

Study: Younger black women more likely to have regular doctor, feel cared for

September 23 2009

(PhysOrg.com) -- Younger black women are more likely to have a regular doctor -- and are more likely to feel cared for by that doctor -- than younger white women and women of other ethnic groups, a University of Nebraska-Lincoln study shows.

Meanwhile, far fewer younger Hispanic women say they have a regular doctor and are far less likely to feel cared for by that physician, according to the study.

The nationwide project, conducted by UNL's Bureau of [Sociological Research](#) and the Survey Research Center at Penn State University, focused on race, ethnicity, [demographics](#), health status and access to health care for women ages 25 to 45.

Julia McQuillan, UNL associate professor of sociology and BOSR director, said the findings highlight the need for health providers to understand patients' distinctive cultures and to learn how differing ethnic backgrounds may affect a patient's expectations of care.

"It shows that groups either differ in their expectations of health care providers, are treated differently by health care providers, or both," McQuillan said. "It also shows that messages about the need for access for black women have been heard and health care providers have responded, but because Asian and Hispanic women have been studied less, ethnicity specific needs for these groups still need attention.

"Additionally, it could be that ethnic groups vary in their expectations of health care providers -- black women could have much lower expectations for being cared for than do Asian or Hispanic women."

The study, which interviewed more than 4,500 women, appeared in a recent edition of the journal Family Medicine. While there is substantial research on patient trust and satisfaction with care, the UNL study is believed to be the first to analyze racial and ethnic differences in patients' perceptions of feeling cared for by their doctor.

While researchers saw an expected link between race/ethnicity and the odds of having a regular doctor and perceptions of care, McQuillan said, black women outpaced expectations in the survey. Eighty-eight percent of black respondents said they had a regular doctor, and 83 percent said they believed their doctor cared "a lot."

For whites, 85 percent had a regular doctor and 76 percent felt cared for. Eighty-four percent of Asian women said they had a regular doctor, while just 71 percent of Hispanic women said they did.

"Because the finding about high rates of access and trust were unexpected for black women, we did not include measures to explain this finding," she said. "We are now re-interviewing many of the women, and asking about the race and ethnicity of their provider.

"It's possible that efforts to increase the racial and ethnic diversity of providers is helping to reduce racial bias in health care for [black women](#)."

The study showed that Asian and Hispanic women have significantly lower odds of reporting that their physician is caring -- 62 percent of Asians and 61 percent of Hispanics said yes.

Among other findings:

-- Overall, 83 percent of respondents said they had a regular doctor, and 81 percent of those women report that their physician is very caring.

-- Among Hispanic women, language emerges as the most likely explanation for their lower odds of having regular doctors. The proportion of women without health insurance is highest among Hispanics, as well.

-- All women who reported having a chronic health condition have higher odds of having a regular doctor than women without a chronic health condition.

McQuillan noted that follow-up interviews are happening during challenging economic times and during the process of reforming health care, so the interviews should provide insights into women's ability to maintain a regular provider if they have fewer resources, and if access and caring has increased for Hispanic and Asian women with increasing focus on reducing health disparities.

"This study shows that sometimes race/ethnicity effects are not as expected -- and we should pay attention to successes," she said. "At the same time, there is work to do to make sure that all women have access to [health care](#), regardless of race and ethnicity."

Provided by University of Nebraska-Lincoln

Citation: Study: Younger black women more likely to have regular doctor, feel cared for (2009, September 23) retrieved 18 April 2024 from <https://medicalxpress.com/news/2009-09-younger-black-women-regular-doctor.html>

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