

Latinx Community Survey Evidence for California Healthcare Bills

Mario Alberto V. Espinoza-Kulick, University of California, Santa Barbara

Racism is an acknowledged public health crisis – but California stands to be a leader among states in addressing the debilitating health effects of racism on Latinx individuals and communities. While expanding Medi-Cal eligibility regardless of age or documentation status would be the highest impact intervention, other effective actions include expanding medical interpretation services; training providers in culturally competent, trauma-informed care; and simply increasing capacity through the creation of a California Medicine Scholars Program.

IS THERE EVIDENCE THAT RACISM AFFECTS THE HEALTH OF LATINX IMMIGRANTS?



Yes. I surveyed over **200 Latinx immigrant community members** and advocates on the central coast of California. They were vocal about the impacts of inequitable access to and quality of health care, and the way discrimination contributed to their health outcomes.

HOW DOES A MEDI-CAL EXPANSION FOR UNDOCUMENTED PEOPLE BENEFIT CALIFORNIA COMMUNITIES?

Including eligible undocumented individuals in **Medi-Cal** coverage will:



Allow more low-income Californians to access necessary health care



Establish trust between service providers and families who would otherwise be wary of interacting with authority figures because of their citizenship status

Lack of coverage contributes to higher rates of:



Needless loss of life



Costly emergency services

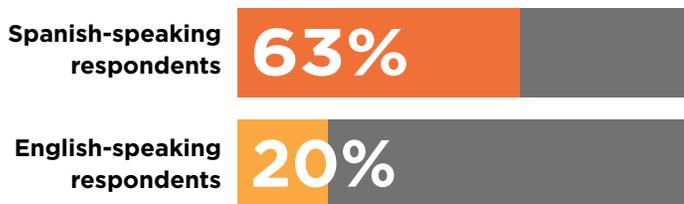


Preventable illness

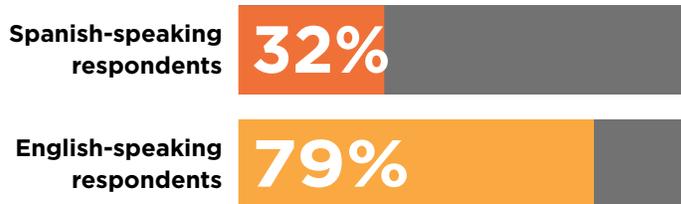
HOW DO LANGUAGE BARRIERS CONTRIBUTE TO POOR HEALTH OUTCOMES?

Language barriers sometimes kept respondents from accessing health care or contributed to them receiving lower quality treatment.

Spanish-speaking respondents were more likely to indicate their health was **“Fair” (63%)**, compared to English-speaking respondents **(20%)**.



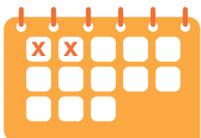
79% of English-speakers rated their health as **“Good”** or **“Excellent,”** while **32%** of Spanish-speakers ranked their overall health positively.



Legislatures should fund interpretation services, employing Indigenous language speakers in addition to English and Spanish speakers – especially in rural areas where it’s most needed.

WHAT INTERVENTIONS DIRECTLY ADDRESS THE EFFECTS OF RACISM ON HEALTH, IN ADDITION TO THOSE THAT EXPAND HEALTHCARE ACCESS?

0.76+ Direct experiences of racism were significantly associated with a **0.76-point increase on a 3-point scale** of anxiety scores.



Respondents experienced anxiety symptoms **“nearly half the days”** within the past two weeks.

Funding trauma-informed care training for clinical staff could untangle the effects of discrimination-based anxiety on Latinx patients.

HOW CAN HEALTHCARE WORKFORCE DEVELOPMENT EFFORTS DECREASE DISPARITIES IN ACCESS TO CARE?

The California Medicine Scholars Program proposed in SB-40 would allow for regionally-based healthcare workforce development strategies that grow the provider base in underserved communities.



46% of respondents said they had gone without health care in the past three months because “appointments were not available.” Having more healthcare workers and leaders who are from the communities they serve will contribute to closing equity gaps in care.