

INDEX

- Acute Fatty Liver of Pregnancy (AFLP), 107
- Adolescence, 16
- Adverse childhood events (ACEs), 130
 - analyses, 134–135
 - family stability, 132–134
 - health implications, 132–134
 - measures, 134
 - scores/traumatic events, 132–134
- Agency for Healthcare Research & Quality (AHRQ), 151
- AIDS-related mortality, 200
 - comorbidities, 207
 - Jharkhand, 201
 - sociodemographic profile, 204
 - survival functions and clinical indicators, 208
 - survival period, 209
 - univariate and multivariate cox regression analysis, 207
- American Nurses Credentialing Center (ANCC), 150
- Americans with Disabilities Act (ADA), 102
- Antiretroviral therapy (ART)
 - AIDS-related mortality, 200, 201
 - body mass index (BMI), 200
 - CD4+T cell counts, 200
 - interquartile range (IQR), 202
 - Kaplan–Meir survival curves, 204
 - methodology, 202
 - statistical analysis, 202–203
- Behavioral Risk Factor Surveillance System (BRFSS), 132
- Bivariate analyses, 169
- Bureau of Justice Statistics (BJS), 130
- CD4+T cell counts, 200
- Clean Air Act, 157
- Coercive conformity
 - adverse events, 147–148
 - analysis, 152–153
 - data, 150–152
 - institutional theory, 148
 - mandatory reporting, 147–148
 - mechanisms, 149
 - patient safety, 147–148
 - performance improvement, 149
 - regulatory policy, 155
- Commercial insurance, 172
- Contextual-level hypotheses, 57
- Control variables, 22–23, 120
- Coronary artery bypass surgery (CABG), 150
- Cost-sharing, 165, 172
- Cyclical vomiting syndrome (CVS), 107
- Depressive symptomatology, 21–22, 24
- Descriptive analyses, 168
- Descriptive statistics, 121
- Emergency Room (ER) utilization
 - contextual-level hypotheses, 57
 - contributions, 55
 - health disparities, 52–54
 - implications, 62–63
 - individual and contextual differences, 51–52
 - individual-level hypotheses, 57
 - individual-level predictors, 59–61
 - limitations, 65–66
 - methodology, 57–58, 63
 - older adults, 54
 - policy implications, 63–64
 - practical implications, 64–65
 - research, 56–57, 66–67
 - rural health clinics, 50–51

- SouthEastern United States, 54–55
- study aims, 55
- study design, 57–58
- theoretical implications, 63
- underserved populations, 50–51
- Epistemic violence, 105
- Everyday discrimination scale (EDS), 5
- Family caregivers, older people
 - age and disease profile, 187
 - campus hospital, 190–191
 - community support, 190
 - data collection and analysis, 186
 - disease profile, 188
 - with entitlement, 192–194
 - without entitlement, 191–192
 - frequent referrals, higher centers, 193–194
 - inadequate communication and information, 193
 - inadequate housing, 189–190
 - long-term care, 194
 - neighborhood infrastructure, 189–190
 - paid supportive caregivers, unavailability, 188–189
 - physician and health care needs, appointment of, 192
 - profile, 186, 187
 - public health, 195
 - religious beliefs, 185
 - residential academic campus, 185
 - seeking appointment, 193
 - study sample, 185–186
- Family Medical Leave Act (FMLA), 102
- GDF15, 109
- Gender variations, 117, 121–123
- Healthcare access barriers
 - data analysis, 79–80
 - data collection, 78–79
 - eco-systems theory, 76
 - infrastructure barriers, 80
 - research design, 77–78
 - resilience theories, 76
- Health-care services, sex differences
 - cardiovascular disease (CVD), 45, 34–37, 41
 - comorbidities, 35, 37, 39–40, 44
 - cost, 36–37
 - demographic characteristics, 36
 - diabetes, 34–38
 - health status, 36
 - Indian Health Services (IHS), 35
 - inpatient/outpatient services, 36
 - measures, 36–37
 - mental health, 44
 - methods, 35–36
 - substance use disorders, 44
- Health care spending (HCS), 164
 - alcohol consumption, 169
 - cost-sharing, 173
 - fruit consumption, 169
 - out-of-pocket spending (OPS), 169
 - predictors, 166
 - smoking behavior, 169
- Health disparities, 4–6, 12
 - analytic strategy, 8
 - data, 6
 - definition, 4–6, 12
 - dual eligible patients, 53–54
 - ethnicity, 52–53
 - ordered logistic regression models, 8
 - race, 52–53
 - reproductive justice, 109–111
 - rural residence, 53–54
 - society inequality regimes, 4
 - variables, 6–8
- Healthy People 2020 (HP2020), 131
- Hyperemesis gravidarum (HG)
 - abnormalities, 99
 - childcare, 100–101
 - diagnosis, 99
 - maternal/fetal outcomes, 99

- pregnancy discrimination, 102
 - pregnancy fear, 101
 - psychosocial impacts, 100
 - quality of life, 100
 - reproductive justice, 109–111
 - therapeutic termination, 101–102
 - troubling maternal ideology, 111
 - untreated and mistreated women, 98–99
 - women exaggerate, 101
 - women's health-care disparities, 109–111
- Independent variables, 22
- Individual-level hypotheses, 57
- Individual-level predictors, 59–61
- Infrastructure barriers
 - cost and insurance barriers, 80–82
 - language barriers, 82–83
 - medical facilities distance, 83–84
 - scheduling appointments providers, 84–85
- Institutional theory, 148, 149
- Intragroup discrimination, 27–28
- Kaplan–Meier survival curve, 203
- Longitudinal mixed model analysis, 166
- Magnet accreditation, 152
- Mallory–Weiss syndrome, 106
- Maternal ideology, 98, 111
- Maternalisms, 98, 103, 111
- Medical errors, 147
- MedPAR data, 151
- Mimetic conformity, 149
- Morning sickness, 99–103
- Multivariate analysis, 170
- Multivariate regression approach, 166
- National Institute on Minority Health and Health Disparities (NIMHD), 140
- Nausea and vomiting in pregnancy (NVP), 103
- Negative provider relationships
 - discrimination, 87–88
 - ignoring patient concerns, 86
 - limitations, 91–92
 - older participants, 90
 - personal relationships, 88–89
 - rushed/rude provider interactions., 85–86
- NVivo 11, 186
- Occupied status, 17–18
- Ordered logistic regression models, 8
- Organization of Economic Cooperation and Development (OECD), 165
- Out-of-pocket spending (OPS), 165, 174
- Paid supportive caregivers, 188–189
- Patient Safety Indicator (PSI), 151, 152
- Patient Safety Organizations (PSOs), 148
- Perceived discrimination
 - counts, 22–23
 - depressive symptomatology, 21, 24
 - mean, 23
 - research, 19–20
 - sociodemographic variables, 25
 - standard deviations, 23
- Phenergan, 106
- Pregnancy Discrimination Act (PDA), 102
- Professionalism, 157
- Purchasing power parity (PPP), 166
- Racial/ethnic identity, 22
- Racialized discrimination
 - analytic strategy, 8
 - data, 6
 - everyday discrimination scale (EDS), 5

- health disparities, 4–6, 12
- National Asian American Survey (NAAS), 5, 12
- ordered logistic regression models, 8
- society inequality regimes, 4
- variables, 6–8
- Racial stress, 116
- RAND Health, 165
- Reglan, 106
- Reproductive trauma, 98, 109
- Ritual conformity, 148
- RYR2, 108
- San Bernardino County, 130
- Self-identification
 - adolescence, 16
 - Antillean immigrant history, 18
 - control variables, 22–23
 - Cuban immigrant history, 18
 - depressive symptomatology, 21–22
 - descriptive statistics, 25
 - independent variables, 22
 - intragroup discrimination, 27–28
 - method of analysis, 23
 - occupied status, 17–18
 - perceived discrimination. *See* Perceived discrimination
 - research, 19–20, 20–21
 - sample, 21
 - skin tone, 19
 - sociodemographic variables, 25
 - stress process framework, 20
- Skin tone, 19
- Social determinants of health (SDOH), 130–132
- Society inequality regimes, 4
- Sociodemographic variables, 25
- Socioeconomic status, 119–120
- Socioeconomic variations, 117–118, 123
- Stress process framework, 20
- Supplemental analyses, 123
- US health care, 165, 172
- US News & World Report (USNWR), 150
- Variables, 6–8
 - controls, 7
 - experiences, 6
 - hate crime, 7
 - institutional racism, 7
 - interpersonal racial discrimination, 6–7
 - self-reported health, 6
- Wernicke's encephalopathy (WE), 99
- White fragility
 - alternative explanations, 118
 - control variables, 120
 - data, 118–119
 - descriptive statistics, 121
 - gender, 121, 119–120, 117
 - hypotheses, 118
 - racial stress, 116
 - socioeconomic status, 119–120
 - socioeconomic variations, 117–118, 123
 - statistical procedures, 120–122
 - supplemental analyses, 123
- Zofran, 106