

Uncovering Healthcare Gaps: The Need of Mobile Clinic in Rural Iowa Communities



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BACKGROUND

- Lack of health insurance, limited income, and linguistic and cultural barriers all contribute to many unmet healthcare needs.
- Needs must be assessed on a community level, not based off of researchers, policy makers, and practitioners.
- Research on the access in the rural Midwest to healthcare is limited for the Latino community.
- University of Iowa Mobile Clinic is a student-run volunteer organization
- In service since 2013
- Provides **basic** healthcare measures to the following communities:
 - ❖ West Liberty
 - ❖ Columbus Junction
 - ❖ Iowa City
- These communities are known to be **rural, low-income, and uninsured**

Purpose:

To raise awareness of the services Mobile Clinic provides. To figure out why West Liberty, Columbus Junction, and Iowa City were chosen as locations for intervention. To look at what populations are/are not being reached. How to improve on what needs are not being met.

Methods

Questions addressed:

- ❖ Is Mobile Clinic providing ethical, up-to-standard healthcare?
 - ❖ Are there gaps in the services that already exist and Mobile Clinic?
 - ❖ What improvements are still needed to fill these gaps?
- Compiled and analyzed 2013-2017 University of Iowa Mobile Clinic data through clinic reports from Mobile Clinic coordinators.
 - Variables includes: language, total patients, who the patient visits with, immunizations, and screening tests.
 - In order to create a profile of the local community for comparison we compiled demographic data from: Mobile Clinic, Free Clinic, Iowa City, and Columbus Junction official websites to gather demographics and existing healthcare resources in the state of Iowa.
 - Compared the demographics of West Liberty, Columbus Junction, and Iowa City with clinic users.
 - Collected and reviewed the Mobile Clinic Constitution to validate its ethical standards and quality.
 - Assessed the lack of access healthcare services in West Liberty, Columbus Junction, and Iowa City by investigating the operation times, cost, location and language barriers.

Results

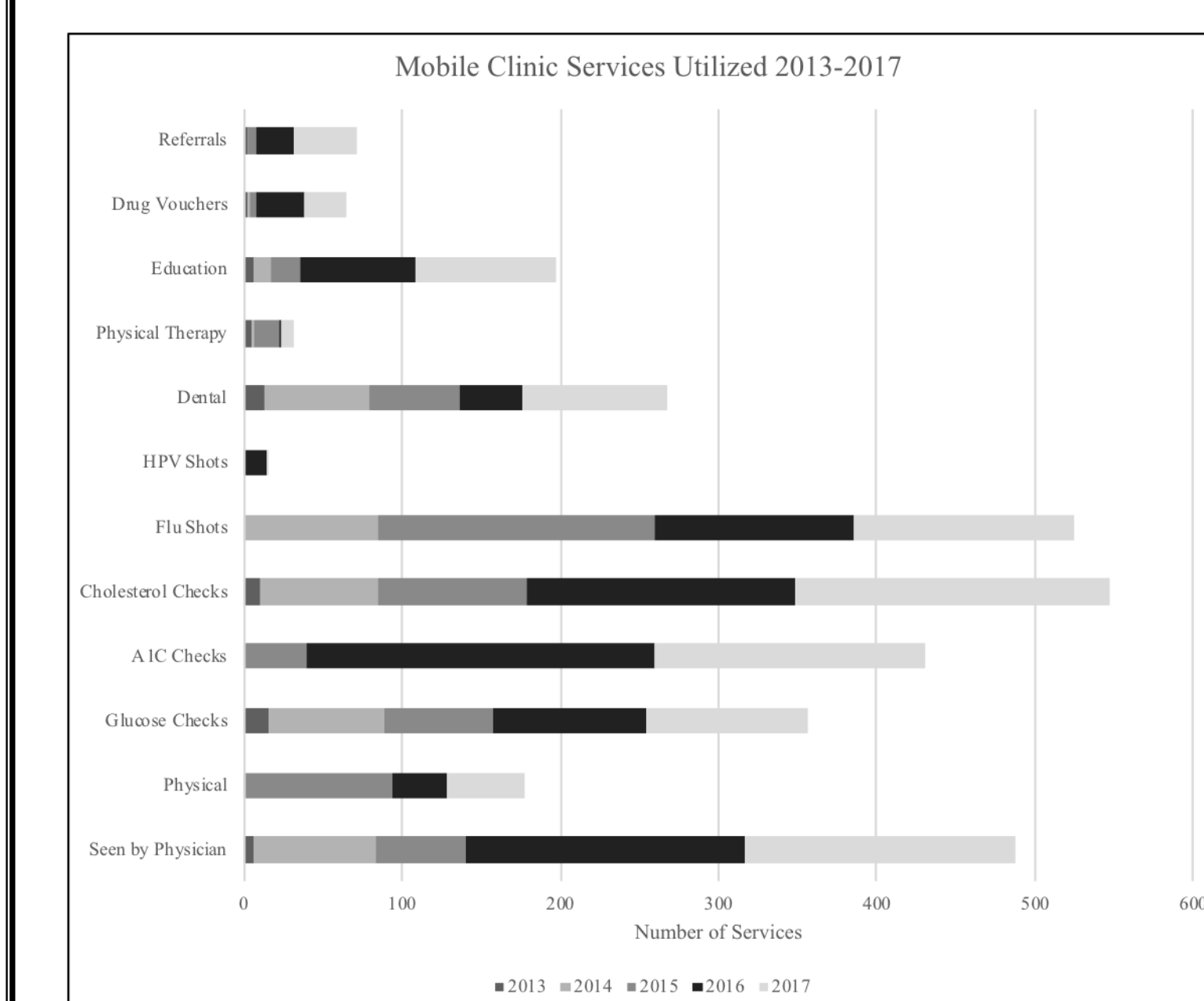
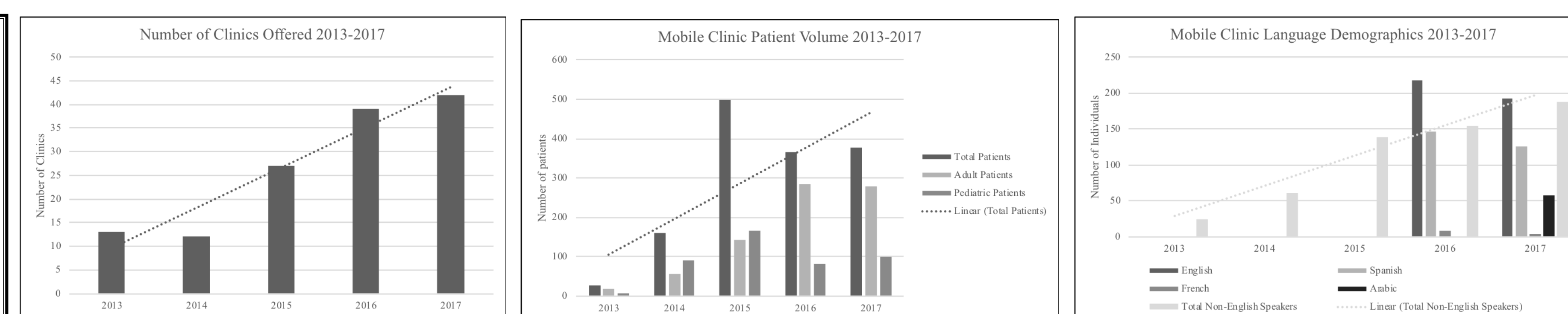
Demographics

General: West Liberty and Columbus Junction share a majority race of Hispanic with 50.2% and 47.4%, respectively. White ethnicity followed Hispanic (44.4% and 38.5% respectively), with Asian (4.6% and 11.9% respectively) coming in 3rd for racial ethnicity in West Liberty and Columbus Junction, and African American's < 1.7%. Iowa City, however, has unique demographics with 5.3% Hispanics, 77.2% white, 9.94% Asian, and 6.35% African American. All three populations have between 80-90% of U.S. citizenship. Language barriers are present in each community with Spanish being the top non-English language. A strong migration of people from Mexico and China have been recorded.

Mobile Clinic: Between 2016-2017, Mobile Clinic averaged 371.5 total patients, 135.5 of which were native Spanish speaking. Since 2013, the number of clinics offered, services utilized, total patients attending, as well as non-English speakers attending are on an upward trajectory. Based on demographic data, it is estimated that 622.5-2,895.5 native Spanish speakers in West Liberty, Columbus Junction, and Iowa City are still in need of additional healthcare services.

Resources

West Liberty, Columbus Junction, and Iowa City have limited healthcare resources. In West Liberty, the closest Women in Crisis center (WIC) that provides nutritional counseling, health referrals and an immunization clinic 2 months-18 years is in Muscatine (15 miles away). Trinity Muscatine Public Health and Mercy Family Medicine West Liberty provide primary care to the West Liberty community. Although these two services are available they are **not free**. In Columbus Junction there is a WIC center and Cheseia Louisa County Clinic that offers free medical services **depending on patients income** and no insurance is necessary as this is a federally funded program. These services include: primary care, immunizations, dental care, prenatal care, and pediatric care to medically underserved and underinsured populations. **Iowa City has significantly more services** than West Liberty and Columbus Junction. They have a WIC and planned parenthood to assist with maternal and reproductive health. In addition they have **free medical and dental clinics** that provide care Monday-Thursday evenings. Services offered include: general medical care, chronic care, dental services, eye care, and prescription medications. Johnson County Public Health has an HIV and hepatitis testing program along with a free, **student-run mental health clinic**. The Emma Goldman Clinic in Iowa City provides women services that include gynecology, birth control, abortions, STI treatment, men services and trans health initiatives.



- On average Mobile Clinic serves **371.5** individuals annually across all three locations.
 - ❖ Of these individuals, **135.5** are native Spanish speakers.
- It can be estimated that between **622.5 – 2,895.5** individuals that are native Spanish speakers need to be reached.

Ethics

- Student run clinics and mobile clinics meet national standards through:
 - ✓ Mobile Clinic Constitution
 - ✓ Annual Reports
 - ✓ Transparency



DEMOGRAPHICS

| | West Liberty Muscatine County | Columbus Junction Louisa County | Iowa City Johnson County |
|---|--|--|---|
| Poverty Rate | 14.5% | 17% | 28.2% |
| Median Household Income | \$54,408 | \$49,167 | \$42,375 |
| Racial Groups | Hispanic: 50.2% White: 44.4% Asian: 4.6% Black: <0.1% | Hispanic: 47.4% White: 38.5% Asian: 11.9% Black: 1.6% | Hispanic: 5.3% White: 77.2% Asian: 9.94% Black: 6.35% |
| U.S. Citizenship | 87.3% | 79.5% | 89.8% |
| Highest rate of medical coverage | Ages 6-17 | Ages 6-17 | Ages 18-24 |
| Disease Prevalence | Diabetes: 9.2% Obesity: 34.2% HIV Diagnoses: 41.9 per 100,000 individuals | Diabetes: 9.8% Obesity: 37.4% HIV Diagnosis: 63.7 per 100,000 individuals | Diabetes: 5.4% Obesity: 23% HIV Diagnosis: 171.3 per 100,000 individuals |
| Harmful Behaviors | Smoking: 15.8% Alcohol Abuse: 18.6% | Smoking: 15.7% Alcohol Abuse: 18.6% | Smoking: 16.9% Alcohol Abuse: 23.6% |
| Global Diversity | México, El Salvador, Liberia | Mexico, Germany, China | China, India, Mexico |
| Native Non-English Languages | Spanish: 40.3% Laotian: 2.1% Pacific Islander: 0.7% Cambodian: 0.6% German: 0.2% | Spanish: 35.8% Chinese: 5.2% Other Indic: 3.3% Other Asian: 1.8% Tagalog: 0.2% | Spanish: 4.22% Chinese: 3.79% Arabic: 1.71% Korean: 0.9% French: 0.8% |

Discussion

Summary of results

We found the communities of West Liberty, Columbus Junction, and Iowa City are primarily Spanish-speaking populations with barriers to overcome when healthcare services are needed. Mobile Clinic ethically serves community members regardless of race, ethnicity, or immigration status by providing means to overcome these healthcare disparities. Translators are provided when needed, and the volunteer-aspect of the healthcare givers aims to minimize discrimination. Since 2013, there has been a steady increase in the need and utilization of Mobile Clinic with increasing migrants amongst Iowa communities.

Implications

Moving forward, Mobile Clinic should continue to diminish disparities by providing accessible, preventative healthcare to underserved communities in and around Iowa City. Not only is Mobile Clinic providing services to the individuals who seek care, but the healthcare professionals and students involved are learning self-evaluation to recognize existing bias. The partnership between Mobile Clinic and the communities not only has been steadily maintained since 2013, but has been growing with the population needs.

Limitations

- Iowa City is largely populated by college students disproportionately.
- 2016 marks a change in Mobile Clinic data collection.
- Discrepancies in Clinic Report data in regards to patients working with physical therapy and dental students.

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