

LATINO HEALTH STATISTICS

Among California Latinos, heart disease, cancer, stroke and diabetes account for nearly 60 percent of all deaths.¹ The California Department of Health Services' California Nutrition Network for Healthy, Active Families created the *California Latino 5 a Day Campaign* to reduce this health crisis.

RISK FACTORS

Diet

- Only 38 percent of Latino adults consume the recommended amount of fruits and vegetables.²
- More than one-third of Latinos eat two or fewer servings of fruits and vegetables a day.³
- Seventy percent of Latinos say that fruits and vegetables are hard to buy in fast food restaurants, while 64 percent report that fruits and vegetables are difficult to get at work. Forty-one percent say that fruits and vegetables are too expensive.⁴

 Thirteen percent of Latinos report that they do not eat more fruits and vegetables because they are not in the habit, while over 20 percent report that fruits and vegetable take too much time to prepare.⁵

Physical Activity

- Only 43 percent of California Latino adults engage in 30 minutes of moderate physical activity five days a week⁶, while about 27 percent participate in 20 minutes of vigorous physical activity at least three times a week.⁷
- Thirty percent of California Latino adults did not engage in physical activity or exercise, outside their regular job, in the previous month.⁸
- Forty-five percent of Latino 5th graders in California did not pass the aerobic capacity test; 57 percent of Latino 9th graders also did not pass.⁹

California Department of Health Services, Center for Health Statistics, Office of Health Information and Research. (2004). Ten leading causes of death, percent of deaths, death rates, and age-adjusted death rates by sex – Hispanic – California, 2002. (Table 5-10A) [Data Table]. Retrieved June 22, 2005, from http://www.dhs.ca.gov/hisp/chs/OHIR/tables/datafiles/vsofca/0510a.pdf

²⁴ California Department of Health Services, Cancer Prevention and Nutrition Section. (2003). [California Dietary Practices Survey]. Unpublished data tables

⁵ California Department of Health Services, Cancer Prevention and Nutrition Section. (2001). [California Dietary Practices Survey]. Unpublished data tables.

⁶ Centers for Disease Control and Prevention. (2003). Behavioral risk factor surveillance system. Retrieved June 22, 2005, from http://apps.nccd.cdc.gov/brfss/race.asp?cat=PA&yr=2003&qkey=4418&state=CA

⁷ Centers for Disease Control and Prevention. (2003). Behavioral risk factor surveillance system. Retrieved June 22, 2005, from http://apps.nccd.cdc.gov/brfss/race.asp?cat=PA&yr=2003&qkey=4419&state=CA

Centers for Disease Control and Prevention. (2003). Behavioral risk factor surveillance system. Retrieved June 22, 2005. from http://apps.nccd.cdc.aov/brfss/race.asp@cat=EX&vr=2003&akev=4347&state=CA

California Department of Education. [2004]. Physical fitness test results. Retrieved May 19, 2005, from http://www.cde.ca.gov/ta/tg/pf/



Overweight and Obesity

- Forty percent of California Latino adults are overweight.¹⁰
- Twenty-nine percent of California Latino adults are obese.¹¹
- Overweight adolescents are at increased risk for becoming obese adults and for developing chronic, serious and costly medical problems. More than 1 out of 3 Latino adolescents in California are overweight or at risk for overweight.¹²

Food Security

- Almost 40 percent of low-income Latino adults in California experience food insecurity, that is, they could not afford to put food on the table or had to forego other basic needs to do so. Ten percent of low-income Latino adults experienced episodes of hunger.¹³
 - Almost 1 out of 5 Latino women ate less, during the previous year, to ensure their family members had enough to eat.¹⁴

CHRONIC DISEASE

Cardiovascular Disease

- Cardiovascular disease ranks as the leading cause of death among California Latinos, accounting for 23 percent of all deaths.¹⁵
- Nationally, 29 percent of Mexican-American men and women have cardiovascular disease (CVD).¹⁶ CVD includes diseases of the heart, stroke, high blood pressure, congestive heart failure, congenital cardiovascular defects, hardening of the arteries, and other diseases of the circulatory system.
- Nearly 19 percent of California Latinos have been diagnosed with high blood pressure.¹⁷

Cancer

 The national incidence for all cancers from 1992 through 1999 decreased an average of 1.6 percent each year. The mortality rate from all cancers during the same 8-year period decreased an average of 1.2 percent each year.¹⁸



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^{10,11} Centers for Disease Control and Prevention. [2003]. Behavioral risk factor surveillance system. Retrieved June 22, 2005, from http://apps.nccd.cdc.gov/brfss/race.asp?cat=DE&yr=2003&qkey=4409&state=CA

Rodriguez, M., Kane, M., Alonzo-Diaz, L., & Flores, G. (2005, April). One out of three Latino adolescents overweight or at risk. Retrieved May 19, 2005, from University of California, Los Angeles, Center for Health Policy Research Web site: http://www.healthpolicy.ucla.edu/pubs/files/LatAdol_Overwt_FS_41305.pdf

Harrison, G.G., Malano-LeClair, G., Ramirez, A., Chia, Y.J., Kurata, J., McGarvey, N., & Sharp, M. (2005, June). More than 2.9 million Californians now food insecure: One in three low-income, an increase in just two years (Policy Brief). Retrieved June 8, 2005, from University of California, Jos Angeles, Center for Health Policy Research Web site: http://www.healthpolicy.ucla.edu/pubs/files/Food Insecure PB 060105 pdf

years (Policy Brief). Retrieved June 8, 2005, from University of California, Los Angeles, Center for Health Policy Research Web site: http://www.healthpolicy.ucla.edu/pubs/files/Food_Insecure_PB_060105.pdf

14 California Department of Health Services, Office of Women's Health. (2000). Women who ate less in order that family members had enough food, by age, race/ethnicity and family status, California, 2000. Retrieved June 8, 2005, from http://www.dhs.ca.gov/director/owh/owh_main/cwhs/womens%20health%20survey/99-00%20data%20ate%20less.pdf

¹⁵ California Department of Health Services, Center for Health Statistics, Office of Health Information and Research. (2004). Ten leading causes of death, percent of deaths, death rates, and age-adjusted death rates by sex – Hispanic – California, 2002. (Table 5-10A) [Data Table]. Retrieved June 22, 2005, from http://www.dhs.ca.gov/hisp/chs/OHIR/tables/datafiles/vsofca/0510a.pdf

American Heart Association. (2005). Heart facts 2005: Latino/Hispanic Americans. Retrieved June 21, 2005, from http://www.americanheart.org/downloadable/heart/1106668433197LatinoSpanHeartFacts05.pdf

¹⁷ Centers for Disease Control and Prevention. (2003). Behavioral risk factor surveillance system. Retrieved May 19, 2005, from http://apps.nccd.cdc.gov/brfss/race.asp?cat=HA&yr=2003&qkey=4420&state=CA

¹⁸ American Cancer Society. (2003). Cancer facts and figures for Hispanics/Latinos 2003-2005. Retrieved June 22, 2005, from http://www.cancer.org/downloads/STT/CAFF2003HispPWSecured.pdf

- Nationally and in California, Latinos utilize cancer screenings, such as mammograms and colorectal examinations, significantly less than do their Caucasian and African American counterparts. Just over half of California Latino women report never having a mammogram exam.¹⁹ Sixty-four percent of California Latino men, 50 years and older, report never having a colorectal cancer exam.²⁰
- Cancer ranks as the second leading cause of death among California Latinos, accounting for 21 percent of all deaths.²¹
- Prostate, colorectal, and lung cancers are the most commonly diagnosed among Latino men. Breast, colorectal, and lung cancers are the most commonly diagnosed among Latino women.²²
- Although incidence of cancer is generally lower among Latinos than Caucasians, the incidence of stomach, liver, and cervical cancer is significantly higher among Latinos.²³



Diabetes

- Nationally, 8 percent of all Latino Americans aged 20 years or older have diabetes.
 Diabetes affects nearly 25 percent of all Mexican American adults between the ages of 45 and 74. Compared to non-Latino whites, the prevalence of type 2 diabetes is 1.5 times higher among Latinos.²⁴
- In California, diabetes accounts for 5 percent of all deaths among Latinos.²⁵ From 1995 through 2004, the prevalence of diabetes among California Latinos increased from 5.7 percent²⁶ to 7.2 percent.²⁷

OVERALL HEALTH STATUS

 Twenty-eight percent of California Latinos rate their overall health status as fair or poor.²⁸



- 19 Centers for Disease Control and Prevention. (1999). Behavioral risk factor surveillance system. Retrieved May 19, 2005, from http://apps.nccd.cdc.gov/brfss/race.asp?cat=WH&yr=1999&qkey=311&state=CA
- ²⁰ Centers for Disease Control and Prevention. (2002). Behavioral risk factor surveillance system. Retrieved May 19, 2005, from http://apps.nccd.cdc.gov/brfss/race.asp?cat=CC&yr=2002&qkey=7400&state=CA
- 21 California Department of Health Services, Center for Health Statistics, Office of Health Information and Research. (2004). Ten leading causes of death, percent of deaths, death rates, and age-adjusted death rates by sex Hispanic California, 2002. (Table 5-10A) [Data Table]. Retrieved June 22, 2005, from http://www.dhs.ca.gov/hisp/chs/OHIR/tables/datafiles/vsofca/0510a.pdf
- 22.23 American Cancer Society. (2003). Cancer facts and figures for Hispanics/Latinos 2003-2005. Retrieved June 22, 2005, from http://www.cancer.org/downloads/STT/CAFF2003HispPWSecured.pdf
- ²⁴ American Diabetes Association. (n.d.) Diabetes statistics for Latinos. Retrieved June 22, 2005, from http://www.diabetes.org/diabetes-statistics/latinos.jsp
- ²⁵ California Department of Health Services, Center for Health Statistics, Office of Health Information and Research. (2004). Ten leading causes of death, percent of deaths, death rates, and age-adjusted death rates by sex Hispanic California, 2002. (Table 5-10A) [Data Table]. Retrieved June 22, 2005, from http://www.dhs.ca.gov/hisp/chs/OHIR/tables/datafiles/vsofca/0510a.pdf
- 26 Centers for Disease Control and Prevention. (1995). Behavioral risk factor surveillance system. Retrieved May 19, 2005, from http://apps.nccd.cdc.gov/brfss/race.asp?yr=1995&qkey=1364&state=CA
- ²⁷ Centers for Disease Control and Prevention. (2004). Behavioral risk factor surveillance system. Retrieved May 19, 2005, from http://apps.nccd.cdc.gov/brfss/race.asp?cat=DB&yr=2004&qkey=1363&state=CA
- 28 Centers for Disease Control and Prevention. (2004). Behavioral risk factor surveillance system. Retrieved May 19, 2005, from http://apps.nccd.cdc.gov/brfss/race.asp%cat=HS&yr=2004&qkey=4414&state=CA



LIMITED ACCESS TO CARE

• Twenty-four percent of California Latino children and 44 percent of Latino adults were uninsured part or all of the previous year. In total, there are approximately 2.36 million uninsured Latino adults, nearly twice as many as any other racial/ethnic group.²⁹

COST OF DIET- AND INACTIVITY-RELATED DISEASES³⁰

- Cancer \$189.8 billion31
- Coronary heart disease \$142.1 billion³²
- Diabetes \$132 billion³³
- Obesity \$117 billion³⁴
- High blood pressure \$59.7 billion³⁵
- Stroke \$56.8 billion³⁶

 In California physical inactivity, obesity, and overweight cost an estimated \$21.7 billion in 2000 as direct and indirect medical care, workers' compensation, and lost productivity.³⁷

BENEFITS OF PREVENTION

 According to the United States Department of Agriculture, healthier diets could prevent at least \$71 billion per year in medical costs, lost productivity, and lost lives.³⁸

 The Centers for Disease Control and Prevention estimates that if all inactive Americans over the age of 15 became active, we would save \$77 billion in annual medical costs.³⁹



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²⁹ Brown, E.R., Lavarreda, S.A., Ponce, N., & Rice, T. (2003). The state of health insurance in California: Long-term and intermittent lack of health insurance coverage. Retrieved February 2, 2005, from University of California, Los Angeles, Center for Health Policy Research Web site: http://www.healthpolicy.ucla.edu/pubs/files/SHIC_report_11142003.pdf

³⁰ Estimates of annual direct + indirect costs.

³¹ American Cancer Society. (2005). Cancer facts and figures 2005. Retrieved June 22, 2005, from http://www.cancer.org/downloads/STT/CAFF2005f4PWSecured.pdf

³² American Heart Association. (2005). Heart disease and stroke statistics – 2005 Update. Retrieved June 21, 2005, from http://www.americanheart.org/downloadable/heart/1105390918119HDSStats2005Update.pdf

³³ American Diabetes Association. (2003). Economic cost of diabetes in the U.S. in 2002. Retrieved June 22, 2005, from http://care.diabetesjournals.org/cgi/content/full/26/3/917

U.S. Department of Health and Human Services, Public Health Service, Office of the Surgeon General. (2001). The Surgeon General's call to action to prevent and decrease overweight and obesity 2001. Retrieved June 22, 2005 from http://www.cdc.gov/nccdphp/dnpa/pdf/CalltoAction.pdf

^{35.36} American Heart Association. (2005). Heart disease and stroke statistics - 2005 Update. Retrieved June 21, 2005, from http://www.americanheart.org/downloadable/heart/1105390918119HDSStats2005Update.pdf

³⁷ Chenoweth, D. (2005). The economic costs of physical inactivity, obesity, and overweight in California adults: Health care, workers' compensation, and lost productivity. Retrieved June 21, 2005, from California Department of Health Services, Cancer Prevention and Nutrition Section Web site: http://www.dhs.ca.gov/ps/cdic/cpns/press/downloads/CostofObesityToplineReport.pdf

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