

## Family Postponement of Medical and Dental Care: The Influence of Income Level and Financial Hardship

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Medical and dental care are some of the most expensive expenditures that consumers incur, and they are also some of the most common expenses that families postpone (Gallup, 2015; Kaiser, 2012). The goal of the present is to examine family and financial factors that influence families' likelihood of delaying healthcare in a predominantly middle and upper income sample. A large body of research framed by the Family Stress Model has used the postponement of healthcare as one of many indicators of family economic pressure that together predict deleterious relationship and developmental outcomes (Gauthier & Furstenberg, 2010). However, only a handful of studies have examined factors that contribute to the delay of healthcare (Heflin, 2016). This is an important research gap to fill because receiving regular healthcare can lead to early detection of disease and improved quality of life.

The sample is composed of 469 families from the Pacific Northwest drawn from the Flourishing Families Project. Families include at least one child under 18 years. 67% of families are racially white and 27% are single-parent families. In 2011, parents were asked yes or no as to whether they had postponed medical or dental care due to financial need during the previous 12-month period. Descriptive information and preliminary findings analyzed with logistic regression are presented.

Forty-six percent of the sample postponed medical or dental care between 2010 and 2011. Of the families that postponed, 64 were low income (income less than 67% of median income), 64 were lower middle income (67% to 100% of median income), 164 were upper middle income (100% to 200% of median income), 177 were high income (over 200% of median income). Preliminary logistic regression results (Nagelkerke  $R^2 = .415$ ) indicate that middle income families as compared to high income were more likely to postpone healthcare. For lower middle income families, the odds of postponing medical or dental care were over 3 times higher than high income families, and for upper middle income families, the odds are almost 2 times higher. No statistically significant difference was found between low income and high income families in the postponement of medical or dental care. Experiencing a job loss in the previous three years, having wages cut in the previous year, and not having adequate health insurance were also related to higher odds of delaying medical or dental care.

Delaying medical care is a particularly problematic family cost-saving strategy because receiving regular healthcare can not only lead to early detection of disease but can also help individuals build healthy habits and lifestyles that can reduce the risk of illness (Miettinen, 2014). Yet when family budgets are tight, eliminating healthcare may seem like the best way to free up some cash to pay for other needs. Preliminary results suggest that middle income families may be particularly prone to postponing medical care or dental care as a cost saving strategy. Additionally, not carrying adequate and affordable health insurance and experiencing economic shocks like job loss and wage cuts put families at risk to delay healthcare. Although the Affordable Care Act has increased access to health insurance for many individuals and families, the increasing deductibles and premiums of both employer-based and non-employer based health insurance plans may contribute to a climate in which families continue to postpone preventative medical care and life-saving tests and treatments.

### References

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