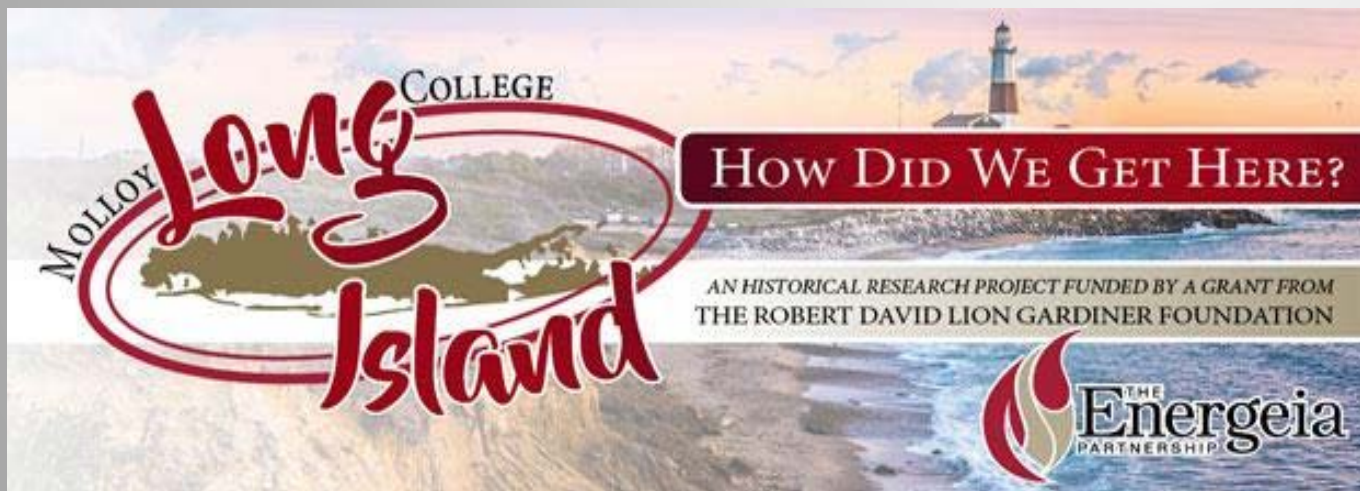# A CLOSER LOOK:

Racial Inequities in Health Care: Past and Present

Researchers:

Nicki Gonias
&
Sandra Morris

About us …

Nicki K. Gonias

- White
- Greek
- 1st Generation
- District Instructional Leader
- Long Islander - Nassau County

Sandra A. Morris

- Black
- British, Jamaican, Vincentian
- Immigrant
- Mother of one daughter and two sons
- Special Education Teacher
- Long Islander for 30 years - Suffolk County

Problem of Racial Inequities and Racism in the Healthcare System:

- **Half of Long Island's black population lives in 11 of the Island's 291 communities, and 90 percent lives in just 62 of them, according to 2017 census estimates.**

- **Shift in demographics on LI from 2000 - 2015**
  (The equity profile of Long Island, 2015)
  - **Suffolk - People of Color 48%, Whites 6%**
  - **Nassau - People of Color 41% , Whites 1%**

- **People of Color represent more than half the coverage gap in Health Care 2021** (Center on budget and policy priorities - CBPP.org)
  - **People of Color - 56%**
    - **Blacks - 28%**
    - **Whites - 40%**

- **2017-2019 Chronic lower respiratory disease hospitalizations per 10,000 population - Whites 16.7%, Blacks 35.0%**
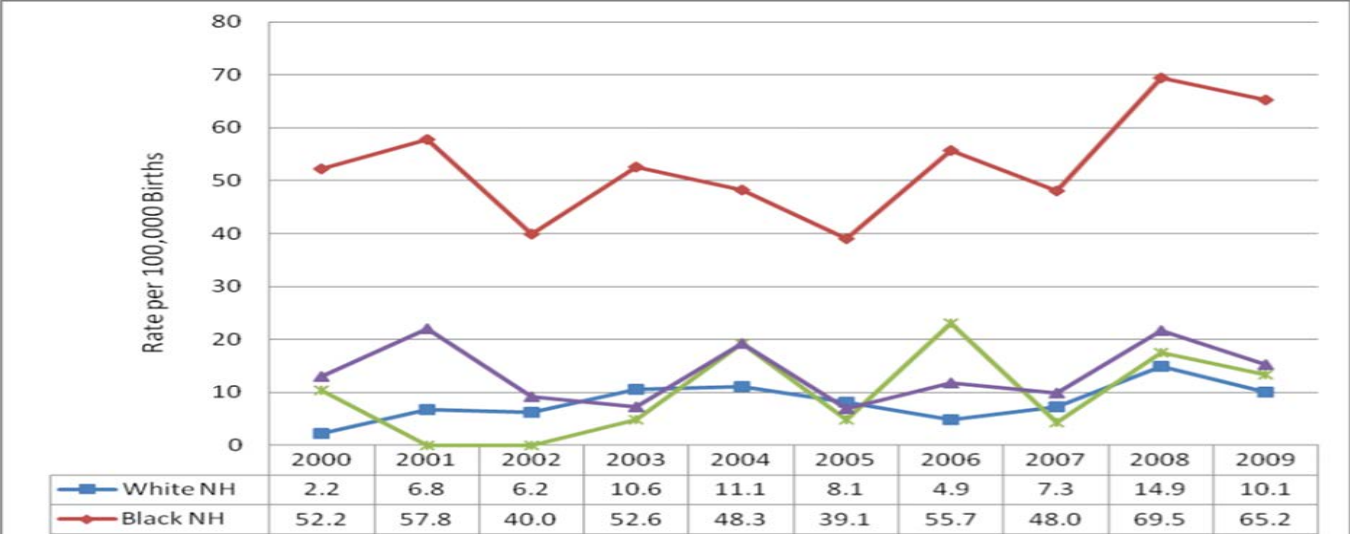
Suffolk and Nassau County Infant Mortality Indicators Per 1000 live Births by Race

- **2006 - 2008 Suffolk County Whites 3.6% compared to Blacks 9.9%**

- **2017-2019 Suffolk County Whites 2.3% compared to Blacks 10.6%.**

- **2006 - 2008 Nassau County Whites 2.9% compared to Blacks 12.9%.**

- **2017- 20019 Nassau County Whites 1.7 compared to Blacks 9.3.**
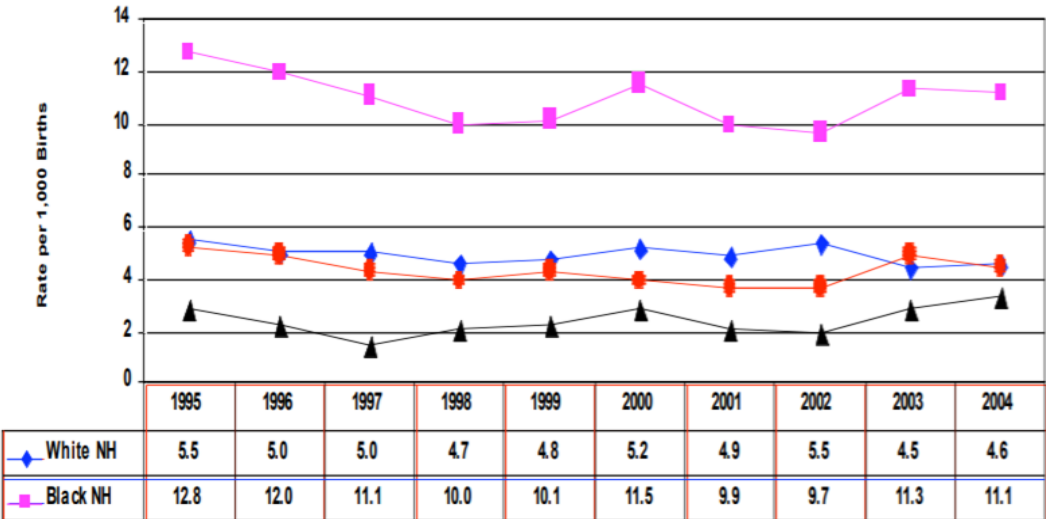
On Long Island, Uniondale's infant mortality rate is 11.5 per 1,000 births and East Meadow has just 0.9 per 1,000 births - showing disparities between towns based on racial makeup (Hackett, 2015)

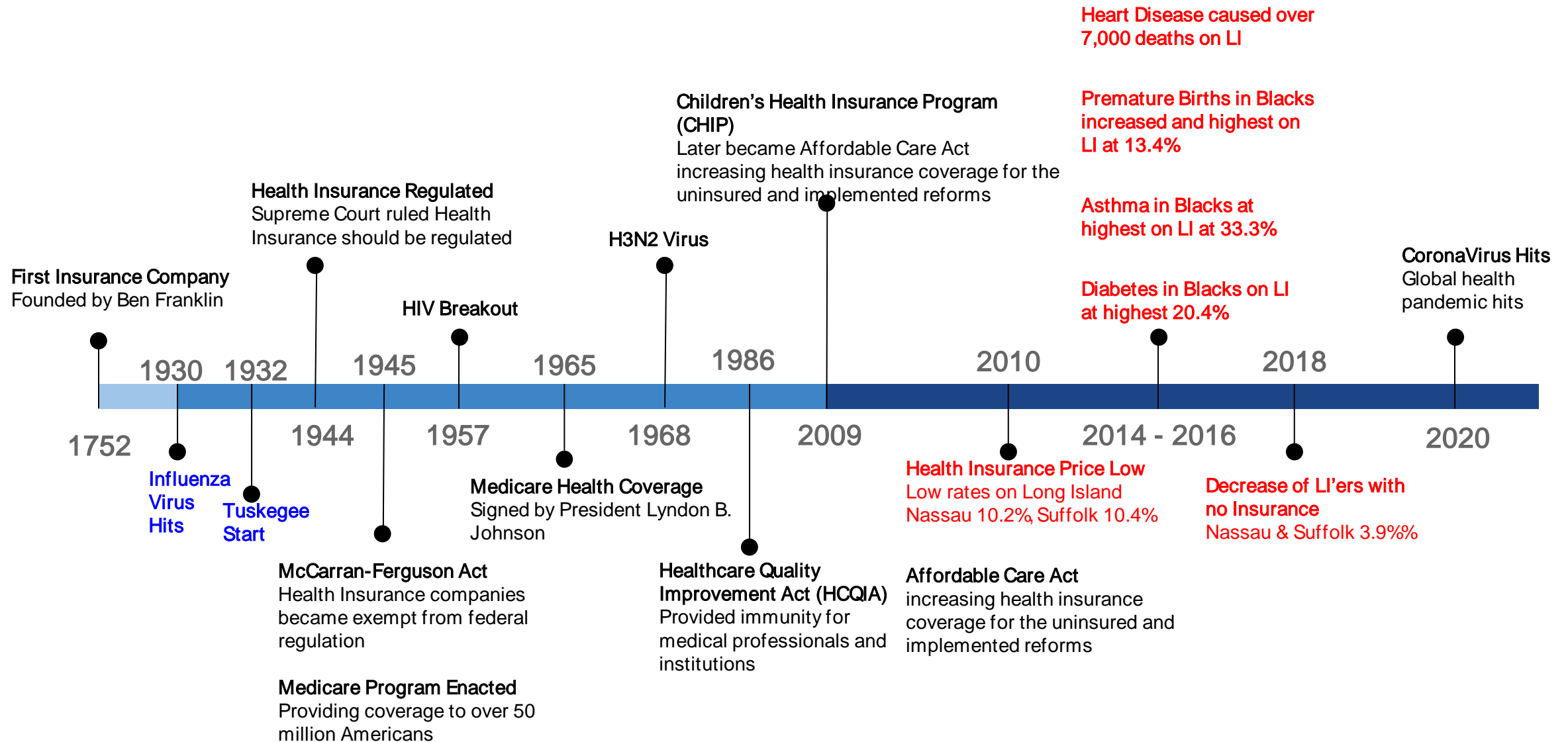- Teen pregnancy rate in Uniondale is six times higher than in neighboring East Meadow(Hackett, 2015)

Source: New York State Nassau County Health Indicators
New York State Suffolk County Health indicators

2000-2009 Maternal Mortality Rate per 100,000 live Births by Race/Ethnicity, New York State

	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009
White NH	2.2	6.8	6.2	10.6	11.1	8.1	4.9	7.3	14.9	10.1
Black NH	52.2	57.8	40.0	52.6	48.3	39.1	55.7	48.0	69.5	65.2

1995-2004 Infant Death Rate per 1,000 Live Births by Race/Ethnicity, New York State Residents

	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004
White NH	5.5	5.0	5.0	4.7	4.8	5.2	4.9	5.5	4.5	4.6
Black NH	12.8	12.0	11.1	10.0	10.1	11.5	9.9	9.7	11.3	11.1

Historical Healthcare Events

Heart Disease caused over 7,000 deaths on LI

Premature Births in Blacks increased and highest on LI at 13.4%

Children's Health Insurance Program (CHIP)
Later became Affordable Care Act increasing health insurance coverage for the uninsured and implemented reforms

Asthma in Blacks at highest on LI at 33.3%

Health Insurance Regulated
Supreme Court ruled Health Insurance should be regulated

H3N2 Virus

Diabetes in Blacks on LI at highest 20.4%

CoronaVirus Hits
Global health pandemic hits

First Insurance Company
Founded by Ben Franklin

HIV Breakout

1930   1932   1945   1965   1986   2010   2018

1752

1944   1957   1968   2009   2014 - 2016   2020

Influenza Virus Hits

Tuskegee Start

Medicare Health Coverage
Signed by President Lyndon B. Johnson

Health Insurance Price Low
Low rates on Long Island
Nassau 10.2%, Suffolk 10.4%

Decrease of LI'ers with no Insurance
Nassau & Suffolk 3.9%%

McCarran-Ferguson Act
Health Insurance companies became exempt from federal regulation

Healthcare Quality Improvement Act (HCQIA)
Provided immunity for medical professionals and institutions

Affordable Care Act
increasing health insurance coverage for the uninsured and implemented reforms

Medicare Program Enacted
Providing coverage to over 50 million Americans

Framework

A Science - and Justice - Based Model Framework for Promoting Health Equity

"Health equity is defined as having a personal agency and fair access to resources and opportunities needed to achieve the best possible physical, emotional, and social well-being" (Peterson et al., 2020, p. 741).

"Of all the forms of inequality, injustice in health is the most shocking and the most inhuman.."

Dr. Martin Luther King, Jr

PURPOSE

Purpose of the study was to examine how healthcare professionals and leaders on Long Island make sense of the historical and current factors that sustain racial inequities for Black residents regarding access to high quality healthcare and healthy living environments

Research Design & Methodology

Qualitative Study

16 Participants

45-90 Minutes Zoom Interviews

Our Participants

Our participants held one of these roles in Health Care …

- Professionals
  - OBGYN - Doctors
  - Nursing Instructor
  - Nursing Director
  - Clinical Assistant
- Leaders
  - Directors
  - Commissioners
  - Supervisors
- Advocates
  - Public Affairs Manager
  - Social Justice Leader
- Community Members
- Professors

Demographics

The racial and ethnic breakdown of Long Island for 2022:

- White: 85.8% Suffolk County, 77.3% Nassau County

- Black: 8.2% Suffolk, 12.2% Nassau

- American Indian: 0.6% Suffolk, 0.5% Nassau

- Pacific Islander: 0.1% Suffolk, 0.1% Nassau

- Asian: 3.7% Suffolk, 8.4% Nassau

- Hispanic or Latino of any race: 17.3% Suffolk,15.3% Nassau

Source: © 2022 World Population Review

Racial/Ethnic Composition, 1980 to 2050

Legend:
- U.S. % White
- Mixed/other
- Native American
- Asian or Pacific Islander
- Latino
- Black
- White

Year	White	Black	Latino	Asian or Pacific Islander	Mixed/other
1980	89%	6%		4%	
1990	84%	7%		6%	2%
2000	76%	8%	10%	4%	
2010	69%	9%	16%	5%	2%
2020	61%	9%	21%	7%	2%
2030	52%	10%	26%	9%	2%
2040	44%	10%	32%	11%	2%
2050	35%	11%	38%	13%	3%

Projected
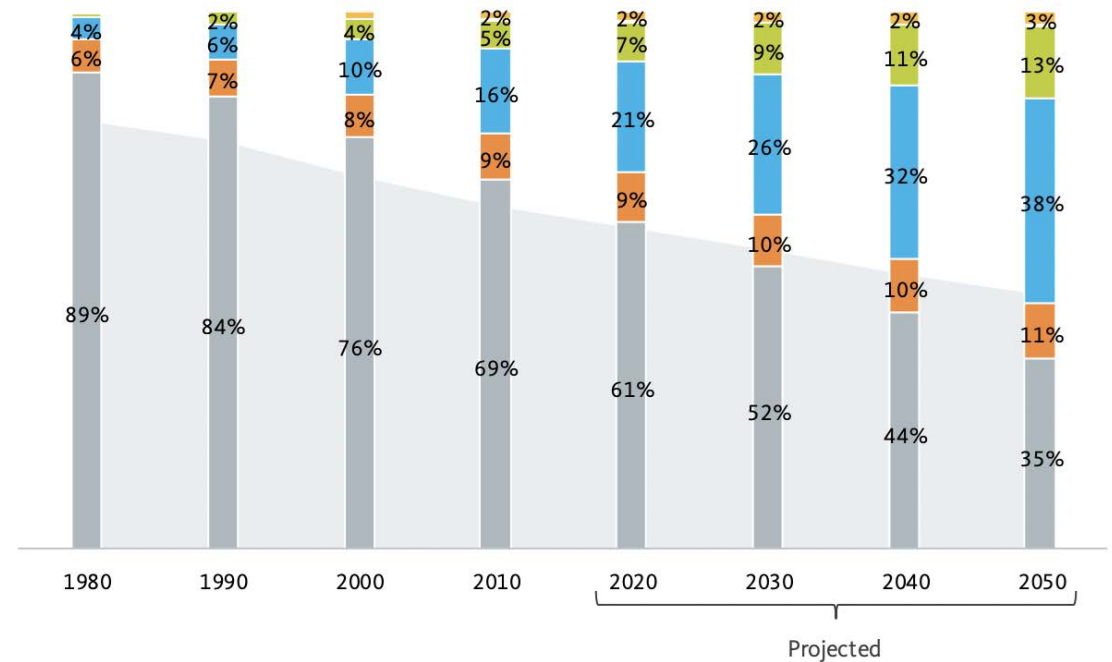
Sources: U.S. Census Bureau; Woods & Poole Economics, Inc.
Note: Much of the increase in the Mixed/other population between 1990 and 2000 is due to a change in the survey question on race.

After studying Long Island, Myron Orfield, director of the Institute on Metropolitan Opportunity at the University of Minnesota Law School, sees "hard racial barriers where black communities are next to white communities and they stay very firm." Orfield adds: "On Long Island, there's hard walls. It's a tough, tough wall there. When you see those hard, differential walls, underlying that there's usually bigotry and prejudice that's maintaining those hard walls."

Substantial growth in communities of color throughout the region
Percent Change in People of Color by Census Block Group, 2000 to 2014

Legend:
- Decline
- Less than 36% increase
- 36% to 84% increase
- 84% to 177% increase
- 177% or more increase

Towns
CITIES
Counties
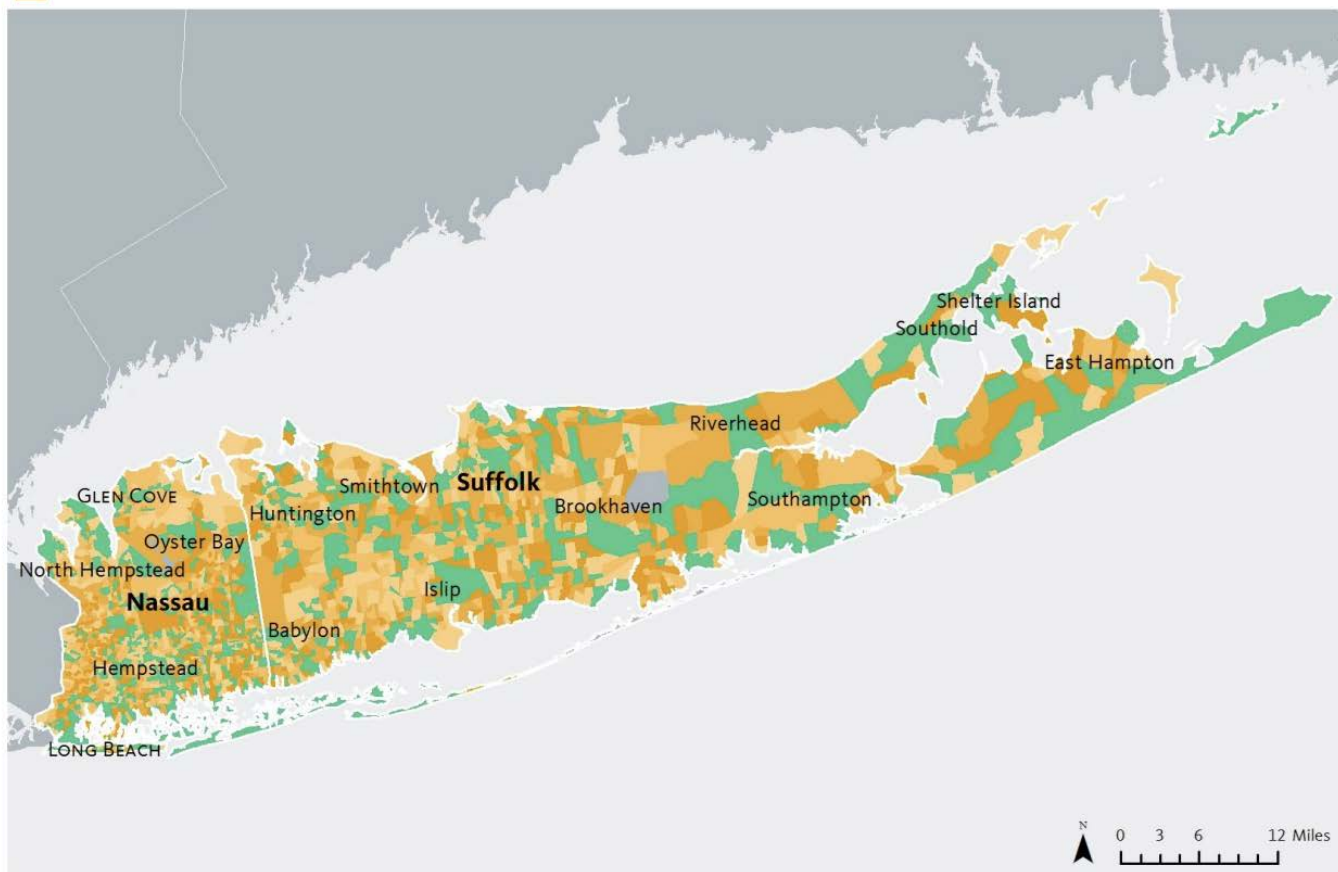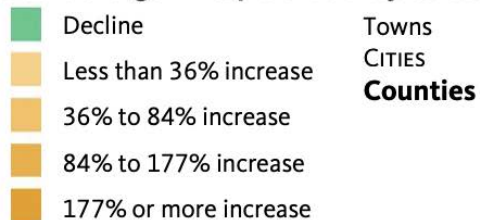
Sources: U.S. Census Bureau; Geolytics, Inc.

The people-of-color population has grown since 1980, but the White population has significantly declined
Composition of Net Population Growth by Decade, 1980 to 2014

- White
- People of Color

	1980 to 1990	1990 to 2000	2000 to 2014
People of Color	121,119	233,946	287,829
White	-117,720	-89,245	-190,768
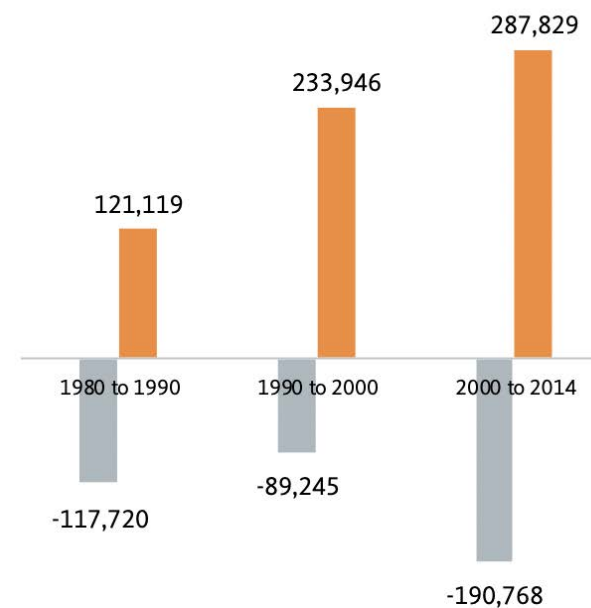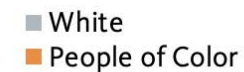
Source: U.S. Census Bureau.
Note: Data for 2014 represent a 2010 through 2014 average.
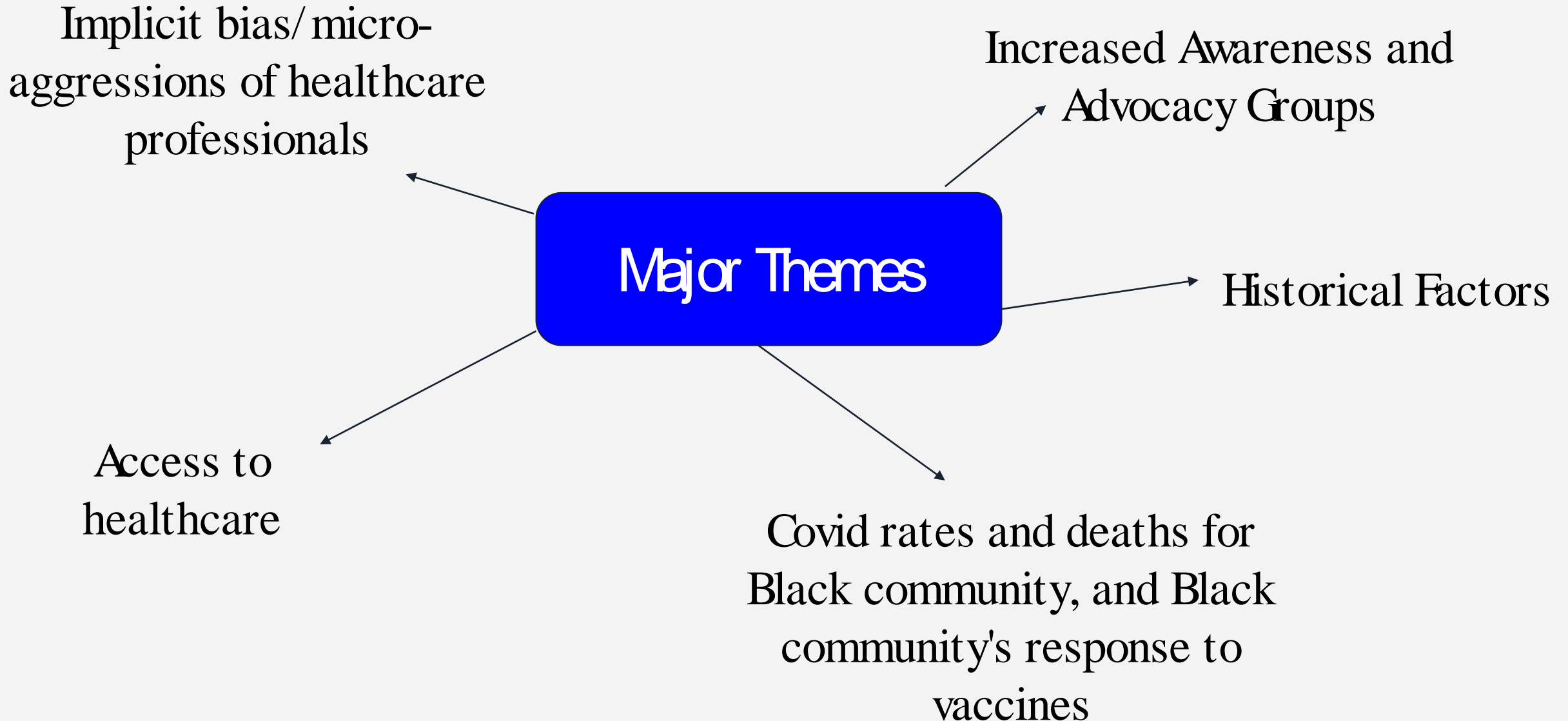
Main Finding - 1

Black residents do not have equitable access to healthcare and healthy living environments because of insurance, implicit bias of healthcare professionals, and environmental factors (transportation issues, environmental racism with polluted air, food deserts, etc.).

Based on where people live on Long Island, you can predict conditions that influence the trajectory of their health over a lifetime. Some factors of their neighborhoods include access to healthcare, exposure to environmental hazards, higher rates of diabetes and strokes, and prediction of lifespan (Hackett, 2015).

"So, I think there needs to be a lot more education on these various issues- various chronic diseases and I think I'd encourage a healthier lifestyle and make sure that there are healthy options within these communities. It is hard to find good food in some of these neighborhoods- you could find a bottle of alcohol if you want to get some alcohol - you could find it easily."

-Healthcare Leader

Main Finding - 2

Black residents do not trust the healthcare system because of historical incidents, which can delay/prevent needed healthcare interventions.

- Historical trauma, particularly the Tuskegee Syphilis Study, is thought to be the primary underlying driver of medical mistrust among people of color, particularly Black people (Jaiswal, 2021).

- Black Americans have their pain denied, their conditions misdiagnosed, and necessary treatment withheld by physicians (Bajaj & Stanford, 2021).

"It really boils down to mistrust. Due to historic reasons, due to exploitation, that People of Color felt like they were experimented on by the medical community, that things were not explained properly to Black Americans and it was just like, "Take this because I said so," without a good explanation of why I need to take this. There's a historic distrust that's been passed from generation to generation and it goes with - Tuskegee was the defining example- everyone always brings up the Tuskegee experiment where Black men who were infected with syphilis were studied and eventually even when there was a treatment or cure for syphilis with penicillin, they were not offered it."

-   Social Justice Leader

Implicit bias/micro- aggressions of healthcare professionals

Infant mortality is halved when Black newborns are cared for by Black rather than White physicians (Bajaj & Sanford, 2021).

Figure 18. Percentage of all active physicians by race/ethnicity, 2018.

- American Indian or Alaska Native (2,570)
- Asian (157,025)
- Black or African American (45,534)
- Hispanic (53,526)
- Multiple Race, Non-Hispanic (8,932)
- Native Hawaiian or Other Pacific Islander (941)
- Other (7,571)
- Unknown (126,144)
- White (516,304)
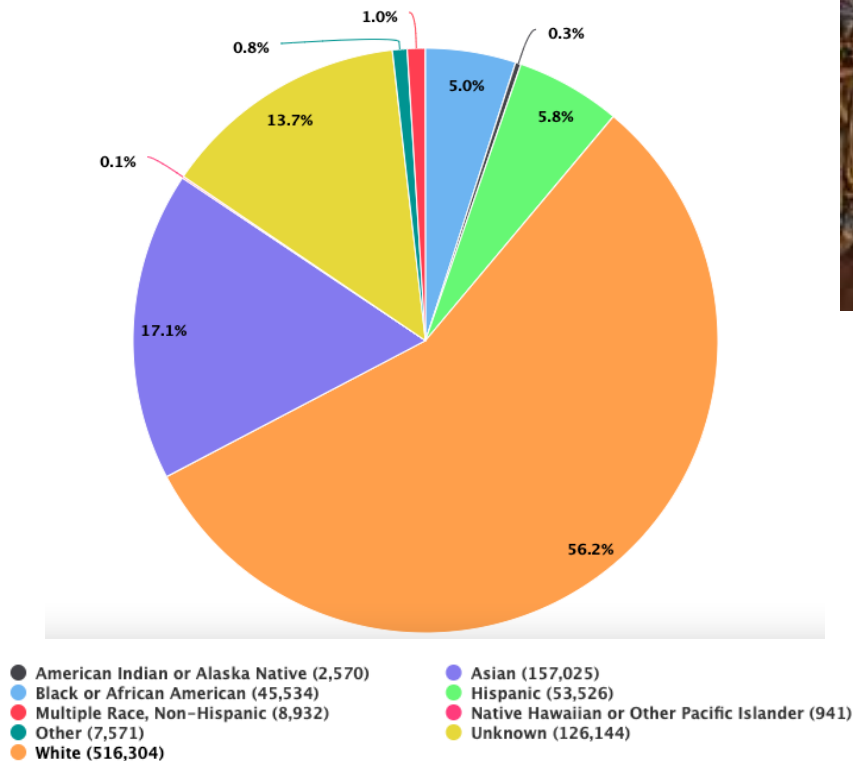
- aneurysm
- acute renal failure
- cardiac arrest eclampsia
- cardiovascular disorder
- undiagnosed cardiac disease
- seizures associated with high blood pressure
- elevated liver enzymes and low platelets
- heart failure
- putting off prenatal care until the last trimester
- amniotic fluid embolism
- shock
- stroke
- sepsis

There's always a certain amount of bias in healthcare practices. A lot of the providers don't realize they have their internal biases that come up when they see people of different races or ethnicities- that's always there. It's kind of helpful to point it out when it's there and just kind of acknowledge it- we all have our own biases, so that's something you always try to get to the medical community that we need to be conscious of these things.
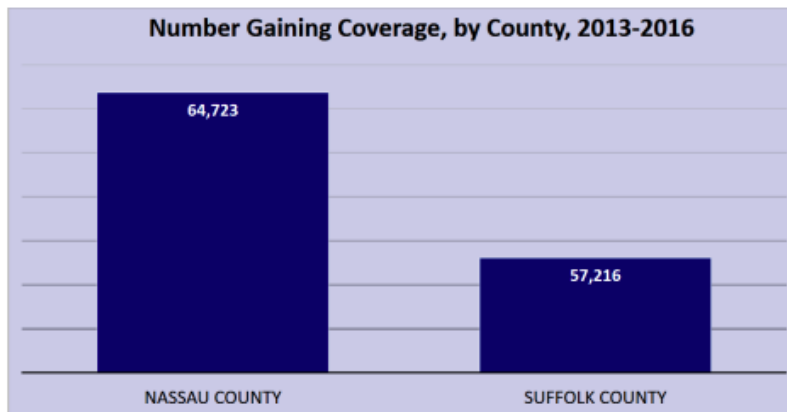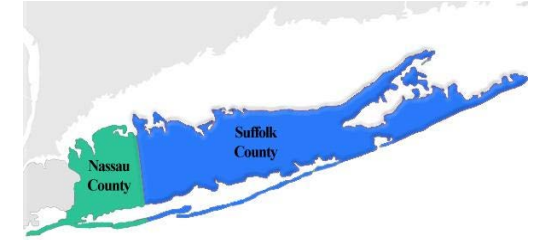
-   Doctor in Healthcare

Access to healthcare

Uninsured rate (2018)
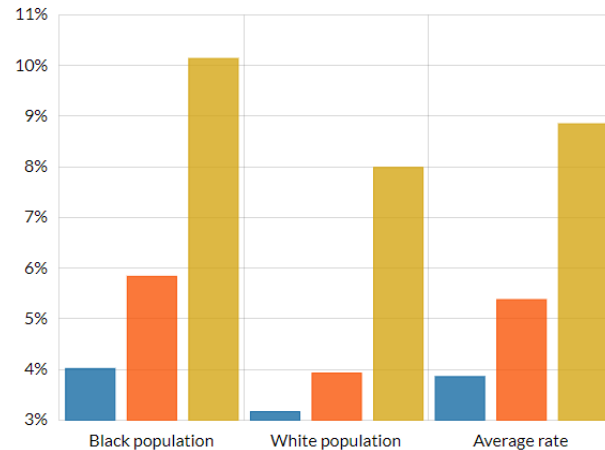
Number Gaining Coverage, by County, 2013-2016

*Census 2016. Data are not available for some counties due to small sample size.

- Insurance rates
- Transportation problems
- Underlying conditions (asthma, diabetes, high blood pressure)
- Environmental racism=low-income
- Black residents more likely to live in segregated communities and be exposed to water and air pollution (Pulido, 1996)

"Bias. Definitely for sure bias I feel like is a key thing. We have resource deficits when it comes to environmental factors, it's always in the Black communities where our pollution is highest, whether groundwater, whether it's our air quality. The lack of food resources, so we're not having a quality diet, the inequalities in pay, therefore, we can't afford a quality lifestyle. The weathering of a Black person, weathering meaning through to microaggressions, due to toxic stress, there's a lot of key factors that go into our well-being, and we're not as pampered as White women are. White women are given a lot of leeway to just be themselves and to be vulnerable to whereas Black women are not."

- **Social Justice Leader**

Covid rates and deaths for Black community, and Black community's response to vaccines

Percent of Individuals in Racial or Ethnic Group with Completed Vaccine Series

- Hispanic or Latino: 72.7%
- White: 66.3%
- African American: 56.9%
- Asian: 87.3%
- American Indian or Alaska Native: 100.0%

TABLE 1. AGE-ADJUSTED RATE OF COVID-19 CASES PER 100,000 IN NEW YORK CITY (CASES WHERE RACE OR ETHNICITY WAS KNOWN)

Race/Ethnicity	Non-hospital cases	Non-fatal hospitalizations
Black/African American	806	395
Hispanic/Latinx	668	342
White	619	163
Asian/Pacific Islander	303	137

Source: New York City Department of Health, May 7, 2020.

Covid-19 rates have shown large disparities in racial/ethnic groups as well as socio-economic groups.

"In general, Black communities are hesitant in reference to vaccine anyway. We had difficulty getting Black communities vaccinated for the flu, so we were seeing similar things with COVID in that it was mistrust of the healthcare system, it was not having enough information on COVID vaccine, hearing dis- and misinformation that is out there and bombarding us so I think people are hesitant for good reasons. You wanna be thoughtful about what you put in your body, I think it's historically we're hesitant, and then of course, it's a high risk."

- Healthcare Director

Increased Awareness and Advocacy Groups point to positive signs for the future of healthcare for Black communities on LI

Advocacy Groups

- Health and Welfare Council of Long Island
- Long Island Jobs with Justice
- Pulse Center for Patient Safety
- Nassau-Suffolk Hospital Council
- Big Brothers Big Sisters of LI
- NAACP
- Urban League of Long Island
- Health and Equity Committee- Molloy
- ERASE Racism
- OLA of Eastern LI (Organization of Latin America)
- LILAC (Long Island Language Advocates Coalition)
- East End Birth Network
- Birth Justice Warriors
- Healthy Babies & Moms
- Women's Diversity Network
- Suffolk baby shower program
- Suffolk County DOH Office of Minority Health
- Maternal and Infant Community Health Collaboratives (MICH)
- The Public Health Nursing Bureau
- Planned Parenthood

Equitable Future

- Higher socioeconomic status
- Better access with new clinics
- Utilization of community health assessment
- More people of color represented in healthcare
- Covid highlighted areas for improvement
- Healthcare centers becoming patient-centered

"Well, there's Birth Justice Warriors, Women's Diversity Network -those are the main two that I know about that tend to have a really big voice. I have done some work with the Women's Diversity Network - they do phenomenal work in this space. The Nassau County Department of Health has a Perinatal Network, and that Perinatal Network has been made up of a lot of different stakeholders across Nassau County. So, there are some major groups that are addressing this issue."

- **Director of Health Equity**

Additional Literature and Documentary Film that Address the Topic:
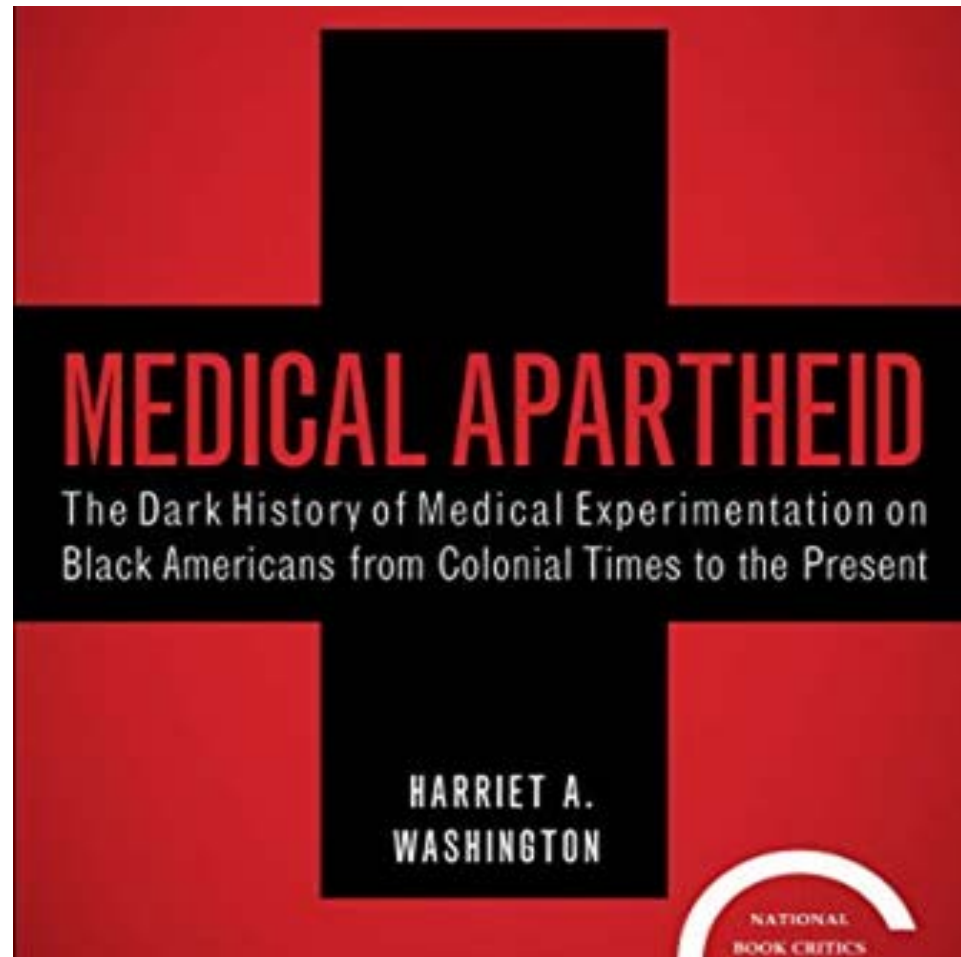
Thank You!

It is important we continue to educate, support, and advocate for stronger more available healthcare for all.

Acknowledgements

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