THE HEALTH OF LATINOS IN OUR COMMUNITY

Results from the 2017 Community Health Status Survey
Greater Cincinnati, like the nation, has a growing Latino community. The Census Bureau’s 2013–2017 American Community Survey (ACS) estimates that 68,000 Latino adults live in our region, comprising 3% of its population. This report looks closely at the health status of Latino adults in our community.

Our Latino community differs from the larger community in several ways. According to ACS, 8 in 10 Latino residents are younger than 45, compared with 5 in 10 residents in the region. Latino adults older than 25 (25%) are less likely than all adults older than 25 in the region (31%) to hold a bachelor’s degree. About 1 in 4 Latinos (26%) live in poverty, nearly double the percentage for all adults in the region (14%). In 2017, more than 6 in 10 Latino adults reported having health insurance, compared with 9 in 10 adults in the region.

Though the Latino community faces challenges, it has much to celebrate. As this report shows, Latinos are happy in their neighborhoods and feel that the region is a healthy place to live. The diverse faces, traditions, contributions and service needs of our Latino neighbors have become more evident, as has the inclusion of Latinos. Organizations that connect and promote the well-being of Latinos have grown significantly. One such organization, Apoyo Latino, provides current information about health care, legal services, education, mental health and more at its website, http://cincinnatilatino.org/resources.

Interact for Health is improving the health of all people in our region, including Latinos. I have had the honor of being a part of this survey since its inception in 2005. This year’s report will be useful in assessing, providing and educating about the service needs of Latinos.

The 2017 Community Health Status Survey (CHSS) is a telephone survey that asks questions about health status, behaviors and outcomes among adults in 22 counties that surround Cincinnati in Southeastern Indiana, Southwestern Ohio and Northern Kentucky.

CHSS included a Latino oversample in both 2013 and 2017. The sample responses are weighted to match census data so the results are representative of the Latino community in our region. For context, results for all adults in the region, including Latino adults, are also included. While any changes are interesting to note, please note that small sub-group oversamples have a larger margin of error and are more likely to be volatile than the larger regional sample. It is important to monitor changes over time to see if the trends continue.
Adults’ overall self-rated health status is an important indicator of well-being. Research has made a strong link between people’s response to this question and their predicted length and quality of life. According to the Centers for Disease Control and Prevention (CDC), in 2016, 6 in 10 Latino adults nationwide reported being in excellent or very good health and had a life expectancy at birth of 81.8 years. Community Health Status Survey asked adults in our region, “In general, would you say your health is excellent, very good, good, fair or poor?”

The percentage of Latino adults who reported excellent or very good health was slightly higher in 2017 than in 2013.

Among all adults in the region, 49% reported excellent or very good health in 2017.
Latino adults most frequently report high blood pressure, depression

Chronic illness can create a physical, emotional and financial burden for people. If not monitored and managed well, these conditions can have a devastating impact on long-term health and survival. CHSS asked, “Has a doctor or other health care provider ever told you that you have …”

### Percentage of Latino adults who have been diagnosed with:

<table>
<thead>
<tr>
<th>Condition</th>
<th>2017</th>
<th>2013</th>
</tr>
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<tbody>
<tr>
<td>Stroke</td>
<td>1%</td>
<td>3%</td>
</tr>
<tr>
<td>Asthma</td>
<td>14%</td>
<td>23%</td>
</tr>
<tr>
<td>Chronic lung disease</td>
<td>4%</td>
<td>5%</td>
</tr>
<tr>
<td>Cancer</td>
<td>4%</td>
<td>5%</td>
</tr>
<tr>
<td>Heart trouble or angina</td>
<td>6%</td>
<td>9%</td>
</tr>
<tr>
<td>Diabetes</td>
<td>9%</td>
<td>14%</td>
</tr>
<tr>
<td>Severe allergies</td>
<td>10%</td>
<td>14%</td>
</tr>
<tr>
<td>High cholesterol or triglycerides</td>
<td>14%</td>
<td>28%</td>
</tr>
<tr>
<td>High blood pressure</td>
<td>20%</td>
<td>15%</td>
</tr>
<tr>
<td>Depression</td>
<td>15%</td>
<td>24%</td>
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CHRONIC CONDITIONS
CHRONIC CONDITIONS AMONG ALL ADULTS IN THE REGION in 2017:

- 30% reported having been told they had high blood pressure
- 21% reported depression
- 18% reported asthma
- 27% reported high cholesterol or triglycerides
- 14% reported severe allergies
- 13% reported diabetes
- 10% reported heart trouble or angina
- 9% reported cancer
- 6% reported chronic lung disease
- 3% reported stroke
7 in 10 Latino adults are overweight or obese

Maintaining a healthy weight can support good health. Being overweight or obese increases a person’s risk for diabetes, heart disease, respiratory conditions and some cancers. It can also make it more difficult to engage in some daily activities. According to the CDC, Latino adults nationally are more overweight or obese than the general population. In 2016, 3 in 10 adults overall were normal weight (28%) and 7 in 10 were overweight or obese (71%). This compared with only 2 in 10 Latino adults nationwide who were normal weight (20%) and 8 in 10 who were overweight or obese (80%).3

CHSS asked adults their weight and height to determine if they were obese using the Body Mass Index (BMI).4

Based on BMI, a person who is 5 feet 4 inches tall would be considered overweight at 150 pounds and obese at 180 pounds. A person who is 6 feet tall would be considered overweight at 190 pounds and obese at 220 pounds.

Latino adults who are obese or overweight (Percentages may not add to 100 percent because of rounding.)

<table>
<thead>
<tr>
<th></th>
<th>2017</th>
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<tbody>
<tr>
<td>Obese</td>
<td>32%</td>
<td>Overweight</td>
<td>35%</td>
</tr>
<tr>
<td>Not obese</td>
<td>33%</td>
<td></td>
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</table>

The percentage of overweight and obese Latino adults was THE SAME in 2013 and 2017.

AMONG ALL ADULTS IN THE REGION, 32% were obese and 36% were overweight in 2017.
8 in 10 Latino adults report safe sidewalks and shoulders in their neighborhood

Being physically active is one of the most important things people can do to improve their health. According to the CDC, regular physical activity can reduce the risk of chronic diseases, improve muscle and bone strength, improve mental health and increase life expectancy. One thing that can influence physical activity, including walking, is access to sidewalks. Studies have shown that people are more likely to use sidewalks that are in good condition than sidewalks that are not. Nationally, the United States received a grade of D on the “walkability” of neighborhoods in the 2017 Report Card on Walking and Walkable Communities, showing that there is much progress to be made.

CHSS asked adults in the region whether they agreed or disagreed with the following statement: “There are sidewalks or shoulders on streets in my community that allow for safe walking, jogging or biking.”

MORE Latino adults reported safe sidewalks or shoulders in their neighborhood in 2017 than in 2013.

AMONG ALL ADULTS IN THE REGION, 73% reported safe sidewalks or shoulders in 2017.
Most Latino adults walk each day

One of the easiest ways to increase physical activity is by walking. Walking is especially accessible because it does not require any special skills or facilities. CHSS asked adults in the region how many days each week they walk for at least 10 minutes.

Number of days each month that Latino adults report walking at least 10 minutes a day (Percentages may not add to 100 percent because of rounding.)

<table>
<thead>
<tr>
<th>Days</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>1-3 days</td>
<td>14%</td>
</tr>
<tr>
<td>4-6 days</td>
<td>21%</td>
</tr>
<tr>
<td>7 days</td>
<td>59%</td>
</tr>
<tr>
<td>No days</td>
<td>6%</td>
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AMONG ALL ADULTS IN THE REGION, 57% reported that they walk at least 10 minutes every day in 2017.

6 in 10 Latino adults walk at least 10 minutes each day.

2 in 10 Latino adults sit for eight or more hours each day

Long periods of time spent sitting, even when paired with moderate physical activity, can lead to poor health. Studies have shown that sedentary behavior can increase the risk of cardiovascular disease, cancer and type 2 diabetes.

Percentage of Latino adults who report sitting eight or more hours per day

<table>
<thead>
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<th>Days</th>
<th>Percentage</th>
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<tbody>
<tr>
<td>18%</td>
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AMONG ALL ADULTS IN THE REGION, 25% sit for eight hours or more per day in 2017.
Measuring physical activity at work and leisure

The 2017 CHSS incorporated the International Physical Activity Questionnaire (IPAQ), short form.\(^10\) It is designed to measure adults’ physical activity throughout the entire day. Adults are asked to report their level of activity over the past seven days in four categories: vigorous activity, moderate activity, walking and sitting.

Among all adults in the region, 17% reported low levels of activity, 23% reported moderate levels of activity and 60% reported high levels of activity in 2017.

Results for all adults in the region and for Latino adults show more self-reported physical activity than is sometimes reported using other questions. One possible reason for this is that many common measurements of physical activity rely on self-reports of activity outside of working hours only. The IPAQ asks respondents to report about all activity, including at work, at home and at leisure. Using the IPAQ, a person could qualify as “moderately” or “highly” active because of the time they spend on their feet as part of their job, even if they have little or no activity outside the workplace.

This is the first time CHSS has incorporated this tool to measure physical activity. Additional research is required to better understand how we can use self-reported measures to explore physical activity levels in both work and non-work environments.

<table>
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<tr>
<th>Physical activity level reported by Latino adults</th>
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<tbody>
<tr>
<td>Low</td>
</tr>
<tr>
<td>Moderate</td>
</tr>
<tr>
<td>High</td>
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0% 20% 40% 60% 80% 100%

3 in 10 Latino adults report moderate levels of physical activity.

Among all adults in the region, 17% reported low levels of activity, 23% reported moderate levels of activity and 60% reported high levels of activity in 2017.
2 in 10 Latino adults eat the recommended daily amount of fruits and vegetables

People’s weight and overall health are substantially affected by the food they eat. A healthy diet consists of balanced amounts of protein, carbohydrates and fats, with plenty of fruits and vegetables and limited fat and salt. According to the CDC, people who eat a healthy diet with generous amounts of fruits and vegetables have a reduced risk of stroke, type 2 diabetes and certain cancers.¹¹

The Dietary Guidelines for Americans 2015-2020,¹² a joint project of the U.S. Departments of Agriculture (USDA) and Health and Human Services (HHS), recommends that each meal include half a plate of fruits and vegetables. This means adults should eat about two servings of fruits and three servings of vegetables per day.

CHSS asked adults how many fruits and vegetables they ate every day.

AMONG ALL ADULTS IN THE REGION, 23% ate the recommended amount of both fruits and vegetables in 2017.
4 in 10 Latino adults drink seven or more sodas or sugary beverages each week

According to the 2015-2020 Dietary Guidelines for Americans, almost half of all added sugar consumed in the nation comes from beverages.13 Sugar adds calories to a person’s diet without providing nutrients needed to be healthy. The guidelines recommend limiting added sugars to 10% of daily calories. If people consume more than that, they may not get the nutrients they need from fruits, vegetables, protein and dairy products.

Studies have shown that drinking one or more sugary beverage per day – equivalent to seven or more each week – can increase the risk of obesity,14 diabetes15 and heart disease.16, 17 While most people know that soda has added sugar, other drinks such as sweet tea, sports drinks and fruit drinks also contain added sugar.

CHSS asked adults how many sodas and other sugar-sweetened drinks they consumed each week.

**Percentage of Latino adults who drink seven or more sugary beverages per week**
- 39%

**AMONG ALL ADULTS IN THE REGION, 40% drank seven or more sugary beverages each week in 2017.**
9 in 10 Latino adults agree it is easy to purchase healthy foods nearby

Healthy eating is particularly challenging if there is not a place nearby to buy healthy foods. To eat a healthy diet, it is crucial that people can buy food such as fruits and vegetables, whole grains and low-fat items without having to travel far.

*CHSS asked adults whether they agreed or disagreed with this statement: “It is easy to purchase healthy foods in my neighborhood such as whole grain foods, low-fat options and fruits and vegetables.”*

The percentage of Latino adults who agree it is easy to purchase healthy food was **THE SAME** in 2013 and 2017.

Among all adults in the region, 80% agreed it was easy to purchase healthy foods in their neighborhood in 2017.
3 in 10 Latino adults have experienced food insecurity in the past year

Access to nutritious food is important for health. Food insecurity occurs when people do not have access to healthy food. This may include both eating less food or reduced quality or variety of food. Adults who experience food insecurity are at increased risk for poor overall health and chronic diseases. A 2017 Department of Agriculture study found that 12% of all households nationwide and 18% of Latino households nationwide were food insecure.

CHSS asked adults whether they agreed or disagreed with two statements:

1. Within the past 12 months we worried whether our food would run out before we got money to buy more.

2. Within the past 12 months the food we bought just didn’t last and we didn’t have money to get more.

Agreeing with one or both statements indicates that a family is likely to be food insecure.

Among all adults in the region, 24% experienced food insecurity in the past year in 2017.
FOOD INSECURITY

TIENDA
LA CHIQUITA
Grocery Store
859-291-1100
About 1 in 10 Latino adults report they are current smokers

According to the CDC’s Behavioral Risk Factor Surveillance System (BRFSS), 17% of adults in the United States were current smokers in 2017. This percentage is higher than the Healthy People 2020 goal of 12%. Tobacco use has an impact on all aspects of a person’s health. Smokers who can quit can add 10 years to their lives.21

The percentage of Latino adults in our region who reported being current smokers in 2017 was LOWER THAN in 2013.

Among all adults in the region, 23% reported that they were current smokers in 2017.
Fewer than 1 in 10 Latino adults allow people to smoke in their home

Secondhand smoke or environmental tobacco smoke (ETS) is a serious danger that often does not get enough attention. According to the CDC, 1 in 4 nonsmokers in the U.S. is exposed to ETS, which is responsible for approximately 41,000 deaths among nonsmoking adults and 400 deaths in infants each year. ETS has been linked to serious negative health outcomes in adults and children, such as stroke, lung cancer, coronary heart disease and sudden infant death syndrome (SIDS).22

CHSS asked adults whether or not they allow people to smoke in their home.

**Percentage of Latino adults who allow people to smoke in their home**

0% 20% 40% 60% 80% 100%

7%

**Among all adults in the region, 18% allowed people to smoke in their home in 2017.**
About 1 in 10 Latino adults report high stress

Stress is a normal part of life. It may be short-term (acute), caused by situations such as a presentation or a big test. Stress may also be long-term (chronic), caused by situations such as extended unemployment or a long illness. Stress is the way the body reacts to these stimuli by releasing hormones, increasing heart rate and tensing muscles.

CHSS asked, “On a scale of 1 to 10, where 1 means you have ‘little or no stress’ and 10 means you have ‘a great deal of stress,’ how would you rate your average level of stress during the past month?”

On a scale of 1 to 10 ... how would you rate your average level of stress during the past month?

- Low stress (1-3)
- Moderate stress (4-7)
- High stress (8-10)

Among all adults in the region, 29% reported low stress, 50% reported moderate stress and 20% reported high stress in 2017.

Most consider low or moderate stress healthy

CHSS also asked, “On a scale of 1 to 10, where 1 means ‘little or no stress’ and 10 means you have ‘a great deal of stress,’ what would you consider a healthy level of stress?”

On a scale of 1 to 10 ... what would you consider a healthy level of stress?

(Percentages may not add to 100 percent because of rounding.)

- Low (1-3)
- Moderate (4-7)
- High (8-10)

Among all adults in the region, 55% thought a low level of stress was healthy in 2017.
4 in 10 Latinos report doing an excellent or very good job managing stress

According to the National Institute of Mental Health, taking steps to manage stress can reduce its negative health impacts. Steps could include exercise, social connection, mindfulness, relaxation or help from a health care provider.

CHSS asked, “How good a job do you think you do managing your stress?”

**How good a job do you think you do managing your stress?** (Percentages do not add to 100 percent because the response “don’t know” is not included.)

- Excellent/very good: 41%
- Good: 37%
- Fair/poor: 19%

**REGIONAL RESULTS:** 44% of all adults in the region reported an excellent or very good job managing their stress in 2017.
Most Latino adults feel support from their community

Research has shown strong ties between people’s health and the social support they find in their community.25

CHSS asked people whether they agreed or disagreed with three statements about social support in their community:

1. People can depend on each other in my community.

2. Living in my community gives me a secure feeling.

3. People in my community know they can get help from the community if they are in trouble.

More than 7 in 10 Latino adults agree that people can depend on each other in their community.

9 in 10 Latino adults agree that living in their community gives them a secure feeling.
People in my community know they can get help from the community if they are in trouble

AMONG ALL ADULTS IN THE REGION in 2017:

- 78% of all adults in the community agreed that people can depend on each other in their community.
- 86% of all adults in the community agreed that living in their community gave them a secure feeling.
- 83% of all adults in the community thought people could get help from the community if they were in trouble.

More than 8 in 10 Latino adults agree they can get help from their community.
Most Latino adults rate region, their neighborhood highly as a healthy place to live

Choices we make every day affect our health, but so does the community in which we live. The physical and social environment is an important determinant of health. A neighborhood that feels safe can encourage residents to engage in healthy outdoor activities. A neighborhood that feels unsafe can force residents to stay indoors. CHSS asked adults in the region to evaluate their environment.

CHSS asked, “How would you rate Greater Cincinnati as a healthy place to live?”

CHSS also asked, “How would you rate your neighborhood as a healthy place to live?”

AMONG ALL ADULTS IN THE REGION, 71% rated Greater Cincinnati excellent, very good or good as a healthy place to live. Seventy-five percent rated their own neighborhood excellent, very good or good as a healthy place to live in 2017.
Housing

8 in 10 Latino adults rate neighborhood homes highly; 9 in 10 rate own home highly

The condition of people’s homes and the homes in their neighborhood can have an impact on their health.

CHSS asked, “How would you rate the condition of the houses and apartments in your neighborhood?” and “How would you rate the condition of the house or apartment where you live?”

**Condition of houses and apartments in neighborhood** (Percentages may not add to 100% percent because of rounding.)

<table>
<thead>
<tr>
<th>Year</th>
<th>Excellent/very good/good</th>
<th>Fair/poor</th>
</tr>
</thead>
<tbody>
<tr>
<td>2013</td>
<td>74%</td>
<td>25%</td>
</tr>
<tr>
<td>2017</td>
<td>80%</td>
<td>20%</td>
</tr>
</tbody>
</table>

**Condition of own house or apartment** (Percentages may not add to 100% percent because of rounding.)

<table>
<thead>
<tr>
<th>Year</th>
<th>Excellent/very good/good</th>
<th>Fair/poor</th>
</tr>
</thead>
<tbody>
<tr>
<td>2013</td>
<td>83%</td>
<td>17%</td>
</tr>
<tr>
<td>2017</td>
<td>92%</td>
<td>9%</td>
</tr>
</tbody>
</table>

**Among all adults in the region,** 83% rated houses and apartments in their neighborhood as excellent, very good, or good. Ninety percent rated their own home as excellent, very good or good in 2017.
Nearly 7 in 10 Latino adults have a usual and appropriate source for care

One essential element for maintaining good health is regular visits with a doctor or other health care provider. Ideally, patients see the same provider or practice over time so they can receive coordinated, comprehensive health care and preventive health guidance.

CHSS asked adults whether they had a usual source for health care, and where. A private doctor’s office, community-based health center, clinic at a retail store or hospital outpatient department are considered appropriate sources of care.

The percentage of Latino adults reporting a usual and appropriate source of care is SIMILAR to 2013.

In 2017 adults overall in our region were less likely than in previous years to report a usual and appropriate source of care. This was the first time CHSS has collected these data since the Affordable Care Act (ACA) was implemented in 2014. Many adults in the region who had previously been uninsured gained insurance through the ACA. Research suggests that newly insured adults may not be as settled into a preventive health care routine. This may be one explanation for why the percentage of adults with a usual source of care in our region has decreased.
7 in 10 Latino adults have health insurance

Cost can be a barrier to receiving regular health care. Access to appropriate care helps prevent illness, control outbreaks and manage chronic conditions. People without health insurance are less likely than those with health insurance to get the care they need in a timely manner.

Among all adults in the region, 92% had health insurance in 2017.

Latino adults who have no usual source of care

Among all adults in the region, 71% reported a usual and appropriate source of care, down from 82% in 2013. Also 20% reported no usual source of health care in 2017.

2 in 10 Latino adults report no usual source of health care.
1 in 10 Latino adults did not receive health care due to cost

Even with insurance, health care can be expensive. CHSS asked adults if they had delayed or gone without a doctor’s care in the past 12 months because they needed the money to buy food, clothing or to pay for housing.

CHSS asked, “During the last year, did any household member not receive a doctor’s care because the household needed the money to buy food, clothing or to pay for housing?”

1 in 10 Latino adults did not receive health care due to cost, IMPROVED since 2013.

AMONG ALL ADULTS IN THE REGION, 8% did not receive care in the past year due to cost in 2017.
The Community Health Status Survey (CHSS), a project of Interact for Health, is conducted by the Institute for Policy Research at the University of Cincinnati. A total of 4,929 randomly selected adults residing in the counties at right were interviewed by telephone between Aug. 10, 2016, and March 8, 2017. This included 1,906 landline interviews and 2,355 cell phone interviews. The margin of error for the overall survey is ±1.5%.

For this report, 294 Latino residents were interviewed. The margin of error for the Latino sample is ±5.7%.

Reports in this series examine the health of African Americans and Latinos, as well as the health of people who live in the Place Matters communities of Avondale, Covington, Madisonville, Price Hill and Walnut Hills.

For more information about the survey’s methodology, go to www.interactforhealth.org/aboutchss2017.
HEALTH STATUS

OBESITY
4. BMI is calculated by dividing a person’s weight in pounds by his height in inches squared and then multiplying that result by 703.

PHYSICAL ACTIVITY

DIET AND FOOD ACCESS

FOOD INSECURITY

SMOKING

STRESS

COMMUNITY SUPPORT

ACCESS & BARRIERS TO CARE