

Understanding Health Disparities: The Hispanic Experience

Mary Lou de Leon Siantz PhD, FAAN
Assistant Dean Diversity & Cultural Affairs
Robert Wood Johnson Nurse Executive Fellow
Director Migration Health Program
Center for Health Disparities
School of Nursing
University of Pennsylvania



Woodrow Wilson Center – April 4, 2006

Plan for Presentation

- What we know
- What we do not know
- Recommendations

What We Know

- Diversity of U.S. population
- Diversity of health care consumers
- Health Care Disparities Exist



Hispanic Population

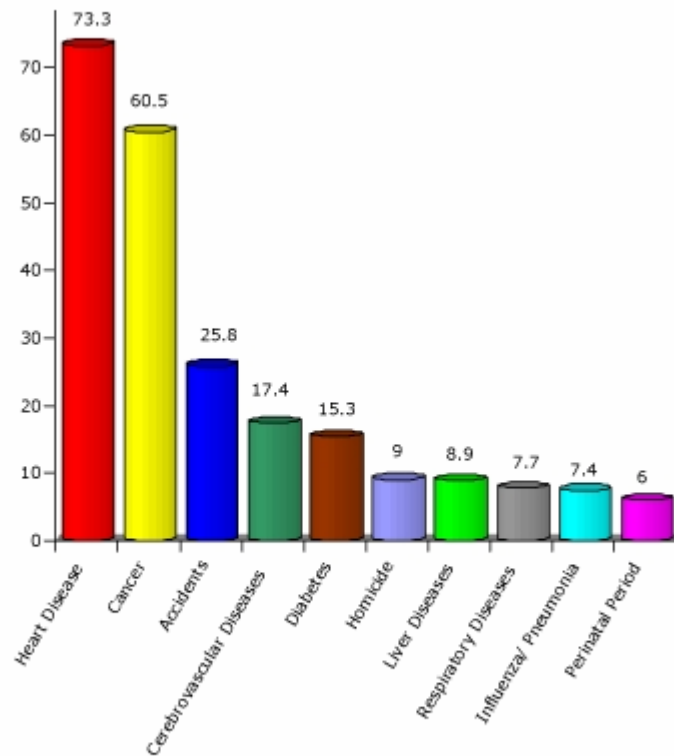
- By 2050 will be 25% of U.S. population
- Although some migrants continue to return home, there has been a decline in circularity during the past 20 years as migrants found year around jobs and migrated north
- Among Mexicans probability of returning after 3 years in U.S. rose to 46.1% 1997 – 2002
- Feminization of Migration with women remaining in larger numbers in U.S.

(Institute for the Study of Migration, Georgetown University)

Hispanic Population

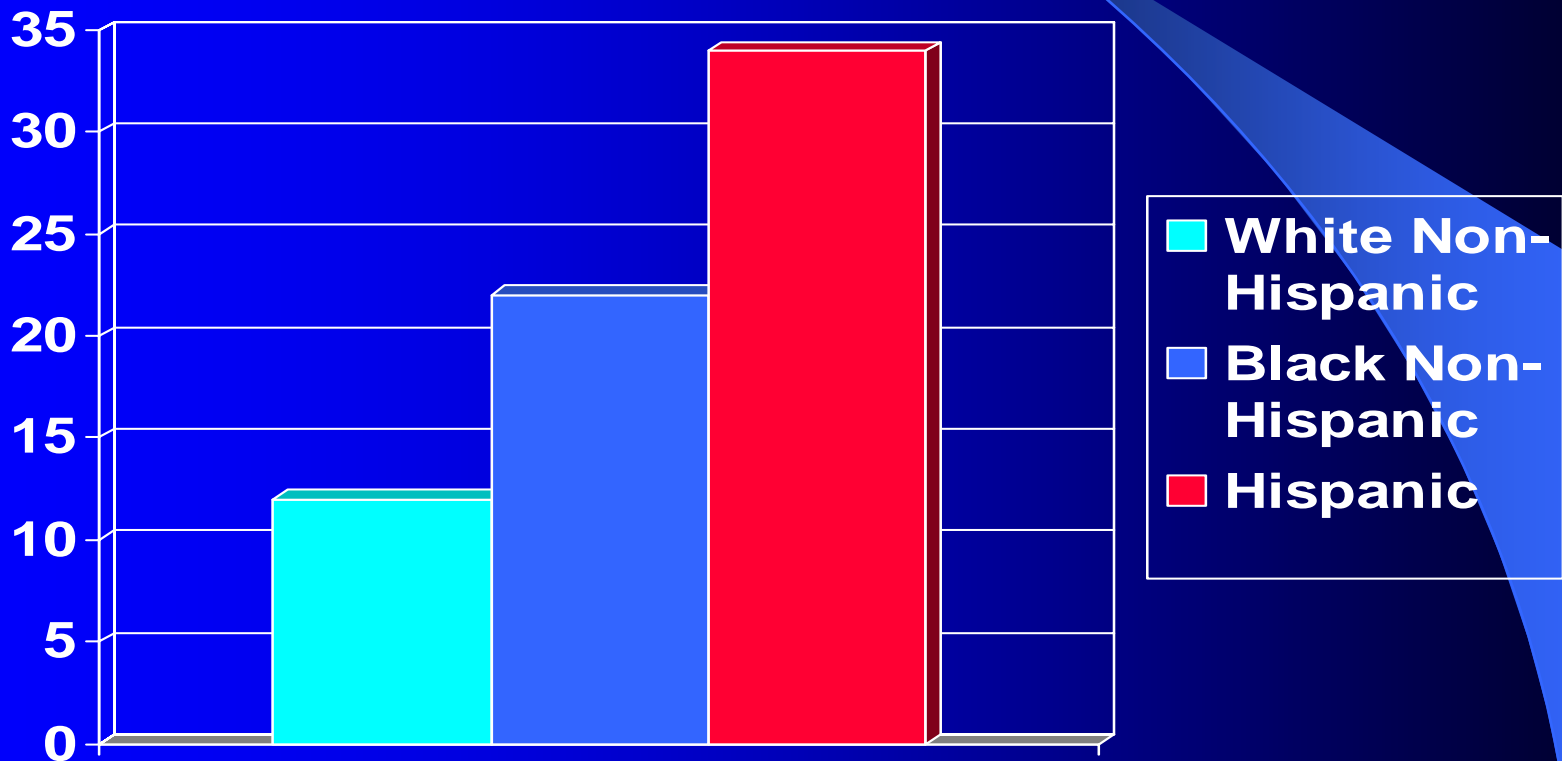
- Restriction on legal and social rights of immigrants has had no measurable impact on flows
- Large backlogs and family reunification contribute to unauthorized migration

10 Leading Causes of Death Among Hispanics, Both Sexes, All Ages, Rates per 100,000 Population, USA 2001



Source: Anderson RN, Smith BL. Deaths: Leading Causes for 2001. National Vital Statistics Reports; Vol 52 no.9 table 2. Hyattsville, Maryland: National Center for Health Statistics. 2003.

Percent of US Population Not Covered By Health Insurance During Any Part of the Year by Race and Hispanic Origin: 2001



Who are Hispanic Children?

- One of 4 preschool children in the U.S. are Hispanic
- Hispanic Children are the largest group of minority children in the U.S.
- Compose 16% of the population under 18 years of age
- Will account for significant portion of future U.S. leaders, workers, & taxpayers

Hispanic Children

- 27% (1 in 3) live in poverty
- Number of uninsured Latino children (1.1 million) greater than for any other racial/ethnic group

Health Status

- Latino children most likely to have sub-optimal health status
- 26% in less than excellent or very good health compared to 12 % of non-Hispanic white children (America's Children: Key National Indicators of Well-Being, 2005).

Developmental Health Risks

- High risk for Behavioral and Developmental Disorders
- Puerto Rican Children among highest national prevalence of developmental disorders and functional limitations
- Research needed to find out WHY
- Many unanswered questions about mental health needs and use of services by Latino children in general
- Dental Caries disproportionately higher

Obesity & Gender differences

- High risk for Obesity & Type II Diabetes
- Latino boys most overweight
- Latino girls second most overweight racial/ethnic group of U.S. children
- More research needed to determine why Latino children at such high risk for obesity
- More research needed to develop preventive intervention
- Mexican children most likely to be overweight (23% vs. 16% of white children)

Asthma Prevalence

- More than half million Latino children have asthma
- Puerto Rican children have highest prevalence of active asthma (11%) vs. (6%) for Black Children and (3%) for White Children

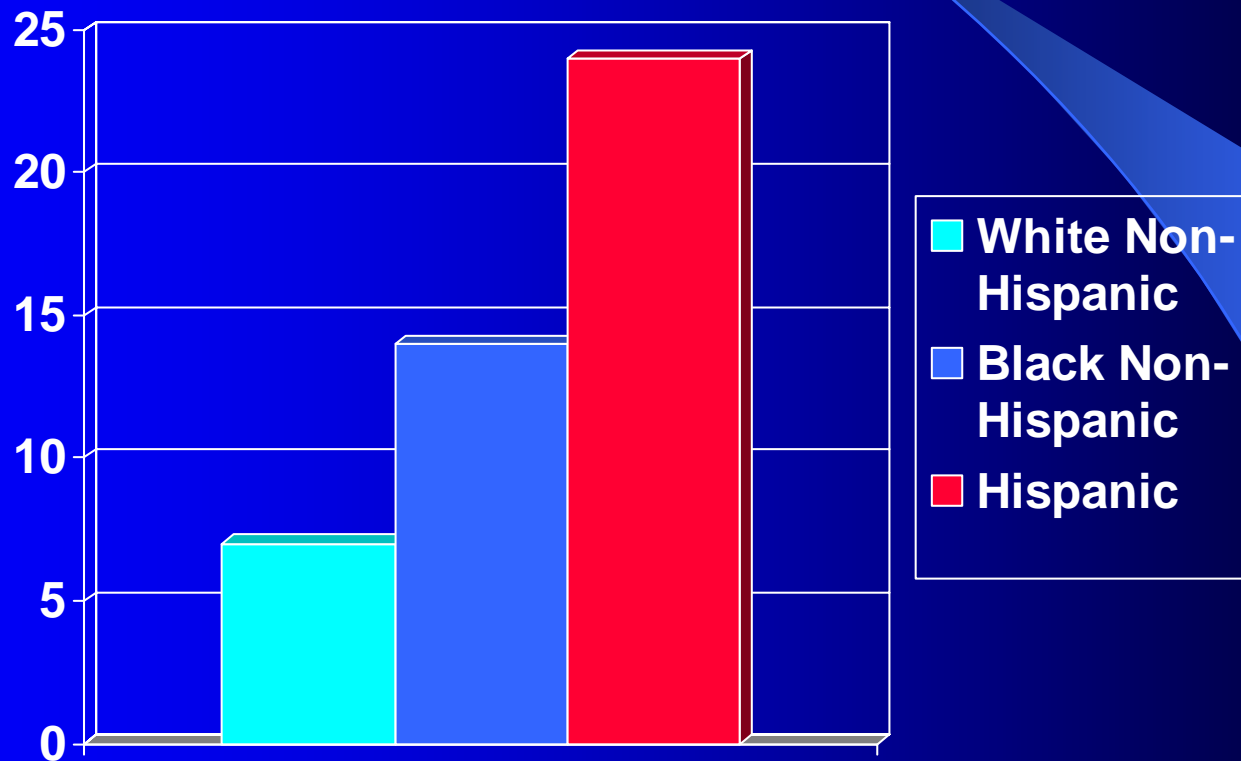
Latino Adolescent Birth Rate

- Latinos have highest adolescent birth rate at:
- 50 per 1,000 females 15 – 17 years of age
- Compared to 39 per 1,000 for African Americans
- 12 per 1,000 for Whites

Immunization Rates

- 21% of Latino children not up to date

Percent of U.S. Children not covered by Health Insurance During Any Part of the Year by Race and Hispanic Origin



Access to Health Care

- As Hispanic population grows, so does rates of the uninsured: 1 out of 3 Hispanics (33%)
- Nearly 24% of Hispanic children uninsured, the largest number of uninsured children in U.S.
- Hispanics have highest rate of uninsured, especially foreign-born Hispanics

Special factors

- Immigration
- Acculturation
- Language

Education

- Less likely to participate in early childhood education
- 20% participate vs. 44% of African Americans
- 42% Whites
- Latino girls less likely to participate in after school activities including sports, arts, scouts, religious activities
- 25% Hispanics have less than 9th grade education
- Mexicans have lowest attainment, Cubans the highest

Findings of the Sullivan Report – 2004

- Limited diverse faculty role models
 - 10% BS/Graduate Schools of Nursing
 - 8.6% Dental Schools
 - 4.2% Medical Schools
- Diversity is also related to disparities among Health Professionals
- Rationale for increasing diversity is compelling
- There are historical roots of disparities at all levels of education and practice

Underrepresented Providers

- Black, Latino and Native Americans are underrepresented among healthcare workers in the United States
- 2000 Census: this group comprises 25.3 % of the population yet only 1% of U.S. physicians., 3% registered nurses
- Association of American Medical Colleges, enrollment of Hispanic students in medical, dental, veterinary and nursing schools is relatively small compared with the general population.
- Underrepresented groups generally score lower than their white counterparts on the standardized tests required for medical, dental, veterinary and nursing schools.

Underrepresented Providers

- AAMC 2005 data indicate that the mean total MCAT score for traditional URM applicants was 21.2 for Blacks, 21.5 for Puerto Ricans, and 25.4 for Mexican Americans; for white applicants it was 28
- Underrepresented groups generally score lower than their white counterparts on the standardized tests required for medical, dental, veterinary and nursing schools.
- AAMC 2005 data indicate that the mean total MCAT score for traditional URM applicants was 21.2 for Blacks, 21.5 for Puerto Ricans, and 25.4 for Mexican Americans; for white applicants it was 28

What We Know

Diversity in the U.S.

Population

25%

African Americans,
Hispanics, and
Native Americans

Physicians

6%

Nurses

9%

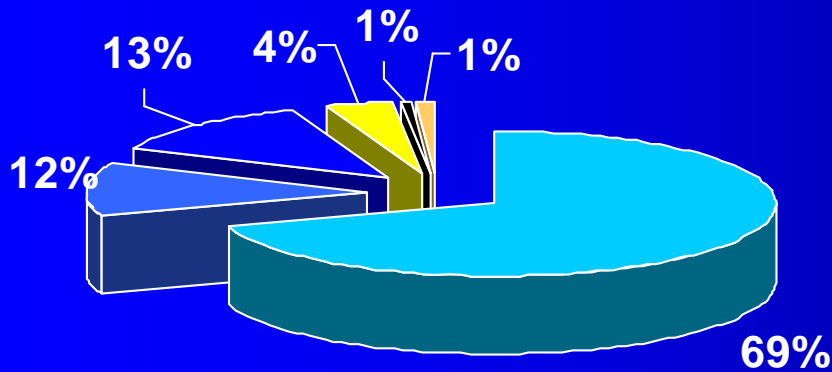
Dentists

5%

Population Diversity

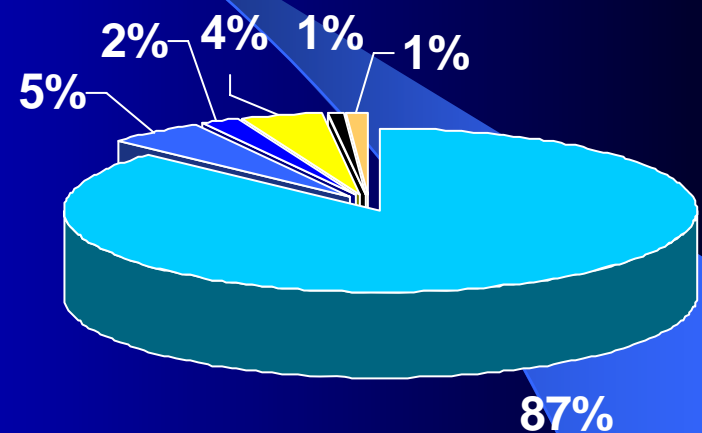
US Census (2000)

National



- Caucasian
- African American
- Hispanic
- Asian / API
- Native American
- Other

RN Workforce

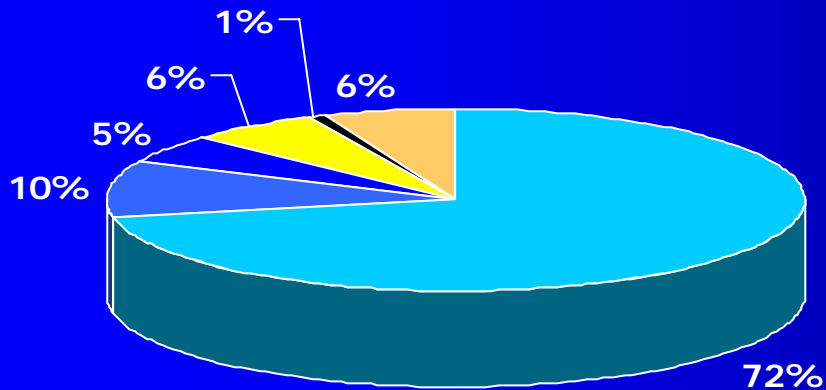


- Caucasian
- African American
- Hispanic
- Asian / API
- Native American
- Other

Student Diversity

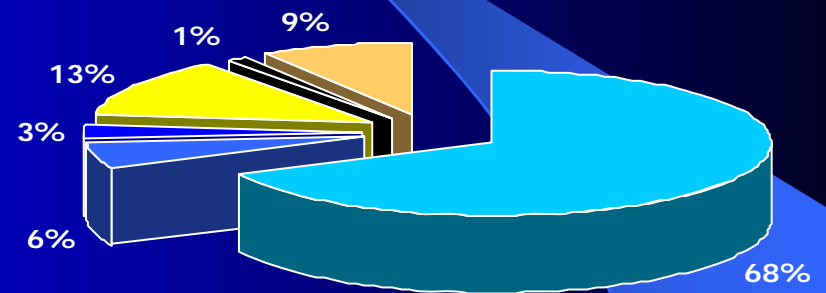
Fall 2004 Enrollment

AACN



- Caucasian
- African American
- Hispanic
- Asian / API
- Native American
- Other

SON



- Caucasian
- African American
- Hispanic
- Asian / API
- Native American
- Other

Recommendations of the Sullivan Report – 2004

- Health care systems must be built on access, quality, & cost effectiveness
- Culture in health professions schools must change to increase diversity
- Must develop new and non-traditional paths to health professions education
- Commitment must be at the highest level of partnerships between academics, practitioners, and stakeholders

21st Century Solutions

- Engaging Professional and Community Coalitions to Improve Access, Quality, and Finance including Community Health Workers
- Flexible/Comprehensive Health Policies
- Changing Health Profession Curriculums for 21st Century Health Care
- Interdisciplinary Approaches to research on the elimination of health disparities partnering through community participatory action research

21st Century Solutions

- Binaltional cooperation to better manage migration between Mexico and U.S.
 - Bi-National Migration Policy enforced
 - Between workers and employers
 - Health Systems beyond the Borders between DHHS and the Health Ministry, IMSS

21st Century Solutions

- Binalational cooperation to:
 - Binalational Health Insurance plans
 - New approaches in Faculty and Student Exchange
 - improve the Spanish speaking skills of U.S. School Teachers and Health Care Professionals
 - teach English in Mexican Schools

21st Century Solutions

- **Helping Underrepresented populations gain admissions to health professions schools**
- The PENN Department of Academic Support Programs and its partners: the Schools of Medicine, Dental Medicine, Nursing and Veterinary Medicine; Career Services; the Center of Excellence for Diversity in Health Education and Research; and The Princeton Review share this objective through interdisciplinary pipeline local community projects

21st Century Solutions

- Reforming pre-college education to prepare a diverse student pipeline
 - HESTEC: University of Texas Pan Am
 - Magnet Schools
 - Evaluation of HRSA pipeline programs
- The Robert Wood Johnson Foundation
 - Comprehensive Community Coalitions
 - Partners in Nursing's Future (PIN) Program
 - Health Policy Fellowships

CHILDREN OF THE ROAD



Hispanic Health: A Family Affair

