

Access to Care

Barriers for Low-Income Households





Why?

In 2012, a Medina County Needs Assessment commissioned by Living Well Medina County* found that low-income households experience significant health disparities and face unique barriers when trying to access medical, mental/behavioral health, and social services. According to this assessment:

- 26% of adults earning less than \$25,000 annually describe their health as fair or poor
- 28% of adults earning less than \$25,000 were without health coverage in the past year
- 9% adults earning less than \$25,000 were concerned about having enough food for themselves or their family
- 26% of adults earning less than \$25,000 were limited in some way because of a physical, mental or emotional problem

Purpose of this report

This report provides a summary of the qualitative data that was collected to supplement the results of the 2012 Community Needs Assessment. The goal of this data is to provide a more comprehensive answer to the question “What barriers to low-income households face when trying to access medical, mental/behavioral health, and social services?” This data was gathered from a series of six focus groups conducted with low-income Medina County residents. Residents were invited to participate if they had a household income of less than \$25,000 annually and/or were eligible to receive benefits such as Medicare, Medicaid, SNAP, WIC, cash assistance, etc. These criteria allow for the inclusion of families who may have a household income greater than \$25,000 but who still fall below the poverty line due to family size.

What do we mean by “access”?

Access is a term that describes an individual’s ability to use a service. Availability, cost, quality, appropriateness, and location are just a few of the factors that should be taken in to consideration when determining whether or not a service can be accessed.

** Living Well Medina County is a coalition of healthcare, government, education, business, non-profit, and faith communities dedicated to improving the well-being of Medina County residents.*

Process

This project was conducted as collaboration between Medina County Health Department and Kent State University's College of Public Health with the support of Living Well Medina County. In May 2015, three one-on-one pilot interviews were conducted to evaluate the focus group discussion questions. Once the questions had been edited based on data collected from the pilot interviews, focus group discussions began in June 2015. Six focus groups took place at the Medina County Office for Older Adults, Alternative Paths, Lodi United Methodist Church, Medina County Health Department, Lodi Family Center, and Montville Township Town Hall. Participants were recruited from a convenience sampling of clients of these agencies where groups already existed, with the exception of the Montville Township Town Hall group, which was a pre-formed group that meets weekly at different locations. This group was recruited through a member of Living Well Medina County. These agencies were selected to ensure data was captured from a wide variety of demographics. These demographic include families, older adults, patients seeking treatment for mental health issues, adults with developmental disabilities and their parents, and residents from the Lodi area. All participants signed informed consent forms before the focus group discussion began and received \$10 gift cards as compensation for their participation.

- 60 Medina residents participated in the interviews and focus groups
- 42 women, 18 men
- Discussions lasted from 24 to 76 minutes

Participants were asked a series of questions regarding their experiences trying to access medical, mental/behavioral health, and social services in Medina County. These questions included:

- What is your general impression of the available medical services, mental health/behavioral services, and social services in Medina County?
- What prevents you from seeking medical care, mental health/behavioral or social services for yourself or your children in Medina County?
- What would make it easier to use any of the medical, mental/behavioral health, social services?
- What additional services would you like to be offered?



What did we learn?

The following four themes were most commonly mentioned across all discussions: Transportation, Respect, Knowledge of Available Services, and Maneuverability of the System

Group	Transportation	Respect	Knowledge of Available Services	Maneuverability of the System
LUMC	X	X		
MCHD	X	X	X	X
LFC	X	X	X	X
AP	X		X	
OOA	X	X	X	
MTT	X	X	X	X

* LUMC = Lodi United Methodist Church, MCHD = Medina County Health Department, LFC = Lodi Family Center, AP = Alternative Paths, OOA = Medina County Office for Older Adults, MTT = Montville Township Town Hall



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Transportation

Transportation was most often mentioned as the greatest barrier to accessing services. Residents feel that the current routes, hours of operation, reliability, and requirement of advanced scheduling of the transportation options in Medina County prevent them from accessing necessary services.

“They only do major routes now. And I’ve already talked to a doctor who was very upset about it because a lot of his patients can’t get to him because transit won’t come to the senior apartments to pick them up anymore.”

“Transit has done this twice; they drop Summa from their route trying to make things more efficient. They got enough complaints that they put it back on, but then they started to do the same thing. My wellness visit is in February, and knowing I would have to walk from the road to the doctor’s office, I didn’t go. Well, I kept getting calls from the doctor’s office and sometimes I think that transit needs to realize... especially for doctor’s offices, don’t take them off the route, don’t make a senior citizen or even a handicap person walk up a hill on ice.”

“You have a lot of people who don’t drive so to talk about these [services], how do they get there? We have quite a few people who are handicap so they need transportation. I think that’s a primary thing to go to all these places to survive. Transportation is not available on Saturdays which is when a lot of these [services] are. If it’s after 5 you can forget it or on Saturday or Sunday.”

“They would like you to order a demand bus at least one to two weeks before your appointment, but if something comes up that you can’t help and you need to get somewhere, you can’t get a bus to come in and you’re stuck.”

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Respect

Many residents felt they were treated differently or poorly based on their age/disability/low-income status. They said they felt regularly judged or disrespected by medical, mental health, or social service agency staff as well as by other members of the public.

“You get treated different. My insurance is CareSource. I think you get treated different from my experience of having my own insurance, you know having a job. You get treated different.”

“The food card doesn’t come with a regular MasterCard logo on it, and you have these pretty clothes and cars and you’re not going to throw your clothes and your things away, you need those things and they look at you like ‘Oh, she has a designer purse and she has food stamps’, or ‘she has an expensive phone and she’s on welfare’. To be honest the kids really suffer because everyone around you is ignoring you.”

“I think there’s still a stigma about low-income people needing assistance. There’s still a stigma that you’re lazy. It just seems people think that there’s something wrong with you that you don’t have this high income or million dollars in the bank that you can’t just provide for yourself. People look down on you... maybe not the doctors but their staff looks down on you, like, ‘Well, you should have saved more when you were younger.’ Well, maybe that wasn’t the problem, maybe it was some sort of crisis happened and there goes your money. Through medical expenses, it takes all of your money so you have nothing. Because you run out of money people look down on you.”



Knowledge of Available Services

Residents feel there are plenty of services (apart from transportation) but they are unaware of all options or don't know where to go for what. Many residents expressed frustration that they usually had to learn about services from other residents. Some felt that many agency employees were unaware of all the available services themselves. Residents also reported that some service agency employees gave them conflicting or partial information, or even withheld information regarding the services available to them. Many expressed a desire for a comprehensive guide to all public and private medical, mental/behavioral health, and social services available in Medina County.

"I've gone in there for something specific I thought maybe they could have helped me with and they just couldn't and they try and guide you, but other times if you don't ask, then you don't know the services available. Even if you're talking to them, they haven't told me some things I found out from other people, so if you don't specifically ask they don't just tell you."

"They need to learn some of the services that they have. If I ask them a question he'll tell me something, you'll say something else, and you'll say I don't know. Some don't tell you all the services. It's like if I tell you, you'll want it."

"Information. That's the big thing, give us the information. A booklet that they could have here that they could just set it out, where we don't have to go in and ask for it. Anything. I get tired of saying 'I didn't know that.'"

"A lot of people in the system don't really understand where they fit in the system. All they know is I have this opening and my job is to fill out this form."

"I think they just pick and choose... who they want to tell."



Maneuverability of the System

The complexity and ease with which someone trying to access services could move through the system was a major barrier for many residents. The time and effort required to obtain services is often a barrier. Residents reported that the hours of operation of some agencies are employee oriented and not consumer orientated. The increased use of the internet to disseminate information and paperwork is making it increasingly difficult for residents who do not have access to or the skills to use a computer to obtain resources and information. Maneuverability of the system is particularly difficult for older adults and adults with developmental disabilities.

"They take forever with phone calls. When you call them you can't call and speak to your case worker, you have to go through the call service. And some people don't have the gas to drive up there and you wait three days to a week for a phone call. If you're not there when they call you wait another week for a phone call back."

"It's very difficult just to navigate the telephone. You have to push this button and push that button and you hold for this and hold for that and they can't discuss people with you unless they've given consent and a lot of us [have consent] and they're accustomed to us discussing it but sometimes it takes half hour an hour to get on the phone and then when you do get on and you get to the appointment desk and many times the appointment's six months later."

"The bureaucracy is stifling. It takes me a lot of time and effort to get it right. They make it as difficult as possible to get resources. I'm all for being judicious about that but without someone who can navigate that, there are people who are not getting what they should get and even trying to get access to it becomes so burdensome they give up. That really is the first barrier to getting resources. You can't even advocate for yourself to get the resources. You're talking to people who are really familiar with the system and we're baffled half the time. We can fill a book with the hoops we'd have to jump through."



Minor Themes

Stigma

Residents reported stigma as a barrier to seeking services, especially mental health services. For older adults, mental health care was not a part of their lives growing up and fear of judgement from others prevents those who would like to seek treatment from doing so. Some residents, many of whom are mothers, are hesitant to seek social service support out of fear of being viewed as a “welfare mom”. Most residents who expressed concern regarding the stigma of seeking services said they would prefer to try to work through the problem on their own first and only using services as a last resort.

Fear

Fear prevents residents from going to the doctor or other health services. They described their concerns about receiving a serious diagnosis, being sent for multiple tests, and being over medicated.

Prohibitive Costs

Although the majority of residents had some sort of health care coverage, many reported that there are many costs that are not covered that prevent them from getting the care they need. Ambulance rides were commonly cited as a service that is occasionally necessary but is not covered by insurance and is unaffordable. Costs were also mentioned as a barrier to seeking mental health care and as a barrier to gaining computer and internet access.

What do residents want?

Residents were asked for about additional services they felt should be offered in Medina County.

- Improved Transportation: More extensive routes, payment options for low-income residents, extended evening and weekend hours, improved transport for older adults and adults with disability
- In-county mental health counseling for veterans
- Personal development classes
- Improved behavioral health counseling for adults with developmental disabilities
- Comprehensive guide to all county services



Recommendations for agencies

Increase cross-agency collaboration to tackle these large scale problems. All issues raised by Medina County residents are problems that cannot be solved by one agency alone. Involving agencies from all sectors is the best way to create system-wide changes that are lasting and supported by the community.

Compare current routes and hours of public transport to the needs of those most likely to depend on it. Having reliable transportation is crucial to healthy, productive lives for Medina County residents. To ensure that all residents have the ability to get to work, school, doctors' offices, and service agencies, current transportation routes and hours should be compared to the transportation needs of those most likely to depend on the public transit system (i.e. seniors, adults with disabilities, low-income individuals and families). Where there are discrepancies between the two, adjustments should be made so that the transit system better meets the needs of the residents.

Implement an initiative to foster understanding in the community of the issues faced by low-income households. Understanding is the first step to building trust and respect between low-income households and the community as a whole. An initiative such as Bridges Out of Poverty can educate agency staff on the unique struggles that low-income individuals and families face. This will allow agencies to provide better service to clients and foster better relationships between low-income residents and the general public.

Educate employees at all levels about the service system as a whole. All agency employees, particularly those who work directly with residents, should be aware of what services are available in the Medina County service system and where they fit in that system. This is necessary for employees to be able to make appropriate referrals and guide their clients through the system.



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