Use of Preventive Services Among Hispanic Sub-Groups:

Does One Size Fit All?
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Executive Summary

The Hispanic population, the largest and fastest growing minority group in the nation, is generally under-served with regard to health services. We explored the use of preventive health services among Mexicans, Puerto-Ricans, Cubans, and “other” Latinos (persons from all other Spanish-speaking countries such as Spain, Central and South America) and examined how the use of preventive services was influenced by nation of origin and by rural versus urban residence. Rural is defined as living in a non-metropolitan county; urban as living in a metropolitan county.

Study Methods

Preventive Services Examined: We studied reported receipt of six preventive services among age-appropriate populations: pap test, clinical breast examination (CBE), mammogram, PSA (prostate specific antigen) test, flu vaccination and pneumonia vaccination.

Definition of Adequate Services: In setting a standard for adequate cancer screening (pap, CBE, mammogram and PSA), we used the recommendations of the American Cancer Society. These are generally more conservative, that is, require earlier or more frequent screening, than those offered by the US Preventive Services Task Force. Recommendations of the US Preventive Services Task Force were followed in defining adequate vaccination.

Data Source: We merged data from the National Health Interview Survey (NHIS) from 1998, 1999 and 2000. The NHIS is a nationally representative survey carried out by the Centers for Disease Control and Prevention. We merged three years of data in order to have enough persons in each Hispanic subgroup for statistical analysis. Our findings compare Hispanic subgroups (Mexican, Puerto Rican, Cuban, and “other Hispanics”) with Whites.

Findings

• Rural residents, whether Hispanic or non-Hispanic White, were generally less likely to receive preventive services.

• Nation of origin was not consistently associated with differences in receipt of preventive services within the Hispanic population.

• Hispanics were significantly less likely than whites to report having received any of the preventive services studied. However, these differences were not present when the characteristics of respondents, such as income, education, and other factors, were held equal in multivariate analysis.

• Lack of health insurance and lack of a usual source of care were among the strongest predictors of failure to receive preventive services.

Conclusions & Implications

• Expanding programs that provide free or low-cost cancer screening and other preventive services may help reduce ethnicity-based and residence-based disparities.
• Improving the provision of culturally and linguistically appropriate services by providers, combined with targeted education at Hispanic populations, may help reduce ethnicity-based disparities. Further research is needed to develop effective interventions.