



Bridging the Gap: A Creative Initiative to Reduce Racial and Ethnic Health Disparities in Addiction Through Multilingual Health Literacy Engagement



Eldridge, Susan
National Institute on Drug Abuse

Intro

This research paper presents a creative initiative aimed at addressing racial and ethnic health disparities among individuals living with addiction through community engagement centered around health literacy. Specifically, this study emphasizes the pressing need to expand written and verbal communications with non-English speaking populations affected by addiction, utilizing novel and innovative strategies. By examining existing literature, exploring successful interventions, and drawing on expert insights, this paper proposes a framework for implementing multilingual health literacy initiatives to enhance access to healthcare information and improve health outcomes in diverse addiction-impacted communities.

This study took place at the National Institute of Drug Abuse (NIDA) Intramural Research Program (IRP) as part of the agency's marketing and community engagement efforts.

NIDA IRP's collaboration with the University of Maryland Health Advocates in Reach & Research HAIR initiative, partnerships with barber shops and hair salons have proven to be highly effective. The trusted relationships between the barber and hair stylists are utilized to distribute vital health care information. The most recent example of the shots in the arms COVID vaccine sites at barber shops increased vaccination rates in the African American community. Additional engagement with the organization Identity, Inc. has allowed for trusted interactions within the Spanish speaking community. Through a foundational relationship with Identity, Inc., NIDA IRP has implemented integrated educational opportunities to bring about awareness around the Fentanyl crisis with Spanish speaking teenagers and young adults in Montgomery County Maryland. The Black and Brown Coalition for Educational Equity and Excellence talks about the need for communication to be frequent, varied, and relevant¹.

Traditionally, minority and underserved populations are severely underrepresented in clinical trials. Several reasons are cited in the literature²⁻⁸ which include lack of trust and lack of relationship established between researchers and community members. Language is a fundamental barrier when researchers cannot understand and communicate with potential participants. For example, as noted earlier, our work with barbershops has shown that when we engage with community members where they are, we can establish better communication processes that eventually may result in participation in research.

According to a recent study the participation of Spanish speaking individuals in clinical trials is generally low³. The study analyzed data from over 80,000 clinical trials registered on ClinicalTrials.gov between 2000 and 2018 and found that only 4.3% of trials reported Spanish as a language option for participants. Of those that did report Spanish as an option, only 3.7% had Hispanic or Latino participants. This suggests that the inclusion of Spanish speaking individuals in clinical trials is limited. It also highlights the need for greater efforts to recruit and retain Spanish-speaking individuals in clinical trials to improve health equity and outcomes for this population.

To examine how our agency is doing with engaging populations for whom English is not their primary language, this study established the following objective: to assess the number of monolingual Spanish-speaking callers who responded to invitations to participate in NIDA-IRP clinical trials.

Methods

We sought to assess the number of Spanish-speaking callers in response to invitations to participate at the NIDA-IRP. A survey of the NIDA IRP Screening Team was performed. Each of the team members were retrospectively asked about the number of calls that they received during 2022 seeking information or attempting to enroll in a clinical study from monolingual Spanish speaking individuals.

Results

During 2022, there were four monolingual Spanish speaking callers out of 1,299 total inquiries. Further data analysis could not be done because the NIDA IRP Screening Team is English speaking only. A language barrier existed that prevented the ability to communicate effectively and garner additional data.

Discussion

Although limited by nature of our data, the present study adds to the chain of evidence indicating that having culturally competent recruitment strategies, including engaging trusted community leaders, and utilizing culturally appropriate messaging, may help increase participation. Some research institutions and pharmaceutical companies have implemented initiatives to improve Spanish speaking community engagement, such as bilingual recruitment materials, bilingual study staff and language assistance services.

- 1: Lewin A & Roy K, 2020. *Securing Educational Equity: Learning from the Lived Experiences of Black, Latino, and Low-Income Families. The Black and Brown Coalition for Educational Equity and Excellence.* Accessed May 16, 2023 at <https://identity-youth.org/wp-content/uploads/2020/10/HNAL-Securing-Educational-Equity-Report-Black-and-Brown-Coalition-10-6-20-.pdf>
- 2: Johnson-Mann CN, Cupka JS, Ro A, Davidson AE, Armfield BA, Miralles F, Markal A, Fierman KE, Hough V, Newsom M, Verma I, Dozic AV, Bihorac A. Systematic Review on Participant Diversity in Clinical Trials-Have We Made Progress for the Management of Obesity and Its Metabolic Sequelae in Diet, Drug, and Surgical Trials. *J Racial Ethn Health Disparities.* 2022 Dec 19. doi: 10.1007/s40615-022-01487-0. Epub ahead of print. PMID: 36536164.
- 3: Occa A, Morgan SE, Potter JE. Underrepresentation of Hispanics and Other Minorities in Clinical Trials: Recruiters' Perspectives. *J Racial Ethn Health Disparities.* 2018 Apr;5(2):322-332. doi: 10.1007/s40615-017-0373-x. Epub 2017 Apr 27. PMID: 28452008.
- 4: Haley SJ, Southwick LE, Parikh NS, Rivera J, Farrar-Edwards D, Boden-Albala B. Barriers and Strategies for Recruitment of Racial and Ethnic Minorities: Perspectives from Neurological Clinical Research Coordinators. *J Racial Ethn Health Disparities.* 2017 Dec;4(6):1225-1236. doi: 10.1007/s40615-016-0332-y. Epub 2017 Feb 7. PMID: 28176157; PMCID: PMC5547022.
- 5: Pariera KL, Murphy ST, Meng J, McLaughlin ML. Exploring Willingness to Participate in Clinical Trials by Ethnicity. *J Racial Ethn Health Disparities.* 2017 Aug;4(4):763-769. doi: 10.1007/s40615-016-0280-6. Epub 2016 Sep 7. Erratum in: *J Racial Ethn Health Disparities.* 2016 Oct 31; PMID: 27604379.
- 6: Kurt A, Semler L, Jacoby JL, Johnson MB, Careyva BA, Stello B, Friel T, Knouse MC, Kincaid H, Smulian JC. Racial Differences Among Factors Associated with Participation in Clinical Research Trials. *J Racial Ethn Health Disparities.* 2016 Sep 8. doi: 10.1007/s40615-016-0285-1. Epub ahead of print. PMID: 27631379.
- 7: Vickers-Smith R, Justice AC, Becker WC, Rentsch CT, Curtis B, Fernander A, Hartwell EE, Ighodaro ET, Kember RL, Tate J, Kranzler HR. Racial and Ethnic Bias in the Diagnosis of Alcohol Use Disorder in Veterans. *Am J Psychiatry.* 2023 May 3;appiajp21111097. doi: 10.1176/appi.ajp.21111097. Epub ahead of print. PMID: 37132202.
- 8: Devlin A, Gonzalez E, Ramsey F, Esnaola N, Fisher S. The Effect of Discrimination on Likelihood of Participation in a Clinical Trial. *J Racial Ethn Health Disparities.* 2020 Dec;7(6):1124-1129. doi: 10.1007/s40615-020-00735-5. Epub 2020 Mar 10. PMID: 32157614; PMCID: PMC7805541.

Susan Eldridge has no Conflicts of Interest to report, and the content is solely the responsibility of the author and does not necessarily represent the official views of the National Institutes of Health.

