Impact of medical mistrust and discrimination on satisfaction with birth control services among young Latina women in rural Oregon

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TOPIC/TARGET AUDIENCE: Public health professionals, clinicians, and researchers interested in improving access to and utilization of contraceptives, health care access for Latinos in Oregon, and satisfaction with health care.

ABSTRACT: Racial/ethnic discrimination and medical mistrust contribute to disparities in use and quality of health care services. Previous work examining the influence of discrimination and medical mistrust on health care experiences has focused primarily on African Americans. Little is known, however, about the influence of these factors on health care satisfaction among Latina women. We assessed the relationship between medical mistrust and discrimination on satisfaction with birth control services among young adult Latina women. Surveys were conducted with 216 Latina women aged 18-25 living in rural communities in Oregon. Using multivariable logistic regression models we explored the relationship between medical mistrust and everyday discrimination on satisfaction with birth control services, accounting for perceived access barriers and other relevant factors. Nearly three-quarters of the participants reported satisfaction with birth control services. Latina women who reported higher levels of medical mistrust and discrimination reported being less satisfied with birth control services. After adjusting for perceived access barriers and other relevant factors, only discrimination based on race/ethnicity remained significantly associated with satisfaction. Implications of everyday discrimination on Latina women's satisfaction with birth control services and the importance of addressing cultural and structural barriers to health care services for young adult Latinas will be discussed.

OBJECTIVE(S):

- Describe the association between medical mistrust and discrimination on satisfaction with birth control services among young-adult Latinas.
- Discuss the implications of these findings in the context of efforts to expand birth control services to this population.

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