## Greater Cincinnatians who Go without Care

Results from The Health Foundation of Greater Cincinnati's 2005 Greater Cincinnati Community Health Status Survey

The Greater Cincinnati Community Health Status Survey (GCCHSS) is a project of The Health Foundation of Greater Cincinnati. The GCCHSS is conducted by the Institute for Policy Research at the University of Cincinnati.

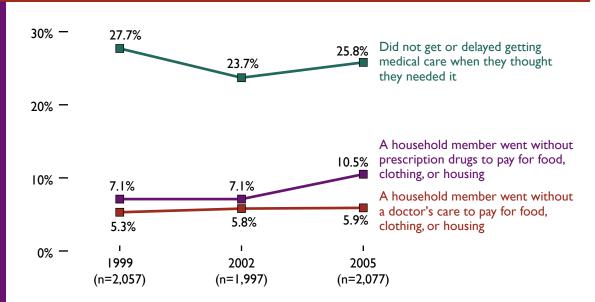
Topics included in the GCCHSS include access to and satisfaction with healthcare, medical debt, mental and physical health status, nutrition and exercise, cigarette and alcohol use, and others.

A total of 2,077 randomly selected adults residing in 8 Ohio counties, 9 Kentucky counties, and 5 Indiana counties were interviewed by telephone between August 16 and October 24, 2005. The potential sampling error for the survey is ±2.2%.

For more information, please visit our web site at www. healthfoundation.org/gcchss.html. For the complete survey dataset, visit www.oasis.uc.edu.

Community partners that helped develop the GCCHSS include:

- + Anthem Foundation of Ohio
- Center for Closing the Health Gap
- · Child Policy Research Center
- City of Cincinnati Health Department
- Council on Aging
- Employer Health Care Alliance
- Foundation for a Healthy Kentucky
- Hamilton County Health Department
- Health Improvement Collaborative
- Northern Kentucky Health Department
- Northern Kentucky University Center for Latino and Multicultural Studies
- United Way of Greater Cincinnati
- University of Cincinnati
  Institute for Policy Research
- University of Cincinnati Institute for the Study of Health
- + Urban Appalachian Council



## Did not get or delayed getting care when they thought they needed it

According to the most recent Greater Cincinnati Community Health Status Survey, just over a quarter of adults in the region did not get or delayed getting medical care when they thought they needed it. This rate is up slightly from the 2002 rate of 23.7%, but down from the 1999 rate of 27.7%. As age or income increases, the likelihood that a person did not get or delayed getting care decreases.

Survey respondents who delayed or did not get care were asked to name their most important reason for doing so. The most common reasons given were:

- · cost of healthcare (27.8%),
- no time/too busy (14.7%),
- no health insurance (9.3%),
- stubborn/delayed visit (8.7%),
- thought the problem would take care of itself (8.0%),
- problems with health insurance (6.0%),
- · don't like doctors (2.5%), and
- could not get an appointment with a doctor (2.5%).

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Greater Cincinnatians more and less likely to not get or delay getting care (2005 data)

to not get or delay getting care (2005 data)		
Demographic	% who delayed	
	or did not get	
	care	
Region	25.8%	
Age		
18 to 29	34.4%	
65+	6.4%	
Sex		
Female	29.2%	
Male	22.1%	
Ethnicity		
African American	34.4%	
White Non-Appalachian	23.2%	
Family Income		
Below 100% FPG <sup>1</sup>	40.7%	
Above 200% FPG	25.1%	
Health Insurance		
Uninsured	45.7%	
Medicare	6,5%	

<sup>&</sup>lt;sup>1</sup> The federal poverty guideline (FPG) in 2005 was an annual income of \$19,350 for a family of 4.

## Household member went without a doctor's care to pay for food, clothing, or housing

Just under 6% of Greater Cincinnatians reported that a household member went without a doctor's care in 2005 because the household needed the money to buy food or clothing or pay for housing. This rate has risen slowly since 1999. The uninsured and those below 100% of the federal poverty guidelines are almost 3 times more likely than the general population to go without care because the household needed the money to pay for necessities. As age or income increases, the likelihood of going without a doctor's care to pay for necessities decreases.

## Household member went without prescription drugs to pay for food, clothing, or housing

After staying level at 7.1% between 1999 and 2002, the rate of households with a member who did not receive prescription drugs because the household needed the money to pay for food, clothing, or housing jumped to 10.5%. In particular, the uninsured and those below 100% of the federal poverty guidelines are about 2.5 times more likely to not receive a prescription in order to pay for necessities. As age or income increases, the likelihood of going without prescription drugs decreases.

Greater Cincinnatians more and less likely to have a household member not receive a doctor's care because the household needed money to buy food or clothing or pay for housing (2005 data)

Demographic	% with a household member who did not receive a doctor's care
Region	5.9%
Age	
18 to 29	8.1%
65+	0.5%
Sex	
Female	8.0%
Male	3.6%
Ethnicity	
African American	11.5%
White Non-Appalachian	5.0%
Family Income	
Below 100% FPG¹	16.4%
Above 200% FPG	4.3%
Health Insurance	
Uninsured	17.4%
Medicare	0.6%

<sup>&</sup>lt;sup>1</sup> The federal poverty guideline (FPG) in 2005 was an annual income of \$19,350 for a family of 4.

Greater Cincinnatians more and less likely to have a household member not receive prescription drugs because the household needed money to buy food or clothing or pay for housing (2005 data)

Demographic	% with a household member who did not receive prescription drugs
Region	10.5%
Age	
30 to 45	15.5%
65+	1.8%
Sex	
Female	12.3%
Male	8.5%
Ethnicity	
African American	18.7%
White Non-Appalachian	7.5%
Family Income	
Below 100% FPG¹	24.3%
Above 200% FPG	8.2%
Health Insurance	
Uninsured	26.9%
Medicare	2.1%

<sup>&</sup>lt;sup>1</sup> The federal poverty guideline (FPG) in 2005 was an annual income of \$19,350 for a family of 4.