



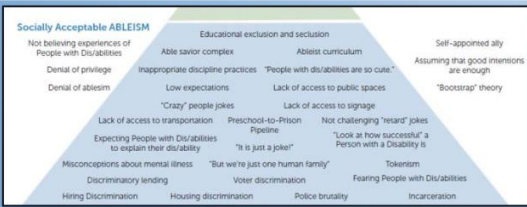
Understanding the complexities of the U.S. healthcare system: Systematic social barriers that are preventing people with invisible illnesses from receiving the healthcare they need

Reece Ohmer, Michigan State University

Introduction

Problem/situation: Healthcare in the United States has always been a social and often politicized issue, but in more recent times and with the growing population, Americans with invisible illnesses and diseases have had limited access to seeking treatment. In the United States, healthcare is not socialized meaning Americans do not have universal healthcare coverage. This being the case, many citizens with invisible illnesses are not getting the care they need. When it comes to invisible illnesses, the "individual has to live with the health condition 24 hours a day, 7 days a week" and deserves to have complete access to the physicians and treatment they need (Martz 2018). It is also an important issue to investigate because of the large number of Americans that are affected by invisible illnesses. Above all, consistent healthcare is essential to citizens living longer lives and being efficient in their careers, leading the United States to becoming a more productive, strong society.

Purpose: The purpose of looking into access to healthcare in the United States is to understand the most prevalent factors that are preventing patients with invisible illnesses from receiving the treatment they need. Understanding and articulating what barriers exist will be the first step to more universal healthcare coverage of Americans with invisible illnesses.



(Ferri and Connor, Et al. 2016)

Methods

Disciplinary Lenses: The disciplinary lenses I have chosen to analyze to further investigate access to healthcare is that of psychology, sociology, and finance. Each discipline takes a different approach to how they view this topic and that will be beneficial to seeing all sides of this complex social issue.

Data Collection: I chose to include many different types of methods for this project in order to completely understand this complex issue. I began by conducting interviews with people who directly have an invisible illness in order to get their perspective on access to healthcare and how their disease has also affected their daily life to get the entire perspective on this complex social issue. Furthermore, I also created a survey and sent it to my fellow classmates in one of my psychology courses and I used this data to better understand how the general public views access to healthcare and see if they have noticed trends in systematic issues in treatment. I also observed how a typical family deals with the amount of supplies needed in order to keep themselves healthy while having a compromised immune system and I referred to this as the 'visible side of invisible illness'. Finally, the most interesting take-away I had from my literature review was that there is very limited information about biases present for those with invisible illnesses specifically.

Utilized Theories: The implicit bias toward those with disabilities is present (known as 'DisCrit') and our society is designed toward those that are able-bodied the most, so I was curious to know about how this might translate to healthcare (Ferri and Connor, Et al. 2016).

Analysis Scheme

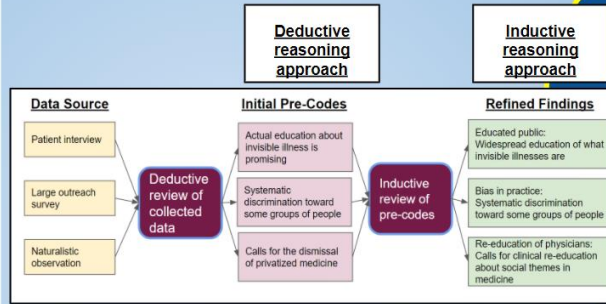
Direct patient interviews

Observations of how patients organize medication

Literature review of publications that are currently available

Mass survey of people of diverse backgrounds

Analysis Scheme



Further Methods Insights

Patient Interviews: When asked to share her personal journey with the U.S. healthcare system as a person living with an invisible illness, Hailey Roberts, a student at MSU, explained that any minority group might find it harder to receive treatment. She explained that those with low socio-economic standings would likely face the hardest time (Roberts).

Individual Survey Responses: When given the opportunity to expand further about how they feel about the healthcare system for those with invisible illnesses, one anonymous survey responder explained that "people that utilize the system do better if they have higher education, ability to pay for treatments and medicines, are able to speak English, etc." While another survey participant wrote that "Health care privatization is only part of the reason the U.S healthcare system fails those with invisible illnesses".

Selected Preliminary Findings

#1 Finding: The general public is educated about invisible illnesses.

One of the findings from my conducted research was that the large majority of people that were surveyed fully understood what invisible illnesses were and how they affected people who are living with them. This percentage of people totaled 93.5%, so it concluded that the issue of the accessibility of the invisible illnesses does not reside in people not understanding what invisible illnesses are.

#2 Finding: The general public does not think the U.S healthcare system is flawed.

In continuation, another finding as a result of the collected research was that the majority of people did not believe that privatized medicine, such as the United States' healthcare system, was the issue behind the lack of equal healthcare for those with invisible illnesses. 51.6% did not believe that healthcare system should become universal for U.S. citizens. Most people believe that de-privatizing healthcare in the U.S. will not help the discrimination found. Although it should be noted that 32.3% of people polled were unsure about how they should answer that question entirely.

#3 Finding: The general public believes that the healthcare system systematically and disproportionately discriminates against some groups of people.

Of the people polled, 93.5% believed that the healthcare system is not equal for every group of people. In particular, the research stated that 83.9% of people believed that skin color and the actual lack of visibility of the disease were the two largest social barriers preventing people from receiving equal healthcare. Additionally, Hailey Roberts confirms that she believes this to be true by explaining that healthcare is not equal for all and some people have more difficulties getting care and maintaining good health.

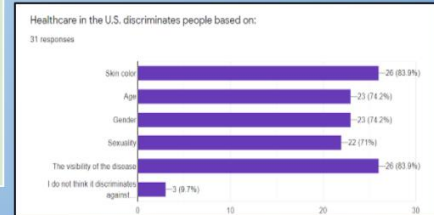


Research Questions

1. What are the most common social factors preventing people with invisible illnesses from getting the treatment that they need in the United States?
2. Are there social restraints that target one group of people more than another?
3. How have governmental laws affected the ability to have access to healthcare for those with invisible illnesses?
4. How does the inflated cost of medication and drugs play a role in this issue?



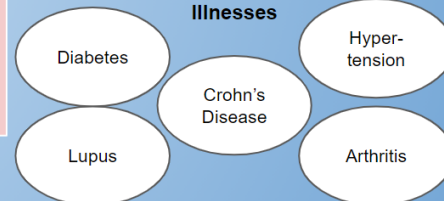
Popular Discriminatory Factors from Survey



Final Discussion and Conclusion

The majority of people believe that it simply is not easy for patients of specific backgrounds to get the care they need and the two largest factors that were brought up were: 1. the skin color of the patient and 2. the lack of visibility of the disease and physicians not taking their symptoms as seriously as if they were more physical and noticeable symptoms. When polled, the majority of people did not think privatized medicine was the issue with the U.S. healthcare system, which is incredibly interesting. Now that we understand that biases in medicine are very prominent and a large group of people have been affected by these social barriers, where do we go from here? Accepting that there is a problem is the first step and then education toward these barriers on the medical side will make the biggest difference. Physicians must understand that a bias exists and then make active decisions to stop it from hindering people trying to get the treatment they need to stay healthy.

Common Invisible Illnesses



References: https://docs.google.com/document/d/1RvkBmuoZTeMbrownuP2rqJKqkxtzYRR5l5WXQARDKh_Y/edit?usp=sharing