The Bureau of Health Equity Learning Event Series

Hispanic American Health



DELAWARE HEALTH AND SOCIAL SERVICES
Division of Public Health

Partnership for Healthy Communities
A COMMUNITY ENGAGEMENT INITIATIVE

La Red
HEALTH CENTER
Rooted in Community

MEET THE SPEAKER

Fabricio J. Alarcon, MD, FACP

Dr. Alarcon graduated in the top 10% of his class from Cayetano Heredia Peruvian University School of Medicine and completed his Internal Medicine/Primary Care residency at The Cleveland Clinic Foundation, where he also served as chief medical resident. A Fellow of the American College of Physicians, he is board-certified in internal medicine, obesity medicine, and addiction medicine.

He is the founder of Atlantic Family Physicians and Healthy Outcomes Medical Weight Loss Center, and has served as Chief Medical Officer of La Red Health Center for the past 25 years, helping expand access to high-quality care for underserved communities. Dr. Alarcon also serves as medical director of Addiction Medical Solutions and Addiction Medical Facility, leading comprehensive addiction treatment programs while continuing to provide patient-centered primary care focused on prevention, nutrition, and healthy lifestyles.



Overview

01 Definition of Hispanic American population

02 Health disparities and inequities

03 Drivers of health disparities and inequities

04 Strategies to overcome health disparities and inequities



Goals



Achieve better understanding of health care inequity and disparities that affect Hispanic Americans.



Encourage conversations among different sectors that address Hispanic Americans' health.



Provide a path to address health disparities and inequities.

What is the Hispanic American Population?

- U.S. Census Bureau defines "Hispanic or Latino" as a person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.
- "Hispanic" and "Latino" are often used interchangeably, though "Hispanic" generally emphasizes a connection to the Spanish language and Spain, while "Latino" emphasizes geographic roots in Latin America.
- It is classified as an ethnicity rather than a race, meaning individuals can be of any race.



Hispanic Americans in Delaware

- The Hispanic American population in Delaware comprises approximately 11.7% of the state's total population.
- With over 104,000 residents, the Hispanic community has been one of the fastest-growing demographics in the state, bringing rich cultural diversity and economic contributions to the region.
- While about 40% of Delaware's Hispanic population traces their heritage to Mexico, the remaining 60% hail from a wide array of Spanish-speaking countries, with strong Puerto Rican and Guatemalan communities.



Source: U.S. Census Bureau, QuickFacts: Delaware (2025)



Health Disparities and Health Inequities

While often used interchangeably, these two terms have distinct meanings in public health:

- **Health Disparity: An objective, measurable differences in health outcomes or care between population groups.**

- **Health Inequity: The systemic, unfair, and unjust barriers and policies that cause these disparities. Health inequities are both avoidable and unjust.**

A health inequity is a systemic, avoidable, and unfair barrier that creates the disparity.



An Example

- Hispanic Americans are 81% more likely to develop kidney failure and experience significantly higher rates of vision loss and lower-limb amputations due to poorly managed diabetes.
- The disparity is that Hispanic Americans suffer heavily from diabetes complications.
- The inequity is the lack of health insurance, language access, and affordable nutritious food that makes preventing or treating the disease nearly impossible for many.

Haw, J. S., Shah, M., Turbow, S., Egeolu, M., & Umpierrez, G. (2021). Diabetes Complications in Racial and Ethnic Minority Populations in the USA.

Eliminating Health Disparities



It is essential from a fundamental equity and human rights standpoint.



It is also critical for improving the overall public health and economic prosperity of the nation.



Disparities create massive systemic burdens, costing billions of dollars annually in excess medical costs and lowered productivity.

Hispanic Americans face structural health disparities stemming from systemic, social, and historical barriers.



Lower rates of employer-sponsored insurance



Language and cultural disconnects



Immigration status and policy fears



Food insecurity and environment



Transportation restrictions

These compounded barriers result in higher rates of uninsurance, delayed care, and elevated risks for chronic conditions like diabetes, cardiovascular disease, and certain cancers compared to the broader population.

Historical and Structural Roots

- **Systemic Exclusion**: Hispanic Americans have faced deep-rooted, systemic discrimination and segregation in housing and education for over a century.
- **Occupational Systems**: A large portion of the Hispanic workforce is employed in industries like construction, agriculture, and hospitality, which traditionally lack employer-sponsored health benefits.
- **Immigration and Fear**: Restrictive immigration policies and historical enforcement actions have contributed to a deep-seated mistrust of government and official organizations.

These barriers frequently lead to delayed care or the complete avoidance of using clinical systems for fear of stigma, financial burden and fear of deportation.

Current Health Care Delivery Systems



- **Insurance Coverage Disparities**: The Hispanic population experiences the highest uninsured rates of any major demographic group.

- **Language and Cultural Barriers**: Over 65% of Hispanics speak a language other than English at home. The scarcity of Spanish-speaking health care providers and limited translation resources often lead to miscommunication, reduced quality of care, and lower health literacy.

- **Lack of Representation**: Hispanic Americans remain significantly underrepresented in the U.S. medical workforce, which can worsen feelings of implicit bias and contribute to a lack of culturally sensitive care.

Hispanic Americans in Delaware experience substantial health care delivery gaps

While Delaware is geographically small, health care access varies drastically between its three counties:

- **Heavily concentrating medical resources in the north**
- **Leaving southern regions underserved**

Uninsured Rates:

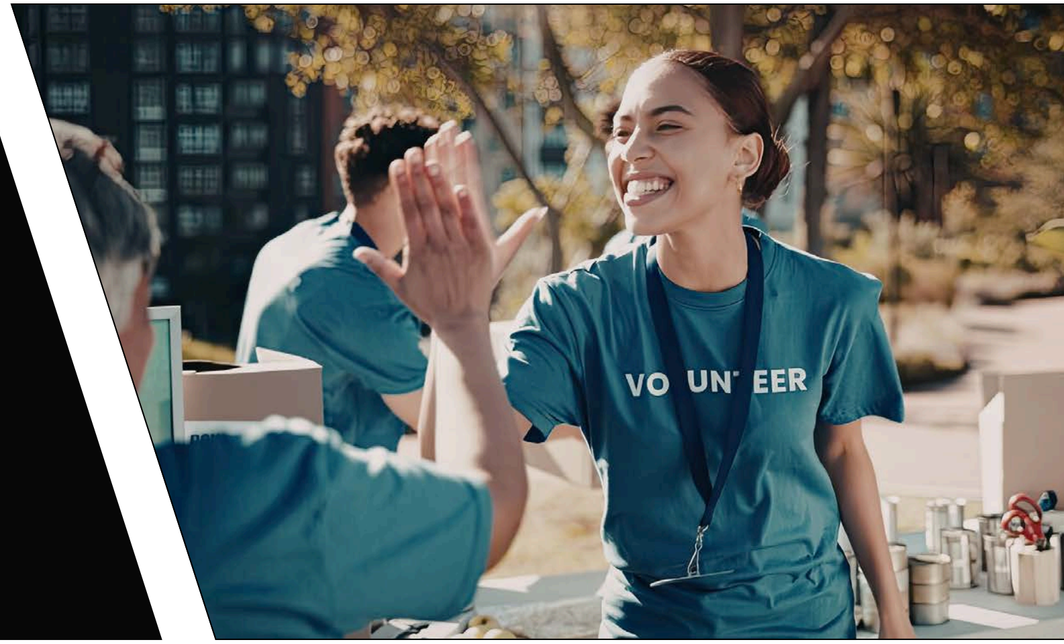
- **14% of Hispanic children and 27% of Hispanic adults in Delaware lack health insurance**
- **Compared with just 5% of white children and 6% of white adults**

WHYY, “Racial Health Gaps in Pennsylvania, New Jersey and Delaware.”

Promoting Equity within the Hispanic American Population

- Promoting equity within the Hispanic American population requires a multi-layered, culturally responsive approach that bridges systemic gaps, fosters inclusion, and provides targeted support.

- This challenging task will require buy-in from community members, health care providers, organizations, and schools.



Here is how various professional and community levels can drive change:

Community Members

- Act as liaisons by:
  - Organizing grassroots support
  - Participating in civic engagement
  - Guiding peers toward local, state, and federal services
- Individuals can advocate for:
  - Localized representation
  - Combating misinformation by sharing verified health and legal resources
  - Fostering neighborhood unity

Providers

- Implement “cultural humility” and anti-bias training to actively remove barriers to care
- Health care and social service providers can:
  - Hire bilingual staff
  - Utilize medical interpreters
  - Partner with “Promotoras” or Community Health Workers (CHWs) to bridge cultural gaps and improve access to care

Here is how various professional and community levels can drive change:

Organizations and Employers

- Address the social determinants of health and economic opportunity by:
  - Establishing internal Employee Resource Groups (ERGs)
  - Implementing structured mentorship programs
  - Setting transparent equity and representation targets across all levels of management to ensure equitable career advancement

Schools

- Create inclusive environments by:
  - Hiring a more diverse educator workforce
  - Providing culturally sensitive and appropriate curriculums
  - Districts and universities can improve academic and economic outcomes by:
    - Partnering with parents for literacy programs
    - Offering bilingual communication

Current resources in Delaware that promote health care equity within the Hispanic Americans

- Delaware promotes health care equity for Hispanic Americans through a mix of community-based health centers, state initiatives, and targeted non-profit advocacy.

- These strategies focus on overcoming language barriers, expanding health insurance access, and providing culturally appropriate care to the state's growing Latino population.



Key Community Health Centers

La Red Health Center

- Locations in Georgetown, Seaford, and Milford
- Provides culturally sensitive, vital primary, pediatric, mental and dental care to underserved populations
- Offers bilingual interpreters, Spanish-speaking medical staff, and a sliding-fee scale to assist uninsured or low-income patients

Westside Family Healthcare

- Serves communities across New Castle and Kent counties
- This Federally Qualified Health Center (FQHC) focuses on removing economic and cultural barriers to care, offering comprehensive bilingual services

Henrietta Johnson Medical Center

- Located in Wilmington
- A federally qualified health center (FQHC) offering bilingual primary medical, dental, and preventive care regardless of a patient's insurance status or ability to pay

Community Advocacy and Outreach

Latin American Community Center

- Based in Wilmington, the LACC operates targeted health initiatives, including free, confidential HIV early detection testing and substance abuse prevention education
- It also host the Los Abuelos program, which provides health education and case management for Hispanic seniors

United Way of Delaware Latinos Unidos:

- This initiative works to address systemic disparities affecting the Hispanic community, focusing on community health advocacy, early education, and economic stability

State Strategies and Government Initiatives

Delaware Hispanic Commission

- This state-commissioned body advises the Governor and General Assembly on matters impacting the Latino community

Bureau of Health Equity

- Part of the Delaware Department of Health and Social Services, this bureau coordinates programs aimed at identifying and eliminating health disparities across the state, ensuring that state resources and public health education are accessible to Spanish-speaking communities

Southern Delaware Community Resources

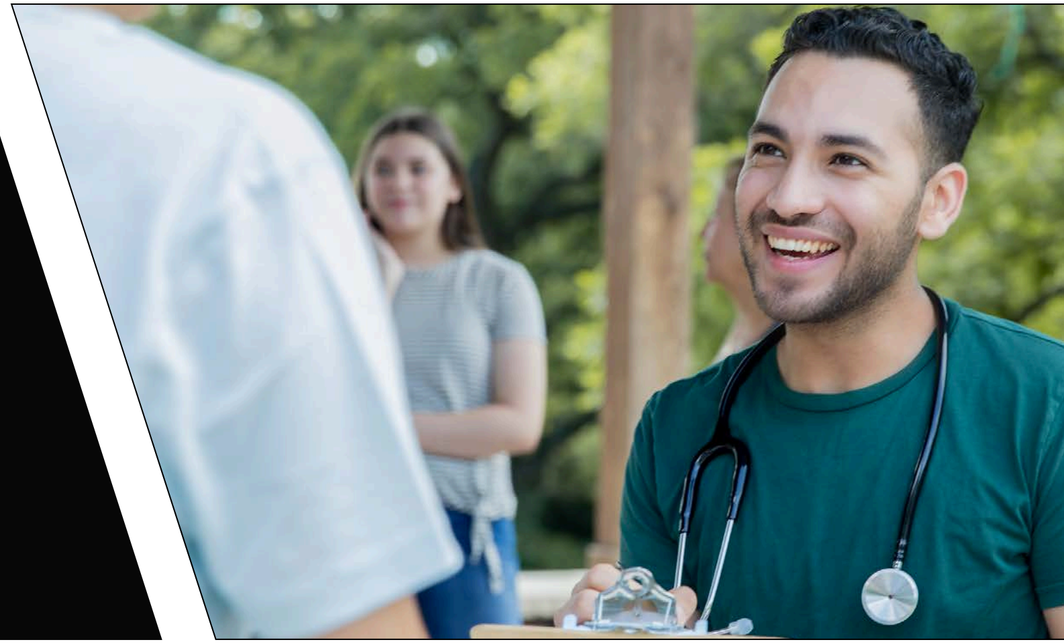
La Esperanza

- It is the only bilingual and bicultural multi-service nonprofit in Sussex County, Delaware, dedicated to assisting Latino and immigrant families
- It provides free, culturally appropriate programs to promote stability and empowerment, including immigration counseling, victim support services, and educational development



What are areas of gaps in our current landscape to address?

Addressing health equity for Hispanic Americans requires closing several critical gaps in the current health care and policy landscape, as this diverse population faces unique systemic and social hurdles.





The Insurance and Coverage Gap

Hispanic Americans have the highest uninsurance rate of any major ethnic group in the U.S., which serves as the most immediate barrier to care.

- **Lack of Employer Coverage**: Many Hispanic Americans work in smaller firms, seasonal jobs, or the service and construction industries, which are less likely to offer employer-sponsored health benefits.

- **Immigration Status**: Strict eligibility requirements exclude many undocumented individuals from enrolling in Medicaid, the Children's Health Insurance Program (CHIP), or the Affordable Care Act (ACA) marketplaces.



Language and Cultural Competency

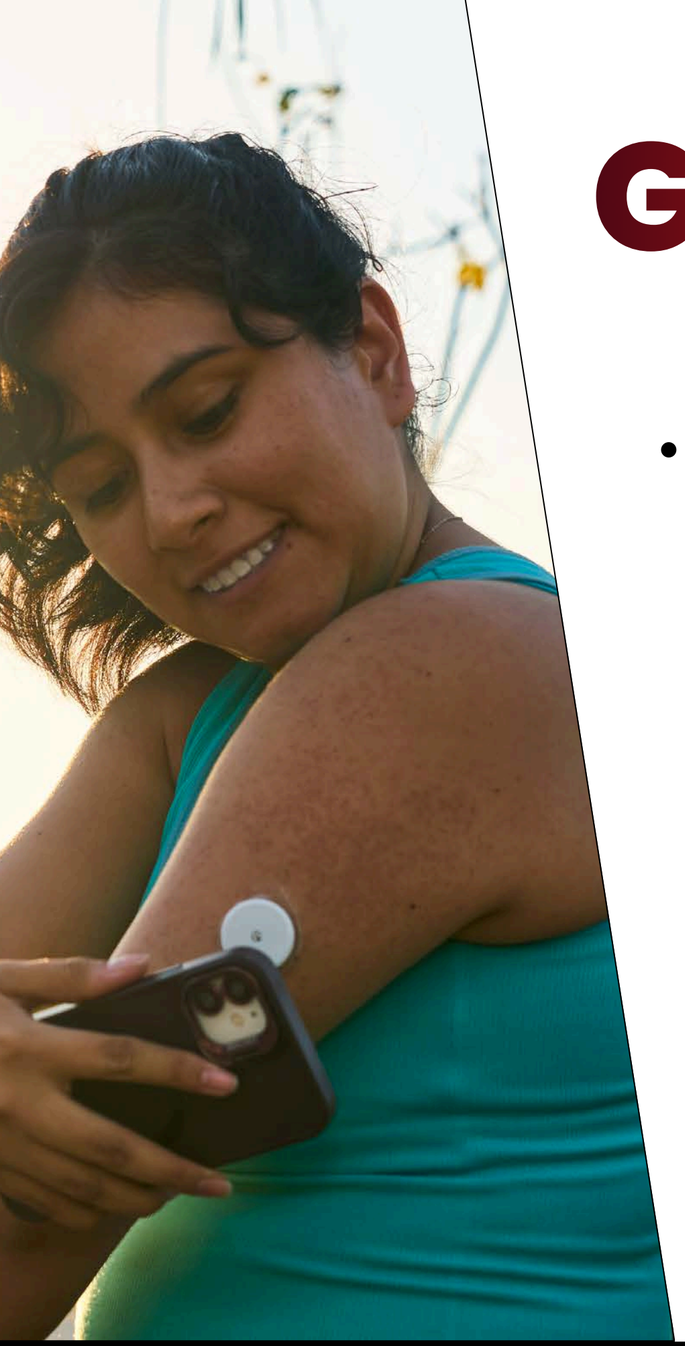
- **Provider Shortage**: Less than 7% of active physicians identify as Hispanic/Latino.
- **Health Literacy**: Written health materials and patient portals are often not translated into plain-language Spanish, and many health care systems lack on-demand, medically trained Spanish interpreters.
- **Cultural Nuances**: The health care system often does not account for the heavy reliance on family networks, traditional healing practices, and religious communities for health guidance.



Medical Mistrust and Structural Barriers

- **Fear of Deportation**: Anti-immigration policies, rhetoric, and enforcement actions deter many from accessing public health clinics, testing sites, and even routine preventative services.

- **Stigma**: Mental health conditions and substance use disorders are frequently highly stigmatized within traditional Hispanic cultural frameworks, leading to deep underreporting and undertreatment.



Granular Data Gaps

- **Masking Disparities**:
  - Hispanic Americans come from more than 20 distinct countries with varying genetic predispositions, socioeconomic realities, and health risks.
  - Some subgroups have higher rates of diabetes and chronic liver disease, while others face different cardiac risks.
  - Grouping them together obscures targeted, localized needs.



Vital Conditions for Health and Well-Being

- **Food Deserts and Food Insecurity**: Many Hispanic communities are located in areas with limited access to affordable, fresh groceries, which — alongside traditional, higher-carbohydrate diets — contribute to disproportionately high rates of obesity and type 2 diabetes.

- **Environmental Exposures**: Hispanic communities are often geographically placed in areas with higher air pollution and proximity to hazardous waste sites.

The Role of Policymakers

- Policymakers must institute policies that mandate culturally and linguistically appropriate services (CLAS) across health care networks.
- Policymakers can tie state health funding and Medicaid managed care contracts to equity metrics, ensuring community centers receive the financial resources necessary to operate effectively.



Cross-Sharing Strategies

- **Knowledge**: Establish regular virtual or in-person roundtables between state health officials and local organizations to directly address the Hispanic American community's unique needs.

- **Funding**: Direct state and federal public health grants through community-based organizations (CBOs) that already have established trust and physical presence in Hispanic American neighborhoods.

- **Training**: Share resources to require implicit bias and cultural competency training for all health care professionals.

Simultaneously, health systems can sponsor pipeline programs and workforce development initiatives to increase the number of bilingual medical staff and Spanish-speaking providers in the state.

Conclusion



- Hispanic Americans face several health disparities stemming from systemic, social and historical barriers.
- It is essential from a fundamental equity and human rights standpoint.
- It is also critical for improving the overall public health and economic prosperity of the nation.
- Promoting equity within the Hispanic American population requires a multi-layered, culturally responsive approach that will require buy-in from members of the community to policymakers.

Thank you for joining!
Time for Q & A



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