



In the Literature

IS HOSPITAL SERVICE ASSOCIATED WITH RACIAL AND ETHNIC DISPARITIES IN EXPERIENCES WITH HOSPITAL CARE?

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In the study of racial and ethnic disparities in health care, many researchers have focused on the relationships between individual doctors and patients, documenting differences in patients' satisfaction and health outcomes in various outpatient settings. But how do patients—particularly black and Latino patients—fare in hospital settings?

In a study of patient survey results and hospital administrative data, Commonwealth Fund-supported researchers led by LeRoi S. Hicks, M.D., M.P.H., of Brigham and Women's Hospital and Harvard Medical School, found significant differences in the degree to which white and minority patients reported problems with the care they received in the hospital. Most striking were the much lower shares of black and Latino patients who said hospital staff treated their preferences with respect. These findings and others are discussed in "[Is Hospital Service Associated with Racial and Ethnic Disparities in Experiences with Hospital Care?](#)" (*American Journal of Medicine*, May 2005).

Survey Methods

The researchers analyzed survey and hospital administrative data on 2,664 adult patients from an urban teaching hospital for 1998–99, focusing on dimensions of care like respect for patient preferences, coordination of care, information and education, and physical comfort. Survey respondents indicated whether they had experienced problems with their hospital stay relating to these dimensions. Those with problem

scores in the highest quintile were classified as having "more problems."

Results were adjusted for patients' sex, age, self-reported health status, insurance status, income, route of hospital admission, and hospital service and were stratified by type of hospital service—medical, surgical, or obstetrical.

Black and Latino Patients Report More Problems with Care

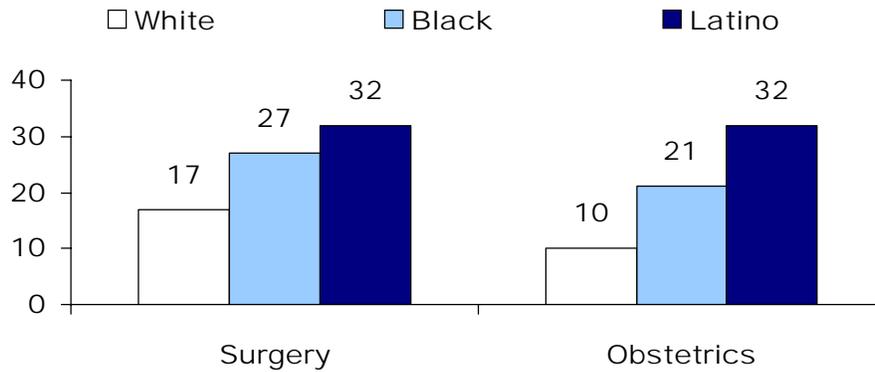
The researchers found that black and Latino patients (27% and 29%, respectively) reported more problems with the hospital respecting their preferences compared with white patients (17%).

Specifically, among patients discharged after surgical services, 27 percent of black patients and 32 percent of Latino patients cited problems with the hospital respecting their preferences, compared with 17 percent of whites. Among patients discharged after obstetrical services, 21 percent of blacks and 32 percent of Latinos reported such problems, compared with 10 percent of whites. Patient experiences did not differ significantly by race among patients discharged after receiving medical services.

While the researchers did initially observe differences in other dimensions of patient experience—information and education, physical comfort, and emotional support—they found that these variations could be explained by adjusting for demographic characteristics that have been shown to influence patient satisfaction.

Black and Latino Hospital Patients Report More Problems with Respect for Their Preferences

Percent of hospital patients reporting more problems* in dimensions of patient experiences



* More problems defined as highest quintile of problem scores in each dimension.

Source: Adapted from L. S. Hicks et al., "Is Hospital Service Associated with Racial and Ethnic Disparities in Experiences with Hospital Care?" *American Journal of Medicine*, May 2005 118(5):529-35.

Implications and Future Study

The study found significant racial and ethnic differences in patients' problems with inpatient care. However, the results varied by type of hospital service; differences were more profound among surgical and obstetrical patients. These findings are consistent with earlier studies that have documented racial and ethnic differences in satisfaction with provider communication and management of care.

Differences in patients' perceptions of providers' respect for their preferences may contribute to

disparities in the use of medical procedures. This is particularly important, the researchers say, as it relates to patients' willingness to consider potentially life-sustaining therapies.

Further research is needed to characterize the links between hospital care, patient preferences, and race and ethnicity. "Our findings suggest physicians and hospital staff should strive to understand and address the expectations of black and Latino patients, particularly those who are hospitalized for surgical or obstetrical care," the authors conclude.