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## 207860 Perceived Discrimination and Patient Experiences with Care

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**Thomas Bryant III, MSW**, Institute for Health, Policy and Evaluation Research, Duval County Health Department, Jacksonville, FL  
**Robert Weech-Maldonado, MBA PhD**, Department of Health Services Administration, The University of Alabama at Birmingham, Birmingham, AL  
**Allyson Hall, PhD**, College of Public Health & Health Professions, University of Florida, Gainesville, FL

Ample research documents the existence of significant racial and ethnic disparities in access to healthcare, as well as poorer outcomes and health status among racial/ethnic minorities. National studies reveal racial/ethnic disparities in patient assessments of care. Culturally competent medical care is one strategy for reducing racial/ethnic differences in patient experiences with care. This study focuses on one domain of cultural competency, experiences of discrimination. It examines the relationships between patients' perceptions of discrimination, and their experiences with Medicaid as shown by the Consumer Assessments of Healthcare Providers and Systems (CAHPS) reports and ratings of care.

Data consist of randomly surveyed Florida Medicaid beneficiaries from September 2007 to December 2007. The survey included the Health Plan CAHPS 4.0 instrument and a set of items assessing patient experiences with discrimination. There was a 40% response rate, 1877 completed surveys. The data is limited to respondents with a personal doctor, resulting in 1509 completed surveys.

The dependent variables are Health Plan CAHPS 4.0 reports (getting needed care, timeliness of care, doctor communication, and health plan customer service) and ratings of care (personal doctor, specialists, health care, and health plan). Independent variables include measures of patient experiences with racial/ethnic discrimination. Variables related to systematic differences in survey responses are used as case-mix adjustors: gender, age, education, and health status. Data are analyzed using analysis of variance (ANOVA) and ordinary least squares regression.

Study results show that a significant proportion (9%) of the sample perceive discrimination as a result of race/ethnicity. Respondents who experienced discrimination sometimes significantly report more difficulties getting needed care ( $B = -21.7$ ;  $p < .0001$ ), getting care quickly ( $B = -11.5$ ;  $p = .005$ ) and communicating well with their doctors ( $B = -13.8$ ;  $p < .0001$ ) than those who never experienced discrimination. Moreover, patients who perceived discrimination sometimes significantly gave lower ratings for care received ( $\hat{\alpha} = -13.2$ ;  $p < .0001$ ), their personal doctor ( $B = -7.5$ ;  $p = .005$ ), specialist ( $B = -7.8$ ;  $p = .017$ ) and health plan's customer service ( $B = -13.83$ ;  $p < .0001$ ) compared to respondents who never experienced discrimination. These results suggest that perceptions of race/ethnic discrimination are associated with lower CAHPS reports and ratings of care.

Findings imply that Medicaid health plans should use quality improvement efforts to address perceptions of discrimination as a barrier to care for their enrolled patient population. Findings suggest that reducing perceptions of discrimination can result in improved CAHPS reports and ratings of care. The study also suggests the importance of assessing cultural competency from the patients' perspective, and including these measures in patient health care surveys.

### Learning Objectives:

1. Describe cultural competency from the patient perspective
2. Describe the impact of perceived discrimination on patients' experience with health care
3. Discuss the implications of perceived discrimination for service provision and future research

**Keywords:** Cultural Competency, Health Disparities

### Presenting author's disclosure statement:

**Qualified on the content I am responsible for because:** I have 25 years of experience in research and evaluation in the health and social sciences with the past 11 years being in public health. I have a MSW from Florida State University. I am ABD from Columbia University School of Social Work in the Research track and am currently in the Health Services Research, Management and Policy doctoral program at the University of Florida. I am working with Dr. Robert Weech-Maldonado, formerly of the University of Florida, currently at the University of Alabama-Birmingham in the Department of Health Services Administration. Dr. Maldonado has published extensively on cultural competency and health disparities. My dissertation topic is in the area of disparities in the quality of healthcare comparing patients receiving care at the local health department versus private care. I am also administrator and senior researcher at the Institute for Health, Policy and Evaluation Research a division of the Duval County Health Department where we conduct studies on health disparities in chronic diseases. I have published in several public health and health journals.

**Any relevant financial relationships?** No

I agree to comply with the American Public Health Association Conflict of Interest and Commercial Support Guidelines, and to disclose to the participants any off-label or experimental uses of a commercial product or service discussed in my presentation.

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