

# Whites with mental illness far more likely to report insufficient money for care, delays

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White adults with mental illness were significantly more likely than those of other ethnicities to report having insufficient money for mental health care or facing delays in care, a Mount Sinai study found. Whites were 50 percent more likely than blacks to experience delays in care, and 20 percent more likely than blacks to lack enough money for treatments such as doctor visits and prescription drugs, the researchers found.

Using national survey data from the U.S. Centers for Disease Control and Prevention from 200,000 respondents between 2006 and 2015, the research team examined the growing disparities reported by white [adults](#) with [mental illness](#) in their ability to receive [health](#) care compared to other racial and ethnic groups.

The results of the study will be published online in *Psychiatric Services*, a journal of the American Psychiatric Association on Thursday, February 1, at 12:01 am EST.

A greater proportion of whites with serious [psychological distress](#) used [private insurance](#) coverage compared to similarly distressed black and Hispanic adults, while black adults were more likely than whites and Hispanics to have Medicaid. The explanation for this, the researchers suggested, may be linked to the Great Recession of 2008-2009, which affected health coverage for white, black, and Hispanic adults with serious psychological distress for several years afterwards. While white adults with serious psychological distress may have been more likely to regain private insurance coverage as the economy returned to fuller employment, during periods of high unemployment they may have been at a disadvantage in not having the stability offered by Medicaid coverage, which is independent of employment.

"The results of our research are surprising in light of numerous studies demonstrating disparities in

health care utilization among adults in racial and ethnic minority groups," said the study's lead author, Judith Weissman, PhD, JD, Assistant Professor of Psychiatry, Icahn School of Medicine at Mount Sinai. "Black and Hispanic adults have historically fared worse than white adults, who disproportionately use private coverage. Our study revealed that health coverage and access for the mentally ill can be jeopardized by an economic recession if it is tied to private coverage through employment."

The data set did not allow the researchers to compare the level of mental health benefits offered by private insurance plans versus Medicaid, but Dr. Weissman said that was a question worth further study.

The research introduces the possibility that limited access to health care may contribute to the current reported increase in poor health outcomes in white middle-aged adults.

The study's senior author is Dolores Malaspina, MD, MPH, Director of the Psychosis Program in the Department of Psychiatry at the Icahn School of Medicine at Mount Sinai.

Among the study's other findings were that women showed decreased [health care](#) utilization compared with men, validating earlier studies demonstrating that women were more likely than men to experience delays in care. The greatest proportion of white and black adults with serious psychological distress lived in the South. This region also had the greatest proportion with serious psychological distress and no [health coverage](#). The results suggest that access to care was worse for patients living in states that were less likely to expand Medicaid access under the Affordable Care Act.

Provided by The Mount Sinai Hospital

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