



Getting the Lay of
the Land On
Health:
A Guide for Using
Interviews to Gather
Information
(Key Informant
Interviews)

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The Access Project is a national initiative of The Robert Wood Johnson Foundation, in partnership with Brandeis University's Heller Graduate School and the Collaborative for Community Health Development. It began its efforts in early 1998. The mission of The Access Project is to improve the health of our nation by assisting local communities in developing and sustaining efforts that improve healthcare access and promote universal coverage with a focus on people who are without health insurance.

If you have any additional questions, or would like to learn more about our work, please contact us.

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Using Interviews to Gather Information

This is a guide designed to help staff of community groups to assess the potential usefulness of using interviews of key members of the community to find out information about health care issues, the health care system, or community organization itself. It is also a guide to conducting and using the results of these interviews, which are called “key informant” interviews by researchers. It is divided into sections that describe the purposes of key informant interviews, and then tackles issues to consider before, during and after you complete your interviews. Several case examples of how community groups have used this information-gathering tool are included throughout the guide. We hope you will find this information easy to understand, and useful.

The Key Informant Interview - What is it?

The key informant interview has a very specific purpose. It involves identifying different members of your community who are especially knowledgeable about a topic (who we call "key informants"), and asking them questions about their experiences working or living within a community or health care system. You seek out people with more than average knowledge to interview. These interviews are usually conducted face to face with your informants, using either an outside interviewer specifically hired to conduct the interviews, or by a member (or members) of your organization. The length of these interviews can vary, and will depend on the number of questions you decide to ask.

What Purposes Can Key Informant Interviews Meet?

Key informant interviews take time to conduct so it is important to be clear about what you would get out of this information-gathering approach. The interviews provide structure and consistency to information-gathering and are especially suited to getting a picture of a particular environment and how it works – a local health system, political relationships, community organization, etc.

You should consider whether other information-gathering techniques might suit your purposes better. For example, would collecting existing data and reports on health access and the health system provide the information you need on health status or the numbers of uninsured people? Would focus groups provide insights about how a segment of the community thinks about specific health issues? Key informant interviews provide a systematic way of describing an environment that is particularly beneficial in the following situations:

Initial assessment of a new community and/or issue:

This tool is well suited to situations where you are new to the community and/or a specific issue. It will allow you to target people with knowledge and expertise in order to ask specific questions that will give you an initial overview of what the community and its health system are like. This overview will include major issues in the community, as well as some of the details about these issues. The

process will allow you to check the assumptions you may have about the community and/or issue against what is really going on.

Begin relationship-building with members of a community:

Key informant interviews have the potential to give you access to many different members of your community because you will go to a variety of people including, for instance, patients, employees working within the health care system, and community leaders. As you conduct these interviews, then, you are not only gathering important data, but also making future contacts for your organization. Taking the time to listen to someone shows that you value his or her thoughts, which is a positive basis for later follow-up.

As a state consumer health advocacy organization based in Cleveland, UHCAN-OHIO (Universal Health Care Action Network of Ohio), had only a small membership presence in Columbus. Aside from building organizational coalitions around the proposed conversion of nonprofit Blue Cross, UHCAN-OHIO had done little local neighborhood organizing. After receiving a grant to initiate new community benefits work in Columbus, UHCAN-OHIO chose to use key informant interviews with two goals in mind. First, the group was looking to identify people who were passionate about changing the area's health system. Second, they wanted to use interviews of people living and working in underserved areas of Columbus to understand what the pressing health issues or concerns were. Having hired a new organizer for this project, the key informant interview process served as a positive way to introduce the new staff and the organization to community groups.

Determine organizational strengths and challenges:

Key informant interviews can also be used to assess internal organizational development and planning needs. They can allow your organization to reflect upon and evaluate programs already in place. They are also a means to hear from people outside your organization about their perceptions of both your group and the environment you are facing. This sort of data will allow you to target strengths and weaknesses of your activities, and make changes as necessary.

The Lynn (MA) Health Task Force, a thirteen-year old local consumer advocacy organization, decided to undertake a planning process to strengthen its work. The group determined that planning required an understanding of the organization's strengths and weaknesses, as well as a sound understanding of what changes were occurring in the health care environment. Key informant interviews of people inside and outside the organization were a major tool to gather the information needed.

What Kind of Data Are Produced?

As described above, key informant interviews can help describe an environment or situation with qualitative data. This type of data does not give you statistics or numbers (quantitative data), but rather documents the knowledge and experiences of people using their own words. One principal benefit of the key

informant interview is its ability to generate the type of detail that helps to tell the story of accessing health care in a community or how the local health system works.

If you interview different types of people you may be able to compare and contrast responses. You might want to look for things such as: Are there similarities or differences between types of people in their experiences? Are there similar attitudes about the health care system between patients and people working within the health care system? Do people's experiences coincide with the actual policies in place in an institution or program?

You may also be able to identify common themes. Do most people mention a shortage of primary care providers? Is language interpretation an issue due to a growing Latino population?

As part of a new local community organizing effort, OHAC (Oregon Health Action Campaign) conducted 16 key informant interviews in a two-county area. Among the findings were:

- *Community providers and community residents identified primary care shortages as an access problem in one county and as a problem for people on Medicaid in both counties. However, the state Medicaid agency stated that they had no documentation of a primary care provider access problem*
- *Almost all community people and providers described uninsured clients with high bills that they struggled to pay*

Planning the Key Informant Interviews

What Do You Want to Know?

Conducting key informant interviews requires careful preparation and planning. The following sections detail the planning and implementation steps.

The first step is to think about what you want to find out from your interviews. What are the issues you want to ask about? Are there very specific problems or issues within your community that you want to understand? Brainstorm a list of the things you might want to cover in your interviews. From there, draft questions that will get you this information. This process takes careful thought and time. You will have to consider wording for the questions. Does the question you are asking make sense? Will it get you the information you are looking for? Do the questions leave room for people to “tell their story”? Keep in mind that the longer the interview and number of questions, the more information there is to look at and interpret after the interview is complete.

While community groups will not approach these interviews as a rigorous, academic exercise, it is important to have specific questions that will be consistently asked of all interviewees. You will want to make some of these questions narrow enough so that you get the specific information you are after.

The use of “prompts” to draw out more specific information about a topic or question is one way to help people think more about what they know. The interviewer gives the person time to answer the main question first, and then uses the prompts to encourage the person to provide more detail or address specific issues. In Oregon, the following prompts were used for questions about community health and access to care:

What are major health issues you see in your community, especially among low income and underserved people?

Prompts:

Are there transportation or language interpretation issues? Dental care? Health can include public health -- things like violence prevention or AIDS education.

Where do people go for health care?

Prompts:

For primary care? Emergency care? Prescriptions? Mental health? Dental? Does a person’s health coverage (Medicaid, uninsured, private insurance) affect where they go for care?

What happens to uninsured people needing hospital care?

Prompts:

What hospitals do they go to? Does the hospital give charity care? How do people find out about it? Do people get bills from the hospital? What happens if they can’t pay the bill?

In Appendix A you will also find sample interview questions. These are a synthesis of questions used in a variety of communities to get an overview of health and health access issues. Also included is a set of questions used by groups in getting information about their own organization and the challenges it faces. These organizational questions were asked of board members, members and people outside of the organization.

You will want to test out your questions and wording by conducting a few initial interviews. You can then refine your questions based on this test.

Who To Interview?

Key informants should be people with above average knowledge of the issues of concern to you. You, therefore, want to carefully select people who will be especially informative, as well as give you a variety of perspectives.

In Oregon, OHAC wanted to understand what the local health system was like for the growing low income Latino community in a two-county area. Key informants included:

- a secretary in a local church who serves as outreach worker and translator for many people in the largely Latino congregation*
- staff of a labor union of (largely Latino) agricultural workers*
- a Latino health educator from a Latino safety net clinic*
- maternal and child health nurses and outreach staff in the local Health Department*
- director of the largest safety net health center in the two-county area*
- local hospital administrator*
- social services and financial directors of a large area hospital*
- a Latino physician in private practice and active in community service*

If you are new to a community and want to obtain an overview of the health system you might want to consider interviewing people from the following categories:

- Safety net providers such as health centers and health departments
- Hospital administrators and social service staff
- Teachers and school nurses in area schools
- Grassroots community groups such as Head Start, community action agencies, neighborhood organizations, etc.
- Local elected officials
- Religious institutions

It is important to decide on a geographic area to target for your interviews. Do you want information on one neighborhood or more? Which neighborhoods do you want to target? Are you going to try to target the entire community? When making this decision, consider both the time and resources (money, people to conduct the interviews, etc.) you have available.

It is good to interview different types of people. Diversity in interviews can provide a way to compare and contrast what you learn. For example, if perceptions about access to care differ significantly between area providers and those who serve the uninsured, you will have gained important information for how you might start to tackle access improvement in the community. If applicable to your community, you should try to include people from different ethnic and racial backgrounds. The goal is to generate data from your interviews that reflect the diversity of your community, and give you a variety of experiences to compare.

How Many People to Interview?

You will want to set a ballpark figure of how many people you want to interview. This decision is largely a matter of time and resources. (Remember! – as described below you will have to write up and analyze all of the interview information.) At a minimum, you will probably want to interview eight to twelve people with particular knowledge or expertise. This should be a sufficient number to begin to get sense of the environment and to identify themes. If you want to use these interviews as a vehicle for organizing in the community, do as many interviews as your resources allow.

UHCAN-OHIO conducted over 50 key informant interviews to initiate their new local organizing work in Columbus. The interviewees were drawn from people who lived or worked in lower income neighborhoods. UHCAN's initial interviewee list started out small because the group was unsure about whom to interview, but the list grew as interviewees suggested other people to interview. Many of those interviewed were not involved in health care, but were familiar with community resident needs.

In Lynn, MA a locally based volunteer community health advocacy group used key informant interviews to help inform their strategic planning process. Ten people were interviewed including four steering committee members, three community members knowledgeable about community needs, and three members of the local medical community. This proved to be a sufficient number of interviews to identify themes around community health needs and areas of strength and weaknesses for the group.

An initially smaller number can always be added to later on. You may also find that once you have an overview of the environment and your work progresses other information-gathering techniques such as focus groups, community forums, or surveys may be more helpful.

Who Should Conduct the Interviews?

There are several factors to consider in deciding who will conduct the interviews including:

Time. This is a major factor. Interviews will need to be scheduled, conducted, written up, and analyzed. A rule of thumb is that preparation and follow-up activities can easily take up to twice the time of the interview itself. The interviewing process should not drag out over too long a period, so you will want someone who has adequate availability within this timeframe.

Skills. The interviewer must possess specific skills such as: the capacity to listen well, ability to write and take accurate notes, good memory, comfortable meeting new people, attentive to detail, and strong communication skills. You can use the interviewing process as an opportunity to further develop skills amongst your leadership by pairing more experienced people with those new to this type of activity.

Consistency. It is best to have one or two people/teams conduct interviews so that knowledge and experience about how best to frame questions is built up. A limited number of interviewers greatly facilitates identification of themes since one or two people have heard all of the information.

Inside vs. Outside. You will have to make a decision about whether to have someone from your organization conduct the interviews, or to have someone from outside perform the work. Considerations include:

Insider Pro:

- will have a chance to form relationships with the interviewees
- will have a clear sense of what your organization wants to accomplish with the interviews
- cost is in time, not cash
- could develop new skill set within the organization

Insider Con:

- does not ensure confidentiality of the informants
- may not have an "objective" view of the situation
- may mean other work/activities must be put aside
- may require additional training and supervision

Outsider Pro:

- confidentiality of the informant is assured so some interviewees may be more forthcoming
- the interviewer may see things that an insider could miss due to objectivity
- time to conduct interviews intensively
- skills and experience

Outsider Con:

- person may not be as familiar with your organization and its goals
- money required (unless in-kind contribution is made available)
- may not be as helpful at applying what is learned to the planning process

As part of their strategic planning the Lynn (MA) Health Task Force used an outside consultant to conduct (confidential) interviews of people within and outside the organization. The group wanted honest feedback about what it was doing well, what it could improve, and about how it was perceived by different segments of the community. They felt that an outside person would be more likely to get more open and direct information.

Practicing

Doing practice interviews is a final preparatory step, especially if you will conduct the interviews yourself. Interviewers should run through all of the questions with other members of your organization or friendly interviewees. By doing this, you will be able to find out if questions are worded clearly and how long the interview will run. It will also give you experience at going through the interview process, taking notes, and identifying themes. The more practice you have, the better you will become, and the more comfortable you will be with the situation.

Conducting the Interviews

The sample interviews in the appendix have scripts that detail how to set up interviews, describe the purpose, start the interview, and close. Much of this process reflects basic courtesies such as informing people about how much time it will take and why you are conducting the interviews.

Confidentiality is an important consideration in conducting key informant interviews. Information you obtain in the interviews should not be directly attributed to any particular individual. Assuring confidentiality will make your informants feel more comfortable sharing information that may be controversial or of a personal nature. Also, reports on the interview results will then focus on the content rather than on who said what.

Although you will have your interviewer questions lined up and in a certain order, do not be afraid to deviate. It is entirely possible that a person may start talking and end up answering any number of your questions without you specifically asking. It is also likely that someone may introduce a subject not included in your questions -- let them talk (within reason!). The point of this whole experience is to allow the person to tell you their story, including their particular knowledge, opinions, and experiences. Give them the space to say what they need to say. If the person deviates completely from the topic, then do pull them back by referring to your questions.

You may also find people who are more reticent or not certain as to what specific information you are seeking. In these situations you will want to use the "prompts" that accompany each general question. As noted above, the prompts are designed to assist interviewees in thinking about the questions and what they know or have experienced.

Whatever track the various interviews take, remember that you should consistently get answers to certain key questions from every person interviewed. This is very important for comparative purposes and to identify themes.

When ending an interview not only thank the person, but also reiterate how you expect to use the information. If one purpose of the interviews is to identify people who might become directly involved in your efforts, either extend an invitation to do so or ask if you may call back when your group is ready to move forward on the issues discussed. Send a thank you letter if appropriate. If you will be issuing a report or developing a plan of action based on the interviews, you may want to offer to share this information when it is complete. This type of follow-up reporting can be part of establishing your organizational credibility.

Recording the Information

After each interview it is important to write up good notes documenting the content of the interview. One advantage of using a two-person team is that one person can take notes while the other person focuses on keeping the interview flowing. Under the best of circumstances, you should write notes immediately after (within a matter of a few hours) the interview. At the least, notes should be done within 24 hours of conducting the interview. We highly recommend this

Analyzing and Reporting the Results

because the longer you wait, the more likely you will forget details. You may forget entire sections of the interview if you wait several days, and if this happens, then important information is lost. The interview itself loses value. During the interview you should record any direct quotes that are particularly effective at conveying a description or experience. These can be used later in your report (without attribution) to give some spark and liveliness.

After conducting several interviews, you will be able to begin analyzing your results. This process involves comparing and contrasting what your informants told you. Overall, you will be looking for common themes among the informants. For example, is there a part of the health care system in your community that all informants are negative about? Are there similar stories about the experience of a particular population? If there are, which parts are similar? All of these questions will help locate themes. It is, of course, also important to look for differences as well. You will want to look for places where different types of people such as providers, patients, or policymakers disagree.

Although there are no shortcuts to thoroughly reviewing and discussing interview information, there are some approaches that may make analysis easier. It is helpful to analyze your initial interviews to identify early themes that can then be added to as more interviews are done. If you will have a lot of interviews you might actually list issues/themes that emerge and tally how frequently these come up. You should also list themes by category or type of interviewee.

Because UHCAN-OHIO was conducting over 50 interviews, staff wrote weekly summaries of interview results and analyzed them. This helped to make analysis manageable and to begin identification of themes early in the process. This review also identified other key informants recommended by interviewees or suggested by the themes. The group then sought out people with particular knowledge on the themes.

As UHCAN-OHIO gained an understanding of local access issues and of who might be interested in becoming active on these issues, the group shifted their methods of information-gathering to approaches that would more directly assist organizing efforts. Staff began to use one-on-one interviews to recruit community members, as well as use focus groups of parents and others.

Reporting on the Results

Once you have analyzed your data, looking for the most important common themes and disagreements, you will then write up your results. The report can follow a variety of forms depending on your original purpose. It may be a simple summary of themes and issues used for internal planning purposes by a small number of staff and leaders. The information may be used to produce a report that will be released to the public along with the announcement of your

organizing effort. You might also make a written summary for use at community forums, larger organizational planning sessions, or in meetings with local policymakers and media.

As described above, taking the time to produce a written document that can be shared with others serves multiple purposes and is well worth the effort. Your results can be used in funding proposals and to help establish organizational credibility in the community. The list of the individuals you talked with can be contained in a final report, but not with any specific attribution. So for example, your report might say "A provider said...." or "A community member said...." rather than "Mr. Jones said....".

In Appendix B you will find some of the key informant summary overheads used by the Oregon Health Action Campaign to report initial results. This material was used at community meetings, in planning sessions, and with the local media to initiate discussion about the identified concerns. It will later be incorporated into a narrative report that also contains information gained from focus groups and access monitoring activities.

Writing a report on your interview results largely follows the process of planning and conducting the interviews. Elements of a report would include:

- An explanation of why you conducted the research: What motivated your organization to do this research? What were some of the assumptions you had about the community and/or issue before beginning the research?
- Who you interviewed by category (e.g. provider, community-based agencies, outreach workers, etc.) and how many interviews you conducted over what period of time. (The actual list of interviewees can be in an appendix.)
- Describe the general focus of your questions. (The interview protocol with the actual questions can be in an appendix.)
- Describe the themes that emerged including use of unattributed quotes when these would help enliven the description.
- Describe what your group concludes or will do as a result of what you learned: are there policy changes you want? Will you launch a new campaign or community organizing effort? Do you want to begin discussions with policymakers to better understand the issues identified?
- Thank the interviewees for their time and cooperation.

Conclusion

We hope this guide proves helpful in making the decision about whether it makes sense for your group to undertake key informant interviews to gather information. The time and effort required for this approach is great, but in the right circumstances it can have a high payoff. If you have made the decision to work on a new issue or in a new community, an early investment in learning through key informant interviews can give you a solid grounding of knowledge about the environment that you will be entering. It will be much easier to plan

your next steps and to engage community people after you have taken to this time to listen and learn. The report of your learning can also become a tool for community discussion and internal planning.

Key informant interviews are one of many information-gathering tools available to community groups. For more information on other tools contact The Access Project.

APPENDIX A

SAMPLE KEY INFORMANT INTERVIEW PROTOCOLS – GENERAL

Introduction: I'm [Janet Smith] from the [Consumer Health Coalition]. We are working on a project to [strengthen community involvement to improve health access in our town/county]. An important first step in our effort is to better understand [community health needs/the area's health system/etc.]. To do that, we are conducting interviews with key community leaders.

The themes that emerge from the interviews will be used [in our planning/to develop a community training/to structure community forums and training/etc.]. While we will use the themes from the interviews, the interviews themselves will be strictly confidential. [If we develop a report about the themes, we would list the names of all the people we interview (if you agree)]

Your knowledge would be very valuable and we hope you could make yourself available for in interview. The interview will only take [30/45/60] minutes. Could we schedule a time to time to meet?

NOTE: The following are sample questions. Items in parentheses are “prompts” that can be used by the interviewer to elicit more information around a particular subject.

Who

1. Tell me about yourself/your organization.

(Mission? How long in the area?)

(Services provided or issue work?)

(How do you define your organization/community/service area?)

Health

2. What are major health issues you see in your community, especially among low income/underserved people?

(Different issues for different segments of population?)

(Are there transportation, language translation, cultural or other issues?)

(Health may include things that are not strictly medical like violence prevention, AIDS education, etc.)

3. Where do people go for health care and what is their experience like?

(For primary care? Emergency care? Mental health? Prescriptions? Substance abuse?)

(Does a person's coverage, such as Medicaid, uninsured, or private insurance, affect where people go for care?)
(What is quality of care like at major sources of care?)
(Are there language interpretation services available?)
(Are services located in convenient locations?)

4. What happens to uninsured people needing hospital care?

(What hospitals do they go to?)
(Does the hospital give charity care? How do people find out about it?)
(Do people get bills from the hospital? What happens if they can't pay the bill?)

5. Are you aware of any major new developments taking place in the health system?

(Are there any hospital mergers? Closings? Sale of hospital?)
(New access programs? Health improvement initiatives?)

Community and Politics

6. What are community advocacy groups in the area like?

(What kinds of activism is there among underserved people? What issues have mobilized people?)
(What groups/organizations are involved with underserved?)
(Do community/advocacy groups work together? How?)

7. What do you think could encourage and support more community involvement/advocacy around health issues:

(What are barriers to involvement -- complexity of issue, lack of information, inadequate staffing?)

8. Are there other people you think we should talk to? Have we covered everything you think is important?

Close: Thank you very much for your time. Your knowledge and insights will be very helpful to us. We expect to complete this phase of our work in [xx] months. At that time we will [hold a community meeting/issue a report/develop a plan]. Would you like to [become involved/receive a copy of the report/hear about our plan]? Thank you again.

SAMPLE KEY INFORMANT INTERVIEW PROTOCOLS –ORGANIZATIONAL PLANNING QUESTIONS

Introduction: I am working with the [Consumer Health Coalition]. The organization has begun a strategic planning process. An important part of the planning is to understand the environment in which the group is operating, as well as what the organization's strengths and challenges are. We are interviewing people inside and outside the organization as part of an information-gathering process.

The themes that emerge from the interviews will be used in the planning process. While we will use the themes from the interviews, the interviews themselves will be strictly confidential.

Your knowledge would be very valuable and we hope you could make yourself available for in interview. The interview will only take [30/45/60] minutes. Could we schedule a time to time to meet?

1. How would you describe the current status of the organization?

(How have you worked with the organization? If so, what has your experience been?)

(What has been effective/worked? What have been its accomplishments?)

(How much membership involvement do you see?)

2. What issues/challenges does the organization face?

(Areas for improvement?)

(New capacities needed?)

(Changes in the environment that the organization will need to address?)

For participants in planning meetings/retreats:

3. What outcomes would you like to see from the planning meeting?

Close: Thank you very much for your time. Your knowledge and insights will be very helpful to us. The [Consumer Health Coalition] expects to complete its planning process over the next [xx] months. [When the process is completed, the group would be happy to share a summary of its new plan. Would you like to receive a copy?] Thank you again.

APPENDIX B

SAMPLE OVERHEADS FROM OREGON HEALTH ACTION CAMPAIGN KEY INFORMANT RESULTS

Page 1: IMPROVING HEALTH ACCESS IN MARION AND POLK COUNTIES

- ◇ The project goal is to improve health access in Marion and Polk Counties by broadening and deepening community involvement in health care advocacy
- ◇ The project is most concerned with traditionally disenfranchised groups – the uninsured, non-English speaking, and low-income people

Page 2: PROJECT PHASES

- ◇ The first phase of the project will focus on gathering information and documentation about the current health access situation for different segments of the population.
- ◇ The second phase will involve outreach to the community so that residents can use the information gathered, as well as their own knowledge, to develop an action plan to engage the community in making specific access improvements.
- ◇ The final phase will be establishment of a permanent Marion/Polk Community Health Advocacy effort to implement the action plan.

Page 3: KEY INFORMANT INTERVIEWS

- ◇ 16 interviews conducted
- ◇ 4 focused exclusively in Polk, 4 in Marion, and 8 others covered both counties
- ◇ Interviewees from area hospitals, health departments, private providers serving uninsured population, clinics and community people

Page 4: COMMUNITY HEALTH ISSUES:

- ◇ general shortage of primary care providers in Polk County generally; shortage of OHP primary care providers in both counties (NOTE: OMAP does not have documentation of any OHP provider shortage)
- ◇ almost no private primary care for uninsured
- ◇ transportation to health services problem in both rural and urban areas; this problem is heightened because so many people must leave their own community to seek care
- ◇ mental health services widely seen as very inadequate
- ◇ language barrier
- ◇ concern about immigration issues is major barrier to OHP enrollment
- ◇ need for health education and disease management, especially among migrant worker community
- ◇ other issues included domestic violence in the Latino community; prescription drug costs for seniors and uninsured; limited availability of adequate non-medical care (therapies, in-home care) services for seniors and disabled

Page 5: EXPERIENCE OF THE UNINSURED:

- ◇ almost all community-based agencies and providers described uninsured clients with high bills that they paid, but struggled to do so
- ◇ similarly many uninsured people are subject to credit and collection action; many informants noted that collection action results in additional problems in finding adequate housing, thereby exacerbating health problems
- ◇ community informants had quite varied perceptions of hospital willingness to work with uninsured patients around bill payment or charity care; (among community informants there was no knowledge of formal charity care policies among area hospitals)
- ◇ hospitals believed that there were more people eligible for charity care, but who were unwilling to do the paperwork necessary to receive it
- ◇ hospitals mentioned willingness to do long, multi-year payment plans; also recognized strong sense of responsibility for payment within Latino community
- ◇ hospitals have seen rise in bad debt (relative to charity care)