

racial

attitudes

in pulaski county

*the fifth annual study  
by the  
Institute of Government*

*Focus on Health  
and Health Care*



University of Arkansas at Little Rock  
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# Introduction

This report summarizes the findings of the fifth annual survey of racial attitudes in Pulaski County by the University of Arkansas at Little Rock (UALR). This year the survey focuses on racial attitudes regarding health and health care. It gives us more insight than we have had, helping us understand health and health care in the context of race and ethnicity. Exploring this topic can stimulate discussion and action to eliminate racial and ethnic health disparities in the state of Arkansas.

Issues of race and race relations have affected all aspects of our society, including health and health care. There is a large body of evidence that has shown that racial and ethnic minorities in the U.S. have poorer health status, less access to the health care system, and poorer health outcomes than their white counterparts.

Each year the survey asks a series of questions which focus on interracial perceptions of topics such as race relations and equal treatment. This year's study revisits a number of these questions in order to determine whether there have been any changes in attitudes over time.

Each survey also includes a new set of questions on a special topic that is of relevance to the community as a whole. Special topics for each year of the survey are shown below:

<u>Survey</u>	<u>Topic</u>	<u>Academic Year</u>
Year 1	Religion	2003-2004
Year 2	Local Government	2004-2005
Year 3	Community Involvement	2005-2006
Year 4	Education	2006-2007
Year 5	Health and Health Care	2007-2008

The Year 5 report is organized with an executive summary, a commentary on the survey findings by an Arkansas specialist in minority health policy, a description of the study's methodology, the survey findings, and an appendix of demographic statistics and analysis. The survey findings are presented in two major sections: 1) Health and Health Care and 2) Relations, Rights, and Treatment.

The mission of UALR includes the application of knowledge and research skills to the ever-changing human condition. As a metropolitan university, UALR seeks to utilize its research capabilities to address issues of vital importance. Chancellor Joel E. Anderson initiated the annual survey of racial attitudes and experience in Pulaski County in 2003 and continues to stress that black/white race relations is one of the biggest factors impacting the progress and future of our state. In his inauguration speech in September 2003, the chancellor stated, "Race, particularly white-black race relations, has been a major problem, indeed *the* major problem, the biggest obstacle to progress, in our state since it was founded in 1836".

This study was funded entirely by the University of Arkansas at Little Rock to provide information, enhance thoughtful discussion, and improve race relations in our community. A number of community groups, especially religious organizations, have responded to the *Racial Attitudes in Pulaski County* annual surveys by inviting UALR to present survey results and to engage in dialogue about racial perceptions and attitudes in Pulaski County. Reports are available at no cost. Copies for viewing and circulation may be obtained at the following web address:

**<http://www.ualr.edu/iog/racialattitudes.htm>**

# Executive Summary

Year 5 of UALR's *Racial Attitudes in Pulaski County* study presents data collected from an annual telephone survey. The study examines attitudes about and experiences with health and health care. In addition, it revisits specific topics addressed in previous years.

The following are some of the major findings of the Year 5 study:

- ◆ More than one-half of all respondents believe that “both races have the same amount of health problems”.
- ◆ Whites are more likely than blacks to describe their own health as “excellent” or “very good”.
- ◆ Significantly more black respondents believe blacks have more health problems due to factors that relate to lifestyle as opposed to social or biological factors.
- ◆ Blacks are four times more likely than whites to visit an emergency room when sick.
- ◆ Blacks are more likely than whites to feel doctors show them “a great deal” of respect and dignity.
- ◆ Around eight (8) out of 10 respondents say they have “no preference” regarding the race of a doctor.
- ◆ Whites are nearly three times more likely than blacks to see a doctor who is of the same race.
- ◆ Blacks are more likely than whites to feel they have experienced unfair treatment or disrespect because of their ability to pay for medical care or the type of insurance they had.
- ◆ In the past four years, whites have become less likely to perceive that race relations are moving in a positive direction.
- ◆ Whites are more likely than blacks to believe that civil rights for blacks have “greatly improved” in Pulaski County.
- ◆ A majority of blacks perceive that blacks are treated less fairly than whites in four (4) out of five (5) common situations.
- ◆ A majority of blacks think about their race at least “once a day”. A near majority of whites think about their race only “once a year” or “never”.

# Commentary on Survey Findings

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*Of all the forms of inequality, injustice in health care is the most shocking and inhumane.*

-Dr. Martin Luther King, Jr.

Health disparities refer to differences in the presence of disease, health care access or health outcomes across racial groups. To understand the causes of racial health disparities we must understand the context in which they occur. This survey allows us to examine the context in which racial health disparities occur in Pulaski County. With this understanding, we can then more effectively develop programs and interventions that will improve the health of all people.

We now know that health is determined by more than health care. Research shows that social conditions (socioeconomic and environmental conditions) are as important to our health as our genes, our behaviors and even our medical care. These social conditions encourage or discourage behaviors that affect our individual health. When we are ill, we then attempt to interact with a health care system. Medical care is provided by professionals within health care systems to produce individual health and influence the population health outcomes that we see. Race and race relations are social conditions that impact all of the stages along this continuum and may contribute to the problems of racial health disparities we face in the county, the state, and the nation.

The UALR *Racial Attitudes in Pulaski County* survey paints a picture that examines many of these factors and suggests that, just as in other sectors of society, race seems to impact and be a major problem in health and health care. There are many important issues that are raised by these data, primarily the lack of recognition of the problem. In Pulaski County, according to the Arkansas Center for Health Statistics Query System, the age-adjusted mortality rate for blacks was 33 percent higher than the white population. Despite the national and state agenda to raise awareness about racial health disparities and take action to eliminate them, more than one-half of all residents believed that both races have the same amount of health problems.

The causes of racial health disparities are a complex interaction of factors without a single answer. However, of interest here is the finding that blacks were more likely than whites to believe that the main reason for these disparities was lifestyle factors, as opposed to larger social issues such as poverty or education. Blacks and whites also felt that individual health was largely dependent on how well individuals take care of themselves. This has impact on the ways we seek to intervene and address the issues of improving health. While social factors and social policies have been shown to be increasingly important, we are still more comfortable focusing on individual behavior change to improve health.

Pulaski County has large health care systems and a higher concentration of medical professionals than most areas of the state. Approximately 37 percent of all physicians in the state live in Pulaski County. As such, most in the county have some access to health care and report having choice in where they seek care. However, blacks are more likely to visit emergency rooms for care and almost twice as likely to report having “very little or no choice”. This finding may reflect a lack of access to primary care for blacks, as they are also less likely to have a regular provider. Interestingly, more whites than blacks reported they had experienced a time when they were in need of medical care but did not pursue or receive it. White people were also more likely to report being “too busy” to seek care or just not getting around to it. This suggests that there may not have been a serious need. There are many potential barriers to accessing health care that were assessed. However, in this survey, the cost of health care, both direct and indirect, remains a significant problem for all.

After gaining access to the health care system, issues of race and race relations are major factors in health care for a significant portion of the population in Pulaski County. Half the population stated that they trusted doctors to make health care decisions on their behalf, but blacks in Little Rock were the least likely to trust doctors. However, they still thought that going to the doctor was better than taking care of your own health.

Most respondents report no preference of race for their health care provider. However, whites were 3 times more likely than blacks to see a physician of the same race. This reflects a lack of diversity in the health care workforce. Nationally, 3.3 percent of physicians are black, and in Arkansas less than one (1) percent are black. Despite reporting no preference, in this survey, 30 percent of the black population sees a same-race physician. However, when asked specifically about the composition of the medical staff, blacks were more likely to report not seeing anyone of their race where they go for health care. These facts underscore the need for diversity in our health care workforce and the importance of a workforce and health care system that have behaviors, attitudes, and policies that come together and enable effective work in cross-cultural situations.

Most were “very satisfied” or “somewhat satisfied” with the quality of care they personally received. They were shown a great deal of respect by their doctor and they were involved in decisions about their care as much as they wanted. Most blacks and whites reported being treated with “a great deal” to “a fair amount” of dignity and respect. However, more blacks than whites felt looked down upon by doctors. Blacks were also more likely than whites to perceive differential treatment in health care in the community, getting treatment for family and friends, or in their personal experience.

Forty (40) percent of blacks and 10 percent of whites feel that that blacks in the community are treated less fairly than whites when getting health care. On the individual level, blacks were more likely than whites to feel that they had experienced unfair treatment based on ability to pay and because of their race. This shows the importance of both race and socioeconomic status in racial health disparities. Almost one-quarter of blacks in Pulaski County reported being a victim of discrimination when getting health care for themselves or a family member. Approximately 15 percent report being judged unfairly or treated with disrespect. The main

reasons they cited were: 1) acted negatively or disrespectfully; 2) delayed services; or 3) received substandard services.

This descriptive survey illustrates the interaction of race, health, and health care in Pulaski County. It has produced important baseline data that are not only rich for discussion, but will allow us to track our progress in the health and health care of all Arkansans. The findings of this report also point to action. The survey suggests that in Pulaski County to improve health we must continue to increase awareness and dialogue about racial health disparities and its causes. It must be defined as a problem not only for blacks seeking care, but as a quality issue for all people in the state.

It is critical that we address financial access issues. Along with addressing financial access issues we must also address perceptions of unfair treatment in the health care system as in other sectors of society. We must measure quantitatively the issues raised, such as cultural competency and diversity of the health care system and its components and the quality of health care by race and ethnicity. By addressing these issues, we can ensure that inequality and injustice in health and health care are things of the past.

# Study Methodology

This study is based on a landline telephone survey conducted by the UALR Institute of Government Survey Research Center (SRC) between October 13 and December 18, 2007.

A total of 1,671 interviews were conducted with a stratified random sample of all residents age eighteen and older living in Pulaski County, Arkansas. Since the study primarily focuses on black/white relations, the data analysis is divided into four geo-racial groups with a total of 1,619 white and black respondents:

<b>LR blacks</b>	Black respondents living <b>within</b> the city limits of Little Rock
<b>OLR blacks</b>	Black respondents living <b>outside</b> the city limits of Little Rock
<b>LR whites</b>	White respondents living <b>within</b> the city limits of Little Rock
<b>OLR whites</b>	White respondents living <b>outside</b> the city limits of Little Rock

Each geo-racial group contains between 404 and 406 respondents, providing a potential for sampling error of  $\pm 5$  percent at the conventional 95 percent confidence level. In theory, one can say with 95 percent certainty that the results of surveying a sample of a geo-racial group differ no more than 5 percent in either direction from results that would have been obtained by interviewing all Pulaski County residents within a geo-racial group.

The response rate for the Year 5 survey is 42 percent (RR3) with a cooperation rate of 76 percent, based on standards established by the Council of American Survey Research Organizations.

Research shows that responses to racial issue questions can be influenced by whether interviewers and respondents perceive themselves to be of the same or a different race as one another. For the Year 5 study, the SRC used the same methodology as in previous years whereby the races of the respondents and the telephone interviewers were matched. This allows for more consistent comparisons among groups and between years.

Many of the questions used in the Year 5 survey are based upon questions developed and used by The Commonwealth Fund and Princeton Survey Research Associates in their 2001 Survey on Disparities in Quality of Health Care. A selected group of questions used in the Year 5 survey are based upon questions used by the Gallup Organization in a series of studies on black/white race relations in the United States (c1997-2008 The Gallup Organization. All rights reserved. Reprinted with permission from [www.gallup.com](http://www.gallup.com)). We gratefully acknowledge The Commonwealth Fund and The Gallup Organization for allowing UALR to utilize questions from their surveys.



The study primarily analyzes black/white relations in Pulaski County. Although the county has a growing Hispanic population, the percentage of Hispanics is still relatively small at less than five (5) percent. Because of the small number of Hispanics in the county, the survey does not yield sufficient interviews with Hispanics to make valid comparisons of their responses to the other racial groups.

No cell phone numbers are eligible for this survey. This protocol has the effect of creating a specific demographic group organized around the kind of telephone used by members in this group. This group's members may or may not share other identifying characteristics. Thus, in addition to sampling error, the wording of the questions, and practical issues associated with conducting a survey, the cell-phone versus home-phone issue can introduce bias into the findings of any public opinion survey.

# Health and Health Care

Health is the subject of a series of new questions in the Year 5 survey. Pulaski County residents were asked for their opinions regarding their own health as well as for their views regarding health care in general. Respondents were asked about personal health care practices, including how often they sought medical care, and where they went to do so.

Other questions were designed to gather information from respondents about their experiences when receiving health care and the kind of relationship they had with medical professionals. Finally, a series of questions was included to assess if respondents felt they had ever been treated unfairly while receiving health care, particularly on the basis of race.

## Opinions about Health and Health Care

The questions in this section were designed to explore respondents' attitudes about health and health care in general. Respondents were asked if they felt personal conduct or luck influenced health, and to what extent they trusted doctors to make the right decisions about their health. Several questions focused on respondents' perceptions about whether health disparities existed between blacks and whites, and if they did, what might be the root cause of these disparities.



*My health largely depends on how well I take care of myself.*

- ◆ **The vast majority of both blacks and whites believe that health depends on how well individuals take care of themselves.**

Nearly 100 percent of all respondents "somewhat agree" or "strongly agree" that health is largely a matter of personal responsibility. The most popular answer by far was "strongly agree", with 89 to 91 percent of blacks, and 85 to 90 percent of whites strongly agreeing with this statement.



*I think staying healthy is a matter of luck more than anything else.*

- ◆ **Whites are more likely than blacks to "disagree" that good health is mostly a matter of luck.**

Approximately six (6) out of 10 respondents (56 to 61 percent) "strongly disagree" with this statement, making this answer option the most popular choice overall.

However, there is a significant difference between the numbers of blacks and whites who say they "strongly agree" that good health is mainly "a matter of luck". Only two (2) to four (4) percent of white respondents felt this to be the case, compared to 12 to 14 percent of black respondents. National survey data reflect this trend to some extent, indicating that blacks are more likely than whites to say that they "strongly agree" that good health is mainly a matter of luck.

Interestingly, the numbers of Pulaski County respondents who “strongly agree” with this statement are considerably smaller than the national average. Approximately 13 percent of Pulaski County blacks “strongly agree” with the statement, compared to 24 percent of blacks nationally. The average percentage of Pulaski County whites who “strongly agree” is three (3) percent, compared to 12 percent of whites nationally.



*I leave it to doctors to make the right decisions about my health.*

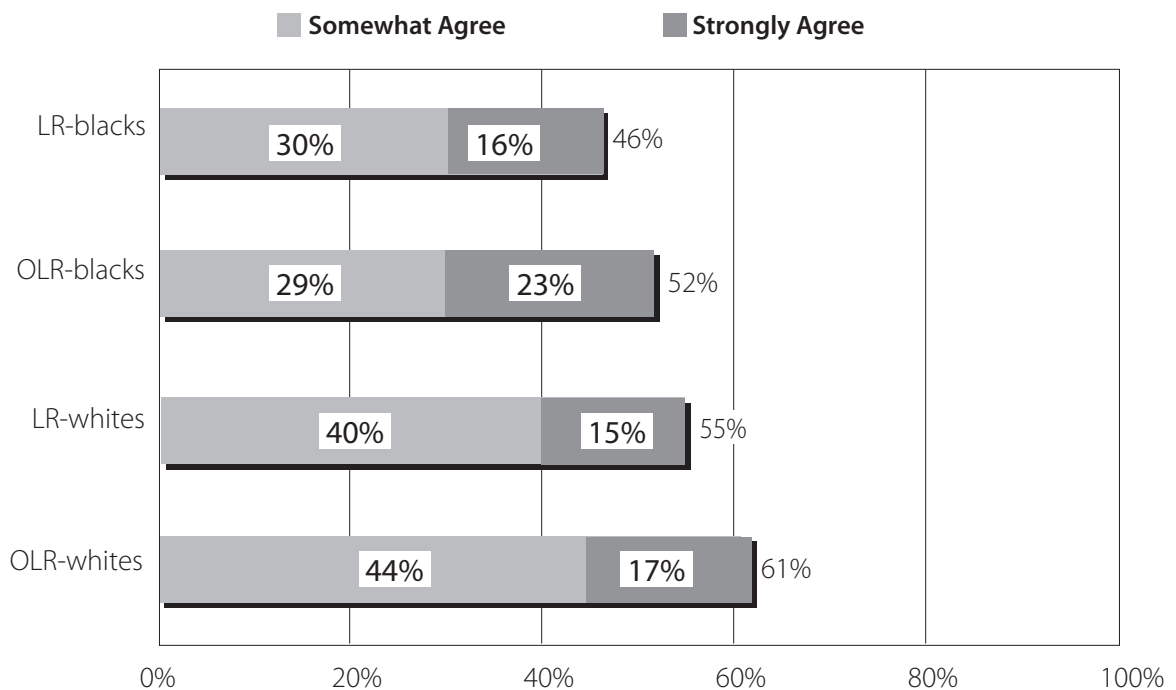
◆ **Whites are more likely than blacks to leave decisions about their health to their doctors.**

Opinions were divided on this question. At least one-half of all respondents report that they “strongly agree” or “somewhat agree” that they entrust doctors to make the right health care decisions on their behalf. Conversely, around one-third to one-half of all respondents said they either “strongly disagree” or “somewhat disagree” with this idea.

However, there are significant differences between whites and blacks found in the responses to this question. OLR-whites are the most likely to agree with the statement to some extent, with 61 percent reporting they “strongly agree” or “somewhat agree”. Of the other geo-racial groups, 55 percent of LR-whites, 52 percent of OLR-blacks, and 46 percent of LR-blacks report that they “strongly agree” or “somewhat agree”.

**Exhibit 1**

**Percentages who agree that they “leave it to doctors to make the right decisions”**





*It is generally better to take care of your own health than to go to the doctor.*

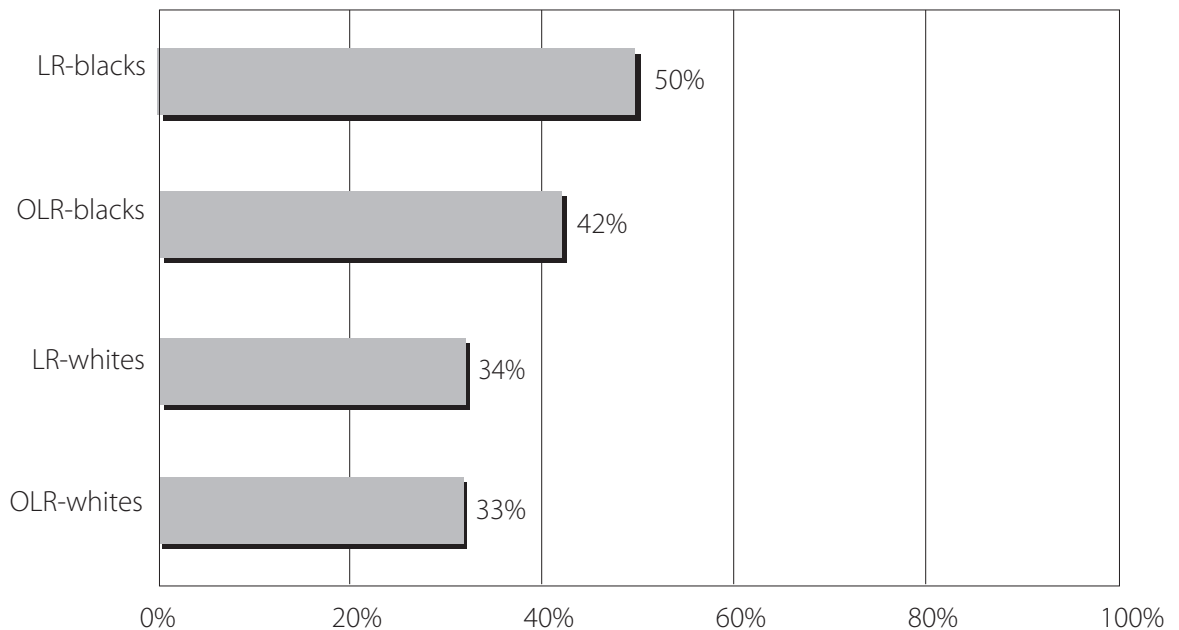
- ◆ **Blacks are more likely than whites to disagree that it is generally better to take care of your own health than to go to the doctor.**

The majority of respondents say they either “somewhat disagree” or “strongly disagree” that managing your own health care was preferable to going to the doctor. Overall, between 73 to 76 percent of blacks and between 68 to 73 percent of whites report that they prefer to go to the doctor rather than taking care of their own health.

However, there are significant differences between blacks and whites in the numbers of respondents who “strongly disagree” with this statement. Around one-half of blacks report that they “strongly disagree”, compared to around only one-third of whites. This indicates that blacks are more likely to perceive that seeing a doctor is better than trying to manage your own health care.

## Exhibit 2

**Percentages who “strongly disagree” that it is generally better to take care of your own health than go to the doctor**



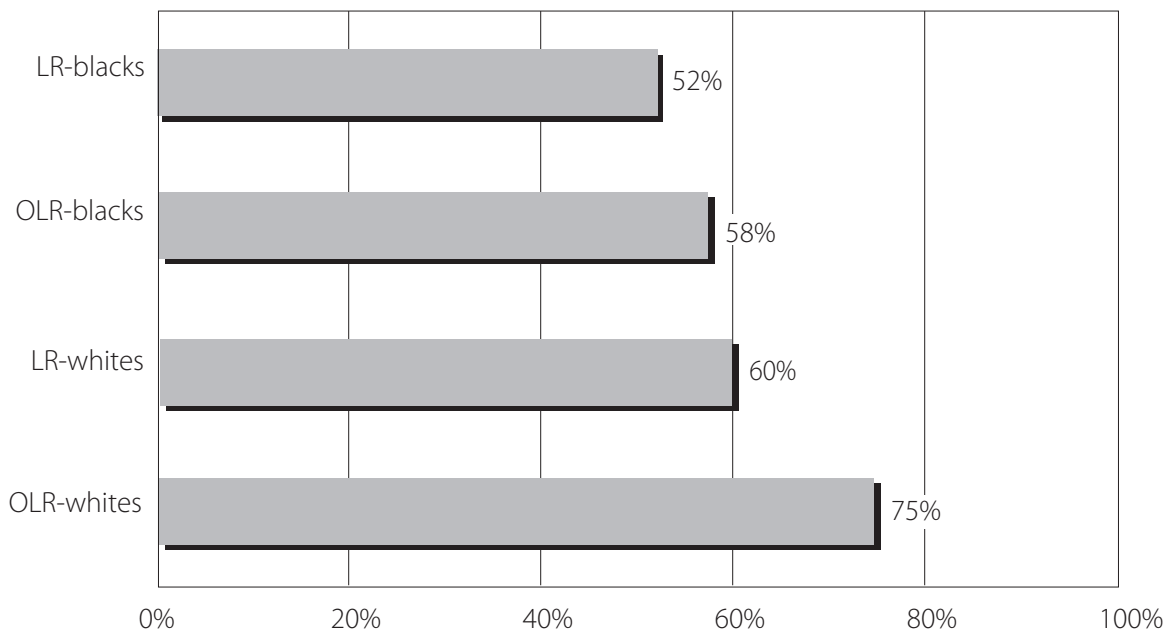
*Which comes closer to your beliefs, overall? Would you say that blacks have more health problems than whites, whites have more health problems than blacks, or both races have the same amount of health problems?*

- ◆ **More than one-half of all respondents believe that “both races have the same amount of health problems”.**

The difference of opinion between the two groups of white respondents is significant in this question. OLR-whites were more likely than any other group to express the opinion that “both races have the same amount of health problems”. Seventy-five (75) percent of OLR-whites hold this view, compared with 60 percent of LR-whites. Fifty-two (52) percent of LR-blacks and 58 percent of OLR-blacks share this opinion. Around one-third of respondents believe that blacks have more health problems than whites. Only one (1) to five (5) percent of respondents think whites have more health problems.

### Exhibit 3

#### Percentages who believe “both races have the same amount of health problems”



*Research shows that blacks are more likely to have health problems such as heart disease, diabetes, and strokes as compared to whites. What do you think is the main reason that blacks are more likely to have more health problems?*

- ◆ **Significantly more black respondents believe blacks have more health problems due to factors that relate to lifestyle.**

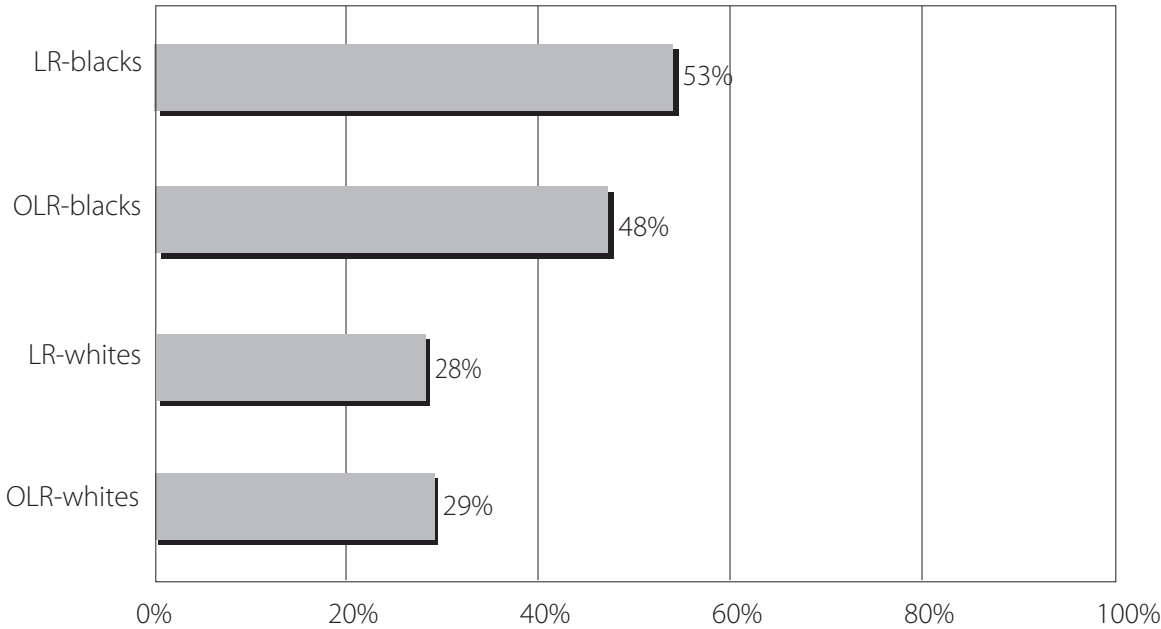
In the above question each respondent was asked to identify the main reason why blacks have more health problems. The reasons they mentioned were then categorized as lifestyle, social, or biological factors.

Forty-eight (48) to 53 percent of black respondents believe blacks have more health problems due to factors that relate to lifestyle, such as the way they live, their diet, or behavior. A much lower 28 to 29 percent of whites cite lifestyle reasons for racial health disparities.

White respondents (17 to 19 percent) are more likely than black respondents (5 percent) to think biological factors like genetics, family history, or body type are the main reason for blacks having higher incidences of health problems.

Social factors such as lack of health care, poverty, or education were mentioned by one-fourth to one-third of respondents as the main reason that blacks have more health problems. The responses of LR-whites and OLR-whites are significantly different in this area, with 37 percent of LR-whites and 24 percent of OLR-whites citing social factors.

**Exhibit 4**  
**Percentages who believe lifestyle factors are the reason for more health problems in blacks**



## Health Status and Personal Health Practices

As well as being asked a set of general questions about their attitudes towards health and health care, respondents were given a more specific set of questions about their own personal health status and their actual health care practices.

Topics included how healthy respondents felt themselves to be, how regularly they sought medical care, and what kind of health care provider they usually sought.



*In general, how would you describe your own health? Would you say it is excellent, very good, good, only fair, or poor?*

- ◆ **Whites are significantly more likely than blacks to report that their health is “excellent” or “very good”.**

Between 55 to 65 percent of whites report that their health is “excellent” or “very good”, compared to only 44 to 45 percent of blacks.

Similar numbers of blacks and whites say their health is “only fair” or “poor”, with 17 to 21 percent of blacks and 13 to 17 percent of whites giving these responses. This local result is consistent with national survey data, where 17 percent of blacks and 14 percent of whites have reported their health as being “only fair” or “poor”.



*Do you currently have any health problems such as diabetes, cancer, heart disease, or high blood pressure?*

- ◆ **Approximately one-third of all respondents report that they suffer from chronic health problems.**

There were no significant differences between the percentages of blacks and whites who respond that they have health problems. Approximately two-thirds of all respondents report that they do not suffer from any chronic health problems.

These results do not account for those respondents who may have one of these diseases or conditions without being aware of it. Receiving a diagnosis can be affected by other factors such as frequency of visits to a health care provider, which in turn can be affected by other behavioral and financial factors.



*In general, how often do you visit a doctor or medical clinic for any reason, including check-ups or visits to the emergency room or hospital?*

- ◆ **More than nine (9) out of 10 respondents visit a health care facility more than once a year.**

Ninety-two (92) to 94 percent of all respondents report that they visit a doctor or medical clinic at least once a year. Thirty-eight (38) percent of whites and 46 to 48 percent of blacks report visiting a doctor or medical clinic at least once every four months.

A very small number of respondents said they sought medical care less frequently than “every two to ten years” or “never”, and these numbers were similar for whites and blacks. At the upper end of the scale, a greater number of blacks than whites report that they visit a health care provider at least once a month. Between 18 to 23 percent of blacks attend a care facility of some kind on this basis, as opposed to between 10 to 12 percent of whites.



*Where do you usually go when you are sick or need health care? To a doctor’s office, a private clinic, a public health clinic, a hospital emergency room, or some other place?*

- ◆ **Whites are more likely than blacks to visit a private health care facility when they need medical care.**
- ◆ **Blacks are four times more likely than whites to visit an emergency room when sick.**

The majority of all geo-racial groups report that they would usually go to a private health care facility when they were sick or in need of health care.

However, fewer blacks report this practice than whites. Overall, 88 percent of whites report that they would attend a private facility, compared to 65 to 74 percent of blacks. This reveals a significant difference between the races.

There is also a significant difference between the results for LR-blacks and OLR-blacks. Sixty-five (65) percent of OLR-blacks report attending a private facility, making them the geo-racial group least likely to attend a private facility when they require medical care.

Although the majority of blacks and whites would go to a doctor’s office if they needed medical care, a considerable portion of respondents said they would visit the emergency room instead of going to a doctor’s office. This was true for a significantly greater number of blacks than whites. In total, between only four (4) to five (5) percent of whites say they would go to an emergency room compared to 17 to 24 percent of blacks.



*How much choice do you have in where you go for medical care? Would you say that you have a great deal, some, very little, or no choice?*

- ◆ **A majority of respondents in all geo-racial groups believe they have a “great deal of choice” in where they go for medical care.**

Between 55 and 63 percent of respondents believe they have a “great deal of choice” in where they go for medical care. However, of those who perceive having a lesser degree of choice, significantly more blacks felt they have less choice in where they go for medical care.



*Has there ever been a time when you had a medical problem but put off, postponed, or did not seek medical care when you needed to?*



*What was the most important reason why you put off, postponed, or did not get the medical care you needed?*



◆ **Around one-half of all respondents say there has been a time when they have been in need of medical attention but did not pursue or receive medical care or advice.**

Whites were more likely than blacks to report that they had experienced medical problems but did not seek medical care. This was true of 53 to 55 percent of whites compared to 43 to 48 percent of blacks.

Those respondents who report that there had been a time when they had postponed seeking medical care were asked to volunteer why this situation had arisen. Of all the responses received, the vast majority of responses fell into three categories: 1) cost and associated issues; 2) lack of time and procrastination; and 3) the belief that the need for medical attention was not that great.

The most common reasons for postponing medical care were related to the cost of care, finances, or work restrictions relating to finances. Similar numbers of blacks and whites offered cost-related reasons for not pursuing or receiving medical care.

Being “too busy” or just not “getting around to it” are also popular answers. Again, similar numbers of whites and blacks offer these responses, but whites are slightly more likely to report this reason. Between 24 to 27 percent of blacks volunteer this response, compared with 33 to 35 percent of whites.

A smaller but noticeable number of respondents say that they had not thought that their medical issue was serious enough to warrant professional attention, or that it did not require any professional attention at all. Once again, similar numbers of blacks and whites volunteered this answer (12 to 17 percent of blacks and 15 to 17 percent of whites).

**Exhibit 5**

**Top three reasons respondents did not get medical attention**

Cost / Finances / Work
Too busy / Didn't get around to it
No need / Not serious enough

## Relationship with Health Care Professionals

Many different factors can impact the health care experience overall. The following set of questions were designed to gather information on a variety of these factors, ranging from respondents' opinions about the amount of respect and dignity doctors show them to their opinions about how satisfied they are with the quality of health care they receive. Likewise, questions about experiences with doctors and medical staff are included.



*Overall, how satisfied are you with the quality of health care you have received during the last 2 years?*

- ◆ **Most respondents have positive opinions of the health care they have received over the past two years.**

More than eight (8) out of 10 respondents report being "very satisfied" or "somewhat satisfied" with the quality of health care they had received during the course of the last two years. Very few respondents report that they are "somewhat dissatisfied" or "very dissatisfied" with their recent health care.

Between 50 to 52 percent of blacks along with 54 to 60 percent of whites chose the top satisfaction rating, making "very satisfied" the most popular answer overall.



*Do you have a regular doctor or other health professional, such as a nurse or midwife, you usually go to when you are sick or need health care?*

- ◆ **The majority of all respondents report that they have a regular health care provider.**

Having a regular health care provider might indicate that these respondents have an established relationship with a their provider, which in turn might have a beneficial effect on their experiences with health care.

The vast majority of respondents report that they have a regular health care provider in some capacity. Whites were significantly more likely than blacks to answer "yes" to this question, with 87 to 91 percent of whites saying they had a health professional they saw regularly, as opposed to 78 to 82 percent of blacks.

When comparing national data, results show that on average, more Pulaski County blacks (80 percent) have a regular health care provider than blacks do nationally (70 percent). The same is true of Pulaski County whites, 89 percent of whom have a regular health care provider, compared to 80 percent of whites nationally.

*Please tell me whether you strongly agree, somewhat agree, somewhat disagree, or strongly disagree with the following statement[s]:*

*I feel that doctors understand my background and values.*

Roughly 40 percent of respondents in each of the four geo-racial groups “strongly agree” that doctors understand their background and values. Only four (4) to nine (9) percent of blacks and four (4) to seven (7) percent of whites report that they “strongly disagree”.



*I feel as if doctors look down on me and the way I live my life.*

◆ **The majority of both races do not believe that doctors look down on them.**

When respondents were asked whether they agree or disagree with the idea that doctors look down on them and the way they live their lives, the most common response from both races is that they “strongly disagree” (57 to 67 percent). Looking at the “somewhat disagree” and “strongly disagree” responses, about nine (9) out of 10 white respondents do not believe they are looked down upon by doctors, while slightly more than eight (8) out of 10 black respondents share this belief. However, between 12 and 16 percent of all black respondents report feeling looked down upon by doctors, while roughly nine (9) percent of all white respondents do.



*In general, how much respect and dignity do doctors show to you...would you say a great deal, a fair amount, not too much, or none at all?*

◆ **Blacks are more likely than whites to feel doctors show them “a great deal” of respect and dignity.**

A majority of respondents report that doctors show them “a great deal” of respect and dignity. Blacks are more likely than whites to feel doctors treat them with respect and dignity, with 60 to 65 percent of blacks and 54 to 57 percent of whites stating this opinion. Roughly three (3) out of 10 blacks say the level of respect and dignity they receive from doctors is “fair” to “none”, while approximately four (4) out of 10 whites feel the same.



*In general, do doctors involve you in decisions about your care about as much as you wanted, almost as much as you wanted, less than you wanted, or a lot less than you wanted?*

◆ **More than eight (8) out of 10 of blacks and whites report that doctors do involve them in decisions about their health care “as much as wanted” or “almost as much as wanted”.**

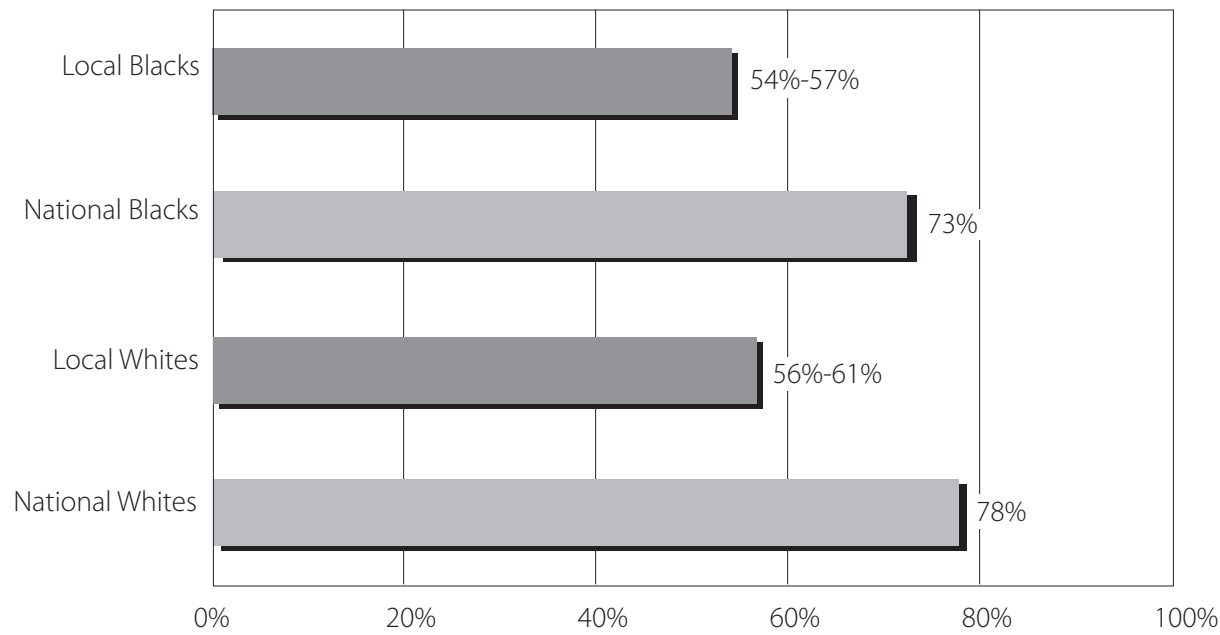
The highest rating on patient involvement, “as much as you wanted”, was given by 54 to 61 percent of blacks and whites. However, these figures are well below the national average, where 73 percent of blacks and 78 percent of whites report they are involved “as much as wanted”.

A substantial number (26 to 32 percent) of blacks and whites report that doctors involve them “almost as much” as they would like.

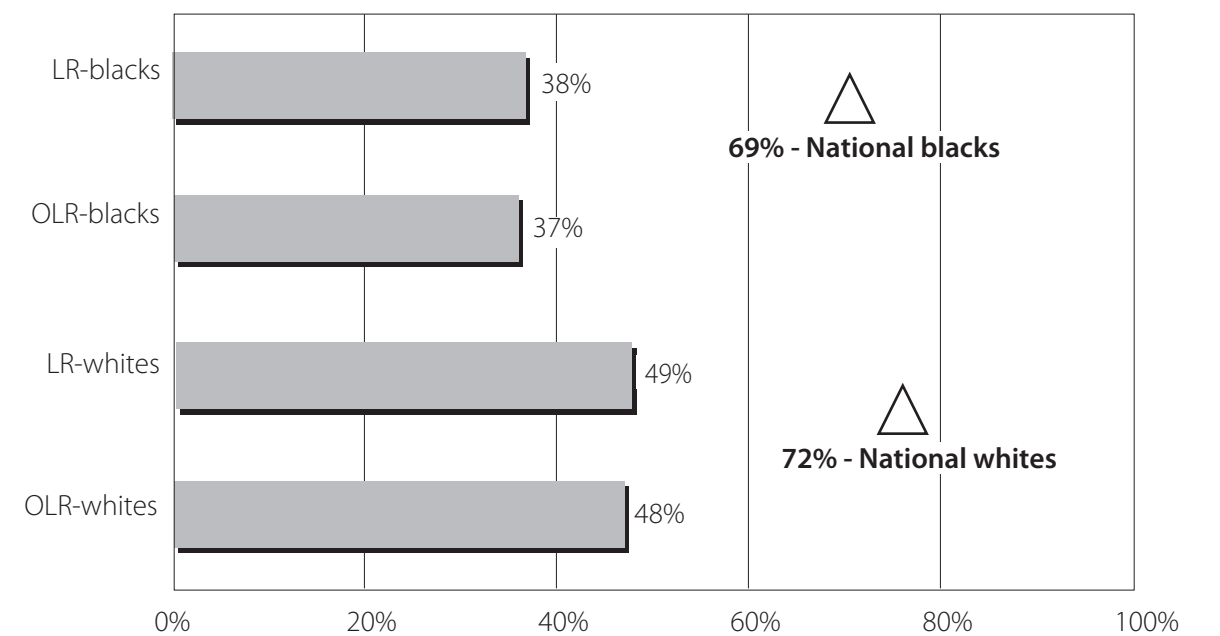
Combining the “as much as you wanted” and “almost as much as you wanted” responses, 84 to 87 percent of all respondents report substantial doctor involvement in their health care decisions.

Only 10 to 12 percent say doctors are involved “less than they wanted” or “a lot less than they wanted”.

**Exhibit 6**  
**Percentages involved in health care decisions “as much as they wanted”**



**Exhibit 7**  
**Percentages of respondents who have a “great deal of trust” in doctors**





*In general, how much confidence and trust do you have in doctors...would you say a great deal, a fair amount, not too much, or none at all?*

- ◆ **Almost one-half of the respondents from all four geo-racial groups say they have a fair amount of confidence and trust in doctors.**

This question is pertinent to the topic of health care because the amount of trust a person has in medical professionals can affect whether or not he or she will seek medical care if and when it is needed. Compared to the national average, Pulaski County respondents are less confident in their own doctors. Locally, whites are more likely than blacks to express confidence and trust in doctors. Around five (5) out of 10 whites and four (4) out of 10 blacks report they have “a great deal” of trust in doctors. Most respondents (48 to 56 percent) characterize their level of trust as “a fair amount”.



*Has there ever been a time you did not follow a doctor’s advice because you did not trust the doctor?*

- ◆ **Most respondents in Pulaski County trust their doctors to give good advice.**

The majority of all four geo-racial groups, around eight (8) out of 10, claim there has not been a time when they did not follow a doctor’s advice because they did not trust the doctor. Sixteen (16) to 22 percent say there has been a time when they chose not to follow a doctor’s advice due to a lack of trust.



*If you could choose, would you prefer to be treated by a doctor of your own race or ethnic group, another race or ethnic group, or do you have no preference?*



*Which best describes the race of your regular doctor or the doctor you last saw for health care?*

- ◆ **Around eight (8) out of 10 respondents say they have no preference regarding the race of a doctor.**
- ◆ **Whites are nearly three times more likely than blacks to see a doctor who is of the same race.**

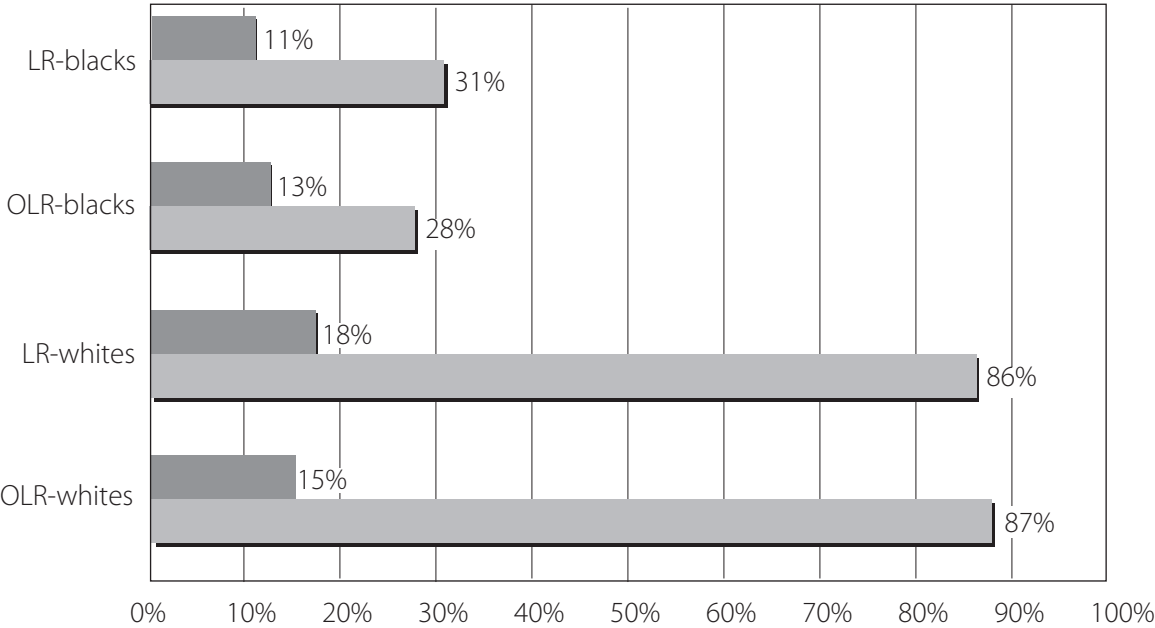
First, respondents were asked, if given the choice, whether they would prefer to be treated by a doctor of the same race, a different race, or if they had no preference. They were then asked for the actual race of their doctor.

More than 80 percent of respondents say that they have “no preference” regarding a doctor’s race. The number of respondents who say they would prefer to be treated by a doctor of their own race or ethnic group is much lower, with 15 to 18 percent of whites and 11 to 13 percent of blacks giving this answer.

The number of respondents who see or have seen a doctor of the same race varies significantly between blacks and whites. Nearly nine (9) out of 10 white respondents (86 to 87 percent) are seen by white doctors, while around three (3) out of 10 black respondents (28 to 31 percent) are seen by black doctors.

These figures are fairly close to the national average, which shows that 82 percent of whites see white doctors and 23 percent of blacks see black doctors.

**Exhibit 8**  
**Percentages who say they have doctor of same race / prefer doctor of same race**  
Have Doctor of Same Race Prefer Doctor of Same Race



Which best describes the racial composition of the staff where you regularly go or last went for health care?

◆ Whites are approximately twice as likely to see a majority of white staff members at their health providers’ than blacks are to see a majority of black staff members.

Over one-half of the white respondents report that the staff at their regular or recent health care provider is “all the same race” or “mostly the same race” as they. Only around one-quarter of blacks say the same.

Blacks are also more likely than whites to say, “none are the same race”. Between 10 to 16 percent of blacks report this to be the case, compared to less than five (5) percent of whites.

## Treatment in the Health Care Arena

With health as the central focus for this year’s report, respondents were asked not only about their own personal beliefs, practices, and experiences related to health care, but whether they knew a friend or family member who had experienced unfair treatment in getting health care. Also, the Year 5 study asks respondents whether they personally felt they were treated unfairly or discriminated against in certain situations, because of race or their ability to pay for medical care.



*Thinking about all the experiences you have had with health care visits, have you ever felt that the doctors or medical staff you saw judged you unfairly or treated you with disrespect because of your ability to pay for the care or the type of insurance you had?*

- ◆ **Blacks are more likely than whites to feel they have experienced unfair treatment or disrespect because of their ability to pay for medical care or the type of insurance they had.**

Around two (2) out of 10 blacks report they have experienced disrespect or unfair treatment from doctors because of their ability to pay for the care or the type of insurance they had. One (1) out of 10 whites say they have experienced similar unfair treatment. Likewise, 86 to 89 percent of whites say they have not experienced unfair treatment or disrespect for this reason, compared to 75 to 80 percent of blacks.



*Have you ever been the victim of discrimination or reverse discrimination while getting health care for yourself or a family member?*

- ◆ **Most respondents say they have not been the victim of discrimination while getting health care.**

Roughly seven (7) out of 10 black respondents say they have not been the victim of discrimination while getting health care for themselves or a family member, and approximately nine (9) out of 10 white respondents concur. Less than 10 percent of whites in both geo-racial groups say they have experienced discrimination in this area, while the percentages of LR-blacks and OLR-blacks is higher, at 21 and 23 percent, respectively.



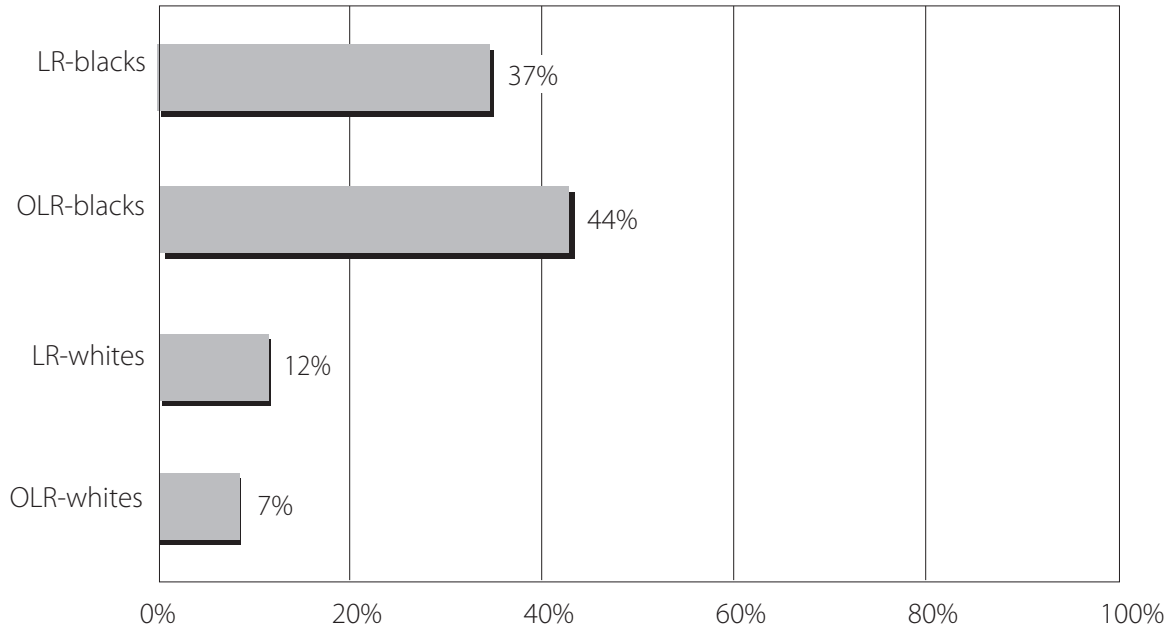
*Are blacks in your community treated less fairly than whites in getting health care from doctors or hospitals?*

- ◆ **Blacks are four times more likely than whites to believe that blacks are treated less fairly in getting health care from doctors or hospitals.**

Thirty-seven (37) to 44 percent of blacks believe blacks are treated less fairly in getting health care from doctors. Only seven (7) to 12 percent of whites believe blacks are treated less fairly. Three-quarters (75 percent) of OLR-whites and two-thirds (66 percent) of LR-whites believe blacks are treated the same or better than whites in getting health care from doctors or hospitals. This is a significant difference that is not found between OLR-blacks and LR-blacks.

## Exhibit 9

### Percentages who believe that blacks are “treated less fairly” in getting health care



*Over the last two years, has a family member or friend been treated unfairly when seeking medical care specifically because of race?*

- ◆ **More than one (1) out of 10 black respondents know a family member or friend who was treated unfairly because of race when seeking medical care.**

Twelve (12) to 16 percent of blacks say they know a family member or friend who was treated unfairly because of race over the last two years. Only a small percentage of white respondents (less than five (5) percent) give this response. Eight (8) out of 10 blacks and more than nine (9) out of 10 whites are not aware of any family member or friend who has experienced unfair treatment, specifically because of race. The differences between blacks and whites, while not large, are statistically significant.

*Can you think of any occasion in the last 30 days when you were treated unfairly while getting health care for yourself or a family member?*

Only black respondents were asked to recall an occasion in the last 30 days when they were treated unfairly while getting health care. Eighty-six (86) to 90 percent of blacks say they have not experienced an incident of this nature in the last 30 days, whereas just 9 to 13 percent have.





*Thinking about all of the experiences you have had with health care visits, have you ever felt that the doctors or medical staff you saw judged you unfairly or treated you with disrespect because of your race?*

- ◆ **More than eight (8) out of 10 blacks say they have not been treated unfairly by doctors or other health care workers because of their race.**

This question was only asked of black respondents. There are very few differences between LR-blacks and OLR-blacks. Although the majority of black respondents say they had not suffered unfair treatment at the hands of medical staff, between 14 to 16 percent say they had been discriminated against because of their race.



*What happened to make you feel you were judged unfairly or treated with disrespect?*

Respondents volunteered answers to this question, and then their answers were categorized into themes. Around two-thirds of all responses fell into three themes: 1) Received Substandard Services; 2) Acted Negatively or Disrespectfully; 3) Delayed Service.

#### **Exhibit 10**

**Top three ways in which black respondents felt they had been mistreated by medical staff because of their race**

Received Substandard Services
Acted Negatively or Disrespectfully
Delayed Service

# Relations, Rights, and Treatment

Many of the questions in this section of the report have been asked in previous years of UALR's annual study of racial attitudes in Pulaski County. The questions are repeated in order to compare the results over time. Because attitudes and perceptions about topics such as race relations tend to change slowly, the study asks questions exploring these subjects every two, three, or four years.

As a reminder, this section references this year's results to those of previous years when information is available from more than one year. Previous year surveys are referenced as Year 1 (2003-2004), Year 2 (2004-2005), Year 3 (2005-2006), Year 4 (2006-2007), and Year 5 (2007-2008).

## Race Relations and Civil Rights



*We'd like to know how you would rate relations between blacks and whites in Pulaski County these days. Would you say relations between blacks and whites are very good, somewhat good, somewhat bad, or very bad?*

### ◆ Most respondents characterize relations between blacks and whites as "somewhat good".

Seven (7) out of 10 respondents rate relations between blacks and whites in Pulaski County as "somewhat good". There are no significant differences between the responses of any of the four geo-racial groups.

When the question was asked four years ago in Year 1 of the study, the results were nearly identical to the Year 5 results.



*Over the past year, do you think that relations between blacks and whites in Pulaski County have improved, remained about the same, or have gotten worse?*

### ◆ Blacks are more likely than whites to believe that race relations have "improved" in the past year.

### ◆ In the past four years, whites have become less likely to perceive that race relations are moving in a positive direction.

The majority of Pulaski County residents (63 to 69 percent) believe that race relations have "remained about the same" over the past year. Blacks are more likely than whites to believe that race relations have "improved". Twenty-three (23) percent of blacks think that race relations have "improved" compared to 13 to 14 percent of whites.

Whites are equally likely to think that relations have "gotten worse" in the past year (11 to 14 percent) as they are to think relations have "improved" (13 to 14 percent). Blacks are more likely to see improvement, rather than the worsening of relations between the races.

The percentages of all four groups who saw improvement in race relations increased between Year 1 and Year 3 of the study but decreased between Year 3 and Year 5. Overall, between Year 1 and Year 5 there was a two (2) to seven (7) percent decrease in the percentage of blacks, and a larger decrease (13 to 15 percent) in the percentage of whites who saw improvement over the preceding year.

**Exhibit 11**  
**Percentages perceiving that black/white relations have “improved” in the past year**

	LR-blacks	OLR-blacks	LR-whites	OLR-whites
Year 5	23%	23%	13%	14%
Year 3	35%	39%	31%	34%
Year 1	25%	30%	28%	27%
Year 5/Year 1 Difference	-2%	-7%	-15%	-13%



*Thinking back over your lifetime, how have civil rights for blacks changed in Pulaski County? Would you say the situation has greatly improved, somewhat improved, stayed pretty much the same, somewhat worsened, or greatly worsened?*

- ◆ **Whites are more likely than blacks to believe that civil rights for blacks have “greatly improved” in Pulaski County.**

Most blacks and whites agree that civil rights have “improved” for Pulaski County blacks. Whites, however, are more likely than blacks to perceive that civil rights have “greatly improved” in their lifetimes. Fifteen (15) to 17 percent of blacks and 29 to 34 percent of whites see great improvement in black civil rights.

This question was also asked three years ago. The percentage of LR-whites who perceived that black civil rights had “improved” or “greatly improved” declined by 24 percent between Year 2 and Year 5 of the survey. Responses of the other three geo-racial groups showed little change over this period.

## Treatment in the Community

The following section discusses core questions about differences in treatment between blacks and whites in everyday situations in the community. A series of questions was asked of both blacks and whites regarding perceptions of treatment of blacks in the community. This was followed by a series of questions addressed only to blacks about whether they had been treated unfairly in the 30 days preceding the survey. This series was asked only of blacks because prior experience with these questions indicated that very few or no whites reported unfair treatment.



*In your opinion, how well do you think blacks are treated in your community--the same as whites, not very well, or badly?*

- ◆ **One-half of blacks believe that blacks are not treated very well in their community.**
- ◆ **Whites are much more likely than blacks to think that blacks and whites are treated the same in the community.**

There are dramatic differences both between blacks and whites and also between LR-whites and OLR-whites in their perceptions of how well blacks are treated in the community. Fifty (50) to 51 percent of blacks express the opinion that blacks in their community are treated “not very well”. This opinion is shared by 22 percent of OLR-whites and 38 percent of LR-whites.

Around one-third of blacks think that blacks are treated “the same as whites”. The majority of whites believe that blacks and whites are treated the same. More than one-half of LR-whites and nearly three-fourths of OLR-whites express this view. Responses were similar when this question was asked in Year 3 of the study.

**Exhibit 12**  
**Percentages perceiving that blacks are treated the “same as whites” in their communities**

	LR-blacks	OLR-blacks	LR-whites	OLR-whites
Year 5	36%	34%	55%	72%
Year 3	45%	44%	71%	82%
Overall decrease	-9%	-10%	-16%	-10%

The general question about treatment of blacks was followed by questions about five specific situations:



- Are blacks in your community treated less fairly than whites . . .*
- On the job or at work?*
  - In the stores downtown or at the shopping mall?*
  - In restaurants, bars, theaters, or other entertainment places?*
  - In dealing with the police, such as in traffic incidents?*
  - In getting health care from doctors or hospitals?*

- ◆ **A majority of blacks perceive unfair treatment in four (4) out of five (5) common situations.**

Consistent with the perceptions about overall treatment in the community, blacks are more likely than whites to believe that blacks are treated unfairly in each of the five situations mentioned.

Both blacks and whites were most likely to perceive unfair treatment “in dealing with the police, such as traffic incidents”. Around seven (7) out of 10 blacks and three (3) to four (4) out of 10 whites say that blacks are treated unfairly “in dealing with the police”.

Approximately five (5) out of 10 blacks say that blacks are treated less fairly on the job, while shopping, and in places of entertainment. In contrast, around two (2) out of 10 whites feel that blacks are treated unfairly in these situations. Blacks were equally likely (52 to 56 percent) to see unfair treatment on the job, while shopping, and in entertainment places. Whites, however, were slightly more likely to perceive that blacks are treated unfairly while shopping (16 to 24 percent) than on the job or in entertainment places (10 to 18 percent).

Respondents were less likely to perceive unfair treatment in getting health care from doctors or hospitals than in the other situations mentioned. Around four (4) out of 10 blacks and one (1) out of 10 whites say that blacks are treated unfairly in getting health care.

This series of questions was also asked in Year 2 of the study. Responses were much the same as responses in Year 5.

The same five common situations were addressed in a more experiential way by asking blacks whether they had been treated unfairly in the 30 days before the survey.



*Can you think of any occasion in the last 30 days when you were treated unfairly because you were BLACK . . .*

*In a store where you were shopping?*

*At your place of work?*

*In a restaurant, bar, theater, or other entertainment places?*

*In dealing with the police, such as in traffic incidents?*

*While getting health care for yourself or a family member?*

◆ **In three common situations, one-fourth of blacks report that they were treated unfairly in the past 30 days.**

Twenty-three (23) to 27 percent of blacks responded “yes” when asked whether they had been treated unfairly in the past 30 days at work, while shopping, or at an entertainment place.

The questions about more unusual situations—dealing with the police and getting health care—had lower percentages of “yes” responses. From nine (9) to 17 percent of blacks said they had been treated unfairly in these situations in the past 30 days.

There are no significant differences between Year 5 responses and those of previous years on questions about unfair treatment in the past 30 days.



*In your day-to-day life, have you ever felt that people act as if they think you are dishonest?*

*About how often would you say this happens? Would you say never, rarely, sometimes, or often?*

◆ **More than one-third of blacks have felt that people think they are dishonest.**

Blacks are more than twice as likely as whites to have felt that people suspect them of dishonesty. Thirty-five (35) to 41 percent of blacks have felt suspected of dishonesty in their day-to-day lives. In contrast, only 15 to 17 percent of whites have felt that people suspect them of dishonesty. Responses to this question were similar two years ago, in Year 3. Among blacks, those who feel they have been suspected of dishonesty are more likely to say that it happens “sometimes” than to say it happens “often” or “rarely”. The whites who feel they have been suspected of dishonesty are most likely to say it happens “rarely”.

# Thoughts about Race



*How often do you think about your race? Would you say never, once a year, once a month, once a week, once a day, once an hour, or constantly?*

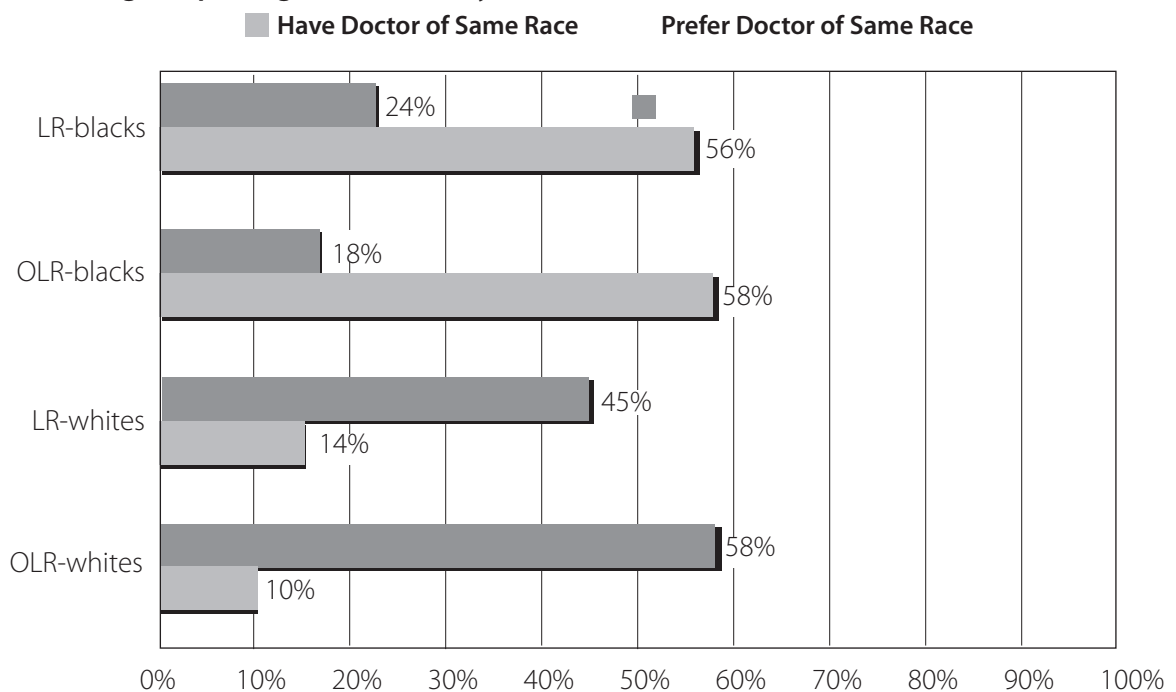
- ◆ A majority of blacks think about their race at least “once a day”.
- ◆ A near majority of whites think about their race only “once a year” or “never”.

More than one-half of blacks (56 to 58 percent) report that they think about their race at least once a day, compared to around 10 to 14 percent of whites.

At the other end of the scale, around one-half of whites (45 to 58 percent) say they think about their race “once a year” or “never”, compared to 18 to 24 percent of blacks. OLR-whites think about their race significantly less often than LR-whites.

## Exhibit 13

### Percentages reporting how often they think about their race



Factors which might contribute to awareness of one’s race include the relative size of one’s racial group in the society, the history of privilege or oppression experienced by this racial group, and the extent to which the racial groups interact.

# Appendix: Data Analysis and Demographics

Descriptive data analysis included frequency distributions and cross-tabulations. Statistical significance was determined by chi-square analyses and t-tests on valid responses. All data analysis was conducted using SPSS. Because of the size of the data set, the level of statistical significance was designated to be 0.05.

The data were weighted in order to bring the sample representations in line with the actual population proportions in Pulaski County. The data were weighted for age and gender for each of four geo-racial groups. The 2000 Census Summary File 1 provided the sample estimates that formed the basis for weighting. There were 5 age groups: 18 to 24 years of age, 25 to 39, 40 to 54, 55 to 64, and 65 and over. This resulted in a total of 40 weighted groups (5 age groups x 2 gender categories x 4 geo-racial groups). Weighting values ranged from 0.31 for black women aged 55 to 64 living in outside the city limits of Little Rock to 4.93 for black men aged 18 to 24 living outside the city limits of Little Rock.

The Appendix Tables 1 & 2 display the basic demographic characteristics of each geo-racial group sample. The tables show the sample breakdown for the weighted variables (age and gender). Tables A3 – A5 display both the sample and 2000 Census figures for the unweighted variables (education, income, and child status).

## Appendix 1: Age

	LR-blacks	OLR-blacks	LR-white	OLR-whites
18 to 24 years	18%	18%	9%	10%
25 to 39 years	31%	33%	29%	28%
40 to 54 years	30%	29%	28%	30%
55 to 64 years	8%	8%	12%	13%
65+ years	9%	9%	20%	17%

## Appendix 2: Gender

	LR-blacks	OLR-blacks	LR-white	OLR-whites
Male	43%	44%	45%	48%
Female	57%	56%	55%	53%



### Appendix 3: Education

	LR-blacks		OLR-blacks		LR-whites		OLR-whites	
	Sample	Census	Sample	Census	Sample	Census	Sample	Census
Less than High School	9%	23%	12%	26%	3%	9%	9%	15%
High School Graduate	30%	28%	39%	34%	15%	19%	23%	32%
Some post-high school	31%	31%	28%	29%	27%	27%	31%	30%
College Degree or more	27%	18%	19%	11%	54%	45%	36%	23%
Don't Know/Refused	3%		2%		1%		1%	

### Appendix 4: Income

	LR-blacks		OLR-blacks		LR-whites		OLR-whites	
	Sample	Census	Sample	Census	Sample	Census	Sample	Census
\$0 - \$19,999	17%	39%	22%	40%	10%	17%	13%	18%
\$20,000 - \$34,999	22%	25%	30%	25%	15%	20%	16%	21%
\$35,000- \$49,999	22%	15%	15%	15%	11%	16%	14%	20%
\$50,000 - \$74,999	14%	13%	10%	12%	18%	19%	18%	22%
\$75,000 or more	10%	8%	9%	7%	35%	28%	29%	19%
Don't Know/Refused	15%		13%		12%		10%	

### Appendix 5: Children in Home

	LR-blacks		OLR-blacks		LR-whites		OLR-whites	
	Sample	Census	Sample	Census	Sample	Census	Sample	Census
Yes	46%	41%	52%	46%	34%	23%	42%	29%
No	53%	59%	46%	54%	65%	77%	58%	71%
Refused	1%		2%		1%		0%	

Source: US Census Bureau. 2000 Census of Population and Housing



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