SHAPE 2002 Racial and Ethnic Data Book

Health Status of Hennepin County Latino Adults

Introduction

The health and well being of Latino adults living in Hennepin County is highlighted in this fact sheet as well as in the SHAPE 2002 Racial and Ethnic Data Book1, which includes results from the Survey of the Health of Adults, the Population and the Environment (SHAPE 2002). The survey collected information on health status and factors that affect health from 9,959 randomly selected Hennepin County adult residents, including 634 Latinos.

The Latino population is the fastest growing population group in Hennepin County. This population has more than tripled between 1990 and 2000 to 45,439. Recently released estimates indicate this population continues to grow rapidly in the county, to 52,233 in 2002.

The Latino population in Hennepin County is very young, with a median age of 24.1 years. Among all racial and ethnic populations living in Hennepin County, Latinos experience a very high poverty rate (20.4%), very low educational levels with 43.0% of adults without high school diplomas, and language issues with 38.2% of adults not able to speak English well.

Accompanying these socioeconomic burdens is persistent, often increasingly poor access to health services, poorer health status, and poorer health outcomes as compared to other groups. However, the lack of comprehensive Hennepin County data on Latino health status and factors related to health has been a major obstacle to effectively addressing their health concerns and reducing health disparities. This fact sheet and the more detailed Data Book are some of the first steps taken by Hennepin County to gather comprehensive data for the Latino population.

What is the Health Status of Hennepin County Latino Adults?

The Data Book presents SHAPE 2002 survey results for four major health domains: overall health status, health access and utilization, lifestyle and risk behaviors, and social environmental factors.

Community needs drove SHAPE 2002 priorities. Interviews and focus groups with Latino community organizations and members identified the most important data needs of this group. The issues included mental health, access to care, preventive service utilization, and health insurance.
In addition, the Data Book includes information about communication with health care providers, cultural/spiritual health and practice, chemical use, barriers to healthy lifestyles, poverty, and discrimination.

The following are Data Book highlights.

**Overall Health Status**

Three-fourths (74.9%) of adult Latinos in Hennepin County reported “good” to “excellent” health in 2002. However, this rate is significantly lower than the overall rate for Hennepin County adults (90.7%).

_Compared to the county population as a whole, Latinos are more than five times more likely to currently lack health insurance (37.8% vs. 6.9%)._

Latino adults in Hennepin County report that low back problems, depression, high blood pressure, high cholesterol/triglycerides, and anxiety or panic attacks are the top five chronic diseases or conditions (Figure 2). Additional chronic diseases and conditions including diabetes, asthma and heart conditions were identified less frequently by Latino adults and are described in more detail in the data book.

Three of the rates for the top five chronic conditions are very similar to the adult rates for the entire county, while the rates for high blood pressure and high cholesterol or triglycerides are about one half the overall rate for the county. All adults who reported a chronic condition were asked if they were currently under the care of a health professional or taking medications for the condition. Latinos were less likely to receive current care for high blood pressure, lower back problems and depression than Hennepin County adults in general.

**Health Care Access and Utilization**

Health insurance is a major issue for the Latino population in Hennepin County. More than one fourth (26.7%) of Latino adults did not have health insurance for the entire 12-month period preceding the survey, as compared to 3.4% for the county as a whole. Another 20.2% of Latino adults were covered by health insurance for only part of the preceding 12 months. More than half of Latino adults (55.1%) do not have dental insurance. Lack of health and dental insurance restricts access to preventive care services and often results in delaying the receipt of needed health care services.

Only 61.8% of Latino adults report they usually go to a doctor’s office or clinic when they are sick, as compared to 85.1% for all Hennepin county adults. Fourteen percent of Latino adults report they have no usual place to go when they are sick, and another 14.4% use hospital emergency rooms or urgent care centers as their usual place of care. Almost one-fourth (23.3%) of Latino adults who needed medical care delayed or did not receive the medical care they thought they needed during the past 12 months. The main reasons that care was not received or delayed were lack of insurance or cost (35.5%) and dislike or distrust of medical providers (20.1%).

Many Latino adults also delayed or did not seek care for mental health issues. More than one-fourth (27.3%) of Latino adults reported needing professional help with issues related to stress, depression, anxiety or other emotional problems during the past 12 months, as compared to 19.1% for all adults in the county. Almost half (48.4%) of those in need of mental health care delayed or did seek care, primarily due to lack of insurance or cost (25.8%), unawareness of where to get services (17.9%) or dislike or distrust of service providers (14.0%).

**Figure 2.** Percentage of adults who stated that a doctor or other health professional ever told them that they had this health condition, Hennepin County SHAPE 2002
Use of Preventive Health Screening

Usage rates for preventive health services by Latino adults in Hennepin County trail the rates for other population groups. Table 1 provides comparisons between Latino adult usage rates and all county adults. The disparity in use of preventive services by the Latino community is at least partially due to the high number lacking health insurance to pay for these services.

Healthy Lifestyles and Behaviors

Individual lifestyle choices and decisions about diet, smoking, drinking, and exercise—which are often influenced by many complex and interrelated factors—can influence health. Incorporating many healthy lifestyle practices into one’s daily routines, such as choosing not to smoke and engaging in regular physical activity (like walking), can help to reduce the rate of many chronic diseases that affect Latinos and other adults.

Current Smoking

A current smoker is defined as one who has smoked at least 100 cigarettes in his/her lifetime and who now smokes cigarettes everyday or some days.2

- In Hennepin County, nearly one-fifth (19.8%) of Latino adults are current smokers, very similar to the overall county adult smoking rate (18.5%).

Binge Drinking

A binge drinker is defined as one who consumes five or more alcoholic drinks on at least one occasion during the past 30 days.3

- One-fifth (21.2%) of Latino adults report binge drinking in the past 30 days.

- The binge drinking rate for all adults in Hennepin County was slightly lower (16.6%).

Daily Fruit Consumption

A major objective of Healthy People 2010, the nation’s public health agenda, is to increase to 75% or more the proportion of persons two years of age and older who consume at least two daily servings of fruit.

- Six of ten (61.4%) Latino adults in Hennepin County reported consuming at least two fruits the previous day. This rate is about the same as the county’s overall rate for adults (58.8%), but is well below the national target for daily fruit consumption.

Daily Vegetable Consumption

The Healthy People 2010 objective for vegetable consumption is to increase to 50% or more the proportion of persons two years of age and older who consume at least three daily servings of vegetables, with at least one of them being a dark green or orange vegetable.

<table>
<thead>
<tr>
<th>Type of preventive health screening</th>
<th>Latino Adults</th>
<th>All Adults</th>
<th>Targets/Recommendations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pap Test with the previous 3 years (among women 18 and older)</td>
<td>82.3%</td>
<td>86.6%</td>
<td>HP 2010—90% or more of women 18 and older</td>
</tr>
<tr>
<td>Met clinical breast exam guideline (among women 20 and older)</td>
<td>68.5%</td>
<td>77.2%</td>
<td>ACS—exam every three years for women 20-39, and annual exams for women 40 and older</td>
</tr>
<tr>
<td>Met mammogram guidelines (women 40 and older)</td>
<td>64.0%</td>
<td>70.3%</td>
<td>ACS—annual mammograms for women aged 40 and older</td>
</tr>
<tr>
<td>Ever had a prostate cancer screening test or exam (among men 50 and older)</td>
<td>64.2%</td>
<td>81.8%</td>
<td>—</td>
</tr>
<tr>
<td>Blood stool test using a home kit within the previous two years (among persons 50 and older)</td>
<td>29.0%</td>
<td>37.8%</td>
<td>HP 2010—50% of adults aged 50 and older</td>
</tr>
<tr>
<td>Cholesterol checked within the past 5 years (among persons 18 and older)</td>
<td>44.7%</td>
<td>75.6%</td>
<td>HP 2010—80% or more of adults 18 and over</td>
</tr>
</tbody>
</table>

HP= Healthy People 2010, ACS= American Cancer Society. — Targets or recommendations not available
One-fifth (20.6%) of all Latino adults reported consuming at least three servings of vegetables the previous day, with at least one of them being a dark green or orange vegetable. This rate is lower than the county’s overall rate for adults (29.1%), and is also well below the national target.

**Physical Activity**

The *Healthy People 2010* objective is to increase the proportion of adults who engage in regular moderate physical activity for at least 30 minutes per day to 30% or more.

• Latino adults as a group have exceeded the national target for moderate physical activity. Four of ten (41.4%) reported engaging in moderate physical activity five or more days during an average week. This rate is about the same as the county’s overall rate (37.5%) for adults.

• More than one-fourth (26.7%) of Latino adults report getting the majority of their physical activity as part of their job or occupation, as compared to (19.8%) for all Hennepin County adults.

**Overweight and Obesity**

Body Mass Index (BMI) is used to determine whether or not people are overweight or obese based on their weight in relation to their height. Six in ten (61.1%) Latino adults are overweight or obese. This rate is higher than the county’s (51.6%) but slightly lower than the nation’s overall rate for adults (64.0%).

**Social Environmental Factors**

Factors that affect health extend beyond whether or not people have access to health care or whether they have met recommended guidelines for physical activity or fruit and vegetable consumption. They also include a wide array of other factors that are based on people’s own social experiences within their families, neighborhoods or communities, such as their experience with discrimination.

**Discrimination**

Latino adults in Hennepin County report higher rates of feeling discriminated against than adults in the county as a whole in a variety of settings, including at work, in getting medical care, getting a job, getting housing, and in dealing with the police (Figure 3).

• Among those who reported feeling discriminated against, Latinos were almost twice as likely as all adults in the county to report that they felt discriminated against because of their race, color, ethnicity, or country of origin (72.2% versus 40.7%).

**Food and Housing Security**

• Latino adults were more than four times (30.0%) more likely than all adults in Hennepin County (7.2%) to worry “often” or “sometimes” that food would run out before they had enough money to buy more during the past 12 months.

• Similarly, Latinos were more than twice (8.3%) as likely as all adults in the county (3.8%) to report that during the past year they missed a mortgage or rent payment because they did not have enough money.

![Figure 3. Percentage who felt they were discriminated against, of those who experienced the situation during the past 12 months, Hennepin County SHAPE 2002](image-url)
The Importance of Religious or Other Activities and Culture

Four in ten (40.5%) Latino adults reported attending a church, synagogue, mosque, or other place for worship or other activities on a daily or weekly basis. This rate is about the same as the county’s overall rate for adults (43.1%). Nearly two-thirds (63.7%) of Latino adults feel that it is “very important” to pass along their cultural heritage or the traditions of their ancestors to the next generation. This rate is higher than the rate for adults in the county as a whole (38.7%).

How SHAPE 2002 data for Hennepin County Latinos can be used

SHAPE 2002 was designed by and for communities. Communities can use SHAPE 2002 data for various purposes. Examples of SHAPE 2002 data uses include:
- Monitor the health status of county Latinos from a broad public health perspective.
- Identify health disparities across racial and ethnic groups.
- Evaluate how Hennepin County Latinos compare to other Latino populations in terms of health indicators.
- Determine if progress is being made toward meeting Healthy People 2010 objectives.
- Investigate the factors related to a particular health concern.
- Use SHAPE 2002 results for health improvement grant applications.

Although the SHAPE 2002 survey results fill many of the gaps in health data for Latinos in Hennepin County, they have several limitations that need to be taken into consideration when using the data.

The limitations include, but are not limited to, the relatively small sample size of Latinos (N=634), as well as non-telephone and respondent recall biases.

Together, we can work to use and translate the SHAPE 2002 Latino results into action

Partnership can translate data into improved health

The Hennepin County Community Health Department is committed to partnering with Latino communities to use and translate data into action to improve health. Call us with any questions that you may have on the SHAPE 2002 survey or the Data Book, or if you need any additional analysis (contact information can be found on the back of this fact sheet).

As examples, we are ready and seeking opportunities to work with Latinos in the county to:
- Bring the survey results to Latino communities. We have data slides prepared and are ready to give presentations to community groups;
- Perform data analyses on selected health issues of interest;
- Generate data briefs, fact sheets or reports on health issues of concern to your communities.

Together we can make a difference!

References

For More Information

This fact sheet is a product of the Hennepin County Community Health Department. It is one of several fact sheets that uses SHAPE data to describe the prevalence of selected health conditions and factors that affect the health of populations of color in Hennepin County, Minnesota. The data are primarily from the SHAPE 2002: Racial and Ethnic Data Book; however, this fact sheet does not include results for all variables covered in the data book.

Our Web Site

For more information about SHAPE 2002, the Data Book, other reports and examples of using SHAPE data, visit:

www.HennepinCommunityHealth.org/SHAPE

Contact Us

The Hennepin County Community Health Department is committed to working with individuals, organizations, and community groups to better understand and utilize SHAPE data. These data can be made available in a variety of formats, including Powerpoint presentations, maps, or EXCEL tables/spreadsheets. For more information, please contact:

Margaret Hargreaves, Supervisor
Hennepin County Human Services Department
MC-L963
525 Portland Ave. S.
Minneapolis, MN 55415
Tel: 612-348-7614
Fax: 612-348-3830
E-mail: margaret.hargreaves@co.hennepin.mn.us

Thank you

Hennepin County wishes to thank Latino residents and communities for their advice and guidance. The communities’ input contributed significantly in making SHAPE 2002 possible and successful. Latinos helped with survey planning, implementation and dissemination. They counseled the SHAPE project about what health data were needed, and they helped to make sure that survey questions were delivered in a way that respected Latino culture. They provided guidance and assistance in reaching community members, reviewed translations and encouraged participation in the survey. They also advised the county on how to get the survey results out and used by the communities to encourage change.