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Attributes of Non-Hispanic Blacks That Use Chiropractic Health Care: A Survey of Patients in Texas and Louisiana



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Abstract

Objective: The purpose of this study was to describe non-Hispanic blacks that use chiropractic health care to better understand this underserved demographic.

Methods: E-mail and telephone calls were used to recruit doctors of chiropractic (DCs) in Texas and Louisiana to distribute anonymous surveys to their non-Hispanic black patients. Twenty doctors volunteered to participate. Each was sent 10 surveys and self-addressed envelopes to distribute. All doctors were given at least 3 months to distribute surveys to as many non-Hispanic black patients that they had. The survey contained 20 questions designed to develop a profile of non-Hispanic black patients that used chiropractic care. Descriptive statistics were used to summarize demographic and other patient attributes.

Results: Two-hundred surveys were distributed and 44 were completed, yielding a response rate of 22%. Non-Hispanic black patients were more likely to be female (54.5%), be older than 50 years (56.8%), be a college graduate (59.1%), be employed (61.9%), report not receiving public assistance in the past 5 years (81.4%), report a household income of \$20 000 to \$60 000 a year (48.8%), and born in the United States (83.7%). Participants reported that there was a DC within 30 minutes of their address (81.4%), their DC always explained things to them in an easy-to-understand manner (81.8%), their DC always showed respect for what they had to say (88.6%), and their DC always cared about them as a person (86.4%).

Conclusions: In the sample surveyed, non-Hispanic black patients tended to be female, be older, be college educated, be employed, and have a positive viewpoint on their interactions with their DC.

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Introduction

Existing research suggests that non-Hispanic blacks use Complementary and Alternative Medicine (CAM) treatments less often than whites,¹ with the exception of using religion as a form of CAM.^{2–9} In one study, for example, Barnes et al¹⁰ demonstrated that 43.1% of white adults sought out CAM treatments in comparison to 25.5% of blacks. Furthermore, there is minimal research that provides an explanation as to why blacks use CAM less often.^{10–13} Some reasons for the differences observed have been that whites possess higher education and increased annual income, and that blacks lack access to conventional medicine and demonstrate dissatisfaction with it in general.^{10–14}

Limited existing research appears to demonstrate that there are also some similarities between white and black CAM users. White CAM demographic studies show that most users are between the ages of 35 and 49 years, are married, possess some level of college education, and have a household income more than \$50,000.^{13,15–19} Studies specifically focusing on blacks have found that CAM users have an average age of 43.3 years; they are more likely to be female, have a college education, and possess insurance.^{14,20–23} Blacks who regularly use CAM report that it gives them a sense of power over their own health.¹⁴ A common reason for trying CAM among blacks is that they report having another family member use it.²²

Most CAM use research does not break down the amount of use of each CAM subtype (eg, chiropractic, herbal medicine, acupuncture) by minorities.²⁴ Because of the unique intrinsic cultural differences that minority groups possess,²⁴ their reasons for using or not using different forms of CAM remain a gap in existing research.

Chiropractic is one form of CAM as defined by the National Center for Complementary and Alternative Medicine.²⁵ All existing survey research studies demonstrate that blacks use chiropractic health care services less often than whites.^{2–7,9,15,16,26–29} In many instances, whites used chiropractic at least twice as often as blacks.^{2,4,6,7,9,15,16,26,29} Some have attributed this difference to the perception of discrepancies of health care treatment by blacks, lower average educational levels of blacks compared to whites, and the lack of accessibility to doctors of chiropractic (DCs) in black communities.^{2,4,20,21,30}

Very little information currently exists in the literature that describes use of chiropractic by non-Hispanic black patients. Therefore, the purpose of this study was

to develop a profile of and to gain insight to non-Hispanic black patients' utilization of chiropractic services.

Methods

This study was approved by the Texas Chiropractic College (TCC) Institutional Review Board for human subjects. All subjects were provided a written explanation of the study purpose prior to participation in the survey. This trial was registered with the University hospital Medical Information Network Clinical Trials Registry: trial number UMIN000014669.

Study Design and Setting

This was an open descriptive study designed to develop a demographic profile of non-Hispanic blacks that use chiropractic health care. Typically, national studies analyzing CAM use have used telephone,^{13,31} mail,¹⁷ and secondary analyses of national data sets.^{18,29,32,33} This study chose to use mail-out surveys distributed through chiropractic doctors' offices. Twenty chiropractic doctors were recruited for this research study. Each doctor was given 10 anonymous self-addressed stamped surveys to distribute to their non-Hispanic black chiropractic patients; thus, 200 surveys were distributed. Anonymous surveys were mailed back directly from survey participants to the primary investigator, and responses were tallied.

Instrument Development

The initial survey was 48 questions long. Researchers then chose to limit the survey to 20 questions. The intent was to shorten the survey to reduce the likelihood that participants would feel survey fatigue and answer questions inaccurately.¹⁴ A 3-DC panel reviewed existing survey research and developed this survey. The 2 initial authors of this manuscript wrote the questions; and a third DC, TCC's Institutional Review Board chair, reviewed them and provided input on question clarity and value. Two of the members of the panel have already published a review article on non-Hispanic black use of CAM.¹ Fifteen out of the 20 survey questions were modeled after existing questions that have been used in health care survey research. The initial 8 baseline demographic questions (#1-8) for this survey were developed to be almost identical to those generated by Kronenberg et al.⁶ The remaining 12 survey questions were predominantly adapted from the

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