Family planning experiences and perceptions of access: Latina immigrants in a new settlement state

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Abstract: Background. Reproductive health is an integral part of women's self-determination and overall health and wellbeing. Public policies can strengthen or undermine reproductive health. As a health behavior, family planning affects many reproductive health outcomes, and is a key "gateway" health behavior to overall reproductive health and wellbeing.

Immigration and welfare policies have significant and often unexplored public health implications. Recent changes in immigration and other public policies affect the health of new Latin American immigrants in myriad ways. In Kentucky, as in other new immigrant settlement states, most adult Latinas are recent immigrants and foreign-born. As such they live in a post-welfare reform environment where immigrants are often barred from accessing public assistance that could mitigate poverty's negative impact on health. Immigrants in these states may also perceive that they are ineligible for services because of the lack of culturally- and linguistically-accessible services and the general attitude towards immigrants.

Objective. This study looked at how foreign-born Latina immigrants' perceptions of access to and experiences with family planning in an urban center in Kentucky can inform community-based policy initiatives to improve the reproductive health of Latinas.

Methods. Twenty in-depth key informant interviews were conducted from June to August 2011. Nine foreign-born, Latina informal community leaders and 11 social and health service providers, and policy professionals were interviewed in Spanish and English, respectively. Qualitative analysis using an emergent theme approach was conducted using qualitative analysis software.

Results. Findings were categorized into 6 areas: social, political, and cultural context of Kentucky; scope and meaning of family planning; instrumental and perceived barriers; instrumental and perceived facilitators; role of policies in access to family planning; and potential impact of the Affordable Care Act on foreign-born Latinas' access to family planning. Both participant populations made the connection between non-health policies (especially immigration, transportation, and language-access) and family planning access. This study's findings suggest that Latina immigrants' perception of access is affected by immigration and transportation policies at the state and federal level, by local attitudes towards immigration, and language access practices at service agencies. Findings also provide insights into culturally- and linguistically-appropriate approaches to increase knowledge and understanding of family planning among foreign-born Latina immigrants.

Recommendations. This study indicates the need for changes at the policy, organizational, and programmatic level. Public health leadership is needed to bring about these changes. The need for culturally-and linguistically appropriate community outreach, peer-to-peer education, provider training, strong political messages regarding immigrants, advocacy to reverse policies that damage access to health, and enforcement of existing language access policies are among the recommendations in this study. More research is needed in this area, in particular using participatory methods.

Links: Linking Service

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