

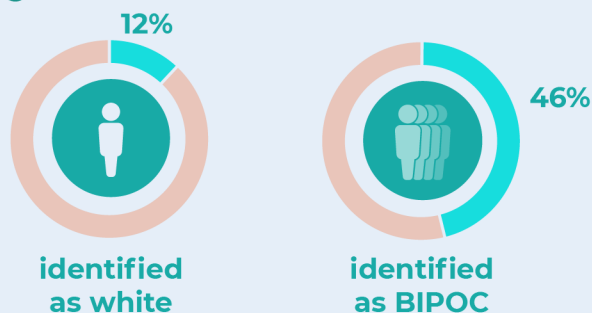
# ACE National Survey on Virtual Care Services for People Living with Arthritis: Examining Virtual Health Inequities

**ACE** Arthritis  
Consumer  
Experts

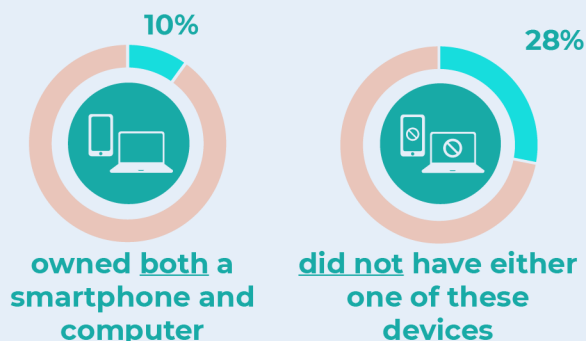
Find more survey information here:

<http://bit.ly/HealthInequitiesVirtualCareJHIEN>

## Respondents who reported difficulties using virtual care services



Respondents who identified as Black, Indigenous or a person of colour (BIPOC) were over **3 times more likely to report difficulties** using virtual care



Respondents who did not own either a smartphone or computer were nearly **3 times more likely to report difficulties** using virtual care

## Access to arthritis specific healthcare services

While **timeliness** of care is an issue for respondents in general, getting **any access** to care at all may be the bigger issue for **BIPOC living with arthritis**



**BIPOC respondents were more likely to be in the group that was not able to get any virtual healthcare services, compared to white respondents\***

\*this is a "borderline statistically significant" finding, meaning we cannot draw firm conclusions from it, though it is important to explore in future research



Three respondent groups were **more likely to feel uncomfortable or not know how to use the virtual care technology** used by their health care provider

- from an **older birth decade**
- **did not own both a smartphone and computer**
- identified as **BIPOC** (39% of BIPOC respondents reported facing this issue, compared to just under 7% of white respondents)

# Satisfaction with virtual care services

**Those who did not self-identify as BIPOC were much more likely to be very satisfied with their virtual care experiences than those who identified as BIPOC**

- 30% of white respondents selected that they were very satisfied sharing their concerns and getting advice from healthcare providers through virtual care services, compared to 0% of BIPOC respondents
- Past research suggests that racial minorities – particularly Indigenous peoples in Canada – commonly experience discrimination in healthcare settings. It is possible that BIPOC respondents are less likely to be very satisfied with virtual care due to negative healthcare experiences in general.

**Black, Indigenous and people of colour are significantly underrepresented in the arthritis patient community**

- **Only 5.5% of respondents identified as Black, Indigenous, or a person of colour (BIPOC). When it came to the French version of the survey, there were no BIPOC respondents.**

This major underrepresentation of BIPOC respondents is a very important finding in and of itself. It suggests that racial minorities are generally being excluded from networks in the arthritis patient community. This means the voices and experiences of BIPOC people living with arthritis are largely going unheard.

- **Internet access and virtual care services**

Because our survey was conducted online, and respondents needed internet access in order to complete it, it did not include the experiences of those who do not have internet access. Not having internet access is a major barrier to virtual care services.

- Past research suggests 55% of rural and remote Canadian households do not have basic internet access. The rate is even higher for rural and remote Indigenous communities.
- It is patients in these regions who may benefit the most from virtual care services due to a lack of in-person arthritis specific healthcare services in rural and remote areas.

## Key messages from our survey

- Respondents living with arthritis who identified as Black, Indigenous or a person of colour were:
  - significantly more likely to experience factors that made it difficult to use virtual care services (*highly statistically significant finding*);
  - more likely to report having no access to virtual care services (*borderline statistically significant finding*); and,
  - less likely to be very satisfied with their virtual care experiences (*highly statistically significant finding*).
- Respondents who did not own both a smartphone and computer were also more likely to face difficulties using virtual care. The ownership of electronic devices may represent the income level of respondents. If this is the case, then our findings suggest that there are noteworthy inequities related to *both* race and income.
- BIPOC are currently not being adequately represented in the arthritis patient community. No meaningful changes can be made until this significant issue is addressed.

