Understanding Health Disparities and Perceptions of Discrimination in Greater Cincinnati

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1. Understand health disparities including importance and contributing factors and gain a baseline knowledge of existing health and economic disparities in Cincinnati.
2. Recognize the connections between the perceptions of discrimination in Cincinnati and its’ health disparities.
3. Appreciate the importance, strengths, and limitations of working in partnership with community stakeholders to improve health equity, produce a culturally competent health care workforce, and increase the diversity of the local health care workforce to reflect the population.
Health Disparities

- A higher burden of illness, injury, disability, or mortality experienced by one population group relative to another group.
Importance

• Limit improvement in overall quality of care and population health and result in unnecessary costs.
Cincinnati Disparities

• Significant social and economic inequities exist associated with health disparities by race, gender, poverty status and neighborhood.

• Life expectancy at birth varies by up to 20 year difference for residents in Cincinnati neighborhoods.
Economic Disparities

14,000 families living in poverty in City of Cincinnati; 76% African American.

CPS – 63% are African American and 73% are economically disadvantaged

Homeownership – 75% whites vs. 33% African Americans

Source: The State of Black Cincinnati 2015: Two Cities
Life Expectancy by Gender and Race in Cincinnati, Ohio and US (2001-2009)

Source: Community Health Assessment (2017)
Health and Education

Excellent or very good health

Region

By education

College graduate: 66%
Some college: 50%
High school graduate: 42%
Less than high school: 24%

Source: Interact for Health Community Health Status Survey, May 2017
Health and Poverty Status

Source: Interact for Health Community Health Status Survey, May 2017
Contributing Factors

- Individual
- Provider
- Health System
- Societal
- Environmental
Perceptions of Discrimination

2012
2014
2017
Surveys in Cincinnati
2012 Aligning Forces for Quality Survey

Have you ever felt that the doctor or medical staff you saw judged you unfairly or treated you with disrespect because of ...
(Cincinnati results only, 2012 AF4Q survey)

<table>
<thead>
<tr>
<th>Race/Ethnic Background</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>All races, Cincinnati</td>
<td>2%</td>
</tr>
<tr>
<td>African American, Cincinnati</td>
<td>10%</td>
</tr>
<tr>
<td>White, Cincinnati</td>
<td>1%</td>
</tr>
</tbody>
</table>

...your race or ethnic background

...your ability to pay or the type of health insurance

<table>
<thead>
<tr>
<th>Race/Ethnic Background</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>All races, Cincinnati</td>
<td>12%</td>
</tr>
<tr>
<td>African American, Cincinnati</td>
<td>18%</td>
</tr>
<tr>
<td>White, Cincinnati</td>
<td>10%</td>
</tr>
</tbody>
</table>
Lack of or type of insurance as a barrier to finding a trusted provider

<table>
<thead>
<tr>
<th>Poverty level</th>
<th>Lack of health insurance</th>
<th>Type of health insurance</th>
</tr>
</thead>
<tbody>
<tr>
<td>At or below 100% FPL</td>
<td>41%</td>
<td>37%</td>
</tr>
<tr>
<td>100%-200% FPL</td>
<td>28%</td>
<td>20%</td>
</tr>
<tr>
<td>Above 200% FPL</td>
<td>9%</td>
<td>13%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Education</th>
<th>Lack of health insurance</th>
<th>Type of health insurance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than high school</td>
<td>35%</td>
<td>32%</td>
</tr>
<tr>
<td>High school graduate</td>
<td>19%</td>
<td>19%</td>
</tr>
<tr>
<td>College graduate</td>
<td>7%</td>
<td>12%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Race</th>
<th>Lack of health insurance</th>
<th>Type of health insurance</th>
</tr>
</thead>
<tbody>
<tr>
<td>African American</td>
<td>26%</td>
<td>26%</td>
</tr>
<tr>
<td>White Appalachian</td>
<td>20%</td>
<td>19%</td>
</tr>
<tr>
<td>White non-Appalachian</td>
<td>17%</td>
<td>18%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Age</th>
<th>Lack of health insurance</th>
<th>Type of health insurance</th>
</tr>
</thead>
<tbody>
<tr>
<td>18-45</td>
<td>23%</td>
<td>24%</td>
</tr>
<tr>
<td>45-64</td>
<td>19%</td>
<td>16%</td>
</tr>
<tr>
<td>65 and older</td>
<td>7%</td>
<td>12%</td>
</tr>
</tbody>
</table>

Greater Cincinnati Community Health Status Survey, June 2014
Race/ethnicity barrier to finding trusted provider?

Greater Cincinnati Community Health Status Survey, June 2014

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
Winter 2017 Greater Cincinnati Survey

Have you ever felt that the doctor or medical staff you saw judged you unfairly or treated you with disrespect because of ...

... your race or ethnic background
- Region: 4%
- African American: 14%
- White: 1%

... your ability to pay or the type of health insurance
- 13%
- 19%
- 12%
Winter 2017 Greater Cincinnati Survey (continued)

Do you think there was ever a time when you would have received better care if you ...

...belonged to a different race or ethnic group

<table>
<thead>
<tr>
<th>Region</th>
<th>7%</th>
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<tbody>
<tr>
<td>African American</td>
<td>21%</td>
</tr>
<tr>
<td>White</td>
<td>5%</td>
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...spoke English more fluently

<table>
<thead>
<tr>
<th></th>
<th>3%</th>
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<tr>
<td></td>
<td>7%</td>
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<tr>
<td></td>
<td>2%</td>
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What can we do to improve?
UU HEALTH
Community Advisory Board

Align consensus around health equity, health workforce development and diversity in the community with the institutional health workforce goals and to support sustainability.
Evaluating Cultural Competency

Self-Reported Cultural Competency Assessment

E-curriculum Review

Interprofessional Education

Service Learning
Underrepresented Minority Student Enrollment in AHC Colleges
Fall 2014 - Fall 2018

Source: UC IR Institutional Dashboards
Next Lives Here
Urban Health Goals

**Goal 1** - Partner with and build on the resources of the community to co-create solutions to improve equitable health and well-being by using evidence based practice

**Goal 2** – Develop diverse, culturally-competent, interdisciplinary members to create a diverse healthcare workforce
References


University of Cincinnati Institutional Research Institutional Dashboard.

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