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Perception of Trust, Virtual Care, and Access Among the Uninsured Population: A Multi-Site Study at Student Run Free Clinics

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Perception of Trust, Virtual Care, and Access Among the Uninsured Population: A Multi-Site Study at Student Run Free Clinics

Introduction/Problem:

Since the onset of the COVID-19 pandemic, utilization of virtual visits has significantly increased. Advantages of virtual visits include lower healthcare costs and improved access to healthcare. Although one of the main goals of implementing virtual visits is to increase access to the underserved population, there have been few studies with a focus on the opinions of African Americans or the uninsured. Moreover, distrust in physicians and healthcare, although universal, is more prevalent among the African American and uninsured populations. It is also known that trust leads to better self-reported health outcomes, patient satisfaction, health behaviors, quality of life, and symptom severity. Therefore, identifying ways to increase trust is essential to improving healthcare, especially among the underserved.

The aim of our study is to evaluate the knowledge, attitudes, and experiences of the uninsured community living in Detroit regarding virtual care and trust in physicians and the healthcare system. We hypothesize that factors such as virtual care and free clinic use will be correlated with increased trust.

Methods/Interventions:

This project involves three student-run free clinics located in a large Midwestern metropolitan city. We are conducting a survey-based research study evaluating the knowledge, attitudes, and experiences of uninsured people in Detroit with virtual healthcare services, physician trust, and trust in the overall healthcare system using combined, previously published, survey instruments. The data will be analyzed by a report of the demographics and average responses. Then, using Student's t-tests and ANOVA via the SPSS platform, the effect of virtual care and free clinic use on trust will be evaluated.

Results

Data collection is currently in progress. At this point in time, we have a sample size of 32 uninsured participants above the age of 18 years and approximately an 89% response rate. We aim to have over 50 participants by the conference deadline in order to extrapolate more meaningful interpretations from data analysis. Currently, 71.8% of the participants are African American and 75% earn less than \$40,000 per year. Our initial findings show that 84.4% of participants have utilized free clinics before, with 96.4% of those reporting an extremely or mostly positive experience. Furthermore, preliminary analysis finds that 90.6% of participants trust their physician's judgment about their medical care. In regard to telemedicine, 43.8% have previously accessed health care via phone or video chat, although only 23.8% of users report obtaining "better access to healthcare services by use of telemedicine".

Conclusion

Further research is necessary to illuminate perceptions of access and trust in free clinics and telehealth services in underserved populations and to determine mechanisms which can be implemented to improve these views.