



Assessment of Social Barriers to Medical Care for Pregnant, Latina Women with Diabetes in Eastern North Carolina

Lauren E. Geisel ¹, Noopur S. Doshi ¹, Kaylin R. Prestage ¹, Jessie L. Tucci-Herron ¹, Irma Corral, PhD ², and Sarah E. Smith, MD ³

Brody School of Medicine
East Carolina University
Greenville, NC 27834

INTRODUCTION

- ❖ Latina women in North Carolina are more likely to have gestational diabetes (50%) in comparison to non-Hispanic women.¹
- ❖ Little is known about possible sociocultural factors that may explain this health disparity for this population, especially in rural settings.
- ❖ The purpose of this pilot study was to examine possible behavioral and sociocultural barriers to care among pregnant Latina women with a current diagnosis of diabetes in rural Eastern North Carolina.

MATERIALS & METHODS

- ❖ 22 participants from the Regional Perinatal Center at the Brody School of Medicine
- ❖ 2-page anonymous survey administered during non-stress test appointment (NST)
- ❖ Participants were given the choice to complete a Spanish or English Survey.
- ❖ Assessed basic information about current and past pregnancies, diabetes-related knowledge and behaviors, current access to medical care, and perceived barriers to medical care.
- ❖ The study had certified exempt IRB approval from East Carolina University.

DISCUSSION

- ❖ Knowledge of the seriousness of diabetes was moderate (50%), but knowledge of glucometer use and current medication adherence were both high (91%), and the majority (77%) knew where to get care.
- ❖ Significant barriers to care included problems paying for the cost of medical care (77%), lack of social support to get to appointments (50%), problems with transportation (41%) and the cost of medication (45%).
- ❖ Language was not perceived as a significant barrier by the majority of the sample, although 73% of the sample opted to complete the survey in Spanish.
- ❖ Preliminary findings suggest that cost-reducing or transportation interventions may be the most useful targets for future interventions for this population.
- ❖ Further studies need to be completed to investigate a larger sample population.

RESULTS

❖ Participant Characteristics, Pregnancy, and Healthcare Use Questions

- ❖ The average participant was in their 3rd pregnancy, with 41% reporting gestational diabetes in prior pregnancies
- ❖ 44% reported they had a primary care physician that they saw regularly
- ❖ 9% reported they were seeing additional professionals for help with their health (e.g., midwives)
- ❖ 77% knew where to obtain medical care for their diabetes
- ❖ Most were not currently working (91%)

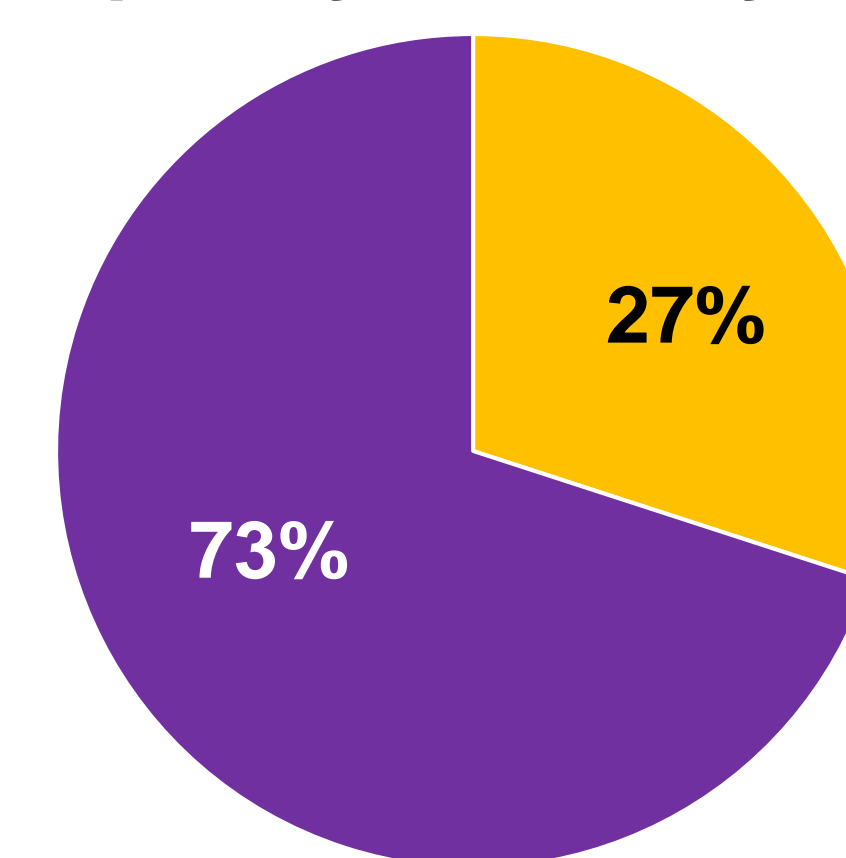


❖ Knowledge

	Yes	No
Diabetes is a serious health problem.	50%	50%
Do you know how to use a glucometer?	91%	9%
Do you take your medications for diabetes daily?	91%	9%

❖ Language of survey

Frequency of Survey Type



■ English Survey ■ Spanish Survey

❖ Perceived barriers to care

	Never	At least some of the time	Mean (1-5 scale)
How often did not being able to speak English well keep you from coming to the doctor?	64%	36%	1.64
How often did you not know where to go to get medical care?	73%	27%	1.50
How often do you have problems paying for the cost of medical attention you need?	23%	77%	2.54
How often have you felt a lack of social support to come to the doctor (e.g., not having someone to come with you, or not having someone to watch your children so that you can come)?	50%	50%	1.77
How often have you felt that the cost of your medications has kept you from taking them?	55%	45%	1.77
How often has problems with transportation kept you from coming to the doctor?	59%	41%	1.59

REFERENCES

1. Berggren, E. K., Boggess, K. A., Funk, M. J., & Stuebe, A. M. (2012). Racial Disparities in Perinatal Outcomes Among Women with Gestational Diabetes. *Journal of Womens Health, 21*(5), 521-527. doi:10.1089/jwh.2011.3123

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FOOTNOTES

- 1 Brody School of Medicine (BSOM) at East Carolina University (ECU)
- 2 Department of Psychiatry & Behavioral Medicine, Brody School of Medicine
- 3 Department of Obstetrics & Gynecology, Brody School of Medicine