Tailoring tobacco control messages for Hispanic populations

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Tailoring culturally competent, linguistically and literacy level appropriate tobacco control messages for Hispanic populations is an essential element in the effective delivery of educational interventions in managed care settings. Tailoring messages maximises opportunities of preserving existent low smoking rates, especially among immigrants, and of targeting rising rates among acculturating women and youth. However, gaining knowledge of the sociodemographic composition of the population, their values, acculturation, the role cigarette use has in social situations, and smoking patterns, is a must in tailoring messages specific to Hispanics. Hispanics, for example, are “social smokers” and smoke in somewhat different patterns from non-Hispanic whites, with a large amount of smoking occurring on Saturdays when friends and family come together. Information such as this is important, because it allows us to work within a Hispanic value system to deliver the most effective messages possible, via the integration of Hispanic cultural elements into effective prevention or cessation intervention strategies.

Other elements to account for include Latino values. Marin and Marin’s Hispanic value system highlights “familism”, or the value of the family as critical for cessation. For example, it is important to convey the negative effects of environmental tobacco smoke on the family. A clear understanding of the values of “simpatía” (smooth social relations), “personalismo” (personal interactions), and “respeto” (respect for authority, such as doctors), can be used within the managed care setting to maximise the effectiveness of tobacco control information. Within clinic settings, physicians, pharmacists, and allied health professionals can be extremely effective in delivering smoking cessation and prevention messages to Hispanics because they are seen as authorities with expertise to provide advice. Messages for Hispanic population groups can be delivered most effectively by individuals who are bilingual, bicultural, and biliterate (read and write in Spanish and English).

The tailoring of appropriate messages calls for an understanding of the Hispanic population’s diversity and heterogeneity, differences by country of origin, and the stressors that accompany immigration status in the United States. It calls for an understanding of variations by acculturation, generational status, foreign born versus US born, and accountability for intergenerational variations among younger versus older population segments. Tailoring culturally appropriate messages also calls for an understanding of tobacco use patterns and cultural and social significance of tobacco in the various ethnic communities. To tailor culturally appropriate messages it is essential to: be aware of community needs in terms of tobacco control; account for language capabilities, with literacy in Spanish as well as English; and develop materials for Spanish populations in the language they are intended to be used versus conducting translations. Effective message tailoring requires investigation of information delivery models that will produce greater impact in the Hispanic community targeted, such as models that use health promoters (promotoras de salud). Understanding cultural values and integrating those into culturally specific messages will go a long way in helping to preserve health while managing care for Hispanics in a culturally appropriate manner.