



Opinions of the Wealthy on the Justness of the Wealthy Being Able to Buy Better Healthcare Differentiating by Economic Mobility

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Introduction

- Across all races, being below the poverty line makes a person less likely to have very good or excellent health (Braveman 2010).
- Around 2000, the highest income quintile had the lowest spending of any group; they now have the highest, despite having the best health status. The lowest income quintile, although being made up of those in poor health, now spends the least amount (Dickman 2016).
- Americans generally have a more positive attitude towards those who became rich than those that were born rich (Koo 2023).
- However, the group of wealthy who grew up poor were shown to have less empathy for the poor and have showed less support for wealth distribution (Koo 2023).
- There has not been research on how the opinions of these two groups (the born rich and the became rich) differ on the question of healthcare.

Research Questions

- Is there a relationship between if a wealthy person became rich or was born rich and their opinion on if the wealthy should be able to buy better healthcare?
- Does being a healthcare worker moderate the relationship between a wealthy person's economic mobility and their opinion on if it is just for the wealthy to be able to buy better healthcare?

Methods

Sample

- Respondents (n=162) were drawn from the 2021 General Social Survey (GSS), a nationally representative sample of non-institutionalized adults aged 18 and older.
- Only respondents who both were both identified as being in the **Top Quintile** of the population and who answered the question on the justness of the wealthy being able to afford better healthcare than others were included in this analysis.

Measures

- Belief on justness was derived from the question "Is it just or unjust- right or wrong- that people with higher incomes can buy better healthcare than people with lower incomes?" Those who answered just to any degree were labelled as thinking it is just, and those who answered unjust to any degree were labelled as finding it unjust.
- Labelling for the Top Quintile was done by collapsing 26 categories of current reported family income to 5 quintiles. This group includes respondents whose family income is \$150,000 a year or more.
- Respondents were labelled as either "became rich" or "born rich" based on their response to a question on their family's income when they were 16.

Results

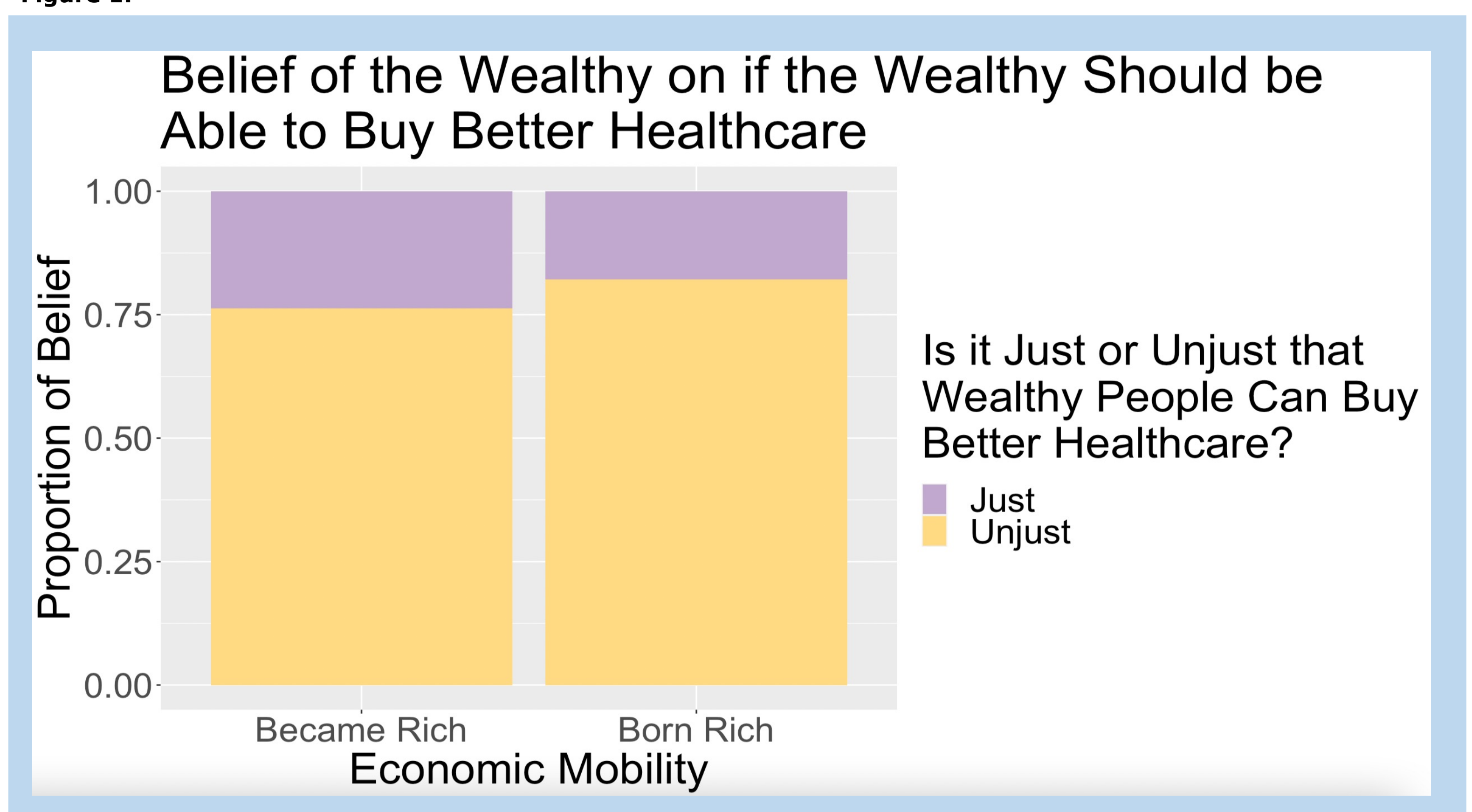
Univariate

- 64.3% of respondents qualified themselves as growing up as average or lower family income (became rich).
- 78.3% of respondents answered that it was unjust to some degree that the wealthy could afford better healthcare than others.

Bivariate

- A chi-square test of independence showed that there is **no significant correlation** between a person in the Top Quintile's economic mobility and their opinion on the wealthy being able to afford better healthcare than others ($\chi^2 = .43$, $p = .51$) (See Figure 1)

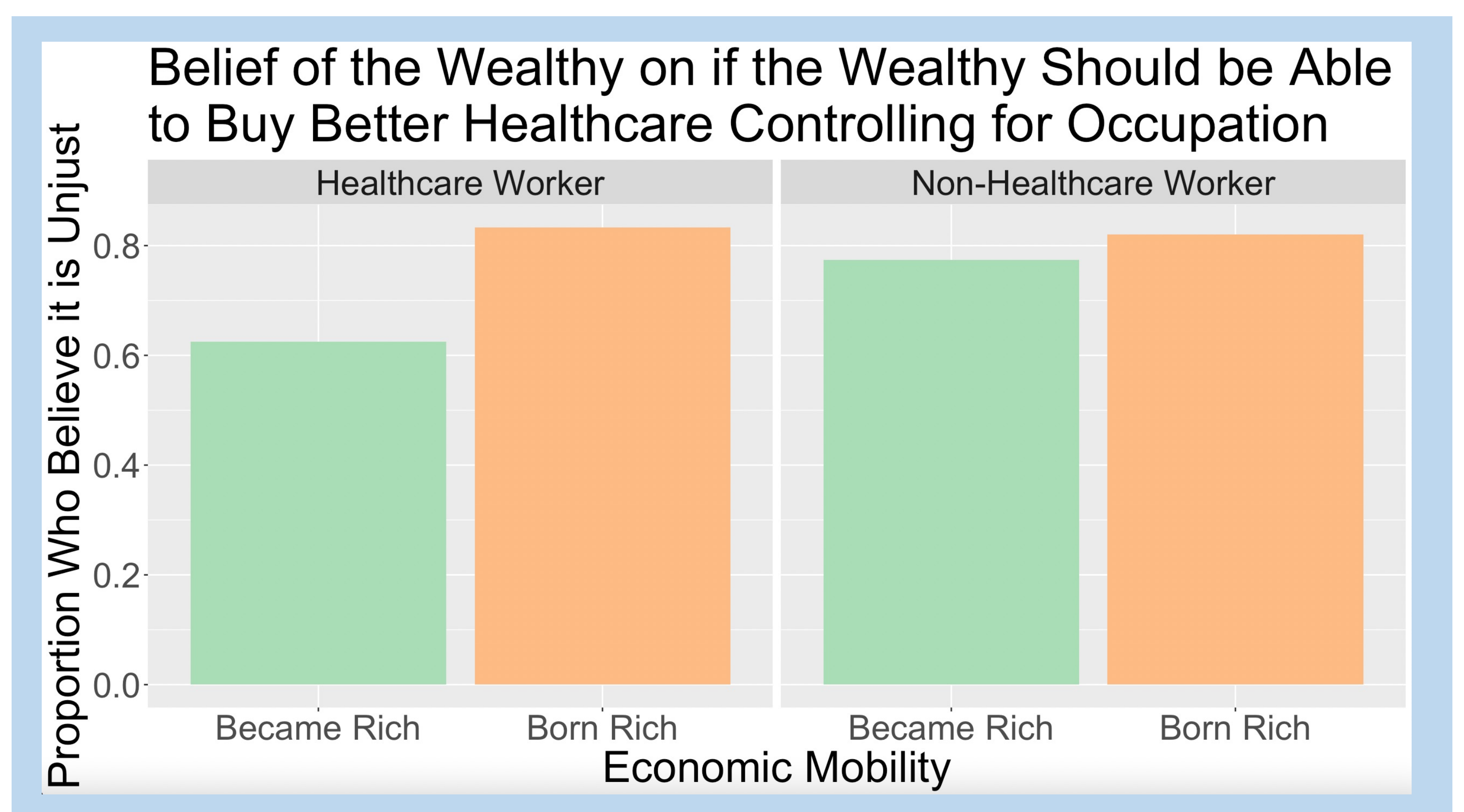
Figure 1.



Multivariate

- Although there appears to be a visual correlation, healthcare workers are **not significantly** more likely to believe it is unjust for the wealthy to be able to buy better healthcare if they became rich than non-healthcare workers. (Beta = .81, $p = .56$) (See Figure 2).

Figure 2.



Discussion

- Whether someone was born rich or became rich has not been shown to significantly affect their opinion on the wealthy being able to buy better healthcare than others.
- A wealthy person's status as a healthcare worker does not moderate the the relationship between if they were economically mobile and if they believe it is just for the wealthy to be able to buy better healthcare.
- The total sample size was only 162, and within that sample size there were only 14 healthcare workers. It would be appropriate to conduct another study with a larger sample size.
- Further research is necessary to determine where the differences of opinion lie between those who were born rich and those who became rich.