



# Emergency Department Utilization Among Older Latinx Adults in Service Planning Area 6



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## Specific Aims

- To report prevalence and correlates of ED utilization among older Latinx adults residing in SPA6 within the past 12 months\*

\*Pre-covid

## Background

- From 2001-2009, there was a 24.5% increase in the annual visits to the emergency department (ED) in patients aged 65 and older.
- Same time period, notable for an increase usage of resources and costs, that was not attributed purely to the population growth
- Greater concern for delays in ED, with greater impact on medically vulnerable groups, such as older patients with greater health needs and communities residing in medically underserved areas
- Among service planning areas (SPAs) in Los Angeles, there are marked disparities in SPA 6
  - Greater health needs and worse outcomes in comparison to SPA5
- The Latinx subgroup residing in SPA 6 is a growing population
  - An aging population with more medical needs
  - Have unique social barriers to healthcare

## Methods

Cross-sectional study using data from an earlier study focusing on medication challenges among older Latinx adults (2019-2020)

### Survey collection

- Employed face-to-face structured interviews (English and Spanish)
- Collected sociodemographic factors, health care utilization, health care access, health behaviors, and health status.

### Inclusion criteria

- Self-identifying Latinx and over age 55
- Residing in SPA 6 for at least 1 year

### Exclusions

- Unable to provide consent, impaired cognition that limits participation or unable to participate full in the interview

## Results

**Table 1.**  
Characteristics of Participants  
Total, n= 165

	n	%
<b>Gender</b>		
Male	51	30.9
Female	114	69.1
<b>Age</b>		
55-64	38	23.1
≥ 65	123	76.9
<b>Education</b>		
No high school diploma	124	75.2
High school diploma	41	24.8
<b>Live Alone</b>		
No	110	66.7
Yes	55	33.3
<b>Disability status</b>		
Yes	38	23.0
No	127	77.0
<b>Fallen within last 12 months</b>		
Yes	40	24.4
No	124	75.6
<b>Self-reported health status</b>		<b>%</b>
Fair or poor	49	

**Table 2. (n = 164)**

ED visit within last 12 months	n	%
None	111	67.7
Once	31	18.9
Twice	11	6.7
Three times	11	6.7

**Bi-Variates Correlates of ED Visits among Underserved Older Latinx Adults**

Variable	Correlation	Variable	Correlation
Age	-.165*	Falls within last 12 months	-.417**
Disability status	-.273**	Convenience of ED visit > Regular care	.493**
Financial strains	-.170*	Number of chronic conditions	.361**
Severity of pain	.261**		

\*. Correlation is significant at the 0.05 level (2-tailed)

**Multivariate Poisson Regression Estimating Correlates of ED Visits among Underserved Older Latino Adults (N = 165)**

Independent Variable	Exp (B)	95% Exp (B)	Sig.
<b>Age</b>	<b>0.985</b>	<b>0.971 – 0.999</b>	<b>0.038</b>
<b>Gender: Male / Female</b>	<b>1.330 / 1</b>	<b>1.035 – 1.710</b>	<b>0.026</b>
Education Attainment	0.984	0.959 – 1.010	0.220
Live Alone: No / Yes	1.150 / 1	0.905 – 1.461	0.253
Disabled: Yes / No	1.135 / 1	0.855 – 1.507	0.381
Financial Strains	0.983	0.902 – 1.071	0.697
<b>Fallen within last 12 months Yes / No</b>	<b>1.943 / 1</b>	<b>1.464 – 2.578</b>	<b>0.001</b>
<b>Convenient of ED visits</b>	<b>1.472</b>	<b>1.299 – 1.667</b>	<b>0.001</b>
Number of chronic conditions	1.038	0.983 – 1.096	0.184
Level of Pain	1.011	0.958 – 1.067	0.689

## Limitations

- Convenience sampling- limits generalizability of findings
- Cross-sectional study- unable to make causal inferences or trends
- Inability to obtain detailed medical histories from our participants
- Self-reported data
- No subgroup comparisons  
No comparison to less-marginalized ethnic/racial groups in SPA 6 or other SPAs

## Clinical Implications/Future Direction

Our study highlights the importance of falls in this specific population in relation to ED utilization  
-Due to the growing Spanish-speaking aging population in LA county

-Spanish-inclusive fall-prevention interventions are an avenue to further study in reducing ED utilization

Our study highlight importance of further exploring why patients perceive ED to be more convenient in comparison to visiting regular provider

### In our study:

- 47% of those who had ED usage, reported convenience as a factor
- When falls were excluded, 50% reported usage for convenience

## Data Analysis Plan

### A descriptive analysis of all participants

Reported means and standard deviation for continuous measures; Frequency and percentages for the categorical variables.

### Bivariate analysis

Chi-square and independent t-test used to compare participants who had ED visits within last 12 months with those who did not.

### Multiple Poisson regression

To document independent correlates of ED visits within last 12 months.  
- p-value < 0.05 was considered significant

## Conclusion

### Table 2.

- 32.3%** of our participants (n=165) reported using ED at least once within the past 12 months
  - Bivariate correlates of ED visits, we found that the following 7 variables were correlated with ED visits  
Negative correlation: Age  
Positive correlation: Disability status, Falls within the last 12 months, reported convenience of ED > regular provider, financial strains, severity of pain, number of chronic conditions
  - On multivariate analysis, 3 of those 7 were found to be correlates\* of ED utilization among underserved older Latinx adults in our study:
    - **Gender (Male, 1.33), Falls within 12 months (Yes, 1.94), Convenience of ED > regular provider (1.47)**
- \*(Variable, Odds Ratio)

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