The Hispanic Community Health Study/Study of Latinos Sociocultural Ancillary Study: Sample, Design, and Procedures

Objectives: The Hispanic Community Health Study/Study of Latinos (HCHS/SOL) Sociocultural Ancillary Study aims to examine associations between sociocultural and psychosocial factors and cardiovascular disease (CVD) and metabolic syndrome prevalence in Hispanics/Latinos. The conceptual framework is based on the Reserve Capacity and Lifespan Biopsychosocial Models, which emphasize multiple risk and protective pathways underlying socioeconomic and ethnic influences in health. This study describes the rationale, participants, and procedures for the HCHS/SOL Sociocultural Ancillary Study.

Design and Setting: The Sociocultural Ancillary Study to the HCHS/SOL is a cross-sectional cohort study with future opportunities for prospective investigation.

Participants: Participants were 5,313 adults, aged 18–74 years, of self-identified Hispanic/Latino descent and representing multiple Hispanic/Latino background groups, recruited from the Bronx, N.Y., Chicago, Ill., Miami, Fla., and San Diego, Calif.

Intervention: Participants completed an interview-administered sociocultural assessment battery within 9 months of their HCHS/SOL clinical baseline exam.

Outcome Measures: The primary outcomes are CVD and metabolic syndrome and its component risk factors.

Results: The Sociocultural Ancillary Study sample is broadly representative of the HCHS/SOL cohort. Weighted demographics are: 55% male, 56% 18–44 years, 44% ≥45 years, and 37% Mexican, 20% Cuban, 16% Puerto Rican, 12% Dominican, 8% Central American, and 5% South American descent.

Conclusions: By testing theoretically driven hypotheses concerning sociocultural and psychosocial factors in CVD, the Sociocultural Ancillary Study seeks to inform future prevention and intervention efforts for US Hispanic/Latinos.

Key Words: Cardiovascular Disease, Culture, Hispanic, Latino, Metabolic Syndrome, Psychosocial Factors, Social Factors

INTRODUCTION

The Hispanic/Latino population grew by 43% between 2000 and 2010 and Hispanics/Latinos are expected to comprise 30% of the United States (US) population by 2050. The terms Hispanic or Latino encompass more than 20 national origin groups, with substantial diversity in ancestry, sociodemographic and cultural characteristics, migration, and US geographic distribution. However, many studies have evaluated the Hispanic/Latino population as a unitary entity or have examined individual ethnic groups (eg, Mexican Americans). Therefore, critical knowledge gaps limit progress in effectively addressing the health needs of the Hispanic/Latino population.

To contribute a clearer picture of Hispanic/Latino health, the National Institutes of Health (NIH) and the National Heart, Lung, and Blood Institute (NHLBI) established the Hispanic Community Health Study/Study of Latinos (HCHS/SOL). This landmark epidemiologic cohort study included 16,415 Hispanics/Latinos aged 18–74 years, representing multiple Hispanic/Latino backgrounds, recruited from four US communities. The goals were to describe the prevalence of risk and protective factors of cardiovascular disease (CVD), pulmonary disease, and other chronic diseases, and to quantify all-cause mortality, fatal and non-fatal CVD, and pulmonary disease exacerbation over time. The first study based on the HCHS/SOL cohort reported relatively low rates of self-reported heart disease and stroke, but high rates of CVD risk factors that were comparable or greater to those identified in non-Hispanic Whites in other national studies. Prevalence of individual risk factors varied significantly across Hispanic/Latino background groups. Participants who were born in the United States were at greater risk than first-generation immigrants for CVD and multiple risk factors; greater duration in the United States was also associated with higher CVD prevalence. These findings demonstrate the need to look beyond pan-ethnic groupings to examine patterns of CVD and associated risk factors within the diverse US Hispanic/Latino population.

Sociocultural factors are posited to have an important role in Hispanic/Latino health. However, most studies in this area have been limited to proxy indicators of acculturation, such as nativity or language preference. Researchers have called for expanding this

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