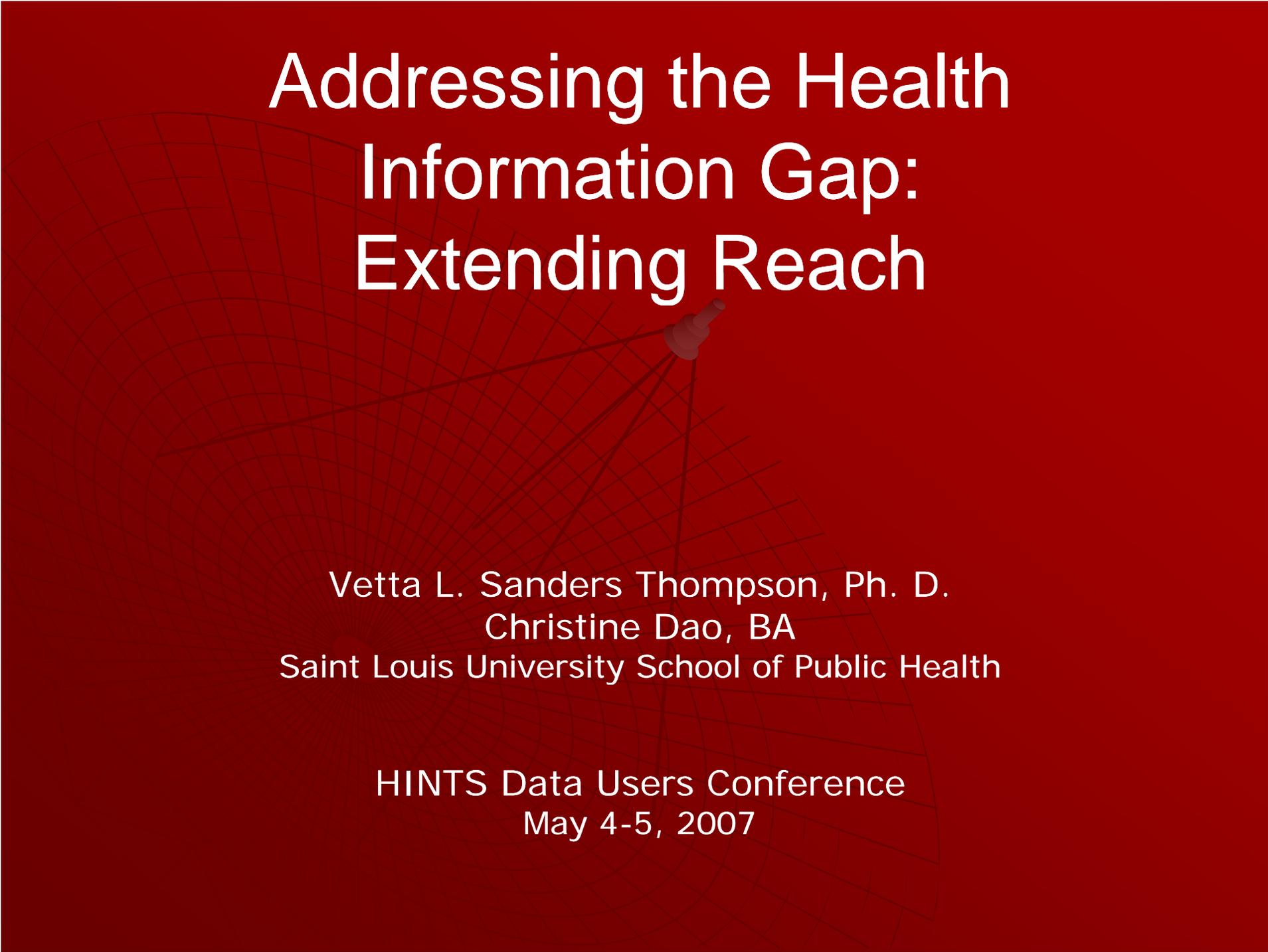


Addressing the Health Information Gap: Extending Reach



Vetta L. Sanders Thompson, Ph. D.
Christine Dao, BA
Saint Louis University School of Public Health

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The Health Information Gap

- ◆ These presentations highlighted the fact that:
 - There are inequalities in health and cancer information and knowledge.
 - These are most pronounced among the most disadvantaged.
 - There are strategies that we can systematically implement to address these disparities.



Promising Strategies to Improve Reach

KIOSKS
make use of
mobile
computer
technology to
deliver health
information
tailored to the
community &
the
individual.



Churches

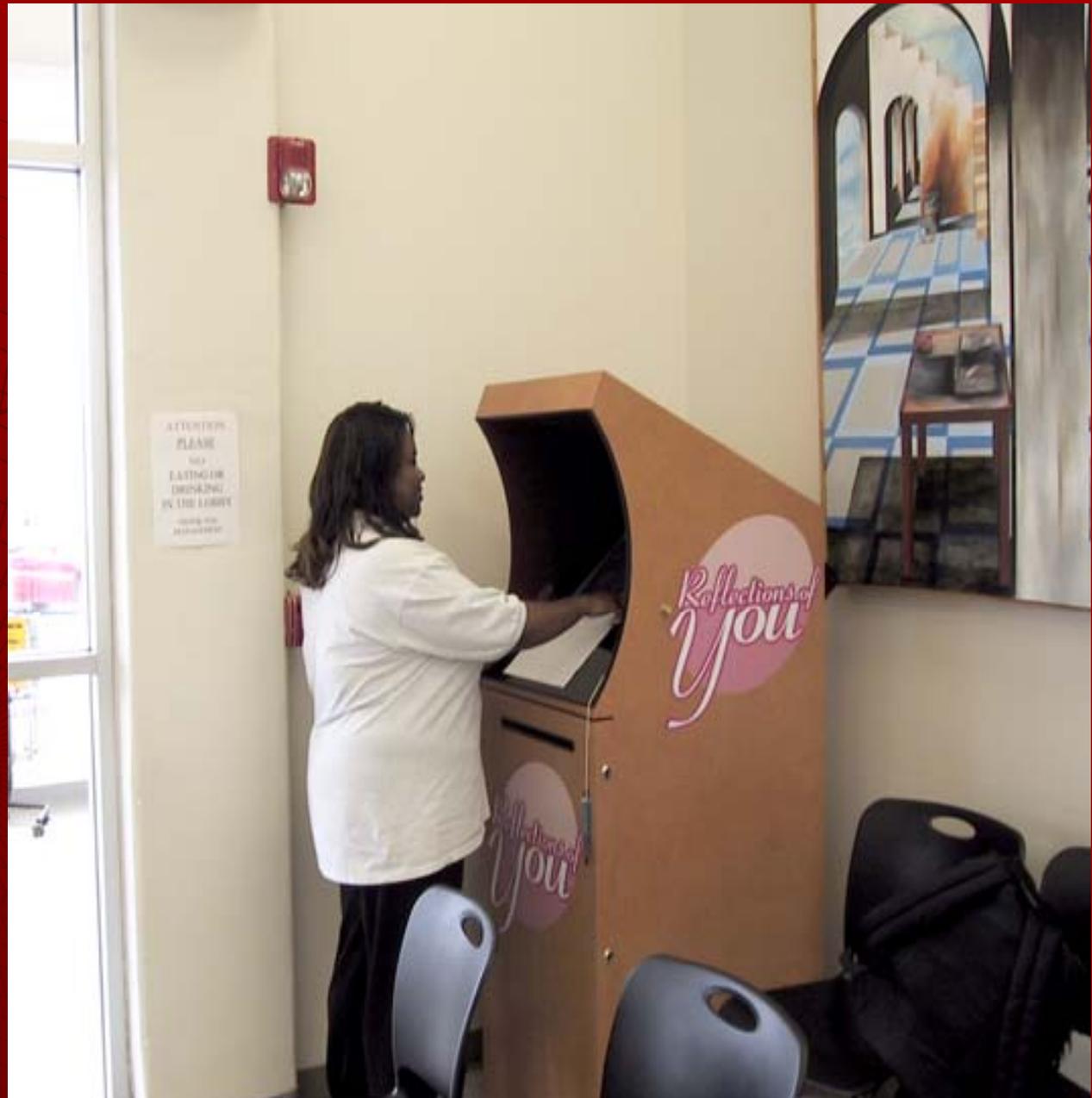
Laundromats

Beauty &
Barber Shops

Social
Service
Agencies

Health
Centers

Libraries

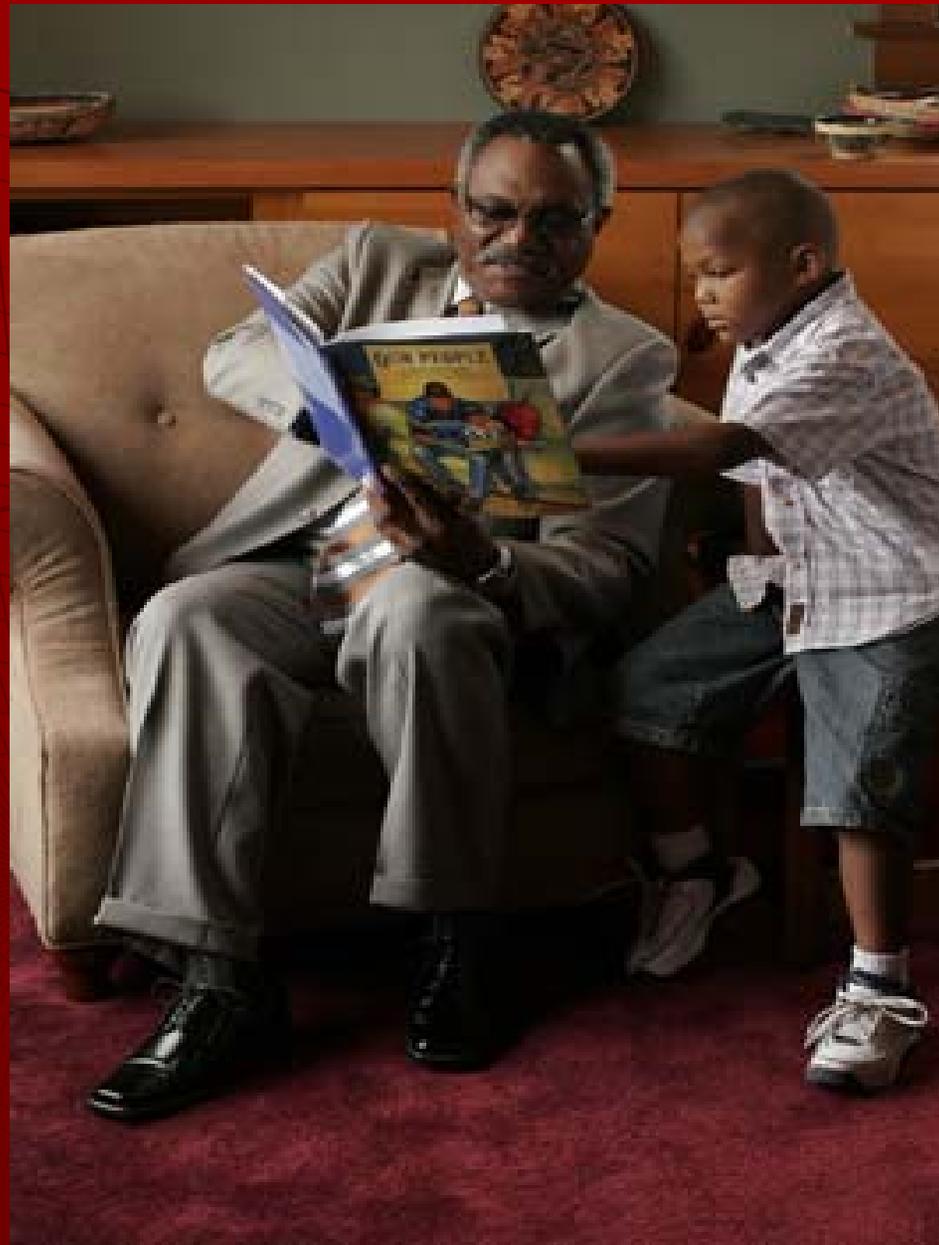


The TRUE
COLORS
Photo Library

Provides a wider
selection of
culturally
appropriate
photographs than
available from stock
photography files.





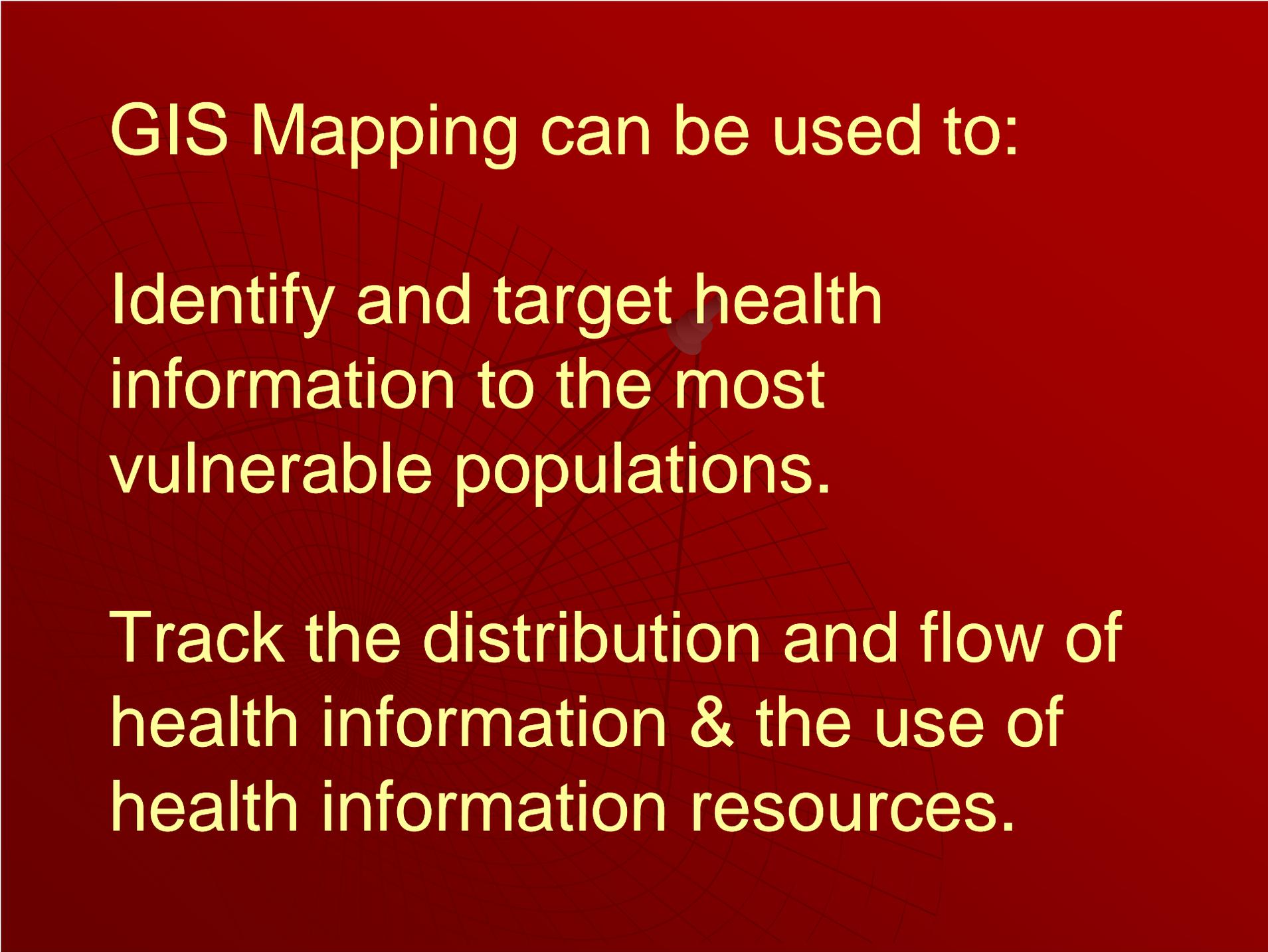




A photo collection was also developed at the University of Michigan CECCR.

It is focused on photos sensitive to African American ethnic/racial identity & ideology.



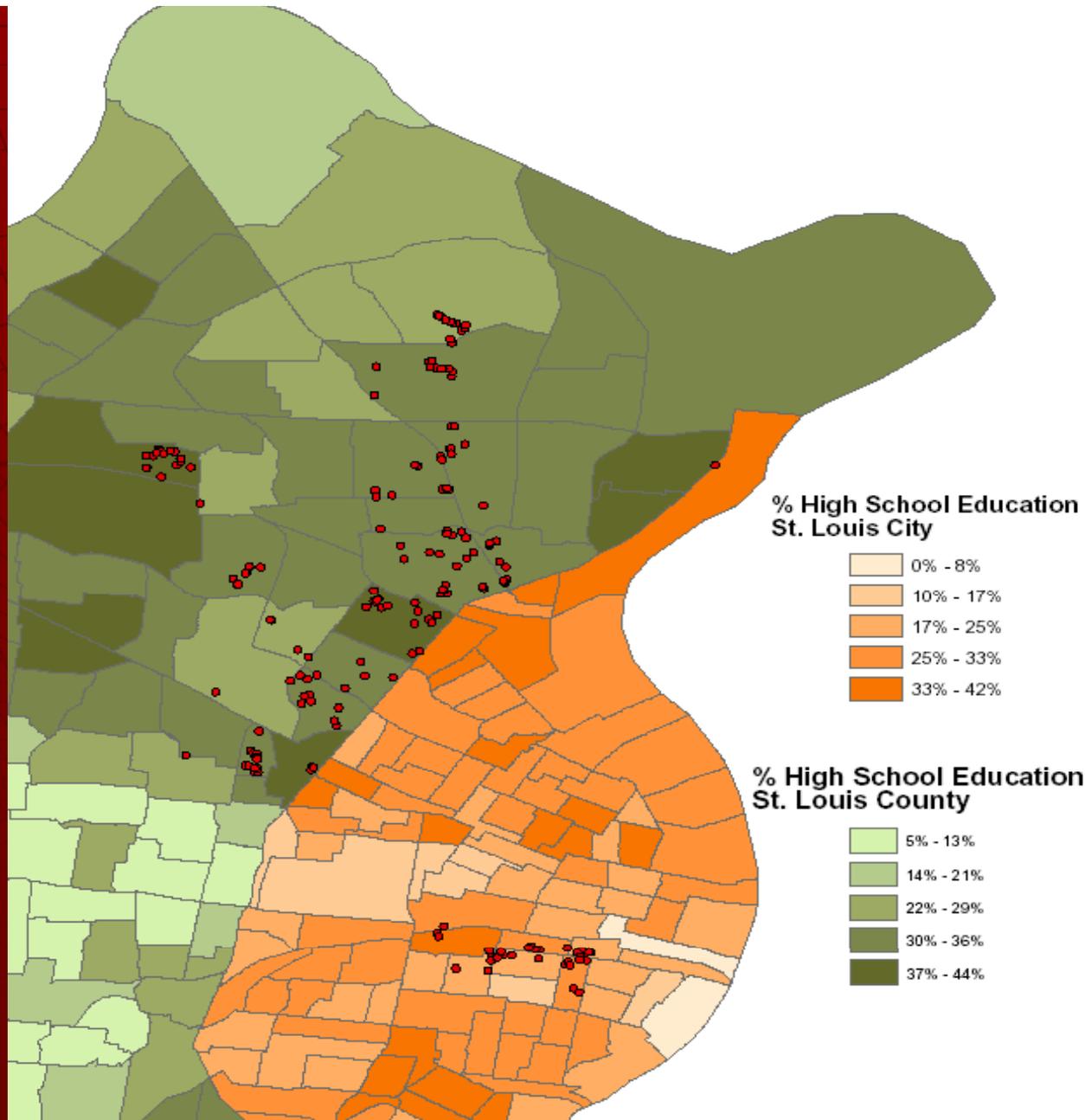


GIS Mapping can be used to:

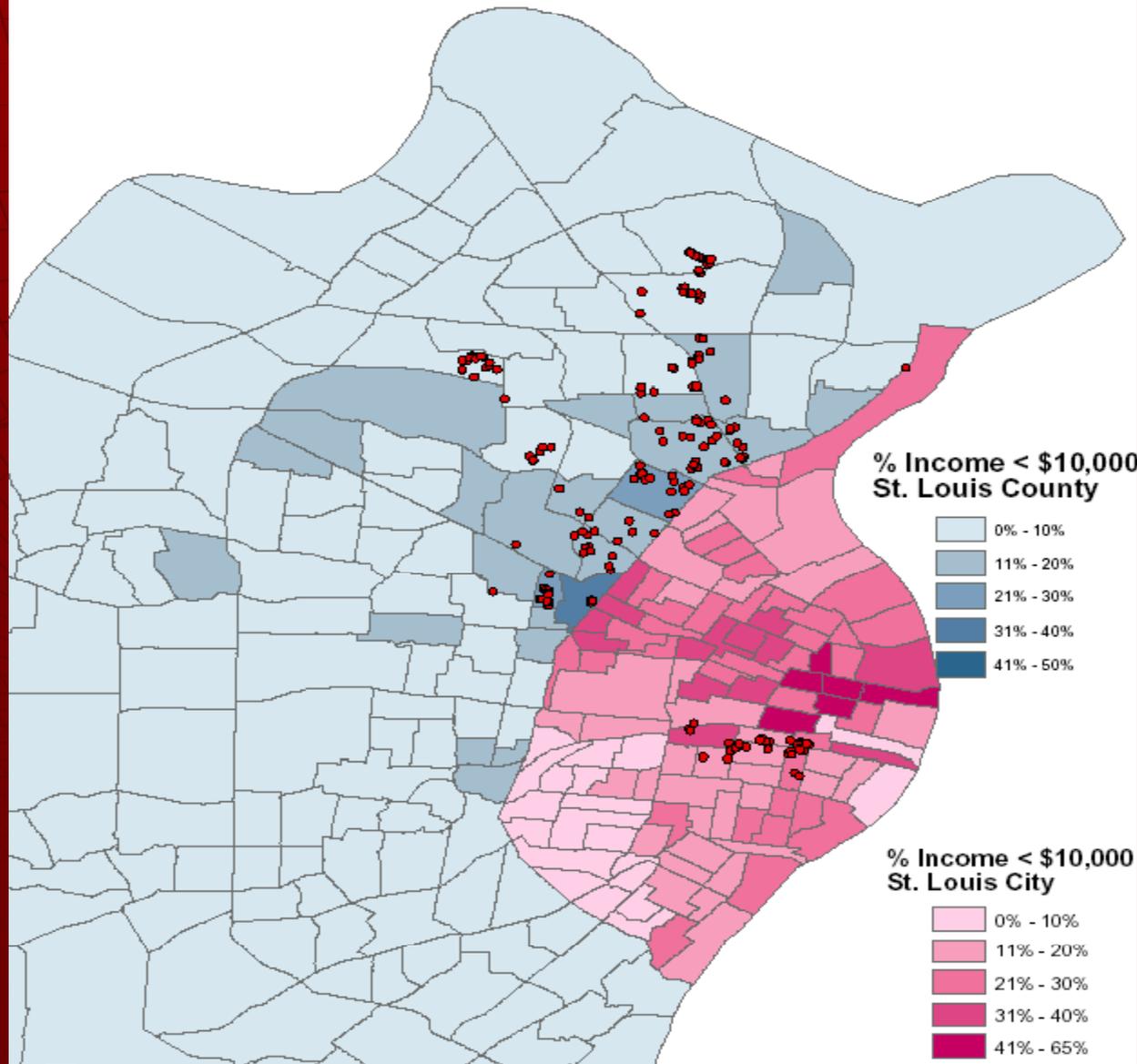
Identify and target health information to the most vulnerable populations.

Track the distribution and flow of health information & the use of health information resources.

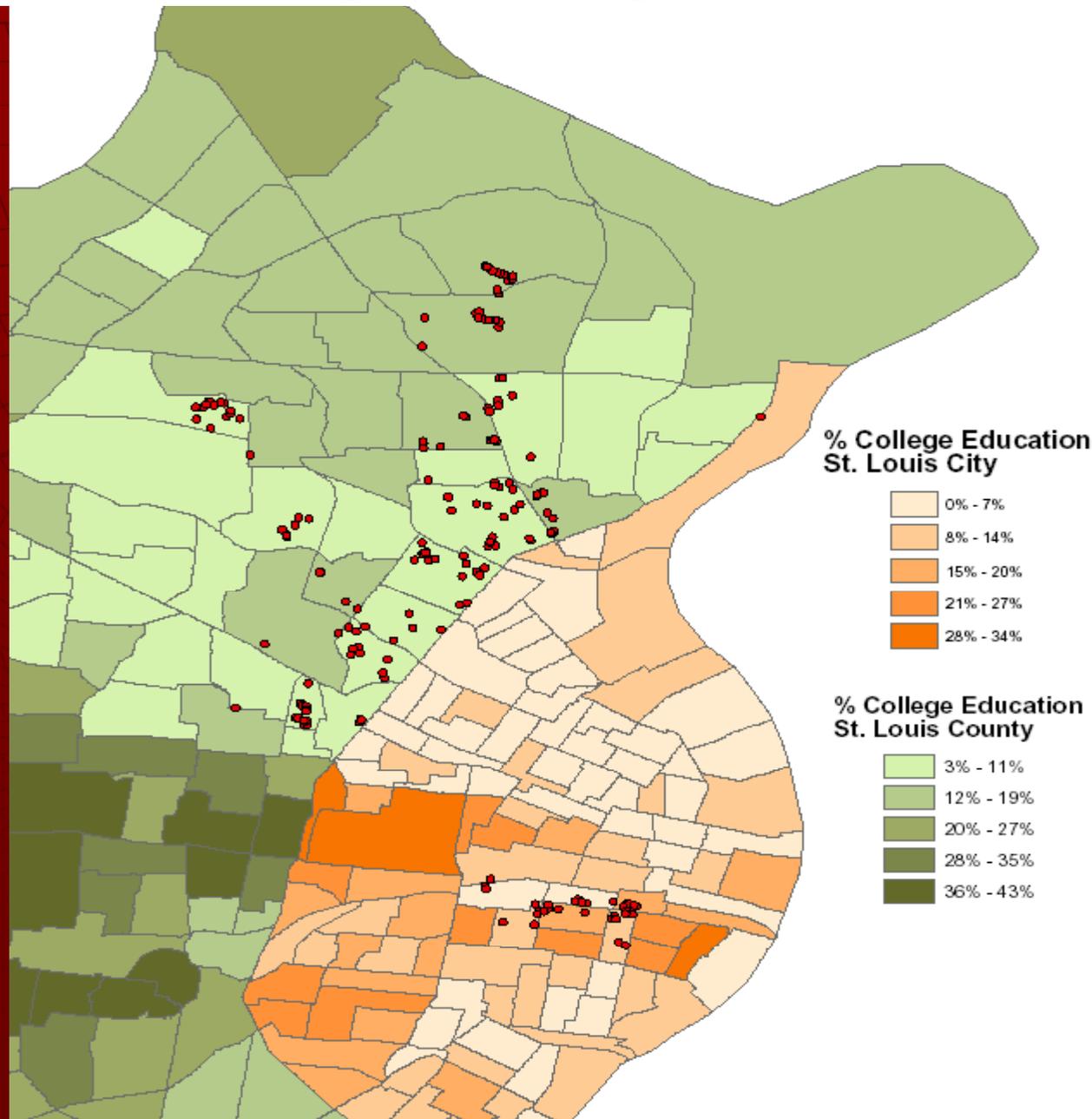
Elimika Project: Participant Education shown by Percentage of Population with a High School Education by Tract, Census 2000.



Elimika Project: Participant income shown by Percentage of population in tract with an income <\$10,000, Census 2000.



Elimika Project: Participant Education shown by Percentage of Population with a College Education by Tract, Census 2000.





HINTS provides good data on broad communication issues.

These data suggest important questions for future research.

Barriers to Information Seeking

- ◆ Took a Lot of Effort to Find
- ◆ Was Frustrating to Obtain
- ◆ Quality Causes You Concern
- ◆ Was Too Hard to Understand

Barriers to Information Seeking

- ◆ Participants in the HINTS survey reported fewer barriers to information seeking in 2005 compared to 2003.
- ◆ Ethnic minorities and those with less education, and less income continued to report more difficulties.
- ◆ Patterns that mirror health outcomes.

Barriers to Information Seeking

- ◆ What the data do not tell us that we must know to improve reach:
 - What makes information seeking more effortful for these populations?
 - What are *they* looking for (compared to what we think they should know and what we provide)?
 - Are some sources more frustrating than others? Does this vary by population?

Barriers to Information Seeking

- ◆ What the data do not tell us that we must know to improve reach:
 - What makes data hard to understand?
 - Are there styles of presenting data that are more user friendly?
 - How does data presentation affect perceptions of data quality?

Information Seeking

- ◆ Hispanics respondents to HINTS are the least trusting of health information obtained from a variety of sources.
- ◆ Also, the least confident that they can obtain cancer information from a variety of sources.
 - ◆ Are these issues due to health literacy, language issues or some combination of these factors?
 - ◆ Are there translation and interpretation issues that affect trust, frustration, understanding?

Strategies for Examining Information and Knowledge Gaps

◆ Intersectionality

- How do SES and race/ethnicity interact to affect information seeking?
- Perceptions of the information environment?
- Information needs or preferences?
- How are SES/race/ethnicity and gender interactions relevant in analyses of health information needs?