

ACHIEVING HEALTH EQUITY FOR HISPANICS/LATINOS IN NEW YORK STATE

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Hispanics/Latinos continue to experience increased risks for certain chronic conditions, lack access to quality health care, and experience poorer health outcomes than their Non-Hispanic/Latino White counterparts. This was first documented in the seminal Heckler Report published in 1985 and evidenced 30 years later in the 2015 Kelly Report: Health Disparities in America.

New York State recognizes the need to achieve health equity for racial, ethnic and underserved communities through the provision of a biennial report on the health status of racial/ethnic populations aimed at raising awareness. Likewise, the elimination of targeted racial ethnic disparities are outlined in the Prevention Agenda Toward the Healthiest State 2013-2018, Medicaid Redesign team, New York State of Health, and the Plan to End the AIDS Epidemic by 2020.

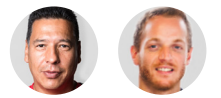
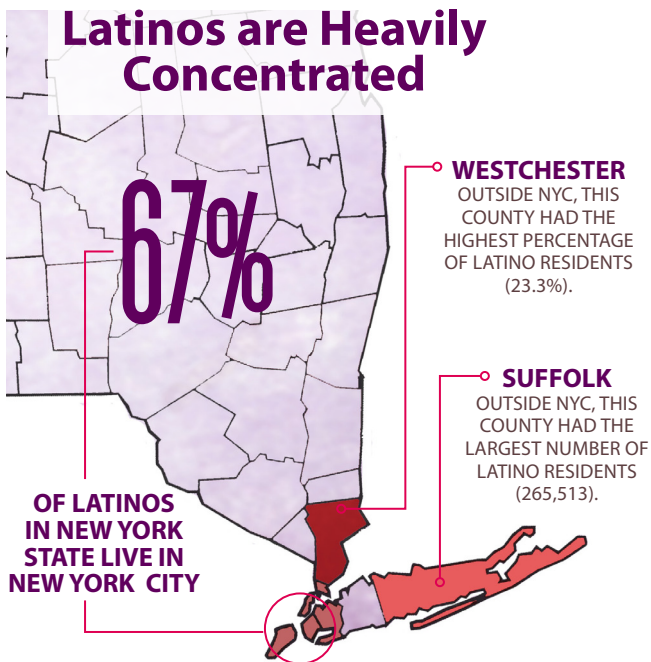
It is clear that more needs to be done to effectively meet the health needs of Hispanics/Latinos in New York State. These gaps exist today due to “generations of cultural bias, injustice, and inequality”¹ and an underscored need to address the social determinants that perpetuate health disparities. With this in mind, this brief outlines the current health disparities affecting Latinos/Hispanics in New York State. This document concludes with a call to action as recommendations are postulated by the Hispanic Health Network of the Latino Commission on AIDS for improved and increased access to quality and culturally-responsive health care services.



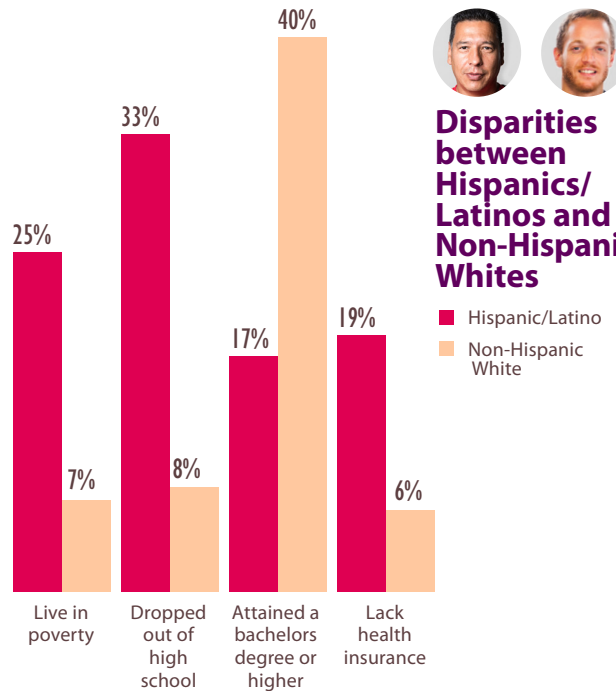
A GROWING POPULATION

GROWING WEALTHIER?
MORE EDUCATED?
HEALTHIER?





Disparities between Hispanics/Latinos and Non-Hispanic Whites



Population Growth of Hispanics/Latinos ⁱⁱ

- Hispanics/Latinos, who can be of any race and/or ethnicity, continue driving the population as the largest and one of the fastest growing racial/ethnic minority groups. They account for 18.4% (3.6 million residents) of the state's population.
- Their growth in New York State (NYS) is attributed to a 10% increase, more than 300,000 residents since 2008.
- Since 2008, population growth for Hispanics/Latinos experienced a greater percent increase outside NYC with more than 25% growth increase versus 5% within NYC.

Case Study

Poverty shapes education outcomes and subsequently health disparities, as evidenced in Oneida County.



Social Determinants Of Health ▶ The health of Hispanics/Latinos is shaped by factors such as poverty, low education attainment, lack of health insurance, language barriers, and lack of familiarity with the US healthcare system. These factors, outlined below, contribute to the health disparities among Hispanics/Latinos in NYS.

Poverty

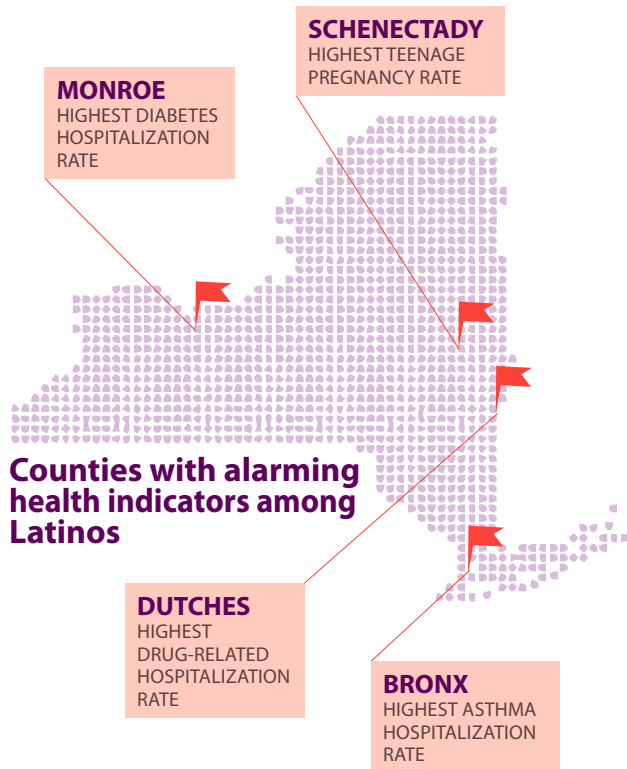
- Hispanic/ Latino families in NYS are three times more likely to live in poverty compared to Non-Hispanic White families, (24.5% versus 6.6%). About 1 in 4 Latino/Hispanic families were living in poverty.
- In NYC, 27.3% of Hispanic/Latino families were living in poverty. In Oneida and Chautauqua counties, about 1 in 2 Hispanic/Latino families were living in poverty with 47.8% and 45.7%, respectively.
- Hispanics/ Latinos had the lowest median income of \$39,402 compared to any racial or ethnic group in NYS. As a comparison, the median income for Non-Hispanic/Latino whites was \$66,071.
- The median household income for NYC Hispanic/ Latino residents was a bit lower at \$35,144. The lowest median incomes were in Oneida with \$21,116 and Schenectady counties with \$17,608.

Education ⁱⁱⁱ

- Of the population 25 years or older in NYS, Hispanics/ Latinos are 4.4 times more likely to have dropped out of high school compared to Non-Hispanic Whites (33% versus 8%).
- One in three Hispanics/Latinos in NYS did not graduate from high school (includes equivalency).
- Less than two out of ten (17%) Hispanics/ Latinos in New York State attained a Bachelor's degree compared to four out of ten (40%) among Non-Hispanic/Latino Whites.
- In Oneida county, where median incomes were low, one in three (34%) Hispanics/ Latinos had less than a high school education and about one in ten (11%) Hispanics/Latinos attained a degree or higher.

Mass Incarceration

- Hispanics/Latinos are disproportionately affected by mass incarceration. Although they account for 18% of the population in NYS, they represent 22% of the incarcerated population.^{iv}
- Latinos/Hispanics, who can be of any race, experience discrimination at every stage of the judicial system and are more likely to be stopped, searched, arrested, convicted, harshly sentenced and burdened with a lifelong criminal record.^v



ONEIDA COUNTY

about 1 in 2
Latinos living in poverty

\$21,116
Media household income; the second lowest among Latinos in NYS

1 in 3
Latinos had less than a high school education

Lack of Health Insurance

- Research by Ortega et al., 2015 argue that Hispanics/Latinos will continue to have problems accessing health care, due to states that did not expand Medicaid eligibility, lack of Hispanic/Latino physicians and lack of extended coverage to new immigrants.^{vi}
- Non-naturalized immigrant Hispanics/Latinos are ineligible for provisions under the Affordable Care Act.^{vii}
- Approximately 18% of the Hispanic/Latino population in NYS lack health insurance coverage.^{viii}
- The US health care system is largely geared toward English speakers. Research cites that Spanish speaking Hispanics/Latinos experience a language barrier that greatly impacts their health care access and utilization in the US.^{ix}
- In 2015, approximately 28% of Hispanics/Latinos in NYS speak English less than well and deemed linguistically isolated.

Hispanic/Latino Health Disparities

- Hispanics/ Latinos in New York State bear a large burden of diabetes with a death rate double than the Non-Hispanic Whites rate (22.4 versus 12.8 per 100,000 population.) Likewise, the age-adjusted diabetes hospitalization per 10,000 residents is 23.9 and more than double that of Non-Hispanic/Latino Whites at 10.8.
- Kings and Monroe counties had the highest diabetes hospitalization rates among Hispanics/Latinos at 28.8 and 29.3 per 10,000 residents, respectively.
- Hispanics/ Latinos remain disproportionately impacted by HIV compared to Non-Hispanic/Latinos Whites.^x
- Although Hispanics/Latinos make up 18% of the state population, they comprise 31.8% of living HIV and AIDS cases and 31.3% of newly diagnosed HIV Cases as of December 2014.^{xi}
- In NYC, where most Hispanics/ Latinos in NYS reside, the estimated prevalence of Hepatitis C is 1.8%-2.4%, significantly higher than the estimated prevalence of 1.5% in the national general population.^{xii}
- Hispanic/Latino females ages 15-17 experience a teenage pregnancy rate that is four times greater (37.1 per 1,000 females) than Non-Hispanic/Latino Whites.
- In New York City, the teenage pregnancy rate is 43.6 per 1,000 females. This is well above New York State's Prevention Agenda objective of 25.6 per 1,000 females.
- Schenectady county had the highest Hispanic/Latino teenage pregnancy rate with 63.2 per 1,000 females ages 15-17.
- The age-adjusted asthma hospitalization rate among Hispanics/Latinos (29.2 per 10,000) was more than three times that of White Non-Hispanics.
- New York City Hispanic/Latino residents had an age-adjusted asthma hospitalization rate that was greater at 34.5 per 10,000 residents. Bronx county had the highest rate at 47.6 per 10,000.
- Hispanics/Latinos have the second highest age-adjusted drug-related hospitalization rate (20.7 per 10,000) among all New York State racial and ethnic groups.
- New York City Hispanics/Latinos were nearly two times more likely to be hospitalized for a drug-related cause than Hispanics/Latinos outside New York City.
- Dutchess (62.4 per 10,000) and Bronx (33.8 per 10,000) counties had the highest drug-related hospitalization rates among Hispanics/Latinos.
- Hispanic/Latino women have a higher incidence of cervical cancer compared to Non-Hispanic/Latino Whites in NYS, 9.7 per 100,000 versus 6.9 per 100,000 female population.

Recommendations

1

NEED TO ADDRESS SOCIAL DETERMINANTS

Institutionalized racism, misogyny, homophobia, transphobia, and xenophobia create barriers to accessing quality health care services, viable educational and employment opportunities, and preventative information. Strategies and policy changes that address social determinants will directly impact and increase the quality of life of Hispanics/Latinos in NYS.

2

ACCURATE AND RESPONSIVE REPRESENTATION IN DATA COLLECTION AND RESEARCH

Epidemiological, surveillance, local, state and federal agencies need to consider the multitude of racial and ethnic identities within the larger Latino/Hispanic community. Data and analyses must reflect the significant variation in health outcomes among sub-populations of Hispanics/Latinos. For example, health disparities may exist for Puerto Ricans, but not for Mexican Americans or vice versa. Priority indicators for data collection among Latinos/Hispanics include US born versus foreign born, race and ethnicity self-identification, levels of acculturation, national origin, immigration status, years of residence in the US, preferred language, literacy levels, and assuring that questions on sexual orientation and gender identity.

3

PROMOTE COLLABORATIONS AT THE COMMUNITY, CITY, STATE AND FEDERAL LEVEL

Strong effective partnerships of community based organizations, health care providers, and government agencies that provide services to populations at risk are needed to effectively address the health disparities of Hispanics/Latinos.

4

SUPPORT STRATEGIES AND RESEARCH FOR CULTURALLY RESPONSIVE INTERVENTIONS AND SUPPORT SERVICES

Insufficient research or strategies exist that are culturally responsive and linguistically appropriate to improve health disparities among Hispanics/Latinos. For example, more research is needed to explore the differences in health risks among sub-populations of Hispanics/Latinos as well as foreign born versus native born Hispanics/Latinos in the US.

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