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Exploring Differences in Trust in Doctors Among African American Men and Women

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Abstract

Objectives

Low trust in doctors may partially account for African Americans' adverse health outcomes. Understanding the drivers of low trust can guide health care policy to improve trust and delivery of health care for African Americans. This study examines gender differences in trust in doctors among African Americans and explores factors differentially associated with low level trust for men vs women.

Methods

and Measures: Cross-sectional analysis of 3649 African Americans using data from the 2003–2004 Community Tracking Study Household Survey, including 4 items measuring trust in doctors (range, 1 = lowest trust and 5 = highest trust). Items were assessed separately and as an index measure. Linear regression analyses adjusted for multiple con-founders and accounted for complex data sampling.

Results

Overall, men were less trusting of doctors than women. However, men differed from women only on 2 trust measures: "doctor influenced by insurance rules" (adjusted mean scores = 2.48 for men and 2.79 for women, $p = .001$) and "doctor performs unnecessary tests" (adjusted mean score = 4.00 for men and 4.28 for women, $p = .010$). Common correlates of low trust in men and women included less than high school education, age of at least 65 years, and having no usual source of care. Unique correlates of lower trust for men included rural living and no doctor visit in the preceding year. Unique correlates for women included low income and poorer health status.

Conclusions

There are differential predictors of low trust among African American men vs women, underscoring the need for gender-based and health care system-level approaches to improve African Americans' trust and health outcomes.

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Keywords

patient-physician relationship; gender; African Americans

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