

QUESTION 7: Which health care services do Latinos have trouble obtaining?

ANSWER: Hispanics¹ generally have less access than non-Hispanics to primary care services that are critical to their overall health, as well as ancillary services such as mental and dental health care and prescription medicines.

REDUCED ACCESS TO MENTAL HEALTH SERVICES

Hispanics are less likely than non-Hispanic Whites to access and receive mental and behavioral health services and treatment.

- Among adults ages 18 and older in 2005, non-Hispanic Whites were about twice as likely (15.1%) as Hispanics (7.8%) to receive mental health treatment or counseling (see Figure 1).² That year, among adults with a major depressive episode, only half of Latinos (50.2%) received treatment, compared to about two-thirds of Whites (67.2%).³
- Among children under age 18 with mental health or behavioral problems in 2003, nearly three-fifths of all Latino children (57.8%) did not receive needed care, compared to about one-third of their White peers (35.3%).⁴
- Disparities in diagnosis contribute to the problem. One study found that among patients with symptoms of depression, physicians were significantly less likely to detect the condition in Hispanic and non-Hispanic Black patients than in non-Hispanic Whites.⁵

POOR ACCESS TO DENTAL CARE

Latinos of all ages have poor access to dental services; poor oral health outcomes impact overall health and well-being.

- According to the Centers for Disease Control and Prevention, Latino children ages 2–17 are less likely (62.7%) than their non-Hispanic White peers (78.6%) to have visited the dentist within the past year, the minimum recommended standard for maintaining good oral health.⁶
- Among subgroups of Latino children, Mexicans are the least likely (59.7%) to have had a dental visit, followed by Central or South Americans (65.7%), Cubans (69.6%), Puerto Ricans (71.8%), and all other Hispanic subgroups combined (70.5%).⁷
- Latino adults are even less likely than children to have adequate access to dental care. About half of all Hispanic adults (49%) reported having had at least one dental visit in the past year, compared to about two-thirds (66.8%) of non-Hispanic Whites.⁸ Among Latino adults, Mexicans (43.9%) were the least likely to have received dental care (see Figure 2).⁹

PROHIBITIVE COST OF NEEDED PRESCRIPTION DRUGS

Latinos are more likely to have trouble accessing medications prescribed by their health care providers.

- One study found that working-age Hispanics were more likely (16.5%) than non-Hispanic Whites (11.2%) to report not buying at least one prescription drug due to cost issues, a statistically significant difference.¹⁰
- Researchers found that the disparity widens among people with one or more chronic conditions (see Figure 3). While there is no significant disparity between Latinos and Whites who are uninsured or have public health coverage, Latinos with private insurance are more likely to report this problem than Whites with private coverage.¹¹
- While the vast majority of children needing prescription medications in 2003 were able to receive them, Hispanic children were about twice as likely (1.8%) as non-Hispanic White children (0.8%) not to receive all needed prescription medications.¹²

Figure 1:

Adults Reporting Having Had Mental Health Treatment or Counseling in the Past Year by Race/Ethnicity and Gender, 2005

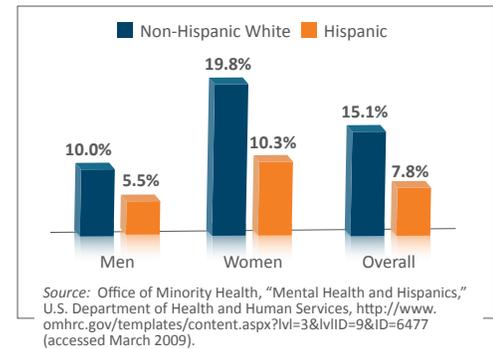


Figure 2:

Age-Adjusted Percentages of Adults Reporting At Least One Dental Visit in the Past Year by Race/Ethnicity, 2000–2003

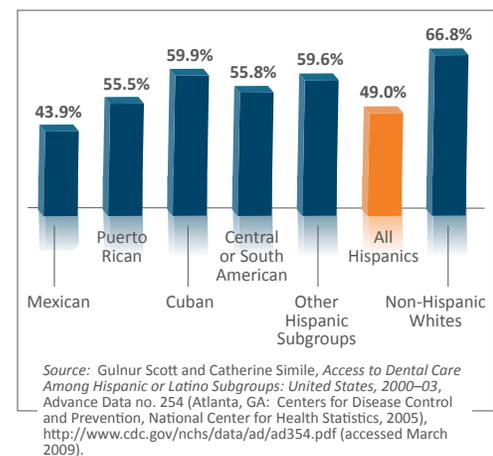
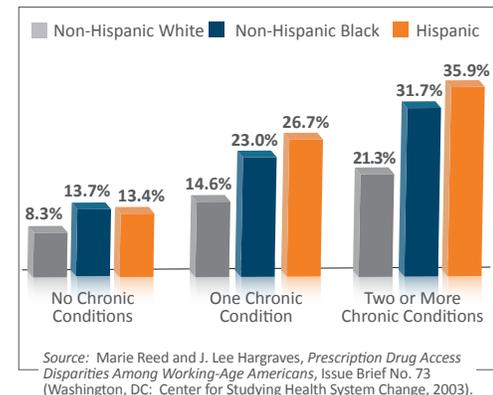


Figure 3:

Working-Age Adults Who Did Not Purchase At Least One Prescription Drug Due to Cost by Race/Ethnicity and Number of Chronic Conditions, 2001



Endnotes

¹ The terms “Hispanic” and “Latino” are used interchangeably by the U.S. Census Bureau and throughout this document to refer to persons of Mexican, Puerto Rican, Cuban, Central and South American, Dominican, Spanish, and other Hispanic descent; they may be of any race. Furthermore, unless otherwise noted, estimates in this document do not include the 3.9 million residents of Puerto Rico.

² Office of Minority Health, “Mental Health and Hispanics,” U.S. Department of Health and Human Services, <http://www.omhrc.gov/templates/content.aspx?lvl=3&lvlID=9&ID=6477> (accessed March 2009).

³ Agency for Healthcare Research and Quality, *2007 National Health Disparities Report* (Rockville, MD: U.S. Department of Health and Human Services, 2008), Table 99b, http://www.ahrq.gov/qual/nhdr07/quality/effectiveness/mentalh/T099_b.htm (accessed March 2009).

⁴ Child and Adolescent Health Measurement Initiative, *2003 National Survey of Children's Health*, Indicator 4.5, <http://nschdata.org> (accessed March 2009).

⁵ Steven J. Borowsky et al., “Who is at risk for non-detection of mental health problems in primary care?” *Journal of General Internal Medicine* vol. 15 (2000): 381–388.

⁶ Gulnur Scott and Catherine Simile, *Access to Dental Care Among Hispanic or Latino Subgroups: United States, 2000–03*, Advance Data no. 254 (Atlanta, GA: Centers for Disease Control and Prevention, National Center for Health Statistics, 2005), <http://www.cdc.gov/nchs/data/ad/ad354.pdf> (accessed March 2009).

⁷ Ibid.

⁸ Ibid.

⁹ Ibid.

¹⁰ Marie Reed and J. Lee Hargraves, *Prescription Drug Access Disparities Among Working-Age Americans*, Issue Brief no. 73 (Washington, DC: Center for Studying Health System Change, 2003).

¹¹ Ibid.

¹² Child and Adolescent Health Measurement Initiative, *2003 National Survey of Children's Health*, Indicator 4.7, <http://nschdata.org> (accessed March 2009).