

Understanding the “Latino Paradox”

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- ① Background
- ② Main results regarding the “Latino paradox”
- ③ Recent developments
- ④ Multi-national approach
- ⑤ Conclusion

- **The “Latino Paradox” refers to results indicating lower mortality in the Latino population compared to that of the white population despite the much lower socioeconomic status of Latinos**
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 - low income, low levels of education, high prop in unskilled occupations
- **this pattern is also referred to as the “Latino”, “Hispanic”, or “epidemiological paradox”**

- **The Latino population has higher life expectancy at almost every age than non-Latino Whites in the most recent data (Arias 2010)**

- **This Latino mortality advantage has persisted over time**

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- **It is most pronounced among certain nationalities and regions (Mexicans, Central Americans, and South Americans), middle and older age-groups, and first-generation immigrants**

The main explanations for the Latino mortality advantage are:

- ① health-related migration to and from the United States**
- ② social and cultural protection mechanisms**
- ③ availability of extensive social networks in the United States**

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- 1 obesity: > obesity levels than Whites**
- 2 diabetes: > rates of morbidity & mortality**
- 3 disability: > rates for foreign-born and U.S.-born Latinos**
- 4 health declines associated with migration**
- 5 exposure to stressors: life events and psychosocial factors**
- 6 physiological dysfunction**

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- the health of new immigrants (from Mexico, Central America, and South America)**
- changes in health-related behaviors (e.g. smoking and diet) in the sending countries**

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- ① compare migrants interviewed in the US (e.g., NHIS) with nonmigrant peers in sending nations**
- ② create counterfactuals: what rates in outcome X immigrants would have exhibited**
 - had they adopted the behavior of U.S.-born non-Hispanic whites
 - had they adopted the rates of nonmigrants peers

Recent work on multinational approaches:

- **Study of migrants height and smoking behavior among US immigrants from: India, China, Philippines, Mexico, and Dominican Republic using the NHIS and the World Health Survey (Riosmena et al. 2016)**
- **Study of migrants metabolic syndrome among US immigrants from Mexico using NHANES and a National Health Survey in Mexico (Beltrán-Sánchez et al. 2016)**

Nationally representative surveys in Latin American countries are becoming more common

- 1 Mexico: Mexican Health & Aging Study; Mexican Family Life Survey**
- 2 Brazil: Brazilian Longitudinal Study of Aging**
- 3 Costa Rica: Costa Rican Longevity and Healthy Aging Study (CRELES)**
- 4 Puerto Rico: Puerto Rican Elderly Health Conditions (PREHCO)**
- 5 World Health Surveys**

- **We need to make use of binational studies (or multinational) to clarifying some of the “paradoxical” nature of the Latino paradox**
- **We need to move beyond simple, linear, unidimensional studies, and negative duration and “acculturation” “effects” if we want to better understand the underlying mechanisms of these effects (Riosmenta et al. 2016)**

Thank you!
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