

# ACCESS TO HEALTH CARE FOR LATINOS IN THE U.S.

## The Issue

Latinos are the largest and fastest growing minority group in the United States. Around 46 million people of Latino-origin currently reside in the U.S., approximately 15% of the total population.<sup>1</sup> Despite being the largest minority population in the country, lack of access to health care and health insurance remain prominent issues for this community. Latinos are the most vulnerable population in the U.S. in terms of access to health care due to a number of barriers including their overall poor socio-economic status and immigrant status.

To effectively address the needs of the Latino population and to create health care policy interventions, it is pivotal to understand the factors that contribute to the barriers around health care access.

## Health Coverage Rates among Latinos in the U.S.

- Latinos are the least likely to have health insurance of all ethnic groups. Nationally, the uninsured rate among Latinos was 31.7% in 2008, compared to 10.7% among Whites.<sup>2</sup>
- 18% of Latino children lack health insurance in the U.S., compared to only 11% of African American children and 7% of White children who lack insurance.<sup>2</sup>
- 34% of Latino adults under the age of 65 are uninsured, compared to only 14% of non-Latino Whites.<sup>2</sup>
- More than one-fourth of Latino adults in the U.S. lack a regular primary health care provider, and a similar proportion report obtaining no health care information from medical personnel in the past year.<sup>3</sup>

## Barriers to Health Insurance

- **Socio-economic challenges-** when compared to non-Latino Whites, Latinos are more likely to live in poverty, have lower levels of educational attainment, have higher levels of unemployment and are employed in job sectors less likely to provide health insurance.<sup>4</sup>
- **Cost-** 60% of all Latinos state cost as being the primary reason for having no health insurance, followed by employer not offering it (17%) and lack of employment (15%).<sup>5</sup>

- **Lack of employer sponsored insurance-** some of the major industries that provide significant employment opportunities for the U.S. Latino labor force include agricultural, manufacturing, construction, and service sectors which are not only low paying industries, but also less likely to provide health insurance coverage and other employer sponsored benefits for their employees.<sup>6</sup>

## Documentation status-

**Undocumented immigrants:** this population faces even greater barriers to access to health insurance—they are barred from receiving federal subsidies to purchase exchange coverage or enroll in Medicaid and Children's Health Insurance Program (CHIP).<sup>7</sup> It is estimated that undocumented migrants make up 15% of the total uninsured population in the U.S., accounting for approximately 6.8 million people.<sup>8</sup>

**Naturalized citizens:** 14.6% of native born U.S. citizens lack health insurance compared to 22% of naturalized citizens.<sup>2</sup> Furthermore, the uninsured rate for non-citizens is 46.4%.<sup>8</sup>

**Non-citizens/Permanent Residents:** those residing in the U.S. lawfully are barred from receiving Medicaid and CHIP for their first five years living in the U.S.<sup>8</sup>

## Barriers to Health Care

- Along with a lack of health coverage, there are a number of additional barriers to care. These include: lack of knowledge of available services, cost of health services, and lack of comfort with health care services/facilities (e.g. cultural and language barriers).<sup>9</sup>
- The under-representation of Latino health care professionals has also been found to be a barrier. In California, while Latinos represent over one-third of the state's population, Latino physicians account for only 5% of the state's physicians.<sup>10</sup>

## Latino's Opinions on Health Care

- More than eight in ten undocumented immigrants report receiving health information from media sources, such as television and radio. 79% of them say they are acting on this information, and 70% of Latinos state receiving health information from family, friends, churches, or community groups.<sup>11</sup>

- 64% of Latinos state that health information obtained by the media led them to change their diet or exercise regimes; 57% stated their decision to visit a health care facility was a direct result of health information received from the media.<sup>11</sup>
- Among Latinos who have received health care in the past year, 77% rate that care as good or excellent. However, almost one-in-four who received health care in the past five years report having received poor quality medical treatment. Those who believe that the quality of their medical care was poor attribute it to their financial limitations (31%), their race or ethnicity (29%) or the way they speak English or their accent (23%).<sup>10</sup>

## Conclusion

Latinos in the United States are disproportionately affected by barriers to health care. Their overall poor socio-economic status and immigration status places Latinos among the most vulnerable groups in the U.S. Undocumented Latinos in particular are even more susceptible as they have less access to services available to their U.S.-born counterparts. As the Latino population continues to grow, it is crucial to not only understand these barriers but also create solutions for the well-being of current and future generations of Latinos in the U.S.

## Public Policy Recommendations

- Support community based organizations in enrolling Latinos in a culturally and linguistically appropriate manner to available health coverage programs.
- Increase and support existing outreach programs that provide information about health care services and health promotion strategies to Latino populations.
- Promote collaboration between state and local government, universities, community colleges, hospitals, clinics and community-based organizations to create awareness around the barriers to care that the Latino population faces.
- Promote and increase educational opportunities for under-represented Latinos into health professional careers.
- Advocate for universal health insurance for all Californians, including recent and undocumented immigrants.

## References

1. U.S. Census Bureau. 2007. Income, Poverty, and Health Insurance Coverage in the United States: 2006. P. 22 <http://www.census.gov/prod/2007pubs/p60-233.pdf>
2. Pew Hispanic Center, Statistical Portrait of Hispanics in the United States, 2008.
3. <http://www.familiesusa.org/assets/pdfs/health-reform/closing-the-gap.pdf>
4. Council on Scientific Affairs, 1991;Ginzberg, 1991; Hajat, Lucas, & Kington, 2000
5. Adams PF, Heyman KM, Vickerie JL. (2009) Summary health statistics for the U.S. population: National Health Interview Survey, 2008. National Center for Health Statistics. *Vital Health Stat* 10(243).
6. Castañeda, X, et al. (2007) *Migration, health & work: Facts behind the myths*. The Health Initiative of the Americas
7. The Henry J. Kaiser Foundation (2009, October). *The Uninsured: A Primer, Supplemental Data*.
8. Schwartz, K., Artiga, S. (2007) *Health Insurance Coverage and Access to Care for Low-Income Non-Citizen Adults*. Kaiser Commission on Medicaid and the Uninsured.
9. Carrillo, J.E. (2005) *Barriers to health care access in the Latino community: Communication, satisfaction and adherence (powerpoint presentation)*. Montefiore Medical Center.
10. Grumbach, K., Odom, K., Moreno, G. (2008). *Physician diversity in California: New findings from the California Medical Board Society*. Center for California Health Workforce Studies, University of California, San Francisco.
11. <http://pewhispanic.org/reports/report.php?ReportID=91>

## Author Information

- Xóchitl Castañeda - Director of Health Initiative of the Americas at UC Berkeley School of Public Health.
- Gil Ojeda, Director, UC California Access to Care Program, UC Berkeley School of Public Health

## Acknowledgements

This fact sheet was updated and reviewed with the support of Luis Javier Hernandez, Rosario Alberro, and Caroline Dickinson, Health Initiative of the Americas; Al Santana, Latino Coalition for a Healthy California; Michael Rodriguez, Center for Health Policy Research at the University of California, Los Angeles; and Gabriela Alaniz, Migration and Health Research Center at the University of California, Davis. We would also like to acknowledge the support from Miguel Pinedo, Magdalena Ruiz Ruelas, and Francisco Ayala from the Health Initiative of the Americas.

## Suggested Citation

Castañeda, X, Ojeda, G. (2010) *Access to Health Care for Latinos in the U.S.* (Fact Sheet) Health Initiative of the Americas. University of California Berkeley, School of Public Health.