DISPARITIES IN CARDIOVASCULAR KNOWLEDGE IN THE DEAF COMMUNITY: IMPORTANCE OF ACCESSIBILITY

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Introduction

- A large portion of cardiovascular diseases (CVD) are preventable with an informed and healthy lifestyle
- The information needed to mitigate the risk is not always accessible to everyone
- Deaf individuals are a 7x more likely to experience inadequate health literacy.

Research Question

- Does the deaf community experience a disparity in CVD knowledge?
- How does reading ability correlate with CVD knowledge?

Measurement

- Specific background information- family, education, and demographics
- English reading proficiency from the Test of Silent Contextual Reading Fluency-2 (TOSCRF2)
- Heart Disease Fact Questionnaire (HDFQ; Wagner et. al., 2005)

Questions from HDFQ
True or False?

- A person always knows when they have heart disease.
- People with diabetes rarely have high cholesterol.
- High blood sugar puts a strain on the heart.

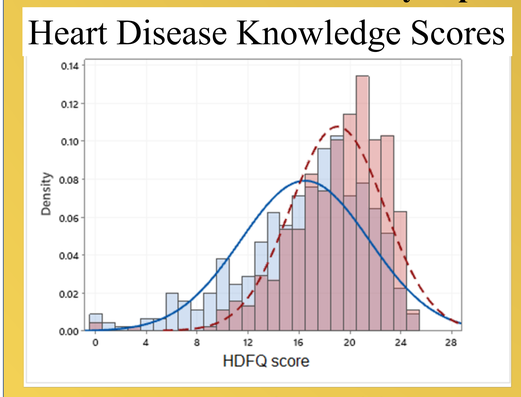
Methods

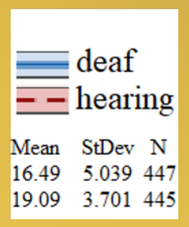
Database from a larger health literacy study (2016-2019) from 3 different locations New York, Michigan, and Illinois (McKee et. al., 2019)

Location	Deaf	Hearing	Age
Rochester, New York	148	150	M=27.7; SD = 11.1
Chicago, IL	150	147	M= 9.3; SD=10.1
Flint, Michigan	149	148	M=32.1; SD=18.1
Total	447	445	M=36.3; SD=16.5

Results

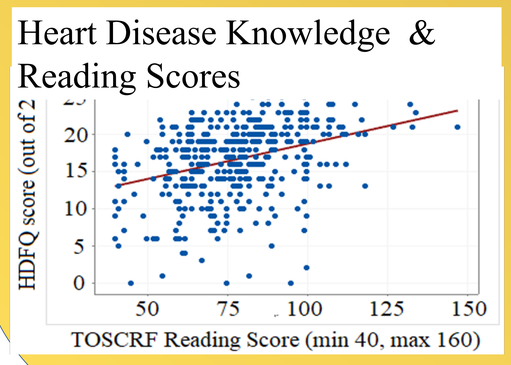
Does the deaf community experience a disparity in CVD knowledge?

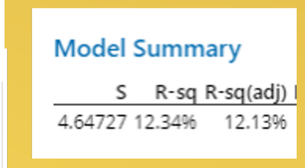




The deaf participants scored lower on average than the hearing participants.

How does reading ability correlate with CVD knowledge?





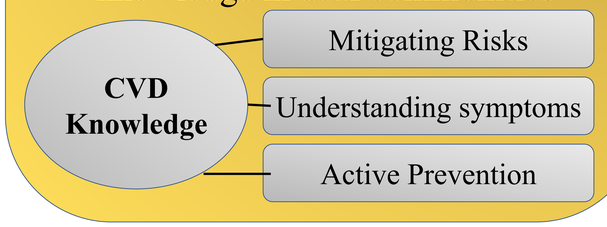
Reading levels account for some (12.34%) but not all, of a person's CVD knowledge.

Discussion

- The deaf participants showed **less** cardiovascular knowledge.
- Reading proficiency contributes to cardiovascular knowledge.

Future Directions

- Investigate & improve CVD knowledge in deaf communities



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