



Stress, Trust, and Healthcare Among Older Latinos

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Abstract

This project is a pilot study derived as an extension of Tiempo Juntos Por Nuestra Salud, a multilevel intervention designed to promote physical activity among older Latinos. It explores the effects of perceived stress among 23 Spanish-dominant Latinos with cognitive impairment and assesses the impact of minority stress by considering provider trust.

Objective: To gauge the influence of perceived stress and provider trust in a sample of participants experiencing cognitive impairment and ascertain how this may affect experiences with cognitive decline.

Expected results are likely to align with prior research, demonstrating that the Latino community's elevated stress levels and lower provider trust contribute unfavorably to their cognitive health experiences.

This project found that the sample of participants with moderate cognitive impairment (MoCA average = 14.70) had average stress levels (PSS-14) and higher levels of provider trust (TPS).

Introduction

❖ Alzheimer's disease in the Hispanic population is expected to increase to 3.5 million by 2060, a growth which is eight-fold relative to 2012 (Marquine et al., 2021).

❖ **Target Population:** older Latinos (55 & older) with memory impairment

❖ Experience a disproportionate burden of sociocultural stressors, and subsequent memory problems compared to other minorities & non-minorities (Eubank et al., 2022).

❖ The effect of social stressors is observed in a sample of participants with memory problems and their associated perceived stress, as well as how their circumstantial level of trust in healthcare providers could impact experiences with cognitive impairment.

❖ Research has also shown that the Latino communities' medical mistrust is linked to their race/ethnicity and experiences with discrimination (Bazargan et al, 2021).



[Link to References](#)

Methods

A total of 23 study participants were enrolled using telephone-based interviews focusing on stress and provider trust. The pool of participants consisted of males (n = 6) and females (n = 17) aged 55 and older (Min = 59, Max = 88, Mean = 72.61). Participants were recruited from an existing cohort of the Tiempo Juntos physical intervention study, those of whom are in community health centers serving low-income families in North Philadelphia and surrounding communities.

Perceived Stress Scale (PSS-14)

➢ A 14-item tool intended to measure how individuals perceive their life circumstances and includes questions about the individual's feelings and thoughts over the last month.

Trust in Provider Scale (TPS)

➢ An 11-item tool used to assess several components of an individual's trust in their provider, including competence, reliability, privacy, and overall feelings towards their healthcare provider.
➢ Assesses the quality of the patient-physician relationship.

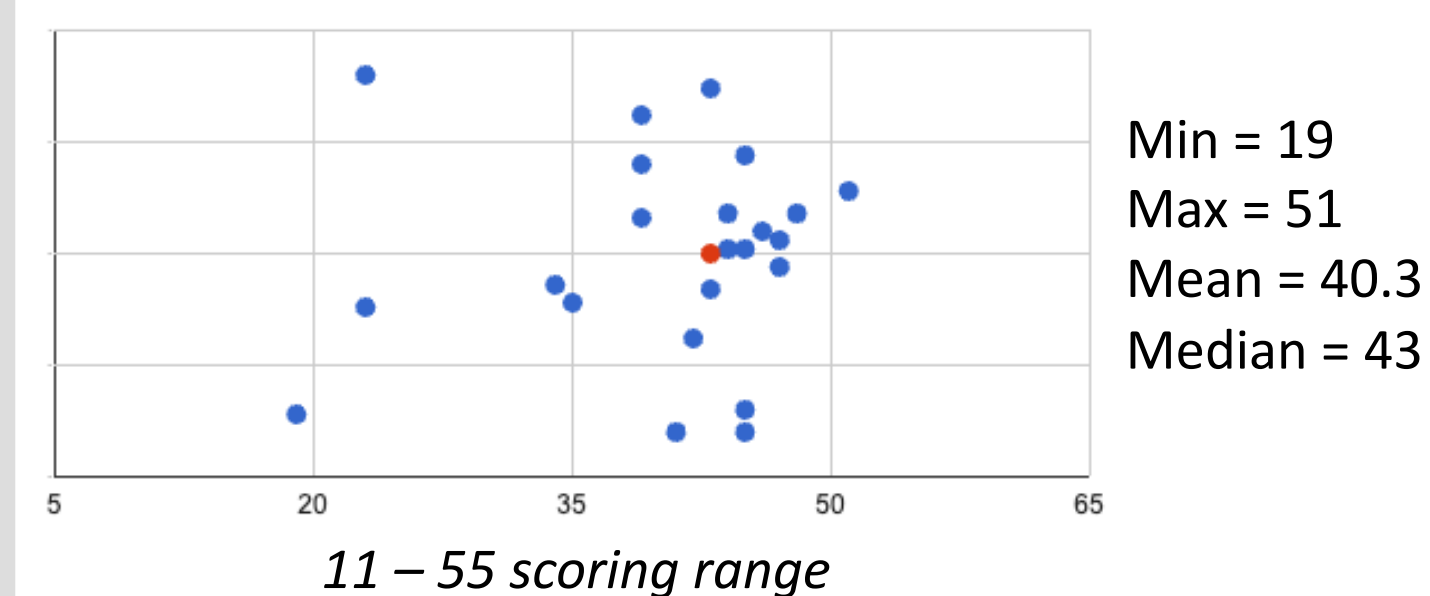
** Participants also had the opportunity to elaborate on any personal experiences that may further explain their stress levels or trust in their physician. **



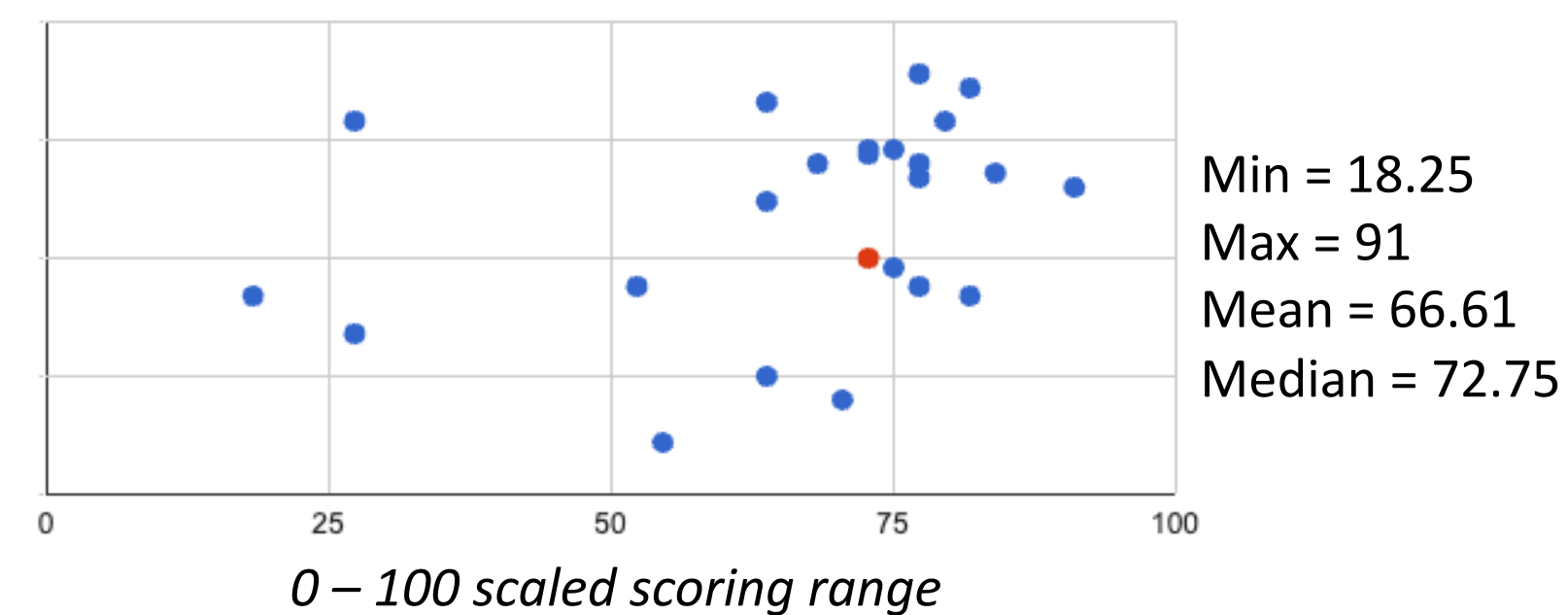
Participants' baseline demographics as well as their most recent MoCA and CDR scores were collected from the Tiempo Juntos study and were used to describe the sample. The MoCA and CDR are tools used to measure cognitive capabilities.

Results

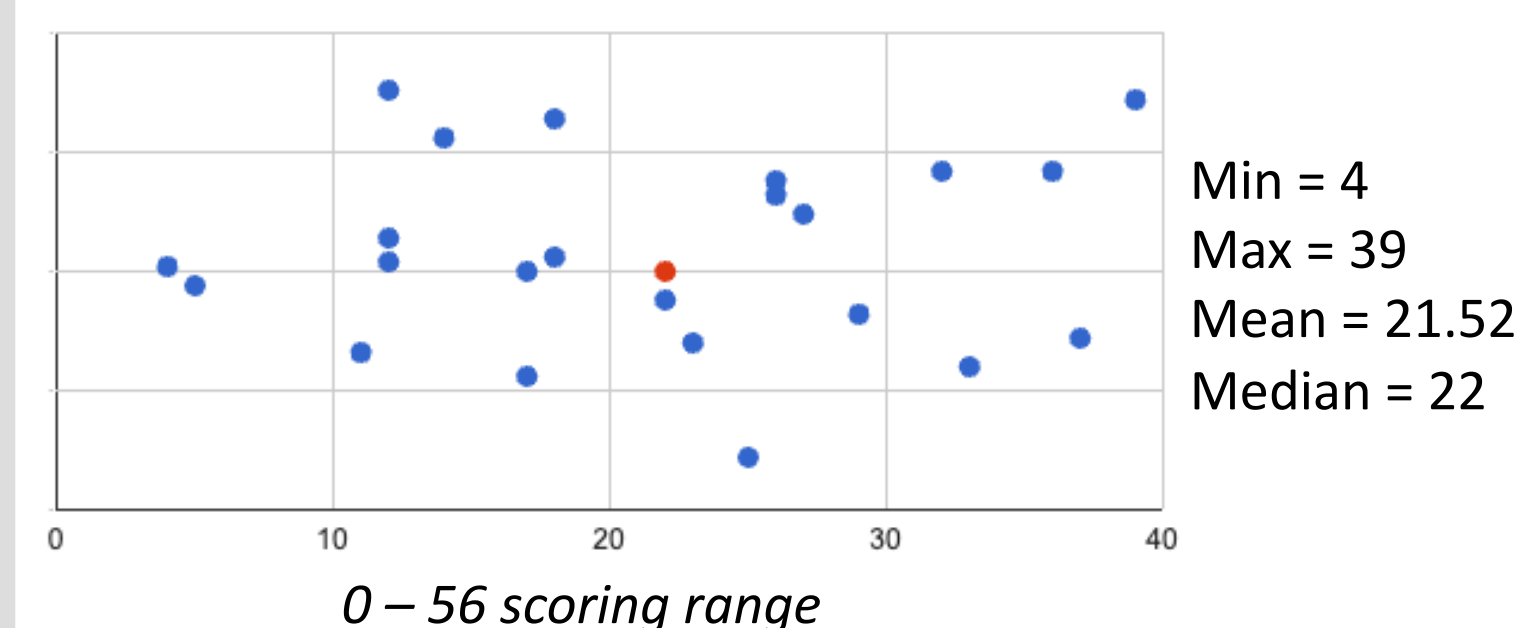
TPS Raw Scores



TPS Transformed Scores



PSS Scores



TPS: Left-skewed distribution → higher scores in provider trust

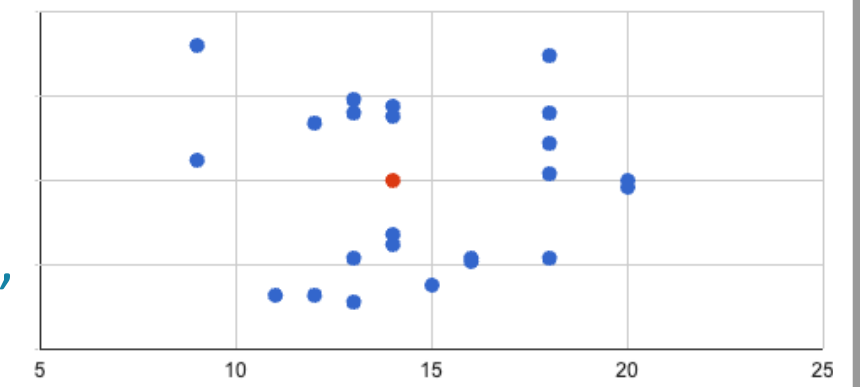
PSS: Symmetric distribution → Average scores in perceived stress, mostly clustered around the second quartile (median)

Conclusion

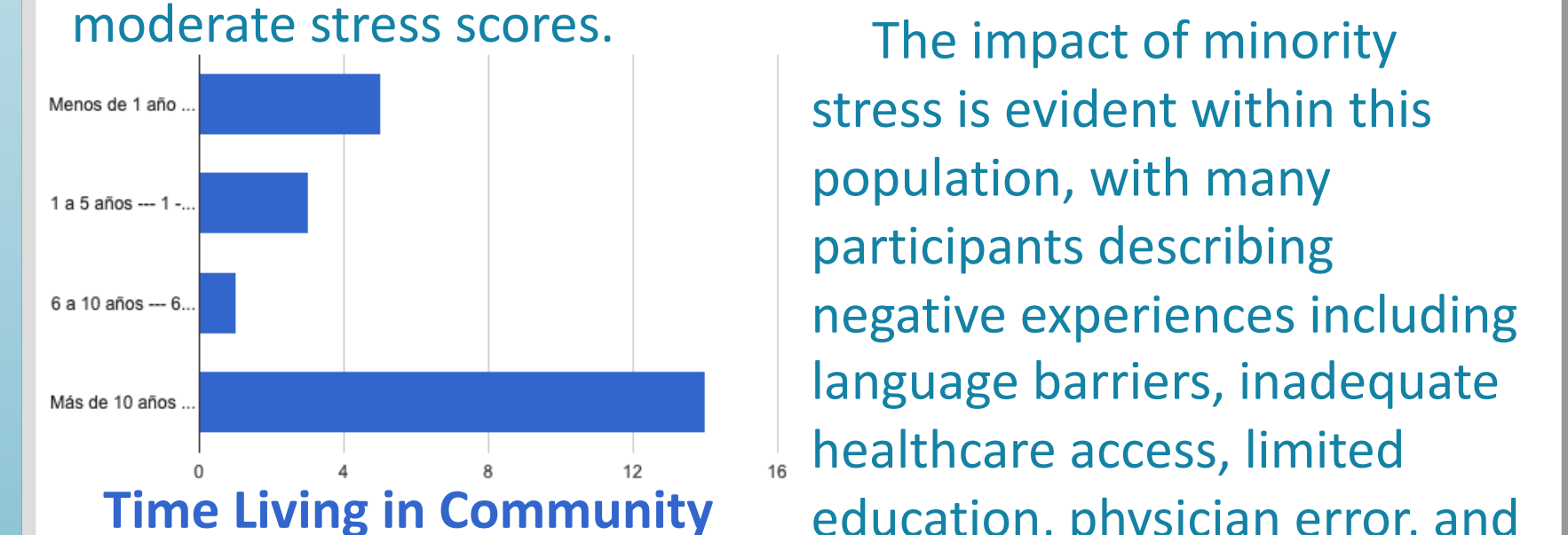
A **correlation** between perceived stress/provider trust and level of cognitive impairment (as per the MoCA and CDR scores) cannot be established due to the ongoing status of the Tiempo Juntos physical activity intervention.

This project's findings provide insight into the complex and diverse natures of perceived stress and provider trust in minority communities. Higher trust and average stress levels were found in the sample population exhibiting moderate cognitive impairment (MoCA Avg = 14.70).

This observation challenges the expectations and prior research, but it also highlights the unique circumstances within this sample that may have influenced the average stress scores and elevated trust levels, suggesting the presence of a more positive patient-physician relationship. Lower education levels (65.2% did not complete high school) as well as having established residency for 10+ years are potential variables that contribute to the stronger sense of provider trust and moderate stress scores.



MoCA Score Distribution



Time Living in Community

The impact of minority stress is evident within this population, with many participants describing negative experiences including language barriers, inadequate healthcare access, limited education, physician error, and miscommunication with medical providers. Although a direct correlation between cognitive function and stress/trust cannot be established at this time, these findings offer insight into the unique healthcare experiences of the Latino community and underscore the need for tailored interventions addressing barriers to healthcare.

Acknowledgements

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