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THE REPRODUCTIVE HEALTH OF LATINA IMMIGRANTS

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Introduction

Over the past 20 years, the United States has experienced one of the largest waves of immigration in its history. Unlike the early 1900s, when the majority of immigrants came from Europe, the bulk of immigrants in the United States in 2000 were born in Latin America.¹ It is estimated that 40% of Latinos in the United States are foreign born.²

Without a doubt, Latinos are the fastest growing minority group in the U.S. Latinas already account for one in every seven U.S. women of reproductive age.³ As a result of the growing number of Latinas and their contribution to the overall health of the nation, the health status and needs of Latina immigrants should be a matter of great concern to advocates and policy-makers.

Barriers to Access

Several studies indicate that Latina immigrants are less likely to receive adequate reproductive health care, including annual Pap smears, contraceptives, HIV treatment, and sex education, than white women. Immigrant women are less likely to receive appropriate reproductive health care as a result of significant barriers. Specifically, Latina immigrants often lack access to health care coverage, basic information, and culturally and linguistically appropriate services.

Health Insurance Coverage and Socioeconomic Conditions

Lack of health insurance and overall poverty are significant obstacles that may jeopardize the reproductive health and well-being of Latina immigrants. Nearly 32% of all immigrants are uninsured, compared to only 12% of those who are U.S.-born.⁴ In fact, low-income Latinas are less likely than low-income African-American and white women to have health insurance; 43% of low-income Latinas were uninsured in 2002, in contrast with 25% of low-income whites and 26% of low-income African-Americans.⁵ Latina immigrants who lack health insurance coverage are more likely to delay treatment, not fill prescriptions and go without important preventative medical procedures such as a Pap smear.

Access to health insurance often depends on two key factors—employment and socioeconomic conditions. However, according to studies, Latina immigrants are more likely than U.S.-born individuals to be uninsured even when taking a number of factors into account, such as employment, education and health status. Many Latina immigrant workers do not have employer-based coverage because they work in industries that do not provide health insurance. Low-income and unemployed Latina immigrants may not know that they are entitled to publicly funded health coverage or they may fear that their immigration status would be jeopardized if they seek health care.

Medicaid

Medicaid provides low-income women with funding for necessary reproductive health care services, such as family planning, prenatal care and testing for sexually transmitted infections (STIs). However, eligibility varies across states and is often linked to stringent requirements. Thus, many low-income women do not qualify for Medicaid and medical providers are often reluctant to accept Medicaid patients.⁶ As a result of the 1996 Personal Responsibility and Work Opportunity

Reconciliation Act (PRWORA), Latina immigrant women face even more barriers to accessing Medicaid benefits. Under PRWORA, states are restricted from using federal funds to provide Medicaid coverage for immigrants who have resided in the U.S. for less than five years. Not surprisingly, studies have found that Latina immigrants with less than five years in the U.S. display significantly higher rates of non-insurance.

Lack of health insurance among Latina immigrants is arguably the result of restrictive Medicaid eligibility rules. By restricting eligibility in this arbitrary manner, the federal government is currently limiting Latina immigrants' reproductive health choices and preventing low-income Latina immigrants from receiving appropriate and needed care.

Information and Education

A high percentage of Latina immigrants who reside in the U.S. are natives of developing countries. These women come to the U.S. to escape poverty in hopes of improving their families' futures. Some Latina immigrants have only a few years of formal education. Lack of formal education has been found to be associated with poverty, unemployment, and limited basic health knowledge.⁷ One study found that lack of basic health education and information among Latina immigrants may deter them from using available medical services.⁸ Community health education programs must be emphasized and incorporated into the reproductive health agenda in order to improve Latina immigrants' understanding of the health care system and its services. Health education and information may potentially help Latinas play a more active role in their reproductive health care.

Cultural and Linguistic Barriers

Language and cultural differences between Latina immigrants with limited English proficiency and their providers is another factor that can have a detrimental effect on women seeking reproductive health care. Only 5% of U.S. physicians and 2% of nurses are Latino/a.⁹ Many clinicians do not speak Spanish and do not have on-site interpreters. Studies have found that, as a result, some Latina immigrants are forced to use their children as translators, suffer physical harm from misinformation or a misdiagnosis, and are often not satisfied with their visits to reproductive health care providers.¹⁰ A provider's ability to communicate in a culturally and linguistically appropriate is especially important in the reproductive health care context.

Statistics on Health Disparities

Latina Immigrants and HIV/AIDS

HIV/AIDS is one of the leading causes of death for Latinas. Moreover, Latina immigrants living with HIV/AIDS in the United States are disproportionately poor and lack the necessary resources to obtain proper treatment.¹¹ Experts believe that Latina immigrants new to the U.S. lack knowledge about reproductive health issues and are less likely to negotiate condom/contraceptive use, making them extremely vulnerable to HIV/AIDS infection.¹²

- Among women, the AIDS case rate for Latinas is more than 5 times the rate for white women (12.9 per 100,000 compared to 2.4).¹³
- Latinas represent 20% of women diagnosed with AIDS in the U.S.¹⁴
- In 1991, Latinas represented 15% of new AIDS cases reported among all Latinos in that year: by 2001, Latinas represented almost one-quarter (23%) of new cases reported among all Latinos.¹⁵

- AIDS cases among Latinos vary by place of birth. Latinos born in the U.S. account for 43% of AIDS cases reported among Latinos, followed by Latinos born in Puerto Rico (22%) and Mexico (14%).**16**
- About one quarter of Latinos with HIV/ AIDS (24%) are uninsured compared to 17% of whites.**17**
- Migrant Latina immigrants are at high risk for HIV in part due to the risky behaviors of their male sex partners, which include IV drug use, sex with prostitutes without condoms, and sex between men and needle sharing.**18**

One study found that 75% of female migrant Latina immigrants reported never carrying condoms because they believed that carrying a condom would be perceived as a sign of promiscuity.**19**

Latina Immigrants and Cervical Cancer

Cervical cancer is almost 100% preventable through detection and treatment of precancerous cells. However, cervical cancer survival rates among Latinas are relatively poor. Cervical cancer screening is very low among Latina immigrants. **20** This is due to the lack of access to preventive health services, concerns about cost, and limited knowledge about the importance of a Pap smear.**21** Latina immigrants are often diagnosed with cervical cancer, which is caused by human papillomavirus (HPV), at the late stages of cancer.

- The cervical cancer incidence rate is twice as high among Latinas as non-Latina whites.**22**
- A study found that low-income Latina immigrants displayed significantly less knowledge regarding cervical cancer and were less likely to receive a Pap smear than low-income non-Latinas.**23**

Latina Immigrants: Sex Education and Teen Pregnancy

Reproductive health knowledge is low among Latina immigrants regardless of sexual experience or age. Studies have demonstrated that the lack of reproductive health knowledge is primarily due to a combination of low educational attainment and lack of sex education among Latina immigrants.**24** Studies have also indicated that Latino immigrant families choose not to talk to their children about premarital sex.**25** Not surprisingly, pregnancy rates are consistently high among Latina teens.

- Latina immigrant teens currently have the highest birth rate in the U.S., with teens of Mexican origin having the highest rate and teens of Cuban origin having the lowest rate.**26**
- Latino immigrants are more likely to talk about parenting responsibilities with their children than about premarital sex.**27**
- The birth rate for Latina teens ages 15 to 17 was more than twice as high as the birth rate for all teens ages 15 to 17 (49.7 versus 22.4), and the birth rate for older Latina teens (aged 18 to 19) was more than 85% higher than the birth rate for all teens ages 18 to 19 (131.9 versus 70.8).**28**
- In 2003, only 12% of Latina high school females reported using birth control pills during their most recent sexual experience, compared with 21% of high school females overall.**29**

Conclusion

In order to reduce the reproductive health disparities among Latina immigrants, including the incidence of HIV/AIDS, cervical cancer and teen pregnancy, Latina immigrants need increased access to reproductive health care services, reproductive health information, and culturally and linguistically appropriate services. Advocates and policymakers concerned about Latina immigrants' reproductive health disparities must support national initiatives to promote reproductive health equity through policy and advocacy, public education, research and service delivery.

Although reducing reproductive health disparities among Latina immigrants is a challenging goal, it represents an opportunity to improve the health of one of the largest ethnic groups in the United States.

For more information on the Reproductive Health of Latina Immigrants, please visit www.LatinaInstitute.org