

The Association between Criminal Record Status and Access to Healthcare among Black and White Adults

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Introduction

- Access to comprehensive healthcare insurance is necessary for maintaining a healthy, livable life.
- Social deterrents like race, criminal record status, and employment, as well as the fiscal cost of private coverage, make the fundamental human need of healthcare a privilege: as of 2019 33.2 million, or 10.3% of Americans were uninsured (CDC 2019) and that number is steadily increasing.
- Employers in the United States have public access to conviction information so that they can predict which potential candidates are more or less likely to engage in criminal behavior. Evidence has shown that employers would prefer to higher those who do not have a criminal record (Bushway and Kalra, 2021).
- According to a 2019 study done by the Kaiser Family Foundation, around 156,199,800 Americans or 49%, receive employer-sponsored health insurance, also known as group health insurance. This puts black people with a criminal record, a group which is less likely to get hired, at a major disadvantage when attempting to access quality healthcare.

Research Questions

- Does the association between criminal record status and health care access differ between black and white individuals?
- Are white individuals with a criminal record more likely to have access to healthcare than black individuals without a criminal record? Essentially which is a stronger social indicator: race or criminal record status?

Methods

Sample

 The Dataset analyzed was Addhealth Wave 4 which consisted of in-home interviews of 15,701 young adults in the United States.

Measures

- Access to healthcare was measured with the question "Which of the following describes your current healthcare insurance situation?" This variable was coded dichotomously in terms of the presence or absence of healthcare insurance.
- Criminal record status was measured with the question "Have you ever been convicted or plead guilty to any charges other than a minor traffic violation?"
- Race was recorded with the question "Indicate the race of the sample member/respondent from your own observation (not from what the respondent said)."
- A variable reflecting race and criminal record status was created by creating four categories: black without a criminal record, black with a criminal record, white without a criminal record, white with a criminal record.

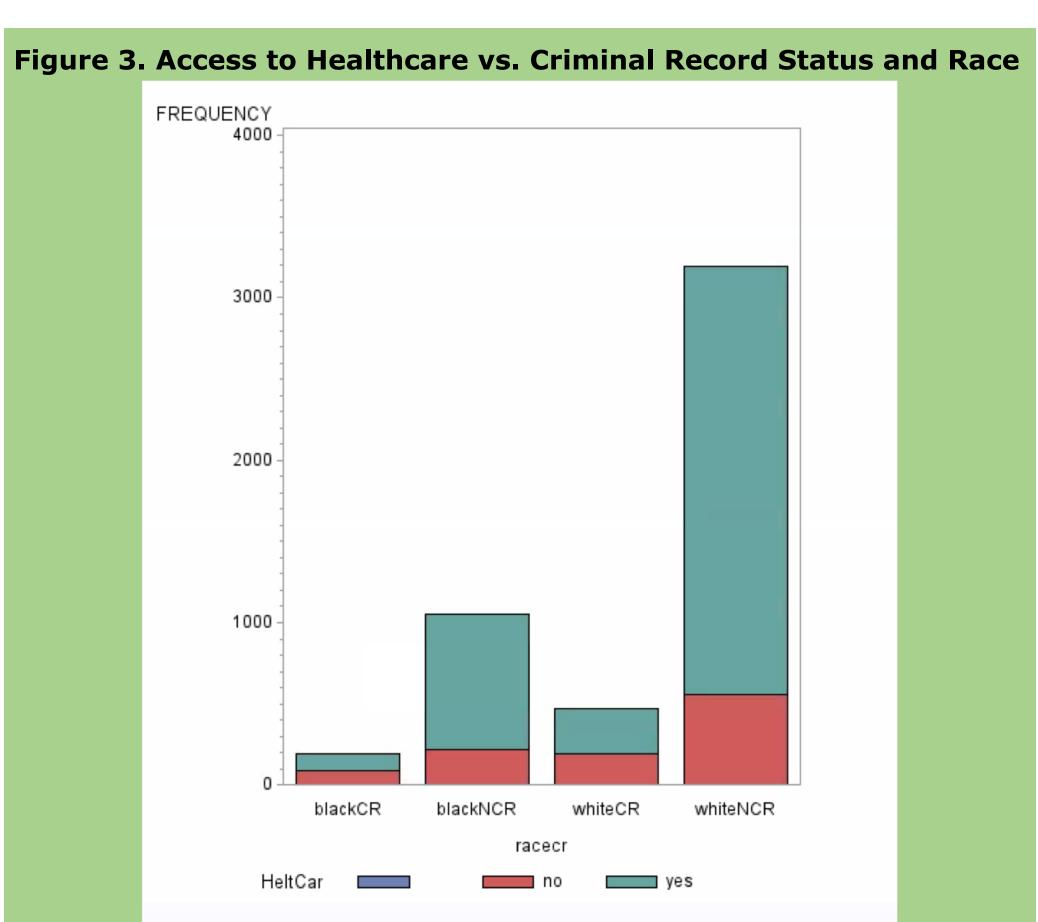
Results

Univariate

- 21.10% of respondents do not have healthcare
- 13.31% of respondents have a criminal record
- 25.00% of respondents appeared to be black

Bivariate

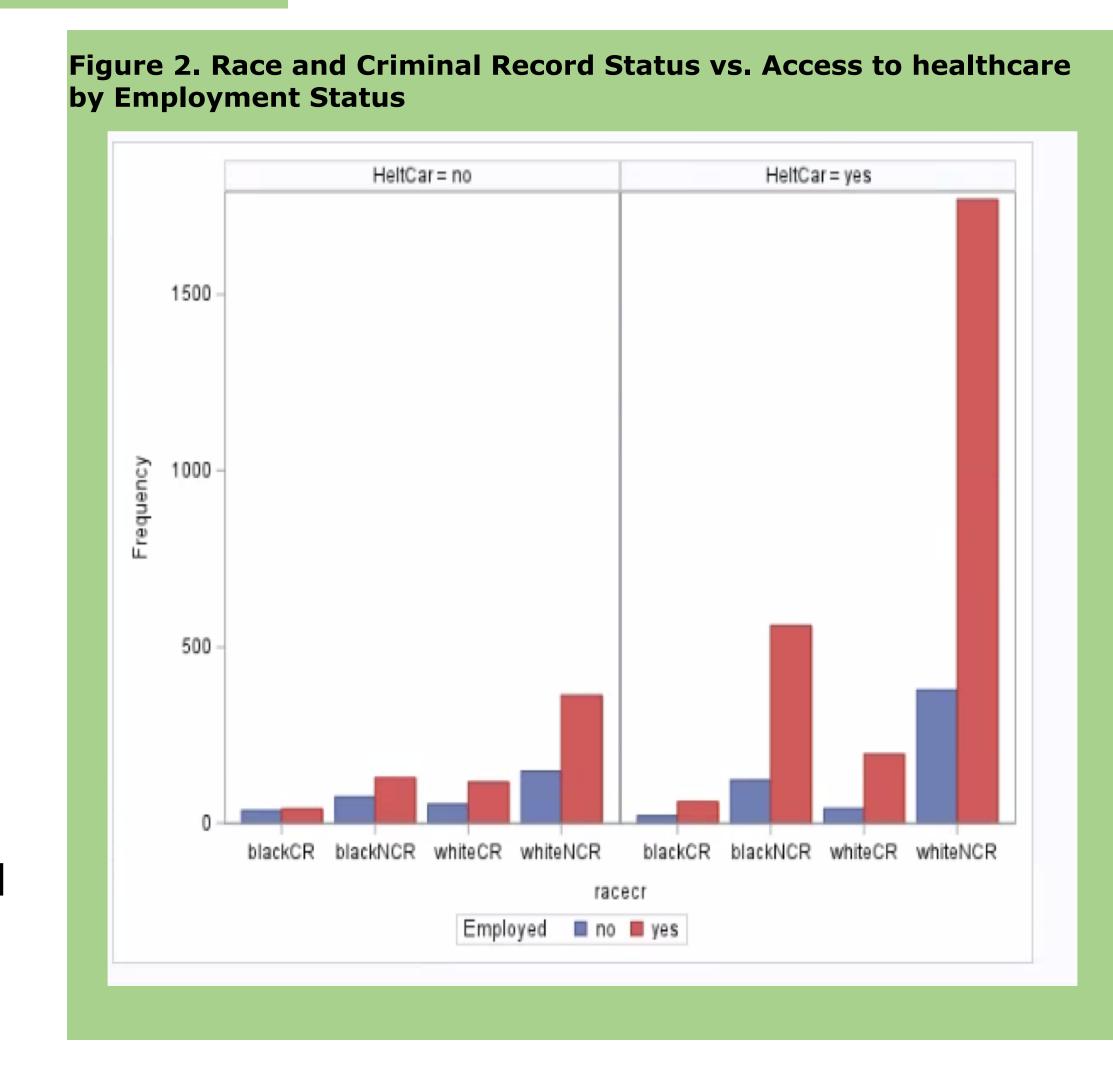
- 41.88% of people with a criminal record did not have healthcare and a Chi squared analysis revealed that criminal record status and access to healthcare are significantly related as $X^2 = 200.74$ and P < 0.0001.
- Chi squared analysis revealed that race and access to healthcare are significantly related as $X^2 = 12.33$ and P < 0.0004.
- 48.66% of black people with a criminal record did not have access to healthcare whereas 17.41% of white people without a criminal record did not have access to healthcare.



- Chi squared analysis revealed that race and criminal record status and access to healthcare are significantly related and the null hypothesis could be rejected $X^2 = 210.73$ and P<0.0001.
- An odds ratio estimate revealed that **black people** with a criminal record are 3.59 times as likely to not have access to healthcare than white people without a criminal record.

Multivariate

- As 50% of the individuals in the Addhealth wave 4 codebook receive health care through employment, employment status was a covariate. An odds ratio estimate revealed that people that are unemployed are 2.1 **times** as likely to not have healthcare.
- After controlling for Employment status, race and criminal record status and access to healthcare are still significantly related (P<0.0001), revealing that employment status is not a confounder.



Discussion

- Both race and employment status are related to whether or not a person has access to healthcare, public and private.
- An individual is least likely to have access to healthcare if they are black, unemployed, and have a criminal record and less likely if they identify with at least one of those identities.
- If further research reveals that there is a tendency for black people with criminal records to be denied healthcare, policy could be created to disassemble this trend as it is unjust and unconstitutional.
- More research needs to be done to determine why this trend exists: is it due to individual racial biases or does a more systemic issue make it difficult for black people with criminal records to get healthcare or a combination of the two?

References