Spillover effects of structural sexism on children’s health insurance status
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INTRODUCTION
Structural sexism in the US is associated with adverse population health outcomes among women. This study examines whether structural sexism have spillover effects on children’s health insurance status.

METHODS
• 2018-2019 National Survey of Children’s Health (NSCH) merged with 2016 percentage of state-specific female legislators
• Multilevel logistic regression models
• Confounders: individual-level (age, gender, household income, and race/ethnicity) state-level (population in poverty and population size)

RESULTS
Children living in states with the lowest female political representations compared to their peers in states with the highest female representation had:
• Higher odds of being uninsured (OR=1.27, 95% CI=0.97, 1.67)
• Higher odds of an insurance gap (OR=1.11, 95% CI=0.93, 1.32)

Associations vary by outcome and household income.
• Currently uninsured: Higher OR for households 100-199% and 400% above FPL
• Insurance gap: Higher OR for low household income groups

CONCLUSION
Structural sexism is associated with higher odds of being uninsured and having experienced a gap in recent health insurance coverage in children. These associations vary by household income.