Linguistic Cues Via the Telephone and Black Parents' Access to Well Child Visits

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Background

Experimental field studies have shown discrimination in over-the-phone interactions in housing, human resources and insurance based on name and accent cues to race and ethnicity (1-3). We hypothesized that similar dynamics are present within the health care realm. Black-White disparities in children's access to well child visits persist (4, 5) and consistent access to these types of visits can contribute to a reduction in long term health issues (6).

Approach

- Validated Name and Accent Cues
- Sampled 320 Pediatric Offices
- 80 in each US Geographic Region
- Stratified by Black-White Segregation Indices for the largest 100 MSAs
- Each office received two calls from Black auditors within 24 hours
- One with a cue to blackness
- One control call
- Auditors maintained jottings during call
- Auditors expanded on jottings
- Blind coder transformed qualitative data into quantitative data
- McNemar matched case-control analysis in Stata

Measures

<table>
<thead>
<tr>
<th>MEASURE</th>
<th>VARIABLE TYPE</th>
<th>LEVEL</th>
<th>UNITS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name Cue</td>
<td>Independent Dichotomous</td>
<td>1.0</td>
<td></td>
</tr>
<tr>
<td>Accent Cue</td>
<td>Independent Dichotomous</td>
<td>1.0</td>
<td></td>
</tr>
<tr>
<td>Segregation (MSA)</td>
<td>Moderating Dichotomous</td>
<td>1.0 (High, Low)</td>
<td></td>
</tr>
<tr>
<td>Acceptance of Patient</td>
<td>Dependent Categorical</td>
<td>(Acceptance, Reluctant Acceptance, Passive Refusal, Refusal)</td>
<td></td>
</tr>
<tr>
<td>Withholding Information</td>
<td>Dependent Dichotomous</td>
<td>3.0 (Posed questions prior to decision)</td>
<td></td>
</tr>
<tr>
<td>Misattribution</td>
<td>Dependent Dichotomous</td>
<td>1.0 (Mentioned Restrictions)</td>
<td></td>
</tr>
</tbody>
</table>

Explicit Gatekeeping

- Abbreviation for a type of decision-making where the provider explicitly states the criteria for acceptance or refusal of patients.

- **p = .04, Relative Difference .35, C.I. .08-.61
- **p = .03, Relative Difference .08, C.I. .01-.16

Implicit Gatekeeping

- Abbreviation for a type of decision-making where the provider implicitly states the criteria for acceptance or refusal of patients.

- **p = .02, Relative Difference .19, C.I. .02-.36
- **p = .01, Relative Difference .56, C.I. .27-.86

Summary

- Name and accent cues reveal heterogeneity w/n Black experience
- Women with a Black name or accent are told that pediatric offices are accepting new patients less often.
- These women are not outright rejected, but are: Not provided a yes or no answer
  Asked questions before giving an answer
  Informed about restrictive conditions for acceptance of new patients

Conclusions

Pediatric offices may be using linguistic and name cues in a manner similar to what we see in housing, human resources, and insurance arenas. Given the type of gatekeeping behaviors, it is likely that staff are using racial cues to identify desirable patients (e.g. insured and adherent.) This profiling over the telephone may eventually help to explain why, despite efforts to promote equitable access to care, Black-White disparities in children’s access to well child visits persist.

References