

5-2022

Supplying Telehealth Resources Through Marketing

Delfina Sanchez

Follow this and additional works at: https://digitalcommons.csumb.edu/caps_thes_all

This Capstone Project (Open Access) is brought to you for free and open access by Digital Commons @ CSUMB. It has been accepted for inclusion in Capstone Projects and Master's Theses by an authorized administrator of Digital Commons @ CSUMB. For more information, please contact digitalcommons@csumb.edu.

Supplying Telehealth Resources Through Marketing

Delfina Sanchez

Salud Para La Gente- Mentor: Oneez Banuelos

Collaborative Health & Human Services

Department of Health, Human Services and Public Policy

California State University Monterey Bay

May 4, 2022

Author Note

Delfina Sanchez, Department of Health Human Services and Public Policy, California State University Monterey Bay. This research was supported by Salud Para La Gente. Correspondence concerning this article should be addressed to Delfina Sanchez, California State University Monterey Bay, 100 Campus Center, Seaside, CA, 93955. Contact: delsanchez@csumb.edu

Abstract

Salud Para La Gente is a non-profit healthcare organization with clinics in Santa Cruz County and North Monterey County. Its mission is to provide high-quality, comprehensive, and cost-effective healthcare that is responsive to the needs of the communities they serve. Health inequities among Hispanics in the United States are too high. Contributing factors such as the lack of access to healthy foods, medical insurance, and community resources increase the risk of health issues, medical costs burden, shorter life expectancy, and weakened quality of life. The Salud Para La Gente Telehealth project aimed to increase marketing awareness through a website that included an educational video in English and Spanish to help patients conduct video visits from anywhere. The goal was to increase the number of clients and level of engagement with the agency by providing a bilingual resource that meets the clients' needs.

Keywords: Hispanic Inequities, Telehealth Resources, Video Visits, Medical Cost Burden, Quality Of Life

Agency and Communities Served

According to Salud Para La Gente, health and wellness are necessary components for keeping a good, happy life. They also understand that their patients' health begins where they live, work, learn, pray, and play. Salud is a non-profit healthcare organization that works in clinics in Santa Cruz and North Monterey counties. Salud Para La Gente has made it its goal as a 'health home' to provide high-quality, comprehensive, and cost-effective healthcare responsive to the needs of the communities they serve. They aim to provide high-quality healthcare to everyone who requires it and be present where their community requires it (Salud Para La Gente, 2021).

Problem Description

Health inequities among Hispanics in the United States are too high, and the problem affects many of them. Contributing factors to this problem include food deserts, where Hispanics face oppression caused by a lack of access to high-quality, healthy foods (Cuevas et al., 2016), a lack of access to medical insurance, and a lack of community resources and knowledge about telehealth. Telehealth could be a barrier for some individuals due to cost and a lack of digital and health education (Truong et al., 2022). The social consequence of the health inequities among Hispanics is leading to increased risk of health issues, medical cost burdens, and shorter life expectancy

Contributing Factors

Lack of Community Resources and Knowledge of Telehealth

A lack of community resources and knowledge about telehealth services can affect access to health services. Furthermore, Black Hispanics who live in low-income communities

have more people without jobs and a higher poverty rate than White Hispanics. These factors affect access to social and physical environmental resources and become obstacles to health and well-being. It is also possible that Black Hispanics, specifically those living in high non-Hispanic Black segregated communities, may not have culturally appropriate social relations with resources to lessen the effects of specific stressors. (Cuevas et al., 2016). In addition, for racial/ethnic minorities, telehealth-provided care has promise for a wide range of illnesses and outcomes, especially when delivered in the patient's preferred language (Truong et al., 2022).

Lack of Access to Medical Insurance

Not having medical insurance also affects the Hispanic community. Research on racial and ethnic disparities in healthcare access and utilization constantly identifies Hispanics as one of the most disadvantaged ethnic groups. Using courses of action such as the usual source of care, health insurance coverage, and the quality of care received, barriers for Hispanics are easily identified (Paz & Massey, 2016).

Food Deserts

Food deserts not having access to healthy foods to have a nutritious, healthy diet also contributes to the health inequalities among Hispanics. Approximately a quarter of Hispanic families live in poverty. Hispanics are unequally oppressed by not having access to quality, nutritious foods and higher exposure to stress (Cuevas et al., 2016).

Consequences

Increased risk of Health issues

The most significant consequence of the health inequity for Hispanics is the increase in health issues. Not having healthy foods contributes to obesity, heart disease, and diabetes.

Hispanics are 50% more likely than Whites to die from diabetes and liver disease. Mexicans and Puerto Ricans are nearly twice as likely as whites to die from diabetes. (CDC, 2015)

Medical Costs Burden

The medical cost burden among Hispanics is another factor in accessing health care despite having the Affordable Care Act. The Affordable Care Act aimed at increasing the number of non-elderly enrollees. However, Hispanics have the highest percentage of uninsured people (32%), accompanied by American Indians (27%), Blacks (21%), Asians (18%), and Whites (13%) (Kaiser Family Foundation, 2017). This contributes to health disparities. In the United States, Hispanic people with at least a high school diploma (37%) lack frequent access to health care services, compared to those with at least some college degree (19%). In addition, nearly a quarter of Hispanics reported delays in receiving health care due to financial problems (Aponte, 2017).

Shorter Life Expectancy

Even though life expectancy and quality of life among Hispanics may be high when compared to other ethnicities where they live can decrease their life expectancy and quality of life. Studies involving minority populations have revealed inequalities in particular regions where Blacks and Hispanics report worse health than Whites and Asians. In order to understand the overall health status of the population, investigators looked at the relationship between health-related quality of life and physical activity/diet among Black, Hispanic, and Asian communities in New York City. Health-related quality of life was measured by self-reported physical health, mental health, and social functioning. Immigrant communities' Hispanic and Asian populations report healthier diets but lower weekly physical activity than other populations in the area. The findings indicate significant differences among each category, with Hispanics

most likely to engage in adequate physical activity, consume recommended fruits and vegetables, and report having a healthy diet (Paz & Massey, 2016).

Problem Model

Contributing Factors	Problem	Consequences
<ul style="list-style-type: none"> ● Lack of Community resources and knowledge about Telehealth ● Lack of access to Medical Insurance ● Food Desert (not having access to healthy foods) 	<p>Health inequities among Hispanics in the United States are too high.</p>	<ul style="list-style-type: none"> ● Increased risk of health issues(diabetes) ● Medical Costs Burden (to family and city/agency) ● Shorter life expectancy (and quality of life)

Project Description and Justification

Project Description

The project will increase marketing awareness through a website that includes an educational video in English and Spanish to help patients have video visits from anywhere. The goal is to increase the number of clients and level of engagement with the agency by providing a bilingual resource that meets the clients' needs. The website's primary goal is to give the community a bilingual and valuable resource for their needs. This is important because, since the coronavirus virus epidemic in 2019, many clinics have increased their use of telehealth.

Justification

Increasing focus on patient satisfaction, quick and qualitative care, and the price has led to greater telehealth use. Patients and providers have benefited from telemedicine, but regulatory, legal, and payment barriers have limited widespread implementation (Gajarawala & Pelkowski, 2021). However, many patients decline telehealth services because they do not know how to participate in a video visit because the instructions are in English. Having this website with a video and instructions in Spanish will be beneficial in educating them on telehealth services.

Project Implementation

The web page had all the information needed to educate and encourage patients to feel secure doing video visits independently. Also, the webpage was a tool that could be used for future video visits. Assessment Plan

The website targets Salud Para La Gente patients and focuses on bringing awareness to telehealth services. The website was promoted by distributing flyers with a QR Code in the local community. A QR (quick response) is a code that takes the user directly to the webpage by scanning through the lens of their camera phone. The distribution consists of printing the flyers, distributing the flyers to community members, and posting a flyer in a local laundromat a few blocks away from the agency to raise awareness of the website.

Expected Outcomes

The goal was to see an increase of 20 video visits by the end of one week, increasing 1% in video visits. The website was monitored for the number of people who visited the website with a QRcode. The number of video visits was tracked by Program Coordinator Specialty Services Jose Santana and the intern.

Project Results

According to Jose Santana, around 170 calls are made weekly at the agency to patients to convert phone appointments into video visits. Around 55 patients usually agree (32%). During the week of video implementation, from April 13 to April 20. Around 170 calls were made, and 63 patients agreed to have video visits (37%). There was an increase of 5% in video visits due to the project. I did not reach the 1% I had initially wanted because I had only one week to implement the project. However, more time to implement the project would have resulted in reaching the goal

Conclusion & Recommendations

Conclusion

Telehealth has become an essential key to providing health care services. Unfortunately, many people who are still not educated on telehealth are declining video visits. This prevents patients from obtaining the best health care. Telehealth continues to expand, and with the expansion, more awareness needs to be provided. The web page can be an example of how awareness can make a difference in increasing video visits.

Recommendations

Recommendations for the agency are to focus on awareness of telehealth services. Creating a bilingual platform of the agency's choice could benefit both the agency and patients by increasing video visits and educating patients at the same time. Also, having a partnership to help promote telehealth services can have a more significant impact on the community. Tasks are done faster and more efficiently with a more hands-on deck, resulting in increased efficiency.

References

- Aponte, J. (2017). Health Disparities and Hispanics. *Hispanic Health Care International*, 15(2), 51–51. <https://doi.org/10.1177/1540415317708513>
- Centers for Disease Control and Prevention. (2015, May 5). *Hispanic health*. <https://www.cdc.gov/vitalsigns/hispanic-health/index.html>
- Cuevas, A. G., Dawson, B. A., & Williams, D. R. (2016). Race and skin color in Latino health: An analytical review. *American Journal of Public Health* 106(12), 2131-2136. <https://ajph.aphapublications.org/doi/full/10.2105/AJPH.2016.303452>
- Gajarawala, S. N., & Pelkowski, J. N. (2021, February). Telehealth benefits and barriers. *The Journal for Nurse Practitioners* 17(2), 218–221. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7577680/>
- Paz, K., & Massey, K. P. (2016). Health disparity among Latina women: Comparison with non-Latina women: Supplementary issue: Health disparities in women. *Clinical Medicine Insights: Women's Health*, 9s1. <https://doi.org/10.4137/CMWH.S38488>
- Salud Para La Gente. (2021). *About*. <https://splg.org/about/>
- Truong, M., Yeganeh, L., Cook, O., Crawford, K., Wong, P., & Allen, J. (2022). Using telehealth consultations for healthcare provision to patients from non-indigenous racial/ethnic minorities: A systematic review. *Journal of the American Medical Informatics Association*, 29(5), 970–982. <https://academic.oup.com/jamia/article/29/5/970/6527524>
- Telehealth.HHS.gov. (2022, March). *What is telehealth?* <https://telehealth.hhs.gov/patients/understanding-telehealth/>

Appendix A

Scope of Work

Task	Timeline	Parties Involved	Materials/Services Needed	Completed Product
Investigate web-development tools	By 3/11/2022	Delfina, Professor Kimberlyn Forte & Zuleima Arevalo	Access to Google Drive Access to Screen Recording w/ voice-over	Document for Google Sites Play with Screen Recording to see how it works
Start making instructional videos in English/Spanish explaining how to use the Zoom application for video visits.	By 3/18/2022 - 3/24/2022	Delfina, & professor Kimberlyn Forte	Access to Screen Recording w/voice-over, computer	Have videos recorded.
Analysis of internet resources	By 3/25/2022	Delfina and Mentor Oneez Banuelos	Watsonville Public Library	Having internet resources on webpage
Review webpage	4/1/2022-4/7/2022	Delfina, Professor Kimberlyn Forte, Zuleima Arevalo & mentor Oneez Banuelos	Computer and Zoom meeting	webpage
Approval of webpage	4/13/2022	Delfina and mentor Oneez Banuelos	Computer/Cell phone	Approval
Implement the page	4/13/2022-4/20/2022	Delfina	QR Code/ Flyers	Promoting webpage

Evaluate success	By 4/202022	Delfina and Jose Alejandro Santana Lomeli Program coordinator specialty services	Computer/Data	Number of video visits
------------------	-------------	--	---------------	------------------------