Racial and ethnic disparities in the quality of primary care for children

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OBJECTIVE Healthy People 2010 calls for greater access to high-quality primary care as a means to reduce racial and ethnic disparities in children's health. Disparities in primary care quality have rarely been studied for children, and the few studies that have been conducted among adults are not readily applicable to children because of the different health care needs of the 2 populations. This study compared the quality of primary care experienced specifically by children of different racial and ethnic groups.

STUDY DESIGN We used a random cross-sectional community sample of children. Parents were questioned via a structured telephone interview with the Primary Care Assessment Tool about a selected child's primary care experiences. Responses were compared across racial and ethnic groups, with white children as the reference group.

POPULATION The sample consisted of parents of 413 elementary school children, ages 5 to 12 years, enrolled in 1 school district spanning 3 suburban cities in San Bernardino County, California.

OUTCOME MEASURED We measured cardinal features of primary care quality including first-contact care (accessibility and utilization), longitudinality (strength of affiliation and interpersonal relationship), comprehensiveness (services offered and received), and coordination of care.

RESULTS After controlling for family demographics, socioeconomic status, and health system characteristics, minority children experienced poorer quality of primary care across most domains of care compared with white children. Asian Americans reported the lowest quality of care across most domains, but particularly in first-contact utilization, interpersonal relationship, and comprehensiveness of services received.

CONCLUSIONS Racial and ethnic disparities in quality persist in many aspects of primary care delivery. The findings suggested that these disparities are not simply reflections of ability to pay, health disparities, sociodemographics, or racial variations in expectations for care. The findings in this study that parents of minority children, in particular Asian Americans, report lower quality of primary care is consistent with previous research among adults but had not been demonstrated previously for children.