June 2014

Income, race pose barriers to finding trusted providers

Research has shown that trust between a patient and provider is important for creating an effective care environment. Trust leads to increased patient satisfaction and better compliance with treatment recommendations. However, finding a trusted healthcare provider is not always easy. The 2013 Greater Cincinnati Community Health Status Survey asked adults about barriers that might make it difficult to find a healthcare provider they could trust: type of health insurance, lack of health insurance, and race or ethnicity.

Young, poor, less educated more likely to report insurance as barrier

The survey asks if either a *lack* of health insurance or the *type* of health insurance has been a barrier to finding a trusted healthcare provider. Responses to these questions are similar. About 2 in 10 adults (19%) in Greater Cincinnati say that the lack of insurance or the type of insurance prevents them from finding a trusted provider.
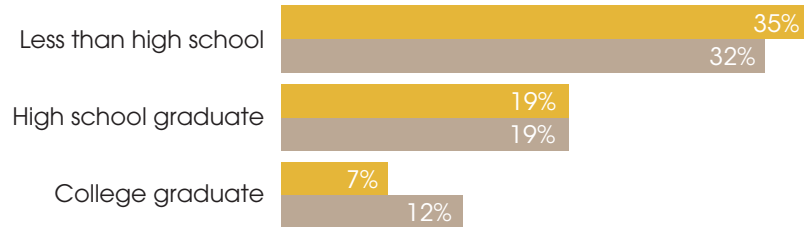
However, health insurance coverage is more of a barrier for some groups. As age increases, the percentage of

Lack of or type of insurance as a barrier to finding a trusted provider
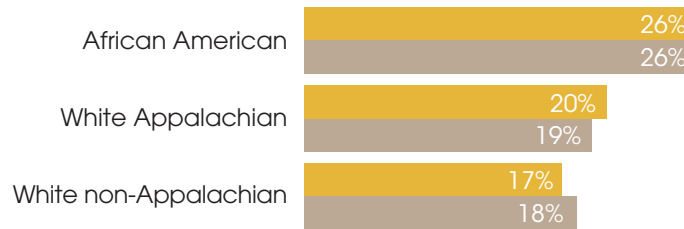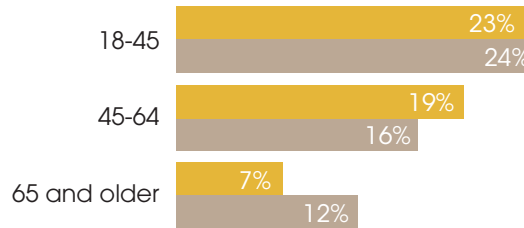
Poverty level
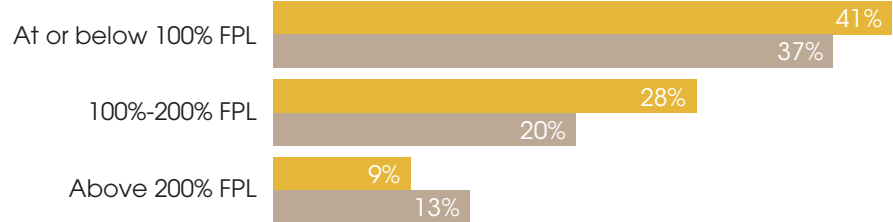
	Lack of health insurance	Type of health insurance
At or below 100% FPL	41%	37%
100%-200% FPL	28%	20%
Above 200% FPL	9%	13%

Education

	Lack of health insurance	Type of health insurance
Less than high school	35%	32%
High school graduate	19%	19%
College graduate	7%	12%

Race

	Lack of health insurance	Type of health insurance
African American	26%	26%
White Appalachian	20%	19%
White non-Appalachian	17%	18%

Age

	Lack of health insurance	Type of health insurance
18-45	23%	24%
45-64	19%	16%
65 and older	7%	12%

Lack of health insurance
Type of health insurance

people reporting insurance as a barrier decreases (see graph). Among adults living at or below 100% of the Federal Poverty Level (FPL)[1], about 4 in 10 report a lack of insurance (41%) or type of insurance (37%) as a barrier to finding a provider they trust. Only about 1 in 10 adults who live above 200% FPL report a lack of insurance (9%) or type of insurance (13%) as a barrier. The same trend is seen with education: as education increases, the number of people reporting insurance as a barrier decreases.

African Americans more likely to report insurance as barrier to finding trusted provider

There are significant differences among racial groups when seeking a trusted provider. Almost 3 in 10 African American adults (26%) report that their type of insurance or a lack of insurance is a barrier to finding a provider they trust. That compares with fewer than 2 in 10 White respondents (18%). (Data not shown in graph).

[1] In 2013, 100% FPL for a family of four was an annual income of $23,550.

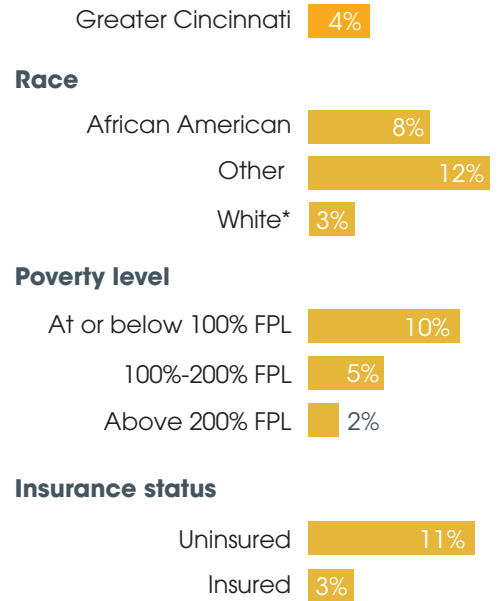## African Americans, other races more likely to say race or ethnicity is barrier

Another possible barrier to finding a trusted provider is race and/or ethnicity. Though only 4% of Greater Cincinnati adults report that race or ethnicity is a barrier, this rate varies among specific groups.

African Americans (8%) are more than twice as likely as both White Appalachians and white non-Appalachians (3%) to report race or ethnicity as a barrier. Other non-White groups are more than four times as likely (12%) to report this barrier. This may indicate a need for more racially and ethnically diverse healthcare providers, as well as a need for more culturally competent providers.

Poor, uninsured more likely to report race or ethnicity as barrier

Adults living at 100% FPL or below (10%) were five times more likely than people living above 200 FPL (2%) to report race or ethnicity as a barrier to finding a trusted provider. The difference was similar when comparing adults without insurance (11%) with those who have insurance (3%).

Race/ethnicity as a barrier to finding a trusted provider

Greater Cincinnati   4%

Race

African American   8%
Other   12%
White*   3%

Poverty level

At or below 100% FPL   10%
100%-200% FPL   5%
Above 200% FPL   2%

Insurance status

Uninsured   11%
Insured   3%

* Includes White Appalachian and White non-Appalachian