

Diego Ramirez

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ENG1101

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U2 Reflective Annotated Bibliography

Introduction

How do low-income New Yorkers deal with Healthcare in America?

The reason for Why I got interested in this question is because seeing how the healthcare system in the U.S is different from everywhere else since anytime you go to the hospital or need medication or anything you're going to be the one who is going to pay for it. With the way that the healthcare system works in America it can have a negative impact on those who can't afford to pay for care.

Yet there is also something that made me want to look into this topic which would be how having no access to care impacts the lives of these people. From how it affects their health, but also the problems that occur when these resources aren't available

Especially with living in New York City where the cost of living in such a city is very expensive. With the cost of having to live in the city and having to pay for medical expenses as well it can end up becoming a bigger problem, and for people who have low incomes this can be a nightmare. It's already difficult living in such a city with low income, but to also have to deal with having to pay for your own medical expenses when you may or may not have health insurance or the income to pay for it, or even having people that you have to care for it can be challenging.

During my research I expect to find any government aid programs that can help New York citizens, issues that low-income New Yorkers face when dealing with the healthcare system, the impacts that this system has on citizens and what they are doing in order to make sure that their health is fine, but also to see what

Source Entries

Citation #1

Bocour, & Tria, M. (2016). Preventable Hospitalization Rates and Neighborhood Poverty among New York City Residents, 2008–2013. *Journal of Urban Health*, 93(6), 974–983.

<https://doi.org/10.1007/s11524-016-0090-5>

Summary

Reading this article, it talks about how preventable hospitalization of patients associated with low-income neighborhoods and the hospitalizations of these patients could have been prevented with the right resources and better outpatient care. Ethnicities such as African Americans and

Hispanics have also been linked with high preventable hospitalizations rates. Diseases such as asthma and diabetes which have resulted in the hospitalizations of people could have also been prevented if there were no delays or if they had received care for these health conditions. Preventable hospitalizations have often been associated with many things such as the person's health insurance, a medical provider or a source of care, or the prevalence of disease. These hospitalizations can be caused by the socioeconomic inequalities as well as the lack of available healthcare resources. They had found out that the hospitalization rates in these areas have decreased from 2008-2013, and between the very high poverty and low poverty neighborhoods did not decrease significantly.

Reflection

I agree with what this article has to say, seeing how the hospitalization of residents in low-income neighborhoods could have been prevented if these residents had better resources for healthcare and gotten the treatment that they needed. Seeing the link between different races and income levels and how they tie into the hospitalizations of people but also because of other factors such as the socioeconomic inequality that these people face. While there are terms that confused me such as what inpatient and outpatient care where there is a question that I have which is what has caused the decrease in hospitalization and is the New York government doing about this issue?

Quotation

“Preventable hospitalizations are associated with residence in low-income neighborhoods.1 A growing literature documents the intersection between place and health, building on evidence that poor health outcomes tend to be concentrated in certain neighborhoods, due both to socioeconomic inequities and a lack of available health care resources”

Citation #2

Lim, Singh, T. P., Hall, G., Walters, S., & Gould, L. H. (2018). Impact of a New York City Supportive Housing Program on Housing Stability and Preventable Health Care among Homeless Families. *Health Services Research*, 53(5), 3437–3454. <https://doi.org/10.1111/1475-6773.12849>

Summary

It is shown that if someone is homeless then the risk of being hospitalized increases that could have been prevented. Individuals who are homeless may face obstacles that can affect the way that they deal with health care. These obstacles could be financial such as needing food or shelter, but also non-financial reasons which could just be discrimination, distrust in the healthcare system, or just isolation. But among single individuals it had been shown that affordable housing had decreased homelessness, healthcare cost, ED visits, and hospitalizations. But somehow this evidence had been lacking in homeless families with children.

Reflection

Reading this article, it was interesting to read how despite the effort to make healthcare more accessible for people who are homeless, homelessness in NYC is still associated with preventable hospitalization. Reading this I can understand why since as stated in the article earlier there are still barriers that these people still face that can prevent them from accessing

these programs. However, continuing to read this article I still don't understand how supportive housing has helped tackle the issues that are homeless and yet for homeless families that evidence is somehow not there for them. Perhaps it is because of having to take care of children, the money they have to spend on taking care of them. For families who deal with poverty it can be a bigger issue trying to access the resources to make sure they are healthy.

Quotation

"Several studies of homeless, single adults have found that supportive housing effectively reduced homelessness, health care costs, ED visits, and hospitalizations (Larimer et al. 2009; Sadowski et al. 2009; Parker 2010). Yet evidence is lacking for homeless families"

Citation #3

Muncan, Walters, S. M., Ezell, J., & Ompad, D. C. (2020). "They look at us like junkies": influences of drug use stigma on the healthcare engagement of people who inject drugs in New York City. *Harm Reduction Journal*, 17(1), 1–9. <https://doi.org/10.1186/s12954-020-00399-8>

Summary

In this article it reveals that there is a stigma against a vulnerable population of people which happen to be people who use drugs. These people are met with higher risk of overdose, mental illness, and transmittable disease. These higher risks are attributed to poor healthcare engagements which result from socioeconomic and structural related issues that are related to drug use and its consequences, examples of this would be discrimination, unstable housing, or not being able to afford care. The experiences that these people face could help implement a change in the healthcare system which can medically and socially help this vulnerable population.

Reflection

I strongly agree with this article, as the article states this population is very vulnerable and the problems that they face shouldn't be met with discrimination. The stigma that they have affects them where getting the resources they need is harder for them to obtain. Reading some of the experiences they have where they are treated differently by healthcare providers is also shocking since seeing professionals whose job is to help people look at this vulnerable group of people and discriminate against them just seems awful. This stigma of seeing people who use drugs as junkies is easy to understand, that stigma just makes things worse for them, as these people aren't just junkies these people need help, and they should have access to that care just like anyone else.

Quotation

"Sophia: Then I waited two months, and I just did a walk-in and when I met the doctor, everything was fine. As soon as I took off my coat for her to see, that was it. She went from being super nice, referring me here, to okay, maybe you should go to the emergency room...the whole entire face changed, the smile, the whole mood.

Interviewer: Because she could see your track marks is what you're saying?

Sophia: Yeah."

Conclusion

What I had learned when reading all three of these articles was the issues that people face when they have little access to any care. With people having to face hospitalization that could have been prevented if they had better access to care in their area. Learning that these people have a higher risk to their health such as not having treatment for diseases such as asthma and diabetes which could have them hospitalized, mental illness, or even disease. Seeing how these issues are linked to the little care that residents have seem to be from the same issue that these people have which is the socioeconomic inequality, as well as financial barriers and non-financial barriers, with people having families to look after, with these factors it can make accessing healthcare for them even more difficult. I had even learned that there have been solutions to tackle these issues, programs such as affordable housing have been helping the homeless deal with some of the risk that homeless people face with the little care that they have and how efforts to transform the Medicaid delivery system and payment reform programs which will likely drive down future preventable hospitalization rates.

Yet during my research there were still things that surprised me such as how the rate of preventable hospitalization between high and low poverty areas hadn't significantly decreased, or the fact that some people have to deal with discrimination when dealing with healthcare providers, or how affordable housing had managed to tackle some of the issues for individuals who are homeless and yet for families who are homeless they found little evidence of that happening for them. Seeing how some issues are still persistent even after all this had me thinking as to why some of these issues are still going on? What I have learned from all this is that healthcare seems to be a huge problem for people, especially for those who are the most vulnerable. People having to worry about whether they can afford or even have access to care shouldn't be something that people have to worry about since healthcare should be something that everyone in the U.S should have easy access to.

I think citizens in New York City should be the ones who are aware of this problem as some could probably relate to the struggles of living in this city, yet they may also not be aware of how those who live in low income areas may struggle with getting healthcare in there are since that might not be a struggle that they go through, understanding the issues that these people face and seeing the problems there are in the healthcare system.