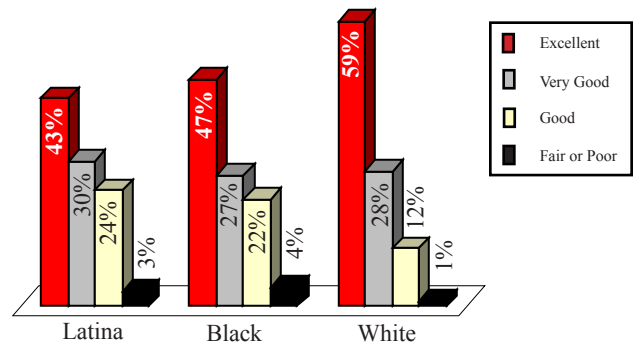


## Latinas\* in the U.S.: Health and Other Issues

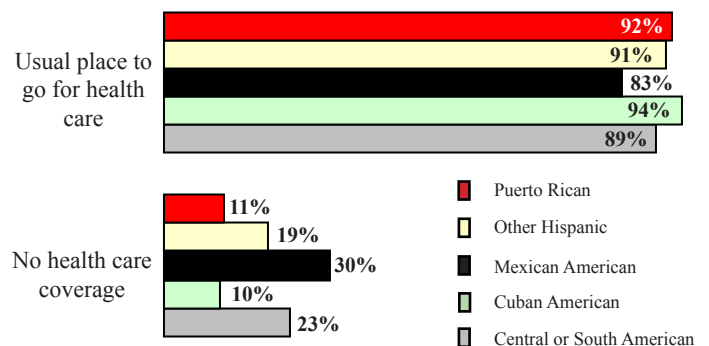
### Overall, a majority of Latino children have a good or better health status

- ◆ According to the parents of Latino children under the age of 18, the health status of 43% of Latino children was “excellent,” of 30% was “very good,” of 24% was “good,” and of 3% was “fair or poor.”<sup>1</sup> (See also Figure 1.)
- ◆ Of all Latinas in grades 9-12, 13% reported that their health, in general, was “fair or poor,” compared to 12% of Black young women and 8% of White young women.<sup>10</sup>
- ◆ Approximately 5% of Latino children ages 5-17 missed 11 or more days of school in the past 12 months due to an illness or injury; 9% missed 6-10 days, 22% missed 3-5 days, 28% missed 1-2 days, and 35% missed no days at all. Latino children on average missed fewer days of school than White children and about the same number of days as Black children.<sup>1</sup>

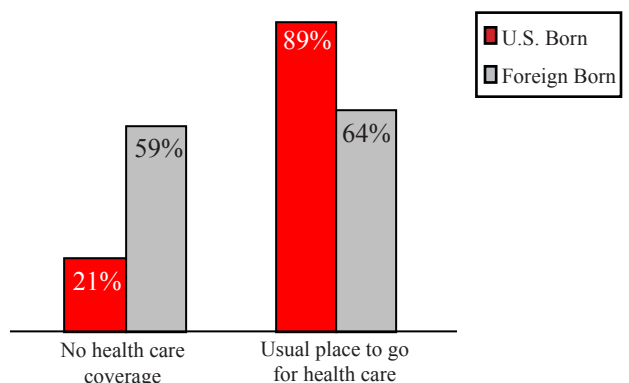
**Figure 1:** Parent ratings of the health status of their children under 18 years of age, by race/ethnicity.<sup>1</sup>



**Figure 2:** Percent of no health care coverage and a usual place to go for health care among Latinas under the age of 18, by Latino subgroup.<sup>16</sup>



**Figure 3:** Percent of U.S. born and foreign born Latinas under the age 18 with no health care coverage and a usual place to go for health care.<sup>16</sup>



### Many Latina girls and young women lack access to health care

- ◆ One-quarter (26%) of Latinas under the age of 18 did not have health insurance coverage. Of the five subgroups of Latino children, Mexican American girls and young women constituted the largest group without health insurance coverage (30%), compared to 23% of young Latinas with roots in Central or South America, 19% of “other” Hispanic, 11% of Puerto Rican, and 10% of Cuban American girls and young women.<sup>16</sup> (See Figure 2.)
- ◆ Together, 86% of Latinas under the age of 18 had a usual place to go for health care. Mexican American girls and young women under the age of 18 had the lowest rates of all subgroups at 83%, followed by Central or South American (89%), “other” Hispanic (91%), Puerto Rican (92%), and Cuban American (94%).<sup>16</sup> (See Figure 2.)
- ◆ Almost 1 in 5 Latinas under the age of 18 (18%) had unmet medical needs in the past 12 months, varying considerably by Latina subgroup, with “other” Hispanic at 24%, Mexican American at 19%, Puerto Rican at 17%, Central or South American at 14%, and Cuban American at 8%.<sup>16</sup>

\*Girls Incorporated® has chosen to adopt the U.S. Federal Government’s definition of Latino. They define a “Hispanic or Latino as a person of Mexican, Puerto Rican, Cuban, South or Central American, or other Spanish culture or origin regardless of race. Thus, Hispanics [or Latinos] may be any race.”<sup>15</sup> The government equates Hispanic and Latino for all government documents. We have chosen to use Latino/a consistently through out the publications of the Girls Inc. Latina Initiative.

- ◆ In 2004, Latino children ages 2-17 were less likely (46%) than non-Latino children (60%) to have had a dental contact in the past 6 months and more likely (9%) than non-Latino children (6%) to have had an unmet dental need in the past 12 months.<sup>1</sup>

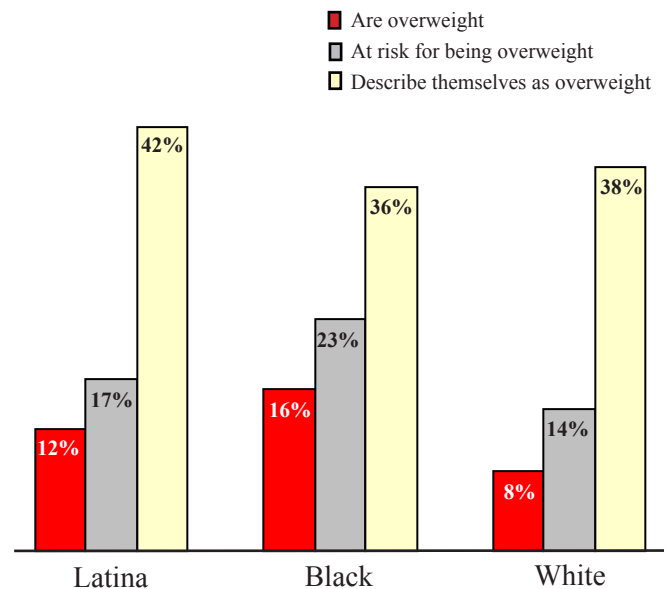
**Foreign-born Latino children are less likely than U.S. born Latino children to have access to health care**

- ◆ Approximately 21% of U.S. born Latino children under the age of 18 did not have health insurance, dramatically lower than the 59% of foreign born Latino children under the age of 18 without coverage. Of U.S. born Mexican American children, 25% lacked health care access, compared to 67% of foreign born Mexican American children. Of U.S. born Cuban American children, 7% lacked health care access, compared to 28% of foreign born Cuban American children.<sup>16</sup> (See Figure 3.)
- ◆ Nine in ten U.S. born Latino children (89%) had a usual health care facility, compared to 2 in 3 foreign-born Latino children (64%). When comparing U.S. born and foreign born Latino subgroups, U.S. born Mexican American children were more likely to have a regular health care facility--87% U.S. born vs. 58% foreign born, followed by Central or South American (91% vs. 78%), "other" Hispanic (92% vs. 78%), Puerto Rican (93% vs. 61%), and Cuban American (96% vs. 77%).<sup>16</sup> (See Figure 3.)
- ◆ Overall, 17% of U.S. born Latino children had unmet medical needs in the past 12 months, slightly lower than foreign born Latino children (22%). U.S. born and foreign born Central or South American children had similar rates for unmet medical needs (13% vs. 12%). One in four (26%) foreign born Mexican American children had unmet medical needs, compared to less than 1 in 5 (17%) U.S. born Mexican American children.<sup>16</sup>

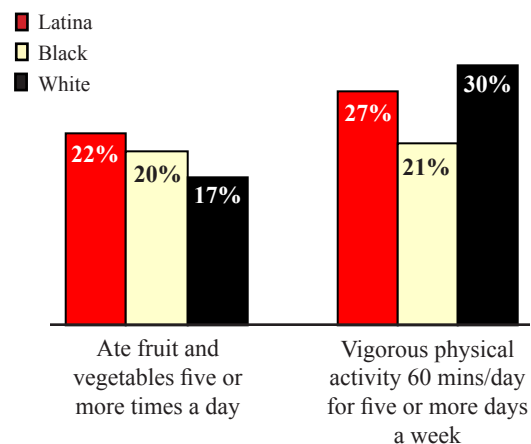
**Like other girls and young women, some young Latinas take steps to manage their weight**

- ◆ Approximately 17% of Mexican American girls ages 6-11 were overweight, compared to 22% of Mexican American girls ages 12-18.<sup>11</sup>
- ◆ Among Latina high school students, 12% were overweight and 17% were at risk of becoming overweight, whereas White young women were less likely to be overweight or at risk of becoming overweight (8% and 14%, respectively) and Black young women were more likely to be overweight or at risk for becoming overweight (16% and 23%, respectively).<sup>10</sup> (See also Figure 4.)

**Figure 4:** Percent of young women in grades 9-12 who are overweight, at risk being overweight, and describe themselves as overweight, by race/ethnicity.<sup>10</sup>



**Figure 5:** Fruit and vegetable consumption and vigorous physical activity among young women in grades 9-12 by race/ethnicity.<sup>10</sup>



- ◆ In 2005, approximately 64% of Latina high school students were trying to lose weight, 12% were overweight, and 42% described themselves as slightly or very overweight.<sup>10</sup> (See also Figure 4.)
- ◆ One in five Latina high school students (22%) ate five or more servings of vegetables daily and 27% of them participated in vigorous physical activity for 60 minutes 5 or more days a week.<sup>10</sup> (See also Figure 5.)
- ◆ Over half (53%) of Latinas in grades 9-12 ate less food, calories or fat, 69% exercised to keep their weight under control or to keep from gaining weight, and 57% attended physical education classes one or more days a week.<sup>10</sup>

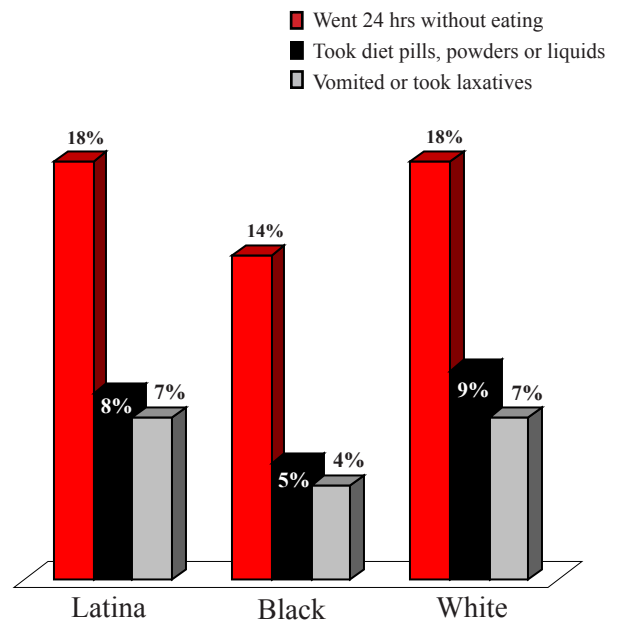
**Unhealthy dieting behaviors and eating disorders affect some young Latinas**

- ◆ Almost 1 in 5 Latina young women (18%) went without eating for 24 hours, 8% took diet pills, powders, or liquids, and 7% vomited or took laxatives to lose weight or to keep from gaining weight.<sup>10</sup> (See also Figure 6.)
- ◆ Girls and women account for 90% of eating disorders.<sup>19</sup> It is a myth that eating disorders are restricted to middle and upper-class White young women; young women of color are substantially affected by eating disorders as well. In a three-year study of young women in grades 6-9, 3% developed some form of eating disorder by the end of the study. Latina young women in this study were found to be particularly sensitive to preoccupation with having thin bodies.<sup>20</sup>

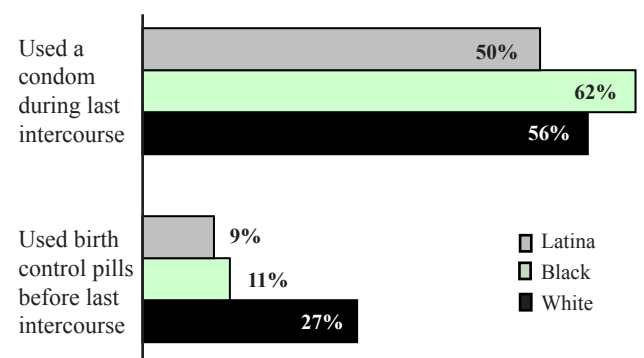
**Young Latinas are about as likely as non-Latina peers to be sexually active, but are less likely to use contraception and to get prenatal care**

- ◆ Approximately 4% of Latina high school students had sexual intercourse before age 13. Almost half (44%) of Latina young women reported they have ever had sex, and 34% reported being currently sexually active. One in 10 (10%) had sexual intercourse with four or more persons during her lifetime.<sup>10</sup>
- ◆ Almost 1 in 5 Latina high school students (19%) who were currently sexually active drank alcohol or used drugs before her last sexual intercourse.<sup>10</sup>
- ◆ Before their last intercourse, only 9% of Latina high school students used birth control pills, and only 50% of Latinas used a condom during their last intercourse.<sup>10</sup> (See also Figure 7.)

**Figure 6:** Percent of young women in grades 9-12 who used unhealthy means to lose weight or to keep from gaining weight, by race/ethnicity.<sup>10</sup>

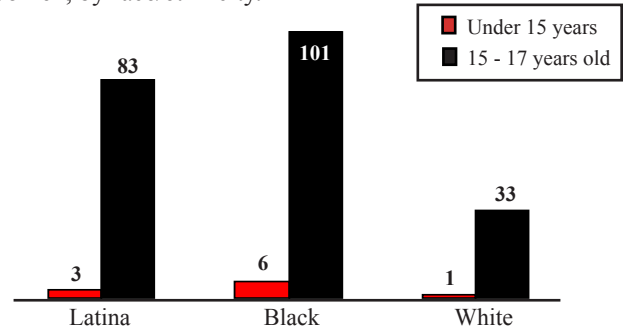


**Figure 7:** Contraceptive use among young women in grades 9-12, by race/ethnicity.<sup>10</sup>

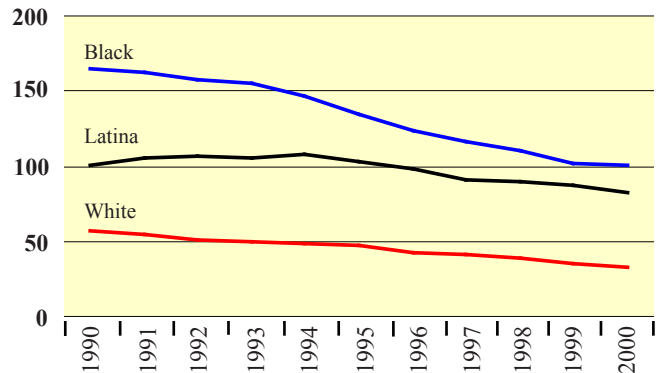


- ◆ In 2000, the pregnancy rate for Latinas ages 15-17 was 83 per 1,000, significantly higher than the pregnancy rate for White young women (33 per 1,000), but lower than the pregnancy rate for Black young women (101 per 1,000). From 1990-2000, the pregnancy rate among Latinas ages 15-17 declined by 18%, which was less significant than the decline in the pregnancy rate among Black young women (39%) and White young women (42%).<sup>22</sup> (See also Figures 8 and 9.)
- ◆ The 2002 live birth rate was 1.4 per 1,000 for all 10-14 year old Latinas, 0.1 per 1,000 for 10-12 year old Latinas and 3.6 per 1,000 for 13-14 year old Latinas.<sup>13</sup> Latinas ages 15-17 had a birth rate of 50 per 1,000.<sup>12</sup>
- ◆ Only 51% of 10-14 year-old pregnant Latinas received prenatal care during the first trimester, and 15% received late or no prenatal care. Of all 15-17 year old pregnant Latinas, 63% received first trimester prenatal care and 10% received late or no prenatal care.<sup>13</sup> (See also Figure 10.)
- ◆ Latinas represent 18% of all U.S. women having abortions, at a rate of 17 per 1,000 women and a ratio of 233 per 1,000 live births. Latinas who are 14 years old and younger represent 1% of all abortions by Latinas, compared to 16% of 15-19 years old Latinas.<sup>5</sup>

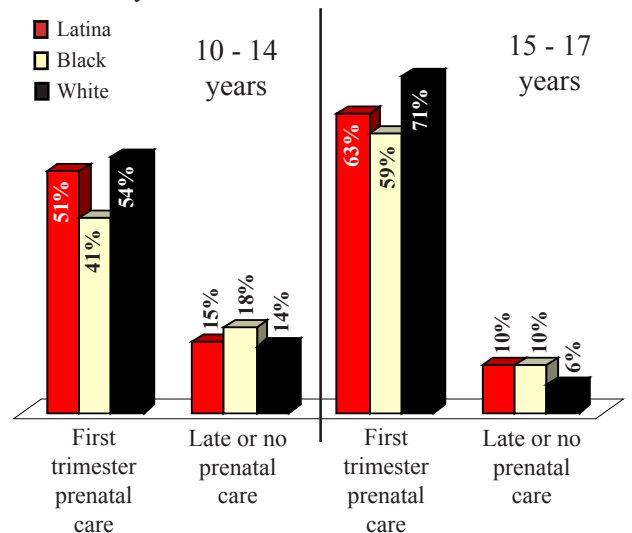
**Figure 8:** Pregnancy rates per 1,000 girls and young women, by race/ethnicity.<sup>22</sup>



**Figure 9:** Pregnancy rates per 1,000 15-17 year old young women, by race/ethnicity, 1990-2000.<sup>22</sup>



**Figure 10:** First trimester prenatal care and late or no prenatal care among girls and young woman, by race/ethnicity.<sup>13</sup>



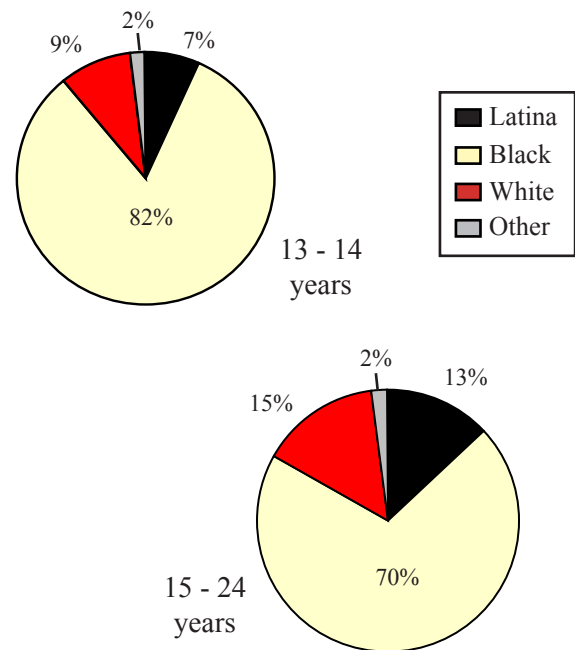
**HIV/AIDS and STDs are serious risks for sexually active Latina young women, as for all young women**

- ◆ In 2001, Latinas ages 5-12 accounted for 2% of all Latina HIV infections, and Latinas ages 13-19 accounted for 5% of all Latina HIV infections. Of all Latina AIDS diagnoses in 2001, Latinas ages 5-12 and those 13-19 each accounted for 1%.<sup>2\*\*</sup>
- ◆ In 2004, Latinas represented 18% of all girls aged 10-14 and 16% of young women aged 15-24;<sup>21</sup> between 2001 and 2004, Latinas represented 7% in the United States of new HIV/AIDS cases among all girls ages 13-14 years old and 13% of new HIV/AIDS cases among young women ages 15-24 years old.<sup>9\*\*</sup> (See also Figure 11.)
- ◆ Of all HIV cases among Latina adults and adolescents in 2004, 19% were from injection drug use and 51% were from heterosexual contact. During the same year, 21% of AIDS cases among Latina adults and adolescents were from injection drug use and 49% were from heterosexual contact.<sup>7</sup>

\*\*After 2001, the Centers for Disease Control and Prevention did not report HIV/AIDS case rates for the age groups of 5-12 years and 13-19 years.

- ◆ Latinas in grades 9-12 are less likely (86%) than White young women (90%) to have been taught about AIDS or HIV infection in school. They are also less likely to have been tested for HIV (11%) than Black young women (24%).<sup>10</sup> (See also Figure 12.)
- ◆ Latinas ages 15-19 had a gonorrhea rate of 78.2 per 100,000 and a syphilis rate of 0.7 per 100,000 in 2004. Latinas ages 15-19 also constituted 32% (41,569) of all Latina chlamydia cases.<sup>8</sup>
- ◆ Latinas ages 10-14 had a cervical cancer rate of 0.03 per 100,000, compared to 0.16 per 100,000 for 15-19 year old Latinas and 2 per 100,000 for 20-24 year old Latinas.<sup>15</sup> The primary cause of cervical cancer is the Human Papillomavirus (HPV).<sup>14</sup>

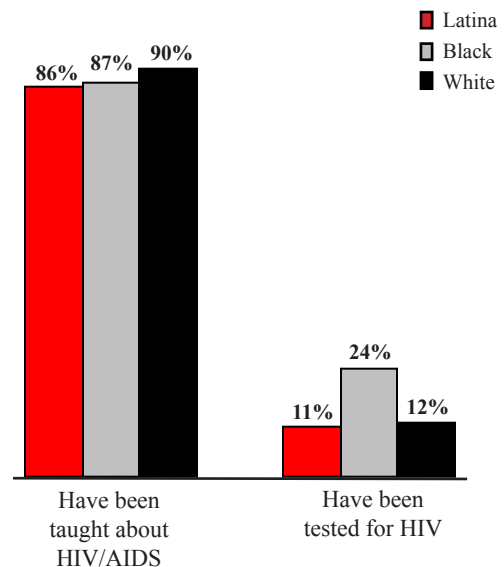
**Figure 11:** Percent of HIV/AIDS cases among girls and young women in 2004, by race/ethnicity.<sup>11</sup>



**Use of alcohol, tobacco and other drugs is a part of some young Latinas' lives**

- ◆ One-fourth (25%) of Latinas in grades 9-12 drank alcohol before they were 13 and almost half of them (45%) reported current alcohol use. Nearly 22% of Latinas reported consuming 5 or more drinks of alcohol in a row within a couple of hours.<sup>10</sup> (See also Figure 13.)
- ◆ Approximately 1 in 10 Latina high school students (12%) smoked a whole cigarette before the age of 13. Over half (52%) of Latinas in grades 9-12 had ever tried smoking cigarettes, and 19% of them reported current cigarette use.<sup>10</sup>
- ◆ Of all Latinas ages 12-17, 31% reported ever using illicit drugs, 22% reported using illicit drugs in the past month, 11% reported current illicit drug use, and 3% reported having any illicit drug or alcohol dependence.<sup>18</sup>
- ◆ Among Latina high school students, 38% have ever used marijuana, 18% currently use marijuana, 14% have ever used any type of inhalant, 9% have ever used any form of cocaine, 5% were currently using any form of cocaine, 8% have ever used methamphetamines, 7% have ever used ecstasy, and 1% have ever used a needle to inject an illegal drug.<sup>10</sup>

**Figure 12:** Percent of young women in grades 9-12 who have been taught about HIV/AIDS and have been tested for HIV, by race/ethnicity.<sup>10</sup>



**Latina girls and young women are at a high risk for unintentional injuries.**

- ◆ Approximately 9% of Latina high school students have rarely or never worn a seat belt. Over three-fourths (83%) of Latinas in grades 9-12 who rode a bicycle in the past 12 months reported rarely or never wearing a bicycle helmet, and 48% who rode a motorcycle in the past 12 months reported rarely or never wearing a motorcycle helmet.<sup>10</sup>

- ◆ In the past 30 days, 1 in 3 Latina high school students (35%) reported riding in a car or other vehicle driven by someone who had been drinking alcohol; 6% of Latina young women have driven a car or other vehicle one or more times in the past 30 days when they had been drinking.<sup>10</sup>
- ◆ In 2003, Latinas ages 5-9 and 10-14 had the same overall injury (intentional, unintentional, and undetermined) death rate of 5 per 100,000. Latinas ages 15-19 had an overall injury death rate of 22 per 100,000. The unintentional injury death rate for 5-9 year old Latinas was higher (4 per 100,000) than that of 10-14 year old Latinas (3 per 100,000), but much lower than for 15-19 year old Latinas (16 per 100,000).<sup>3</sup> (See Figure 14.)

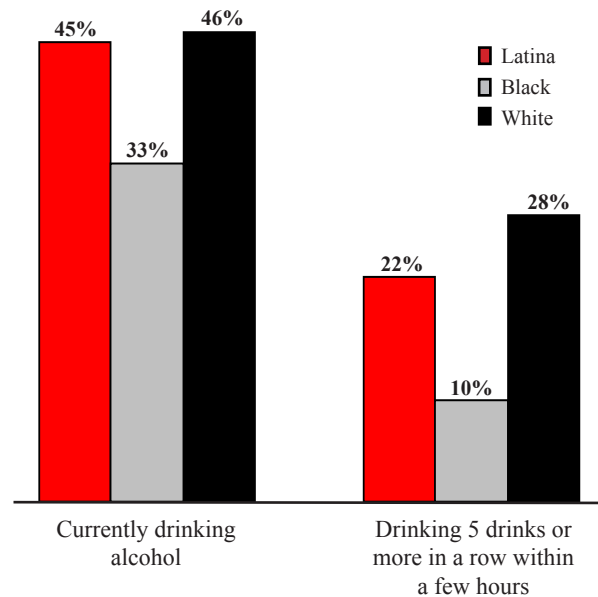
**Violence still affects the safety of Latina girls and young women**

- ◆ In 2005, approximately 9% of Latina high school students reported experiencing dating violence, and 9% reported that they have been forced to have sexual intercourse when they did not want to.<sup>10</sup>
- ◆ One-third of Latina young women in grades 9-12 (33%) report having been in a physical fight in the past 12 months, with 3% of these physical fights resulting in injuries that had to be treated by a doctor or nurse.<sup>10</sup>
- ◆ One in ten Latina high school students (10%) reported not going to school because of safety concerns, 12% had been in a physical fight on school property, and 8% had been threatened or injured with a weapon on school property.<sup>10</sup> (See also Figure 15.)
- ◆ The violence-related injury death rate for 15-19 year old Latinas (5 per 100,000) was higher than that for 10-14 year old Latinas (1 per 100,000).<sup>3</sup> (See Figure 14.)

**Suicide attempts are higher among Latina young women**

- ◆ Of all Latinas ages 12-17, 18% were at risk for suicide during the past year, with suicide risks for 13% of 12-13 year old Latinas, 23% of 14-15 year old Latinas, and 17% of 16-17 year old Latinas. U.S. born Latinas ages 12-17 were more likely (19%) than foreign born Latinas ages 12-17 (14%) to be at risk for suicide during the past year. Only 1 in 3 Latinas ages 12-17 who were at risk for suicide in the past year (32%) received mental health treatment during the same time period.<sup>17</sup>

**Figure 13:** Young women in grades 9-12 who reported current alcohol use and binge drinking, by race/ethnicity.<sup>10</sup>



**Figure 14:** Injury death rates per 100,000 Latina girls and young women.<sup>3</sup>

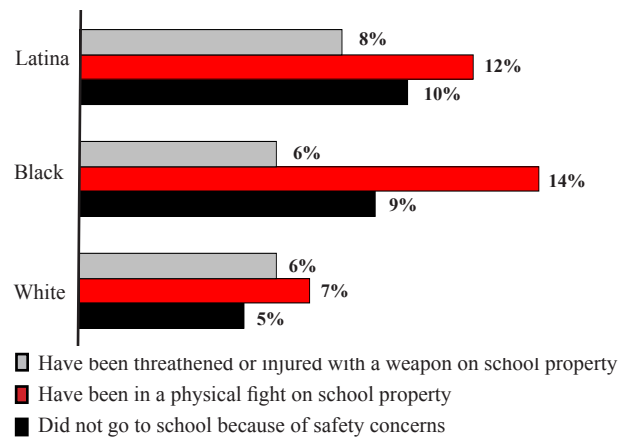


- ◆ Almost half (47%) of Latina high school students have felt sad or hopeless every day for two weeks or more within the past year, almost twice the rate for Latino young men (26%).<sup>10</sup>
- ◆ Latinas in grades 9-12 are more likely than White or Black young women to have seriously considered attempting suicide (24%), made a suicide plan (19%), and attempted suicide (15%).<sup>10</sup> (See also Figure 16.)

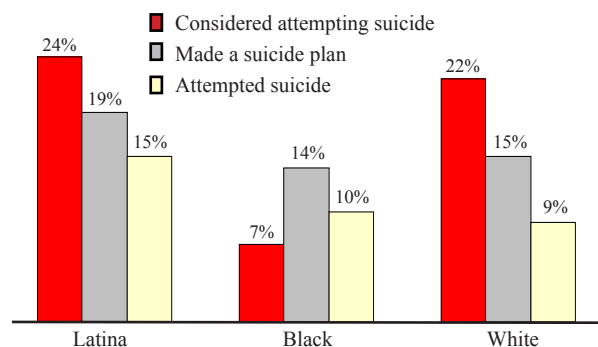
**Some Latina young women and girls are affected by environmental health conditions**

- ◆ Of all Latino children under 18 years of age, 10% have ever been told that they have asthma, and 4% had an asthma attack in the past 12 months.<sup>1</sup> Among all Latina high school students, 16% reported having asthma at some point in their lifetime, 14% reported currently having asthma, and 38% reported having at least one episode or asthma attack within the past 12 months.<sup>10</sup> (See also Figure 17.)
- ◆ In 2004, almost 1 in 10 Latino children under 18 reported having hay fever (7%), respiratory allergies (8%), or other allergies (10%).<sup>1</sup>
- ◆ Approximately 10% of Latinas in grades 9-12 wore a sun screen with an SPF of 15 or more when outside more than 1 hour on a sunny day and 23% practiced routine sun safety other than sunscreen.<sup>10</sup>
- ◆ Approximately 1% of Latinas ages 6-19 had elevated blood lead levels,<sup>6</sup> and 2% of Latinas ages 16-49 had elevated blood mercury levels.<sup>4</sup>

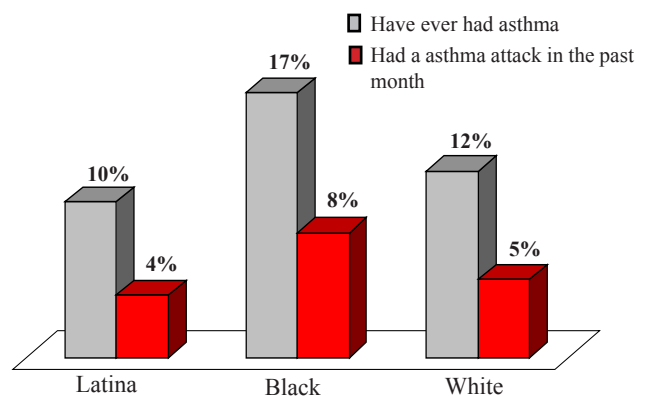
**Figure 15:** Percent of young women in grades 9-12 who reported being affected by violence at school, by race/ethnicity.<sup>10</sup>



**Figure 16:** Percent who considered attempting suicide, made suicide plans, and attempted suicide among young women in grades 9-12, by race/ethnicity.<sup>10</sup>



**Figure 17:** Children under the age of 18 who have ever had asthma and had an asthma attack in the past month, by race/ethnicity.<sup>10</sup>



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**For more information on Latinas, see these Girls Incorporated® Resource Lists and Fact Sheets:**

- ◆ **Latinas in the U.S.: Demographics**
- ◆ **Latinas in the U.S.: Social Issues**
- ◆ **Latina Resources for Girls**
- ◆ **Latina Resources for Parents and Families**
- ◆ **Latina Resources for Youth Workers**

In response to requests from affiliates and as a result of monitoring service trends, Girls Inc. is implementing an initiative to address the strengths and needs of Latinas ages 6 to 18, with the goals of increasing the number of Latina girls served by Girls Incorporated affiliates and increasing the sensitivity to Latinas in all Girls Inc. efforts.

**Girls Incorporated®** is a nonprofit organization in the United States and Canada that inspires all girls to be strong, smart, and bold<sup>SM</sup>. With local roots dating to 1864 and national status in the US since 1945, Girls Inc. has responded to the changing needs of girls and their communities through research-based programs and advocacy that empower girls to reach their full potential and to understand, value, and assert their rights.

**Girls Inc.** programs focus on science, math, and technology, health and sexuality, economic and financial literacy, sports skills, leadership and advocacy, and media literacy for girls ages 6 to 18 throughout the United States and in Canada. While our goal is to reach all girls, we recognize that girls in at-risk communities have an even greater need for our programs. Of those we serve, 76 percent are girls of color and 70 percent come from families earning \$25,000 or less. More than half are from single-parent households, most of which are headed by women.

**Girls Inc.** in 2004 reached nearly 800,000 girls through Girls Inc. affiliates, our website, and educational products. Guided by our vision of empowered girls and an equitable society, Girls Inc. is committed to reaching millions more girls through its programs and public education efforts.

**The National Resource Center (NRC)** is the organization's research, program development, national services, and training site. Research and evaluation conducted by the NRC provide the foundation for Girls Inc. programs. The NRC also responds to requests for information on girls' issues and distributes Girls Inc. publications.

**Girls Inc.** informs policy makers about girls' needs locally and nationally. The organization educates the media about critical issues facing girls. In addition, the organization teaches girls how to advocate for themselves and their communities, using their voices to promote positive change.

**Girls Inc.** leadership focuses on developing innovative ways to leverage our most valuable asset – acknowledged expertise as the nation's premiere program provider and advocate for girls. Our leaders include Janice L. Warne, Chair of the National Board; Joyce M. Roché, President and CEO; and Donna Brace Ogilvie, Distinguished Chair.

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