



Tennessee Behavioral Risk Factor Surveillance System Quarterly Newsletter



Summer 2023

Perceived Receipt of Medical Treatment

Perceived discrimination in medical settings has been found to be associated with reduced use of healthcare services.¹ This is an especially important topic because racial/ethnic minority populations in the United States often experience significantly greater illness and death for a majority of health outcomes, largely due to medical and general discrimination. This association between discrimination and poor health has been described as "weathering."²

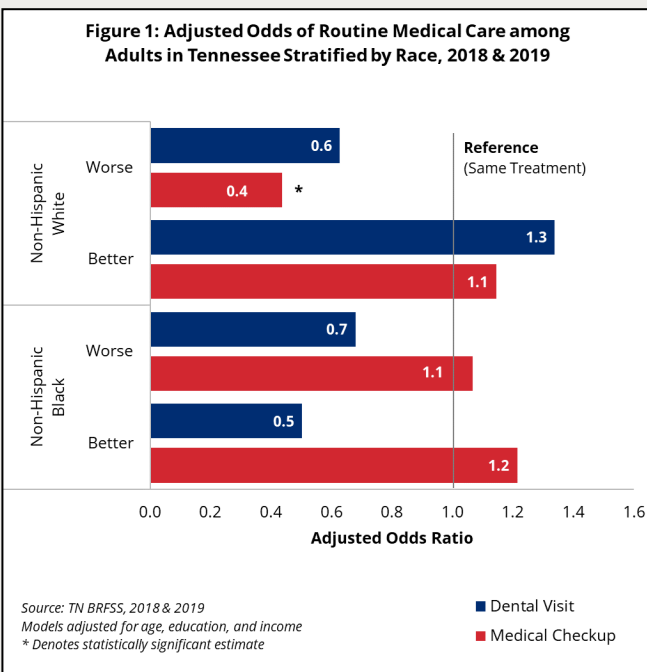
During 2018 and 2019 in Tennessee, 14.6% of non-Hispanic Black adults, 11% of Hispanic adults, and 2.6% of non-Hispanic White adults reported receiving worse medical treatment. **Non-Hispanic Black adults in Tennessee were nearly 6 times more likely to report worse medical treatment** than other races compared to Non-Hispanic White adults when accounting for age, education, and income.

*"Weathering is the result of chronic exposure to social and economic disadvantage that leads to the acceleration of normal aging and earlier onset of unfavorable physical health conditions."*²

Despite this, **more non-Hispanic Black adults (84%) reported having a routine medical checkup in the past year compared to non-Hispanic White adults (78%)**. This was particularly true among those who reported receiving worse care: 85% of non-Hispanic Black adults receiving worse care reported having a checkup in the past year, compared to 63% of non-Hispanic White adults receiving worse care. **Receipt of medical care was not significantly associated with perceived medical treatment among non-Hispanic Black adults** after controlling for sociodemographic variables.

When comparing receipt of medical care by discrimination and stratifying by race, odds of both medical

checkup and dental visits were largely *insignificantly* associated with type of perceived treatment (*Figure 1*). In other words, individuals received medical care regardless of whether the perceived care was better or worse. The association between receipt of medical care and metro status was significant when stratified by race, with more non-Hispanic Black adults (94.8%) in non-metro locations reported having a checkup in the past year compared to those in metro locations (83%).



While discrimination doesn't appear to significantly affect receipt of routine medical care among non-Hispanic Black adults, its **important to recognize the experience of discrimination and the stress-related weathering it has been found to be associated with**; however, non-Hispanic Whites who reported worse treatment were significantly less likely to report receipt of care. Improving perceived medical treatment among minority groups can help improve their overall health and wellbeing as well as push Tennessee further toward achieving health equity.



Tennessee Department of Health
Division of Population Health Assessment
Office of Population Health Surveillance



1. Burgess DJ, Ding Y, Hargreaves M, van Ryn M, Phelan S. The association between perceived discrimination and underutilization of needed medical and mental health care in a multi-ethnic community sample. *J Health Care Poor Underserved*. 2008 Aug;19(3):894-911. doi: 10.1353/hpu.0.0063. PMID: 18677077.
2. Forde, A. T., Crookes, D. M., Suglia, S. F., & Demmer, R. T. (2019). The weathering hypothesis as an explanation for racial disparities in health: a systematic review. *Annals of Epidemiology*, 33, 1-18.e3. <https://doi.org/https://doi.org/10.1016/j.annepidem.2019.02.011>.

How is Tennessee Supporting Health Equity?

- The Division of Family Health and Wellness (FHW) is working to create a **Health Equity 5-year plan** to mitigate health disparities by promoting and providing accessible, equitable services; engaging the communities we serve; maintaining a diverse and skilled workforce; and collaborating with internal and external partners.
- The Division of Health Disparities and Elimination (HDE) is working with Department's Health Equity Advisory Team (HEAT) and others on the **Health Equity Roadmap**, designed to provide public health professionals a practical guide to examine the root causes of health disparities and work toward achieving health equity within communities across the state.
- HDE has also worked on hiring a team of **health equity trainers** who will provide health equity training for public health employees across the state, in alignment with the TDH Strategic Priorities, State Health Plan, and Health Equity Roadmap.
- The **Tennessee Health Disparities Task Force** was founded in 2020 to address longstanding health and social disparities highlighted during the COVID-19 pandemic. Virtual meetings are held weekly.
- The **Safety Net** program, housed in the Tennessee Department of Health's State Office of Rural Health and Health Access, delivers access to health care for uninsured adults (aged 19-64) residing in Tennessee.

For more activities or information on Tennessee's support of health equity, please contact the TN BRFSS Coordinator.

TN BRFSS Updates



- **Remember:** the **Annual Stakeholders Meeting** is coming up! Be sure to check "**Accept**" on your invitation for **August 15th!**
 - Hear from other TN BRFSS Data users.
 - Discuss questionnaire development for the 2024 survey year.
- The **2022 annual data is planned to be released soon** by the Centers for Disease Control and Prevention!
- **Looking for stratified national estimates?** Did you know the **WEAT** can provide *average* prevalence estimates of any/all BRFSS sites? This differs from the **Prevalence Tool**, which provides *median* estimates. Estimates from the WEAT can also be easily stratified by demographic/exposure variables.

TDH BRFSS Website

<https://www.tn.gov/health/health-program-areas/statistics/health-data/brfss.html>

Data Requests

To request BRFSS data from TDH, please visit:

<https://www.surveygizmo.com/s3/5819792/TDH-Data-Request-Form>

Contact TN BRFSS

TNBRFSS.Health@tn.gov

Next Newsletter

November 2023



The TN BRFSS team is always working on producing fact sheets, reports and data briefs on health issues important to the state of Tennessee. If your program would like to **collaborate on a BRFSS topic** for a data dissemination product, please contact the TN BRFSS coordinator,

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