

Using GIS to Examine the Relationship Between Residential Segregation and Mental Healthcare Accessibility in Omaha, NE.

Tuesday, July 16, 2024 2:00 PM (20 minutes)

Equitable access to healthcare is regarded as a major indicator of improved health status of a country's population. Various US governments have implemented series of policies to improve healthcare accessibility. However, historical racial segregation policies have led most of such efforts to be markedly skewed towards only a part of the population, creating disparities in healthcare accessibility and health status in many US cities, including Omaha, Nebraska, that persist to the present day. By restricting access to essential social amenities like healthcare, residential segregation plays a key role in exacerbating health conditions such as mental health among racial minorities. Mental health problems, which are significantly high among racial minorities, especially Black/African Americans, serve as stimulants for the intensification of various chronic diseases. Increasing access to mental healthcare in disadvantaged minority neighborhoods is crucial for improving mental and general health conditions among racial minorities. This study, therefore, seeks to employ geospatial techniques to examine the relationship between residential segregation and mental healthcare accessibility in Omaha, Nebraska. The Divergence Index is used to estimate segregation rates, with segregation and mental health status patterns visualized using maps. The potential spatial accessibility to mental health services in Urban Omaha is estimated and mapped using the Three-Step Floating Catchment Area method. Ultimately, the study provides a spatial evidence-based direction for informing healthcare planning to minimize health disparities in the US.

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Session Classification: Student Paper Competition

Track Classification: Health, Justice, Human Rights, Policy & Practice: Healthcare Accessibility