INDEX

Abortion	benefits for mothers, 15
care, 40, 41, 42, 43, 45, 46, 47, 48,	cesarean births, 31
50, 51, 54	in childbearing process, 19
private insurance coverage for, 42,	control variables, 19–20
50, 53	discontinuation of, 21
providers, 42, 44, 46, 54	exclusive breastfeeding, 28–31
public insurance coverage for, 42,	vs. formula-feeding, 15
53	logistic regressions of, 24–25
services, 41, 46, 47	maternal health, 16
Abortion Coverage in Health	negative pregnancy outcomes, 17
Insurance Act, 40	outcome, 19–20
Abortion-providing facilities, 42, 43,	and poverty status, 19
50	predictor, 19–20
ACS. See American Community	and pregnancy intentions, 19, 20
Survey (ACS)	pregnancy planning in, 14
Affordable Care Act, 40	prevalence of, 15
Alcohol abuse, 282	privacy for, 16
American Community Survey (ACS),	professional women, 17
152	race and ethnicity in, 17
Andersen's model, 214	self-reported metrics, 20
Association of Women's Health,	survival of, 26, 27
Obstetric and Neonatal	
Nurses (AWHONN), 108	Canadian Nurses Association (CNA),
Auxiliary Health Care, 146, 149, 151,	108
152, 153, 159	Care-seeking preferences, 57
	CEFM. See Continuous electronic
Baby scan, 73	fetal monitoring (CEFM)
Behavioral functioning, 237	Centers for Disease Control (CDC),
Behavioral model, 81–82, 253	217
Behavior problems, 234, 235-236	Chronic obstructive pulmonary
Billing insurance, 53	disease (COPD), 280, 295
Black segregation, 149, 150, 160, 161,	Cigarette smoking, 283, 289
162	Community health component,
Breastfeeding duration, 15–17	148
analysis of, 21	Composite International Diagnostic
analytic strategy, 20-22	Interview Short-Form
behavioral problems, 15	(CIDI-SF), 237–238
2.0	. 4

302 INDEX

Consultation, 62, 73 Continuous electronic fetal monitoring (CEFM), 101	HCWs. See Healthcare workers (HCWs) Health behavioral model, 214–215,
Costs of accepting private insurance, 50–53	216, 226 Health-care system, 4
Costs of accepting public insurance, 48–50	Healthcare utilization, 214–216 Healthcare workers (HCWs), 60,
County Business Patterns (CBP), 152, 153, 163	65–67, 69, 70, 71, 72, 74 Health equity, 138, 140
Critical Race Theory (CRT), 195, 196, 203	Health inequalities, 128 Health Insurance Act, 40 Health need and demographics, 259
Demographic characteristics, 254 Descriptive statistics, 239–241	Health need characteristics, 254 Health outcomes, 214–216
Diabetes care, 129, 134, 135, 137, 138, 140	Health-seeking behaviors (HSB) external factors, 82
Diabetes inequalities, 129, 130, 133	infertility on, 84 predict, 81
Diastolic blood pressure (DBP),	probability of, 87 rates of, 80–81
Disparities, 148, 149, 162	sociodemographic differences in, 81
Dual diagnosis, 175 psychiatric disorder, 184 vs. SUD only, 184	Health service utilization, 81–82 Hierarchical linear model results, 241–244
EACH Woman Act, 40 See also Abortion Coverage in	Hyde Amendment, 40, 42 Hypertension
Health Insurance Act	cross-narratives, 199–200 cultural identity, 200–202
Empowerment, 71–73 Ethnic minorities, 5–6, 9	experiences of, 195 individual narratives, 197–199
Federal poverty level, 49–50	steps for narrative construction, 197
Female deaths, 285 Female smoking, 281–285 workplace vs. home, 281–285	universal health care, 202–203 Hypothesis, 84–85
Foreign-born elderly Asian Americans, 224–225	Immigrant, 233, 234, 235, 236, 237, 240
Gender and health care, 4, 5	Immigrant characteristics, 173–174, 174–175
Gender equality, 281–282 General practitioners (GP) practices,	Immigration, 151, 152, 154, 160, 161 162
62, 66–67	Inequalities, 148

Index 303

Infertility, 83-84 mitigating and aggravating factors, Influenza vaccination, 61, 66, 69, 71, 104 - 108overwork, 104-105 Insurance acceptance policies, 45 positive and negative birth Insurance coverage, for abortion, 40, experiences, 105 unethical mistreatment, 106 Insurance coverage policies, 42 work-family conflict, 104 In vitro fertilization (IVF), 80 Measles-mumps-rubella (MMR) IVF. See In vitro fertilization (IVF) vaccine, 71 Medicaid coverage, 41, 45, 46, 47 Labor and delivery (L&D), 100 Medicaid reimbursement, 46, 49 Language barriers, 129, 132, 135, 138 Medical discourse, 131-136 Language concordance, 130, 136, 139 Mental health problems, 175–177 Language discordance, 129, 131, 132 Micro-level patient-provider Language preference, 178 relationship, 256 Language skills, 136–139 Minority communities, 146, 147, Latent variables, 221–222 151 Limited English proficiency (LEP) Anglo-Saxon culture, patients National Abortion Federation with, 128 (NAF), 42 data analysis, 130-131 National Health Interview Survey data collection, 130-131 (NHIS), 217 design, 130-131 National Survey of Family Growth Latino patients with diabetes, 130 (NSFG), 83, 85–86 low-income, 133, 134 National Survey of Fertility Barriers research approach, 130-131 (NSFB), 83 sample description, 130 Nativity, 173–174, 174–175, 178 South American with, 133 Neighborhood contexts, 235-236 US Latinos with, 129 Neighborhood social characteristics, US minorities with, 129 238 - 239Neighborhood structural Macro-structural healthcare context. characteristics, 238 256 - 257North American Industry Maternity Support Survey (MSS), Classification System 101, 112-113 (NAICS), 152 Maternity support workers (MSWs), 100, 101 - 102Office of Management and Budget cesarean sections, 106-107 (OMB), 152 common medical procedures, 106 Ordinary least squares (OLS), 111 emotional burnout, 102-104 Ordinary least squares (OLS) emotional intelligence (EI), 105 hospital wellness programs, 107 regression models, 111, 114, hypotheses, 107-108 115, 116

304 INDEX

Parental legal status, 234, 237
Perceived racial—ethnic
discrimination, 179
Pertussis, 60, 66, 71, 73
Phone interview, 43
Poverty, 128, 129, 132, 135, 137, 138, 139
Predisposing characteristics, 254–255, 259
Pregnancy, 60, 61, 63, 64, 66, 69, 72
Primary care providers (PCPs), 260
Professional quality of life
(PROQOL), 109
Psychiatric disorders, 174–175
Public Health England (PHE), 61, 62, 65

Race and ethnic differences, 252–253
Race and ethnicity, 258
Racial/ethnic minority, 146, 147, 150, 151, 152
Racial-ethnic orientation, 178
Racialethnic social preference, 178
Racial minorities, 5–6, 8, 9
Rape, 42, 46
Reimbursement, 42, 46, 49, 50, 52, 53
Relational autonomy, 61, 63, 71, 74
Research hypothesis, 216–217
Residential segregation, 146, 147, 149, 151, 152, 160

Segregation, theories of, 150–152 Smoking avoidance, 291 Social context, 60, 63, 65 Social factors, 255–256, 259 Social influences, on vaccination decisions, 63-65 Social Network Index, 179 Social support, 179 Socio-economic status, 4 Socio-political contexts, 61, 66 State law prohibition, 46 State-level insurance mandates, 82 - 83Stressful life events, 179 Structural barriers, 129, 136 Structural equation modeling (SEM), 218, 219 Substance abuse, 173-174, 175-177 Substance abuse centers, 148 Substance use disorders (SUDs), 172 Systolic blood pressure (SBP), 194

Thematic analysis, 62, 63 Traditional health insurance, 161 Transcripts, 44, 45, 131

Urban outcomes, 150–152 Urban sociology, 150 US-born elderly Asian Americans, 222–224 US National Health Interview Survey (NHIS), 8

Vaccination behaviour, 71 Vaccination decisions, social influences on, 63–65 Vaccine anxieties, 65, 66

Women, 4-5