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Closing the Gap: Eliminating Health Care Disparities among Latinos with Diabetes Using Health Information Technology Tools and Patient Navigators

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Abstract

Latinos have higher rates of diabetes and diabetes-related complications compared to non-Latinos. Clinical diabetes self-management tools that rely on innovative health information technology (HIT) may not be widely used by Latinos, particularly those that have low literacy or numeracy, low income, and/or limited English proficiency. Prior work has shown that tailored diabetes self-management educational interventions are feasible and effective in improving diabetes knowledge and physiological measures among Latinos, especially those interventions that utilize tailored coaching and navigator programs. In this article, we discuss the role of HIT for diabetes management in Latinos and describe a novel "eNavigator" role that we are developing to increase HIT adoption and thereby reduce health care disparities.

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Abbreviations: (DCS) Diabetes Connect System, (DSM) diabetes self-management, (HCP) health care provider, (HIT) health information technology, (HbA1c) hemoglobin A1c, (IT) information technology, (LEP) limited English proficiency, (T2DM) type 2 diabetes mellitus, (U.S.) United States

Keywords: cell phone text messaging, diabetes self-management, digital divide, Latino health care disparities, patient navigation

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