

## Not a healthy state for all Latinos in the US

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Where Latinos are born and their immigration status affect the quality of health care they receive in the US, according to Professor Michael Rodríguez and colleagues from the UCLA Department of Family Medicine and the Network for Multicultural Research on Health and Healthcare based in Los Angeles, California. New information from this just-released study highlights the need for improved health systems for immigrants - documented or undocumented, US-born or foreign-born. Findings are published online this week in the *Journal of General Internal Medicine*, published by Springer.

Latinos are one of the fastest growing populations in the US. To date, most of the research on quality of health care has focused on the general Latino population. For the first time, Rodríguez and the team's work looks at differences by place of birth and immigration status in this group.

Perceived quality of health care is important because how patients rate the quality of care they receive influences their health outcomes. When patients rate their health care as excellent or good, they are more likely to stick to treatment programs and to be motivated to manage their health problems.

The authors analyzed data from the 2007 Pew Hispanic Center/Robert Wood Johnson Foundation Latino Health Survey - a nationally representative telephone survey of more than 4,000 Latino adults in the US. They looked at the differences in perceived quality of care, receipt of preventive care, and usual source of health care among US-born Latinos, foreign-born Latino citizens, Latino permanent residents and undocumented Latinos.

The study found that perceived quality of care is different by place of birth and immigration status. Compared to US-born Latinos, undocumented Latinos were less likely to have health insurance, had the lowest levels of usual source of care, blood pressure and cholesterol checks and were less likely to report excellent or good health care in

the past year. Undocumented Latinos were also the most likely group to report receiving no health information from their doctor in the past year. Forty-five percent of undocumented Latinos believed they received poor quality of care because they were unable to pay, 39 percent linked poor care to their ethnic background, and 48 percent thought they received poor care because of their accent.

The authors conclude: "These findings help increase our understanding of the diversity among Latinos and why reporting results by immigration status is important. Policies supporting increased access to affordable, culturally and linguistically competent services could be beneficial to improve quality of health care among Latinos." These findings have direct implications for the health care debate as policies that leave the undocumented out and possibly increase barriers to health care will likely have negative consequences for the health care and health of Latinos.

More information: Rodriguez M et al (2009). Perceived Quality of Care, Receipt of Preventive Care, and Usual Source of Health Care among Undocumented and other Latinos. *J Gen Intern Med.* DOI 10.1007/s11606-009-1098-2

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