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Dialogues on Poverty among Researchers, Policymakers and Practitioners

The West Coast Poverty Center's DIALOGUES Projects bridge the worlds of academic research and realworld practice by supporting new research on critical poverty issues and bringing together researchers and seasoned policy practitioners to consider its implications. This issue of DIALOGUES features work by sociologist Emily Walton and Professor of Social Work David Takeuchi on the effects of ethnic clustering on Asian and Latino Americans' health. and the response of policy practitioners at the national, state, and local level.

The West Coast Poverty Center at the University of Washington supports new research on causes, consequences, and effective policy responses to poverty, with an emphasis on changing labor markets, demographic shifts, family structure, and social and economic inequality. More information about the West Coast Poverty Center and the DIALOGUES Projects is available from our website:

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West Coast Poverty Center

UNIVERSITY OF WASHINGTON

A Partnership of the SCHOOL OF SOCIAL WORK, the DANIEL J. EVANS SCHOOL OF PUBLIC AFFAIRS and the COLLEGE OF ARTS AND SCIENCES

DIALOGUES on Research and Policy

Number 2, March 2010

Ethnic Residential Clustering and Health in West Coast States

Is living in an ethnic enclave healthy or unhealthy for recent immigrants and ethnic minorities? Neighborhood location and attributes powerfully affect residents' access to critical resources such as quality education, employment opportunities, and health care that can help prevent illness or provide effective treatments. Certain racial and ethnic groups are concentrated in systematically disadvantaged neighborhoods that can negatively affect residents' well-being. At the same time, residential segregation may have advantages, especially for easing the transition of newly-arrived immigrants from minority groups.

With support from the West Coast Poverty Center, researchers Emily Walton and David Takeuchi have made two major contributions toward connecting racial and ethnic residential patterns to health. First, they introduce a new spatial technique for defining ethnic enclaves and apply it to identify Asian and Latino America enclaves in three counties on the west coast. Second, they use this spatial technique along with individual health data to present new evidence about the health of Asian and Latino Americans who live in ethnic enclaves compared to those in more integrated neighborhoods. This brief describes their findings, followed by policymakers' and practitioners' response to the study, including their thoughts on its implications for serving ethnic communities and directions for further research.

Asian and Latino Americans are concentrated on the west coast

Asian and Latino Americans are geographically concentrated on the west coast, with large percentages of their populations (40.2% and 29.9% respectively) living in the states of Washington, Oregon and California. Within each of these states, Asian and Latino populations are further clustered. Both Asian Americans and Latinos concentrate in major metropolitan areas. However, Mexican Americans are unique in that they have higher percentages of non-metropolitan residents, reflecting their greater incorporation into agricultural and rural labor markets.

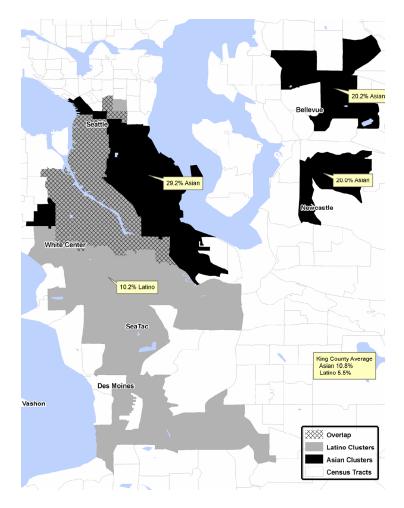
Asian and Latino ethnic neighborhoods are shaped by immigration

Asian and Latino American ethnic groups include substantial numbers of recent immigrants who tend to reside in segregated neighborhoods and many of whom have lower incomes than US-born residents. These neighborhoods, often called immigrant or ethnic enclaves, ease new arrivals' transition as they as they participate in a new culture. As immigrants become more fluent in English and gain economic security, they and members of later generations are likely to move into more ethnically diverse and affluent neighborhoods.

There are several reasons why living in an ethnic enclave may be related to poorer health. Low income neighborhoods may lack political power, have poor quality schools, separate residents from jobs, expose residents to air pollution and other environmental toxins, limit access to healthy food options, and lack recreational and healthcare facilities. Some unique features of ethnic enclaves, however, may mitigate or reverse these destructive health effects. Ethnic enclaves can concentrate educational resources, increase their residents' social integration, offer them assistance with financial needs and aid in getting to healthcare appointments, and provide knowledge about the location of services.

New Measures: Better Ethnic Neighborhood Definitions

Using a combination of mapping and spatial analysis software, Walton and Takeuchi have identified geographic "hot spots" consisting of clusters of west coast census tracts with high Asian or Latino ethnic density compared to average concentrations in those counties. Measured this way, an ethnic enclave is composed of a central census tract with high relative ethnic concentration and all similarly-high bordering census tracts. This definition of ethnic neighborhoods based on both concentration and clustering is particularly applicable to groups with low relative representation in a given area and allows researchers to use census data to closely approximate ethnic neighborhood boundaries that match those arrived at with local knowledge.



Asian and Latino Ethnic Clusters in King County, WA

Characteristics of ethnic clusters are highly variable in King County, Washington. In King County, the one main Latino cluster covers the areas of Southeast Seattle and an adjoining suburb, Seatac (see map at left). The concentration of Latinos in this cluster as a whole (10.2%) is lower than the national average (12.5%), but Latino concentrations in the cluster's component census tracts range from 4.9% to 33.8%. Asian Americans are represented in three distinct clusters. The Southeast Seattle cluster overlaps considerably with the Latino cluster and has both a high percentage of foreign born and a high poverty rate. This cluster has an average concentration of 29.2% Asian, with a range of 6.7% to 61.2% in the census tracts. The East Side clusters also have a high foreign born population but are characterized by moderate poverty levels.

Asians and Latinos living in ethnic clusters in Multnomah County, Oregon, are poor and linguistically isolated (see map on facing page). The Asian cluster, just east of downtown Portland, has an average concentration of 10.3% Asian with a tract-level range of 5.7% to 17.2%. The Latino cluster near Gresham has an average concentration of 17.5% Latino with a range of 7.4% to 38.1% in the census tracts. The two clusters have similar socioeconomic and demographic qualities. Both are generally poor, somewhat linguistically isolated, and have relatively low levels of foreign born residents.

Los Angeles County ethnic clusters vary, with disadvantaged neighborhoods located closer to the central city (see map on page 4). In L.A. County, multiple clusters of Asians and Latinos have strikingly little overlap. The Asian clusters all have relatively high levels of foreign born residents, but vary widely with respect to socioeconomic measures. In general, the nearer an Asian ethnic neighborhood is to downtown Los Angeles, the more it is characterized by low incomes, high poverty rates, and linguistic isolation. All of the Asian clusters are characterized by relatively high percentages of Asians (ranging from 25.2% to 49.9%) compared to the county average of 11.9%. One very large Latino cluster covers sections of South and East Los Angeles, while many smaller clusters are scattered around the county. The Latino clusters are similar to each other in their socioeconomic and demographic profiles, being characterized by high percentages of immigrants, low incomes, high linguistic isolation and high poverty rates. Additionally, all clusters are comprised of high relative concentrations of Latinos (ranging from 69.0% to 83.5%) compared to the county average of 44.6%.

New Findings: Effects of ethnic enclaves on health

To understand the effect of such ethnic enclaves on the health of the inhabitants, the researchers then linked Census data with the results of a new National Latino and Asian American Study on self-reported Latino and Asian health in 105 communities across the country. On the whole, their findings indicate that for Asian Americans, segregated ethnic enclaves concentrate structural and social advantages, as compared to integrated communities, while protecting individuals from the detrimental health effects of community poverty. Conversely, Latino American ethnic neighborhoods are more disadvantaged compared to integrated neighborhoods, and Latino individuals living within these ethnic enclaves are more likely to suffer the health consequences of poor neighborhood conditions.

Asian ethnic communities protect health and buffer against effects of poverty

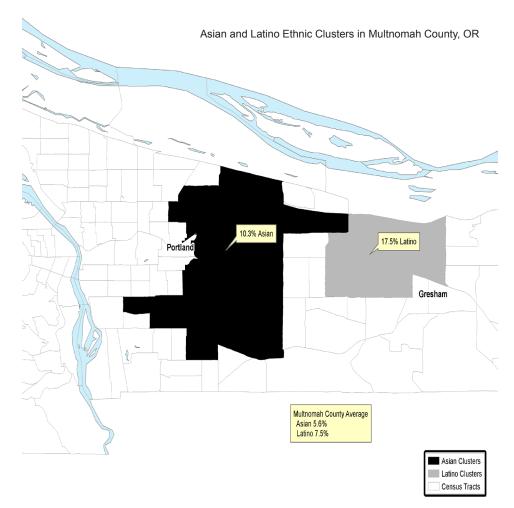
Asian American ethnic neighborhoods concentrate both structural and social resources for Asian Americans compared to non-ethnic neighborhoods with similar socioeconomic characteristics. Ethnic enclaves have higher percentages of community members with at least a high school degree, higher median household income, and greater percentages of households receiving public assistance, despite similar percentages of individuals in poverty.

The self-rated health of Asian individuals is significantly improved by increasing levels of education

in the community only when they live in ethnic neighborhoods, and significantly adversely affected by poverty only when individuals live in non-ethnic, integrated neighborhoods. Individual measures of social resources do not differ in their effects between neighborhood types, suggesting that features of the structural/physical environment may be more salient in affecting health than social features. Overall, these findings suggest that neighborhood socioeconomic status, as measured by education and poverty levels, either directly affects health status or works through some unmeasured mechanism for which socioeconomic status is a proxy. Further, the study found that remaining securely attached to the social networks of one's coethnic community may be the best strategy for capitalizing ⁻ on otherwise-unavailable material and moral resources.

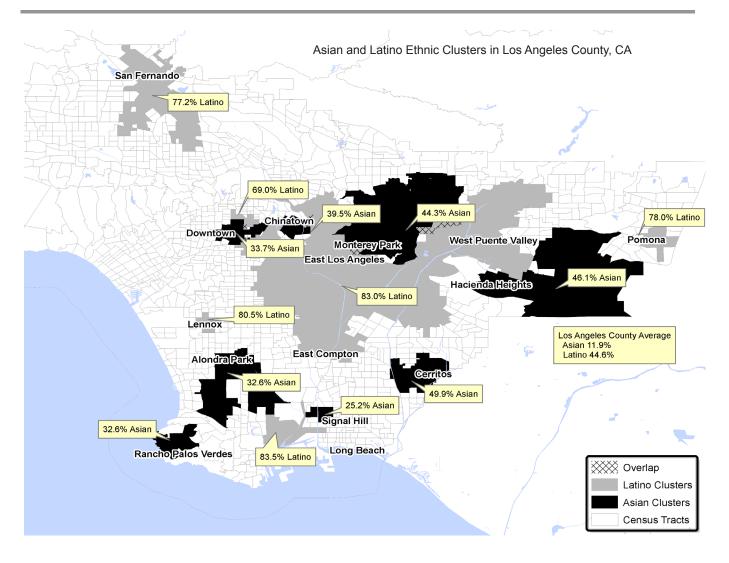
Latinos living in integrated communities reap health benefits

The distribution of characteristics among Latino ethnic neighborhoods tells a quite different story from that of Asian Americans. It appears that Latino ethnic neighborhoods



are more disadvantaged than integrated neighborhoods in which Latinos live, evidenced by lower levels of education in the community, lower median incomes, and higher poverty rates. Latino Americans who move into integrated neighborhoods have higher levels of education and better incomes.

For Latinos, self-rated health is improved by community education only in non-ethnic neighborhoods and it is only in ethnic neighborhoods where individuals feel detrimental health effects of community poverty. The pattern of effects is thus the exact opposite of that observed among Asian Americans. Individuals residing in a Latino ethnic neighborhood feel the negative effects of poverty on health status, while higher levels of education in the community do not benefit their health. Because Latino ethnic neighborhoods are mostly communities in which immigrants may be assimilating downward to the native ethnic majority, these neighborhoods appear to concentrate individuals with low educations and low income.



DIALOGUE: Policymakers and Practitioners Respond

IN JULY 2009, the West Coast Poverty Center invited three national and state policymakers and practitioners to join a conversation with researchers Emily Walton and David Takeuchi on their findings on ethnic clustering and health in the west coast states (see box at left for participants). WCPC Associate Director Jennifer Romich, Associate Professor at the U.W. School of Social Work, facilitated the conversation. Highlights from the discussion follow, organized around some broad questions about the study and its impacts.

Why do health care practitioners and policymakers need to understand and map ethnic enclaves?

Participants found Takeuchi and Walton's research intriguing because of its specific focus on the impact of ethnic enclaves on health outcomes. Health Disparities Research Coordi-

nator Shobha Srinivasan of the National Cancer Institute pointed out that while there has been a lot of work on ethnic enclaves before, the health aspects have not been studied. Other researchers, particularly in Sociology, have generally investigated ethnic enclaves from a community development perspective. However, it makes a lot of sense that living in an ethnic enclave may affect health through sharing of information or access to culturally-specific health resources. The new spatial technique for defining ethnic enclaves provides a way to identify ethnic neighborhood 'hot spots' that otherwise may not be apparent through local knowledge alone. Practitioners noted that the researchers' definition of enclaves proved helpful in places such as King County, WA where the Latino density is lower than the national average but higher than the local standard. Participants believed that this model could be used in other geographic areas within the United States to identify populations that are currently underserved by health care systems.

What are the implications of this study for building and running health systems?

Participants agreed that the findings may have implications for creating more responsive health care systems and stronger health infrastructure for Latino and Asian populations. Srinivasan mentioned that the number of clinics or health care providers in a neighborhood and people's access to safe and affordable housing are both key issues in building health infrastructure. Research on health disparities in ethnic enclaves offers clues to what infrastructure already exists and what still needs to be provided.

Participants also agreed that the study of ethnic clusters and health must address the strengths and weaknesses of service delivery to those populations. Jo-Ellen Watson, Coordinator of Mental Health, Chemical Abuse, and Dependency Services for King County, WA, recommended that researchers pay close attention to the micro-level reasons why certain populations do or do not access physical and mental health services. Watson cited a general finding from the health literature that the encapsulated a community is, the more specific and tailored its health delivery system must be. Research on ethnic clusters must 'drill down' to understand the positive and negative factors for health resource delivery to particular ethnic groups, including issues such as discrimination and religious affiliation within groups.

What else do we need to know?

Discussants puzzled over the finding that living with co-ethnics seems beneficial for Asians but not Latinos. This study did not include systematic data on all of the ways in which Asian neighborhoods differ from Latino areas, and unobserved differences may have substantial health consequences. Perhaps social and health service systems are more developed in Asian neighborhoods: this is true in some west coast cities in which Asian enclaves are well-established, whereas Latino clusters have emerged only in the past few decades. Drawing on her knowledge of cancer research, Srinivasan suggested that Latino enclaves may be disproportionately located in areas with environmental toxins (such as along the US-Mexico border). Marty Martinez encouraged examination of the built environment, including access to healthy food and opportunities for physical activity. Hypotheses related to these issues can only be tested by collecting and analyzing neighborhood-level data.

This lead to a broader conversation about the strengths and limitations of available geographic data on health and ethnic enclaves. Researcher David Takeuchi stated that while it would be simple to conduct a geographic analysis by ethnic group alone, it may be difficult to map on the health data for other geographic areas because the proper data sets may not be available. The current study was only made possible by recent efforts by Takeuchi and colleagues at other universities to launch the first nation-wide health survey with large enough samples of of Asian and Latino populations to analyze those groups' experiences. Takeuchi suggested that existing health data varies considerably by state. In Washington, for example, there may not be enough samples of different Asian and Latino groups to further map health disparities. In California, however, the California Health Interview Survey has collected many samples which consider both health and geographic areas of Asian and Latino populations. Martinez noted that part of the policy work of the California Pan-Ethnic Health Network includes advocating for better data by race, ethnicity, and language, adding that this sort of work "moves the ball forward."

DIALOGUE Participants

Researchers

Emily Walton, Assistant Professor of Sociology, Dartmouth College

David Takeuchi, Professor of Social Work, University of Washington

Policy Practitioners

Shobha Srinivasan

Coordinator, National Cancer Institute

Martin Martinez

Policy Director, California Pan-Ethnic Health Network

Jo-Ellen Watson, Coordinator, King County Mental Health, Chemical Abuse, and Dependency Services

West Coast Poverty Center, UW

Jennifer Romich, Associate Professor of Social Work, WCPC Associate Director

Rachel Lodge, Program Director

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DIALOGUES on Research and Policy

Ethnic Residential Clustering and Health

The West Coast Poverty Center serves

as a hub for research, education, and policy analysis leading to greater understanding of the causes and consequences of poverty and effective approaches to reducing it. The Center, located at the University of Washington, is one of three regional poverty centers funded by the U.S. Department of Health and Human Services, Office of the Assistant Secretary for Planning and Education (ASPE). More information about the West Coast Poverty Center is available from our website: www. wcpc.washington. edu

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INSIDE:

- · New measures of clustering for better neighborhood definitions
- Ethnic cluster maps for King County, WA, Multnomah County, OR, and Los Angeles County, CA
- · Findings on health effects of ethnic enclaves for Asians and Latinos
- · Policymaker and practitioner response

ON THE WEB:

More information on our DIALOGUES projects is available on our website at wcpc.washington.edu