

## Unmet health care needs in nine Chicago community areas

HEALTH SNAPSHOT NO.13

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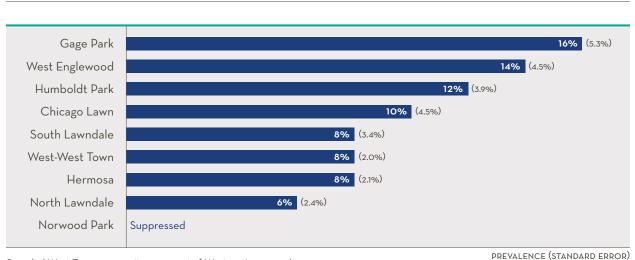
U nmet health care needs, also described as forgone care, are one indicator of poor access to health care. Nearly one in four Americans aged 18-64 years reported at least one unmet medical need due to cost in the past year.' Not surprisingly, individuals without health insurance are three times as likely to report this type of need compared to those with insurance.' Beyond general medical care, individuals are even more likely to report going without other medical needs such as prescription medicine<sup>2</sup> or dental care.<sup>3</sup> Forgoing or even delaying care is related to poorer health outcomes<sup>4</sup> and increased medical expenses when preventable or treatable conditions are allowed to escalate unchecked. This health snapshot presents findings related to unmet health care needs from the *Sinai Community Health Survey 2.0*, a community-driven, representative survey of nine communities in Chicago.

### WHICH COMMUNITIES ARE MOST AFFECTED?

- About one in four adults in West Englewood and North Lawndale did not get needed prescription medication in the past year due to cost.
- In Gage Park, 37% of adults had unmet dental care needs in the past year.
- In West Englewood and South Lawndale, 22% of adults needed eyeglasses in the past year but did not get them due to cost.

### WHO IS MOST AFFECTED?

- Non-Hispanic Black adults had the highest percentage of unmet health care needs in the past year due to cost for medical care or surgery (13%), prescription medication (25%), dental care (25%), and eyeglasses (17%).
- Among adults of Puerto Rican origin, 13% did not get needed mental health care in the past year due to cost.

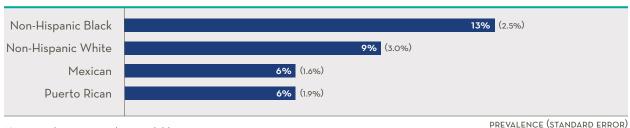


## FIGURE 1: Percent who did not get needed medical care or surgery in past year due to cost by community area

Sampled West Town community area west of Western Avenue only No national comparison data available

- The percentage of adults who did not get needed medical care or surgery in the past year due to cost ranged from a high of 16% in Gage Park to a low of 6% in North Lawndale.
- About one in six adults in Gage Park did not get needed medical care or surgery in the past year due to cost.

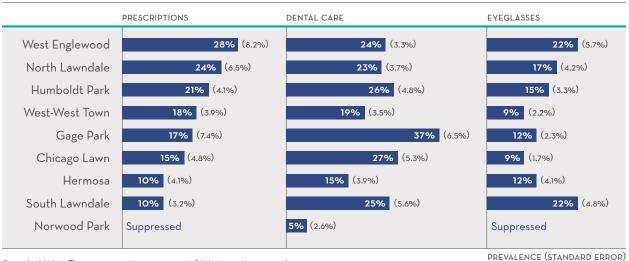
## FIGURE 2: Percent who did not get needed medical care or surgery in past year due to cost by race/ethnicity



No national comparison data available Rao-Scott Chi-Square p-value = 0.0593

- The percentage of adults who did not get needed medical care or surgery in the past year due to cost was highest for non-Hispanic Black adults (13%) and lowest for adults of Mexican or Puerto Rican origin (6%). These differences were not statistically significant.
- About one in eight non-Hispanic Black adults did not get needed medical care or surgery in the past year due to cost.

## FIGURE 3: Percent who did not get needed prescriptions, dental care, or eyeglasses in past year due to cost by community area

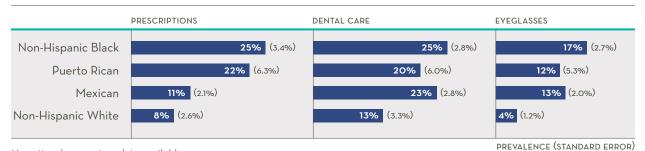


Sampled West Town community area west of Western Avenue only No national comparison data available

PREVALENCE (STANDARD ERROR)

- The percentage of adults who did not get needed prescription medication in the past year due to cost ranged from a high of 28% in West Englewood to a low of 10% in South Lawndale and Hermosa.
- Gage Park had the highest percentage of adults who did not get needed dental care in the past year due to cost (37%), while Norwood Park had the lowest (5%).
- The percentage of adults who did not get needed eyeglasses in the past year due to cost ranged from a high of 22% in West Englewood and South Lawndale to a low of 9% in west-West Town and Chicago Lawn.

## FIGURE 4: Percent who did not get needed prescriptions, dental care, or eyeglasses in past year due to cost by race/ethnicity

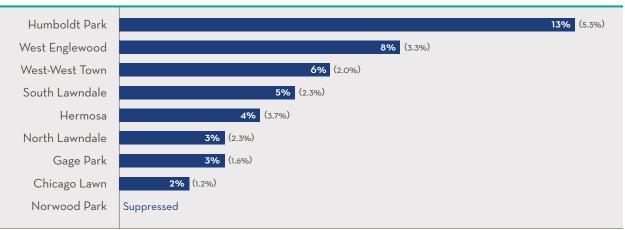


No national comparison data available

Rao-Scott Chi-Square p-value = 0.0001 (prescriptions); p = 0.0819 (dental care); p = 0.0086 (eyeglasses)

- There was a statistically significant difference in the percentage of adults who did not get needed prescription medication in the past year due to cost by race/ethnic group, which was highest for non-Hispanic Black adults (25%) and lowest for non-Hispanic White adults (8%).
- The percentage of adults who did not get needed dental care in the past year due to cost was highest for non-Hispanic Black adults (25%) and lowest for non-Hispanic White adults (13%). These differences were not statistically significant.
- There was a statistically significant difference in the percentage of adults who did not get needed eyeglasses in the past year due to cost by race/ethnic group, which was highest for non-Hispanic Black adults (17%) and lowest for non-Hispanic White adults (4%).

### FIGURE 5: Percent who did not get needed mental health care in past year due to cost by community area

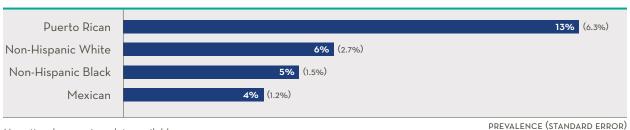


Sampled West Town community area west of Western Avenue only No national comparison data available

PREVALENCE (STANDARD ERROR)

- The percentage of adults who did not get needed mental health care in the past year due to cost ranged from a high of 13% in Humboldt Park to a low of 2% in Chicago Lawn.
- About one in eight adults in Humboldt Park did not get needed mental health care in the past year due to cost.

# FIGURE 6: Percent who did not get needed mental health care in past year due to cost by race/ethnicity



No national comparison data available Rao-Scott Chi-Square p-value = 0.2285

The percentage of adults who did not get needed mental health care in the past year due to cost was highest for adults of Puerto Rican origin (13%) and lowest for adults of Mexican origin (4%). These differences were not statistically significant.

#### ABOUT THE SURVEY

Sinai Urban Health Institute (SUHI) is a unique, nationally-recognized research center on the west side of Chicago. Our mission is to achieve health equity among communities through excellence and innovation in data-driven research, interventions, evaluation, and collaboration. SUHI is a proud member of Sinai Health System. For more information about SUHI, visit www.SUHIChicago.org.

SUHI designed and conducted the *Sinai* Community Health Survey 2.0 in partnership with our Community Advisory Committee and The University of Illinois at Chicago Survey Research Laboratory (SRL). SRL administered surveys face-to-face in both English and Spanish to randomly selected households from each of the nine surveyed communities. Interviewers randomly selected up to two adults (18 and over) per household. Data collection took place between March 2015 and September 2016 with a final sample size of 1,543 adults. Survey results are representative at the community area level for all communities with the exception of West Town, which was sampled west of Western Avenue only. More information about the survey is available at www.SinaiSurvey.org.

#### DEFINITIONS

Lack of needed medical care or surgery in past year due to cost was defined as having a time when you needed medical care or surgery in the past 12 months but did not get it because of cost or lack of insurance.

Lack of needed prescription medication in past year due to cost was defined as having a time when you needed prescription medication in the past 12 months but did not get it because you could not afford it.

Lack of needed dental care in past year due to cost was defined as having a time when you needed dental care, including check ups, in the past 12 months but did not get it because you could not afford it.

*Lack of needed eyeglasses in past year due to cost* was defined as having a time when you needed eyeglasses in the past 12 months but did not get them because you could not afford them.

Lack of needed mental health care in past year due to cost was defined as having a time when you needed mental health care or counseling in the past 12 months but did not get it because you could not afford it.

#### METHODS

We used sampling weights to compute statistical estimates to ensure (1) the estimates accounted for the differential probability of the selection of respondents; and (2) the demographic profile of survey respondents matched the community area demographic profiles from the 2010-2014 American Community Survey. The Rao-Scott Chi-Square test was used to test for statistical differences by race/ethnic group. Findings were suppressed when the number of observations was less than five.

#### REFERENCES

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