#### Introduction

Healthcare utilization is an essential component of maintaining both physical and mental health. But, 40% of Americans have reported delaying seeking health care when they needed it (Masterson et al. 2021). Thus, health care access barriers represent a significant public health problem. Here, the impact of several demographic characteristics, and the prevalence of factors that prevented the study participants from receiving the health care they needed was analyzed.

# Objectives

To investigate the demographic factors and barriers impacting healthcare access among NYC adults

## Methods

• Data from the 2013-2014 New York City Health and Nutrition Examination Survey (NYC HANES) was used (Thorpe et al. 2015).

## Measures

- Outcome variable: whether the participant avoided getting health care when they needed it in the past 12 months.
- Measures: age, gender, race, Hispanic/Latin Identification, Education Level, Income Level, and Poverty level of the study participant's census tract.
- Bivariate analysis to compare distribution differences using weighted chi square tests
- Poisson regression analysis to conduct a multivariable analysis of health care access
- Prevalence of the missed visit types and healthcare access barriers was analyzed

# Barriers to Accessing Healthcare Among New York City Residents Sargunvir Sondhi

# Results

# Bivariate Analysis of Demographic Factors Among NYC Adults

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Demographic	Exposed: Needed health care but did	Not Exposed: Received health	P-value
Characteristics	not get it in the last 12 months	care when needed in last 12 months	(Chisquare test)
Age		monus	1
20-29	23.90%	22.44%	
30-39	24.77%	18.85%	
40-49	19.11%	17.90%	$x^2 = 7.283$
50-59	17.44%	16.80%	p = .1217
60 and over	14.77%	24.02%	r
Gender	11.7770	27.0270	
Male	40.03%	47.25%	$x^2 = 2.670$
Female	59.97%	52.75%	p=.102
Race			p
White	47.91%	43.67%	
Black	23.14%	25.08%	
Indian American/	1.78%	0.787%	
Alaskan Native			$x^2 = 3.518$
Native	0%	0.681%	p = 0.6207
Hawaiian/Other	na dibat	and an and a first	
Pacific islander			
Asian	12.35%	14.80%	
Other race	14.82%	14.98%	
Hispanic/Latino Ide			P-value
Yes	31.04%	26.71%	$x^2 = 1.210$
No	68.96%	73.29%	p = .2714
Education Level			P-value
Less than high	20.11%	18.57%	
school diploma			
High School	22.29%	23.98%	
graduate/GED			
Some college or	23.57%	22.50%	$x^2 = 0.412$
associate's degree			p = 0.9378
College graduate	34.03%	34.95%	
or more			
Income level			P-value
Less than \$25,000	43.89%	34.57%	
\$25,000 - \$49,999	28.76%	21.18%	$x^2 = 14.807$
\$50,000 - \$74,999	10.77%	12.90%	p = 0.005
\$75,000 - \$99,999	4.43%	11.07%	
\$100,000 or more	12.15%	20.29%	
Poverty level in			P-value
SP's census tract			
0 - 5%	4.11%	6.24%	
5 - <10%	15.75%	21.99%	
10 - <20%	37.67%	33.31%	
20 - <30%	26.71%	21.04%	7
30 - <40%	10.27%	11.18%	$x^2 = 7.356$
			p = 0.196
40 - 100%	5.48%	6.24%	

Demographic Characteristics	Odds Ratio	95% Confidence Interval		P-value
		Lower	Upper	
Age				
20-29	Ref	Ref	Ref	Ref
30-39	1.30	0.79	2.13	0.2968
40-49	1.16	0.68	2.00	0.58039
50-59	0.84	0.46	1.52	0.56628
60 and over	0.44	0.23	0.84	0.01348
Gender				
Male	Ref	Ref		Ref
Female	1.38	0.95	1.99	0.08798
Race				
White	Ref	Ref		Ref
Black	0.77	0.47	1.25	0.28187
Indian				
American/ Alaskan	1.74			
Native		0.65	4.67	0.27204
Native				
	0			
Pacific islander		0.00	0.00	< 2e-16
Asian	0.68	0.38	1.22	0.19436
Other race	0.62	0.33	1.17	0.1411
Hispanic/Latino Ide				P-value
Yes	Ref	Ref		Ref
N= 390				
No	0.85			
N = 1137		0.51	1.44	0.54977
Education Level				P-value
Less than high	Ref	Ref	Ref	Ref
school diploma				
N=316				
High School	0.00			
graduate/GED	0.89	0.40	1.41	0.70508
Q		0.49	1.61	0.70508
Some college or	1.12	0.45	1.02	0.20140
associate's degree College graduate		0.65	1.93	0.69142
	1.16	0.65	2.08	0.62099
or more Income level	I	1 0.03	2.00	P-value
< \$25,000	Ref	Ref		Ref
	IVEL	IVEL		IVEL
\$25,000 -	0.85			
\$49,999		0.55	1.32	0.46676
\$50,000 -	0.56			0.04707
\$74,999		0.32	0.99	0.04607
\$75,000 -	0.27			0.00101
\$99,999		0.12	0.61	0.00191
\$100,000 or	0.35	0.12	0.70	0.01140
more		0.16	0.79	0.01148

# Results



# Prevalence of the Types of Visits missed by NYC adults



# Poisson Linear Regression Analysis

# Results

# Prevalence of Healthcare Barriers among NYC adults

Our work raises serious concerns. We found a significant effect of income, with those earning less avoiding healthcare more commonly. We also found that the most prevalent barriers faced by NYC adults were financial (lacking money, childcare, insurance, or transportation). By extending coverage to health care to constituents and increasing the number of physicians, we can assuage some of the financial health care obstacles and increase access (Butkus et al. 2020; Maceiosek et al. 2010)

Further, the most missed types of visits were routine checkups and dental visits. Primary care visits have been associated with increased preventative care interventions and improved longitudinal health outcomes (Hostetter et al. 2020). Further, preventative dental visits have also been associated with reducing non preventative visits and future dental costs (Sen et al. 2013). Thus, there is a critical need to improve access to these types of visits.

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#### **Discussion/Conclusion**

## Acknowledgement

Data was collected by NYC HANES 2013-2014

## **Faculty Advisor**

## References

Butkus, R., Rapp, K., Cooney, T. G., & Engel, L. S. (2020). Envisioning a Better U.S. Health Care System for All: Reducing Barriers to Care and Addressing Social Determinants of Health. Annals of Internal Medicine, 172(2\_Supplement). Hostetter, J., Schwarz, N., Klug, M. et al. Primary care visits increase utilization of evidence-based preventative health measures. BMC Fam Pract 21, 151 (2020).

Maciosek, M. V., Coffield, A. B., Flottemesch, T. J., Edwards, N. M., & Solberg, L. I. (2010). Greater use of preventive services in U.S. health care could save lives at little or no cost.

Masterson L (2021). Insure.com survey: Almost 40% delayed health care during COVID-19. Insure.com.

Thorpe LE, Greene C, et al. Rationale, design and respondent characteristics of the 2013-2014 New York City Health and Nutrition Examination Survey (NYC HANES 2013-2014).