Opportunities in Mixed Method Health Literacy Research Among Hispanic Women in Utah

Ida Tovar
/ University of Utah

Problem Statement

National and local news cycles often highlight health-related disparities of the Hispanic community. Underlying many of the reports is the important concept and impact of health literacy. Health literacy becomes important for caregivers and/or patients when faced with a situation that requires the ability to find, understand, and use health information and services. Health literacy among Hispanic women is particularly important to highlight because of the lack of available data and impact Low Health Literacy (LHL) can have on individuals and family units. Due to limited research literature regarding the Hispanic women population in Utah, information regarding health literacy needs and barriers is most likely inferred from larger studies or not available on open-source research systems. This commentary is meant to describe a problem while also promoting open-sourced mixed method research as a solution. Additionally, it is important to highlight the need for multidisciplinary collaboration in pursuance of innovative solutions to address the health literacy needs of Hispanic women in Utah.

Status of Literature

There is a known fluctuation of health literacy among individuals who are able to read well and are comfortable using numbers. ^{1,2} Within the United States, researchers estimate limited English language proficiency among the Spanish speaking population, anywhere between 30–51%³, Utah specific numbers are not conclusive at this time. Difficulties arise in situations where the caregiver and/or patient is not familiar with medical terms, how their body works, is unable

to interpret statistics, and evaluate risks and benefits of treatment.1 Additionally, when faced with a with a serious diagnosis or illness, individuals with LHL may feel scared or confused during their healthcare experience.1 LHL puts Hispanic immigrants at a higher risk for low or no access to healthcare and healthcare services. 4,5 Researchers believe this is due to a number of number of possible barriers such as low education levels, low English proficiency and/ or non-citizenship status which leaves Hispanic patients to assume they are ineligible for U.S. healthcare services, fear stigma, or deportation.⁵ Researchers also postulate LHL leads to difficulties interpreting spoken or written information⁶ which instigates outcomes such as high rates of return emergency room visits^{6,7}, low medication adherence⁸, and misunderstanding of health insurance9.

Specifically within the Hispanic women community, researchers are concerned with LHL in association with chronic diseases such as cardiovascular disease and diabetes^{7,10}. Past research suggests U.S. born Hispanic women are less likely to access mental health services, due to a persistent stigma in relation to mental health services and lack of health information understanding.¹¹ Similar reports exist for other medical services.⁴ Utah-specific evaluation of LHL, health outcomes and women is available, but remains difficult to find via open-source search engines, data banks and journals.

Call to Action

Promoting health literacy among Hispanic women may seem difficult, but interventions such as community-based health education programs have proven effective in the past.^{4,5} Utah-based research is needed in order to understand where and what health literacy interventions could be used to increase health literacy rates among Utah Hispanic women. Currently there is limited open-sourced information available regarding health literacy among Hispanic women in Utah. Researchers concur that in order to improve health literacy among Hispanics further research is needed to better identify and explain health literacy gaps. 4,5,7,10,12 Mixed method research is potentially a solution.^{5,10} Specifically, after a systematic review of 77 Hispanic population-related studies the following topics were recommended as areas of possible mixed method research opportunities: 1. The influence of acculturation on migrant health; 2. The role of informal (e.g., family) vs. formal (e.g. promotoras) social support in

facilitating health care access; 3. The "Hispanic mortality paradox"; 4. Traditional healing and medicine among Hispanic immigrants.⁵

Along with academic research efforts to improve health literacy among Hispanic women, efforts within community structures and systems are also needed. The Center for Disease Control and Prevention promotes a multidisciplinary and collaborative approach known as "Health in All Policies" in order to integrate and articulate health considerations into policymaking decisions. Health researchers investigating Hispanic health literacy also ask for consideration of comprehensive health and immigration reforms that respect the human right of Hispanic immigrants to gain access to health care. 5

References

- CDC. The What, Why, and How of Health Literacy. Centers for Disease Control and Prevention. Published March 29, 2021. Accessed November 30, 2021. https://www.cdc.gov/healthliteracy/learn/Understanding. html
- 2. Millar RJ, Sahoo S, Yamashita T, Cummins PA. Literacy skills, language use, and online health information seeking among Hispanic adults in the United States. Patient Educ Couns. 2020;103(8):1595-1600. doi:10.1016/j.pec.2020.02.030
- 3. Sentell T, Braun KL. Low Health Literacy, Limited English Proficiency, and Health Status in Asians, Latinos, and Other Racial/Ethnic Groups in California. Journal of Health Communication. 2012;17(sup3):82-99. doi:10.1080/10810730.2012.712621
- 4. Becerra BJ, Arias D, Becerra MB. Low Health Literacy among Immigrant Hispanics. J Racial and Ethnic Health Disparities. 2017;4(3):480-483. doi:10.1007/s40615-016-0249-5
- 5. Pérez-Escamilla R, Garcia J, Song D. HEALTH CARE ACCESS AMONG HISPANIC IMMIGRANTS: ¿ALGUIEN ESTÁ ESCUCHANDO? [IS ANYBODY LISTENING?]. NAPA Bull. 2010;34(1):47-67. doi:10.1111/j.1556-4797.2010.01051.x
- 6. Easton P, Entwistle VA, Williams B. Health in the "hidden population" of people with low literacy. A systematic review of the literature. BMC Public Health. 2010;10(1):459. doi:10.1186/1471-2458-10-459
- 7. Ivanov LL, Wallace DC, Hernández C, Hyde Y. Diabetes Risks and Health Literacy in Southern African American and Latino Women. J Community Health Nurs. 2015;32(1):12-23. doi:10.1080/07370016.2015. 991664

- 8. Association Between Health Literacy and Medication Adherence among Hispanics With Hypertension PMC. Accessed June 24, 2022. https://www-ncbi-nlm-nih-gov.ezproxy.lib.utah.edu/pmc/articles/PMC6545226/
- 9. Villagra VG, Bhuva B, Coman E, Smith DO, Fifield J. Health insurance literacy: disparities by race, ethnicity, and language preference. Am J Manag Care. 2019;25(3):e71-e75.
- 10. Aponte J. General literacy and health literacy in Dominicans with diabetes. Hisp Health Care Int. 2013;11(4):167-172. doi:10.1891/1540-4153.11.4.167
- 11. Lopez V, Sanchez K, Killian MO, Eghaneyan BH. Depression screening and education: an examination of mental health literacy and stigma in a sample of Hispanic women. BMC Public Health. 2018;18(1):646. doi:10.1186/s12889-018-5516-4
- 12. Lorini C, Santomauro F, Donzellini M, et al. Health literacy and vaccination: A systematic review. null. 2018;14(2):478-488. doi:10.1080/21645515.2017.1392423
- 13. Health in All Policies | AD for Policy and Strategy | CDC. Published June 18, 2019. Accessed November 30, 2021. https://www.cdc.gov/policy/hiap/index.html