

Trust and Distrust of Physicians among African American, Non-Hispanic White and Hispanic Respondents

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Outline

- **Background**
- **Study Objective**
- **Methodology**
- **Results**
- **Conclusions**
- **Recommendations**

Background

Trust and Health Care

- **Importance delivery of health care**
- **Patient-physician relationship**
- **Interpersonal trust significant predictor:**
 - **Acceptance of recommended care**
 - **Satisfaction with care**
 - **Loyalty and satisfaction with the physician**
 - **Self reported health improvement**
 - **Willingness to give physician control**

Previous Research Interpersonal Trust and Health Care

- **Focus on Caucasian patients**
- **Lack of studies comparing trust and distrust in physicians across racial/ethnic groups**
- **African American and Hispanics differing views of trustworthiness**

Study Objective

To better understand how views of trustworthiness of physicians vary across African Americans, Hispanics and Non-Hispanic whites.

Methodology

Study Design

- **Qualitative**
- **17 Focus Groups conducted**
 - **9 African American (n=66)**
 - **Public hospital clinics and community organizations**
 - **3 Non-Hispanic White (n=13)**
 - **Private Hospital**
 - **5 Latino (n=38)**
 - **Public hospital clinics and community organizations**

Focus Groups

- **Semi-Structured Interview Guide**
- **Trained experienced moderators and observers**
- **Audio taped**

Analysis

- **Focus group discussions transcribed verbatim**
- **Grounded theory**
- **Transcripts reviewed using ATLAS.ti 4.2**
 - **Two trained coders**
 - **Intercoder reliability: K statistic = 0.90**
- **91 codes**
 - **17 initial codes based on interview guide**
 - **74 codes added during analysis**

Results

Demographics

- **Age range 19-79 years**
 - Mean 47 years
- **Hispanics and African Americans had lower educational attainment than whites**
- **Majority had visited a doctor in the past year**
 - High 89% (similar across the groups)
- **Health care insurance**
 - Higher rates of un-insurance Hispanics and African Americans

Major Themes

Trust in Physicians

- **Important for all groups**
 - **Interpersonal competence**
 - **Excellent interpersonal communication key to building trust**
 - **Caring**
 - **Having an interest**

Trust in Physicians

“[Doctors should] be able to communicate and to have a good bedside manner. I may not mean an awful lot [to the doctor]. Just show me that you are concerned. You know you don’t have to sit in the room for me 20 hours. Make me feel comfortable because this is my life and I want to trust.”

Trust in Physicians

- **Important for all groups**
 - **Technical competence**
 - **Making the right diagnosis**
 - **Giving the appropriate treatment**
 - **Providing the correct follow-up care**

Trust in Physicians

- **Different across groups**
 - **Physician characteristics**
 - **Gender, age, race not important for African American and whites**
 - **Hispanics preference language (Spanish speaking) and gender**

Distrust in Physicians

- **Important for all groups**
 - **Interpersonal and technical incompetence**
 - **Hurried consultations**
 - **Poor communication**
 - **Lack of attentiveness**

Distrust in Physicians

“I’ve been sick for about the past 5 years. I see doctors and specialists regularly...My original doctor was terrible. She didn’t listen to anything I had to say. She was right [according to her]. No matter what it was, she was right. In the mean time I was getting sicker”

Distrust in Physicians

- **Different across groups**
 - **For profit health care**
 - African Americas: community clinics focus on profit specifically Medicaid
 - Drug companies and physicians
 - **Communication difficulties**
 - Physician ability to communicate clearly in English or Spanish
 - African American and whites distrust non-fluent English speaking physician
 - Hispanics distrust non-Spanish speaking physician

Distrust in Physicians

Different across groups

Racial Discrimination

- African Americans and Hispanics perception of treatment
- Whites focus on socioeconomic status and insurance
- Hispanics discrimination African American staff

• Experimentation

- Important for African Americans
- Tuskegee experiment
- Less relevant for whites and Hispanics

Distrust in Health Care Providers

“Over my period of time dealing with the medical field, I know that you do need a hell of a lot of trust in physicians...it reminds [me] of the Tuskegee Institute where they messed around and they made the brothers have the disease instead of treating them; they just wanted to see how it was going to affect them.”

Consequences

- **Influence on health care seeking behavior**
- **Trust**
 - **Facilitates care-seeking**
 - **Enhances adherence to treatment**
- **Distrust**
 - **Refusal of surgery**
 - **Withdraw from care**
 - **Not seek care**

Limitations

- **Qualitative study**
- **Limited number of participants (n=117) differing for each racial/ethnic group**
- **Recruitment in a single urban environment**
- **Respondents had contact with the health care system within the last twelve months**

Conclusions

- **Patient insight into determinants of physician trust and distrust**
- **Similarities and differences across the groups**
- **Core group of factors engender trust and distrust**

Conclusions

- **Determinants of trust similar across all groups**
 - Interpersonal and technical competence
 - Hispanics: Spanish speaking and culturally competent physicians
- **Determinants of distrust more varied across groups**
 - Lack of technical and interpersonal competence
 - For-profit physician motivation
 - African Americans and Latinos:
 - cultural incompetence
 - racial and ethnic discrimination
 - language barriers
 - fear of experimentation

Recommendations

- **Approaches to building trust and preventing distrust should not be one-size fits all**
- **The measurement and exploration of trust as a determinant of disparities and/or health outcomes should be sensitive to these differences across racial/ethnic groups**

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