-race NHPI adults had private coverage (68.8%) compared with white adults (69.8%) (Figure 31).
- Native Hawaiian adults were more likely to have private insurance (67.6%) compared with all Pacific Islander adults (58.6%) (Figure 32).

Overall, there was no difference in the percentage of all NHPI children under age 18 years in the United States who lacked health insurance coverage (4.5%) compared with children in the total U.S. population (5.4%) (Figure 33). However, differences were observed among NHPI detailed race groups.

- A similar percentage of multiple-race NHPI children were uninsured (3.3%) compared with black children (3.7%), but a lower percentage of multiple-race NHPI children were uninsured compared with children in the total U.S. population (5.4%) (Figure 33).
- All Pacific Islander children were more likely to be uninsured (7.2%) compared with Native Hawaiian children (2.1%) (Figure 34).

The percentage of children under age 18 who had public or private coverage differed by race groups (Figures 35 and 37).

- NHPI children were more likely to have public health care coverage (45.3%) compared with Asian children.
- NHPI children were less likely to have private insurance (50.2%) compared with Asian children.

Health Care Access: Usual Place of Care and Emergency Room Visits

Among NHPI adults aged 18 and over, 10.9% had no usual place of health care. This was lower than the percentages of adults with no usual place of care in the total U.S. (14.5%) and Asian (14.9%) populations (Figure 1). However, differences were observed among NHPI detailed race groups.

- All Pacific Islander adults were more likely to have no usual place of care (14.3%) compared with Native Hawaiian adults (8.2%) (Figure 2).

A similar percentage of all NHPI children under age 18 years had a usual place of health care (96.7%) compared with children in the total U.S. population (96.9%) (Figure 3). However, differences were observed among NHPI detailed race groups.

- Native Hawaiian children were more likely to have a usual place of care (99.3%) compared with all Pacific

Islander (94.8%), Samoan (95.6%), and Other Pacific Islander (93.1%) children (Figure 4).

NHPI children (5.5%) were more likely than Asian children (2.4%) to have had two or more emergency room visits in the past 12 months, and a similar percentage of NHPI children had two or more emergency room visits in the past 12 months (5.5%) compared with children in the total U.S. population (4.8%). However, differences were observed among NHPI detailed race groups.

- Native Hawaiian children (7.6%) were more likely than all Pacific Islander children (3.6%) to have had two or more emergency room visits in the past 12 months (Figure 26).

Health Care Access: Delaying Care Due to Cost

Among NHPI persons of all ages, 6.6% delayed seeking medical care due to cost in the past year. This was lower than the percentages of black (7.9%) and AIAN (9.9%) persons but higher than the percentage of Asian persons (3.9%) who delayed care. Differences were also observed among NHPI detailed race groups (Figure 5).

- A similar percentage of single-race NHPI persons delayed seeking care due to cost in the past year (7.3%) compared with the total U.S. (7.0%), white (7.0%), and black (7.9%) populations (Figure 5).
- A lower percentage of multiple-race NHPI persons delayed seeking care due to cost in the past year (5.7%) compared with the total U.S. (7.0%), white (7.0%), black (7.9%), and AIAN (9.9%) populations. However, a higher percentage of multiple-race NHPI persons delayed seeking care due to cost in the past year (5.7%) compared with Asian persons (3.9%) (Figure 5).
- The percentage of Native Hawaiian persons who delayed seeking care in the past year due to cost was 5.8%, which was lower than, but not significantly different from, the percentage of all Pacific Islander persons who delayed care (7.7%) (Figure 6).

The percentages of NHPI adults aged 18 and over and children aged 2–17 years with an unmet dental need due to cost was higher compared with Asian adults and children.

- Among adults, the percentage of all NHPI adults with an unmet dental need due to cost in the 12 months (12.3%) was higher compared with Asian adults (7.2%) (Figure 7).
- Similarly, among children aged 2–17 years, the percentage of all NHPI children with an unmet dental need due to cost in the past 12 months (5.0%) was higher compared with Asian children (2.7%) (Figure 11).

Health Care Utilization: Visiting the Dentist

The percentages of NHPI adults aged 18 and over and children aged 2–17 years who had visited a dentist in the past year differed from the percentages of Asian adults and children who had visited a dentist.

- Among adults, the percentage of single-race NHPI adults who had visited a dentist in the past year (54.4%) was lower than the percentage among Asian adults (62.9%) (Figure 9).
- Conversely, the percentage of single-race NHPI children who had visited a dentist in the past year (86.4%) was higher than the percentage among Asian children (80.0%) (Figure 13).

Health Care Utilization: Influenza Vaccination

The percentages of NHPI adults aged 18 and over and children aged 6 months to 17 years who had received an influenza vaccination in the past year was higher compared with all U.S. adults and children, but it was similar to the percentages among Asian adults and children.

- Both NHPI adults and children were more likely to have received an influenza vaccination in the past year (40.2% and 58.1%, respectively) compared with all U.S. adults and children (35.8% and 49.9%, respectively) (Figures 15 and 19).
- The percentages of NHPI adults and children who had received an influenza vaccination (40.2% and 58.1%, respectively) was similar to the percentages among Asian adults and children (40.6% and 58.2%, respectively) (Figures 15 and 19).

Health Care Utilization: Pneumococcal Vaccination and HIV Testing

The percentage of NHPI adults aged 65 and over who had ever received a pneumococcal vaccination was lower than the percentage among the total U.S. population (Figure 21). However, differences were observed among NHPI detailed race groups (Figure 22).

- NHPI adults aged 65 and over were less likely to have ever received a pneumococcal vaccination (52.0%) compared with all U.S. adults aged 65 and over (62.3%) (Figure 21).
- Native Hawaiian adults aged 65 and over were less likely to have ever received a pneumococcal vaccination (50.2%) compared with all Pacific Islander adults aged 65 and over (69.4%) (Figure 22).

The percentage of adults aged 18 and over who had been tested for HIV differed by race group (Figure 23).

- NHPI adults were less likely to have been tested for HIV (31.4%) compared with all U.S. (38.7%), white (36.2%), and black (57.1%) adults.

Introduction

In 1997, the federal Office of Management and Budget (OMB) separated the Asian or Pacific Islander (API) race category into two categories, requiring federal agencies to begin reporting statistics that separately and accurately described the Asian and Native Hawaiian and Pacific Islander (NHPI) populations (1). In the 20 years since, the body of NHPI health statistics has hardly grown. Even the largest health surveys have struggled to obtain an adequate NHPI sample to calculate reliable NHPI statistics. In 2014, the National Center for Health Statistics (NCHS), the agency that conducts the National Health Interview Survey (NHIS), took a major step toward addressing this problem by conducting the Native Hawaiian and Pacific Islander National Health Interview Survey (NHPI NHIS) (2). The survey's sampling frame consisted of addresses with one or more NHPI residents from a single year of the U.S. Census Bureau's American Community Survey (ACS). The NHPI NHIS public-use data file can be used to estimate prevalence and predictors of a wide range of health conditions and health care access and utilization among NHPI persons.

Along with the NHPI NHIS public-use data files, NCHS provides extensive documentation to assist researchers in conducting data analysis. However, NCHS recognized that many individuals and organizations who are interested in the NHPI population may not have the resources to analyze the data themselves. As a service to these parties, this report provides an overview of results from the NHPI NHIS. This report presents a range of statistics on health access and utilization for the NHPI population calculated using data from the 2014 NHPI NHIS and compares them with health statistics for other race groups (white, black, American Indian or Alaska Native [AIAN], and Asian), calculated using 2014 data from NHIS. Similar statistics on NHPI health conditions and behaviors are available in a companion report (3).

The results presented in this report highlight patterns of differences and similarities between the NHPI and other race groups, and within the NHPI population itself. Because the representative sample obtained in the NHPI NHIS is so large, the variance for the NHPI estimates is relatively small, which means that the NHPI health statistics are more precise and reliable than previously published national NHPI statistics. As a result, differences in health statistics between NHPI and other race groups that often cannot be interpreted due to the large variance of the NHPI statistics, are here statistically significant. Furthermore, the larger sample size makes it possible to calculate, and consequently present in this report, statistics and comparisons between both multiple-race NHPI and single-race NHPI persons and

some detailed NHPI groups (Native Hawaiian, Samoan, and Guamanian or Chamorro), showcasing the diversity found within the NHPI population.

Background

Before 1997, very little was known about NHPI population health at the national level. This was due to OMB's classification of API as a single race category. Because the NHPI population composed only a very small fraction of the API population, API statistics essentially described only the Asian population.

In 1997, OMB separated the API category into two categories: Asian and Native Hawaiian or Other Pacific Islander (1). An Asian person was defined as "a person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam." A Native Hawaiian or Other Pacific Islander person was defined as "a person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands." The term "Native Hawaiian" does not include individuals who are native to the state of Hawaii by virtue of being born there.

Since OMB implemented the new standard, federal agencies have been required to report statistics that describe the characteristics of a minimum of five race categories, including NHPI. However, in the almost 20 years since that change, there have only been limited reliable national NHPI health statistics available and almost no reliable national health statistics for detailed NHPI groups (e.g., Native Hawaiian or Samoan).

Agencies conducting federal surveys have struggled to meet these standards and the demands for NHPI information, because it is challenging to collect and report on data from small populations. The NHPI population constitutes only about 0.4% of the total U.S. population and is geographically concentrated (4). (Only about 0.4% of the total U.S. population identifies as NHPI alone or in combination with one or more other races, according to 2010 census data [4].) The small population size and geographic concentration of the NHPI population make traditional oversampling strategies very expensive. Geographic concentration does not mean that NHPI people live *only* in certain areas, but rather that a substantial fraction are clustered in certain states and areas, while the rest are widely dispersed across the country. Because the population is numerically small, in any given area of the country in which the NHPI population is not concentrated, there are very few NHPI people.

Consequently, using traditional oversampling strategies to obtain representative NHPI samples in areas of the country in which the NHPI population is not concentrated could require thousands of households to be screened in order to identify one NHPI household. As a result, NHPI people

are not typically oversampled, and only small samples of NHPI people are available even in the largest health studies. Consequently, it is difficult to obtain an adequate NHPI sample to calculate reliable NHPI statistics in even the largest surveys like NHIS.

These small sample sizes translate into limited information. First, the variance of estimates for the population that the sample represents is large, which means that the estimates have low reliability. Estimates whose reliability do not meet NCHS standards are suppressed or printed with the warning that they should be interpreted cautiously due to their low reliability. Sometimes there is no one in the sample with a particular outcome, which falsely suggests that the outcome does not occur in the population. Second, even when an estimate is published, and the variance is considered acceptably small, the variance is still usually larger than the variance for estimates for other race groups. This makes it difficult to know if an observed lack of a statistically significant difference between NHPI and other racial groups indicates a true lack of difference at the population level or only the high variance of the estimate. Third, to protect the confidentiality of respondents within a small sample from a relatively small population, variables that could be used to identify respondents are stripped from the publicly released data set or aggregated with other similar variables. As a result, researchers without access to the restricted data are limited in the kinds of analyses they can perform. The cumulative effect of all of these limitations is a shortage of information about the population.

NHIS is one of the few sources of national health information on the NHPI population. For example, NHIS data have been used to calculate statistics that illustrate the high rates of hypertension and diabetes in the NHPI population, particularly as compared with the Asian population (5,6). However, there are limitations to NHPI statistics calculated using NHIS data. First, there are a range of health topics for which many estimates have low reliability. Examples include mental health problems, physical pain, and cancer (5–8). Such estimates with low stability and precision are less than ideal for their own sake but also for the purpose of making comparisons. Underlying differences between the NHPI population and other race groups in the United States can be obscured by the variance of the NHPI estimate.

Second, it is not possible to use the public-use NHIS data file to calculate any NHPI statistics, let alone statistics for detailed NHPI groups, because the race variables are coarsened (transformed so that multiple categories are collapsed into a smaller set of categories) on the public-use file to protect respondents' confidentiality. Finer-grained race variables (those that retain a full or fuller set of categories) are available on the restricted NHIS data files, but even after combining multiple years of restricted-use NHIS data sets, statistics calculated for detailed NHPI groups, such as Native Hawaiian or Samoan, are often unreliable. What little is known about the health of these

detailed NHPI group populations comes from regional- and state-level surveys (9,10).

Several reports and directives have emphasized the importance of finding ways to expand the body of reliable statistics for a range of numerically small racially defined populations, including NHPI (1,11–13). In 2013, NCHS found a way to accomplish this. A new policy on the use of the U.S. Census Bureau’s ACS for federal followback surveys made it possible for NCHS to use it as a frame for an NHPI health survey.

The Native Hawaiian Pacific Islander National Health Interview Survey

The NHPI NHIS was the first federal survey designed exclusively to measure the health of the civilian noninstitutionalized NHPI population of the United States. Conducted in 2014, the goal of the NHPI NHIS was to produce a high-quality NHPI health data set that could be used in a wide range of research activities to generate reliable NHPI health statistics and to better understand various determinants of health, disparities in health, and health outcomes in the NHPI population. The survey’s sampling frame consisted of addresses in a single year of ACS with one or more NHPI residents. An NHPI resident was defined as a person of any age living at the address at the time of ACS who was reported to have an NHPI racial identity, alone or in combination with one or more other racial identities. (Racial identity was the only criterion for inclusion; there was no distinction made based on ethnicity [i.e., both Hispanic and non-Hispanic NHPI people were included]).

The survey’s sample comprised households at those addresses in 2014 in which at least one civilian household resident was identified in NHPI NHIS as NHPI alone or in combination with some other race. The survey used the 2014 NHIS questionnaire, modified only as necessary for sample control and to meet the legislative requirements specific to the survey. The Census Bureau’s trained NHIS field interviewers administered the survey via the same computer-assisted personal interviewing method used for NHIS. For more information on the design and methods of the NHPI NHIS and the 2014 NHIS, see [Appendix I](#) in this report, the NHPI NHIS survey description (2), and the 2014 NHIS survey description (14).

The survey and the data set it produced have a number of strengths. First, because of its design, the survey yielded a very large, representative sample of NHPI households. The publicly released data files contain data for 3,197 households containing 11,085 persons in 3,212 families. Of the 11,085 persons, 8,661 were reported to be NHPI alone or in combination with one or more other races (2). This unprecedented sample size makes it possible to calculate NHPI health statistics for the total NHPI population, multiple- and single-race NHPI persons, and detailed NHPI

groups with precision and reliability. Second, because the NHPI NHIS was designed to maximize the comparability of its data with the 2014 NHIS data, it is possible to conduct statistical tests to evaluate the significance of differences between NHPI estimates calculated using the 2014 NHPI NHIS data and other race group estimates calculated using 2014 NHIS data. Because of the high reliability of the observed NHPI estimates, differences between the NHPI population and other populations, where they exist, are more often statistically significant. Third, because the NHPI NHIS used the standard NHIS instrument, these calculations and comparisons can be conducted for a wide range of health measures. Consistent with its standard practice, NCHS prepared and released an NHPI NHIS public-use data file. It is available for download, complete with extensive documentation, from the NCHS website (<https://www.cdc.gov/nchs/nhis/nhpi.html>).

The main limitation of the public-use NHPI NHIS data file is the set of restrictions in place to protect respondent confidentiality. NCHS (including its contractors and agents) collects personally identifiable survey data through NHIS, NHPI NHIS, and other surveys under a pledge of confidentiality and a promise that data will be used only for statistical purposes. Strict procedures in survey operations and data dissemination are used by NCHS, its data-collection contractors, and other agents to prevent disclosure of respondents’ identities. The risk of inadvertently disclosing confidential information is higher in a publicly released data set with a detailed and extensive set of survey observations. For this reason, like all NHIS public-use data sets, the NHPI NHIS data set was coarsened: Some survey variables were suppressed while others were collapsed or had their response categories collapsed. The most important of these changes concerns the race variables. Using the variables provided on the public-use data set, it is only possible to determine if a person is NHPI only or NHPI in combination with one or more other races. It is not possible to disaggregate the NHPI persons into detailed NHPI race groups—not even into Native Hawaiian or Pacific Islander. Researchers wishing to conduct analyses using the fine-grained race variables from the 2014 NHPI NHIS, including the more than 40 detailed NHPI race variables, must apply to use the restricted NHPI NHIS data file. For more information, visit the Federal Statistical Research Data Center website (<https://www.census.gov/fsrdc>) and the Center for Economic Studies’ RDC Research website (<https://www.census.gov/ces/rdcresearch/howtoapply.html>).

Purpose of Report

NCHS recognizes that many individuals and organizations who are interested in the NHPI population may not have the ability to analyze the NHPI NHIS data themselves. Furthermore, even among those with statistical skills, many will not have the time and resources to access the

restricted files to conduct analysis for NHPI detailed groups (e.g., Native Hawaiian or Samoan).

The purpose of this report is to provide a resource to service providers, policy makers, researchers and teachers, NHPI community members and leaders, and all others interested in the health of the total NHPI population and detailed NHPI population groups. This report provides an overview of results from the NHPI NHIS. Specifically, it presents a range of NHPI health statistics calculated using data from the 2014 NHPI NHIS and compares them with health statistics for other race groups calculated using 2014 data from NHIS.

The three specific aims of this report are to provide nationally representative health statistics for: (a) the total NHPI population and the multiple- and single-race NHPI populations in comparison with other federal race groups (single-race white, black, Asian, and AIAN) and the total U.S. population; (b) single-race NHPI compared with multiple-race NHPI persons; and (c) detailed NHPI race groups in comparison with each other and the total U.S. population.

Health statistics for the total, multiple-race, and single-race NHPI populations are compared with statistics for other federal race groups and the total U.S. population in a figure and corresponding table for each selected health measure. The results presented in this report highlight the pattern of differences between NHPI and Asian populations.

Statistical comparisons between single-race and multiple-race NHPI persons are also presented in the same figures and tables. This comparison is of interest because a large fraction (more than 50%) of the NHPI population reports at least two federal race categories (compared with about 3% of the total U.S. population [15]). A much larger fraction of the Native Hawaiian population is multiple race compared with the Pacific Islander population (4). This comparison, together with comparisons of both single- and multiple-race populations with other racial populations, highlights some of the commonalities between people who report themselves as NHPI and some of the areas where such people differ according to whether they report NHPI alone or in combination with one or more other races.

Comparisons among detailed NHPI race groups and with the overall U.S. population are presented in new figures, but the NHPI detailed race statistics are shown in the same tables with statistics for the total NHPI population and other federal race groups. These data aim to further highlight the diversity within the NHPI population. Some figures compare the two major populations, Native Hawaiian and Pacific Islander, which together compose the NHPI population. Other figures additionally compare the Native Hawaiian population with the three populations that compose the Pacific Islander population—Samoan, Guamanian or Chamorro, and Other Pacific Islander. The detailed NHPI race groups shown in these figures include both single- and multiple-race NHPI people. The corresponding tables show

statistics for an even broader range of detailed NHPI groups than could be showcased in the figures.

This report provides national prevalence estimates and corresponding standard errors, by select racial groups in the U.S. civilian noninstitutionalized population, for a broad range of health measures. For a full list of the topics examined, see the [Table of Contents](#). Statistically significant differences between NHPI and other race groups, and among NHPI detailed race groups are noted in the figures. Health measures include usual place of medical care, unmet medical and dental need, recent dental visits, receipt of select vaccinations, and health insurance coverage. For statistics on NHPI respondent-assessed health status, selected health conditions, and selected health behaviors, see “Health Conditions and Behaviors of Native Hawaiian and Pacific Islander Persons in the United States, 2014” (3).

The information in this report is intended for use by a wide range of audiences. In addition to providing statistics in a clear format, familiarizing readers with the types of information available in the 2014 NHPI NHIS data files may encourage researchers to conduct their own analyses.

Approach and Methods

The health measures in this report were selected from those appearing in the NHIS Early Release Reports (<https://www.cdc.gov/nchs/nhis/releases.htm>) and the NHIS Summary Health Statistics (SHS) Tables (<https://www.cdc.gov/nchs/nhis/SHS.htm>). Estimates are based on data from the Person, Sample Adult, and Sample Child files, which are derived from the Household Composition Section and the Family, Sample Adult, and Sample Child Core components of the NHPI NHIS and NHIS. Crude, age-adjusted, and age-sex-adjusted percentages are shown by the racial categories described below. For more information on age and age-sex adjustment, see [Appendix I](#).

The estimates in the figures and tables presented for the NHPI population (and the detailed race groups within the NHPI population) are calculated using the 2014 NHPI NHIS data set. The total NHPI population (all NHPI) includes all persons who identify as NHPI, including both those who identify with only one or more NHPI detailed race groups (single-race NHPI population) and those who identify with one or more NHPI detailed race groups and one or more race groups within the four other federal race categories (multiple-race NHPI population) (1).

Estimates are also provided for all single- and multiple-race NHPI persons and for the following detailed NHPI racial identities: Native Hawaiian, Pacific Islander, Samoan, Guamanian or Chamorro, and Other Pacific Islander. The estimates for the detailed race groups are presented for all NHPI, multiple-race NHPI, and single-race NHPI persons. The Samoan, Guamanian or Chamorro, and Other Pacific Islander groups together compose the Pacific Islander

population. The Other Pacific Islander population includes all other specific NHPI racial identities, such as Tongan, Fijian, and Marshallese, as well as general NHPI racial identities named by respondents, such as Polynesian, Micronesian, Melanesian, and Pacific Islander. It also includes those who reported more than one Pacific Islander racial identity. These diverse groups are combined into the Other Pacific Islander category to create a category with an adequate sample size for reliable statistics. The small fraction of the NHPI population that is both Native Hawaiian and Pacific Islander (3.4%) is included in the sample used to calculate total NHPI (see “All NHPI” category) statistics but is excluded from the sample used to calculate all detailed NHPI group statistics. The detailed NHPI race groups shown in the figures include both single- and multiple-race NHPI people. Weighted frequency distributions of persons by race are shown in the [Table in Appendix I](#).

The estimates in the figures and tables, presented for the total U.S. population and for the U.S. single-race white, black, AIAN, and Asian populations, are calculated using separate 2014 data from the annual NHIS. Most of these estimates match those published in the 2014 SHS tables (available from: <https://www.cdc.gov/nchs/nhis/SHS.htm>) or in “Early Release of Selected Estimates Based on Data From the 2014 National Health Interview Survey” (16). Those that differ do so because the earlier publications are based on preliminary data, use slightly different definitions, or do not adjust for age or age and sex in the same way.

NHPI population estimates calculated using 2014 data from NHIS are not shown in the tables. These estimates are generally not statistically significantly different from the corresponding 2014 NHPI NHIS estimates, and the estimates calculated using the NHPI NHIS are almost always more reliable.

Figures are presented for one or two measures from each table. Each table has between two and six corresponding figures, showing statistics for at least one measure (health outcome) from that table. The figures, which are intended to be used to make comparisons between race and detailed race groups, show age-adjusted and age-sex-adjusted percentages. Such percentages are designed to be used as relative indexes, permitting comparison among various sociodemographic subgroups that may have different age or age-sex structures (17,18). For example, in comparisons of NHPI adults with single-race Asian adults, NHPI adults were more likely to be younger and male. These adjustments permit the reader to look at the relative differences between adults in the two race groups that are not explained by age and sex differences. For more information about age and age-sex adjustment, see [Appendix II](#). To determine actual risk or “burden” of illness, refer to the unadjusted or crude percentages in the tables.

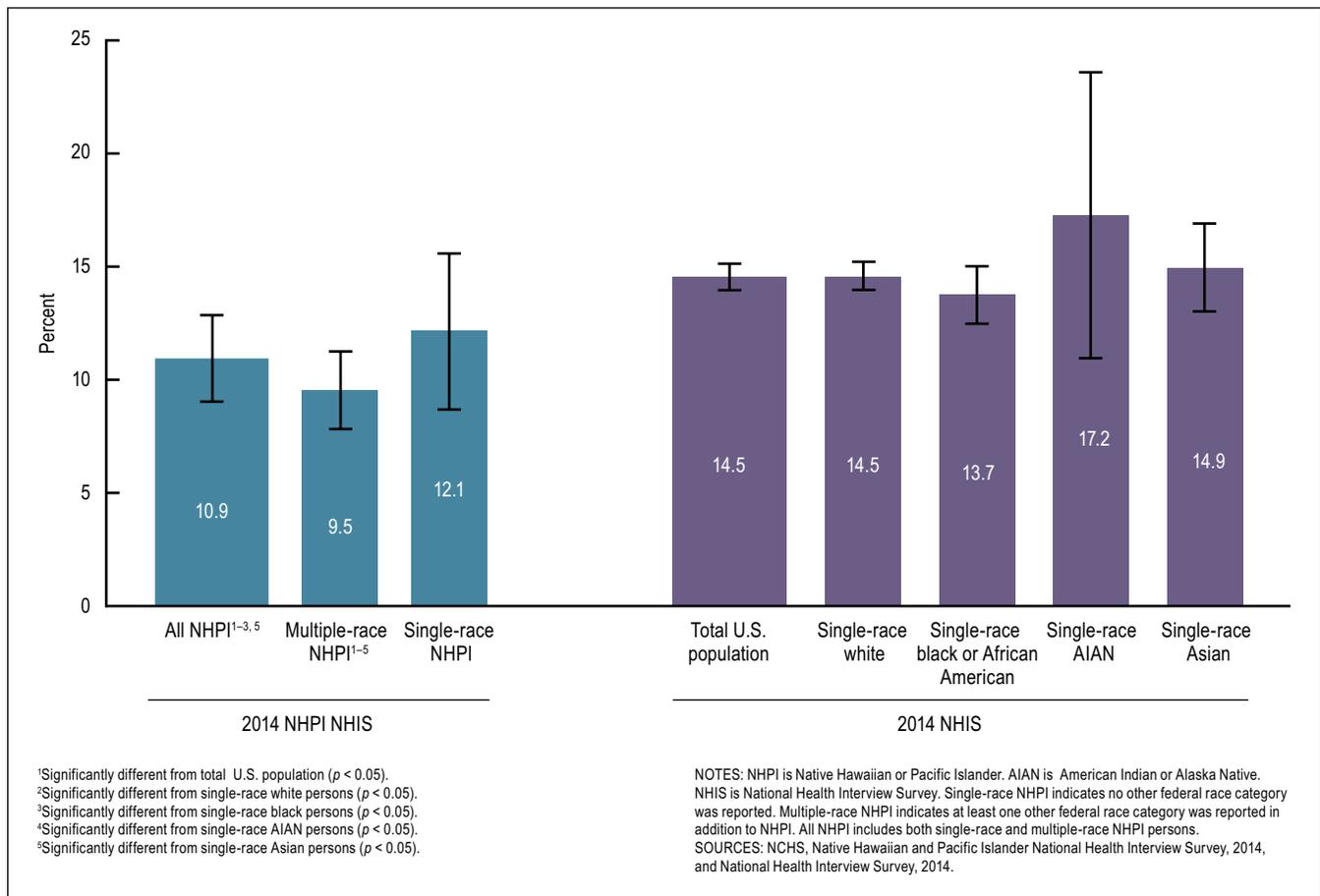
The first figure for each measure compares NHPI estimates with other U.S. race group estimates and compares single-race NHPI with multiple-race NHPI persons. The second

figure for each measure, when it is included, compares estimates from NHPI detailed groups with each other. Specifically, the first figure shows the age-adjusted or age-sex-adjusted percentage of the selected measure for each race group, based on data from both the 2014 NHPI NHIS (for all NHPI, single-race NHPI, and multiple-race NHPI populations) and the 2014 NHIS (for the total U.S. population and single-race white, black, AIAN, and Asian populations). The second figure for each measure shows the age-adjusted or age-sex-adjusted percentage of the selected measure for each detailed race group, based on data from the 2014 NHPI NHIS (for the total NHPI, Native Hawaiian, and Pacific Islander populations, and then within the Pacific Islander population [Samoan, Guamanian or Chamorro, and Other Pacific Islander]) and the 2014 NHIS (for the total U.S. population). If the sample sizes were too small to produce reliable estimates for detailed NHPI groups for a given measure, then only the first figure is presented.

Figures and Tables

Usual Place of Medical Care—Adult

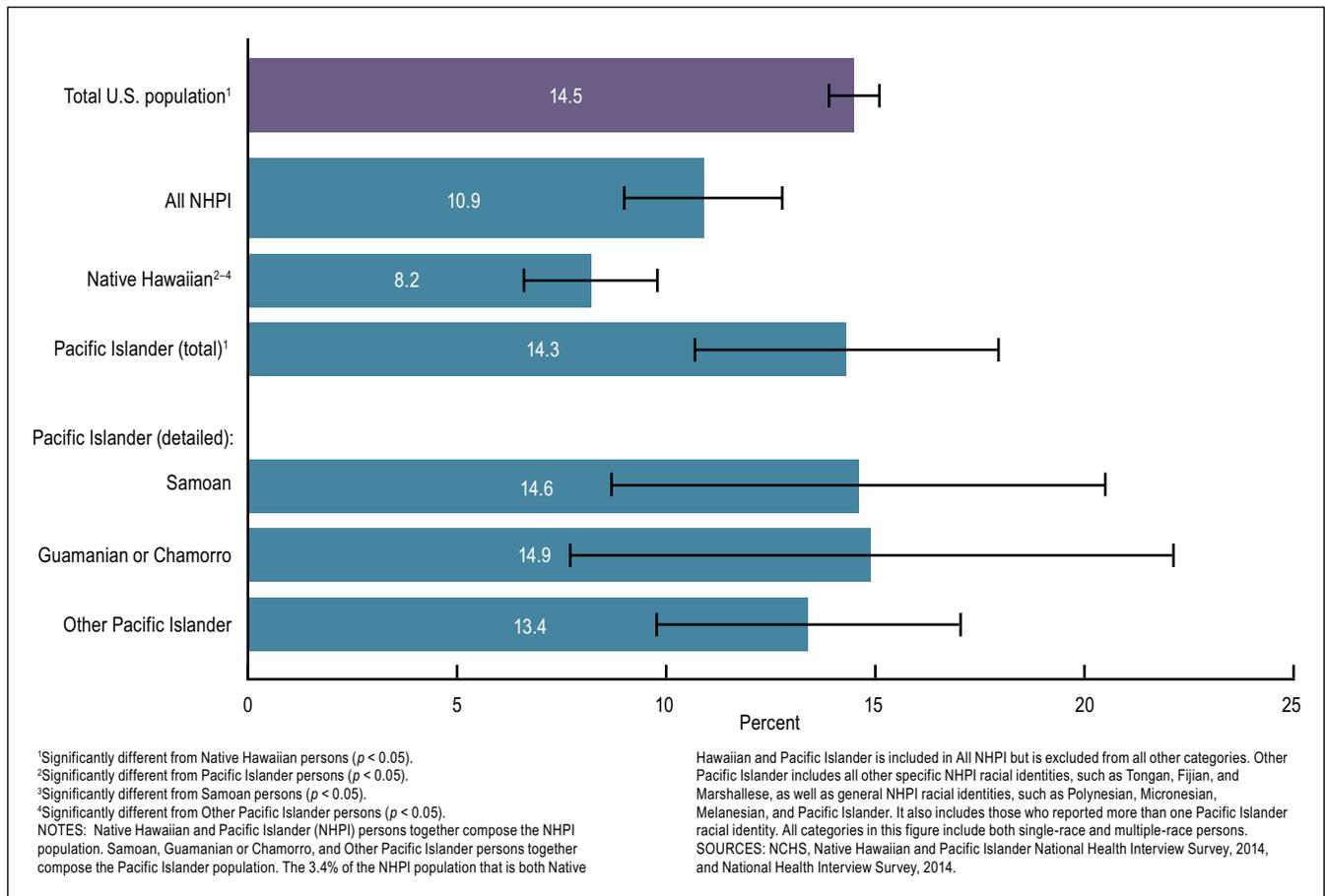
Figure 1. Age-adjusted percentage of adults aged 18 and over with no usual place for health care, by race: United States, 2014



- Among all NHPI adults, the percentage with no usual place of health care was 10.9%, which was lower than the percentages among all U.S. (14.5%), white (14.5%), black (13.7%), and Asian (14.9%) adults. It was also lower than, but not significantly different from, the percentage among AIAN adults (17.2%) (Figure 1, Table 1).
- Among multiple-race NHPI adults, the percentage with no usual place of health care was 9.5%, which was lower than the percentages among all U.S. (14.5%), white (14.5%), black (13.7%), AIAN (17.2%), and Asian (14.9%) adults.
- Among single-race NHPI adults, the percentage with no usual place of health care was 12.1%, which was lower than, but not significantly different from, the percentages among all U.S. (14.5%), white (14.5%), black (13.7%), AIAN (17.2%), and Asian (14.9%) adults.
- The percentage of single-race NHPI adults with no usual place of health care (12.1%) was higher than, but not significantly different from, the percentage among multiple-race NHPI adults (9.5%).

Usual Place of Medical Care—Adult

Figure 2. Age-adjusted percentage of adults aged 18 and over with no usual place of health care, by Native Hawaiian and Pacific Islander detailed race: United States, 2014



- The percentage of Native Hawaiian adults with no usual place of health care was 8.2%, which was lower than the percentages among all Pacific Islander (14.3%), Samoan (14.6%), and Other Pacific Islander (13.4%) adults and lower than, but not significantly different from, the percentage among Guamanian or Chamorro adults (14.9%) (Figure 2, Table 1).
- The percentage of Samoan adults with no usual place of health care was 14.6%, which was higher than the percentage among Native Hawaiian adults (8.2%) and similar to the percentages among Guamanian or Chamorro (14.9%) and Other Pacific Islander (13.4%) adults.
- The percentage of Guamanian or Chamorro adults with no usual place of health care was 14.9%, which was higher than, but not significantly different from, the percentages among Native Hawaiian (8.2%) and Other Pacific Islander (13.4%) adults and similar to the percentage among Samoan adults (14.6%).
- The percentage of Other Pacific Islander adults with no usual place of health care was 13.4%, which was higher than the percentage among Native Hawaiian adults (8.2%) and similar to the percentages among Samoan (14.6%) and Guamanian or Chamorro (14.9%) adults.
- The percentage of all U.S. adults with no usual place of health care was 14.5%, which was higher than the percentage among Native Hawaiian adults (8.2%) and similar to the percentages among all Pacific Islander (14.3%), Samoan (14.6%), Guamanian or Chamorro (14.9%), and Other Pacific Islander (13.4%) adults.

Table 1. Crude and age-adjusted percentages of adults aged 18 and over having a usual place for health care, by race including Native Hawaiian and Pacific Islander detailed race: United States, 2014

Data source and race	Did not have a usual place of health care	Had a usual place of health care	Did not have a usual place of health care	Had a usual place of health care
	Crude percent (standard error)		Age-adjusted percent (standard error)	
2014 NHIS				
U.S. total ¹	13.6 (0.28)	86.4 (0.28)	14.5 (0.29)	85.5 (0.29)
Single-race:				
White	13.4 (0.32)	86.6 (0.32)	14.5 (0.33)	85.5 (0.33)
Black or African American	13.9 (0.68)	86.1 (0.68)	13.7 (0.66)	86.3 (0.66)
American Indian or Alaska Native	17.3 (3.25)	82.7 (3.25)	17.2 (3.21)	82.8 (3.21)
Asian	15.3 (1.03)	84.7 (1.03)	14.9 (0.99)	85.1 (0.99)
2014 NHPI NHIS				
All NHPI:				
NHPI total	12.1 (1.02)	87.9 (1.02)	10.9 (0.97)	89.1 (0.97)
Native Hawaiian	8.7 (0.82)	91.3 (0.82)	8.2 (0.80)	91.8 (0.80)
Pacific Islander	16.6 (2.09)	83.4 (2.09)	14.3 (1.86)	85.7 (1.86)
Samoan	16.2 (3.21)	83.8 (3.21)	14.6 (3.01)	85.4 (3.01)
Guamanian or Chamorro	17.4 (4.07)	82.6 (4.07)	14.9 (3.68)	85.1 (3.68)
Other Pacific Islander ²	16.4 (2.31)	83.6 (2.31)	13.4 (1.85)	86.6 (1.85)
Multiple-race NHPI ³ :				
NHPI total	10.3 (0.93)	89.7 (0.93)	9.5 (0.87)	90.5 (0.87)
Native Hawaiian	9.1 (0.84)	90.9 (0.84)	8.5 (0.87)	91.5 (0.87)
Pacific Islander	15.9 (3.55)	84.1 (3.55)	18.0 (3.74)	82.0 (3.74)
Samoan	*14.3 (5.84)	85.7 (5.84)	†	†
Guamanian or Chamorro	*13.2 (5.12)	86.8 (5.12)	†	†
Other Pacific Islander ²	*31.8 (9.61)	68.2 (9.61)	†	†
Single-race NHPI ⁴ :				
NHPI total	13.6 (1.93)	86.4 (1.93)	12.1 (1.74)	87.9 (1.74)
Native Hawaiian	8.0 (1.75)	92.0 (1.75)	7.5 (1.66)	92.5 (1.66)
Pacific Islander	16.8 (2.80)	83.2 (2.80)	14.6 (2.42)	85.4 (2.42)
Samoan	16.9 (4.81)	83.1 (4.81)	15.1 (4.24)	84.9 (4.24)
Guamanian or Chamorro	18.9 (5.41)	81.1 (5.41)	17.6 (5.11)	82.4 (5.11)
Other Pacific Islander ²	15.7 (2.50)	84.3 (2.50)	12.8 (2.02)	87.2 (2.02)

* Data preceded by an asterisk have a relative standard error (RSE) greater than 30% and less than or equal to 50% and should be used with caution. Data not shown have an RSE greater than 50%.

[†] Not possible to calculate; no sample in cell in one or more of the age-adjustment categories.

¹ Includes other races not shown separately.

² Includes all other specific NHPI racial identities, such as Tongan, Fijian, and Marshallese, as well as general NHPI racial identities, such as Polynesian, Micronesian, Melanesian, and Pacific Islander. It also includes those who reported more than one Pacific Islander racial identity. It does not include those who indicated Native Hawaiian in addition to one or more Pacific Islander races. The racial identity Polynesian is considered Pacific Islander, not Native Hawaiian.

³ Indicates at least one other federal race category was reported in addition to NHPI.

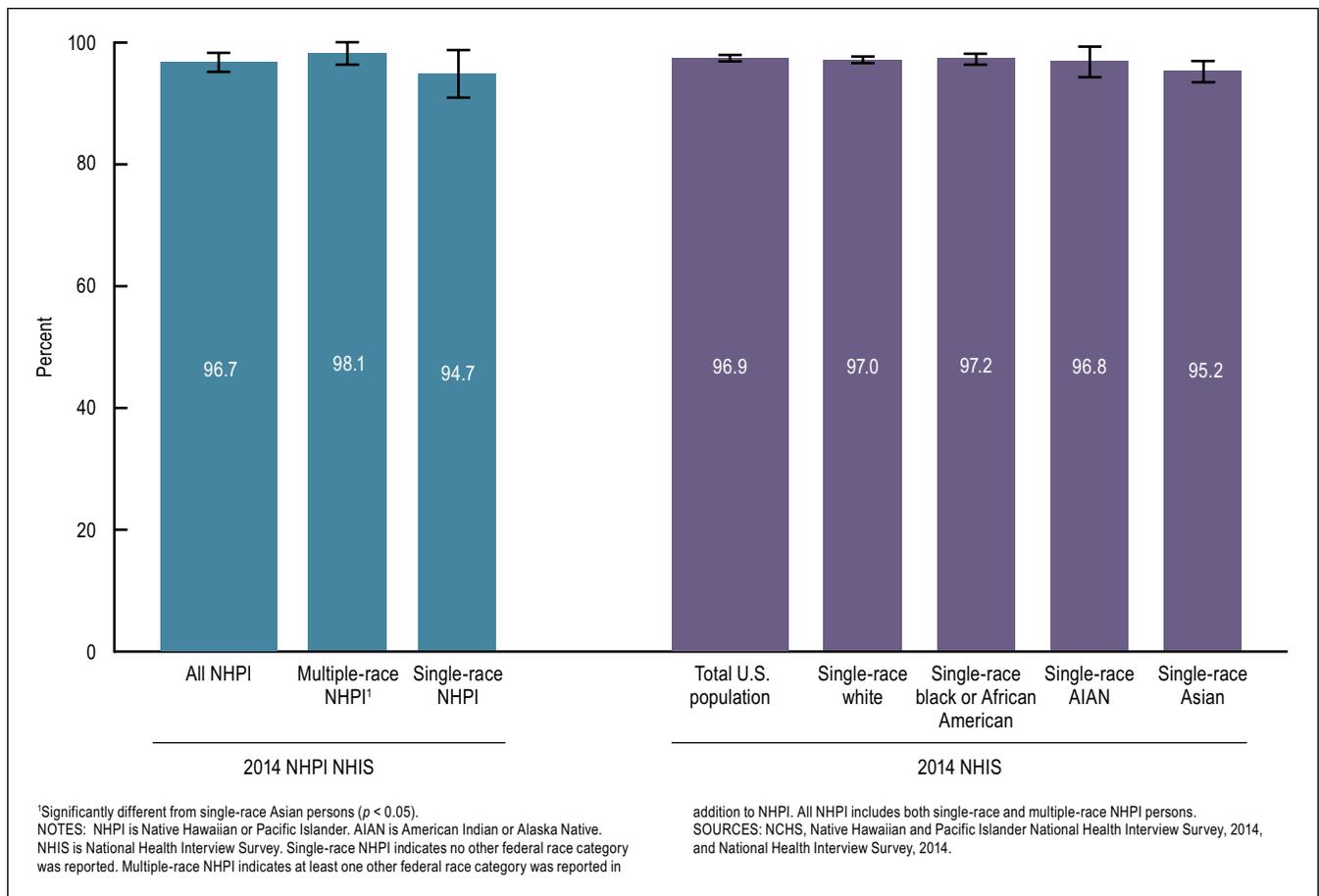
⁴ Indicates no other federal race category was reported.

NOTES: Native Hawaiian and Pacific Islander (NHPI) persons together compose the NHPI population. Samoan, Guamanian or Chamorro, and Other Pacific Islander persons together compose the Pacific Islander population. The 3.4% of the NHPI population that is both Native Hawaiian and Pacific Islander is included in data for NHPI total under ALL NHPI, Multiple-race NHPI, and Single-race NHPI but is excluded from all other categories. Age-adjusted estimates are adjusted using the projected 2000 U.S. population as the standard population and four age groups: 18–44, 45–64, 65–74, and 75 and over. NHIS is National Health Interview Survey.

SOURCES: NCHS, Native Hawaiian and Pacific Islander National Health Interview Survey, 2014, and National Health Interview Survey, 2014.

Usual Place of Medical Care—Child

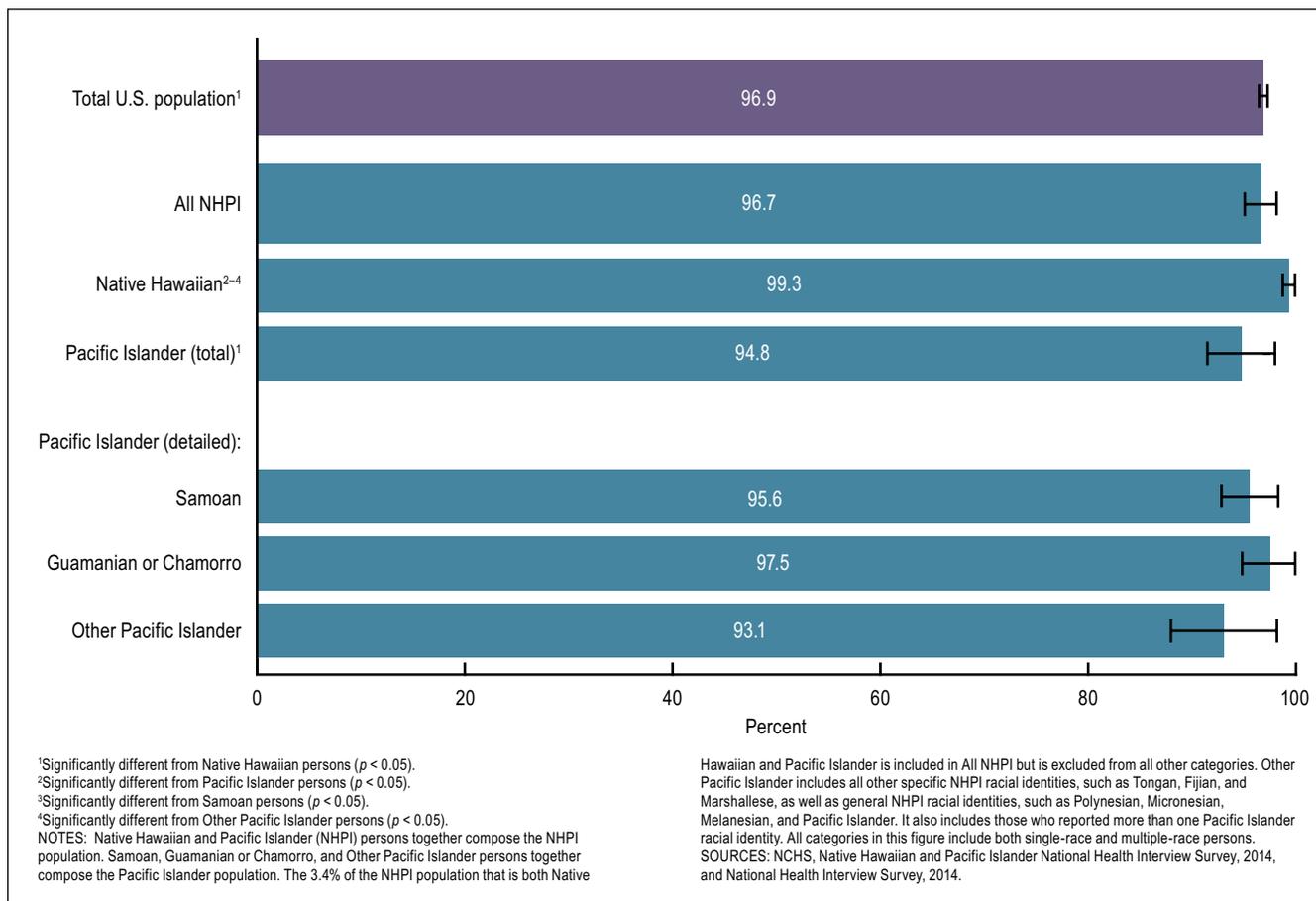
Figure 3. Age-adjusted percentage of children under age 18 years with a usual place of health care, by race: United States, 2014



- Among all NHPI children, the percentage with a usual place of health care was 96.7%, which was similar to the percentages among all U.S. (96.9%), white (97.0%), black (97.2%), AIAN (96.8%), and Asian (95.2%) children (Figure 3, Table 2).
- Among multiple-race NHPI children, the percentage with a usual place of health care was 98.1%, which was similar to the percentages among all U.S. (96.9%), white (97.0%), black (97.2%), and AIAN (96.8%) children and higher than the percentage among Asian children (95.2%).
- Among single-race NHPI children, the percentage with a usual place of health care was 94.7%, which was similar to the percentages among all U.S. (96.9%), white (97.0%), black (97.2%), AIAN (96.8%), and Asian (95.2%) children.
- The percentage of single-race NHPI children with a usual place of health care (94.7%) was lower than, but not significantly different from, the percentage among multiple-race NHPI children (98.1%).

Usual Place of Medical Care—Child

Figure 4. Age-adjusted percentage of children under age 18 years with a usual place of health care, by Native Hawaiian and Pacific Islander detailed race: United States, 2014



- The percentage of Native Hawaiian children with a usual place of health care was 99.3%, which was higher than the percentages among all Pacific Islander (94.8%), Samoan (95.6%), and Other Pacific Islander (93.1%) children and higher than, but not significantly different from, the percentage among Guamanian or Chamorro children (97.5%) (Figure 4, Table 2).
- The percentage of Samoan children with a usual place of health care was 95.6%, which was lower than the percentage among Native Hawaiian children (99.3%); lower than, but not significantly different from, the percentage among Guamanian or Chamorro children (97.5%); and higher than, but not significantly different from, the percentage among Other Pacific Islander children (93.1%).
- The percentage of Guamanian or Chamorro children with a usual place of health care was 97.5%, which was lower than, but not significantly different from, the percentage among Native Hawaiian children (99.3%) and higher than, but not significantly different from, the percentages among Samoan (95.6%) and Other Pacific Islander (93.1%) children.
- The percentage of Other Pacific Islander children with a usual place of health care was 93.1%, which was lower than the percentage among Native Hawaiian children (99.3%) and lower than, but not significantly different from, the percentages among Samoan (95.6%) and Guamanian or Chamorro (97.5%) children.
- The percentage of all U.S. children with a usual place of health care was 96.9%, which was lower than the percentage among Native Hawaiian children (99.3%); higher than, but not significantly different from, the percentages among all Pacific Islander (94.8%) and Other Pacific Islander (93.1%) children; and similar to the percentages among Samoan (95.6%) and Guamanian or Chamorro (97.5%) children.

Table 2. Crude and age-adjusted percentages of children under age 18 years having a usual place of health care, by race including Native Hawaiian and Pacific Islander detailed race: United States, 2014

Data source and race	Did not have a usual place of health care	Had a usual place of health care	Did not have a usual place of health care	Had a usual place of health care
	Crude percent (standard error)		Age-adjusted percent (standard error)	
2014 NHIS				
U.S. total ¹	3.1 (0.21)	96.9 (0.21)	3.1 (0.21)	96.9 (0.21)
Single-race:				
White	3.0 (0.24)	97.0 (0.24)	3.0 (0.24)	97.0 (0.24)
Black or African American	2.8 (0.44)	97.2 (0.44)	2.8 (0.44)	97.2 (0.44)
American Indian or Alaska Native	*3.2 (1.36)	96.8 (1.36)	*3.2 (1.27)	96.8 (1.27)
Asian	4.7 (0.86)	95.3 (0.86)	4.8 (0.88)	95.2 (0.88)
2014 NHPI NHIS				
All NHPI:				
NHPI total	3.2 (0.75)	96.8 (0.75)	3.3 (0.78)	96.7 (0.78)
Native Hawaiian	*0.7 (0.30)	99.3 (0.30)	*0.7 (0.29)	99.3 (0.29)
Pacific Islander	*4.8 (1.51)	95.2 (1.51)	*5.2 (1.66)	94.8 (1.66)
Samoan	*4.0 (1.63)	96.0 (1.63)	*4.4 (1.39)	95.6 (1.39)
Guamanian or Chamorro	*	98.0 (1.20)	*	97.5 (1.40)
Other Pacific Islander ²	*6.6 (2.44)	93.4 (2.44)	*6.9 (2.60)	93.1 (2.60)
Multiple-race NHPI ³ :				
NHPI total	*1.8 (0.88)	98.2 (0.88)	*1.9 (0.93)	98.1 (0.93)
Native Hawaiian	*	99.5 (0.28)	*0.5 (0.26)	99.5 (0.26)
Pacific Islander	*	98.9 (0.65)	*	98.7 (0.75)
Samoan	*	99.3 (0.65)	*	99.3 (0.73)
Guamanian or Chamorro	*	99.1 (0.89)	*	98.4 (1.49)
Other Pacific Islander ²	*	98.1 (1.84)	*	98.4 (1.58)
Single-race NHPI ⁴ :				
NHPI total	*5.2 (1.90)	94.8 (1.90)	*5.3 (1.95)	94.7 (1.95)
Native Hawaiian	*	98.9 (1.04)	*	98.6 (1.30)
Pacific Islander	*7.2 (2.80)	92.8 (2.80)	*7.6 (2.88)	92.4 (2.88)
Samoan	*7.3 (3.19)	92.7 (3.19)	*7.5 (2.46)	92.5 (2.46)
Guamanian or Chamorro	*	96.1 (2.82)	*	96.7 (2.48)
Other Pacific Islander ²	*7.9 (3.47)	92.1 (3.47)	*8.2 (3.61)	91.8 (3.61)

* Estimates are considered unreliable. Data preceded by an asterisk have a relative standard error (RSE) greater than 30% and less than or equal to 50% and should be used with caution. Data not shown have an RSE greater than 50%.

¹Includes other races not shown separately.

²Includes all other specific NHPI racial identities, such as Tongan, Fijian, and Marshallese, as well as general NHPI racial identities, such as Polynesian, Micronesian, Melanesian, and Pacific Islander. It also includes those who reported more than one Pacific Islander racial identity. It does not include those who indicated Native Hawaiian in addition to one or more Pacific Islander races. The racial identity Polynesian is considered Pacific Islander, not Native Hawaiian.

³Indicates at least one other federal race category was reported in addition to NHPI.

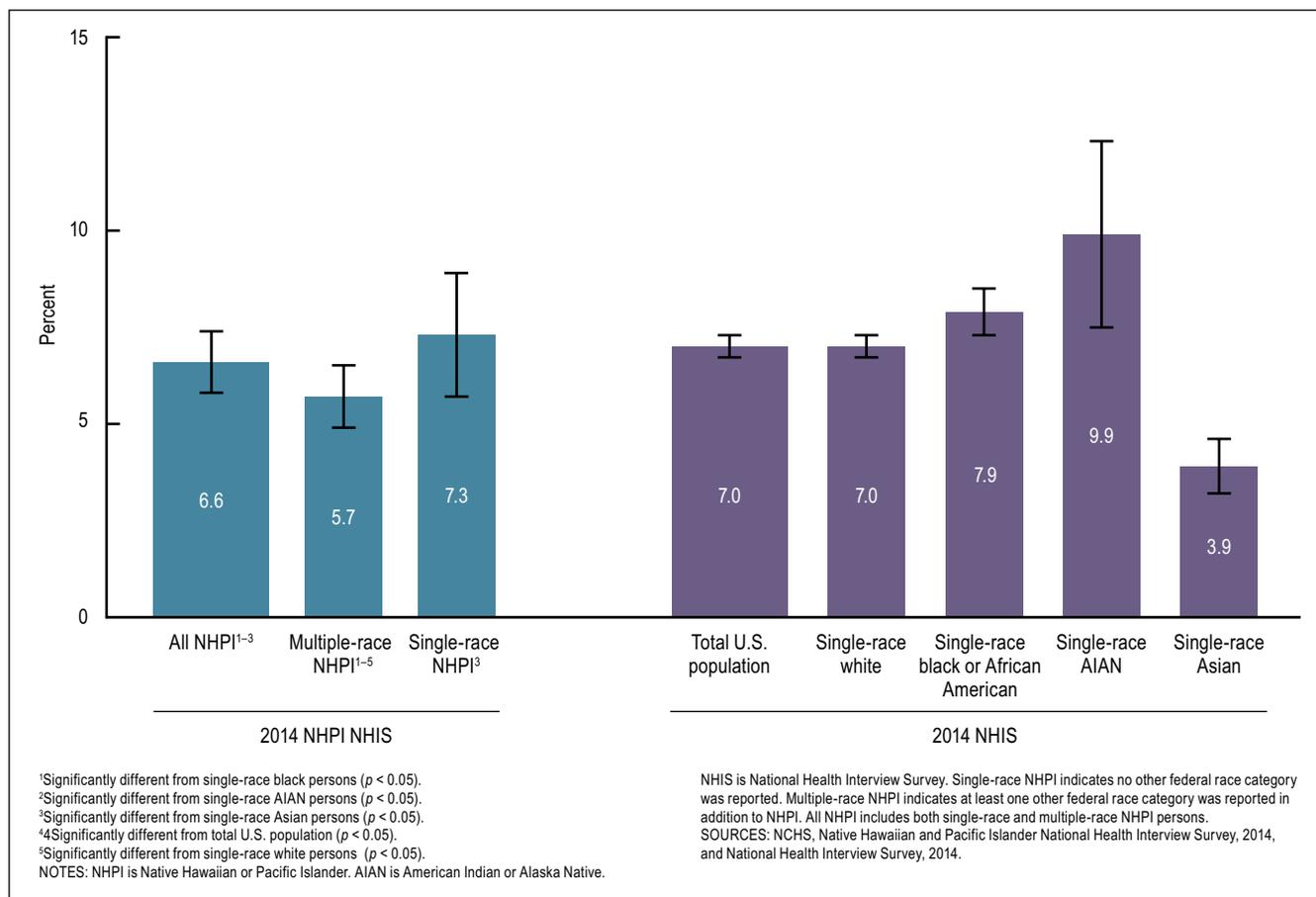
⁴Indicates no other federal race category was reported.

NOTES: Native Hawaiian and Pacific Islander (NHPI) persons together compose the NHPI population. Samoan, Guamanian or Chamorro, and Other Pacific Islander persons together compose the Pacific Islander population. The 3.4% of the NHPI population that is both Native Hawaiian and Pacific Islander is included in data for NHPI total under All NHPI, Multiple-race NHPI, and Single-race NHPI but is excluded from all other categories. Age-adjusted estimates are adjusted using the projected 2000 U.S. population as the standard population and three age groups: 0–4, 5–11, and 12–17. NHIS is National Health Interview Survey.

SOURCES: NCHS, Native Hawaiian and Pacific Islander National Health Interview Survey, 2014, and National Health Interview Survey, 2014.

Unmet Medical Need

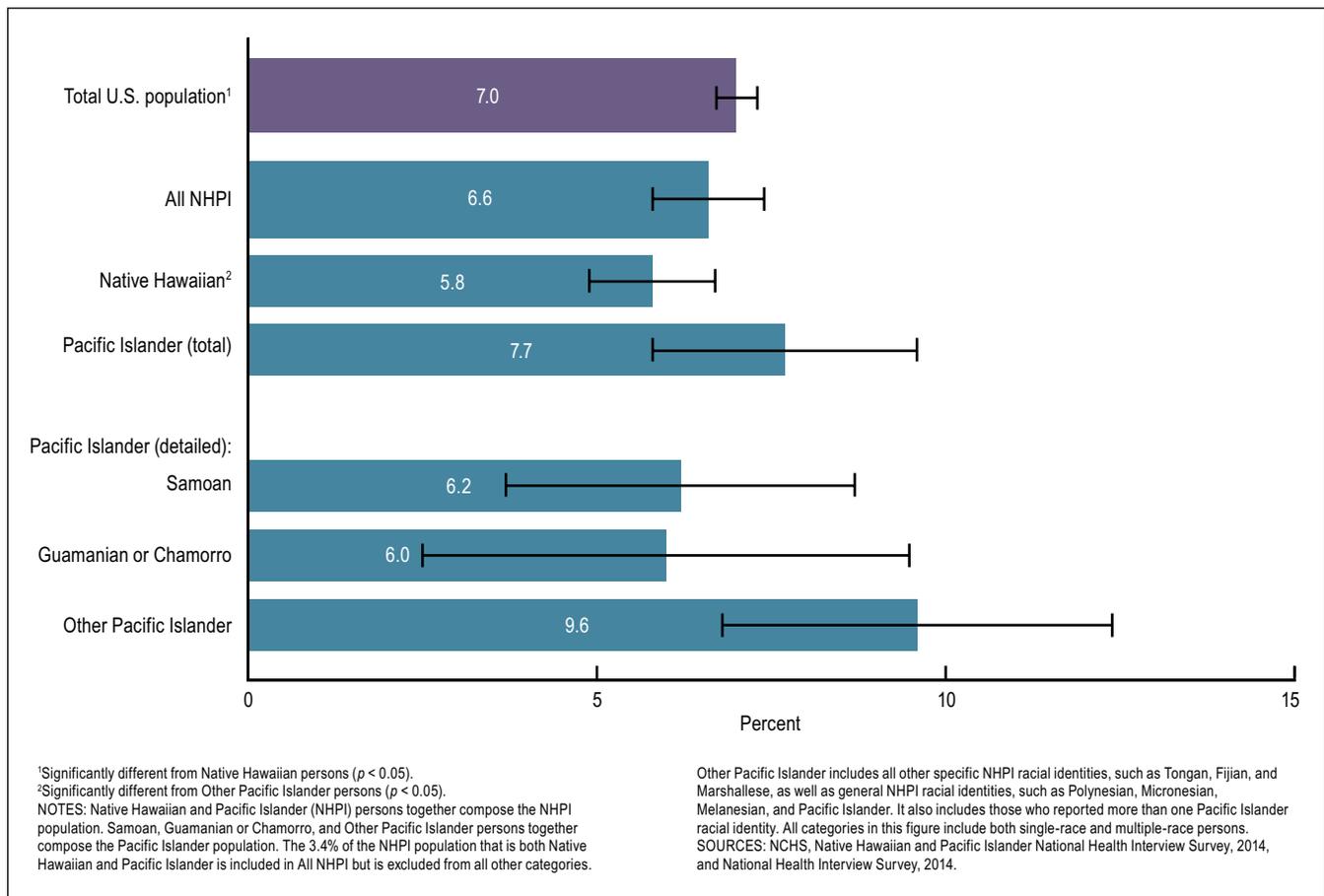
Figure 5. Age-adjusted percentage of persons of all ages who delayed seeking medical care in the past year due to cost, by race: United States, 2014



- Among the total NHPI population, the percentage who delayed seeking medical care in the past year due to cost was 6.6%, which was similar to the percentage among the total U.S. (7.0%) and white (7.0%) populations, higher than the percentage among the Asian population (3.9%), and lower than the percentages among the black (7.9%) and AIAN (9.9%) populations (Figure 5, Table 3).
- Among the multiple-race NHPI population, the percentage who delayed seeking medical care in the past year due to cost was 5.7%, which was higher than the percentage among the Asian population (3.9%) and lower than the percentages among the total U.S. (7.0%), white (7.0%), black (7.9%), and AIAN (9.9%) populations.
- Among the single-race NHPI population, the percentage who delayed seeking medical care in the past year due to cost was 7.3%, which was higher than the percentage among the Asian population (3.9%); similar to the percentages among the total U.S. (7.0%), white (7.0%), and black (7.9%) populations; and lower than, but not significantly different from, the percentage among the AIAN population (9.9%).
- The percentage of the single-race NHPI population who delayed seeking medical care in the past year due to cost (7.3%) was higher than, but not significantly different from, the percentage among the multiple-race NHPI population (5.7%).

Unmet Medical Need

Figure 6. Age-adjusted percentage of persons of all ages who delayed seeking medical care in the past year due to cost, by Native Hawaiian and Pacific Islander detailed race: United States, 2014



- The percentage of the Native Hawaiian population who delayed seeking medical care in the past year due to cost was 5.8%, which was lower than, but not significantly different from, the percentage among all Pacific Islander persons (7.7%); similar to the percentages among Samoan (6.2%) and Guamanian or Chamorro (6.0%) persons; and lower than the percentage among Other Pacific Islander persons (9.6%) (Figure 6, Table 3).
- The percentage of the Samoan population who delayed seeking medical care in the past year due to cost was 6.2%, which was similar to the percentages among Native Hawaiian (5.8%) and Guamanian or Chamorro (6.0%) persons and lower than, but not significantly different from, the percentage among Other Pacific Islander persons (9.6%).
- The percentage of the Guamanian or Chamorro population who delayed seeking medical care in the past year due to cost was 6.0%, which was similar to the percentages among Native Hawaiian (5.8%) and Samoan (6.2%) persons and lower than, but not significantly different from, the percentage among Other Pacific Islander persons (9.6%).
- The percentage of the Other Pacific Islander population who delayed seeking medical care in the past year due to cost was 9.6%, which was higher than the percentage among Native Hawaiian persons (5.8%) and higher than, but not significantly different from, the percentages among Samoan (6.2%) and Guamanian or Chamorro (6.0%) persons.
- The percentage of the total U.S. population who delayed seeking medical care in the past year due to cost was 7.0%, which was higher than the percentage among Native Hawaiian persons (5.8%); similar to the percentages among Pacific Islander (7.7%), Samoan (6.2%), and Guamanian or Chamorro (6.0%) persons; and lower than, but not significantly different from, the percentage among Other Pacific Islander persons (9.6%).

Table 3. Crude and age-adjusted percentages of persons of all ages who did not receive or delayed seeking medical care in the past year due to cost, by race including Native Hawaiian and Pacific Islander detailed race: United States, 2014

Data source and race	Did not receive medical care due to cost	Delayed seeking medical care due to cost	Did not receive medical care due to cost	Delayed seeking medical care due to cost
	Crude percent (standard error)		Age-adjusted percent (standard error)	
2014 NHIS				
U.S. total ¹	5.3 (0.12)	7.1 (0.14)	5.2 (0.12)	7.0 (0.14)
Single-race:				
White	5.1 (0.13)	7.1 (0.16)	5.0 (0.13)	7.0 (0.16)
Black or African American	7.1 (0.28)	8.0 (0.32)	7.0 (0.28)	7.9 (0.32)
American Indian or Alaska Native	6.8 (1.06)	10.0 (1.27)	6.6 (0.99)	9.9 (1.22)
Asian	3.1 (0.31)	4.1 (0.35)	2.9 (0.29)	3.9 (0.34)
2014 NHPI NHIS				
All NHPI:				
NHPI total	4.3 (0.38)	6.2 (0.42)	4.5 (0.35)	6.6 (0.42)
Native Hawaiian	3.7 (0.36)	5.5 (0.47)	3.8 (0.34)	5.8 (0.46)
Pacific Islander	5.2 (0.69)	7.2 (0.97)	5.5 (0.61)	7.7 (0.97)
Samoan	4.8 (1.10)	5.3 (1.33)	5.5 (1.10)	6.2 (1.26)
Guamanian or Chamorro	3.5 (0.46)	5.7 (1.56)	3.4 (0.47)	6.0 (1.80)
Other Pacific Islander ²	6.4 (1.38)	9.2 (1.66)	6.7 (1.14)	9.6 (1.45)
Multiple-race NHPI ³ :				
NHPI total	3.7 (0.36)	5.1 (0.38)	4.0 (0.34)	5.7 (0.40)
Native Hawaiian	4.0 (0.40)	5.6 (0.49)	4.2 (0.39)	5.9 (0.48)
Pacific Islander	3.4 (0.79)	4.0 (0.80)	*3.8 (1.20)	5.8 (0.90)
Samoan	*2.3 (1.12)	3.0 (0.88)	*	6.4 (1.40)
Guamanian or Chamorro	*2.0 (0.86)	*2.6 (1.21)	*	*3.6 (1.66)
Other Pacific Islander ²	*6.8 (2.44)	*7.4 (2.52)	*5.3 (2.17)	*6.9 (2.38)
Single-race NHPI ⁴ :				
NHPI total	4.9 (0.59)	7.3 (0.83)	4.9 (0.55)	7.3 (0.80)
Native Hawaiian	3.1 (0.71)	5.3 (1.01)	3.1 (0.67)	5.3 (0.98)
Pacific Islander	5.8 (0.88)	8.3 (1.27)	5.8 (0.80)	8.3 (1.23)
Samoan	5.8 (1.47)	6.3 (1.80)	5.9 (1.28)	6.4 (1.56)
Guamanian or Chamorro	4.3 (0.66)	*7.6 (2.55)	4.0 (0.59)	*7.0 (2.40)
Other Pacific Islander ²	6.4 (1.61)	9.5 (1.89)	6.6 (1.36)	9.8 (1.65)

* Estimates are considered unreliable. Data preceded by an asterisk have a relative standard error (RSE) greater than 30% and less than or equal to 50% and should be used with caution. Data not shown have an RSE greater than 50%.

¹Includes other races not shown separately.

²Includes all other specific NHPI racial identities, such as Tongan, Fijian, and Marshallese, as well as general NHPI racial identities, such as Polynesian, Micronesian, Melanesian, and Pacific Islander. It also includes those who reported more than one Pacific Islander racial identity. It does not include those who indicated Native Hawaiian in addition to one or more Pacific Islander races. The racial identity Polynesian is considered Pacific Islander, not Native Hawaiian.

³Indicates at least one other federal race category was reported in addition to NHPI.

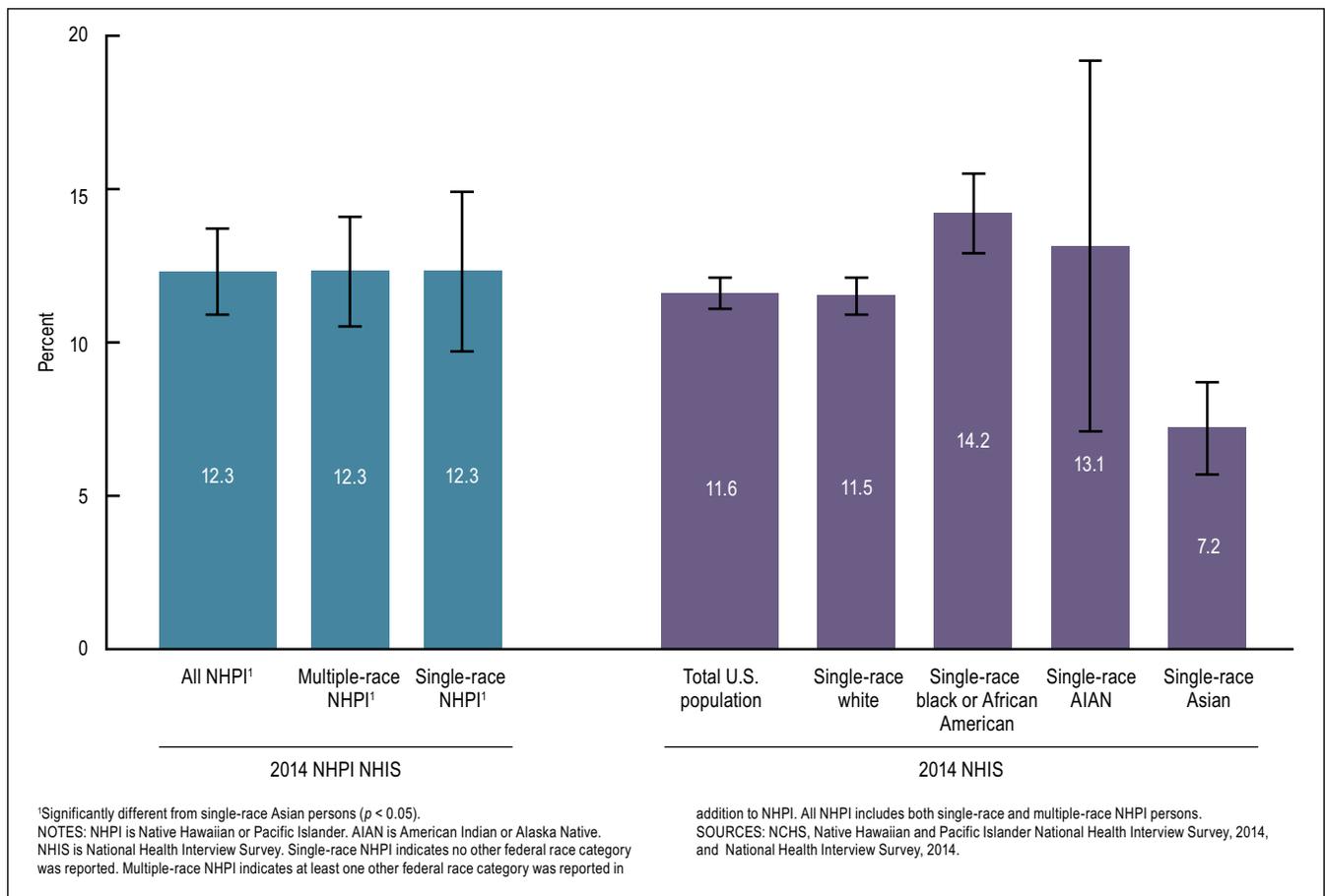
⁴Indicates no other federal race category was reported.

NOTES: Native Hawaiian and Pacific Islander (NHPI) persons together compose the NHPI population. Samoan, Guamanian or Chamorro, and Other Pacific Islander persons together compose the Pacific Islander population. The 3.4% of the NHPI population that is both Native Hawaiian and Pacific Islander is included in data for NHPI total under All NHPI, Multiple-race NHPI, and Single-race NHPI but is excluded from all other categories. Age-adjusted estimates are adjusted using the projected 2000 U.S. population as the standard population and five age groups: 0–12, 12–17, 18–44, 45–64, and 65 and over. NHIS is National Health Interview Survey.

SOURCES: NCHS, Native Hawaiian and Pacific Islander National Health Interview Survey, 2014, and National Health Interview Survey, 2014.

Unmet Dental Need and Length of Time Since Last Visit With Dentist—Adult

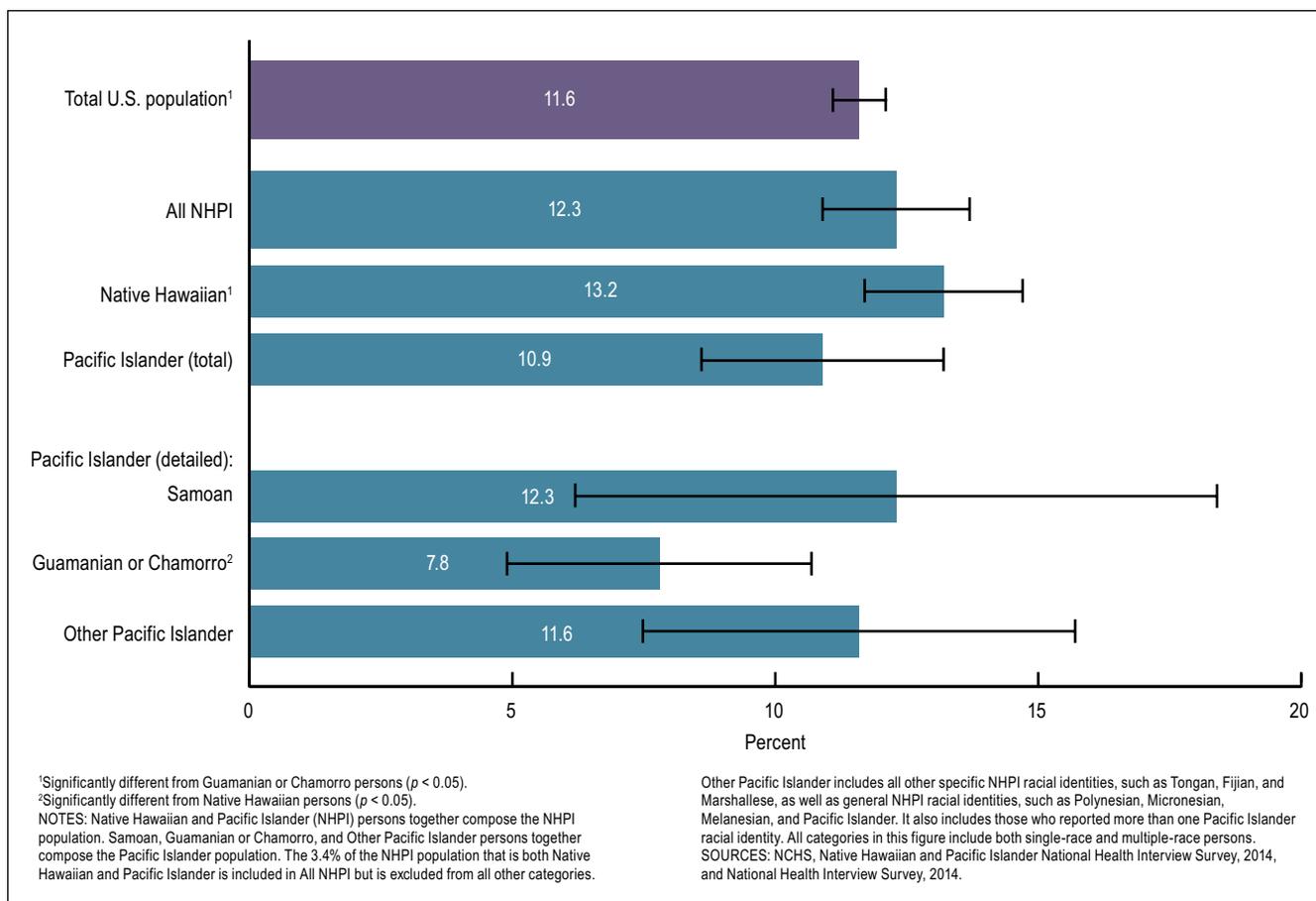
Figure 7. Age-adjusted percentage of adults aged 18 and over with unmet dental need due to cost, by race: United States, 2014



- Among all NHPI adults, the percentage with unmet dental need due to cost was 12.3%, which was similar to the percentages among all U.S. (11.6%), white (11.5%), and AIAN (13.1%) adults; lower than, but not significantly different from, the percentage among black adults (14.2%); and higher than the percentage among Asian adults (7.2%) (Figure 7, Table 4).
- Among multiple-race NHPI adults, the percentage with unmet dental need due to cost was 12.3%, which was similar to the percentages among all U.S. (11.6%), white (11.5%), and AIAN (13.1%) adults; lower than, but not significantly different from, the percentage among black adults (14.2%); and higher than the percentage among Asian adults (7.2%).
- Among single-race NHPI adults, the percentage with unmet dental need due to cost was 12.3%, which was similar to the percentages among all U.S. (11.6%), white (11.5%), and AIAN (13.1%) adults; lower than, but not significantly different from, the percentage among black adults (14.2%); and higher than the percentage among Asian adults (7.2%).
- The percentage of the single-race NHPI population with unmet dental need due to cost (12.3%) was the same as the percentage among the multiple-race NHPI population (12.3%).

Unmet Dental Need and Length of Time Since Last Visit With Dentist—Adult

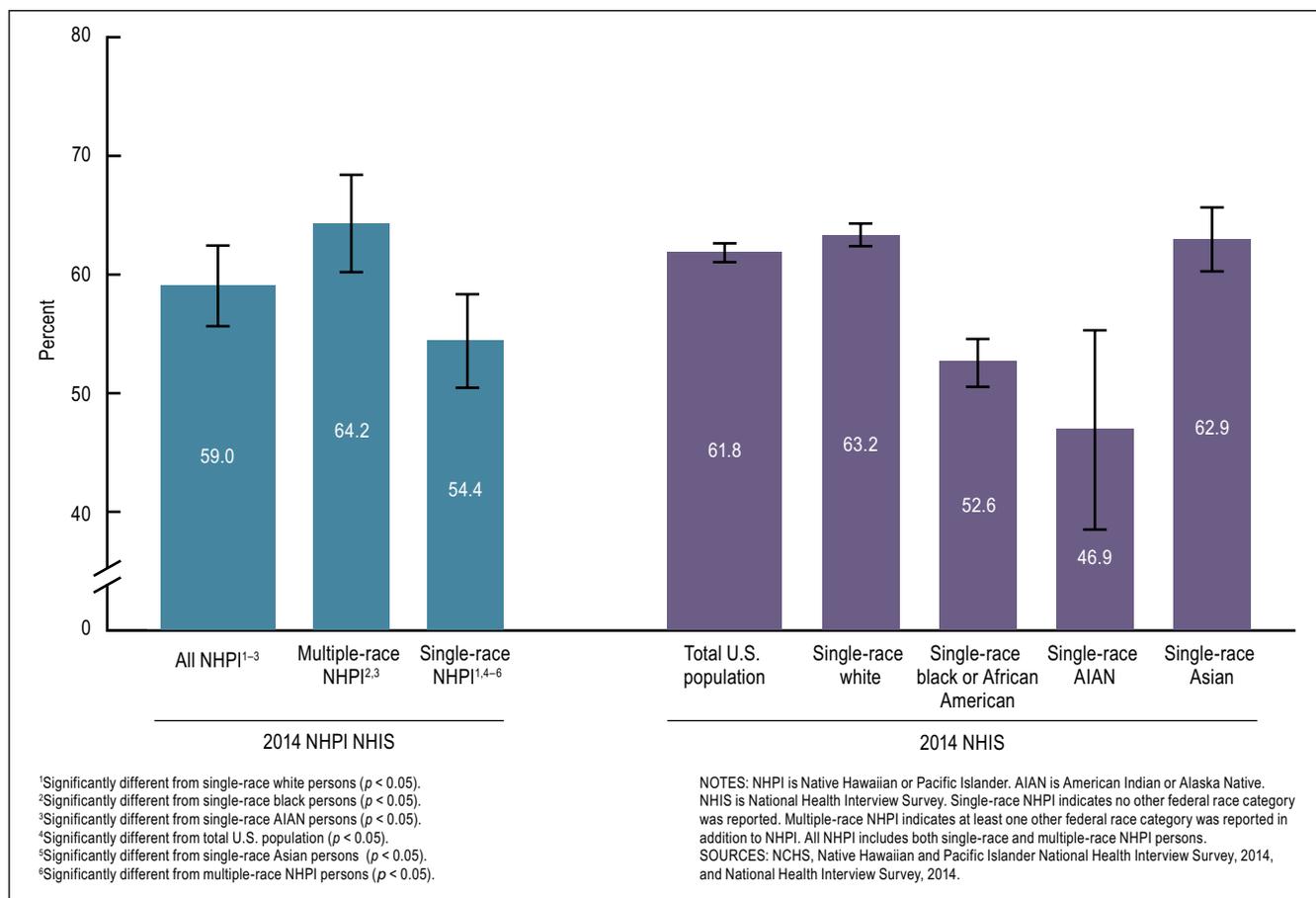
Figure 8. Age-adjusted percentage of adults aged 18 and over with unmet dental need due to cost, by Native Hawaiian and Pacific Islander detailed race: United States, 2014



- The percentage of Native Hawaiian adults with unmet dental need due to cost was 13.2%, which was higher than, but not significantly different from, the percentages among all Pacific Islander (10.9%) and Other Pacific Islander (11.6%) adults; similar to the percentage among Samoan adults (12.3%); and higher than the percentage among Guamanian or Chamorro adults (7.8%) (Figure 8, Table 4).
- The percentage of Samoan adults with unmet dental need due to cost was 12.3%, which was similar to the percentages among Native Hawaiian (13.2%) and Other Pacific Islander (11.6%) adults and higher than, but not significantly different from, the percentage among Guamanian or Chamorro adults (7.8%).
- The percentage of Guamanian or Chamorro adults with unmet dental need due to cost was 7.8%, which was lower than the percentage among Native Hawaiian adults (13.2%) and lower than, but not significantly different from, the percentages among Samoan (12.3%) and Other Pacific Islander (11.6%) adults.
- The percentage of Other Pacific Islander adults with unmet dental need due to cost was 11.6%, which was lower than, but not significantly different from, the percentages among Native Hawaiian (13.2%) and Samoan (12.3%) adults and higher than, but not significantly different from, the percentage among Guamanian or Chamorro adults (7.8%).
- The percentage of all U.S. adults with unmet dental need due to cost was 11.6%, which was lower than, but not significantly different from, the percentage among Native Hawaiian adults (13.2%); similar to the percentages among all Pacific Islander (10.9%), Samoan (12.3%), and Other Pacific Islander (11.6%) adults; and higher than the percentage among Guamanian or Chamorro adults (7.8%).

Unmet Dental Need and Length of Time Since Last Visit With Dentist—Adult

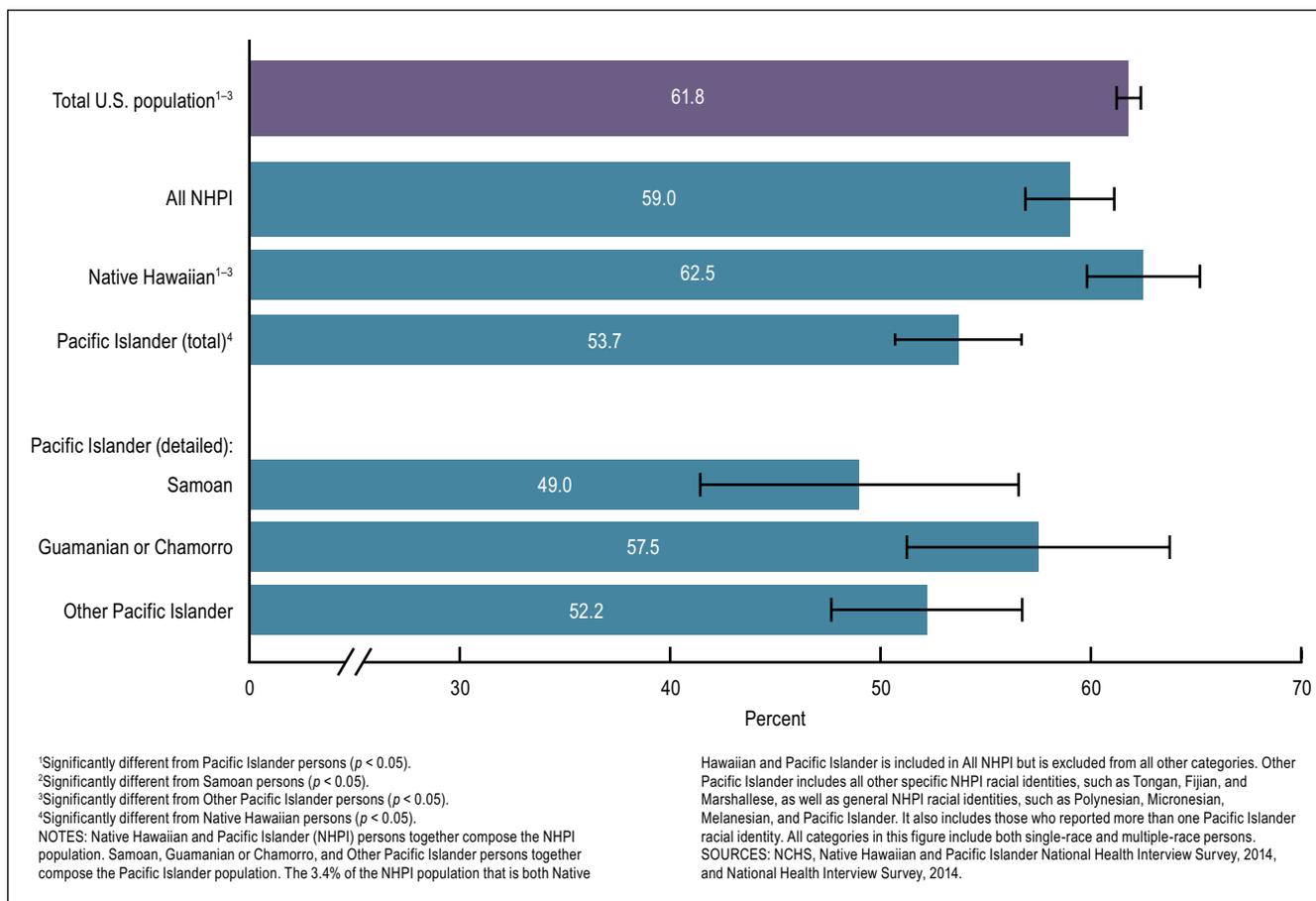
Figure 9. Age-adjusted percentage of adults aged 18 and over whose length of time since their last dental visit was 1 year or less, by race: United States, 2014



- Among all NHPI adults, the percentage whose length of time since their last dental visit was 1 year or less was 59.0%, which was higher than the percentages among black (52.6%) and AIAN (46.9%) adults; lower than the percentage among white adults (63.2%); and lower than, but not significantly different from, the percentages among all U.S. (61.8%) and Asian (62.9%) adults (Figure 9, Table 4).
- Among multiple-race NHPI adults, the percentage whose length of time since their last dental visit was 1 year or less was 64.2%, which was higher than the percentages among black (52.6%) and AIAN (46.9%) adults; higher than, but not significantly different from, the percentage among all U.S. adults (61.8%); and similar to the percentages among white (63.2%) and Asian (62.9%) adults.
- Among single-race NHPI adults, the percentage whose length of time since their last dental visit was 1 year or less was 54.4%, which was higher than, but not significantly different from, the percentages among black (52.6%) and AIAN (46.9%) adults and lower than the percentages among all U.S. (61.8%), white (63.2%), and Asian (62.9%) adults.
- The percentage of single-race NHPI adults (54.4%) whose length of time since their last dental visit was 1 year or less was lower than the percentage among multiple-race NHPI adults (64.2%).

Unmet Dental Need and Length of Time Since Last Visit With Dentist—Adult

Figure 10. Age-adjusted percentage of adults aged 18 and over whose length of time since their last dental visit was 1 year or less, by Native Hawaiian and Pacific Islander detailed race: United States, 2014



- The percentage of Native Hawaiian adults whose length of time since their last dental visit was 1 year or less was 62.5%, which was higher than the percentages among all Pacific Islander (53.7%), Samoan (49.0%), and Other Pacific Islander (52.2%) adults and higher than, but not significantly different from, the percentage among Guamanian or Chamorro adults (57.5%) (Figure 10, Table 4).
- The percentage of Samoan adults whose length of time since their last dental visit was 1 year or less was 49.0%, which was lower than the percentage among Native Hawaiian adults (62.5%) and lower than, but not significantly different from, the percentages among Guamanian or Chamorro (57.5%) and Other Pacific Islander (52.2%) adults.
- The percentage of Guamanian or Chamorro adults whose length of time since their last dental visit was 1 year or less was 57.5%, which was lower than, but not significantly different from, the percentage among Native Hawaiian adults (62.5%) and higher than, but not significantly different from, the percentages among Samoan (49.0%) and Other Pacific Islander (52.2%) adults.
- The percentage of Other Pacific Islander adults whose length of time since their last dental visit was 1 year or less was 52.2%, which was lower than the percentage among Native Hawaiian adults (62.5%); higher than, but not significantly different from, the percentage among Samoan adults (49.0%); and lower than, but not significantly different from, the percentage among Guamanian or Chamorro adults (57.5%).
- The percentage of all U.S. adults whose length of time since their last dental visit was 1 year or less was similar to the percentage among Native Hawaiian adults (62.5%); higher than the percentages among all Pacific Islander (53.7%), Samoan (49.0%), and Other Pacific Islander (52.2%) adults; and higher than, but not significantly different from, the percentage among Guamanian or Chamorro adults (57.5%).

Table 4. Crude and age-adjusted percentages of adults with unmet dental need due to cost in the past 12 months and length of time since last visit with dentist or other dental health care professional, by race including Native Hawaiian and Pacific Islander detailed race: United States, 2014

Data source and race	Had unmet dental need due to cost	1 year or less since last dental visit	More than 1 year since last dental visit	Had unmet dental need due to cost	1 year or less since last dental visit	More than 1 year since last dental visit
	Crude percent (standard error)			Age-adjusted percent (standard error)		
2014 NHIS						
U.S. total ¹	11.6 (0.26)	62.1 (0.42)	37.9 (0.42)	11.6 (0.26)	61.8 (0.42)	38.2 (0.42)
Single-race:						
White	11.3 (0.30)	63.6 (0.47)	36.4 (0.47)	11.5 (0.31)	63.2 (0.48)	36.8 (0.48)
Black or African American	14.5 (0.69)	53.2 (1.00)	46.8 (1.00)	14.2 (0.68)	52.6 (0.98)	47.4 (0.98)
American Indian or Alaska Native	13.1 (3.11)	47.4 (4.46)	52.6 (4.46)	13.1 (3.10)	46.9 (4.19)	53.1 (4.19)
Asian	7.2 (0.73)	63.5 (1.42)	36.5 (1.42)	7.2 (0.74)	62.9 (1.41)	37.1 (1.41)
2014 NHPI NHIS						
All NHPI:						
NHPI total	12.6 (0.79)	58.3 (1.70)	41.7 (1.70)	12.3 (0.71)	59.0 (1.66)	41.0 (1.66)
Native Hawaiian	13.4 (0.83)	62.2 (2.05)	37.8 (2.05)	13.2 (0.78)	62.5 (1.98)	37.5 (1.98)
Pacific Islander	11.7 (1.37)	54.0 (2.50)	46.0 (2.50)	10.9 (1.15)	53.7 (2.44)	46.3 (2.44)
Samoaan	12.3 (3.24)	49.3 (7.33)	50.7 (7.33)	12.3 (3.12)	49.0 (6.50)	51.0 (6.50)
Guamanian or Chamorro	8.6 (1.68)	58.3 (4.65)	41.7 (4.65)	7.8 (1.50)	57.5 (4.86)	42.5 (4.86)
Other Pacific Islander ²	13.4 (2.72)	54.2 (4.52)	45.8 (4.52)	11.6 (2.10)	52.2 (3.74)	47.8 (3.74)
Multiple-race NHPI ³ :						
NHPI total	12.4 (1.02)	63.9 (2.05)	36.1 (2.05)	12.3 (0.94)	64.2 (2.10)	35.8 (2.10)
Native Hawaiian	13.4 (1.15)	64.8 (2.40)	35.2 (2.40)	13.2 (1.11)	65.0 (2.39)	35.0 (2.39)
Pacific Islander	9.1 (1.64)	66.1 (4.01)	33.9 (4.01)	11.5 (2.43)	66.3 (4.34)	33.7 (4.34)
Samoaan	*9.7 (3.24)	46.5 (7.95)	53.5 (7.95)	†	†	†
Guamanian or Chamorro	*6.4 (2.00)	81.5 (3.45)	18.5 (3.45)	†	†	†
Other Pacific Islander ²	*17.6 (6.42)	74.9 (12.88)	*	†	†	†
Single-race NHPI ⁴ :						
NHPI total	12.6 (1.45)	53.6 (2.25)	46.4 (2.25)	12.3 (1.32)	54.4 (2.04)	45.6 (2.04)
Native Hawaiian	13.5 (2.54)	57.1 (3.17)	42.9 (3.17)	13.3 (2.34)	57.7 (2.83)	42.3 (2.83)
Pacific Islander	12.2 (1.54)	51.6 (3.03)	48.4 (3.03)	11.3 (1.37)	51.3 (3.00)	48.7 (3.00)
Samoaan	13.2 (3.47)	50.2 (8.78)	49.8 (8.78)	12.2 (3.22)	49.5 (7.94)	50.5 (7.94)
Guamanian or Chamorro	9.4 (2.16)	49.9 (5.57)	50.1 (5.57)	8.6 (2.06)	49.5 (5.33)	50.5 (5.33)
Other Pacific Islander ²	13.2 (2.92)	53.2 (4.54)	46.8 (4.54)	11.4 (2.27)	51.2 (3.73)	48.8 (3.73)

* Estimates are considered unreliable. Data preceded by an asterisk have a relative standard error (RSE) greater than 30% and less than or equal to 50% and should be used with caution. Data not shown have an RSE greater than 50%.

¹ Not possible to calculate; no sample in cell in one or more of the age-adjustment categories.

² Includes other races not shown separately.

³ Includes all other specific NHPI racial identities, such as Tongan, Fijian, and Marshallese, as well as general NHPI racial identities, such as Polynesian, Micronesian, Melanesian, and Pacific Islander. It also includes those who reported more than one Pacific Islander racial identity. It does not include those who indicated Native Hawaiian in addition to one or more Pacific Islander races. The racial identity Polynesian is considered Pacific Islander, not Native Hawaiian.

⁴ Indicates at least one other federal race category was reported in addition to NHPI.

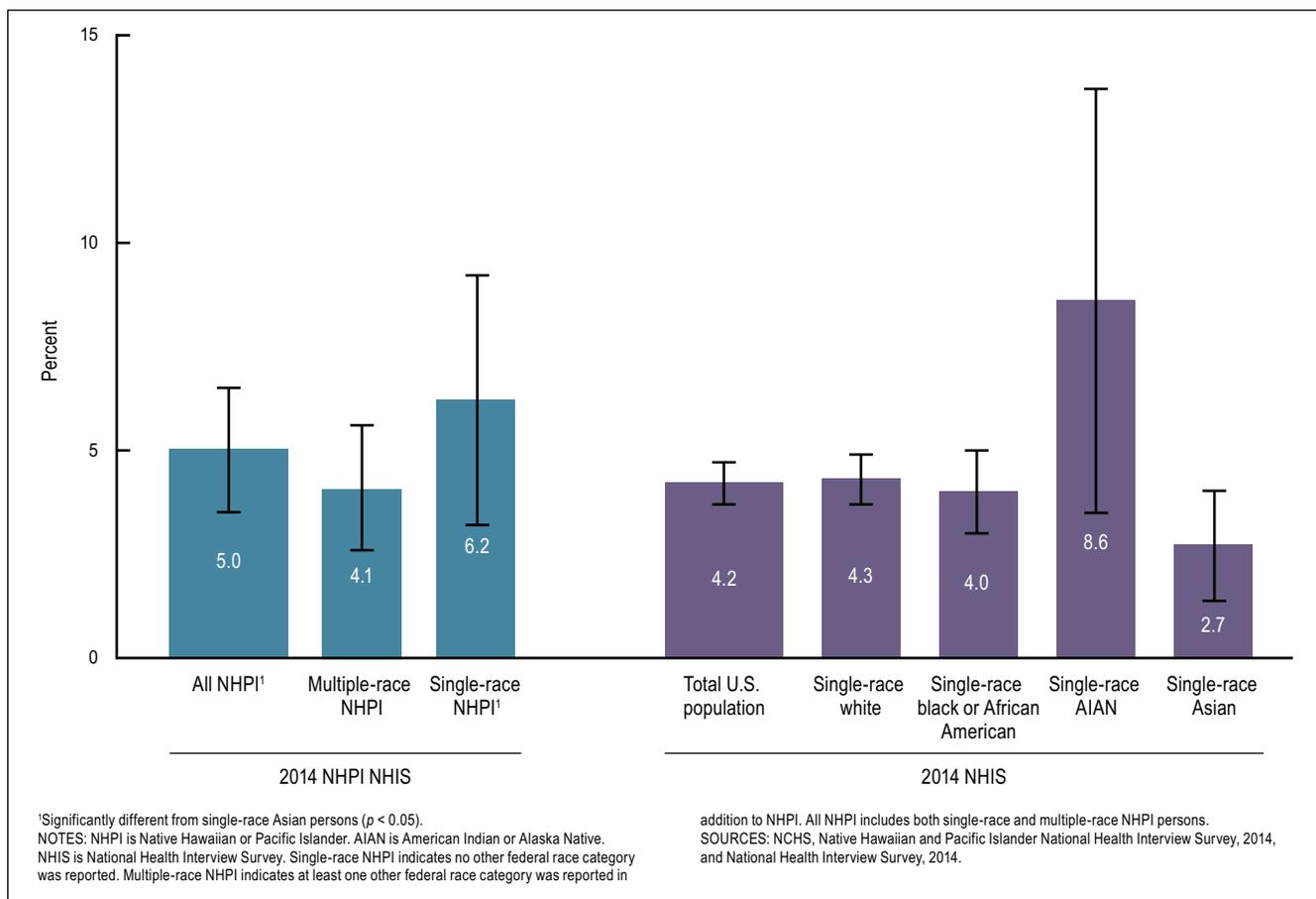
⁵ Indicates no other federal race category was reported.

NOTES: Native Hawaiian and Pacific Islander (NHPI) persons together compose the NHPI population. Samoaan, Guamanian or Chamorro, and Other Pacific Islander persons together compose the Pacific Islander population. The 3.4% of the NHPI population that is both Native Hawaiian and Pacific Islander is included in data for NHPI total under All NHPI, Multiple-race NHPI, and Single-race NHPI but is excluded from all other categories. Age-adjusted estimates are adjusted using the projected 2000 U.S. population as the standard population and four age groups: 18–44, 45–64, 65–74, and 75 and over. NHIS is National Health Interview Survey.

SOURCES: NCHS, Native Hawaiian and Pacific Islander National Health Interview Survey, 2014, and National Health Interview Survey, 2014.

Unmet Dental Need and Length of Time Since Last Visit With Dentist—Child

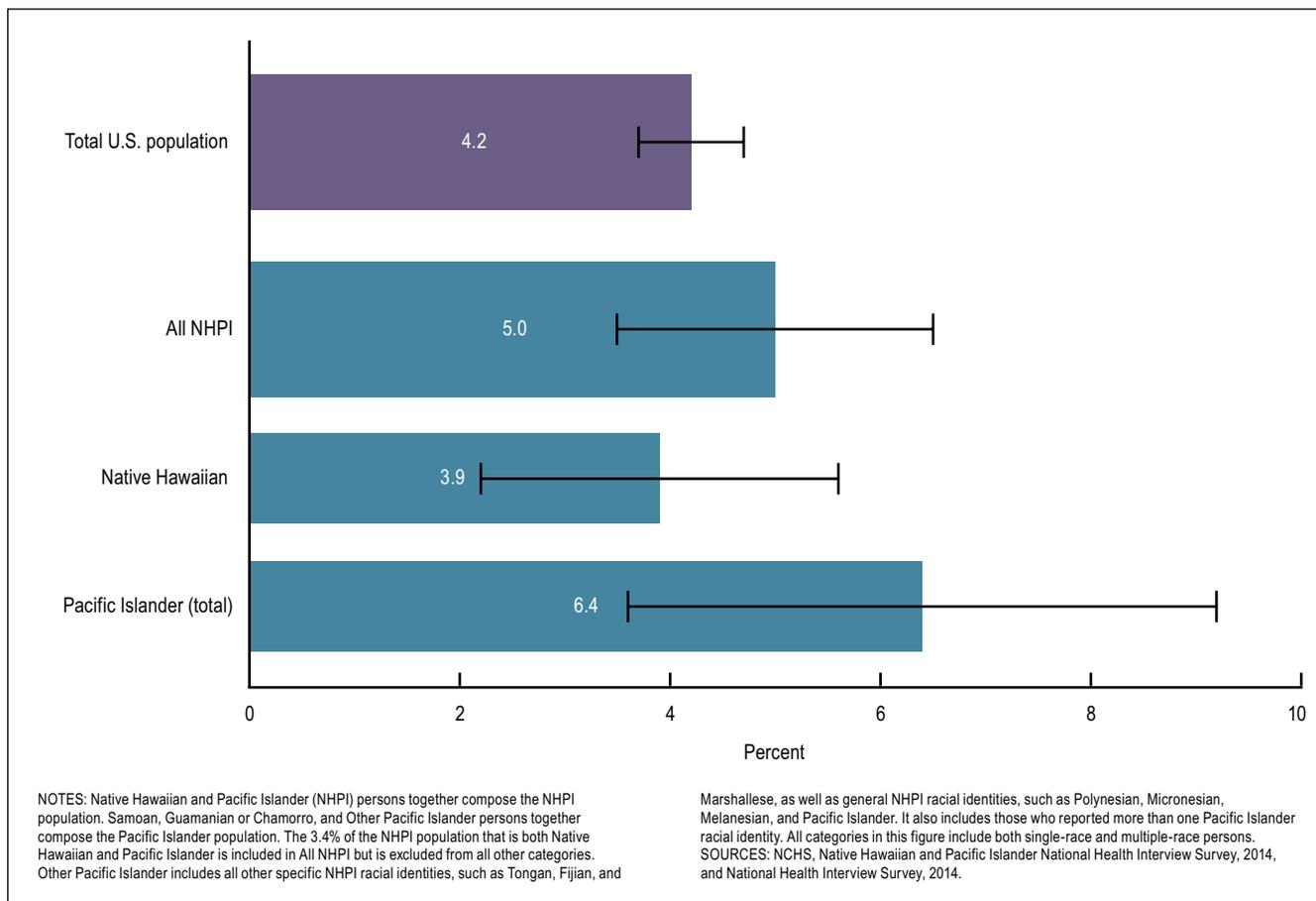
Figure 11. Age-adjusted percentage of children aged 2–17 years with unmet dental need due to cost, by race: United States, 2014



- Among all NHPI children aged 2–17 years, the percentage with unmet dental need due to cost was 5.0%, which was higher than, but not significantly different from, the percentages among all U.S. (4.2%), white (4.3%), and black (4.0%) children; lower than, but not significantly different from, the percentage among AIAN children (8.6%); and higher than the percentage among Asian children (2.7%) (Figure 11, Table 5).
- Among multiple-race NHPI children aged 2–17 years, the percentage with unmet dental need due to cost was 4.1%, which was similar to the percentages among all U.S. (4.2%), white (4.3%), black (4.0%), and Asian (2.7%) children and lower than, but not significantly different from, the percentage among AIAN children (8.6%).
- Among single-race NHPI children aged 2–17 years, the percentage with unmet dental need due to cost was 6.2%, which was higher than, but not significantly different from, the percentages among all U.S. (4.2%), white (4.3%), and black (4.0%) children; higher than the percentage among Asian children (2.7%); and lower than, but not significantly different from, the percentage among AIAN children (8.6%).
- The percentage of single-race NHPI children with unmet dental need due to cost (6.2%) was higher than, but not significantly different from, the percentage among multiple-race NHPI children (4.1%).

Unmet Dental Need and Length of Time Since Last Visit With Dentist—Child

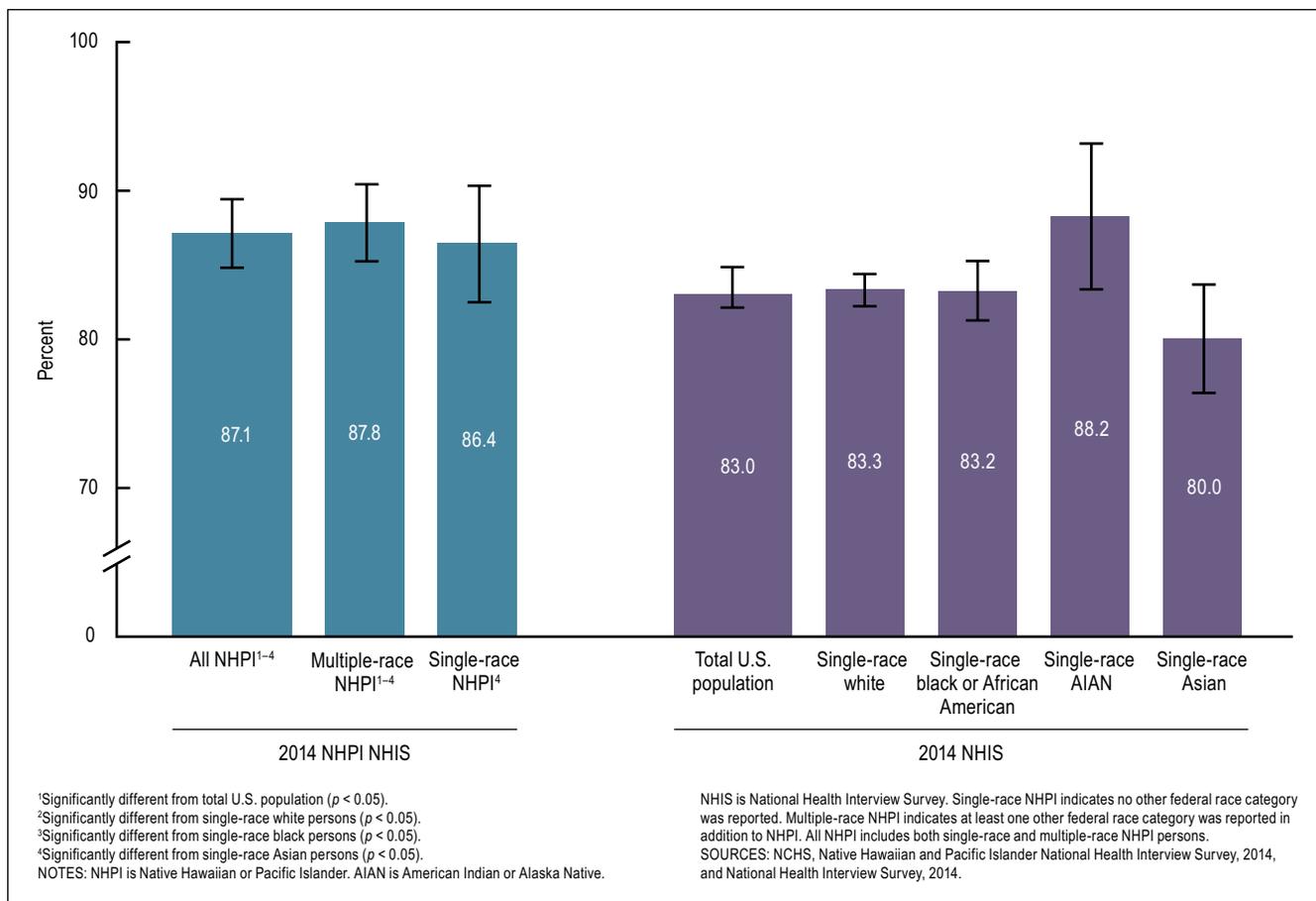
Figure 12. Age-adjusted percentage of children aged 2–17 years with unmet dental need due to cost, by Native Hawaiian and Pacific Islander detailed race: United States, 2014



- The percentage of Native Hawaiian children aged 2–17 years with an unmet dental need due to cost was 3.9%, which was lower than, but not significantly different from, the percentage among all Pacific Islander children (6.4%) (Figure 12, Table 5).
- The percentage of all U.S. children aged 2–17 years with an unmet dental need due to cost was 4.2%, which was similar to the percentage among Native Hawaiian children (3.9%) and lower than, but not significantly different from, the percentage among all Pacific Islander children (6.4%).

Unmet Dental Need and Length of Time Since Last Visit With Dentist—Child

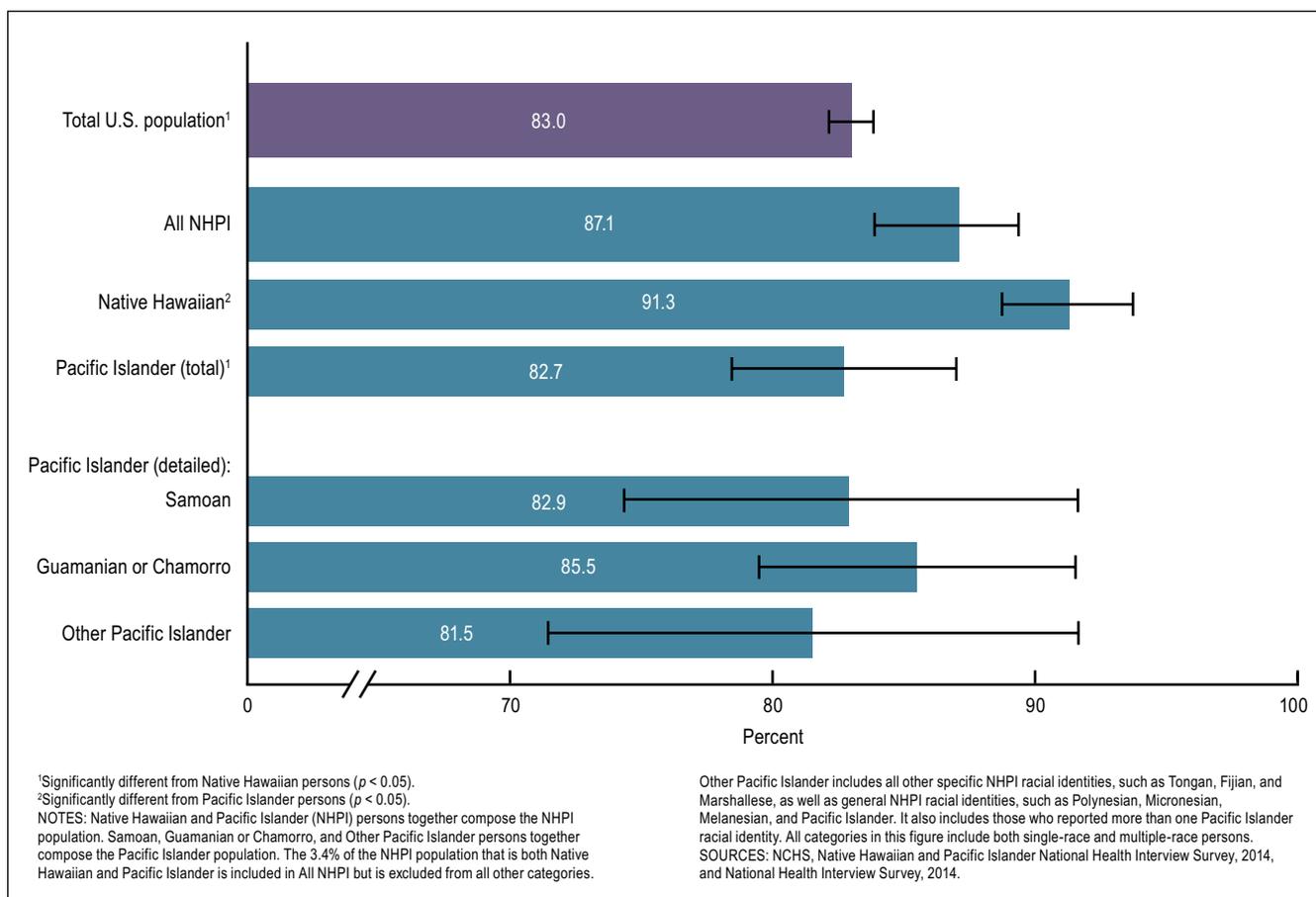
Figure 13. Age-adjusted percentage of children aged 2–17 years whose length of time since their last visit with the dentist was 1 year or less, by race: United States, 2014



- Among all NHPI children aged 2–17 years, the percentage whose length of time since their last dental visit was 1 year or less was 87.1%, which was higher than the percentages among all U.S. (83.0%), white (83.3%), black (83.2%), and Asian (80.0%) children and similar to the percentage among AIAN children (88.2%) (Figure 13, Table 5).
- Among multiple-race NHPI children aged 2–17 years, the percentage whose length of time since their last dental visit was 1 year or less was 87.8%, which was higher than the percentages among all U.S. (83.0%), white (83.3%), black (83.2%), and Asian (80.0%) children and similar to the percentage among AIAN children (88.2%).
- Among single-race NHPI children aged 2–17 years, the percentage whose length of time since their last dental visit was 1 year or less was 86.4%, which was higher than, but not significantly different from, the percentages among all U.S. (83.0%), white (83.3%), and black (83.2%) children; higher than the percentage among Asian children (80.0%); and lower than, but not significantly different from, the percentage among AIAN children (88.2%).
- The percentage of single-race NHPI children whose length of time since their last dental visit was 1 year or less (86.4%) was similar to the percentage among multiple-race NHPI children (87.8%).

Unmet Dental Need and Length of Time Since Last Visit With Dentist—Child

Figure 14. Age-adjusted percentage of children aged 2–17 years whose length of time since their last visit with the dentist was 1 year or less, by Native Hawaiian and Pacific Islander detailed race: United States, 2014



- The percentage of Native Hawaiian children aged 2–17 years whose length of time since their last dental visit was 1 year or less was 91.3%, which was higher than the percentage among all Pacific Islander children (82.7%) and higher than, but not significantly different from, the percentages among Samoan (82.9%), Guamanian or Chamorro (85.5%), and Other Pacific Islander (81.5%) children (Figure 14, Table 5).
- The percentage of Samoan children aged 2–17 years whose length of time since their last dental visit was 1 year or less was 82.9%, which was lower than, but not significantly different from, the percentages among Native Hawaiian (91.3%) and Guamanian or Chamorro (85.5%) children and similar to the percentage among Other Pacific Islander children (81.5%).
- The percentage of Guamanian or Chamorro children aged 2–17 years whose length of time since their last dental visit was 1 year or less was 85.5%, which was lower than, but not significantly different from, the percentage among Native Hawaiian children (91.3%) and higher than, but not significantly different from, the percentages among Samoan (82.9%) and Other Pacific Islander (81.5%) children.
- The percentage of Other Pacific Islander children aged 2–17 years whose length of time since their last dental visit was 1 year or less was 81.5%, which was lower than, but not significantly different from, the percentages among Native Hawaiian (91.3%), Samoan (82.9%), and Guamanian or Chamorro (85.5%) children.
- The percentage of all U.S. children aged 2–17 years whose length of time since their last dental visit was 1 year or less was 83.0%, which was lower than the percentage among Native Hawaiian children (91.3%); similar to the percentages among Samoan (82.9%) and Other Pacific Islander (81.5%) children; and lower than, but not significantly different from, the percentage among Guamanian or Chamorro children (85.5%).

Table 5. Crude and age-adjusted percentages of children aged 2–17 years with unmet dental need due to cost in the past 12 months and length of time since last visit with dentist or other dental health care professional, by race including Native Hawaiian and Pacific Islander detailed race: United States, 2014

Data source and race	Had unmet dental need due to cost	1 year or less since last dental visit	More than 1 year since last dental visit	Had unmet dental need due to cost	1 year or less since last dental visit	More than 1 year since last dental visit
	Crude percent (standard error)			Age-adjusted percent (standard error)		
2014 NHIS						
U.S. total ¹	4.2 (0.24)	83.0 (0.47)	17.0 (0.47)	4.2 (0.24)	83.0 (0.46)	17.0 (0.46)
Single-race:						
White	4.4 (0.31)	83.4 (0.55)	16.6 (0.55)	4.3 (0.31)	83.3 (0.55)	16.7 (0.55)
Black or African American	4.0 (0.50)	83.0 (1.07)	17.0 (1.07)	4.0 (0.50)	83.2 (1.01)	16.8 (1.01)
American Indian or Alaska Native	*8.5 (2.76)	88.6 (2.82)	11.4 (2.82)	*8.6 (2.60)	88.2 (2.48)	11.8 (2.48)
Asian	2.6 (0.66)	78.9 (2.00)	21.1 (2.00)	2.7 (0.68)	80.0 (1.88)	20.0 (1.88)
2014 NHPI NHIS						
All NHPI:						
NHPI total	4.8 (0.69)	86.6 (1.16)	13.4 (1.16)	5.0 (0.74)	87.1 (1.13)	12.9 (1.13)
Native Hawaiian	3.7 (0.77)	91.0 (1.35)	9.0 (1.35)	3.9 (0.86)	91.3 (1.26)	8.7 (1.26)
Pacific Islander	6.4 (1.36)	82.0 (2.23)	18.0 (2.23)	6.4 (1.44)	82.7 (2.20)	17.3 (2.20)
Samoan	8.7 (2.30)	81.9 (5.06)	18.1 (5.06)	9.0 (2.70)	82.9 (4.43)	17.1 (4.43)
Guamanian or Chamorro	*	84.1 (4.16)	15.9 (4.16)	*	85.5 (3.05)	14.5 (3.05)
Other Pacific Islander ²	7.7 (2.11)	81.1 (5.23)	18.9 (5.23)	7.9 (2.28)	81.5 (5.13)	18.5 (5.13)
Multiple-race NHPI ³ :						
NHPI total	3.8 (0.64)	86.5 (1.60)	13.5 (1.60)	4.1 (0.76)	87.8 (1.35)	12.2 (1.35)
Native Hawaiian	4.7 (1.03)	89.2 (1.80)	10.8 (1.80)	4.9 (1.13)	89.9 (1.63)	10.1 (1.63)
Pacific Islander	*2.4 (1.00)	81.2 (3.48)	18.8 (3.48)	*2.3 (0.96)	84.9 (2.49)	15.1 (2.49)
Samoan	*	83.8 (4.96)	*16.2 (4.96)	*	85.1 (4.92)	*14.9 (4.92)
Guamanian or Chamorro	—	84.5 (7.72)	*15.5 (7.72)	—	88.1 (3.75)	*11.9 (3.75)
Other Pacific Islander ²	*8.3 (3.48)	72.5 (9.53)	*27.5 (9.53)	*7.2 (2.98)	80.8 (4.35)	19.2 (4.35)
Single-race NHPI ⁴ :						
NHPI total	6.4 (1.66)	86.8 (1.98)	13.2 (1.98)	6.2 (1.55)	86.4 (2.00)	13.6 (2.00)
Native Hawaiian	*	95.9 (1.71)	*4.1 (1.71)	*	96.1 (1.52)	*3.9 (1.52)
Pacific Islander	9.0 (2.27)	82.5 (2.83)	17.5 (2.83)	9.0 (2.21)	82.5 (2.81)	17.5 (2.81)
Samoan	15.9 (4.73)	80.1 (9.33)	*19.9 (9.33)	*16.3 (4.90)	80.8 (7.52)	*19.2 (7.52)
Guamanian or Chamorro	*	83.3 (6.09)	*16.7 (6.09)	*	81.5 (6.70)	*18.5 (6.70)
Other Pacific Islander ²	*7.6 (2.61)	83.4 (4.95)	16.6 (4.95)	*7.8 (2.71)	82.9 (4.85)	17.1 (4.85)

* Estimates are considered unreliable. Data preceded by an asterisk have a relative standard error (RSE) greater than 30% and less than or equal to 50% and should be used with caution. Data not shown have an RSE greater than 50%.

— Quantity zero.

¹Includes other races not shown separately.

²Includes all other specific NHPI racial identities, such as Tongan, Fijian, and Marshallese, as well as general NHPI racial identities, such as Polynesian, Micronesian, Melanesian, and Pacific Islander. It also includes those who reported more than one Pacific Islander racial identity. It does not include those who indicated Native Hawaiian in addition to one or more Pacific Islander races. The racial identity Polynesian is considered Pacific Islander, not Native Hawaiian.

³Indicates at least one other federal race category was reported in addition to NHPI.

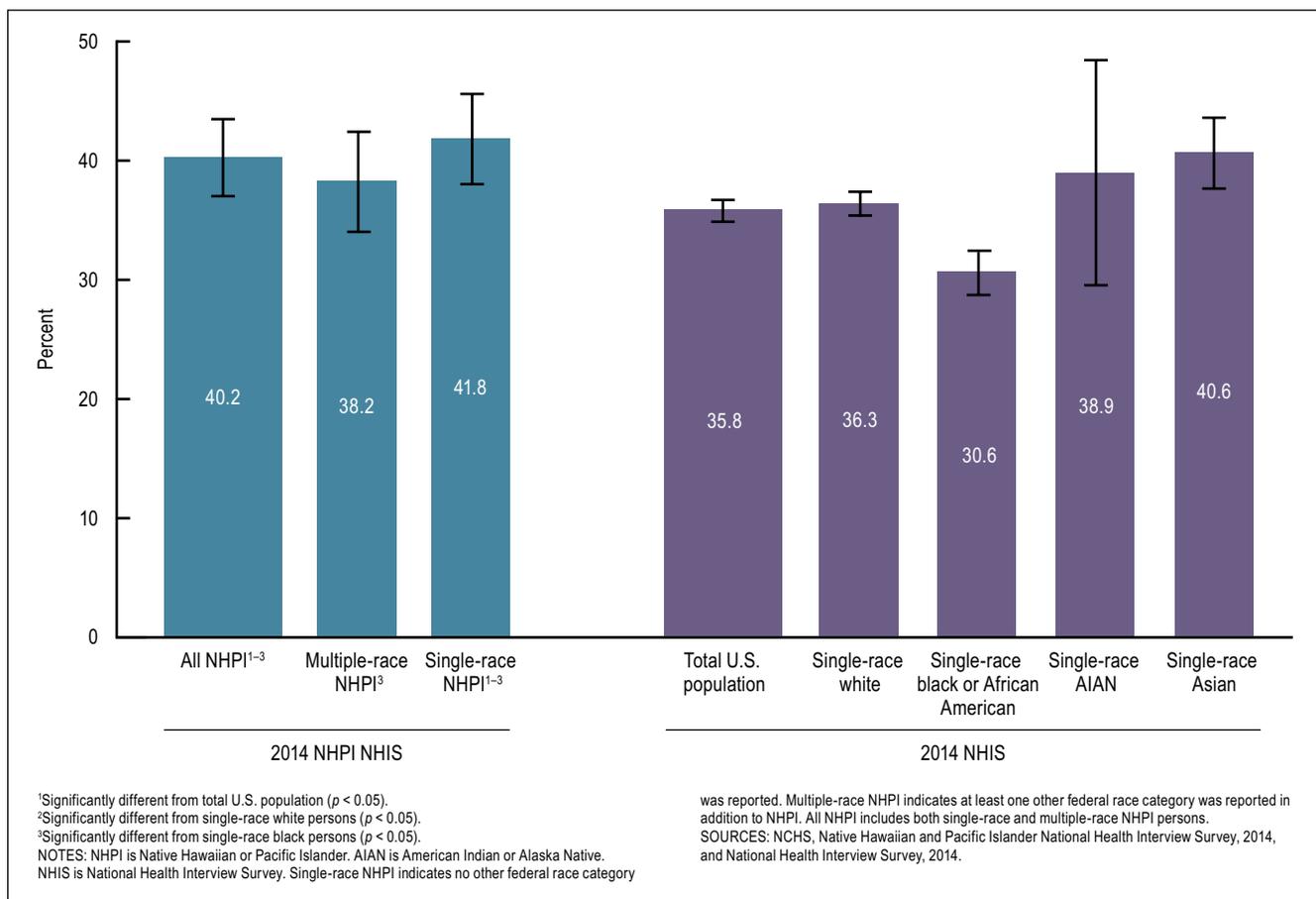
⁴Indicates no other federal race category was reported.

NOTES: Native Hawaiian and Pacific Islander (NHPI) persons together compose the NHPI population. Samoan, Guamanian or Chamorro, and Other Pacific Islander persons together compose the Pacific Islander population. The 3.4% of the NHPI population that is both Native Hawaiian and Pacific Islander is included in data for NHPI total under All NHPI, Multiple-race NHPI, and Single-race NHPI but is excluded from all other categories. Age-adjusted estimates are adjusted using the projected 2000 U.S. population as the standard population and three age groups: 2–4, 5–11, and 12–17. NHIS is National Health Interview Survey.

SOURCES: NCHS, Native Hawaiian and Pacific Islander National Health Interview Survey, 2014, and National Health Interview Survey, 2014.

Receipt of Influenza Vaccination—Adult

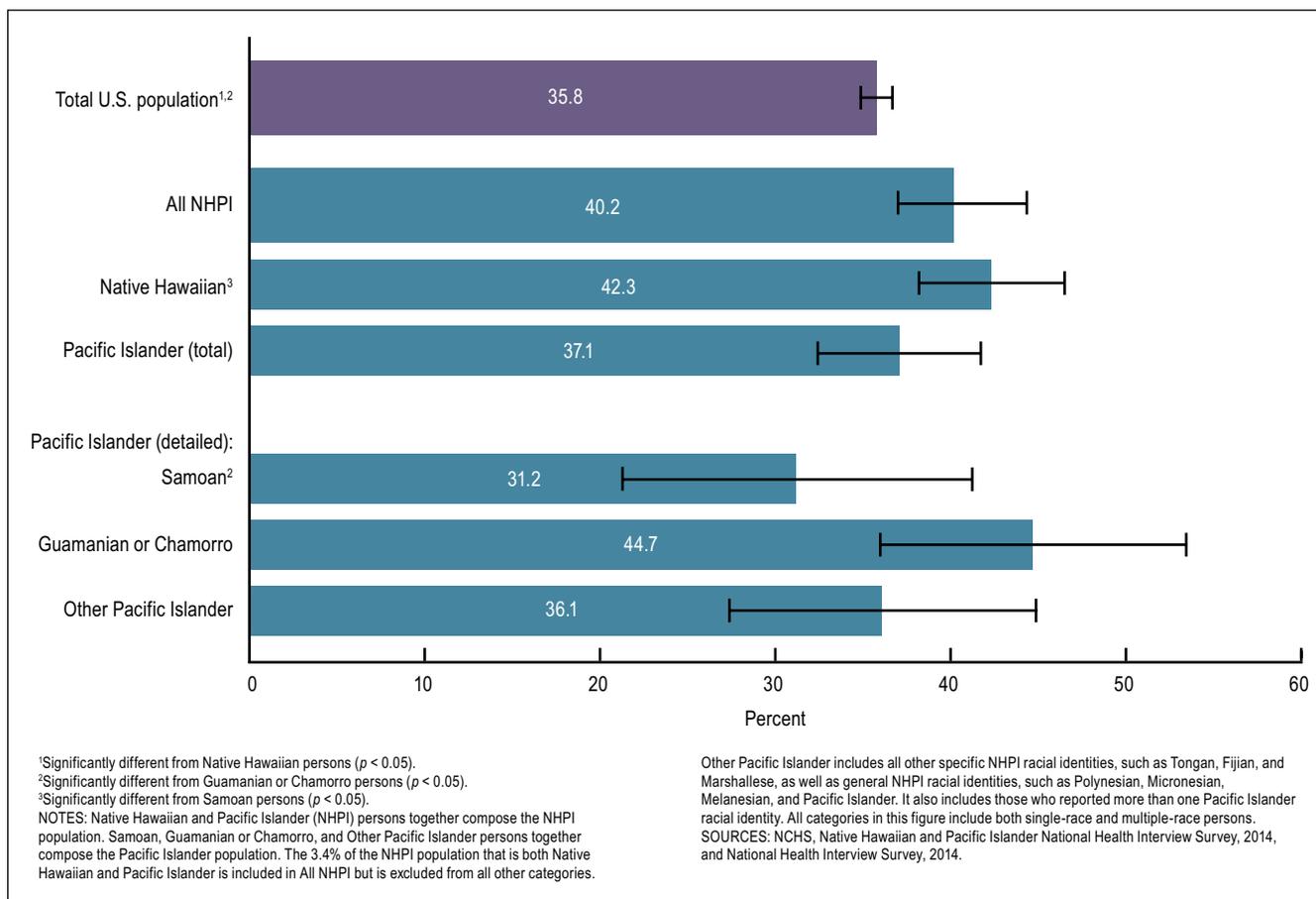
Figure 15. Percentage of adults aged 18–64 who had received an influenza vaccination during the past 12 months, by race: United States, 2014



- Among all NHPI adults aged 18–64, the percentage who had received an influenza vaccination during the past 12 months was 40.2%, which was similar to the percentages among AIAN (38.9%) and Asian (40.6%) adults and higher than the percentages among all U.S. (35.8%), white (36.3%), and black (30.6%) adults (Figure 15, Table 6).
- Among multiple-race NHPI adults aged 18–64, the percentage who had received an influenza vaccination during the past 12 months was 38.2%, which was similar to the percentage among AIAN adults (38.9%); lower than, but not significantly different from, the percentage among Asian adults (40.6%); higher than, but not significantly different from, the percentages among all U.S. (35.8%) and white (36.3%) adults; and higher than the percentage among black adults (30.6%).
- Among single-race NHPI adults aged 18–64, the percentage who had received an influenza vaccination during the past 12 months was 41.8%, which was higher than the percentages among all U.S. (35.8%), white (36.3%), and black (30.6%) adults; higher than, but not significantly different from, the percentage among AIAN adults (38.9%); and similar to the percentage among Asian adults (40.6%).
- The percentage of single-race NHPI adults who had received an influenza vaccination during the past 12 months (41.8%) was higher than, but not significantly different from, multiple-race NHPI adults (38.2%).

Receipt of Influenza Vaccination—Adult

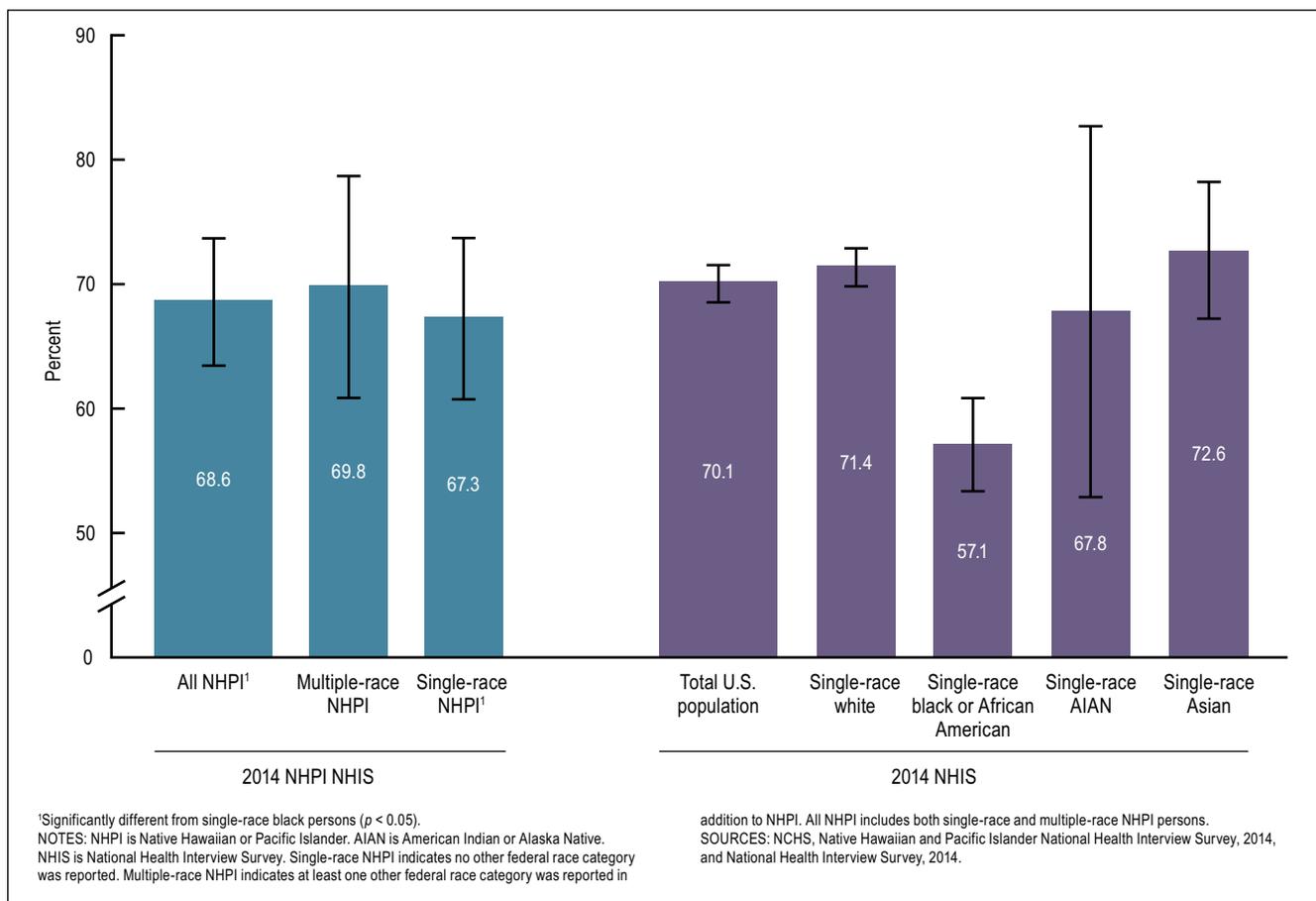
Figure 16. Percentage of adults aged 18–64 who had received an influenza vaccination during the past 12 months, by Native Hawaiian and Pacific Islander detailed race: United States, 2014



- The percentage of Native Hawaiian adults aged 18–64 who had received an influenza vaccination during the past 12 months was 42.3%, which was higher than, but not significantly different from, the percentages among all Pacific Islander (37.1%) and Other Pacific Islander (36.1%) adults; higher than the percentage among Samoan adults (31.2%); and lower than, but not significantly different from, the percentage among Guamanian or Chamorro adults (44.7%) (Figure 16, Table 6).
- The percentage of Samoan adults aged 18–64 who had received an influenza vaccination during the past 12 months was 31.2%, which was lower than the percentages among Native Hawaiian (42.3%) and Guamanian or Chamorro (44.7%) adults and lower than, but not significantly different from, the percentage among Other Pacific Islander adults (36.1%).
- The percentage of Guamanian or Chamorro adults aged 18–64 who had received an influenza vaccination during the past 12 months was 44.7%, which was higher than the percentage among Samoan adults (31.2%) and higher than, but not significantly different from, the percentages among Native Hawaiian (42.3%) and Other Pacific Islander (36.1%) adults.
- The percentage of Other Pacific Islander adults aged 18–64 who had received an influenza vaccination during the past 12 months was 36.1%, which was higher than, but not significantly different from, the percentage among Samoan adults (31.2%) and lower than, but not significantly different from, the percentages among Native Hawaiian (42.3%) and Guamanian or Chamorro (44.7%) adults.
- The percentage of all U.S. adults aged 18–64 who had received an influenza vaccination during the past 12 months was 35.8%, which was lower than the percentages among Native Hawaiian (42.3%) and Guamanian or Chamorro (44.7%) adults; similar to the percentages among all Pacific Islander (37.1%) and Other Pacific Islander (36.1%) adults; and higher than, but not significantly different from, the percentage among Samoan adults (31.2%).

Receipt of Influenza Vaccination—Older Adult

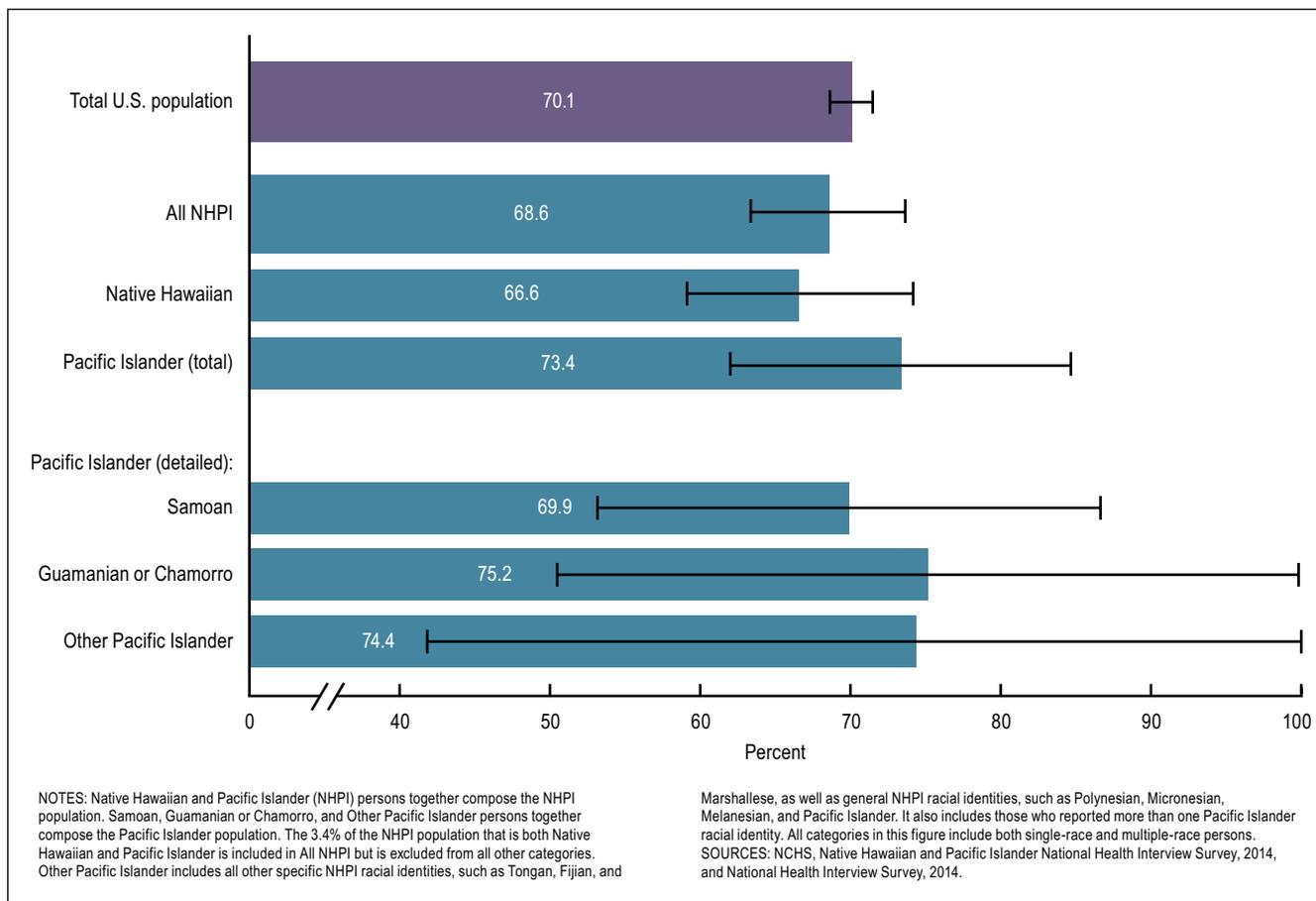
Figure 17. Percentage of adults aged 65 and over who had received an influenza vaccination during the past 12 months, by race: United States, 2014



- Among all NHPI adults aged 65 and over, the percentage who had received an influenza vaccination during the past 12 months was 68.6%, which was similar to the percentage among AIAN adults (67.8%); higher than the percentage among black adults (57.1%); and lower than, but not significantly different from, the percentages among all U.S. (70.1%), white (71.4%), and Asian (72.6%) adults (Figure 17, Table 6).
- Among multiple-race NHPI adults aged 65 and over, the percentage who had received an influenza vaccination during the past 12 months was 69.8%, which was similar to the percentage among all U.S. adults (70.1%); higher than the percentages among black (57.1%) and AIAN (67.8%) adults; and lower than, but not significantly different from, the percentages among white (71.4%) and Asian (72.6%) adults.
- Among single-race NHPI adults aged 65 and over, the percentage who had received an influenza vaccination during the past 12 months was 67.3%, which was similar to the percentage among AIAN adults (67.8%); higher than the percentage among black adults (57.1%); and lower than, but not significantly different from, the percentages among all U.S. (70.1%), white (71.4%), and Asian (72.6%) adults.
- The percentage of single-race NHPI adults aged 65 and over who had received an influenza vaccination during the past 12 months (67.3%) was lower than, but not significantly different from, the percentage among multiple-race NHPI adults (69.8%).

Receipt of Influenza Vaccination—Older Adult

Figure 18. Percentage of adults aged 65 and over who had received an influenza vaccination during the past 12 months, by Native Hawaiian and Pacific Islander detailed race: United States, 2014



- The percentage of Native Hawaiian adults aged 65 and over who had received an influenza vaccination during the past 12 months was 66.6%, which was lower than, but not significantly different from, the percentages among all Pacific Islander (73.4%), Samoan (69.9%), Guamanian or Chamorro (75.2%), and Other Pacific Islander (74.4%) adults (Figure 18, Table 6).
- The percentage of Samoan adults aged 65 and over who had received an influenza vaccination during the past 12 months was 69.9%, which was higher than, but not significantly different from, the percentage among Native Hawaiian adults (66.6%) and lower than, but not significantly different from, the percentages among Guamanian or Chamorro (75.2%) and Other Pacific Islander (74.4%) adults.
- The percentage of Guamanian or Chamorro adults aged 65 and over who had received an influenza vaccination during the past 12 months was 75.2%, which was higher than, but not significantly different from, the percentages among Native Hawaiian (66.6%) and Samoan (69.9%) adults and similar to the percentage among Other Pacific Islander adults (74.4%).
- The percentage of Other Pacific Islander adults aged 65 and over who had received an influenza vaccination during the past 12 months was 74.4%, which was higher than, but not significantly different from, the percentages among Native Hawaiian (66.6%) and Samoan (69.9%) adults and similar to the percentage among Guamanian or Chamorro adults (75.2%).
- The percentage of all U.S. adults aged 65 and over who had received an influenza vaccination during the past 12 months was 70.1%, which was higher than, but not significantly different from, the percentage among Native Hawaiian adults (66.6%); lower than, but not significantly different from, the percentages among all Pacific Islander (73.4%), Guamanian or Chamorro (75.2%), and Other Pacific Islander (74.4%) adults; and similar to the percentage among Samoan adults (69.9%).

Table 6. Percentage of adults aged 18 and over who had received an influenza vaccination during the past 12 months, by age group and race including Native Hawaiian and Pacific Islander detailed race: United States, 2014

Data source and race	18–65	18–49	50–64	65 and over
	Crude percent (standard error)			
2014 NHIS				
U.S. total ¹	35.8 (0.45)	31.3 (0.51)	45.4 (0.75)	70.1 (0.69)
Single-race:				
White	36.3 (0.51)	31.4 (0.59)	46.4 (0.84)	71.4 (0.75)
Black or African American	30.6 (0.94)	27.4 (1.13)	38.3 (1.65)	57.1 (1.94)
American Indian or Alaska Native	38.9 (4.80)	36.0 (5.80)	46.8 (7.14)	67.8 (7.60)
Asian	40.6 (1.55)	37.9 (1.76)	48.1 (3.15)	72.6 (2.83)
2014 NHPI NHIS				
All NHPI:				
NHPI total	40.2 (1.64)	36.1 (1.93)	54.7 (2.52)	68.6 (2.65)
Native Hawaiian	42.3 (2.13)	39.0 (2.59)	52.4 (2.34)	66.6 (3.82)
Pacific Islander	37.1 (2.38)	31.9 (3.20)	58.8 (4.63)	73.4 (5.84)
Samoan	31.2 (5.11)	24.9 (5.39)	53.6 (13.41)	69.9 (8.59)
Guamanian or Chamorro	44.7 (4.42)	40.5 (7.07)	56.9 (9.74)	75.2 (12.59)
Other Pacific Islander ²	36.1 (4.51)	31.2 (4.40)	66.1 (7.53)	74.4 (16.59)
Multiple-race NHPI ³ :				
NHPI total	38.2 (2.13)	35.4 (2.77)	49.4 (3.52)	69.8 (4.53)
Native Hawaiian	39.1 (2.08)	35.7 (2.86)	50.4 (3.67)	68.9 (4.78)
Pacific Islander	30.0 (6.21)	28.8 (6.69)	*45.5 (15.76)	75.1 (17.26)
Samoan	24.3 (6.44)	*22.8 (6.88)	*39.7 (17.71)	*
Guamanian or Chamorro	*41.5 (12.73)	*40.7 (13.30)	*53.6 (18.04)	100.0 (0.00)
Other Pacific Islander ²	*6.8 (3.03)	*	*	—
Single-race NHPI ⁴ :				
NHPI total	41.8 (1.96)	36.8 (2.49)	58.4 (3.55)	67.3 (3.32)
Native Hawaiian	48.2 (3.43)	45.5 (3.96)	55.7 (4.68)	62.7 (7.36)
Pacific Islander	38.6 (2.68)	32.7 (3.86)	59.7 (4.88)	73.3 (6.12)
Samoan	33.7 (5.38)	25.9 (5.82)	55.3 (14.86)	70.6 (9.12)
Guamanian or Chamorro	45.9 (4.73)	40.4 (9.21)	57.1 (10.44)	73.2 (13.42)
Other Pacific Islander ²	37.6 (4.78)	32.6 (4.67)	66.3 (7.60)	76.0 (16.96)

* Estimates are considered unreliable. Data preceded by an asterisk have a relative standard error (RSE) greater than 30% and less than or equal to 50% and should be used with caution. Data not shown have an RSE greater than 50%.

— Quantity zero.

¹Includes other races not shown separately.

²Includes all other specific NHPI racial identities, such as Tongan, Fijian, and Marshallese, as well as general NHPI racial identities, such as Polynesian, Micronesian, Melanesian, and Pacific Islander. It also includes those who reported more than one Pacific Islander racial identity. It does not include those who indicated Native Hawaiian in addition to one or more Pacific Islander races. The racial identity Polynesian is considered Pacific Islander, not Native Hawaiian.

³Indicates at least one other federal race category was reported in addition to NHPI.

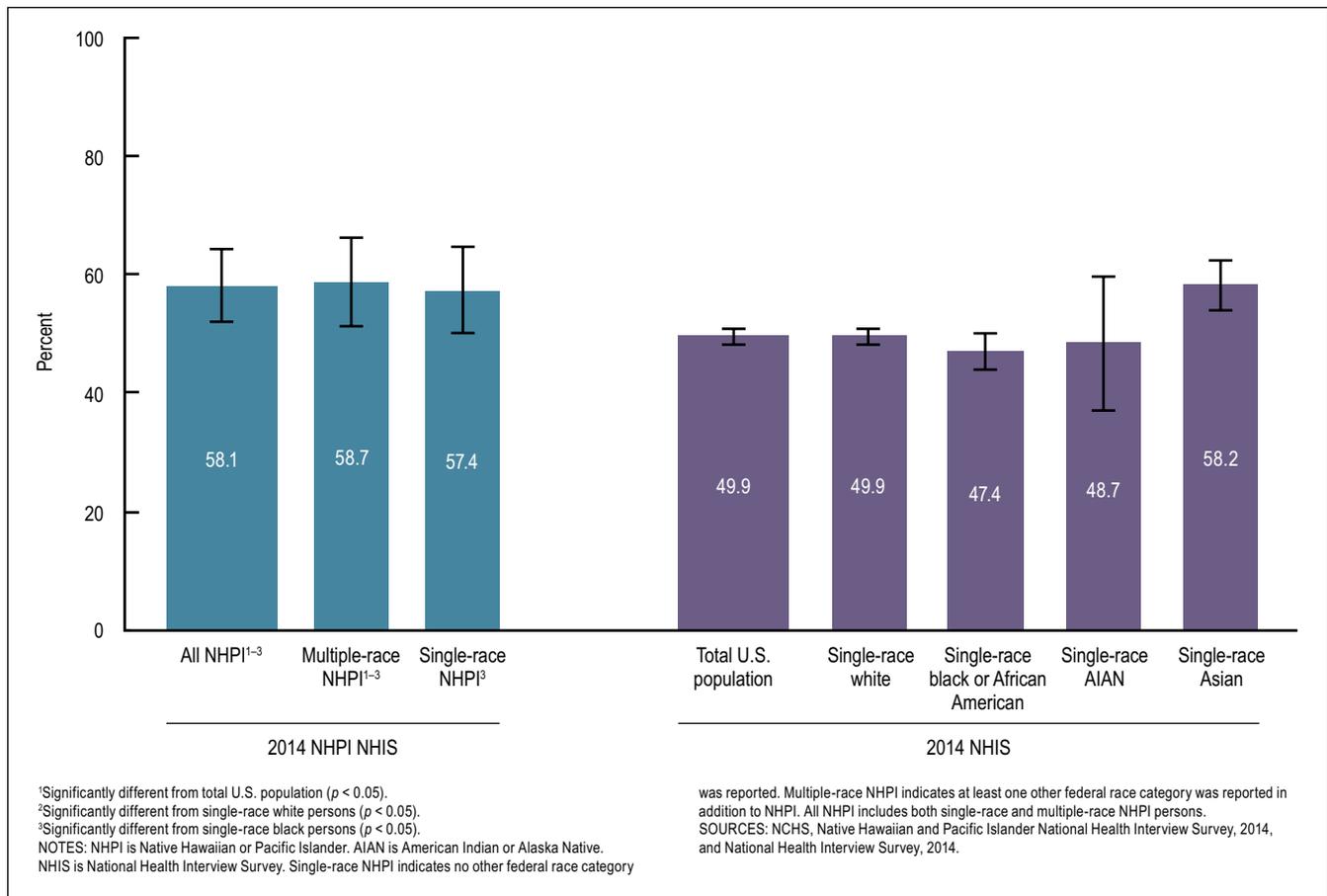
⁴Indicates no other federal race category was reported.

NOTES: Native Hawaiian and Pacific Islander (NHPI) persons together compose the NHPI population. Samoan, Guamanian or Chamorro, and Other Pacific Islander persons together compose the Pacific Islander population. The 3.4% of the NHPI population that is both Native Hawaiian and Pacific Islander is included in data for NHPI total under All NHPI, Multiple-race NHPI, and Single-race NHPI but is excluded from all other categories. NHIS is National Health Interview Survey.

SOURCES: NCHS, Native Hawaiian and Pacific Islander National Health Interview Survey, 2014, and National Health Interview Survey, 2014.

Receipt of Influenza Vaccination—Child

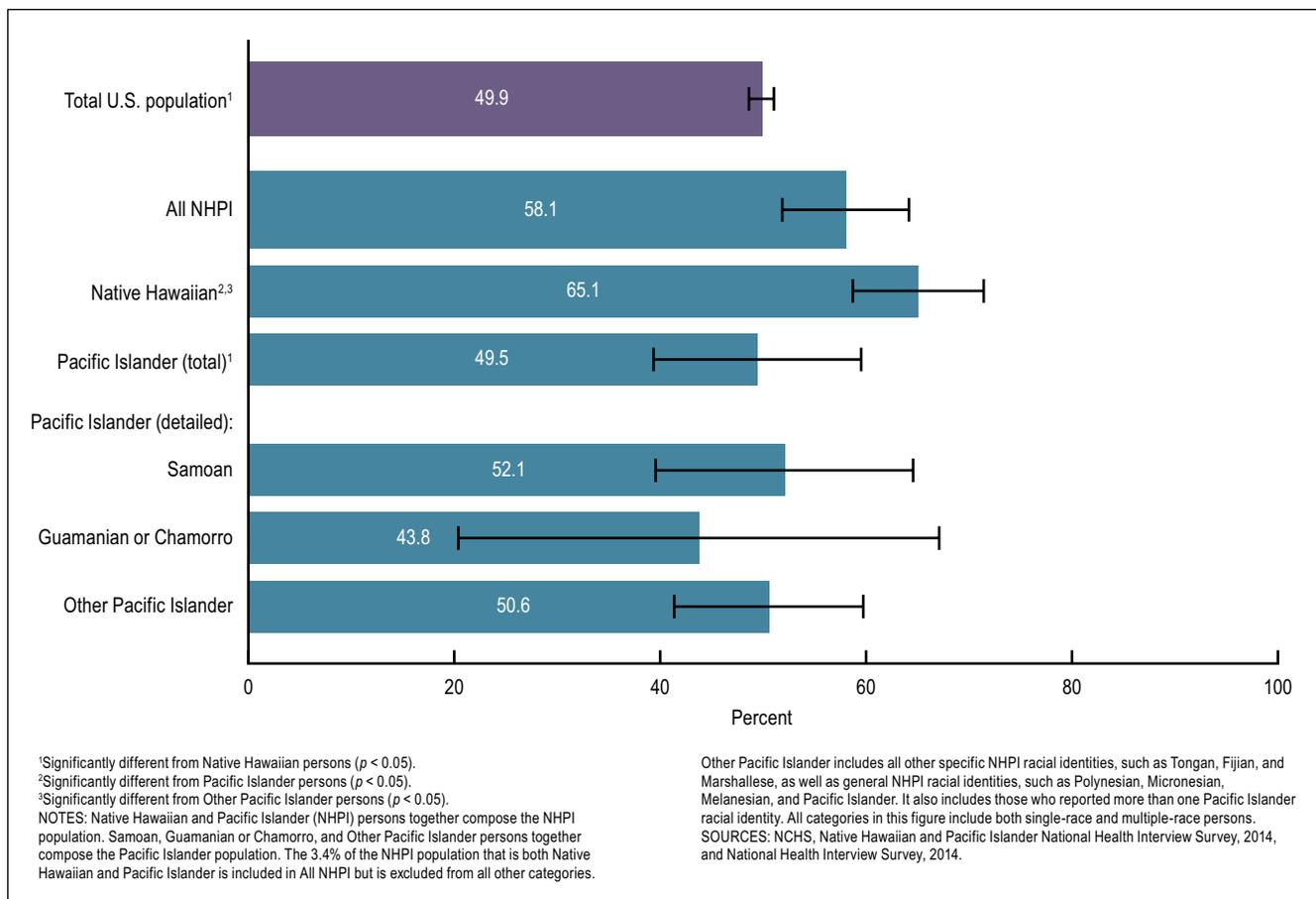
Figure 19. Percentage of children aged 6 months–17 years who had received an influenza vaccination during the past 12 months, by race: United States, 2014



- Among all NHPI children aged 6 months–17 years, the percentage who had received an influenza vaccination during the past 12 months was 58.1%, which was similar to the percentage among Asian children (58.2%); higher than the percentages among all U.S. (49.9%), white (49.9%), and black (47.4%) children; and higher than, but not significantly different from, the percentage among AIAN children (48.7%) (Figure 19, Table 7).
- Among multiple-race NHPI children aged 6 months–17 years, the percentage who had received an influenza vaccination during the past 12 months was 58.7%, which was similar to the percentage among Asian children (58.2%); higher than the percentages among all U.S. (49.9%), white (49.9%), and black (47.4%) children; and higher than, but not significantly different from, the percentage among AIAN children (48.7%).
- Among single-race NHPI children aged 6 months–17 years, the percentage who had received an influenza vaccination during the past 12 months was 57.4%, which was similar to the percentage among Asian children (58.2%); higher than the percentage among black children (47.4%); and higher than, but not significantly different from, the percentages among all U.S. (49.9%), white (49.9%), and AIAN (48.7%) children.
- The percentage of single-race NHPI children aged 6 months–17 years who had received an influenza vaccination during the past 12 months (57.4%) was similar to the percentage among multiple-race NHPI children (58.7%).

Receipt of Influenza Vaccination—Child

Figure 20. Percentage of children aged 6 months–17 years who had received an influenza vaccination during the past 12 months, by Native Hawaiian and Pacific Islander detailed race: United States, 2014



- The percentage of Native Hawaiian children aged 6 months–17 years who had received an influenza vaccination during the past 12 months was 65.1%, which was higher than the percentages among all Pacific Islander (49.5%) and Other Pacific Islander (50.6%) children and higher than, but not significantly different from, the percentages among Samoan (52.1%) and Guamanian or Chamorro (43.8%) children (Figure 20, Table 7).
- The percentage of Samoan children aged 6 months–17 years who had received an influenza vaccination during the past 12 months was 52.1%, which was lower than, but not significantly different from, the percentage among Native Hawaiian children (65.1%); higher than, but not significantly different from, the percentage among Guamanian or Chamorro children (43.8%); and similar to the percentage among Other Pacific Islander children (50.6%).
- The percentage of Guamanian or Chamorro children aged 6 months–17 years who had received an influenza vaccination during the past 12 months was 43.8%, which was lower than, but not significantly different from, the percentages among Native Hawaiian (65.1%), Samoan (52.1%), and Other Pacific Islander (50.6%) children.
- The percentage of Other Pacific Islander children aged 6 months–17 years who had received an influenza vaccination during the past 12 months was 50.6%, which was lower than the percentage among Native Hawaiian children (65.1%); similar to the percentage among all Pacific Islander (49.5%) and Other Pacific Islander (50.6%) children; lower than, but not significantly different from, the percentage among Samoan children (52.1%); and higher than, but not significantly different from, the percentage among Guamanian or Chamorro children (43.8%).
- The percentage of all U.S. children aged 6 months–17 years who had received an influenza vaccination during the past 12 months was 49.9%, which was lower than the percentage among Native Hawaiian children (65.1%); similar to the percentages among all Pacific Islander (49.5%) and Other Pacific Islander (50.6%) children; lower than, but not significantly different from, the percentage among Samoan children (52.1%); and higher than, but not significantly different from, the percentage among Guamanian or Chamorro children (43.8%).

Table 7. Percentage of children aged 6 months–17 years who had received an influenza vaccination during the past 12 months, by race including Native Hawaiian and Pacific Islander detailed race: United States, 2014

Data source and race	Crude percent (standard error)
2014 NHIS	
U.S. total ¹	49.9 (0.65)
Single-race:	
White	49.9 (0.76)
Black or African American	47.4 (1.51)
American Indian or Alaska Native	48.7 (5.81)
Asian	58.2 (2.11)
2014 NHPI NHIS	
All NHPI:	
NHPI total	58.1 (3.15)
Native Hawaiian	65.1 (3.22)
Pacific Islander	49.5 (5.15)
Samoan	52.1 (6.35)
Guamanian or Chamorro	43.8 (11.94)
Other Pacific Islander ²	50.6 (4.68)
Multiple-race NHPI ³ :	
NHPI total	58.7 (3.81)
Native Hawaiian	66.7 (2.56)
Pacific Islander	40.7 (8.29)
Samoan	45.0 (7.53)
Guamanian or Chamorro	*35.3 (15.95)
Other Pacific Islander ²	41.4 (7.15)
Single-race NHPI ⁴ :	
NHPI total	57.4 (3.79)
Native Hawaiian	60.5 (6.62)
Pacific Islander	55.4 (4.83)
Samoan	59.4 (11.19)
Guamanian or Chamorro	59.6 (9.64)
Other Pacific Islander ²	53.0 (5.54)

* Estimates are considered unreliable. Data preceded by an asterisk have a relative standard error (RSE) greater than 30% and less than or equal to 50% and should be used with caution. Data not shown have an RSE greater than 50%.

¹Includes other races not shown separately.

²Includes all other specific NHPI racial identities, such as Tongan, Fijian, and Marshallese, as well as general NHPI racial identities, such as Polynesian, Micronesian, Melanesian, and Pacific Islander. It also includes those who reported more than one Pacific Islander racial identity. It does not include those who indicated Native Hawaiian in addition to one or more Pacific Islander races. The racial identity Polynesian is considered Pacific Islander, not Native Hawaiian.

³Indicates at least one other federal race category was reported in addition to NHPI.

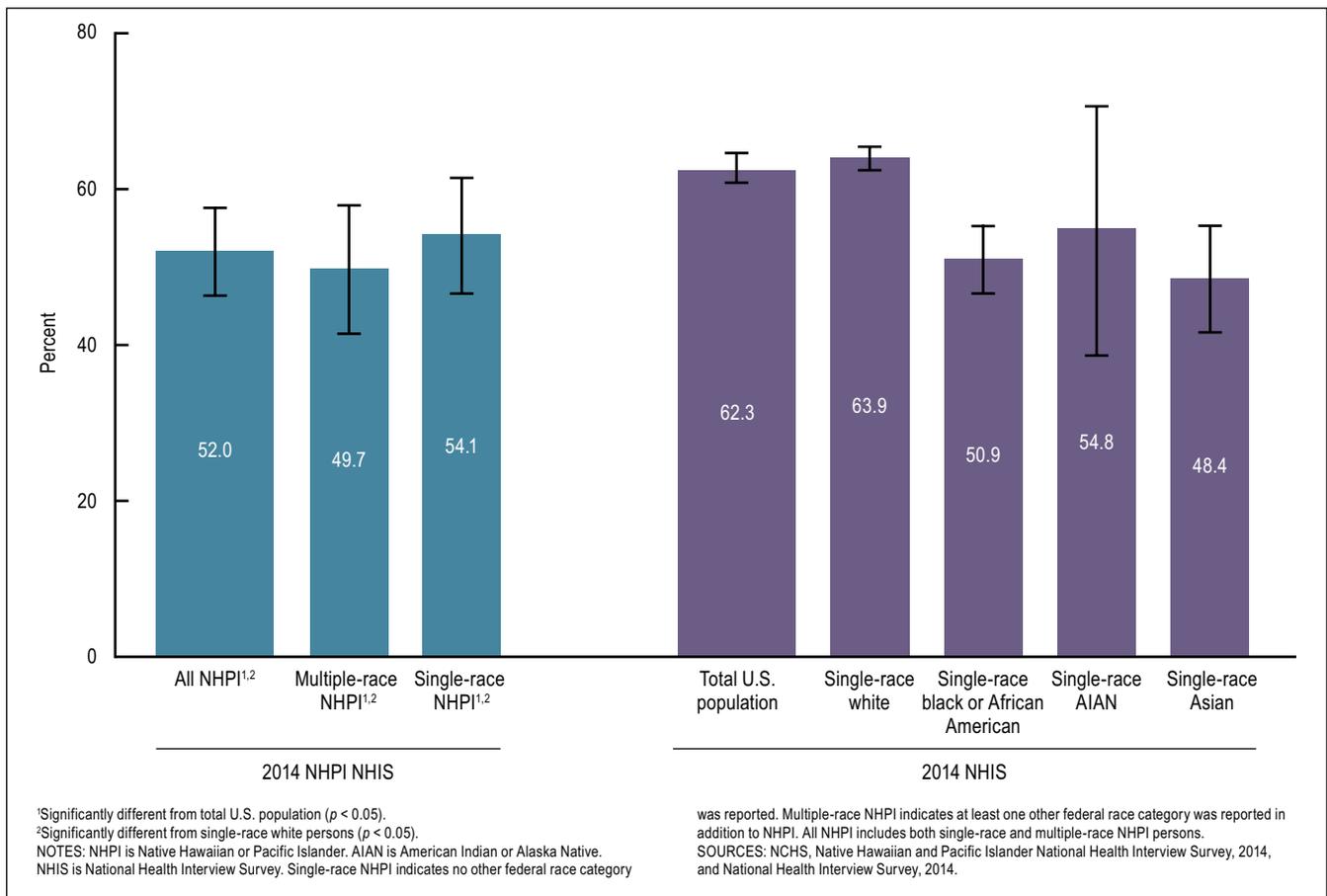
⁴Indicates no other federal race category was reported.

NOTES: Native Hawaiian and Pacific Islander (NHPI) persons together compose the NHPI population. Samoan, Guamanian or Chamorro, and Other Pacific Islander persons together compose the Pacific Islander population. The 3.4% of the NHPI population that is both Native Hawaiian and Pacific Islander is included in data for NHPI total under All NHPI, Multiple-race NHPI, and Single-race NHPI but is excluded from all other categories. NHIS is National Health Interview Survey.

SOURCES: NCHS, Native Hawaiian and Pacific Islander National Health Interview Survey, 2014, and National Health Interview Survey, 2014.

Receipt of Pneumococcal Vaccination—Older Adult

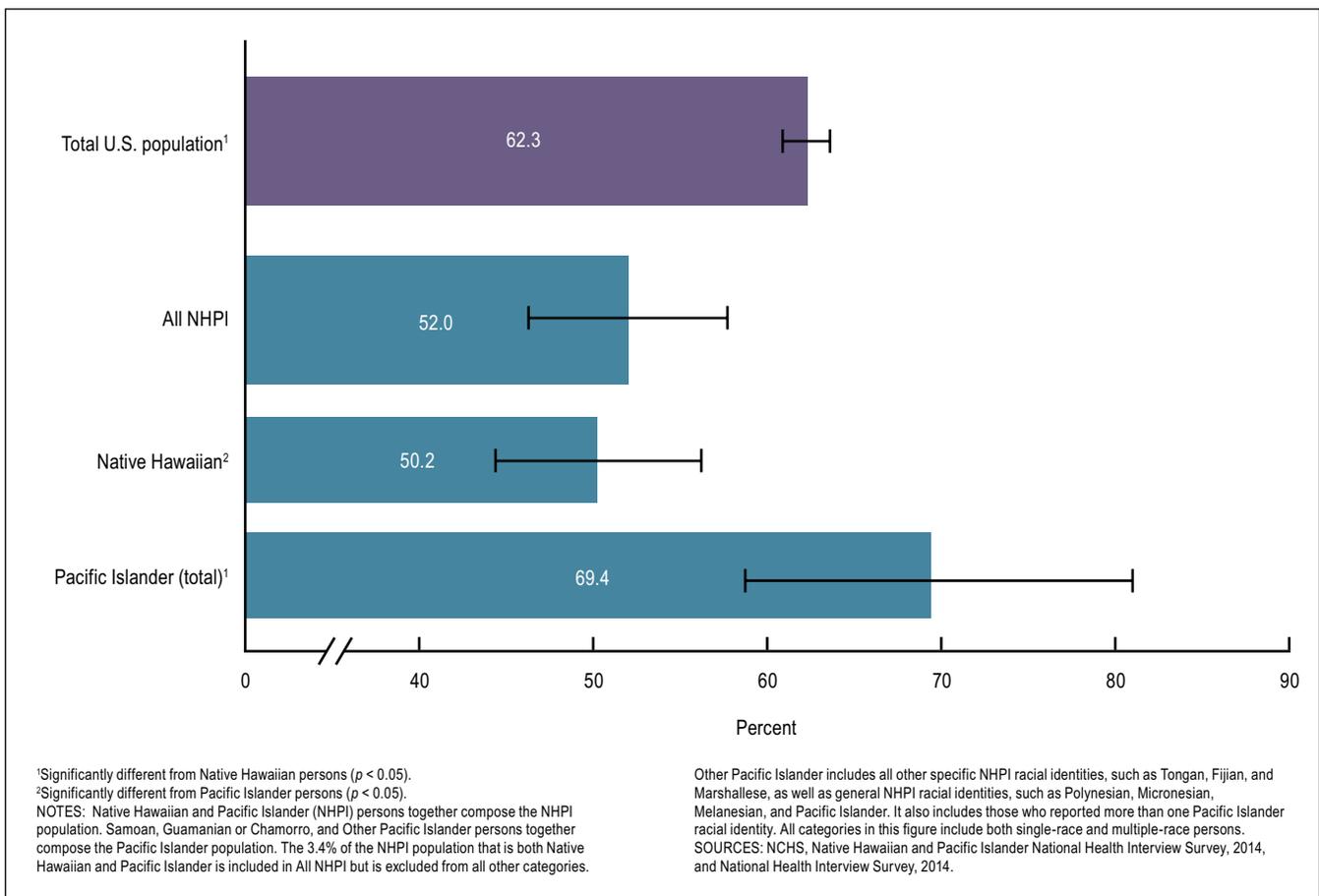
Figure 21. Age-sex-adjusted percentage of adults aged 65 and over who had ever received a pneumococcal vaccination, by race: United States, 2014



- Among all NHPI adults aged 65 and over, the percentage who had ever received a pneumococcal vaccination was 52.0%, which was similar to the percentage among black adults (50.9%); lower than the percentages among all U.S. (62.3%) and white (63.9%) adults; lower than, but not significantly different from, the percentage among AIAN adults (54.8%); and higher than, but not significantly different from, the percentage among Asian adults (48.4%) (Figure 21, Table 8).
- Among multiple-race NHPI adults aged 65 and over, the percentage who had ever received a pneumococcal vaccination was 49.7%, which was similar to the percentages among black (50.9%) and Asian (48.4%) adults; lower than the percentages among all U.S. (62.3%) and white (63.9%) adults; and lower than, but not significantly different from, the percentage among AIAN adults (54.8%).
- Among single-race NHPI adults aged 65 and over, the percentage who had ever received a pneumococcal vaccination was 54.1%, which was similar to the percentage among AIAN adults (54.8%); lower than the percentages among all U.S. (62.3%) and white (63.9%) adults; and higher than, but not significantly different from, the percentages among black (50.9%) and Asian (48.4%) adults.
- The percentage of single-race NHPI adults aged 65 and over who had ever received a pneumococcal vaccination (54.1%) was higher than, but not significantly different from, the percentage among multiple-race NHPI adults (49.7%).

Receipt of Pneumococcal Vaccination—Older Adult

Figure 22. Age-sex-adjusted percentage of adults aged 65 and over who had ever received a pneumococcal vaccination, by Native Hawaiian and Pacific Islander detailed race: United States, 2014



- The percentage of Native Hawaiian adults aged 65 and over who had ever received a pneumococcal vaccination was 50.2%, which was lower than the percentage among all Pacific Islander adults (69.4%) (Figure 22, Table 8).
- The percentage of all U.S. adults aged 65 and over who had ever received a pneumococcal vaccination was 62.3%, which was higher than the percentage among Native Hawaiian adults (50.2%) and lower than, but not significantly different from, the percentage among all Pacific Islander adults (69.4%).

Table 8. Crude and age-sex-adjusted percentages of adults aged 65 and over who had ever received a pneumococcal vaccination, by race including Native Hawaiian and Pacific Islander detailed race: United States, 2014

Data source and race	Crude percent (standard error)	Age-sex-adjusted percent (standard error)
2014 NHIS		
U.S. total ¹	61.3 (0.72)	62.3 (0.71)
Single-race:		
White	63.1 (0.79)	63.9 (0.78)
Black or African American	49.2 (2.06)	50.9 (2.13)
American Indian or Alaska Native	57.1 (8.32)	54.8 (8.16)
Asian	47.7 (3.35)	48.4 (3.42)
2014 NHPI NHIS		
All NHPI:		
NHPI total	52.0 (3.36)	52.0 (2.97)
Native Hawaiian	50.8 (3.08)	50.2 (3.03)
Pacific Islander	57.3 (8.17)	69.4 (5.91)
Samoan	*36.0 (10.87)	*42.1 (16.71)
Guamanian or Chamorro	72.8 (12.47)	79.4 (8.80)
Other Pacific Islander ²	56.7 (16.64)	74.6 (9.87)
Multiple-race NHPI ³ :		
NHPI total	52.3 (4.61)	49.7 (4.25)
Native Hawaiian	53.2 (4.13)	50.6 (3.82)
Pacific Islander	51.2 (13.95)	51.2 (13.95)
Samoan	—	†
Guamanian or Chamorro	74.8 (21.88)	†
Other Pacific Islander ²	100.0 (0.00)	†
Single-race NHPI ⁴ :		
NHPI total	51.7 (4.22)	54.1 (3.83)
Native Hawaiian	47.1 (5.82)	47.7 (5.73)
Pacific Islander	57.6 (8.76)	69.4 (6.39)
Samoan	38.6 (11.35)	*43.5 (16.65)
Guamanian or Chamorro	72.6 (13.55)	78.8 (9.65)
Other Pacific Islander ²	*55.7 (16.85)	74.0 (10.03)

* Estimates are considered unreliable. Data preceded by an asterisk have a relative standard error (RSE) greater than 30% and less than or equal to 50% and should be used with caution. Data not shown have an RSE greater than 50%.

— Quantity zero.

† Not possible to calculate; no sample in cell in one or more of the age-adjustment categories.

¹Includes other races not shown separately.

²Includes all other specific NHPI racial identities, such as Tongan, Fijian, and Marshallese, as well as general NHPI racial identities, such as Polynesian, Micronesian, Melanesian, and Pacific Islander. It also includes those who reported more than one Pacific Islander racial identity. It does not include those who indicated Native Hawaiian in addition to one or more Pacific Islander races. The racial identity Polynesian is considered Pacific Islander, not Native Hawaiian.

³Indicates at least one other federal race category was reported in addition to NHPI.

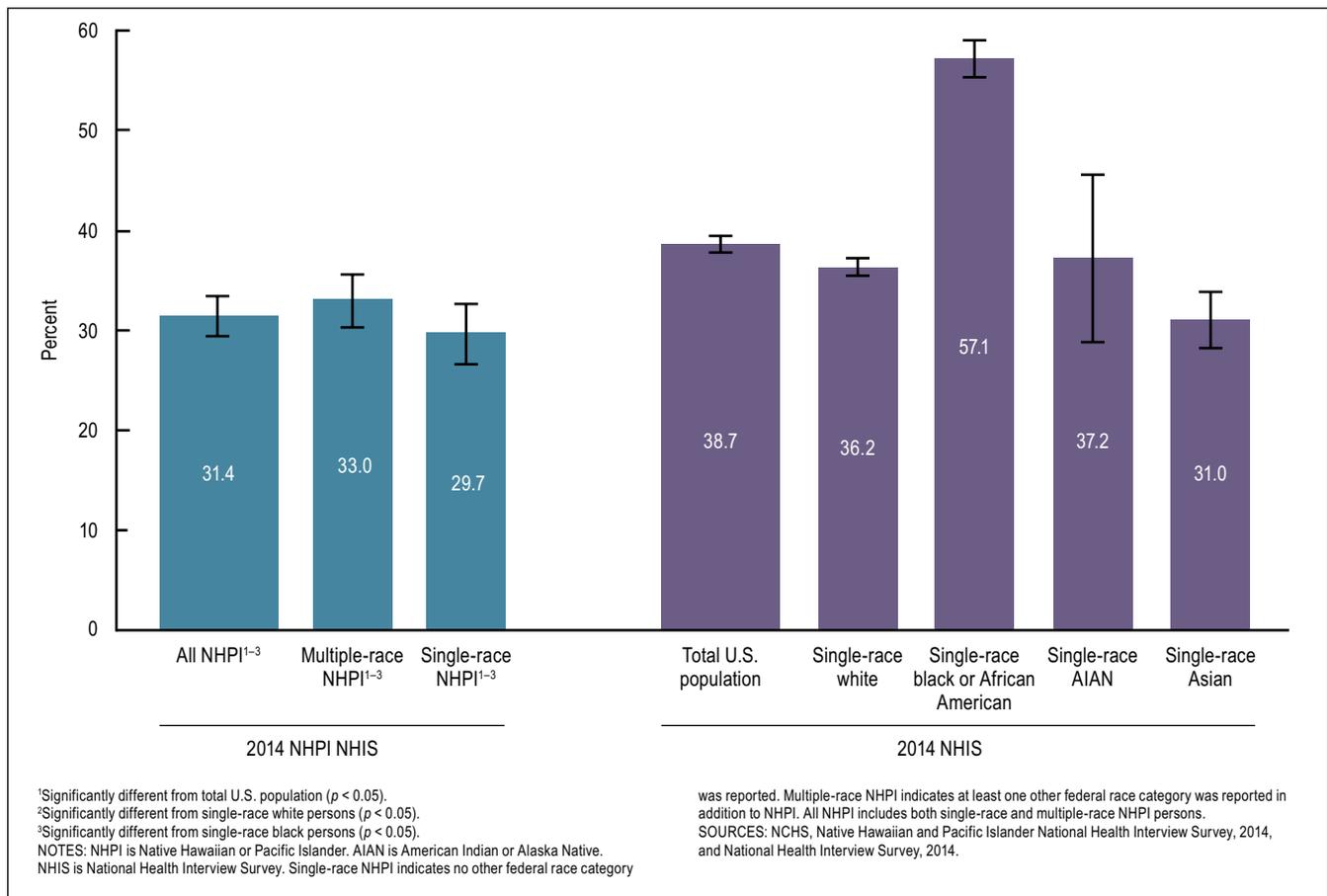
⁴Indicates no other federal race category was reported.

NOTES: Native Hawaiian and Pacific Islander (NHPI) persons together compose the NHPI population. Samoan, Guamanian or Chamorro, and Other Pacific Islander persons together compose the Pacific Islander population. The 3.4% of the NHPI population that is both Native Hawaiian and Pacific Islander is included in data for NHPI total under All NHPI, Multiple-race NHPI, and Single-race NHPI but is excluded from all other categories. Age-sex-adjusted estimates are adjusted using the projected 2000 U.S. population as the standard population and two age groups: 65–74 and 75 and over. NHIS is National Health Interview Survey.

SOURCES: NCHS, Native Hawaiian and Pacific Islander National Health Interview Survey, 2014, and National Health Interview Survey, 2014.

HIV Testing—Adult

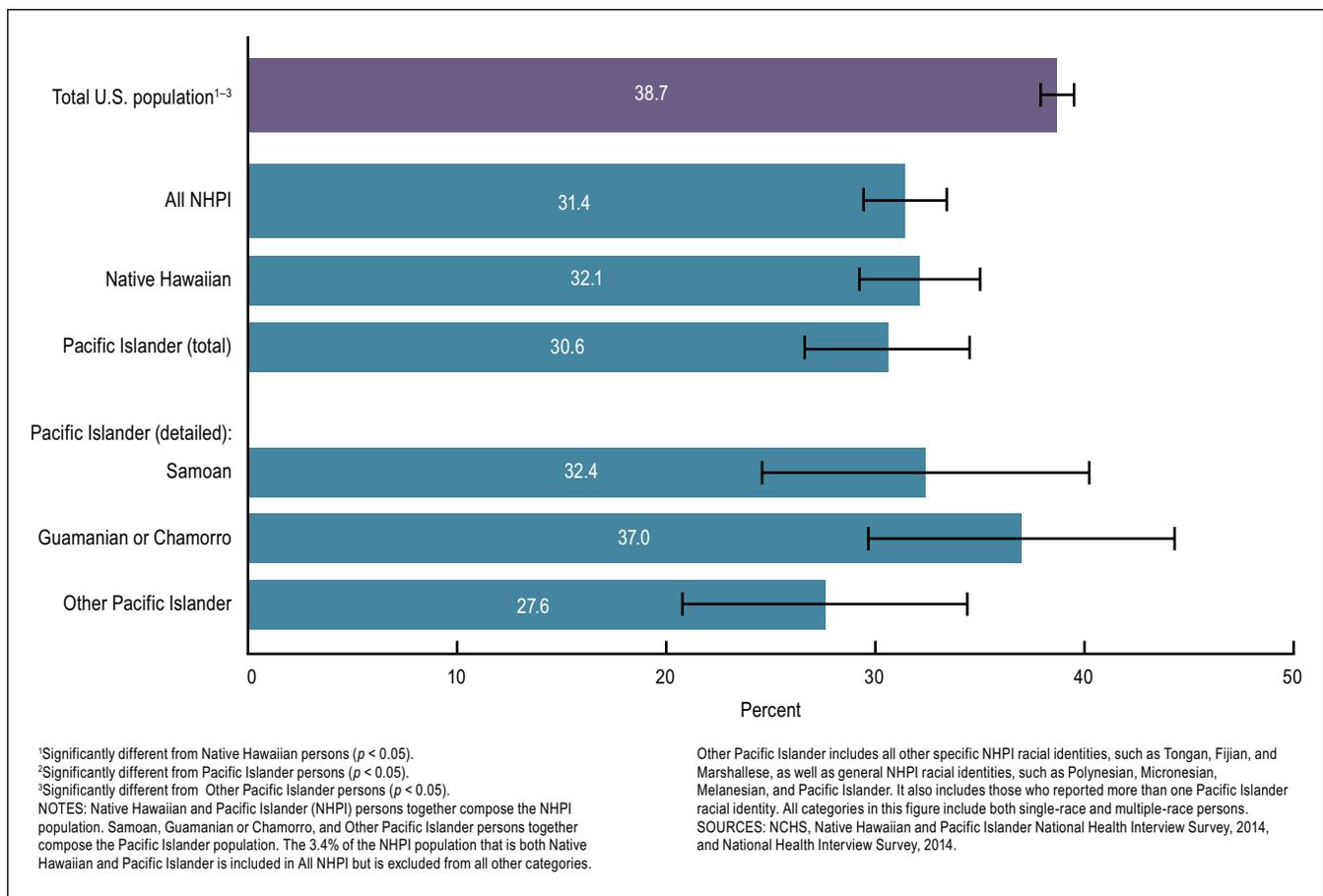
Figure 23. Age-sex-adjusted percentage of adults aged 18 and over who had ever been tested for HIV, by race: United States, 2014



- Among all NHPI adults, the percentage who had ever been tested for HIV was 31.4%, which was similar to the percentage among Asian adults (31.0%); lower than the percentages among all U.S. (38.7%), white (36.2%), and black (57.1%) adults; and lower than, but not significantly different from, the percentage among AIAN adults (37.2%) (Figure 23, Table 9).
- Among multiple-race NHPI adults, the percentage who had ever been tested for HIV was 33.0%, which was higher than, but not significantly different from, the percentage among Asian adults (31.0%); lower than the percentages among all U.S. (38.7%), white (36.2%), and black (57.1%) adults; and lower than, but not significantly different from, the percentage among AIAN adults (37.2%).
- Among single-race NHPI adults, the percentage who had ever been tested for HIV was 29.7%, which was similar to the percentage among Asian adults (31.0%); lower than the percentage among all U.S. (38.7%), white (36.2%), and black (57.1%) adults; and lower than, but not significantly different from, the percentage among AIAN adults (37.2%).
- The percentage of single-race NHPI adults who had ever been tested for HIV (29.7%) was lower than, but not significantly different from, the percentage among multiple-race NHPI adults (33.0%).

HIV Testing—Adult

Figure 24. Age-sex-adjusted percentage of adults aged 18 and over who had ever been tested for HIV, by Native Hawaiian and Pacific Islander detailed race: United States, 2014



- The percentage of Native Hawaiian adults who had ever been tested for HIV was 32.1%, which was higher than, but not significantly different from, the percentages among all Pacific Islander (30.6%) and Other Pacific Islander (27.6%) adults; similar to the percentage among Samoan adults (32.4%); and lower than, but not significantly different from, the percentage among Guamanian or Chamorro adults (37.0%) (Figure 24, Table 9).
- The percentage of Samoan adults who had ever been tested for HIV was 32.4%, which was similar to the percentage among Native Hawaiian adults (32.1%); lower than, but not significantly different from, the percentage among Guamanian or Chamorro adults (37.0%); and higher than, but not significantly different from, the percentage among Other Pacific Islander adults (27.6%).
- The percentage of Guamanian or Chamorro adults who had ever been tested for HIV was 37.0%, which was higher than, but not significantly different from, the percentages among Native Hawaiian (32.1%), Samoan (32.4%), and Other Pacific Islander (27.6%) adults.
- The percentage of Other Pacific Islander adults who had ever been tested for HIV was 27.6%, which was lower than, but not significantly different from, the percentages among Native Hawaiian (32.1%), Samoan (32.4%), and Guamanian or Chamorro (37.0%) adults.
- The percentage of all U.S. adults who had ever been tested for HIV was 38.7%, which was higher than the percentages among Native Hawaiian (32.1%), all Pacific Islander (30.6%), and Other Pacific Islander (27.6%) adults and higher than, but not significantly different from, the percentages among Samoan (32.4%) and Guamanian or Chamorro (37.0%) adults.

Table 9. Crude and age-sex-adjusted percentages of adults aged 18 and over who had ever been tested for HIV, by race including Native Hawaiian and Pacific Islander detailed race: United States, 2014

Data source and race	Crude percent (standard error)	Age-sex-adjusted percent (standard error)
2014 NHIS		
U.S. total ¹	37.5 (0.41)	38.7 (0.41)
Single-race:		
White	34.5 (0.44)	36.2 (0.45)
Black or African American	57.4 (1.05)	57.1 (0.96)
American Indian or Alaska Native	37.7 (4.34)	37.2 (4.25)
Asian	31.8 (1.51)	31.0 (1.47)
2014 NHPI NHIS		
All NHPI:		
NHPI total	32.1 (1.21)	31.4 (1.02)
Native Hawaiian	32.2 (1.34)	32.1 (1.46)
Pacific Islander	32.1 (2.64)	30.6 (2.01)
Samoan	36.9 (5.75)	32.4 (3.96)
Guamanian or Chamorro	40.0 (5.54)	37.0 (3.72)
Other Pacific Islander ²	24.0 (1.82)	27.6 (3.49)
Multiple-race NHPI ³ :		
NHPI total	34.5 (1.71)	33.0 (1.34)
Native Hawaiian	31.1 (1.97)	30.9 (1.64)
Pacific Islander	55.4 (7.25)	43.8 (4.48)
Samoan	48.4 (10.11)	44.4 (6.73)
Guamanian or Chamorro	64.7 (8.75)	46.7 (5.04)
Other Pacific Islander ²	50.3 (13.03)	42.9 (5.51)
Single-race NHPI ⁴ :		
NHPI total	30.2 (1.96)	29.7 (1.54)
Native Hawaiian	34.1 (3.18)	34.1 (2.43)
Pacific Islander	27.7 (2.29)	27.2 (2.16)
Samoan	32.9 (5.73)	31.4 (4.48)
Guamanian or Chamorro	32.3 (6.10)	32.2 (4.61)
Other Pacific Islander ²	22.6 (1.99)	26.5 (3.46)

¹Includes other races not shown separately.

²Includes all other specific NHPI racial identities, such as Tongan, Fijian, and Marshallese, as well as general NHPI racial identities, such as Polynesian, Micronesian, Melanesian, and Pacific Islander. It also includes those who reported more than one Pacific Islander racial identity. It does not include those who indicated Native Hawaiian in addition to one or more Pacific Islander races. The racial identity Polynesian is considered Pacific Islander, not Native Hawaiian.

³Indicates at least one other federal race category was reported in addition to NHPI.

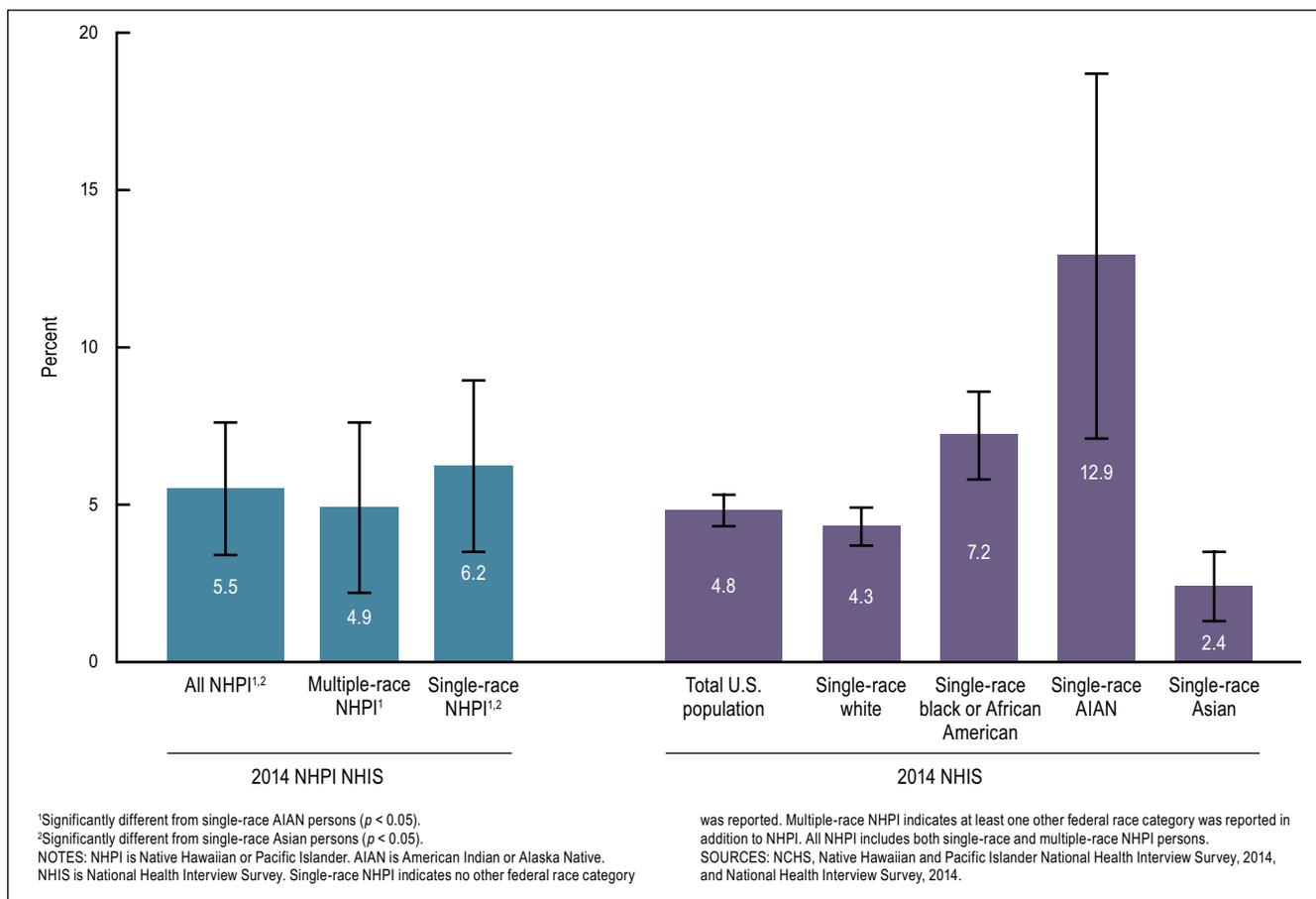
⁴Indicates no other federal race category was reported.

NOTES: Native Hawaiian and Pacific Islander (NHPI) persons together compose the NHPI population. Samoan, Guamanian or Chamorro, and Other Pacific Islander persons together compose the Pacific Islander population. The 3.4% of the NHPI population that is both Native Hawaiian and Pacific Islander is included in data for NHPI total under All NHPI, Multiple-race NHPI, and Single-race NHPI but is excluded from all other categories. Age-sex-adjusted estimates are adjusted using the projected 2000 U.S. population as the standard population and five age groups: 18–24, 25–34, 35–44, 45–64, and 65 and over. NHIS is National Health Interview Survey.

SOURCES: NCHS, Native Hawaiian and Pacific Islander National Health Interview Survey, 2014, and National Health Interview Survey, 2014.

Emergency Room Visits in the Past 12 Months—Child

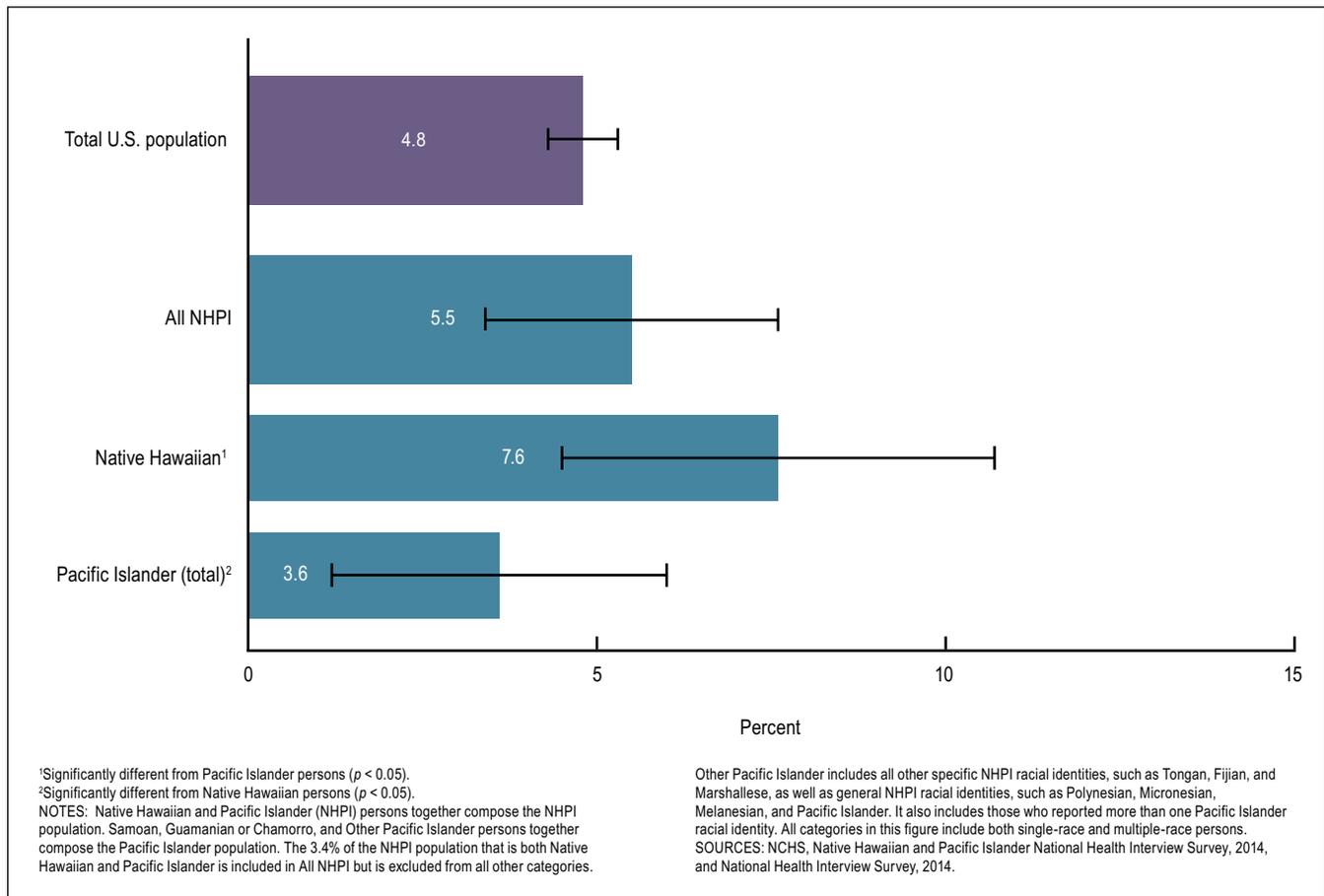
Figure 25. Age-adjusted percentage of children under age 18 years having two or more emergency room visits in the past 12 months, by race: United States, 2014



- Among all NHPI children, the percentage who had at least two emergency room visits in the past 12 months was 5.5%, which was lower than the percentage among AIAN children (12.9%); lower than, but not significantly different from, the percentage among black children (7.2%); higher than the percentage among Asian children (2.4%); and similar to the percentages among all U.S. (4.8%) and white (4.3%) children (Figure 25, Table 10).
- Among multiple-race NHPI children, the percentage who had at least two emergency room visits in the past 12 months was 4.9%, which was lower than the percentage among AIAN children (12.9%); lower than, but not significantly different from, the percentage among black children (7.2%); higher than, but not significantly different from, the percentage among Asian children (2.4%); and similar to the percentages among all U.S. (4.8%) and white (4.3%) children.
- Among single-race NHPI children, the percentage who had at least two emergency room visits in the past 12 months was 6.2%, which was lower than the percentage among AIAN children (12.9%); similar to the percentages among all U.S. (4.8%) and black (7.2%) children; higher than the percentage among Asian children (2.4%); and higher than, but not significantly different from, the percentage among white children (4.3%).
- The percentage of single-race NHPI children who had at least two emergency room visits in the past 12 months (6.2%) was similar to the percentage among multiple-race NHPI children (4.9%).

Emergency Room Visits in the Past 12 Months—Child

Figure 26. Age-adjusted percentage of children under age 18 years having two or more emergency room visits in the past 12 months, by Native Hawaiian and Pacific Islander detailed race: United States, 2014



- The percentage of Native Hawaiian children who had at least two emergency room visits in the past 12 months was 7.6%, which was higher than the percentage among all Pacific Islander children (3.6%) (Figure 26, Table 10).
- The percentage of all U.S. children who had at least two emergency room visits in the past 12 months was 4.8%, which was lower than, but not significantly different from, the percentage among Native Hawaiian children (7.6%) and similar to the percentage among all Pacific Islander children (3.6%).

Table 10. Crude and age-adjusted percentages of children under age 18 years ever having at least one emergency room visit in the past 12 months, by race including Native Hawaiian and Pacific Islander detailed race: United States, 2014

Data source and race	None	One	Two or more	None	One	Two or more
	Crude percent (standard error)			Age-adjusted percent (standard error)		
2014 NHIS						
U.S. total ¹	83.3 (0.46)	11.9 (0.38)	4.8 (0.27)	83.3 (0.45)	11.8 (0.38)	4.8 (0.27)
Single-race:						
White	84.1 (0.54)	11.6 (0.44)	4.3 (0.30)	84.1 (0.53)	11.6 (0.44)	4.3 (0.30)
Black or African American	78.7 (1.15)	14.0 (1.01)	7.2 (0.73)	78.8 (1.14)	14.0 (1.01)	7.2 (0.72)
American Indian or Alaska Native	71.3 (4.53)	16.0 (3.97)	12.6 (2.83)	71.4 (4.50)	15.8 (3.93)	12.9 (2.94)
Asian	89.6 (1.19)	7.9 (1.08)	2.4 (0.58)	89.7 (1.19)	7.9 (1.08)	2.4 (0.56)
2014 NHPI NHIS						
All NHPI:						
NHPI total	84.9 (1.59)	9.5 (1.20)	5.6 (1.12)	85.2 (1.51)	9.3 (1.18)	5.5 (1.07)
Native Hawaiian	81.6 (2.14)	10.8 (1.51)	7.6 (1.62)	81.6 (2.03)	10.8 (1.48)	7.6 (1.57)
Pacific Islander	87.5 (2.27)	8.5 (1.89)	*4.0 (1.40)	88.2 (2.15)	8.2 (1.86)	*3.6 (1.23)
Samoan	83.4 (5.20)	*9.0 (3.46)	*	84.8 (4.02)	*8.7 (3.03)	*6.5 (3.13)
Guamanian or Chamorro	95.4 (1.36)	*3.1 (1.13)	*	95.0 (1.57)	*3.4 (1.23)	*
Other Pacific Islander ²	86.6 (4.00)	*10.7 (3.91)	*2.7 (0.90)	87.4 (3.85)	*10.1 (3.75)	*2.5 (0.86)
Multiple-race NHPI ³ :						
NHPI total	84.9 (1.71)	9.9 (1.25)	5.2 (1.53)	85.6 (1.55)	9.5 (1.19)	4.9 (1.40)
Native Hawaiian	82.1 (2.22)	12.3 (1.86)	5.6 (1.52)	82.5 (2.10)	11.9 (1.80)	5.6 (1.48)
Pacific Islander	87.9 (2.63)	7.0 (1.65)	*	89.7 (2.33)	6.3 (1.53)	*
Samoan	81.8 (7.34)	*	*	86.3 (3.94)	*7.3 (3.55)	*
Guamanian or Chamorro	98.9 (0.71)	*	—	98.1 (1.42)	*	—
Other Pacific Islander ²	81.8 (5.45)	*13.0 (5.08)	*5.2 (2.56)	85.8 (4.34)	*10.2 (3.95)	*
Single-race NHPI ⁴ :						
NHPI total	84.8 (2.30)	8.9 (2.09)	6.3 (1.40)	85.1 (2.25)	8.7 (2.02)	6.2 (1.38)
Native Hawaiian	80.1 (4.43)	6.8 (1.88)	*13.1 (4.28)	79.6 (4.39)	6.7 (1.70)	*13.7 (4.43)
Pacific Islander	87.3 (2.81)	9.5 (2.81)	*3.2 (1.09)	87.4 (2.84)	9.4 (2.80)	*3.2 (1.06)
Samoan	84.9 (4.95)	*9.4 (3.61)	*	84.8 (4.79)	*9.5 (3.57)	*5.7 (2.82)
Guamanian or Chamorro	89.0 (4.02)	*6.7 (3.05)	*	88.7 (4.61)	*	*
Other Pacific Islander ²	87.9 (4.46)	*10.1 (4.40)	*2.0 (0.95)	88.2 (4.30)	*9.8 (4.21)	*2.0 (0.97)

* Estimates are considered unreliable. Data preceded by an asterisk have a relative standard error (RSE) greater than 30% and less than or equal to 50% and should be used with caution. Data not shown have an RSE greater than 50%.

— Quantity zero.

¹Includes other races not shown separately.

²Includes all other specific NHPI racial identities, such as Tongan, Fijian, and Marshallese, as well as general NHPI racial identities, such as Polynesian, Micronesian, Melanesian, and Pacific Islander. It also includes those who reported more than one Pacific Islander racial identity. It does not include those who indicated Native Hawaiian in addition to one or more Pacific Islander races. The racial identity Polynesian is considered Pacific Islander, not Native Hawaiian.

³Indicates at least one other federal race category was reported in addition to NHPI.

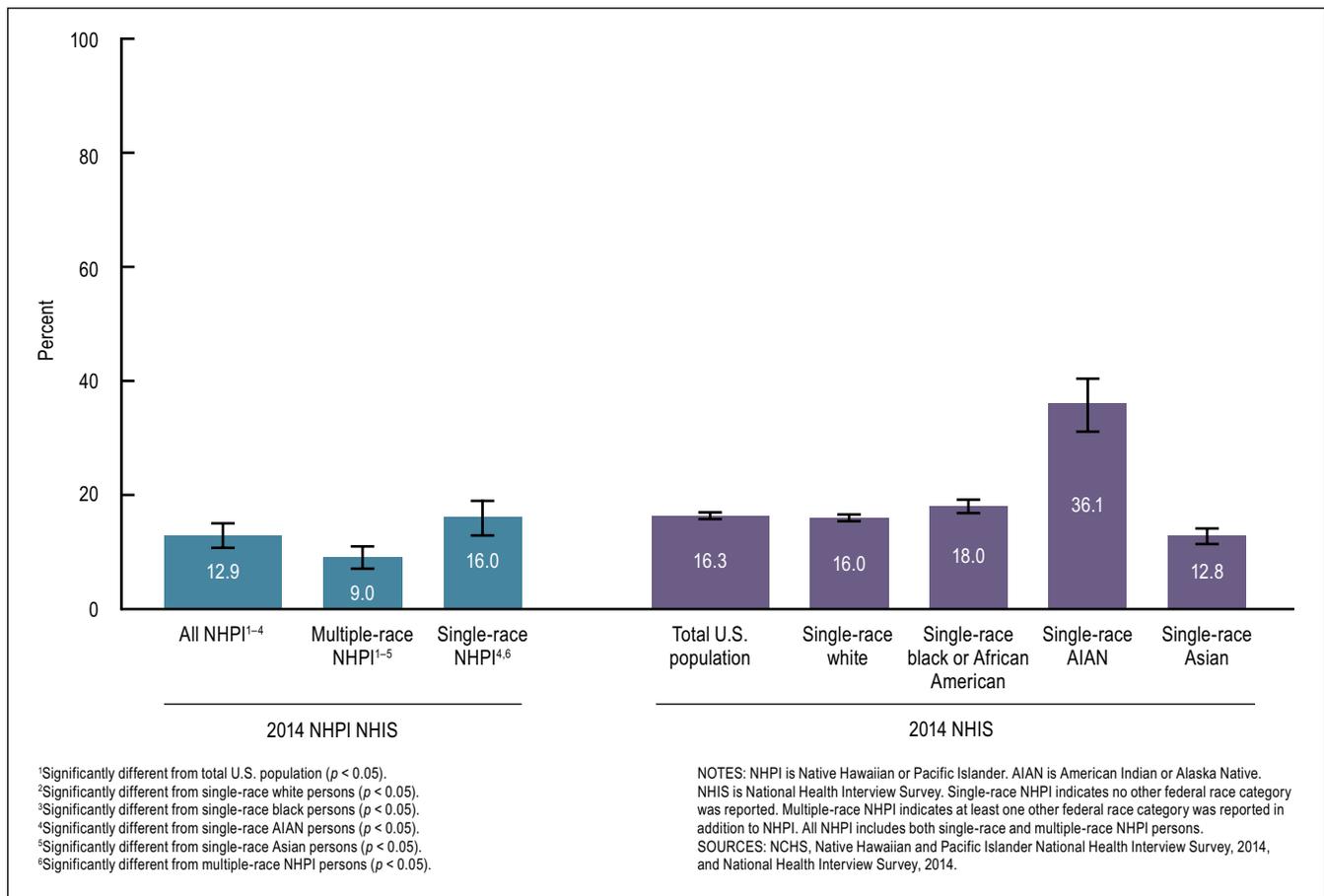
⁴Indicates no other federal race category was reported.

NOTES: Native Hawaiian and Pacific Islander (NHPI) persons together compose the NHPI population. Samoan, Guamanian or Chamorro, and Other Pacific Islander persons together compose the Pacific Islander population. The 3.4% of the NHPI population that is both Native Hawaiian and Pacific Islander is included in data for NHPI total under All NHPI, Multiple-race NHPI, and Single-race NHPI but is excluded from all other categories. Age-adjusted estimates are adjusted using the projected 2000 U.S. population as the standard population and three age groups: 0–4, 5–11, and 12–17. NHIS is National Health Interview Survey.

SOURCES: NCHS, Native Hawaiian and Pacific Islander National Health Interview Survey, 2014, and National Health Interview Survey, 2014.

Lack and Type of Health Insurance Coverage—Adult

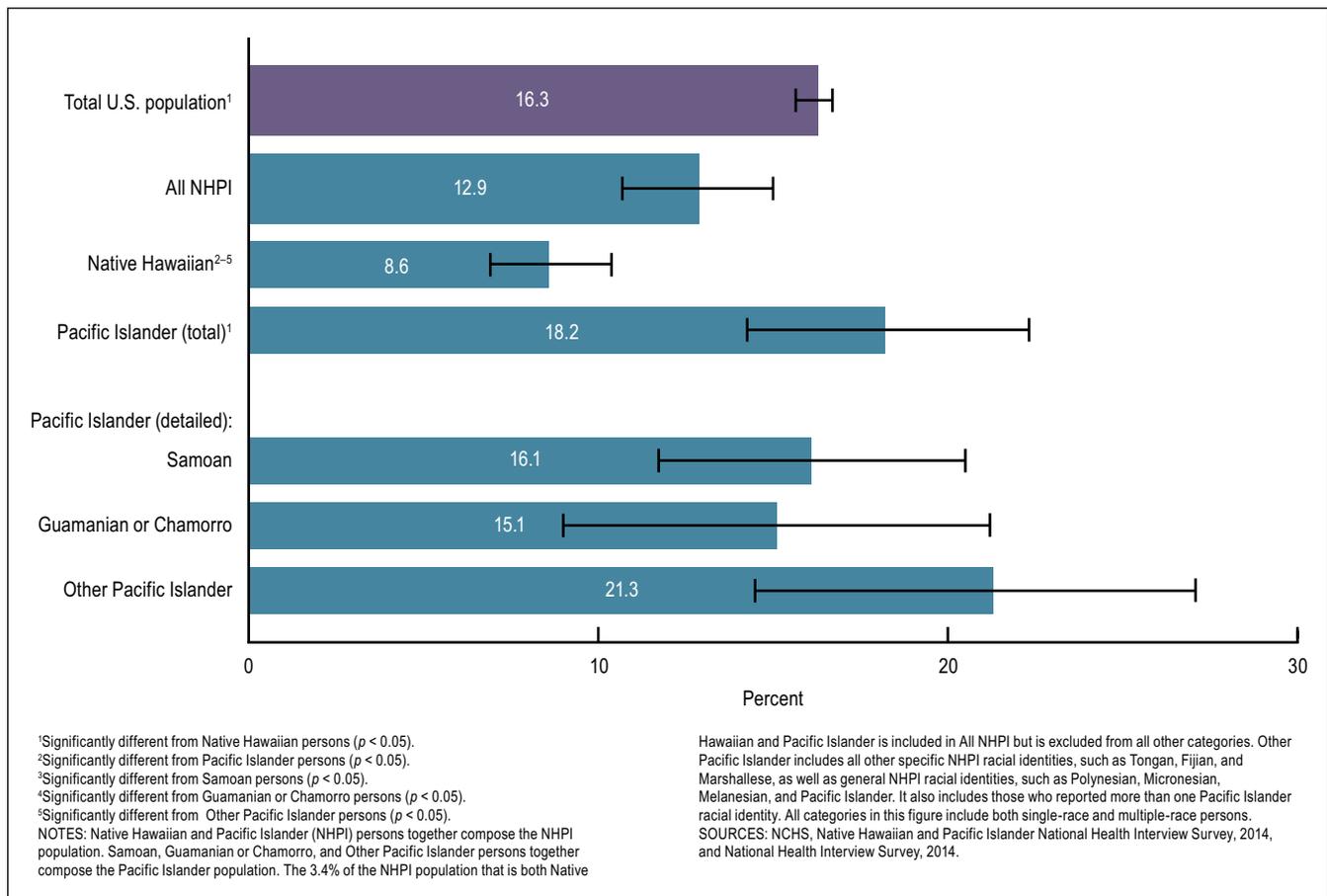
Figure 27. Crude percentage of adults aged 18–64 without health insurance coverage at the time of interview, by race: United States, 2014



- Among all NHPI adults aged 18–64, the percentage without health insurance at the time of interview was 12.9%, which was similar to the percentage among Asian adults (12.8%) and lower than the percentages among all U.S. (16.3%), white (16.0%), black (18.0%), and AIAN (36.1%) adults (Figure 27, Table 11).
- Among multiple-race NHPI adults aged 18–64, the percentage without health insurance at the time of interview was 9.0%, which was lower than the percentages among all U.S. (16.3%), white (16.0%), black (18.0%), AIAN (36.1%), and Asian (12.8%) adults.
- Among single-race NHPI adults aged 18–64, the percentage without health insurance at the time of interview was 16.0%, which was similar to the percentages among all U.S. (16.3%) and white (16.0%) adults; higher than, but not significantly different from, the percentage among Asian adults (12.8%); lower than, but not significantly different from, the percentage among black adults (18.0%); and lower than the percentage among AIAN adults (36.1%).
- The percentage of single-race NHPI adults aged 18–64 without health insurance at the time of interview (16.0%) was higher than the percentage among multiple-race NHPI adults (9.0%).

Lack and Type of Health Insurance Coverage—Adult

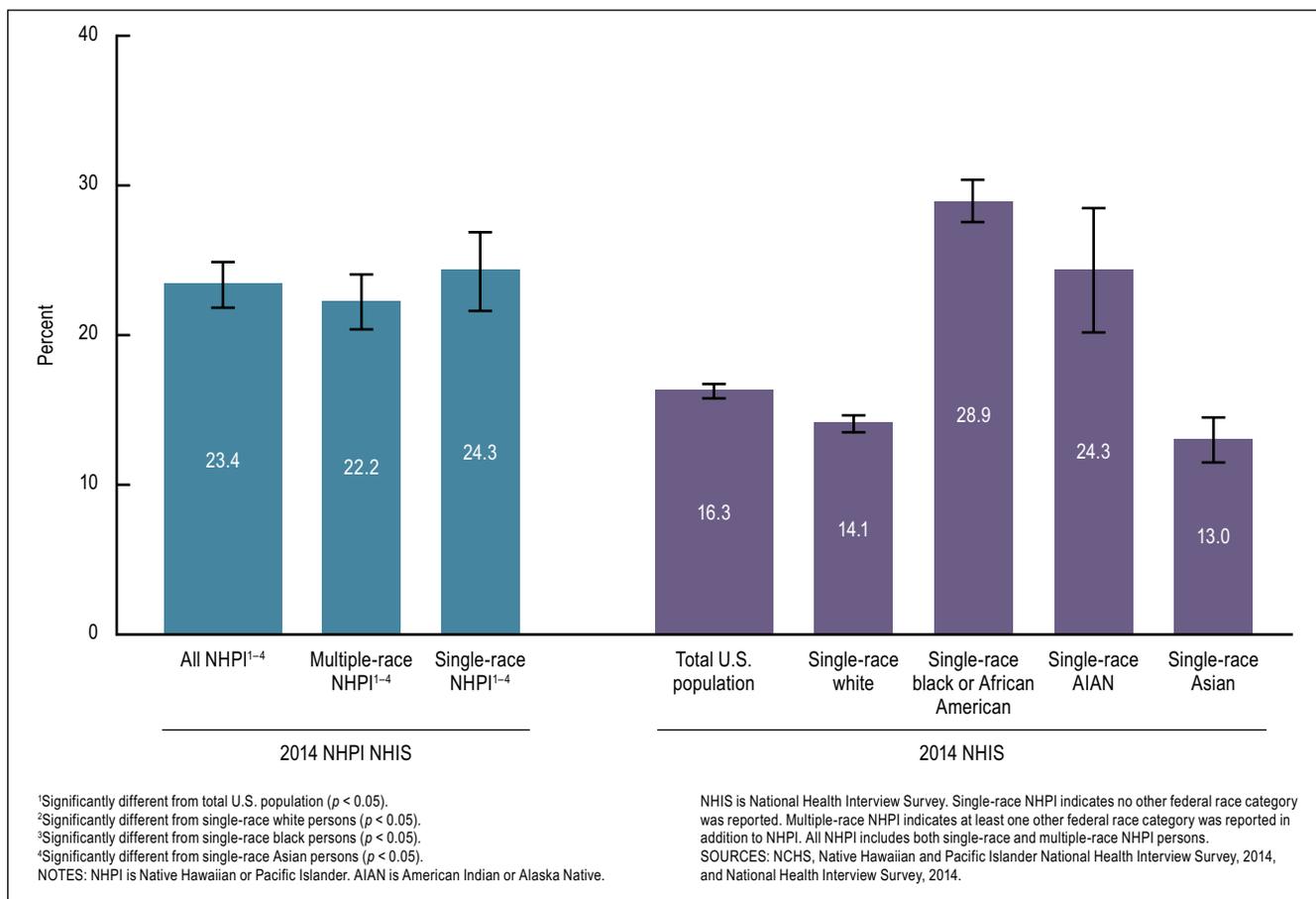
Figure 28. Crude percentage of adults aged 18–64 without health insurance coverage at the time of interview, by Native Hawaiian and Pacific Islander detailed race: United States, 2014



- The percentage of Native Hawaiian adults aged 18–64 without health insurance coverage at the time of interview was 8.6%, which was lower than the percentages among all Pacific Islander (18.2%), Samoan (16.1%), Guamanian or Chamorro (15.1%), and Other Pacific Islander (21.3%) adults (Figure 28, Table 11).
- The percentage of Samoan adults aged 18–64 without health insurance coverage at the time of interview was 16.1%, which was higher than the percentage among Native Hawaiian adults (8.6%); similar to the percentage among Guamanian or Chamorro adults (15.1%); and lower than, but not significantly different from, the percentage among Other Pacific Islander adults (21.3%).
- The percentage of Guamanian or Chamorro adults aged 18–64 without health insurance coverage at the time of interview was 15.1%, which was higher than the percentage among Native Hawaiian adults (8.6%); similar to the percentage among Samoan adults (16.1%); and lower than, but not significantly different from, the percentage among Other Pacific Islander adults (21.3%).
- The percentage of Other Pacific Islander adults aged 18–64 without health insurance coverage at the time of interview was 21.3%, which was higher than the percentage among Native Hawaiian adults (8.6%) and higher than, but not significantly different from, the percentages among Samoan (16.1%) and Guamanian or Chamorro (15.1%) adults.
- The percentage of all U.S. adults aged 18–64 without health insurance coverage at the time of interview was 16.3%, which was higher than the percentage among Native Hawaiian adults (8.6%); similar to the percentages among Samoan (16.1%) and Guamanian or Chamorro (15.1%) adults; and lower than, but not significantly different from, the percentages among all Pacific Islander (18.2%) and Other Pacific Islander (21.3%) adults.

Lack and Type of Health Insurance Coverage—Adult

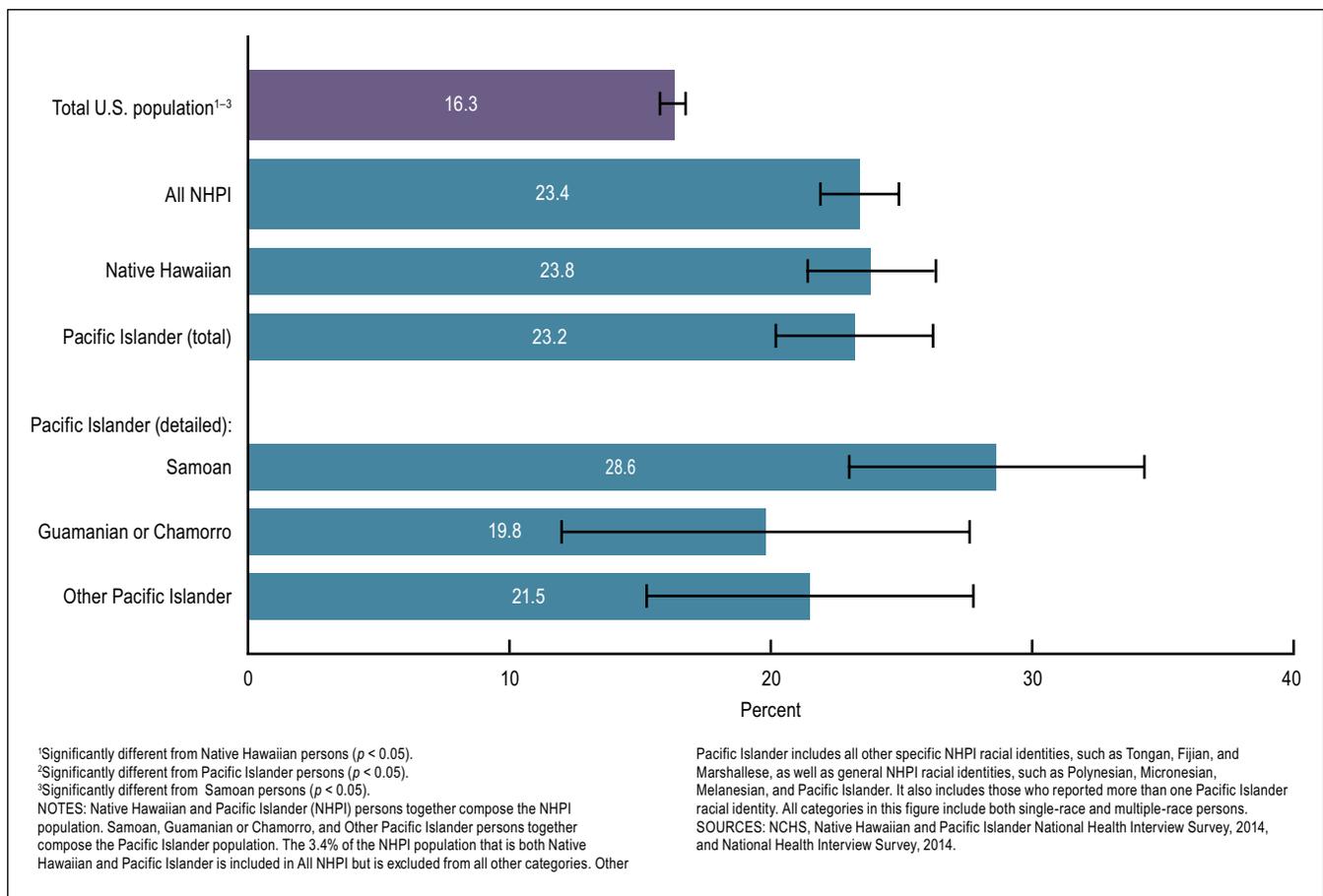
Figure 29. Crude percentage of adults aged 18–64 with public health insurance coverage at the time of interview, by race: United States, 2014



- Among all NHPI adults aged 18–64, the percentage with public health insurance coverage at the time of interview was 23.4%, which was higher than the percentages among all U.S. (16.3%), white (14.1%), and Asian (13.0%) adults; lower than the percentage among black adults (28.9%); and similar to the percentage among AIAN adults (24.3%) (Figure 29, Table 11).
- Among multiple-race NHPI adults aged 18–64, the percentage with public health insurance coverage at the time of interview was 22.2%, which was higher than the percentages among all U.S. (16.3%), white (14.1%), and Asian (13.0%) adults; lower than the percentage among black adults (28.9%); and lower than, but not significantly different from, the percentage among AIAN adults (24.3%).
- Among single-race NHPI adults aged 18–64, the percentage with public health insurance coverage at the time of interview was 24.3%, which was higher than the percentages among all U.S. (16.3%), white (14.1%), and Asian (13.0%) adults; lower than the percentage among black adults (28.9%); and similar to the percentage among AIAN adults (24.3%).
- The percentage of single-race NHPI adults aged 18–64 with public health insurance coverage at the time of interview (24.3%) was higher than, but not significantly different from, the percentage among multiple-race NHPI adults (22.2%).

Lack and Type of Health Insurance Coverage—Adult

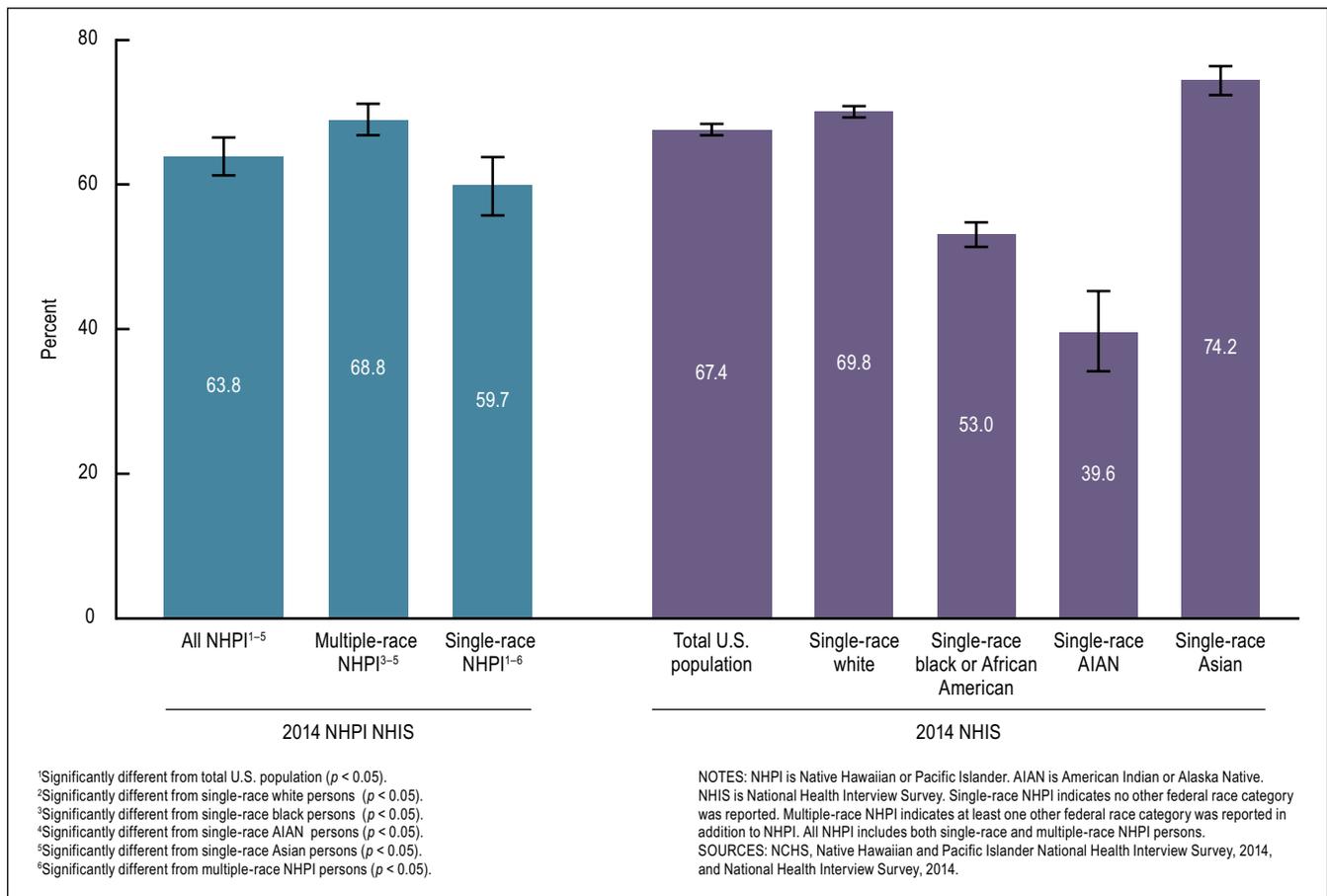
Figure 30. Crude percentage of adults aged 18–64 with public health insurance coverage at the time of interview, by Native Hawaiian and Pacific Islander detailed race: United States, 2014



- The percentage of Native Hawaiian adults aged 18–64 with public health insurance coverage at the time of interview was 23.8%, which was similar to the percentage among all Pacific Islander adults (23.2%); lower than, but not significantly different from, the percentage among Samoan adults (28.6%); and higher than, but not significantly different from, the percentages among Guamanian or Chamorro (19.8%) and Other Pacific Islander (21.5%) adults (Figure 30, Table 11).
- The percentage of Samoan adults aged 18–64 with public health insurance coverage at the time of interview was 28.6%, which was higher than, but not significantly different from, the percentages among Native Hawaiian (23.8%), Guamanian or Chamorro (19.8%), and Other Pacific Islander (21.5%) adults.
- The percentage of Guamanian or Chamorro adults aged 18–64 with public health insurance coverage at the time of interview was 19.8%, which was lower than, but not significantly different from, the percentages among Native Hawaiian (23.8%), Samoan (28.6%), and Other Pacific Islander (21.5%) adults.
- The percentage of Other Pacific Islander adults aged 18–64 with public health insurance coverage at the time of interview was 21.5%, which was higher than, but not significantly different from, the percentage among Guamanian or Chamorro adults (19.8%) and lower than, but not significantly different from, the percentages among Native Hawaiian (23.8%) and Samoan (28.6%) adults.
- The percentage of all U.S. adults aged 18–64 with public health insurance coverage at the time of interview was 16.3%, which was lower than the percentages among Native Hawaiian (23.8%), all Pacific Islander (23.2%), and Samoan (28.6%) adults and lower than, but not significantly different from, the percentages among Guamanian or Chamorro (19.8%) and Other Pacific Islander (21.5%) adults.

Lack and Type of Health Insurance Coverage—Adult

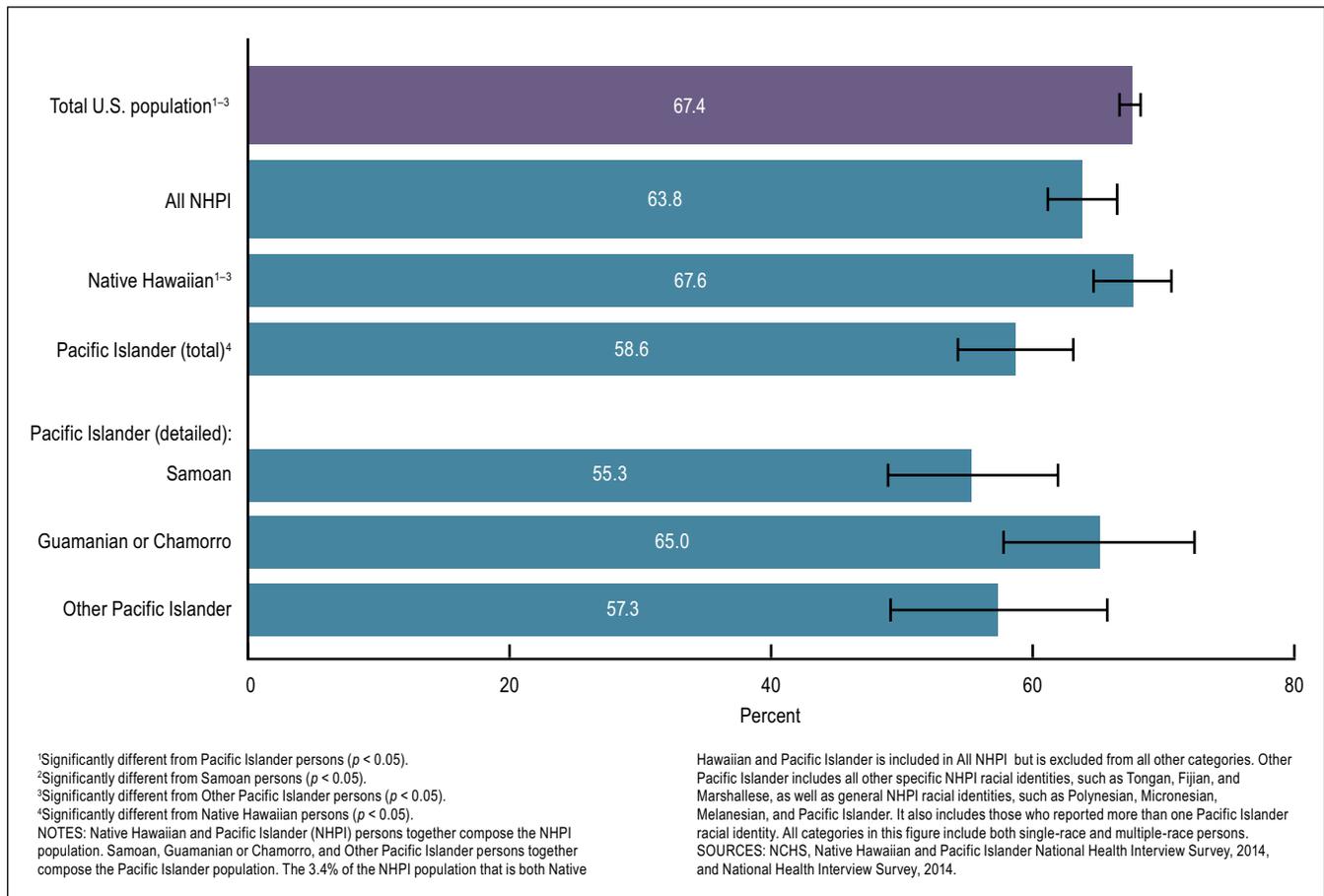
Figure 31. Crude percentage of adults aged 18–64 with any private health insurance coverage at the time of interview, by race: United States, 2014



- Among all NHPI adults aged 18–64, the percentage with any private health insurance coverage at the time of interview was 63.8%, which was lower than the percentages among all U.S. (67.4%), white (69.8%), and Asian (74.2%) adults and higher than the percentages among black (53.0%) and AIAN (39.6%) adults (Figure 31, Table 11).
- Among multiple-race NHPI adults aged 18–64, the percentage with any private health insurance coverage at the time of interview was 68.8%, which was similar to the percentages among all U.S. (67.4%) and white (69.8%) adults, lower than the percentage among Asian adults (74.2%), and higher than the percentages among black (53.0%) and AIAN (39.6%) adults.
- Among single-race NHPI adults aged 18–64, the percentage with any private health insurance coverage at the time of interview was 59.7%, which was lower than the percentages among all U.S. (67.4%), white (69.8%), and Asian (74.2%) adults and higher than the percentages among black (53.0%) and AIAN (39.6%) adults.
- The percentage of single-race NHPI adults aged 18–64 with any private health insurance coverage at the time of interview (59.7%) was lower than the percentage among multiple-race NHPI adults (68.8%).

Lack and Type of Health Insurance Coverage—Adult

Figure 32. Crude percentage of adults aged 18–64 with any private health insurance coverage at the time of interview, by Native Hawaiian and Pacific Islander detailed race: United States, 2014



- The percentage of Native Hawaiian adults aged 18–64 with private health insurance coverage at the time of interview was 67.6%, which was higher than the percentages among all Pacific Islander (58.6%), Samoan (55.3%), and Other Pacific Islander (57.3%) adults and higher than, but not significantly different from, the percentage among Guamanian or Chamorro adults (65.0%) (Figure 32, Table 11).
- The percentage of Samoan adults aged 18–64 with private health insurance coverage at the time of interview was 55.3%, which was lower than the percentage among Native Hawaiian adults (67.6%) and lower than, but not significantly different from, the percentages among Guamanian or Chamorro (65.0%) and Other Pacific Islander (57.3%) adults.
- The percentage of Guamanian or Chamorro adults aged 18–64 with private health insurance coverage at the time of interview was 65.0%, which was lower than, but not significantly different from, the percentage among Native Hawaiian adults (67.6%) and higher than, but not significantly different from, the percentages among Samoan (55.3%) and Other Pacific Islander (57.3%) adults.
- The percentage of Other Pacific Islander adults aged 18–64 with private health insurance coverage at the time of interview was 57.3%, which was higher than, but not significantly different from, the percentage among Samoan adults (55.3%); lower than the percentage among Native Hawaiian adults (67.6%); and lower than, but not significantly different from, the percentage among Guamanian or Chamorro adults (65.0%).
- The percentage of all U.S. adults aged 18–64 with private health insurance coverage at the time of interview was 67.4%, which was similar to the percentage among Native Hawaiian adults (67.6%); higher than the percentages among all Pacific Islander (58.6%), Samoan (55.3%), and Other Pacific Islander (57.3%) adults; and higher than, but not significantly different from, the percentage among Guamanian or Chamorro adults (65.0%).

Table 11. Crude percent distribution of type of health insurance coverage of adults aged 18–64 at the time of interview, by race including Native Hawaiian and Pacific Islander detailed race: United States, 2014

Data source and race	Private (any)	Public	Uninsured
Crude percent (standard error)			
2014 NHIS			
U.S. total ¹	67.4 (0.38)	16.3 (0.28)	16.3 (0.26)
Single-race:			
White	69.8 (0.42)	14.1 (0.30)	16.0 (0.30)
Black or African American	53.0 (0.82)	28.9 (0.70)	18.0 (0.57)
American Indian or Alaska Native	39.6 (2.76)	24.3 (2.13)	36.1 (2.40)
Asian	74.2 (1.06)	13.0 (0.78)	12.8 (0.77)
2014 NHPI NHIS			
All NHPI:			
NHPI total	63.8 (1.34)	23.4 (0.77)	12.9 (1.08)
Native Hawaiian	67.6 (1.50)	23.8 (1.22)	8.6 (0.87)
Pacific Islander	58.6 (2.25)	23.2 (1.52)	18.2 (2.04)
Samoan	55.3 (3.30)	28.6 (2.87)	16.1 (2.26)
Guamanian or Chamorro	65.0 (3.74)	19.8 (4.00)	15.1 (3.10)
Other Pacific Islander ²	57.3 (4.20)	21.5 (2.92)	21.3 (3.49)
Multiple-race NHPI ³ :			
NHPI total	68.8 (1.06)	22.2 (0.98)	9.0 (0.98)
Native Hawaiian	68.6 (1.21)	23.5 (1.09)	7.9 (0.91)
Pacific Islander	67.0 (2.22)	18.4 (3.55)	14.6 (3.82)
Samoan	61.1 (5.64)	23.1 (5.14)	15.8 (4.38)
Guamanian or Chamorro	64.9 (5.45)	18.0 (5.38)	*
Other Pacific Islander ²	79.8 (5.08)	*11.6 (3.75)	*8.6 (4.22)
Single-race NHPI ⁴ :			
NHPI total	59.7 (2.02)	24.3 (1.35)	16.0 (1.46)
Native Hawaiian	65.6 (3.66)	24.4 (3.01)	10.0 (1.79)
Pacific Islander	56.8 (2.67)	24.2 (1.94)	19.0 (2.08)
Samoan	53.7 (3.98)	30.1 (3.38)	16.2 (2.56)
Guamanian or Chamorro	65.0 (4.43)	20.6 (4.39)	14.4 (1.84)
Other Pacific Islander ²	55.0 (4.84)	22.5 (3.18)	22.5 (3.92)

* Estimates are considered unreliable. Data preceded by an asterisk have a relative standard error (RSE) greater than 30% and less than or equal to 50% and should be used with caution. Data not shown have an RSE greater than 50%.

¹Includes other races not shown separately.

²Includes all other specific NHPI racial identities, such as Tongan, Fijian, and Marshallese, as well as general NHPI racial identities, such as Polynesian, Micronesian, Melanesian, and Pacific Islander. It also includes those who reported more than one Pacific Islander racial identity. It does not include those who indicated Native Hawaiian in addition to one or more Pacific Islander races. The racial identity Polynesian is considered Pacific Islander, not Native Hawaiian.

³Indicates at least one other federal race category was reported in addition to NHPI.

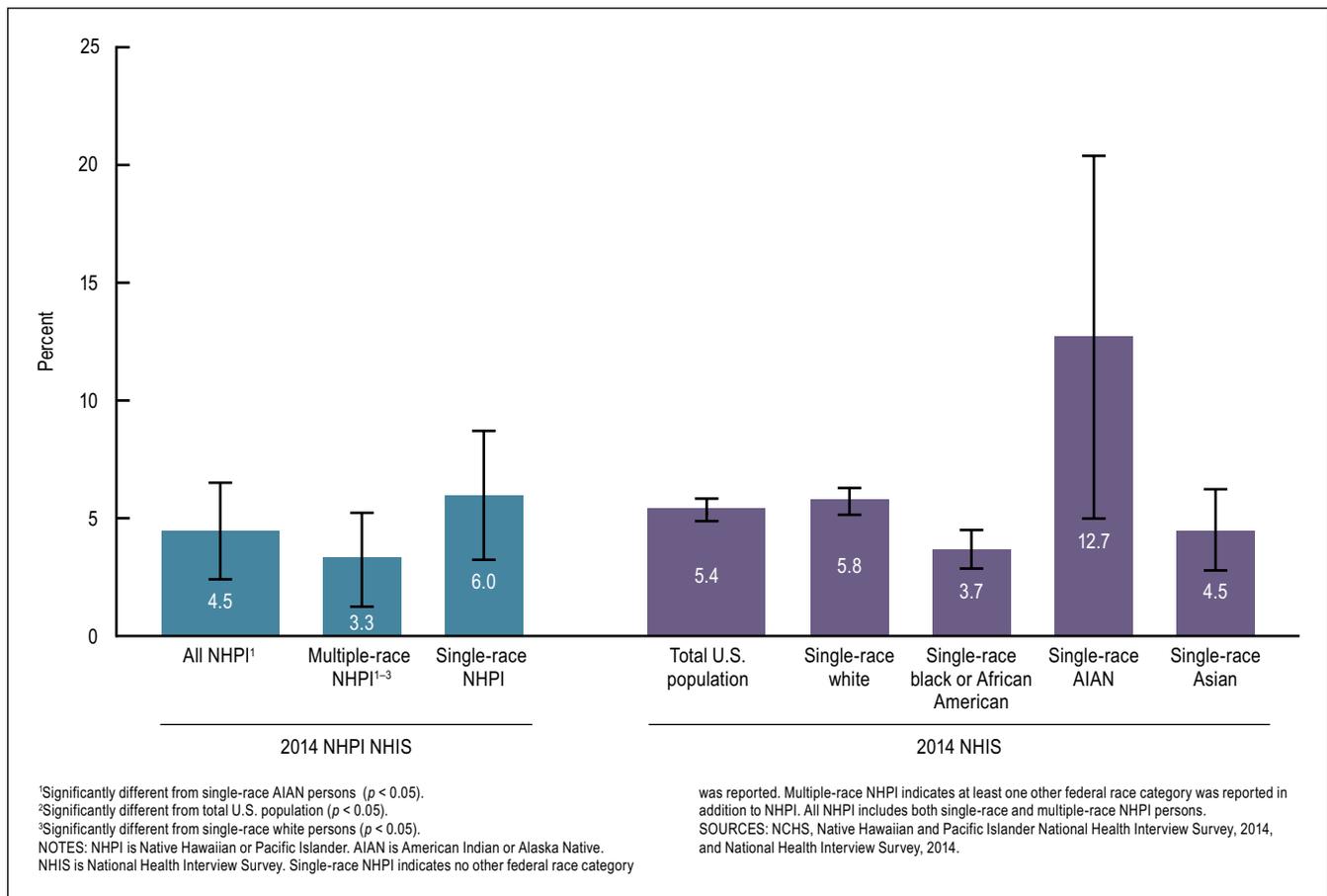
⁴Indicates no other federal race category was reported.

NOTES: Native Hawaiian and Pacific Islander (NHPI) persons together compose the NHPI population. Samoan, Guamanian or Chamorro, and Other Pacific Islander persons together compose the Pacific Islander population. The 3.4% of the NHPI population that is both Native Hawaiian and Pacific Islander is included in data for NHPI total under All NHPI, Multiple-race NHPI, and Single-race NHPI but is excluded from all other categories. NHIS is National Health Interview Survey.

SOURCES: NCHS, Native Hawaiian and Pacific Islander National Health Interview Survey, 2014, and National Health Interview Survey, 2014.

Lack and Type of Health Insurance Coverage—Child

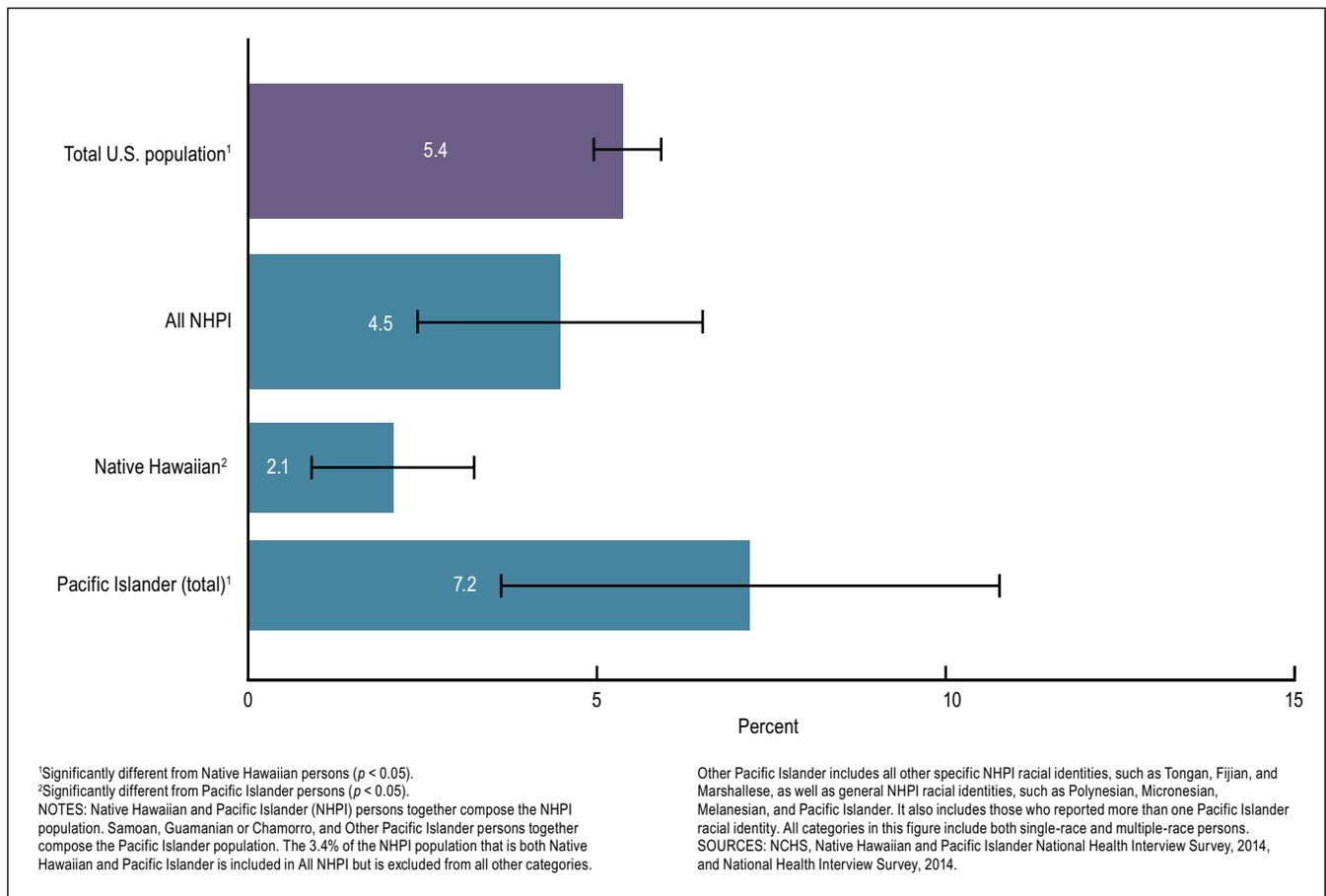
Figure 33. Age-adjusted percentage of children under age 18 years without health insurance coverage at the time of interview, by race: United States, 2014



- Among all NHPI children, the percentage without health insurance coverage at the time of interview was 4.5%, which was similar to the percentages among all U.S. (5.4%), white (5.8%), black (3.7%), and Asian (4.5%) children and lower than the percentage among AIAN children (12.7%) (Figure 33, Table 12).
- Among multiple-race NHPI children, the percentage without health insurance coverage at the time of interview was 3.3%, which was similar to the percentages among black (3.7%) and Asian (4.5%) children and lower than the percentages among all U.S. (5.4%), white (5.8%), and AIAN (12.7%) children.
- Among single-race NHPI children, the percentage without health insurance coverage at the time of interview was 6.0%, which was similar to the percentage among all U.S. (5.4%) and white (5.8%) children; higher than, but not significantly different from, the percentages among black (3.7%) and Asian (4.5%) children; and lower than, but not significantly different from, the percentage among AIAN children (12.7%).
- The percentage of single-race NHPI children without health insurance at the time of interview (6.0%) was higher than, but not significantly different from, the percentage among multiple-race NHPI children (3.3%).

Lack and Type of Health Insurance Coverage—Child

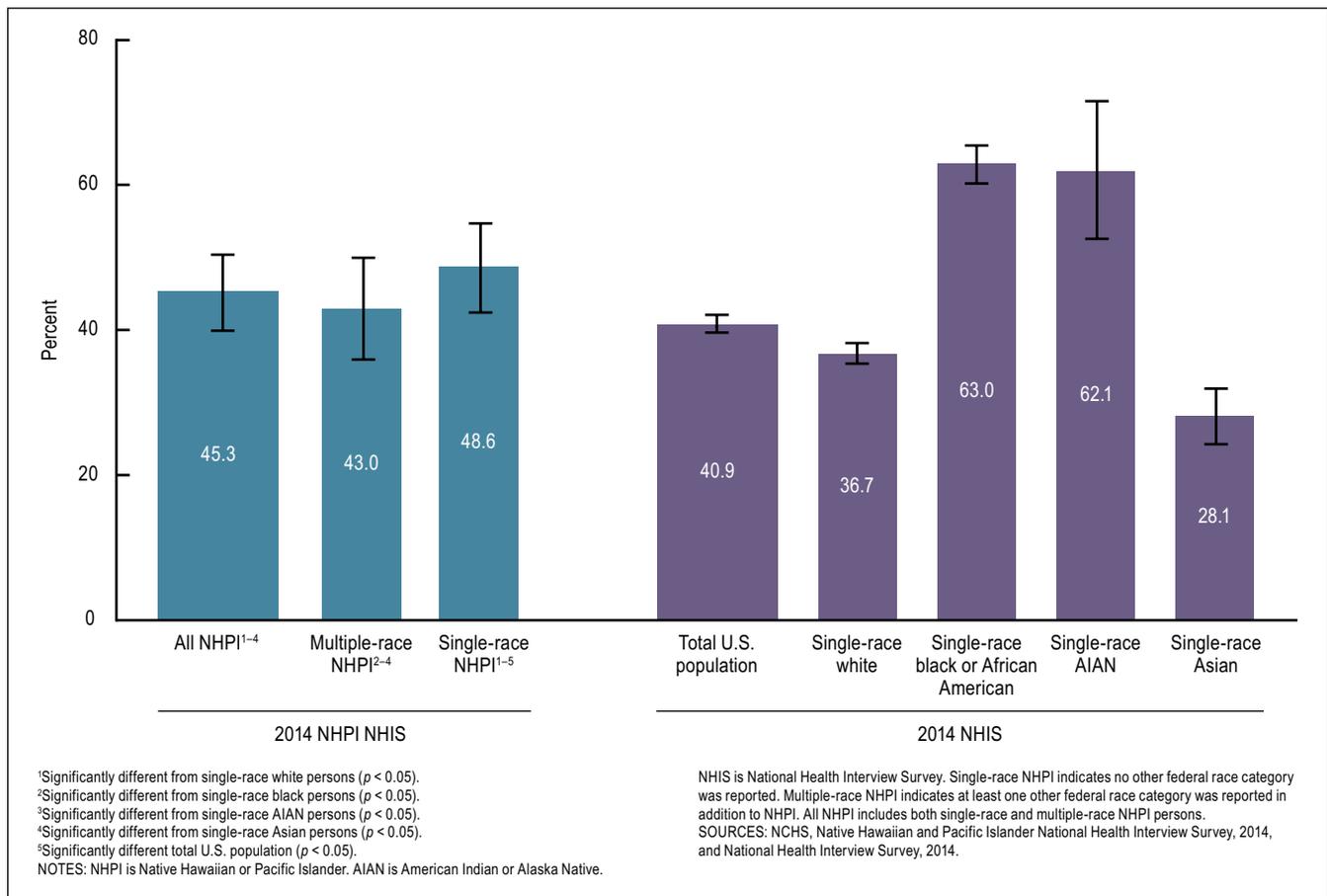
Figure 34. Age-adjusted percentage of children under age 18 years without health insurance coverage at the time of interview, by Native Hawaiian and Pacific Islander detailed race: United States, 2014



- The percentage of Native Hawaiian children without health insurance coverage at the time of interview was 2.1%, which was lower than the percentage among all Pacific Islander children (7.2%) (Figure 34, Table 12).
- The percentage of all U.S. children without health insurance coverage at the time of interview was 5.4%, which was higher than the percentage among Native Hawaiian children (2.1%) and lower than, but not significantly different from, the percentage among all Pacific Islander children (7.2%).

Lack and Type of Health Insurance Coverage—Child

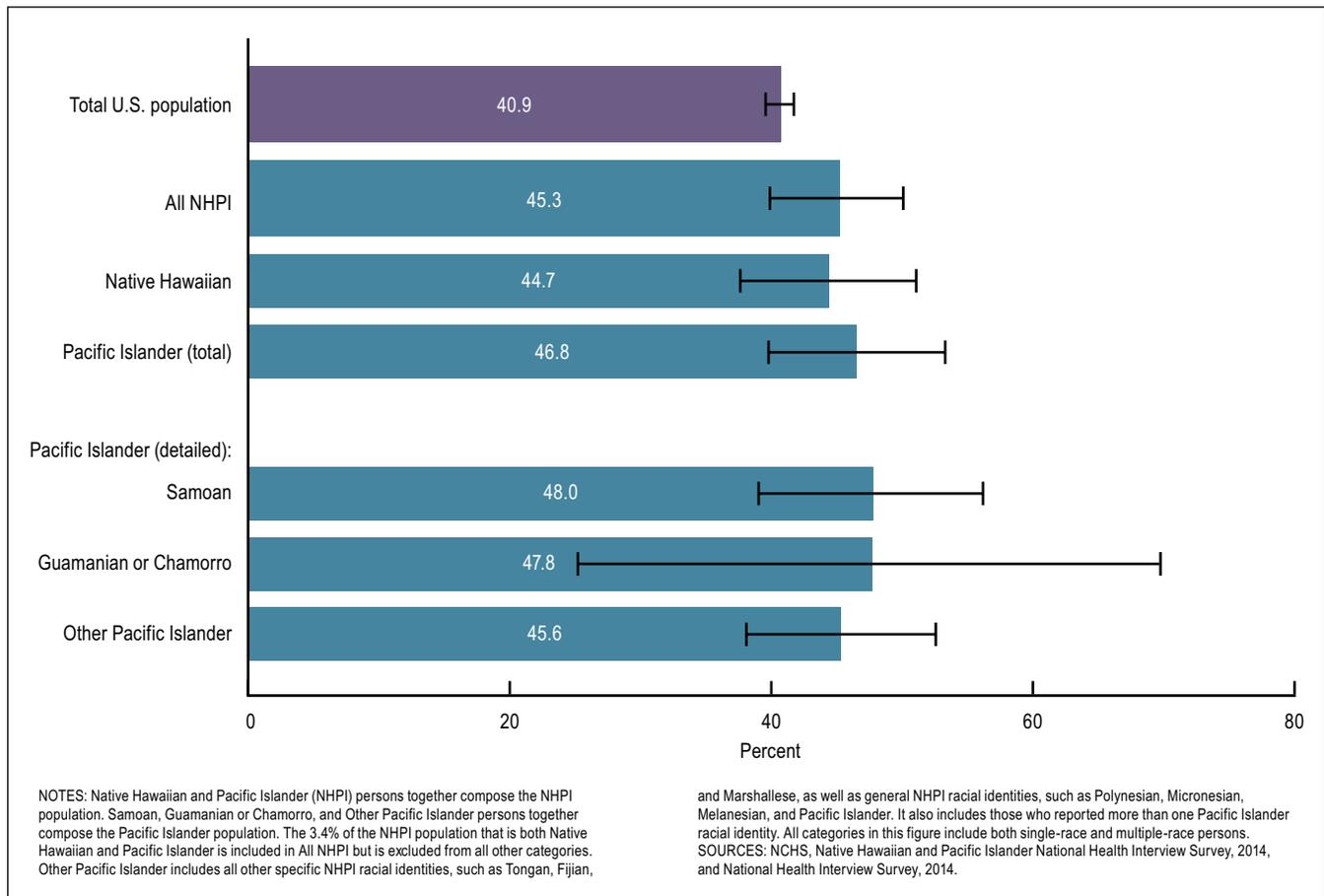
Figure 35. Age-adjusted percentage of children under age 18 years with public health insurance coverage at the time of interview, by race: United States, 2014



- Among all NHPI children, the percentage with public health insurance coverage at the time of interview was 45.3%, which was higher than, but not significantly different from, the percentage among all U.S. children (40.9%); higher than the percentages among white (36.7%) and Asian (28.1%) children; and lower than the percentages among black (63.0%) and AIAN (62.1%) children (Figure 35, Table 12).
- Among multiple-race NHPI children, the percentage with public health insurance coverage at the time of interview was 43.0%, which was higher than, but not significantly different from, the percentages among all U.S. (40.9%) and white (36.7%) children; higher than the percentage among Asian children (28.1%); and lower than the percentages among black (63.0%) and AIAN (62.1%) children.
- Among single-race NHPI children, the percentage with public health insurance coverage at the time of interview was 48.6%, which was higher than, but not significantly different from, the percentage among multiple-race NHPI children (43.0%).
- The percentage of single-race NHPI children with public health insurance coverage at the time of interview (48.6%) was higher than, but not significantly different from, the percentage among multiple-race NHPI children (43.0%).
- Among single-race NHPI children, the percentage with public health insurance coverage at the time of interview was 48.6%, which was higher than the percentages among all U.S. (40.9%), white (36.7%), and Asian (28.1%) children and lower than the percentages among black (63.0%) and AIAN (62.1%) children.

Lack and Type of Health Insurance Coverage—Child

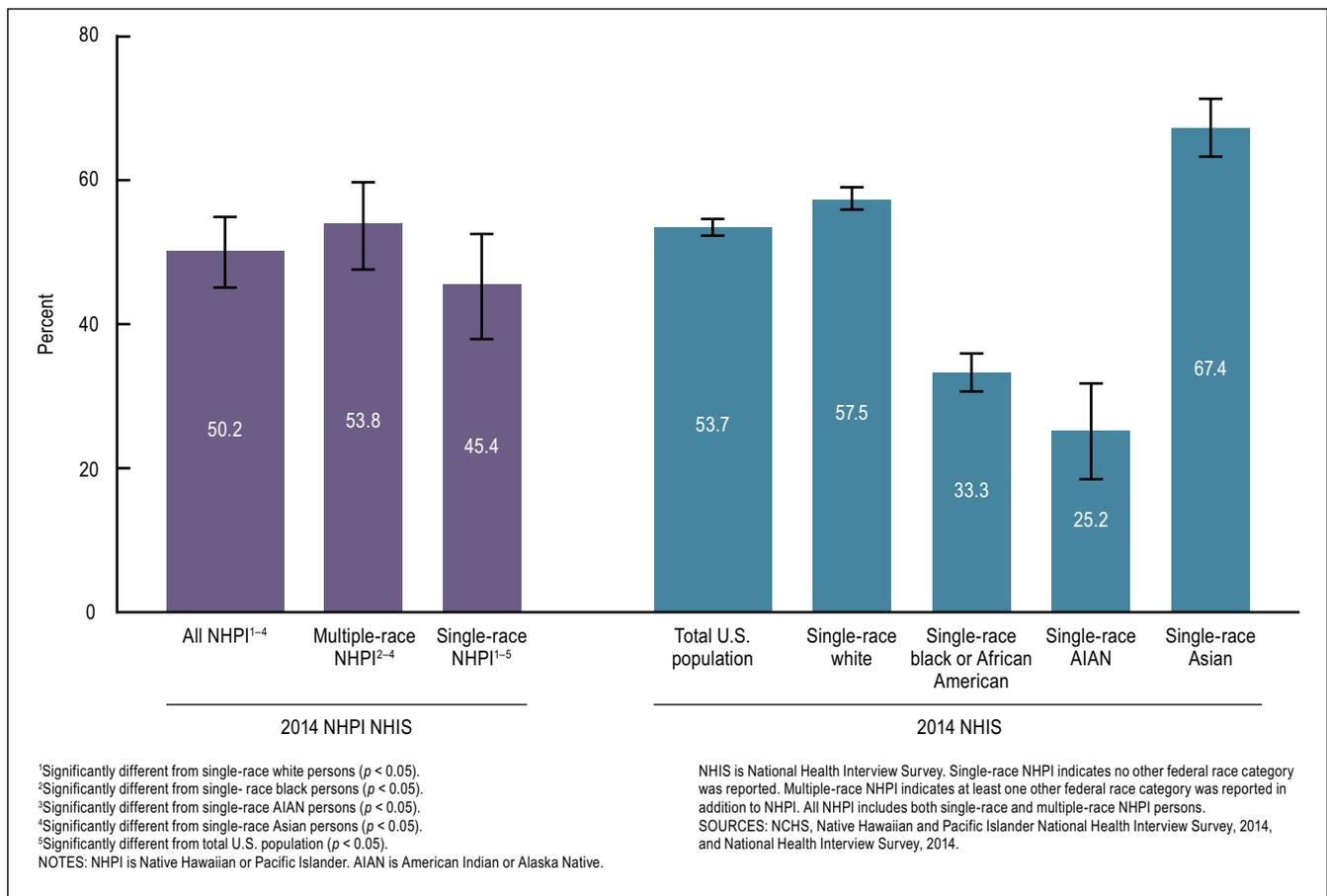
Figure 36. Age-adjusted percentage of children under age 18 years with public health insurance coverage at the time of interview, by Native Hawaiian and Pacific Islander detailed race: United States, 2014



- The percentage of Native Hawaiian children with public health insurance coverage at the time of interview was 44.7%, which was similar to the percentages among all Pacific Islander (46.8%) and Other Pacific Islander (45.6%) children and lower than, but not significantly different from, the percentages among Samoan (48.0%) and Guamanian or Chamorro (47.8%) children (Figure 36, Table 12).
- The percentage of Samoan children with public health insurance coverage at the time of interview was 48.0%, which was higher than, but not significantly different from, the percentages among Native Hawaiian (44.7%) and Other Pacific Islander (45.6%) children and similar to the percentage among Guamanian or Chamorro children (47.8%).
- The percentage of Guamanian or Chamorro children with public health insurance coverage at the time of interview was 47.8%, which was higher than, but not significantly different from, the percentages among Native Hawaiian (44.7%) and Other Pacific Islander (45.6%) children and similar to the percentage among Samoan children (48.0%).
- The percentage of Other Pacific Islander children with public health insurance coverage at the time of interview was 45.6%, which was similar to the percentage among Native Hawaiian children (44.7%) and lower than, but not significantly different from, the percentages among Samoan (48.0%) and Guamanian or Chamorro (47.8%) children.
- The percentage of all U.S. children with public health insurance coverage at the time of interview was 40.9%, which was lower than, but not significantly different from, the percentages among Native Hawaiian (44.7%), all Pacific Islander (46.8%), Samoan (48.0%), Guamanian or Chamorro (47.8%), and Other Pacific Islander (45.6%) children.

Lack and Type of Health Insurance Coverage—Child

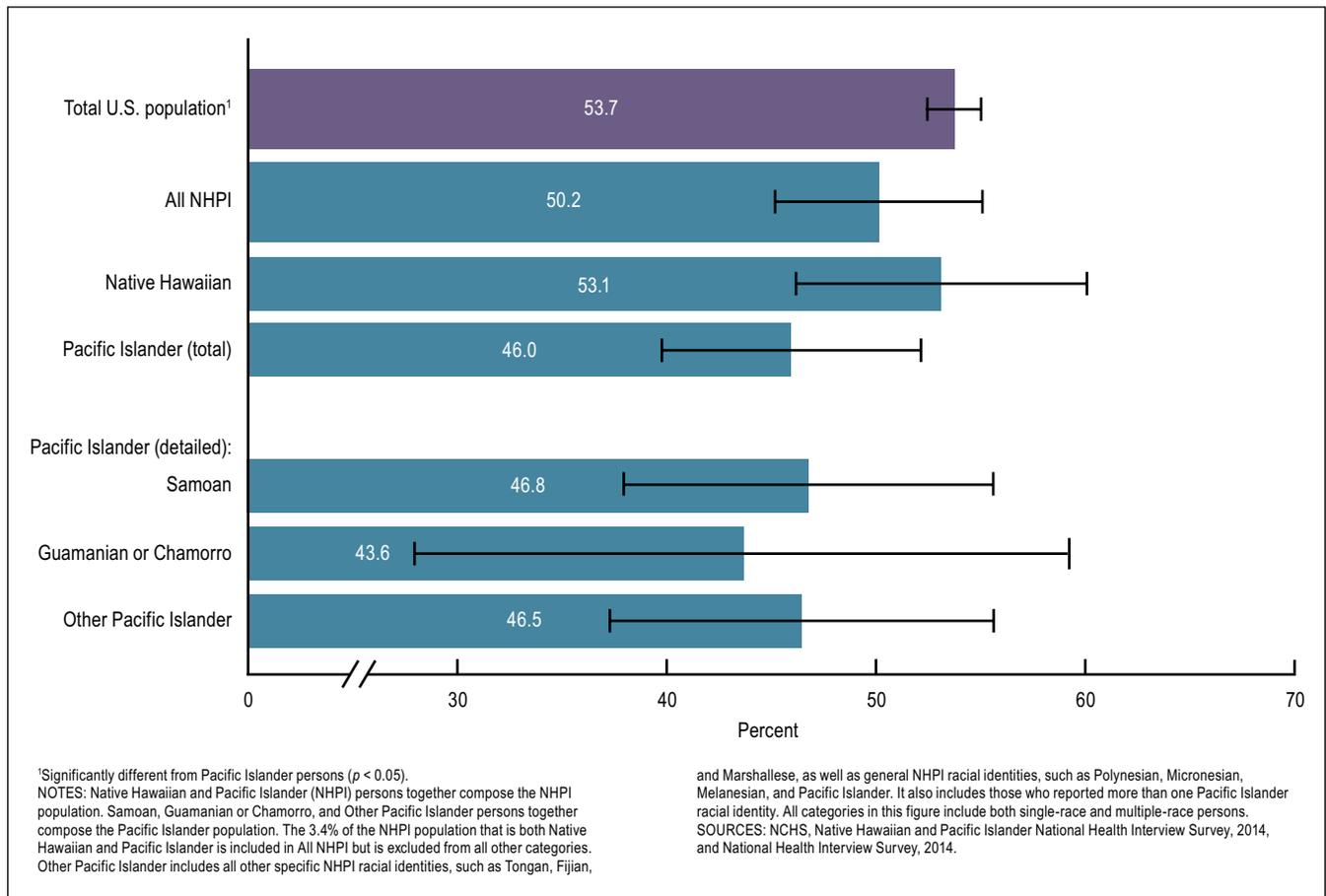
Figure 37. Age-adjusted percentage of children under age 18 years with any private health insurance coverage at the time of interview, by race: United States, 2014



- Among all NHPI children, the percentage with private health insurance coverage at the time of interview was 50.2%, which was lower than, but not significantly different from, all U.S. children (53.7%); lower than the percentages among white (57.5%) and Asian (67.4%) children; and higher than the percentages among black (33.3%) and AIAN (25.2%) children (Figure 37, Table 12).
- Among multiple-race NHPI children, the percentage with private health insurance coverage at the time of interview was 53.8%, which was similar to the percentage among all U.S. children (53.7%); lower than, but not significantly different from, the percentage among white children (57.5%); lower than the percentage among Asian children (67.4%); and higher than the percentages among black (33.3%) and AIAN (25.2%) children.
- Among single-race NHPI children, the percentage with private health insurance coverage at the time of interview was 45.4%, which was lower than the percentages among all U.S. (53.7%), white (57.5%), and Asian (67.4%) children and higher than the percentages among black (33.3%) and AIAN (25.2%) children.
- The percentage of single-race NHPI children with any private health insurance coverage at the time of interview (45.4%) was lower than, but not significantly different from, the percentage among multiple-race NHPI children (53.8%).

Lack and Type of Health Insurance Coverage—Child

Figure 38. Age-adjusted percentage of children under age 18 years with any private health insurance coverage at the time of interview, by Native Hawaiian and Pacific Islander detailed race: United States, 2014



- The percentage of Native Hawaiian children with private health insurance coverage at the time of interview was 53.1%, which was higher than, but not significantly different from, the percentages among all Pacific Islander (46.0%), Samoan (46.8%), Guamanian or Chamorro (43.6%), and Other Pacific Islander (46.5%) children (Figure 38, Table 12).
- The percentage of Samoan children with private health insurance coverage at the time of interview was 46.8%, which was lower than, but not significantly different from, the percentage among Native Hawaiian children (53.1%); higher than, but not significantly different from, the percentage among Guamanian or Chamorro children (43.6%); and similar to the percentage among Other Pacific Islander children (46.5%).
- The percentage of Guamanian or Chamorro children with private health insurance coverage at the time of interview was 43.6%, which was lower than, but not significantly different from, the percentages among Native Hawaiian (53.1%), Samoan (46.8%), and Other Pacific Islander (46.5%) children.
- The percentage of Other Pacific Islander children with private health insurance coverage at the time of interview was 46.5%, which was lower than, but not significantly different from, the percentage among Native Hawaiian children (53.1%); similar to the percentage among Samoan children (46.8%); and higher than, but not significantly different from, the percentage among Guamanian or Chamorro children (43.6%).
- The percentage of all U.S. children with private health insurance coverage at the time of interview was 53.7%, which was similar to the percentage among Native Hawaiian children (53.1%); higher than the percentage among all Pacific Islander children (46.0%); and higher than, but not significantly different from, the percentages among Samoan (46.8%), Guamanian or Chamorro (43.6%), and Other Pacific Islander (46.5%) children.

Table 12. Crude and age-sex-adjusted percent distributions of type of health insurance coverage for children under age 18 years, by race including Native Hawaiian and Pacific Islander detailed race: United States, 2014

Data source and race	Private (any)	Public	Uninsured	Private (any)	Public	Uninsured
	Crude percent (standard error)			Age-adjusted percent (standard error)		
2014 NHIS						
U.S. total ¹	53.7 (0.65)	40.9 (0.61)	5.4 (0.23)	53.7 (0.65)	40.9 (0.61)	5.4 (0.23)
Single-race:						
White	57.6 (0.75)	36.6 (0.71)	5.8 (0.29)	57.5 (0.75)	36.7 (0.71)	5.8 (0.29)
Black or African American	33.3 (1.33)	62.9 (1.35)	3.7 (0.41)	33.3 (1.32)	63.0 (1.33)	3.7 (0.41)
American Indian or Alaska Native	24.9 (3.44)	62.5 (4.69)	*12.6 (3.84)	25.2 (3.46)	62.1 (4.82)	*12.7 (3.92)
Asian	67.4 (2.04)	28.1 (1.95)	4.5 (0.88)	67.4 (2.04)	28.1 (1.95)	4.5 (0.89)
2014 NHPI NHIS						
All NHPI:						
NHPI total	50.0 (2.55)	45.6 (2.63)	4.5 (1.07)	50.2 (2.55)	45.3 (2.64)	4.5 (1.04)
Native Hawaiian	53.1 (3.52)	44.7 (3.44)	2.1 (0.59)	53.1 (3.53)	44.7 (3.46)	2.1 (0.59)
Pacific Islander	45.3 (3.17)	47.5 (3.59)	7.3 (1.93)	46.0 (3.16)	46.8 (3.52)	7.2 (1.82)
Samoan	46.8 (4.90)	48.0 (4.98)	*5.2 (1.67)	46.8 (4.51)	48.0 (4.40)	*5.2 (1.59)
Guamanian or Chamorro	43.5 (7.52)	47.4 (11.90)	*	43.6 (8.02)	47.8 (11.46)	*
Other Pacific Islander ²	45.0 (4.78)	47.2 (3.86)	7.8 (2.29)	46.5 (4.70)	45.6 (3.77)	*7.9 (2.37)
Multiple-race NHPI ³ :						
NHPI total	53.5 (3.12)	43.2 (3.64)	*3.3 (1.10)	53.8 (3.15)	43.0 (3.59)	*3.3 (1.03)
Native Hawaiian	53.6 (3.43)	43.9 (3.38)	*2.5 (0.75)	53.8 (3.43)	43.7 (3.38)	*2.5 (0.76)
Pacific Islander	51.4 (5.72)	43.2 (8.43)	*	51.7 (5.87)	43.2 (8.21)	*
Samoan	56.8 (7.09)	41.7 (7.14)	*	57.1 (6.91)	41.3 (6.91)	*
Guamanian or Chamorro	41.2 (8.52)	*49.6 (16.10)	*	41.6 (8.92)	50.4 (14.02)	*
Other Pacific Islander ²	56.8 (9.43)	37.2 (8.49)	*	57.5 (9.14)	35.9 (7.68)	*
Single-race NHPI ⁴ :						
NHPI total	45.1 (3.85)	48.9 (3.24)	6.0 (1.39)	45.4 (3.76)	48.6 (3.18)	6.0 (1.38)
Native Hawaiian	51.9 (7.59)	47.0 (7.58)	*	52.1 (7.47)	46.7 (7.43)	*
Pacific Islander	41.5 (4.13)	50.1 (3.01)	8.4 (1.93)	42.5 (4.03)	49.0 (2.89)	8.5 (1.88)
Samoan	37.7 (6.67)	53.7 (6.81)	*8.6 (3.08)	37.1 (6.03)	54.7 (5.73)	*8.3 (2.67)
Guamanian or Chamorro	47.4 (9.28)	43.7 (10.55)	*8.9 (4.10)	45.7 (8.74)	45.1 (10.88)	*9.1 (3.95)
Other Pacific Islander ²	41.8 (5.53)	49.9 (4.43)	*8.3 (2.80)	43.4 (5.41)	48.3 (4.39)	*8.3 (2.80)

* Estimates are considered unreliable. Data preceded by an asterisk have a relative standard error (RSE) greater than 30% and less than or equal to 50% and should be used with caution. Data not shown have an RSE greater than 50%.

¹Includes other races not shown separately.

²Includes all other specific NHPI racial identities, such as Tongan, Fijian, and Marshallese, as well as general NHPI racial identities, such as Polynesian, Micronesian, Melanesian, and Pacific Islander. It also includes those who reported more than one Pacific Islander racial identity. It does not include those who indicated Native Hawaiian in addition to one or more Pacific Islander races. The racial identity Polynesian is considered Pacific Islander, not Native Hawaiian.

³Indicates at least one other federal race category was reported in addition to NHPI.

⁴Indicates no other federal race category was reported.

NOTES: Native Hawaiian and Pacific Islander (NHPI) persons together compose the NHPI population. Samoan, Guamanian or Chamorro, and Other Pacific Islander persons together compose the Pacific Islander population. The 3.4% of the NHPI population that is both Native Hawaiian and Pacific Islander is included in data for NHPI total under All NHPI, Multiple-race NHPI, and Single-race NHPI but is excluded from all other categories. Age-adjusted estimates are adjusted using the projected 2000 U.S. population as the standard population and three age groups: 0–4, 5–11, and 12–17. NHIS is National Health Interview Survey.

SOURCES: NCHS, Native Hawaiian and Pacific Islander National Health Interview Survey, 2014, and National Health Interview Survey, 2014.

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Appendix I. Technical Notes

Data Sources

Data used to produce this report were derived from the three main components of the 2014 Native Hawaiian and Pacific Islander (NHPI) National Health Interview Survey (NHIS) and the regular 2014 NHIS: (a) the Family Core, which collects information on all family members in each household; (b) the Sample Child Core, which collects information on one randomly selected child (“sample child”) in each family with a child; and (c) the Sample Adult Core, which collects information from one randomly selected adult (“sample adult”) in each family.

Data analyses for the NHPI NHIS were based on 8,661 NHPI persons in the Family Core (the component that collects the data used to construct the Person variables), 2,590 adults in the Sample Adult Core, and 1,305 children in the Sample Child Core. Visit the NHPI NHIS website at: <https://www.cdc.gov/nchs/nhis/nhpi.html> for more information on the design, content, and use of the NHPI NHIS. Data analyses for the 2014 NHIS were based on 111,976 persons in the Family Core, 36,794 adults in the Sample Adult Core, and 13,413 children in the Sample Child Core. Visit the NHIS website at: <https://www.cdc.gov/nchs/nhis/index.htm> for more information on the design, content, and use of NHIS.

Table. Weighted frequency distribution of persons, by age and race including Native Hawaiian and Pacific Islander detailed race: United States, 2014

Data source and race	Total (N)	Aged 18 and over	Under age 18 years
2014 NHIS			
U.S. total ¹	313,090	239,683	73,406
Single-race:			
White	244,763	190,508	54,255
Black or African American	40,340	29,458	10,883
American Indian or Alaska Native	2,992	2,078	914
Asian	17,461	13,664	3,796
2014 NHPI NHIS			
All NHPI:			
NHPI total	1,068	689	379
Native Hawaiian	565	378	187
Pacific Islander	467	295	171
Samoan	141	88	53
Guamanian or Chamorro	109	73	35
Other Pacific Islander ²	216	133	83
Multiple-race NHPI ³ :			
NHPI total	522	304	217
Native Hawaiian	380	244	136
Pacific Islander	112	48	64
Samoan	42	18	24
Guamanian or Chamorro	41	19	22
Other Pacific Islander ²	29	11	18
Single-race NHPI ⁴ :			
NHPI total	546	384	162
Native Hawaiian	185	134	51
Pacific Islander	355	247	107
Samoan	100	70	29
Guamanian or Chamorro	68	55	13
Other Pacific Islander ²	187	122	65

¹Includes other races not shown separately.

²Includes all other specific NHPI racial identities, such as Tongan, Fijian, and Marshallese, as well as general NHPI racial identities, such as Polynesian, Micronesian, Melanesian, and Pacific Islander. It also includes those who reported more than one Pacific Islander racial identity. It does not include those who indicated Native Hawaiian in addition to one or more Pacific Islander races. The racial identity Polynesian is considered Pacific Islander, not Native Hawaiian.

³Indicates at least one other federal race category was reported in addition to NHPI.

⁴Indicates no other federal race category was reported.

NOTES: Native Hawaiian and Pacific Islander (NHPI) persons together compose the NHPI population. Samoan, Guamanian or Chamorro, and Other Pacific Islander persons together compose the Pacific Islander population. The 3.4% of the NHPI population that is both Native Hawaiian and Pacific Islander is included in data for NHPI total under All NHPI, Multiple-race NHPI, and Single-race NHPI but is excluded from all other categories. NHIS is National Health Interview Survey.

SOURCES: NCHS, Native Hawaiian and Pacific Islander National Health Interview Survey, 2014, and National Health Interview Survey, 2014.

For the 2014 population sizes of each of the race groups used in this report, see the [Table](#) in [Appendix I](#).

This report includes detailed race group estimates that cannot be calculated using the race variables available in the NHPI NHIS public-use file. In addition, the NHIS variance estimates in this report were produced using sample design information that is more detailed than that available in the NHIS public-use files. Analysts should be aware that variances may differ depending on the sample design information used. Analysts wishing to conduct analyses using the variables from the NHPI NHIS that were used to calculate estimates in this report, including the detailed race variables, must apply to use the restricted NHPI NHIS data file. For more information, visit the Federal Statistical Research Data Centers website (<https://www.census.gov/fsrdc>) and the Center for Economic Studies' RDC Research website (<https://www.census.gov/ces/rdcresearch/howtoapply.html>). Analysts wishing to conduct analyses using the sample design variables from NHIS that were used to calculate estimates in this report should contact the National Center for Health Statistics' (NCHS) Research Data Center.

Estimation Procedures

The Person, Sample Adult, and Sample Child weights were used to produce the national health estimates shown in the tables in this report. The NHPI NHIS sample weights were calibrated to the American Community Survey (ACS)-based population estimates for sex and age of the U.S. civilian noninstitutionalized NHPI population. The NHIS sample weights were both calibrated to 2010 census-based population estimates for sex, age, and race and ethnicity of the U.S. civilian noninstitutionalized population. More information on weighting can be found in the NHPI NHIS and NHIS survey description documents (2,14) and the report on design and estimation for NHIS (19). For each health measure, percentages for all persons, all adults, or all children, and for various race and age-race subgroups of these populations are shown.

Because NHPI NHIS and NHIS data are based on a sample of the population, the data are subject to sampling error. Standard errors are reported to indicate the reliability of the estimates. Point estimates and estimates of their variances—or standard errors—were calculated using SUDAAN software, which takes into account the complex sampling design of the NHPI NHIS and NHIS. The Taylor series linearization method was used for variance estimation in SUDAAN (20).

Persons whose response to a given question on a health characteristic of interest was coded as “refused,” “don’t know,” or “not ascertained” are not included in the calculation of percentages for that health characteristic (as part of either the denominator or the numerator) to provide a more straightforward presentation of the data. For all health measures in the tables, the percentages with

unknown values are typically small (generally less than 1%) and would not support disaggregation by the demographic characteristics included in the tables. Estimates based on health characteristics with unknown percentages greater than 2% are indicated in the footnotes for the appropriate tables.

Statistical Reliability

Standard errors are shown for all percentages in the tables. Relative standard errors (RSEs) are calculated as the standard error of the estimate divided by the estimate itself (percentage), and the result is then converted to a percentage value by multiplying the decimal value by 100.

Estimates with an RSE greater than 30% and less than or equal to 50% are indicated with an asterisk (*) and should be used with caution because they do not meet standards of reliability or precision. Estimates with an RSE greater than 50% are indicated with an asterisk (*) and are not shown. Estimates for population subgroups with small sample sizes may fluctuate considerably from survey to survey due to sampling variability.

Hypothesis Tests

This report presents results of statistical tests for differences between the estimates for the white, black, American Indian or Alaska Native (AIAN), and Asian populations calculated using the 2014 NHIS data set and the estimates for the NHPI population calculated using the NHPI NHIS, as well as between the estimates for some of the detailed NHPI groups calculated using the NHPI NHIS.

Differences between percentages were evaluated using two-sided significance tests at the 0.05 level. Terms such as “higher than,” “less than,” “more likely,” and “less likely” indicate a statistically significant difference unless otherwise noted. Terms such as “similar” and “no difference” indicate that the statistics being compared were not significantly different. Lack of comment regarding the difference between any two statistics does not necessarily mean that the difference was tested and found to be not significant.

Age Adjustment and Age-Sex Adjustment

Age-adjusted (or age-sex-adjusted) and crude percentage estimates are provided for all tables. All percentages were age adjusted or age-sex adjusted to the projected 2000 U.S. standard population (18). Direct standardization was used for adjustment, using age groups that varied depending on the impact of age on the specific measure. Age-adjusted percentages permit comparison among various sociodemographic subgroups that may have different age structures (17,18). Age-sex-adjusted percentages permit

comparison among various sociodemographic subgroups that may have different age structures and prevalence for particular health characteristics that differ by sex. This is particularly important when comparing estimates across racial groups. The age groups used for age adjustment in each table are specified in the table's footnotes. Age-adjusted percentages and age-sex-adjusted percentages shown in the tables may not match age-adjusted percentages or age-sex-adjusted percentages for the same health characteristic in other reports, if different age groups were used for age adjustment.

As a result of the relatively small population size of multiple-race Pacific Islander persons and, consequently, a small sample size, it is not possible to calculate some age-adjusted prevalence estimates for this population. The cells for such estimates contain only a dagger symbol (†). This occurs when there are no multiple-race Pacific Islander people within one or more age-adjustment categories with the given value of the health measure of interest.

Age-adjusted and age-sex-adjusted percentages should be viewed as relative indexes rather than actual measures of risk. Unadjusted or crude percentages are more appropriate when actual risk or "burden" of illness is of interest. For more information on the derivation of age-adjustment weights for use with NCHS survey data, see "Age Adjustment Using the 2000 Projected U.S. Population" (18) and the projected year 2000 U.S. resident population (17).

Data Limitations

Before releasing the NHPI NHIS public-use data file, NCHS analyzed the quality of the NHPI NHIS data. This analysis compared the characteristics of the NHPI sample in the NHPI NHIS with the characteristics of the NHPI sample in two other national surveys (ACS and NHIS). In most regards, the samples were comparable.

However, the 2014 NHPI NHIS sample differed from the ACS and NHIS samples on a few key characteristics. Compared with the NHPI sample in the ACS frame and 5 years (2010–2014) of combined NHIS NHPI data, the NHPI NHIS sample had a lower proportion of Hispanic NHPI persons, a higher proportion of married but separated NHPI persons, a lower proportion of addresses with a single NHPI person, and a higher proportion of addresses that were resident owned. However, for most analytic purposes, these differences are not likely to influence the results in a manner substantial enough to raise concerns about the underlying fitness of the data. For more information about NHPI NHIS data quality, see the NHPI NHIS survey description (2) and the NHPI NHIS data quality analysis (21).

Appendix II. Definitions of Selected Terms

Health insurance coverage (Tables 11 and 12)—Describes health insurance coverage at the time of interview. Respondents reported whether they were covered by private insurance (obtained from their employer or workplace, purchased directly, or purchased through a local or community program), Medicare, Medigap (supplemental Medicare coverage), Medicaid, Children’s Health Insurance Program (CHIP), Indian Health Service (IHS), military coverage (including VA, TRICARE, or CHAMP-VA), state-sponsored or other government-sponsored health plan, or single-service plans.

For adults aged 65 and under and children aged 18 and under, a health insurance hierarchy of three mutually exclusive categories was developed. Persons with more than one type of health insurance were assigned to the first appropriate category in the following hierarchy:

Private coverage (Tables 11 and 12)—Includes persons who had any comprehensive private insurance plan (including health maintenance and preferred provider organizations). These plans include those obtained through an employer, purchased directly, or purchased through local or community programs. Private coverage excludes plans that pay for only one type of service, such as accidents or dental care.

Public coverage (Tables 11 and 12)—Includes Medicare (disability), Medicaid, CHIP, state-sponsored or other government-sponsored health plan, and military plans.

Uninsured (Tables 11 and 12)—A person was defined as uninsured if he or she did not have any private health insurance, Medicare, Medicaid, CHIP, state-sponsored or other government-sponsored health plan, or military plan at the time of interview. A person was also defined as uninsured if he or she had only IHS coverage or had only a private plan that paid for one type of service, such as accidents or dental care.

HIV testing status (Table 9)—Respondents were asked whether they had ever had their blood tested for HIV.

Influenza vaccination (Tables 6 and 7)—Estimates include both the seasonal influenza shot and seasonal intranasal influenza vaccination. Responses to influenza vaccination questions used to calculate the influenza vaccination estimates presented in this report cannot be used to determine when, during the preceding 12 months, the subject received the influenza vaccination. In addition, estimates are subject to recall error, which will vary depending on when the question is asked, because

the receipt of an influenza vaccination is seasonal. The prevalence of influenza vaccination during the past 12 months may differ from season-specific coverage. Estimates are available from: <https://www.cdc.gov/flu/fluview>.

Race (all tables)—The categories “single-race white,” “single-race black,” “single-race American Indian or Alaska Native (AIAN),” “single-race Asian,” and “single-race Native Hawaiian and Pacific Islander (NHPI)” refer to persons who indicated only the given race, each of which is one of the five federal race categories (1). Persons who give more than one race response within a single federal race category (e.g., Native Hawaiian and Samoan, which are both coded as NHPI) and no race responses in any other federal race category are considered single race for the purpose of these tables. The category “multiple-race NHPI” refers to persons who indicated one or more NHPI races and one or more races in one or more of the other federal race categories.

The 2014 National Health Interview Survey (NHIS) total U.S. population estimates include all races and combinations of races, including those not shown separately in the tables.

Native Hawaiian and Pacific Islander persons together compose the NHPI population. Samoan, Guamanian or Chamorro, and Other Pacific Islander persons together compose the Pacific Islander population. The 3.4% of the NHPI population that is both Native Hawaiian and Pacific Islander is included in the calculations for NHPI total, single-race NHPI total, and multiple-race NHPI total but is excluded from all other calculations. Other Pacific Islander includes all other specific NHPI racial identities, such as Tongan, Fijian, and Marshallese, as well as general NHPI racial identities, such as Polynesian, Micronesian, Melanesian, and Pacific Islander. It also includes those who reported more than one Pacific Islander racial identity.

Hispanic origin is defined as an ethnicity, so Hispanic persons may be of any race. In this report, results are shown by racial category without distinguishing ethnicity to maximize the NHPI sample size appropriate for inclusion in the calculations, and for consistency with NCHS’ Summary Health Statistics, whose tables provided the starting template for this report’s tables.

Usual place of health care (Tables 1 and 2)—Respondents were asked whether they had a place they usually went to when they were sick or needed advice about their health. If the response was “yes” or “there is more than one place,” they were asked, “What kind of place [is it/do you go to most often]—a clinic, a doctor’s office, an emergency

room, or some other place?” Response choices for this second question were: “clinic or health center,” “doctor’s office or HMO,” “hospital emergency room,” “hospital outpatient department,” “some other place,” or “doesn’t go to one place most often.” Although “hospital emergency room” is not considered a “usual place of health care,” in other National Center for Health Statistics publications (e.g., *Health, United States* and the National Health Interview Survey Early Release reports), in this report’s tables, it is combined with “hospital outpatient clinic.” As a result, estimates in these tables may differ from tabular results published elsewhere.

Appendix III. Survey Questions Used to Define Selected Health Measures

Alphanumeric codes refer directly to the question on the 2014 National Health Interview Survey and the 2014 Native Hawaiian and Pacific Islander National Health Interview Survey instrument that was used to define the health measure.

Having usual place to go for medical care—adults

- AAU.020 Is there a place that you USUALLY go to when you are sick or need advice about your health?
- (1) Yes
 - (2) There is NO place
 - (3) There is MORE THAN ONE place
 - (7) Refused
 - (9) Don't know

Usual place to go for medical care—adults

- AAU.030 [If AUSUALPL = 1] What kind of place is it—a clinic, doctor's office, emergency room, or some other place? [Else, if AUSUALPL = 3] What kind of place do you go to most often—a clinic, doctor's office, emergency room, or some other place?
- (1) Clinic or health center
 - (2) Doctor's office or HMO
 - (3) Hospital emergency room
 - (4) Hospital outpatient department
 - (5) Some other place
 - (6) Doesn't go to one place most often
 - (7) Refused
 - (9) Don't know

Having usual place to go for medical care—children

- CAU.020 Is there a place that {S.C.name} USUALLY goes when {he/she} is sick or you need advice about {his/her} health?
- (1) Yes
 - (2) There is NO place
 - (3) There is MORE THAN ONE place
 - (7) Refused
 - (9) Don't know

Usual place to go for medical care—children

- CAU.030 [If CUSUALPL = 1]: What kind of place is it—a clinic, doctor's office, emergency room, or some other place? [Else, if CUSUALPL = 3]: What kind of place does {S.C. name} go to most often—a clinic, doctor's office, emergency room, or some other place?
- (1) Clinic or health center
 - (2) Doctor's office or HMO
 - (3) Hospital emergency room
 - (4) Hospital outpatient department
 - (5) Some other place
 - (6) Doesn't go to one place most often
 - (7) Refused
 - (9) Don't know

Unmet medical care need

- FAU.020 DURING THE PAST 12 MONTHS, has medical care been delayed for {person} because of worry about the cost? (Do not include dental care)
- (1) Yes
 - (2) No
 - (7) Refused
 - (9) Don't know

FAU.040 DURING THE PAST 12 MONTHS, was there any time when {person} needed medical care, but did not get it because {person} couldn't afford it?

- (1) Yes
- (2) No
- (7) Refused
- (9) Don't know

Unmet dental care need—adults

AAU.111 DURING THE PAST 12 MONTHS, was there any time when you needed any of the following, but didn't get it because you couldn't afford it? Dental care (including check-ups)

- (1) Yes
- (2) No
- (7) Refused
- (9) Don't know

Length of time since last dental visit—adults

AAU.135 About how long has it been since you last saw a dentist? Include all types of dentists, such as orthodontists, oral surgeons, and all other dental specialists, as well as dental hygienists.

- (0) Never
- (1) 6 months or less
- (2) More than 6 mos, but not more than 1 yr ago
- (3) More than 1 yr, but not more than 2 yrs ago
- (4) More than 2 yrs, but not more than 5 yrs ago
- (5) More than 5 years ago
- (7) Refused
- (9) Don't know

Unmet dental care need—children

CAU.135 DURING THE PAST 12 MONTHS, was there any time when {S.C. name} NEEDED any of the following, but didn't get it because you couldn't afford it? ... Dental care (including check ups)?

- (1) Yes
- (2) No
- (7) Refused
- (9) Don't know

Length of time since last dental visit—children

CAU.160 About how long has it been since {S.C. name} last saw a dentist? Include all types of dentists, such as orthodontists, oral surgeons, and all other dental specialists, as well as dental hygienists.

- (0) Never
- (1) 6 months or less
- (2) More than 6 mos, but not more than 1 yr ago
- (3) More than 1 yr, but not more than 2 yrs ago
- (4) More than 2 yrs, but not more than 5 yrs ago
- (5) More than 5 years ago
- (7) Refused
- (9) Don't know

Receipt of influenza vaccination—children

CFI.005 During the past 12 months, several kinds of flu vaccines have been available. I will ask you about {S.C. name's} most recent flu vaccinations.

DURING THE PAST 12 MONTHS, has {SC name} had a flu vaccination? A flu vaccination is usually given in the fall and protects against influenza for the flu season.

- (1) Yes
- (2) No
- (7) Refused
- (9) Don't know

Receipt of influenza vaccination—adults

AAU.310 DURING THE PAST 12 MONTHS, have you had a flu shot? A flu shot is usually given in the fall and protects against influenza for the flu season. [A flu shot is injected in the arm. Do not include an influenza vaccine sprayed in the nose.]

- (1) Yes
- (2) No
- (7) Refused
- (9) Don't know

AAU.315 DURING THE PAST 12 MONTHS, have you had a flu vaccine sprayed in your nose by a doctor or other health professional? A health professional may have let you spray it. This vaccine is usually given in the fall and protects against influenza for the flu season. [This influenza vaccine is called FluMist.]

- (1) Yes
- (2) No
- (7) Refused
- (9) Don't know

Receipt of pneumococcal vaccination

AAU.320 Have you EVER had a pneumonia shot? This shot is usually given only once or twice in a person's lifetime and is different from the flu shot. It is also called the pneumococcal vaccine.

- (1) Yes
- (2) No
- (7) Refused
- (9) Don't know

Human immunodeficiency virus testing

ASI.400 The next question is about the test for HIV, the virus that causes AIDS. Except for tests you may have had as part of blood donations, have you ever been tested for HIV?

- (1) Yes
- (2) No
- (7) Refused
- (9) Don't know

Emergency room visits

CAU.280 DURING THE PAST 12 MONTHS, HOW MANY TIMES has {S.C. name} gone to a HOSPITAL EMERGENCY ROOM about {his/her} health? (This includes emergency room visits that resulted in a hospital admission.)

- (00) None
- (01) 1
- (02) 2–3
- (03) 4–5
- (04) 6–7
- (05) 8–9
- (06) 10–12
- (07) 13–15
- (08) 16 or more
- (97) Refused
- (99) Don't know

Lack of health insurance and type of coverage

Information from follow-up questions such as plan name(s) was used to reassign insurance status and type of coverage to avoid misclassification.

FHI.050 The next questions are about health insurance. Include health insurance obtained through employment or purchased directly as well as government programs like Medicare and Medicaid that provide Medical care or help pay medical bills.

[Are you/Is anyone in the family] covered by any kind of health insurance or some other kind of health care plan?

- (1) Yes
- (2) No
- (7) Refused
- (9) Don't know

FHI.070 What kind of health insurance or health care coverage [do you/does person] have? INCLUDE those that pay for only one type of service (nursing home care, accidents, or dental care).

EXCLUDE private plans that only provide extra cash while hospitalized.

- (01) Private health insurance
- (02) Medicare
- (03) Medi-Gap
- (04) Medicaid
- (05) SCHIP (CHIP/Children's Health Insurance Program)
- (06) Military health care (TRICARE/VA/CHAMP–VA)
- (07) Indian Health Service
- (08) State-sponsored health plan
- (09) Other government program
- (10) Single service plan (e.g., dental, vision, prescriptions)
- (11) No coverage of any type
- (97) Refused
- (99) Don't know

FHI.072 People covered by Medicare have a card that looks like this. [Are you/Is person] covered by Medicare?

- (1) Yes
- (2) No
- (7) Refused
- (9) Don't know

FHI.073 There is a program called Medicaid that pays for health care for persons in need. In this State it is also called [State name]. [Are you/Is person] covered by Medicaid?

(1) Yes

(2) No

(7) Refused

(9) Don't know

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