Perceived Neighborhood Quality and Healthcare Access & Utilization

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Introduction

Background
- Social isolation predicts mortality for every cause of death (Berkman, & Glass, 2000).
- Prior research has found that the communication network of neighborhoods correlates with an individual’s access to healthcare services (Matsaganis & Vitkin 2015).
- Research has found that social networks are beneficial in providing individuals with social support as well as health information and knowledge (Ackerson & Viswanath, 2009).
- Higher levels of attachment to neighbors decreases the risk of engaging in poor health behaviors (e.g., smoking, drinking, binge eating, etc.; Carpiano, 2007).
- Individuals who live in neighborhoods they believe is safe and close-knit report feeling less stressed, a sense of belongingness, and healthier compared to those who live in neighborhoods perceived to be unsafe (Altschuler, Somkin, & Adler, 2004).

Significance of the Current Study
- This study expands upon prior research by examining associations between perceived neighborhood quality (i.e., the resident’s personal views of the quality of his/her neighborhood) and access to healthcare.
- The current study may inform intervention programs by emphasizing the importance of focusing on neighborhoods in order to increase healthcare access and utilization.

Research questions
- Are there associations between frequency of contact with neighbors and healthcare access/utilization (e.g., frequency of medical visits)?
- Are there associations between frequency of social interactions with neighbors and healthcare access/utilization?
- Are there associations between perceived neighborhood quality and healthcare access/utilization?

Hypotheses
- Those who have more frequent contact with their neighbors will report greater healthcare access and utilization.
- Those who report more frequent social interactions with neighbors will report greater healthcare access and utilization.
- Those who perceive their neighborhood as higher in quality will report greater healthcare access and utilization.

Data Set and Participant Information:

PERMIS II data
Total participants: (n = 4,963):
46.7% male
53.3% female

Participants ages ranged between 28 and 84 years with the (M=55.43, SD = 12.448)
Education:
- 25.5% graduated from High School
- 19.3% earned a Bachelor’s Degree
- 10% earned a Master’s Degree

Marital Status:
Married: 70.6% Separated/Divorced: 14.5%
Widowed: 7% Never married: 7.7%
Race/Ethnicity:
White: 90.1% Black/African American: 4.6%
Asian: 0.5%

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- Participants completed both phone interviews and a questionnaire.
- Used SPSS software to examine correlations between neighborhood quality variables and healthcare care access and utilization variables

Results

Correlations Neighborhood Variables and Healthcare

<table>
<thead>
<tr>
<th></th>
<th>Physical Exam</th>
<th>Dental Exam</th>
<th>Optical Exam</th>
<th>Urgent Care Exam</th>
</tr>
</thead>
<tbody>
<tr>
<td>Frequency of Contact with Neighbors</td>
<td>.029</td>
<td>.017</td>
<td>.031</td>
<td>-.023</td>
</tr>
<tr>
<td>Frequency of Socialization with Neighbors</td>
<td>.058***</td>
<td>.011</td>
<td>.042*</td>
<td>0</td>
</tr>
<tr>
<td>Perceived Neighborhood Quality</td>
<td>-.037</td>
<td>.073***</td>
<td>.009</td>
<td>-.073***</td>
</tr>
</tbody>
</table>

*p<.05, **p<.01, ***p<.001

Discussion

- Contrary to our hypotheses, the frequency of contact people have with their neighbors was not correlated with their healthcare utilization.
- As expected, more frequent social interactions with neighbors was associated with more frequent physical health exams.
- Also as expected, findings suggest that those who perceive their neighborhood as higher in quality reported more frequent dental exams, whereas those who perceive their neighborhood as lower quality reported more urgent care visits.
- Findings suggest that neighborhood characteristics are associated with some, but not all types of healthcare access and utilization.
- Similar to what we presented in our introduction, individuals who live in neighborhoods they perceive to be safe and of good quality had the most significant correlations with frequent healthcare utilization (Altschuler, Somkin, & Adler, 2004).

Limitations
- We do not have a very diverse group of participants, because the majority of participants are Caucasian, married, and middle-class, which limits the generalizability of the findings.
- Respondents did not specifically state if they talked to their neighbors about healthcare and if so how frequently they conversed or what they discussed.

Future Direction
- In a future study, this work could be expanded upon by investigating the relationship between access to healthcare and neighborhoods across a variety of cultural areas.
References:


