

Sociodemographic Profile of Latinos in the United States

The issue

In 2015, more than 56.5 million Latinos lived in the United States according to the U.S. Census Bureau.¹ In several states, Latinos are the largest ethnic group. Projections estimate that by 2050, Latinos will account for 29% of the U.S. population.²

Even though Latinos represent an important portion of the U.S. population, they are constantly found in socially vulnerable conditions, marginalized, and have limited or no access to health insurance and care. This is due to the disproportionate concentration of Latinos in low-wage jobs that tend to have no benefits and are highly risky, along with other factors such as socioeconomic status, language, culture, etc. Securing the well-being and health of Latinos is essential for the present and future welfare of the U.S.

The population

- Latinos accounted for 17.6% of the U.S. population in 2015.¹
- More than 35.5 million people in the United States were of Mexican heritage, representing 64.4% of all Latinos in the country.³
- It is estimated that around 19.5 million Latinos in the U.S. are foreign-born, which represents 34.5% of all Latinos living in the U.S. and 6.1% of the general population in 2015.³

Geographic spread

- In 2015, nine U.S. states had more than 1 million Latino residents.³
- The states with the highest percentage of Latinos in 2015 were: New Mexico (48%), California (39%), Texas (39%), Arizona (31%), Nevada (28%) and Florida (25%).³

Increase in geographic diversity

- The majority of the Latino population is still concentrated in six states, but there has been a geographic diversification in recent years. For instance, from 2000 to 2014, the states which had the highest Latino population growth were: South Dakota (189.9%), Tennessee (175.9%), South Carolina (172.3%), Alabama (163.7%), and Kentucky (154.2%).⁵
- The Latino population is projected to increase from 55 million in 2014 to 119 million in 2060, an increase of 115 percent. By 2060, Latinos are projected to be a quarter of the total U.S. population.¹²

Economic situation

- In 2014, the median income for Latino families was \$42,491, while the median income for non-Latino whites was \$60,256.⁶
- In 2015, Latinos earned considerably lower incomes compared to non-Latino whites. The median weekly income for Latino men in 2015 was of \$631, compared to \$920 for white men.⁷
- For Latina women the median weekly income was \$566, while for white women the median was \$743.⁷
- 23.6% of Latinos were living in poverty in 2014 compared to 10.1% of non-Latino whites.⁶

- Latin American immigrants that have resided 10 years or less in the U.S. experience higher poverty rates: 38.8% in the Mexican population, 42.4% in the Central American, and 24.8% in the South American, compared to 19.5% in the non-Latino white population. These rates decrease with time of residency but the contrast with non-Latino whites persists at all levels.⁴

Workforce participation

Men

- Latino men have high participation rates in the workforce (92%).⁴
- 27% of Latino men are employed in raw resource extraction, construction, or maintenance, compared with 18% of white men, 12% of black men and 5% of Asian men.⁷

Women

- 90% participation rate in the workforce.⁴
- 29% of Latinas work in education or health services.⁷

Health conditions

Minors (under 18 years)

- In 2014, 76.5% of all Latino children reported very good or excellent health, while 28.8% reported having regular or poor health.¹⁰
- The main causes of death for infants (under 1 year) in 2014 were: congenital malformations, short gestation-related disorders, and other pregnancy-related complications and disorders.⁸
- The main causes of death for all Latino children age 1-19 were: accidental injuries, cancer, assault, and intentional self-harm (suicide).⁸

Adults (over 18 years)

- In the year 2013, Latinos showed a 24% lower all-cause mortality rate than whites. Cause-specific, mortality rates for Latinos decreased in nine of the 15 leading causes of death, but were higher for Latinos than whites for diabetes (+51%), chronic liver disease and cirrhosis (+48%), hypertension (+8%), and homicide (+96%).⁹
- Among Mexicans over 18 with fewer than ten years of U.S. residence, six out of ten suffer from overweight or obesity, while among those resident in the U.S. for over ten years, the rate increases to eight out of ten. This pattern is reproduced among Central and South Americans as well.⁴
- In 2015, 52.5% of Latino adults claimed to be in excellent or very good health, while 15.8% reported that they had regular or poor health.¹⁰
- In 2015, among the most common chronic disorders in Latinos were: arthritis (14.9%), diabetes (12.2%), hypertension (23%), and heart disease (8.2%).¹⁰
- In 2014, the leading mortality causes in Latino adults were cancer, heart-related afflictions, and accidental injuries.⁸

Health insurance

- Latinos are the most vulnerable group in terms of not having access to health insurance. The uninsured rate in 2015 for Latinos between 18 and 64 years of age was 28.3%, compared to 8.7% for non-Hispanic whites.¹³
- This scenario shows that the Latino population is in a particularly vulnerable situation when it comes to health care, by having lower access to medical care, services and insurance, and by reporting poor levels of self-perceived health.
- Ethnic origin and migratory status are clear and relevant factors for social differentiation, marginalization and health vulnerability. This reflects a larger issue rooted in a structural context that needs to be addressed from different fronts.¹¹

Recommendations for Public Policy

Latinos represent the largest and fastest-growing ethnic group in the United States. Given their population size, it is crucial for the future of the U.S. to address the health disparities that prevail among Latinos. Even though Latinos have high rates of participation in the workforce, they lack appropriate access to healthcare and health services. If these disparities in access to healthcare continue, they will evolve into larger issues with negative effects on the U.S. future. These disparities are the result of many factors that prevent Latinos from having access to emergency and preventive health services. That is why it is necessary to:

- Increase access to preventive and emergency services.
- Increase the number of health care professionals capable of providing culturally and linguistically adequate services.
- Increase the number of non-traditional information dissemination places such as mobile clinics, in-work clinics, and health windows (Ventanillas de Salud) of the Latin American consulates in the U.S.
- Ensure that all Latinos, regardless of migratory status, have access to basic health care services, which is a fundamental human right.

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