

Hispanics leery of health care providers, often avoid cancer screenings, study shows

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When researchers at Moffitt Cancer Center and colleagues conducted a random telephone survey among blacks, whites and Hispanics in New York, Baltimore and San Juan, Puerto Rico, they found that Hispanics are nearly twice as likely to report that fear of being used as a "guinea pig" and lack of trust in medical professionals contribute in being unwilling to participate in cancer screenings. The researchers concluded that health care providers need to do a better job of instilling trust and dispelling certain fears, particularly among Hispanics, to improve cancer screening rates for lower-income minorities.

The study appeared in a supplement in the November issue of the *Journal of Health Care for the Poor and Underserved*.

"The provider-patient relationship is an important factor in patients adhering to [cancer screening](#) recommendations," said study senior author B. Lee Green, Ph.D., senior member of the Health Outcomes and Behavior Program at Moffitt. "This study found differences between sociodemographic groups in levels of fear and mistrust with regard to the provider-patient relationships and communications that may contribute to unwillingness to participate in cancer screenings."

According to the authors, the reasons for disparities in cancer screening behavior have been less apparent for minorities than for others, and few studies have aimed at understanding why.

The researchers found that when compared to whites, Hispanics were

nearly twice as likely to report a fear of being a [guinea pig](#), and a lack of trust in [health care professionals](#) would contribute to unwillingness to participate in cancer screenings. Noncollege-educated individuals with less than a high school education or diploma were found to be twice as likely as college graduates to fear embarrassment during screening.

Screening offers opportunities for early detection, diagnosis and treatment. Given the disparities in cancer screening utilization and the adverse [health implications](#) of such disparities, it is critical to understand the factors contributing to the problem, said the authors.

"The purpose of this analysis was to assess sociodemographic factors associated with fears and mistrust as related to the patient-provider relationship that may contribute to unwillingness to participate in cancer screenings," they wrote. "Our results indicate that racial, ethnic and educational discrepancies exist regarding fears and mistrust. Results also indicate areas where health professionals can improve interactions with patients, particularly among Hispanics and those with lower educational attainment."

The researchers added that communication can be especially difficult where there are language barriers, yet improving patient-provider communication "holds tremendous promise because it offers one of the more readily changeable contributors to cancer screening adherence."

The survey included responses from 355 blacks in New York and Baltimore, 311 Hispanics in San Juan and New York, and 482 whites in New York and Baltimore. The cities were chosen, said the authors, to ensure a wide geographic and racial/ethnic representation. The participants were 18 to 94 with incomes between less than \$20,000 to more than \$75,000 per year. Almost 40 percent has some or completed their [high school education](#). [College graduates](#) or those with "some college" accounted for 46 percent of respondents.

The authors noted that their survey did not take into account respondents' health insurance status or the race or ethnicity of the respondent's health care provider.

Provided by H. Lee Moffitt Cancer Center & Research Institute

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