

KEY FINDINGS

- Access to insurance remains a pervasive barrier to care for Black and Hispanic communities in the U.S.
- About 30 million people in the U.S. remain uninsured. About half of those 30 million are Black, Hispanic, or Asian.
- Even with insurance, Black workers are less likely to have access to paid sick days and healthcare insurance. Black and Hispanic workers are also less likely to work in sectors that allows them to work at home. The healthcare industry still has a lot of work to do to address racial inequities in the field. As our research shows, racial disparities show up at every turn in the healthcare experience. From access to insurance to discrimination in the doctor's office to worse outcomes with COVID, Black and Hispanic Americans aren't getting the same treatment or access to the healthcare system as white Americans.

While these problems existed before the pandemic, the past two years (and counting) added new complications to the issues at hand. Trust in public health institutions has not fully recovered to pre-pandemic levels for Black and Hispanic Americans. The health impacts of COVID also affected these groups more; many Black and Hispanic Americans have personally lost someone to COVID.

Even as the pandemic hit Black and Hispanic communities hard, the obstacles to providing equitable healthcare make it so that Black and Hispanic Americans are less likely to get help from a mental healthcare provider during a difficult time. Problems with insurance, stigma and culturally sensitive care complicate getting mental healthcare to these patient populations.

There are some steps both individuals and the wider industry can take to alleviate these issues. Hiring more diverse healthcare providers, training staff in culturally competent care and lowering costs would likely mediate some of the biases in the healthcare field. In the face of these challenges and the pandemic, many Americans took matters into their own hands, making a point to find ways to connect emotionally with others and support their wellness.

But this is not enough. Understanding how and where racial disparities appear in the healthcare industry is essential to delivering fair care.

Racism in the patient experience and unequal access to care amplify issues

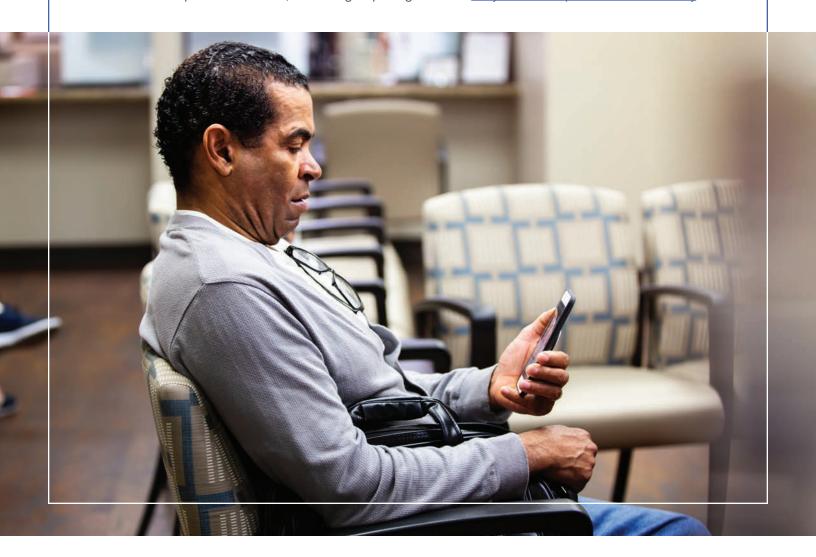
Racism, for patients in the doctor's office or healthcare setting, and the unequal access to healthcare coverage and benefits converge, intensify the unequal treatment Black and Hispanic Americans experience under this system. The pandemic exacerbated these issues, but they existed well before March 2020.

Equity of access

As outlined above, access to insurance remains a pervasive barrier to care for Black and Hispanic communities in the U.S. About 30 million people in the U.S. remain uninsured. About https://hispanic.org/hispanic and 31% of Hispanic adults under the age of 65 were uninsured, compared to 9% of white adults.

Other research from the Economic Policy Institute finds that even with insurance, there is a benefits gap between Black employees and their white counterparts. Black workers are less likely to have access to paid sick days and healthcare insurance. Black and Hispanic workers are also less likely to work in sectors that allow them to work at home; that gap posed a significant risk to a person's health and wellbeing during the pandemic. On the whole, this disparity holds significant implications for Black and Hispanic people's ability to take time off and their ability to access healthcare through comprehensive insurance, as well as care for sick family members.

Given this context, it's unsurprising that health insurance options are the most important healthcare issue for Black and Hispanic Americans, according to polling from the Beryl Institute/Ipsos Px Pulse Survey.

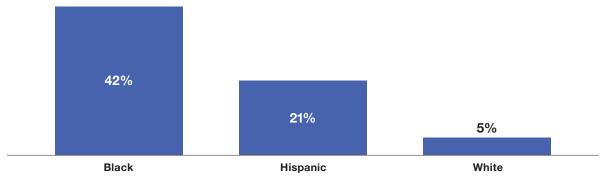


Racism in patient experience

In addition to inequities in coverage, racism influences every part of a patient's experience, from the waiting room to the doctor's office to the hospital. Two in five Black Americans (42%) and one in five Hispanic Americans (21%) report experiencing prejudice and discrimination in their healthcare encounters, compared to just 5% of white respondents, a Beryl Institute/Ipsos Px Pulse Survey finds. Additionally, that same poll found Black respondents have a more negative view of the quality of care they receive because of their race.

Two in five Black Americans personally experience discrimination in a healthcare encounter

Percent who have often or sometimes personally experienced discrimination or prejudice in their healthcare encounters based on their race and ethnicity...

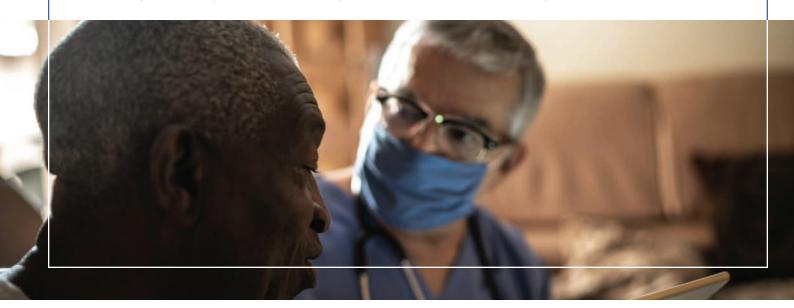


Source: Beryl Institute/Ipsos PX Pulse Survey conducted August 16 – September 23, 2021, among 1,010 U.S. adults. How often, if ever, have you personally experienced discrimination or prejudice in your healthcare encounters based on race and ethnicity?

Many Black and Hispanic Americans feel the unequal treatment they receive is based on prejudices held by healthcare workers. Among people who report that they received a different level of care because of their race or ethnicity, nearly 70% of Hispanic and Black respondents feel that this unequal care stems from healthcare workers purposely treating people of certain races and ethnicities differently. Just under half of white respondents (45%) feel this way.

These experiences of racism in patient experience are borne out in studies among healthcare workers as well. Research among cancer patients found that there is a troubling difference in pain assessment for Black patients, with healthcare workers less likely to believe the pain a Black patient is experiencing as substantial.

Relatedly, the perception of discrimination is growing among Black Americans. One in three (33%) Black patients in Q3 2020 felt that the quality-of-care Black patients receive is worse than it should be, according to the Beryl Institute/Ipsos Px Pulse Survey. As of Q3 2021, 45% feel this way.



Pandemic reverberations two years later

Public health institutions struggle to recover pre-pandemic levels of trust

Trust in public health infrastructure <u>fluctuated wildly</u> over the past two years and is now often mediated by politics. With two presidential administrations from two different parties overseeing the pandemic response, trust ebbed and flowed for the CDC and federal government in how much the public trusted them to respond to COVID. The politicization around the pandemic made these institutions polarizing for partisans on both sides of the aisle.

Looking at race, the change in trust for Black and Hispanic Americans and white Democrats versus white Republicans is striking. Supermajorities of Americans, regardless of race or partisanship trusted the CDC to provide them with accurate information about COVID-19. That trust dipped by nearly 40 points for Black and Hispanic Americans during the first year of the pandemic, and now sits roughly ten points below its pre-pandemic level. For white Democrats, trust has fully recovered, while only one in three white Republicans trust the CDC. These differences are largely driven by the way <u>race</u>, <u>politics</u>, <u>and identity intersect</u> and interact with the history of the U.S.

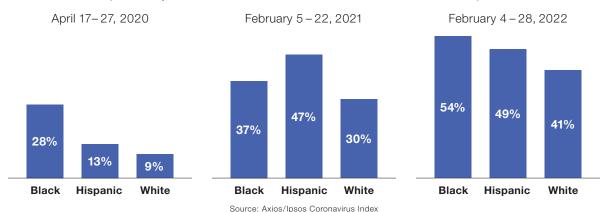
Importantly, even as trust in public health institutions has softened, <u>supermajorities of Americans trust their doctors</u>, something that holds true across race, Ipsos polling provided exclusively to the BBC found.

Black and Hispanic Americans disproportionately hurt by the pandemic

COVID-19 did not affect all Americans equally. Black and Hispanic people were often harder hit by the pandemic. As of February 2022, nearly 950,000 people have died of COVID, driving the average life expectancy for the country down. Even here, these effects do not impact all equally. Average life expectancy fell 2.7 years for Black people, 3.0 years for Hispanic people, and 1.2 years for white people between 2019 and 2020. Two in five (40%) white Americans personally know someone who died from the virus. For Black and Hispanic Americans, that number is higher, with over half of Black Americans (54%) and half of Hispanic Americans (49%) knowing someone who died of COVID, according to Axios/Ipsos Coronavirus tracking.

Black and Hispanic Americans more likely to know someone who died from COVID-19

Percent who personally know someone who died from COVID-19 across three periods in time...



Mental healthcare is a major concern for Black and Hispanic Americans

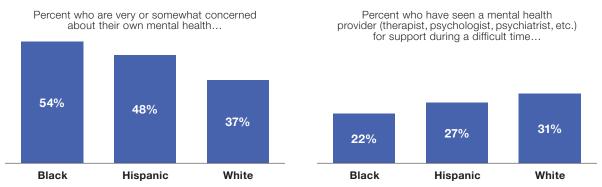
Black and Hispanic communities have the greatest reported need for mental health access, but the least access and support. This is largely driven by the racial inequities in the healthcare system. Even as mental health is a serious concern for Black and Hispanic communities, fewer people have access to a mental healthcare professional. Barriers to insurance, culturally competent care, and stigma remain major issues for Americans in these communities.

Current attitudes

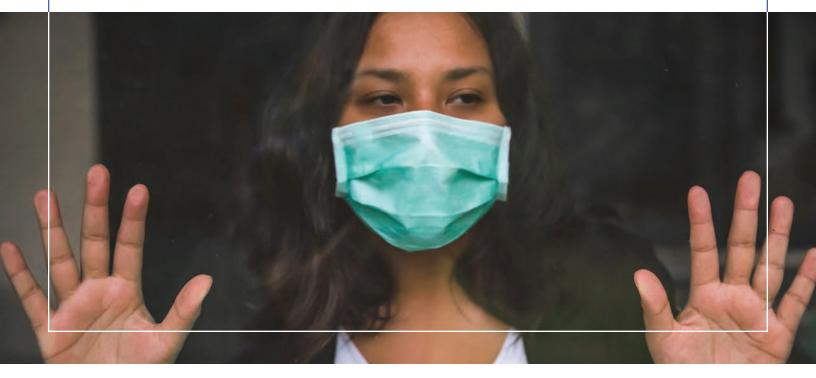
Black and Hispanic communities harbor serious concerns about their mental health. Roughly half of Black (54%) and Hispanic Americans (48%) are concerned about their own mental health, while far fewer white Americans (37%) share those same concerns, Ipsos polling with the National Alliance on Mental Illness found.

Yet, that same poll found fewer Black and Hispanic Americans have seen a mental healthcare provider for help during a difficult time. Three in ten white respondents (31%) reported doing this, while about one in four (27%) Hispanic Americans and one in five (22%) Black Americans did the same.

Many are concerned about their mental health but are not getting help from a mental health provider



Source: NAMI/Ipsos Poll conducted October 22 - 25, 2021, among 2,049 U.S. adults using Ipsos' KnowledgePanel®

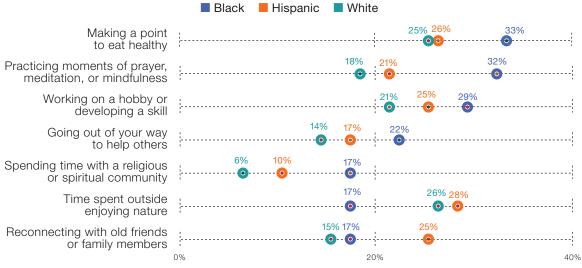


At the same time, majorities of Americans across all races are not content with mental health treatment in the country.

Despite the gaps in the formal mental healthcare system, Black and Hispanic Americans have found ways to build resilience and community, during the turmoil of the past two years. About one in three (32%) Black Americans increased the amount of time they spent practicing moments of prayer, meditation, or mindfulness. About three times as many Black adults (17%) compared to white adults (6%) report increasing the amount of time they spent with a religious or spiritual community since the pandemic. One in four Hispanic Americans have increased the time, they spent reconnecting with old friends or family members, compared to 17% of Black adults and 15% of white ones.

Over the past two years, many are increasing the time they spend on wellness activities

Percent who have increased their time spent doing the following activities since the beginning of the pandemic...



Source: Ipsos survey of 1,000 American adults age 18+ conducted February 11-13, 2022

While engaging in these behaviors is not a substitute for seeking appropriate professional help, a growing body of research would suggest, these activities can help cultivate or reinforce a more holistic sense of wellbeing.



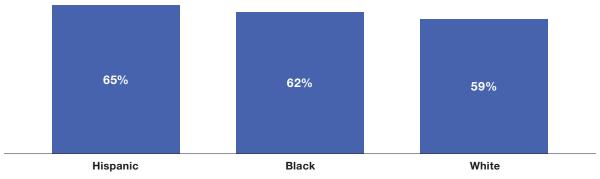
Current barriers to mental healthcare

Accessing mental healthcare remains a major barrier for Black and Hispanic Americans seeking help. Research from <u>Columbia</u> underscores that the historical and present-day experiences of racism among Black and Hispanic communities remains a barrier to equitable mental healthcare. In addition, access to comprehensive insurance that covers mental healthcare, access to culturally competent care, and the lingering stigma around mental health all create major obstacles for getting Black and Hispanic Americans help.

The problems with access and barriers become exacerbated by the stigma surrounding getting help. NAMI/Ipsos polling finds many acknowledge there's still a stigma around mental health, with majorities of white, Black, and Hispanic Americans being concerned about this.

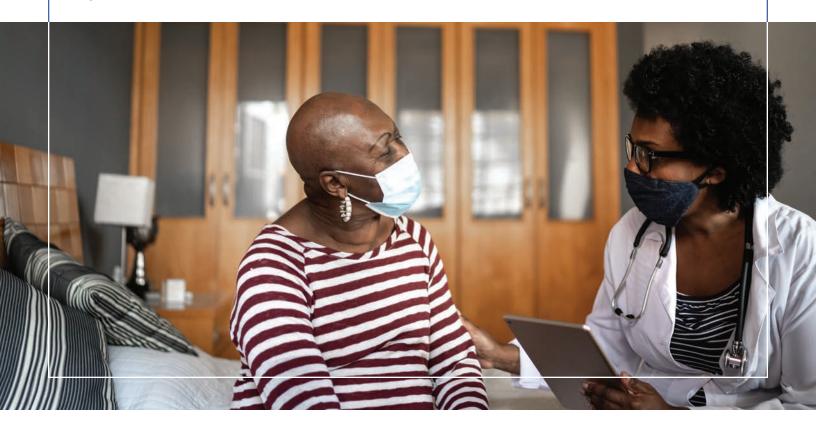
Most are concerned about mental health stigma

Percent who are very or somewhat concerned about the stigma around mental health...



Source: NAMI/Ipsos Poll conducted October 22 - 25, 2021, among 2,049 U.S. adults using Ipsos' KnowledgePanel®

These findings aren't isolated to one survey. Other studies found that some Black Americans view struggling with mental health as a <u>personal failing</u>. Three in five Black Americans (63%) believe depression is a personal weakness. Likewise, for some in the Hispanic community, sharing intimate details with a provider may cut against their <u>cultural norms</u>.



Culturally competent care

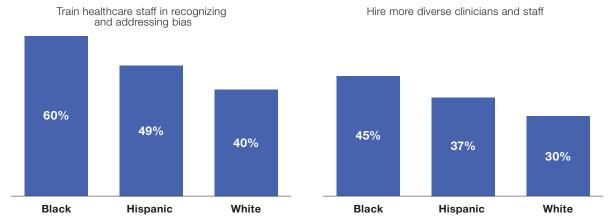
Following the murder of George Floyd, anxiety and depression spiked for Black Americans and flatlined for white Americans, according to <u>Census tracking</u>. Other research backs this up, finding that watching <u>police killings</u> have a measurable and damaging impact on Black Americans' mental health.

Given the way structural racism factors into people's mental health, mental healthcare work that takes into account those realities is essential. The <u>psychology workforce</u> is overwhelmingly white, while only <u>11% of doctors are Black or Hispanic</u>. Meaning that these providers have to actively work to understand the way structural racism hurts these communities and impacts the care they may receive.

Ipsos polling backs up this approach. Beryl Institute Px Pulse polling with Ipsos finds that training staff, hiring more diverse healthcare providers, and lowering costs would mediate the biases in the care they receive.

Black, Hispanic patients want more diverse healthcare staff and training to reduce bias

From the following list, what should be done to ensure that everyone receives high-quality of care regardless of their identity?



Source: Beryl Institute/Ipsos PX Pulse Survey conducted August 16 - September 23, 2021, among 1,010 U.S. adults

Conclusion

Structural racism fosters and perpetuates the unequal care Black and Hispanic Americans receive in the healthcare system. From access to affordable healthcare and racism in patient experience to the gaps in clinicians and staff that look like the patients they are treating, the issues with racism in this arena are far and wide-reaching.

These disparities extend to the mental healthcare system. Understanding the barriers to access from equitable mental healthcare to the cost of care to the stigma around mental health to the problems with accessing culturally competent care all pose significant challenges for getting people the help they need. At the same time, many who are left out of these systems are finding ways to build themselves and their community up despite these shortcomings.

The public health crisis the pandemic created made these realities more visible, while also adding new issues to the mix. Public health institutions are polarized in a way that they weren't before, complicating the way people trust information from these sources. Finding ways to address these issues is essential in building back and fully recovering from the pandemic and reckoning with the systemic racism built into many parts of the healthcare system.

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