QUESTION 12: How much do Latinos know about their health, and what are their primary sources of information?

ANSWER: Hispanics have lower levels of health literacy than non-Hispanics, and much of their health information comes from sources other than their health care providers.

HEALTH LITERACY
Low rates of health literacy—a nationwide problem linked to poor outcomes such as higher rates of rehospitalization and lower adherence to medical regimens—are more prominent among Hispanics than non-Hispanics.

• Health literacy has been defined by the Centers for Disease Control and Prevention as “the degree to which individuals have the capacity to obtain, process, and understand basic health information and services needed to make appropriate health decisions.”

• One national assessment scores individuals’ health literacy as ranging from “below basic” understanding, which includes having no literacy in the English language, to “proficient.” A substantial portion (41%) of Latino adults has a “below basic” level of health literacy, and only one in 25 (4%) is considered proficient (see Figure 1).

• In comparison, 25% of American Indians/Alaska Natives, 24% of non-Hispanic Blacks, 13% of Asians/Pacific Islanders, and 9% of non-Hispanic Whites are assessed to have “below basic” health literacy levels.

HEALTH CARE PROVIDERS AS SOURCES OF INFORMATION
A large segment of Latinos receive no health information from medical providers, who are vital to building health literacy and ensuring quality of care.

• One study found that although medical professionals are the most common source of health information for Latinos, more than one-quarter of Latinos (28%) report that they received no health information from a health care provider in the past year (see Table 1).

• Among Hispanics, Mexicans and Central Americans are most likely (30%) to report having received no health information from their doctors, followed by South Americans (29%), Dominicans (25%), Cubans (22%), Puerto Ricans (19%), and all other Hispanic subgroups (16%).

• Language barriers in health care settings may contribute to this problem. Latinos who primarily speak English (79%) or are bilingual (74%) are more likely than Spanish-dominant Latinos (62%) to report receiving health information from a doctor.

• Health insurance, which is correlated with access to the health care system, is a key factor. Uninsured Latinos are nearly twice as likely (40%) as insured Latinos (22%) to report receiving no health information from their providers.

NONMEDICAL SOURCES OF HEALTH INFORMATION
Nonmedical sources of health information are valued among Latinos, particularly those with poor access to the health care system.

• More than two-thirds (69%) of Latinos report receiving health information from television. In addition, 51% of all Latinos receive health information from newspapers, 40% from radio, and 35% from the Internet. A majority of Latinos who obtain health information from television or the radio report receiving it in Spanish or a mix of Spanish and English.

• Access to health care is an important predictor of who receives information from television (see Figure 2). Latinos who lack a regular source of health care are more likely to report receiving health information from television than from a medical professional.

• Organizations and individuals within the community function as another important source of health information. Nearly two-thirds (63%) of Hispanics report receiving some health information from community groups or friends, and about one in three (31%) credit community groups and churches as sources.
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.


³ Mark Kutner et al., The Health Literacy of America’s Adults: Results From the 2003 National Assessment of Adult Literacy (Washington, DC: National Center for Education Statistics, 2006), http://nces.ed.gov/pubs2006/2006483.pdf (accessed April 2009). Literacy assessments were only made for written English language proficiency.

⁴ Ibid.

⁵ Ibid.

⁶ The Joint Commission has identified effective provider communication as a critical factor in improving patient health literacy and patient safety: “The Joint Commission’s accreditation standards underscore the fundamental right and need for patients to receive information – both orally and written – about their care in a way in which they can understand this information…The safety of patients cannot be assured without mitigating the negative effects of low health literacy and ineffective communications on patient care.” The Joint Commission, “What Did the Doctor Say?:” Improving Health Literacy to Protect Patient Safety (Oakbrook Terrace, IL: The Joint Commission, 2007), http://www.jointcommission.org/nr/rdonlyres/7248b2e-e7e6-4121-8874-99c7b4888301/0/improving_health_literacy.pdf (accessed April 2009).


⁸ Ibid.

⁹ Ibid.

¹⁰ Ibid.

¹¹ Ibid.

¹² Ibid. Of Latinos receiving health information from television, 40% report that the information was delivered in Spanish and 32% report a mix of Spanish and English. Similarly, nearly half (47%) of the Latinos using radio as an information source report receiving it in Spanish and 26% report a mix of Spanish and English.

¹³ Ibid.

¹⁴ Ibid.