

Preventive care remains a low priority for some urban women, according to research

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A Rutgers-Camden nursing student administers a shot to a women during a recent health fair.

Regular check-ups and screenings are among the best ways to stay healthy and catch potential health problems before they become serious, but preventive care rates are lower than they should be among Hispanic women in Camden, according to Rutgers University–Camden researchers.

A series of studies by two Rutgers–Camden nursing professors is shedding some light on the [health care](#) needs of Hispanic [women](#) in urban, low income areas.

"Preventive care is not a priority for many of these women," says Bonnie Jerome-D'Emilia, an assistant professor at the Rutgers School of Nursing–Camden. "They tend not to seek [health](#) care unless they are

sick. Their main concern is taking care of their family, not their own health. Additionally, a lack of [health insurance](#) or access to affordable care puts them at risk for delays in receiving their own health care."

Jerome-D'Emilia and two colleagues—Patricia Suplee, an assistant professor of nursing at Rutgers–Camden and Marcia Gardner, an associate professor of nursing at Seton Hall University—conducted a community needs assessment surveying 66 Hispanic women at a church in the Cramer Hill section of Camden. According to the survey, 41 percent of the women said they were in fair to poor health and less than half reported having some sort of health insurance.

"A high percentage of women consider the emergency room to be their usual source of care, and this would explain the low rate of preventive care in this population," Jerome-D'Emilia says.

The results of the survey were reported in the article "Understanding Access to Care and Health Needs of Hispanic Women from an Urban Community," published in *Hispanic Health Care International* earlier this year.

Jerome-D'Emilia says that in addition to the lack of health insurance, inequities in access to health services for these women are related to language barriers, fear of discrimination, and lack of trust, all "significant deterrents to obtaining appropriate [health care services](#)."

According to the study, 65 percent of the women surveyed were considered overweight, which can lead to coronary heart disease, hypertension, diabetes, and other health concerns.

In a follow-up study focusing on healthy eating habits among 48 Hispanic women, researchers Suplee and Jerome-D'Emilia, along with Sherry Burrell, a clinical assistant professor of nursing at

Rutgers–Camden, found that 50 percent of the women received Supplemental Nutrition Assistance Program benefits, 61 percent did not always have enough money to purchase food during any given week, and 50 percent ate fast food one or two times per week.

Suplee states, "91 percent of the women reported that they would like to try healthier foods, but are either afraid their family would not like the food or that they do not know how to choose them. We are now investigating strategies to help these women make more informed choices when selecting food for their families."

In yet another study, Jerome-D'Emilia and Suplee looked into mammogram screening, one of the most effective means of identifying breast cancer at an early stage. Hispanic women in low-income communities continue to have lower rates of screening when compared to white and African American women, the Rutgers–Camden scholars say.

In a survey of 152 Hispanic women living in Camden, Suplee says, "Locally the rates of screening are actually higher than what you might normally see in an urban community, but the rate of follow-up nationally for minority women is what is concerning. Many women are waiting too long to get treatment."

Research has shown that financial barriers and insurance status are major deterrents to mammogram screening for low income Hispanic women, but the presence of a New Jersey Cancer Education and Early Detection program site in Camden may ameliorate this problem. NJCEED provides cancer screening and services for low income uninsured or underinsured individuals.

The Rutgers–Camden nursing professors say health fairs held at local churches are also an effective method of bringing [preventive care](#)

services and education to the community, and Rutgers–Camden students regularly participate in such fairs to help educate residents.

With full implementation of the Affordable Care Act in 2014, more of these women will likely be eligible for Medicaid, which can facilitate access to care. However, due to potential shortages of primary care providers, many of these women will continue to go without preventive services and wait times for appointments may actually increase in length rather than decrease, say Jerome-D'Emilia and Suplee.

Jerome-D'Emilia received bachelor's degrees from Brooklyn College and SUNY Downstate College of Nursing, her master's degree from Columbia University School of Public Health, and her doctoral degree from Virginia Commonwealth University.

Suplee earned her bachelor's degree from Indiana University and her master's and doctoral degrees from the University of Pennsylvania.

Provided by Rutgers University

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