

ABSTRACT

Title of Document:

THE INFLUENCE OF HEALTH INSURANCE
AND A PERSONAL DOCTOR ON HEALTH
BEHAVIORS AND HEALTH STATUS *
AMONG DIFFERENT RACE AND ETHNIC
GROUPS.

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Over the last two decades, the U.S. has established national health objectives to help individuals increase life expectancy, improve their quality of life, and reduce health disparities among different segments of the population. In order to accomplish these goals, there must first be an understanding of the role of health insurance and a personal doctor in promoting positive health behaviors.

This study examines the impact of having a personal doctor and health insurance on health status and health behaviors for four different race and ethnic groups: Whites, Blacks, Asians, and Hispanics. The sample was divided into those with both health insurance and a personal doctor, those with health insurance only, those with a personal doctor only, and those with neither. The measures of health status were general health status, physical health, mental health, and poor health. The measures of health behaviors included routine checkup, physical activity, told blood pressure high,

cholesterol checked, told cholesterol high, flu shot, smoke days, alcohol consumption, activity limitations, emotional support, and life satisfaction.

The data were obtained from the 2005 national survey of the Behavioral Risk Factor Surveillance System (BRFSS) of the Centers for Disease Control and Prevention (CDC), the largest continuously conducted telephone health survey in the world with more than 350,000 adults interviewed each year.

The study found that the highest rates of preventive health behaviors for all four race/ethnic groups occurred among those who had both health insurance and a personal doctor. The second highest rates were among those with a personal doctor but no health insurance. The third highest rates were among those with health insurance but no personal doctor. The lowest rates were among those with neither health insurance nor a personal doctor. The health status variables did not show major differences by either health insurance or personal doctor and the differences among race and ethnic groups were small.

These findings suggest that having a personal doctor is at least as important as having health insurance in promoting preventive health behaviors among individuals of all race and ethnic groups.