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

Results
Prevalence of the Types of Visits missed by NYC adults

Prevalence of Healthcare Barriers among NYC adults

Discussion/Conclusion
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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References

