

Exploring the role of social relationships in Hispanic health

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Hispanic people have better disease outcomes than non-Hispanic whites, despite having greater risk factors for poor outcomes. Researchers theorize that the importance of family and strong social networks in Hispanic culture may confer some resilience.

When people are diagnosed with [health problems](#), the support they receive from family and friends can have a significant impact on how they ultimately fare. In fact, research has shown that social support can affect survival outcomes more than factors such as body mass index, exercise and even smoking.

The power of social support might also help explain why Hispanics and Latinos often have better disease outcomes than non-Hispanic whites, says University of Arizona researcher John Ruiz, who studies a phenomenon known as the Hispanic Health Paradox.

A well-established concept in [health](#) literature, the Hispanic Health Paradox refers to the fact that Hispanics and Latinos tend to have similar or

better survival rates and [health outcomes](#) than non-Hispanic whites, despite being more likely to face greater health and socioeconomic risk factors such as lower incomes, harsher job conditions and lack of access to quality care.

The reason for the paradox is not entirely clear, but one theory is that cultural differences in the social support networks of Hispanics and non-Hispanic whites may play a role. The idea is that Hispanics may be more resilient in the face of health challenges because they have the support of an especially strong network of family and friends—something that is highly valued in Hispanic culture.

Ruiz and Heidi Hamann—both associate professors in the UArizona Department of Psychology—have been awarded approximately \$3.4 million from the National Institutes of Health to test this sociocultural hypothesis, specifically in Hispanic patients diagnosed with late-stage lung cancer. The researchers have previously shown that the Hispanic Health Paradox exists among patients with lung cancer, which is the leading cause of cancer death.

"We know that having close social ties and strong, broad social networks is associated with better health. It reduces stress levels, it provides tangible resources, and in a time of illness, those networks can be instrumental in transporting patients to medical appointments and ensuring that the patient gets attention and is receiving everything from meals to engagement—which all drive better health," said Ruiz, who studies racial and ethnic health disparities and is a member of the university's BIO5 Institute.

"As a group, Hispanics and Latinos tend to have cultural values that really emphasize those social ties—collectivism, the importance of family, the importance of interpersonal harmony and, critically, the importance of including older generations in the

acute social fabric," Ruiz said. "The older one gets, the more central they become, versus in other cultures where they might begin to drift to the periphery of the social network."

Ruiz and Hamann—along with UArizona faculty members Matthias Mehl, Patrick Wightman, Melanie Bell and Linda Garland—will study the social support networks and health outcomes of more than 670 Hispanic and non-Hispanic lung cancer patients over the course of about 33 months at six geographically diverse sites—in Tucson, San Diego, Miami, Dallas, New York and Albuquerque, New Mexico.

Participants will be interviewed about their [social support](#) networks at the start of the study and six months later. Some participants will also be asked to take part in a weeklong daily diary activity, in which they will be asked to respond, on a study-provided cellphone, to a series of questions about their health and social interactions.

In addition, the study cellphone will be programmed to record random audio snippets of participants' daily lives to provide more information about their social interactions—a technique that is often used in social psychology studies.

"The sound sampling is incredibly important because it helps us have an objective measure of the degree to which people are having social interactions," Ruiz said.

The researchers will look at patients' survival rates or adherence to treatment at the end of the study period and will examine whether [cultural differences](#) in social interactions influence outcomes. They say their findings have the potential to inform health care interventions for all populations.

"We hear so much about health disparities—disadvantages related to health—and that's very important, but one of the important pieces of this grant and this larger body of work is that it asks, "What about resilience factors?" said Hamann, a University of Arizona Cancer Center member who has spent her career working in psychosocial oncology. "What are the things that

help populations, even in the face of other risk factors, to be more resilient? And what can we learn about that to inform future work and possible interventions down the line?"

Ruiz is quick to point out that even though the Hispanic Health Paradox exists—and that Hispanics have a life expectancy two to three years longer than other populations—it in no way means that Hispanic health is optimal. It does, however, suggest that Hispanic culture may have valuable lessons to offer.

"The dialog among some in the U.S. for a long time has been that underrepresented populations only represent a drain on resources," Ruiz said. "But this is a good example of where something really valuable could perhaps be learned from a population that could benefit the broader public."

University of Arizona President Robert C. Robbins applauded the work Ruiz and Hamann are leading.

"As a Hispanic-Serving Institution located near the U.S.-Mexico border, the University of Arizona is well positioned to learn from the richness of Hispanic culture," Robbins said. "We know that cultural and community values play an important role in many different aspects of life, including our health, and this research on the Hispanic Health Paradox has the potential to help everyone be more resilient in the face of health challenges."

Provided by University of Arizona

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