

# LATINOS IN CENTRAL OREGON

A COMMUNITY PROFILE IN STATISTICS & STORIES

Health



LATINO COMMUNITY ASSOCIATION  
OCTOBER 2020



# TABLE OF CONTENTS

<b>2</b>	AGRADECIMIENTOS
<b>3</b>	INTRODUCTION
<b>4</b>	EXECUTIVE SUMMARY
<b>9</b>	<i>AMIGA/VECINA PROFILE - ELISA</i>
<b>10</b>	POPULATION
<b>18</b>	<i>AMIGO/VECINO PROFILE - LUIS ALBERTO ROBLES</i>
<b>19</b>	INCOME AND OTHER ECONOMIC INDICATORS
<b>24</b>	<i>AMIGA/VECINA PROFILE - LORENA BARRERA</i>
<b>25</b>	<i>AMIGO/VECINO PROFILE - ANTONIO</i>
<b>26</b>	HEALTH
<b>36</b>	<i>AMIGA/VECINA PROFILE - BLANCA REYNOSO</i>
<b>37</b>	EDUCATION
<b>44</b>	<i>AMIGO/VECINO PROFILE - ROBERTO IRICHE</i>
<b>45</b>	<i>AMIGA/VECINA PROFILE - MARIA TERESA MENDOZA</i>
<b>46</b>	HOUSING
<b>51</b>	<i>AMIGA/VECINA PROFILE - DELIA FELICIANO</i>
<b>52</b>	CONCLUSION AND INVITATION
<b>53</b>	APPENDIX
<b>54</b>	SOURCES FOR FURTHER READING

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## HEALTH

In this section, we examine access to health care for Latinos in Central Oregon and how Latinos appear to be doing based on key indicators for physical and mental/emotional health. Gaps in both statewide and regional data on health indicators make it difficult to compare the health issues facing our Latinos in Central Oregon with Latinos statewide.

### ACCESSING HEALTH CARE

Statewide, nearly one third of Oregon Latino adults lacked health insurance in 2014, according to the Oregon Community Foundation (2016) citing census data from 2014. In Central Oregon at that time, the estimated number of uninsured Latinos ranged from 8.7 percent in Crook County to 39.6 percent in Deschutes County. Fortunately, the Affordable Care Act was passed in 2014. As a result, in 2018, the picture looked better in Central Oregon, although the number of uninsured Latinos is still too high and there was a pronounced gap in coverage between Latino and white residents.



Kemple Clinic dental hygienist with boy at LCA clinic in Bend.

Paying for health care can be difficult for many Latinos in Central Oregon. If they work in jobs that do not offer health insurance or are self-employed, they may earn too much to qualify for Medicaid (Oregon Health Plan or OHP). Some may be able to buy insurance on the marketplace created by the Affordable Care Act (ACA). However, those who lack citizenship or permanent residency do not qualify for the ACA program or for OHP (except on an emergency basis).

Latinos who do not qualify for state or federal insurance programs turn to non-profit clinics for their health care. Mosaic Medical in all three Central Oregon counties will see patients on a sliding-scale fee basis. Latinos currently make up nearly 20 percent of Mosaic Medical's 21,000+ patients across all three counties.

**Table 15**  
**Percentage of Central Oregonians Lacking Health Insurance**  
**by Ethnicity and County 2014-2018**

<b>County</b>	<b>White</b>	<b>Latino</b>
Crook	7.9%	13.2%
Deschutes	8.3%	20.3%
Jefferson	8.3%	16.5%

Source: U.S. Census ACS 2014-2018, accessed from Communities Reporter Tool, Jan. 29, 2020.

In Bend, a non-profit clinic operated by Volunteers in Medicine (VIM) provides mostly free care to uninsured adults from throughout the tri-county area. More than 80 percent of VIM's 1,000+ patients are Latino immigrants. To access VIM's services, patients in Crook and Jefferson counties must drive to Bend. This limits access to care and comes at a significant cost in transportation and time, including lost wages for some.

## PHYSICAL HEALTH INDICATORS: LIFE EXPECTANCY

Life expectancy statewide for Latinos averages 85.1 years, while white residents have an average life expectancy of 79.6 years. The average life expectancy for Central Oregon Latinos is slightly less, at 84.6 years (Oregon Public Health Assessment Tool, OPHAT).

**Table 16**

Life expectancy (in years) at birth by race and ethnicity, OPHAT, 2017					
	Oregon	Crook	Deschutes	Jefferson	Central Oregon
<b>Total</b>	79.6	78.9	81.3	78.7	80.7
<b>American Indian/Alaska Native</b>	77.4	--	76.0	69.8	72.0
<b>Non-Hispanic</b>					
<b>Hispanic or Latino</b>	85.1	--	84.6	81.9	84.6
<b>White Non-Hispanic</b>	79.6	79.3	81.5	80.0	81.1
	Significantly lower than geography-specific total life expectancy				
	Significantly higher than geography-specific total life expectancy				

## CANCER MORTALITY RATE

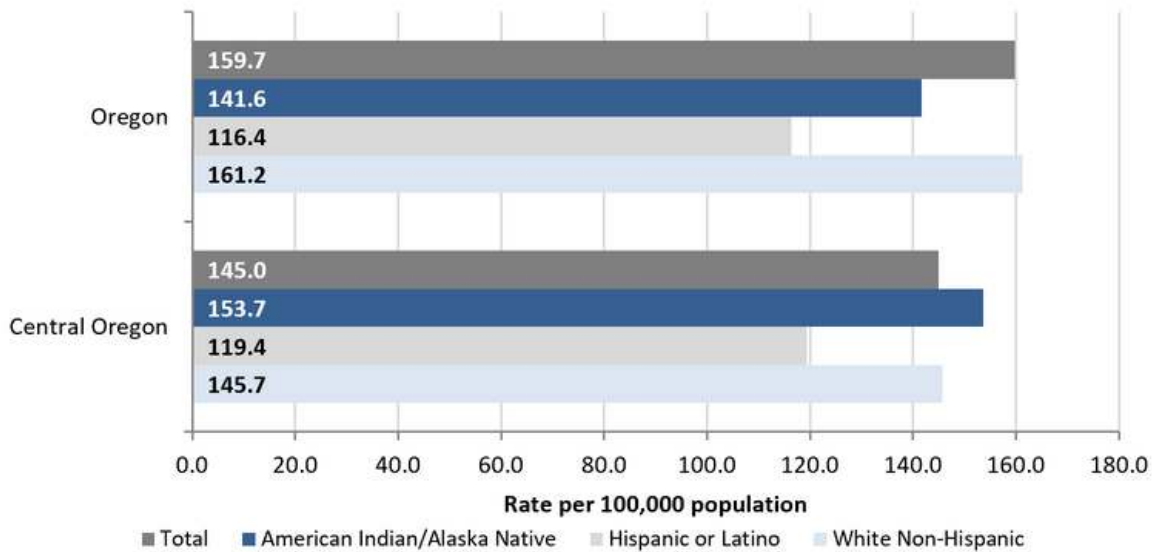
The statewide average (for the total population) for cancer mortality is 159.7 per 100,000 residents. Latinos fare better in this metric, posting 116.4 cancer deaths per 100,000 population in Oregon, and 119.4 in Central Oregon. The lower rate for Latinos statewide could reflect more health care resources in the larger population centers of the Willamette Valley.

## PEOPLE LIVING WITH DISABILITIES

Significantly fewer Latinos in Oregon, and in Central Oregon, live with disabilities than white residents. While 15.9 percent of white Oregonians have disabilities, only 8.7 percent of Latinos experience this challenge. On a county-by-county basis, the pattern is similar.



**Table 17**  
**Age-adjusted cancer mortality rate per 100,000 population by race and ethnicity,**  
**OPHAT, 2013-2017**



\*\*Significantly lower than total rate

**Table 18**

Percent of the population in Oregon and Central Oregon counties living with a disability, ACS 5-year estimates, 2011-2015				
	Oregon	Crook	Deschutes	Jefferson
Percent of total, non-institutionalized population with a disability	14.7%	21.6%	12.8%	16.5%
Percent with a disability, by ethnicity/race				
White, non-Hispanic	15.9%	22.6%	13.5%	20.9%
Hispanic (of any race)	8.7%	9.8%	6.3%	7.5%

## FERTILITY AND BIRTH STATISTICS

When higher fertility rates, and particularly births among teen mothers, are recorded among people of color, this information can become the impetus for stereotyping and judgment by the majority culture. We certainly do not see it this way. However, it is an important indicator to track. As America's rate of fertility levels off or declines, and the population ages and retires, communities with higher fertility rates can replace the workers who are leaving the labor market. This can make a community stronger if we embrace and care for young mothers and their children. But higher fertility rates might, to some degree, reflect a higher number of unintended pregnancies. This might point to limitations on reproductive freedom or less access to health care for Latina women. The table below contrasts fertility rates between white and Latina women statewide and in Central Oregon.

Table 19

**Fertility rate per 1,000 women aged 15-44 by race and ethnicity, Central Oregon and Oregon, OPHAT, 2016-2017.**

	American Indian or Alaska Native, Non-Hispanic	Hispanic or Latino	White, Non-Hispanic
Crook	Unreliable estimate	79.1	71.1
Deschutes	32.1	69.6	52.7
Jefferson	77.4	70.4	65.4
Oregon	49.9	66.7	52.6

Crook County estimate for American Indian or Alaska Natives is statistically unreliable due to a small number of individuals in this category

Significantly higher than Oregon race- or ethnicity-specific rate

Significantly lower than Oregon race- or ethnicity-specific rate

Teen pregnancy, as well as actual births to teen and adult mothers, provides additional perspective. Among Latinas statewide, teen pregnancy (for ages 15-17) is more than double the rate for white teens. In Central Oregon, teen pregnancy in Deschutes County among Latinas is slightly below the statewide average for Latinas. In Crook and Jefferson counties, however, the rate is significantly higher than the statewide average for Latinas.

Table 20

**Pregnancy rates for teens age 15-17 years and young adults 18-19 years per 1,000 females, by race/ethnicity, Central Oregon and Oregon, OPHAT (2015-2017)**

	Age 15-17			Age 18-19		
	American Indian or Alaska Native, NH	Hispanic	White NH	American Indian or Alaska Native, NH	Hispanic	White NH
Crook	-	38.7	13.9	-	98.8	78.4
Deschutes	10.1	15.1	7.1	0.0	59.8	39.5
Jefferson	9.4	21.4	10.7	99.4	92.1	53.0
Oregon	13.5	16.7	7.7	56.0	65.1	38.6

Significantly higher than Oregon rate for the specified age group and race/ethnicity group

Although births to Latina mothers in Central Oregon represented only a fraction of the total births between 2015 and 2017, Latinas had higher birth rates than white women during this three-year period. Latinas appeared to get adequate prenatal care at rates similar to white women: more than 90 percent of mothers in both groups visited a medical provider during pregnancy.

**Table 21**  
**Births by Mother's Ethnicity 2015-2017**

	<b>Crook</b>		<b>Deschutes</b>		<b>Jefferson</b>	
<b>Total births</b>	<b>718</b>	<b>%</b>	<b>5,380</b>	<b>%</b>	<b>829</b>	<b>%</b>
White mothers	613	85	4,350	81	372	45
Latina mothers	77	11	706	13	206	25
					Native Amer 24%	
<b>Teen births, ages 15-19</b>	<b>58</b>	<b>%</b>	<b>190</b>	<b>%</b>	<b>63</b>	<b>%</b>
White mothers	46	79	125	66	16	25
Latina mothers	10	17	48	25	24	38
<b>Adequate prenatal care</b>	<b>671</b>	<b>%</b>	<b>5,174</b>	<b>%</b>	<b>744</b>	<b>%</b>
White mothers	576	94	4,190	96	345	93
Latina mothers	74	96	679	96	187	91

Source: Oregon Health Authority Center for Health Statistics for 3-year period 2015-2017

## OTHER PHYSICAL HEALTH INDICATORS

Although it represents a small data set, figures collected by Mosaic Medical clinics and Volunteers in Medicine add useful elements to the overall health picture for Latinos in Central Oregon.

In 2017, Mosaic reported:

- Spanish-speaking Latinos access team-based care (nutritionist, psychologist or pharmacist) less often than other groups.
- Spanish-speakers are more often diagnosed with obesity (18%) and diabetes (14%) than with depression (8.4%) and anxiety (5%). Non-Latinos are diagnosed more often with behavioral health issues.
- Among all Latino patients, adult females are most often diagnosed with depression (15.7%)
- Top diagnoses among Mosaic Medical's Latino patients in 2017 included:
- Hypertension – 28.21 percent of patients, up from 24.73 percent in 2015
- Diabetes – 12.11 percent of patients, up from 9.98 percent in 2015
- Asthma – 7.3 percent

At Volunteers in Medicine Clinic of the Cascades, where in 2017-2018 eighty-three percent of their patients were Latino immigrants, the top diagnoses were:

- Diabetes
- Hypertension
- High cholesterol



## EMOTIONAL AND MENTAL HEALTH INDICATORS

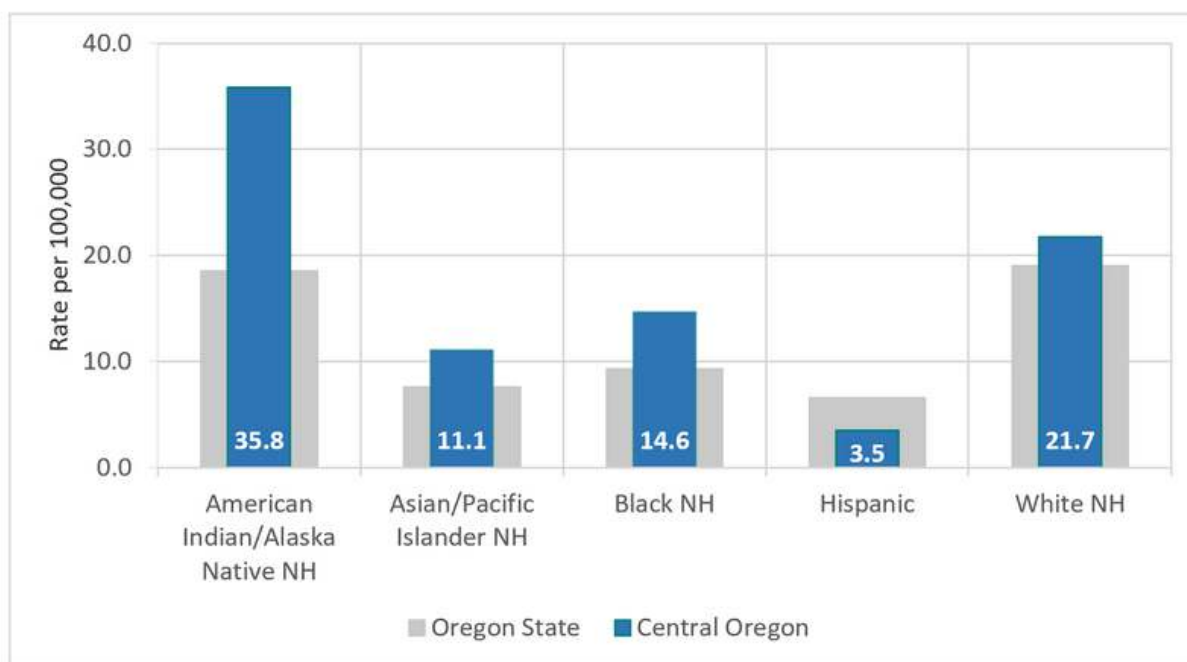
Metrics on emotional and mental health for the Latino community, at the statewide and regional scale, are not as plentiful as physical health indicators. Given the social and economic stresses Latinos experience, especially immigrants, it is critical to gather and analyze additional data in this area. Cultural norms in the Latino community might result in significant under-reporting of emotional and mental health problems.

## SUICIDE MORTALITY

According to available statewide information (OPHAT 2008-2017), the suicide rate among Latinos is dramatically lower than that of any other group, including whites, African-Americans, Native Americans and Asians/Pacific Islanders.

Table 22 shows the age-adjusted suicide mortality rate per 100,000 people is 3.5 among Latinos. This is significantly lower than the 21.7 per 100,000 people recorded for white residents.

**Table 22**  
**Age-adjusted suicide mortality rate per 100,000 population by race/ethnicity,**  
**Central Oregon and Oregon, OPHAT, 2008-2017**



## LATINO EMOTIONAL HEALTH WORK GROUP

In fall 2017, the Latino Community Association, together with multiple community partners, formed a Latino Emotional Health Work Group. They gathered data and circulated a brief report of their review of emotional health among Latinos living in Central Oregon, especially among Latino youth. The group analyzed three primary data sets and co-developed a survey to help gauge how our Latino parents are feeling following the 2016 presidential campaign and election. Here are some of the findings from this work group:

### ***Deschutes County School Wellness/Behavioral Risk Factors (2014 Student Wellness Survey)***

- The percent of Hispanic students surveyed who had seriously considered suicide in the past year was 5% higher (at 17.6%) than that of non-Hispanics.
- The percent of Hispanic students surveyed who had attempted suicide in the past year was 5% higher (at 10.5%) than that of non-Hispanics.
- The percent of Hispanic students in Deschutes County who reported being harassed at school in the past 30 days because of their race or ethnicity was almost 17% higher (at 23.6%) than non-Hispanics.



Zavier Borja founded a Central Oregon chapter of Latino Outdoors. Photo by Denise Holley

Although rates of actual suicide are lower among Latinos statewide, according to OPHAT, this survey points to a higher rate of thoughts of suicide or suicide attempts among this group of students in Deschutes County. We find that alarming.

One of the Work Group participants, Katie Hayden-Lewis, PhD, a licensed mental health professional in Bend, summarized this aspect of the group's findings:

“We clearly have a problem.” She noted that Latino students experience more thoughts of death by suicide or attempts, and higher rates of bullying or harassment than their non-Latino counterparts. “This suggests there needs to be an assertive public health strategy to reduce these incidents and increase access to help. The bullying/harassment has got to be addressed in the school system.”

Another source of data on emotional and mental health came from PacificSource, an insurance provider and Central Oregon's Coordinated Care Organization (CCO), which administers Oregon Health Plan (Medicaid) benefits in our region. Here are some of their findings:

## ***PacificSource Comparison of Behavioral Health Utilization Rates Central OR CCO Medicaid Recipients, Age 0 to 64 years, 2014-2016***

Hispanic/Latino members used behavioral health services at a lower rate per member per year than non-Hispanic/Latino members, both adults and children.

- Hispanic/Latino members used behavioral health services at a lower rate per member per year than non-Hispanic/Latino members, both adults and children.
- Even when comparing only members identified as having a severe and persistent mental illness (SPMI) or substance use disorder (SUD), utilization rates were lower among Hispanics/Latinos and Spanish-speaking members.
- If the actual need for behavioral health services in the Spanish-speaking population is not any lower than the need among English speaking members, this could suggest an unmet need in the population.
- The number of Spanish-speaking adults and children flagged as having Severe and Persistent Mental Illness (SPMI) was very small (n<35)

### **SURVEYING THE EMOTIONAL HEALTH OF OUR LATINO FAMILIES**

As mentioned previously, following the 2016 presidential campaign and national elections, the Latino Community Association (LCA) called together a handful of community partners, including specialists in behavioral and mental health, to form the Latino Emotional Health Work Group. We discussed how we believe our Latino families, especially immigrant families, were doing on an emotional level. The well-being of our school-age children and youth of color from immigrant households were of special interest and concern. We also explored strategies to make sure our Latino families feel welcome and supported here in Central Oregon.

We began sharing the challenges we were hearing family members express, both in client service settings and among group members, colleagues and neighbors. We then asked work group members to share what is already being done to support emotional health in our communities. We quickly realized we needed to gather whatever data was available to help us understand all that we could before talking about possible solutions. The problem was that not much data was available specific to Latinos, and even less specific to immigrants.

So, we developed a survey titled ¿Cómo le va? (How are you doing?). This instrument was culturally adapted from the well-established PHQ-9 Quick Depression Assessment and the GADQ Generalized Anxiety Disorder questionnaires for measuring depression, anxiety and worry. We kept it brief with just ten questions. The questions ranged from feelings about oneself to feelings toward others and one's sense of feeling welcome, as well as whether or not their children had expressed any negative experiences at school. Here are our findings from the 107 responses we received, primarily from LCA walk-in clients at our three offices in Bend, Redmond and Madras.

**Positive and encouraging signs:**

The first three questions ask about the respondent's emotional state and attitude toward herself/himself using a scale from "Very positive" to "Very negative."

- Between 80% and 90% of respondents said they felt positive or very positive emotionally. The highest feeling of well-being was toward their family.
- 64% said their feelings toward strangers was positive or very positive.

**Questions 5-10 ask to what degree the phrases in each question are true in terms of how s/he feels using a scale from "Very true" to "Not at all true."**

- 80% of respondents answered True or Very True to feeling welcome in Central Oregon. Only 5% said Not at all True.
- 76% said they believe their children feel welcome.
- 76% responded that they feel hopeful they will have a fabulous future here.

**Concerns:**

- 35% of respondents said their feelings toward strangers was something other than positive, but the majority selected "neutral" as opposed to negative.
- 48% said their children have commented that they feel bad because of the attitudes or comments of classmates.
- 60% said they spend a majority of their time worrying.

The main worries that respondents expressed in writing included:

- Immigration status and the possibility of deportation
- Economy, finances, work
- Driver's license (not being able to obtain one in Oregon)
- Bullying and racism
- Kids always being on their phones/electronic devices

Our Latino families, especially those headed by immigrant parents, are generally not accustomed to talking about personal or family matters with anyone outside their immediate family and closest friends. Mental health providers, as well as our Medicaid insurer, PacificSource, report very little use of their services by Latinos. We hope this is because there is not much need, but we highly recommend that our community partners and families focus attention on determining if there are barriers blocking Latinos from accessing these services.

## HEALTH SUMMARY

- Latinos have a slightly longer life expectancy than white residents
- Latinos have a lower mortality rate from cancer than white residents
- Fewer Latinos than white residents have health insurance
- Latinos are more likely to rely on community clinics such as Mosaic Medical and Volunteers in Medicine
- Those clinics report the top diagnoses among Latinos as hypertension, diabetes, high cholesterol and asthma
- Latinas have higher pregnancy (and teen pregnancy) rates and birth rates than white women
- Latinos have a lower suicide mortality than other groups and have fewer diagnosed cases of mental illness



Father and son at LCA picnic in Redmond. Photo by Denise Holley



# BLANCA REYNOSO

## OWNER OF REYNOSO JEWELRY, MADRAS

The sign indicates a jewelry store, but when you step inside Reynoso Jewelry, you see frilly dresses, shirts and sweatshirts hanging from the ceiling, clothing racks, and cupboards full of shoes. The jewelry counter occupies a corner near the front and customers often stop by to pay a utility bill or wire money to Mexico.



Blanca Reynoso and her husband, Israel Reynoso, opened their business in 1997, she said. “We started with a little bit of everything.”

A native of the state of Guerrero, Mexico, Blanca came to Madras from southern California in the 1980s and started second grade, she said. Her mother had family here and found work in agriculture.

When she was older, Blanca met her husband and, over the years, gave birth to four daughters. She never finished high school, because both had to work to support their growing family, but she earned her GED.

“Sometimes life isn’t fair, because we stopped studying and ended up with low salaries,” Blanca said. “Because of our poverty, we didn’t make it to college.”

Now Israel works in his own landscaping, construction, heating and cooling business while Blanca tends the store. Their two incomes allow them to give their daughters the education they missed. The two oldest daughters earned bachelor’s degrees, the third is studying for her master’s degree in psychology, and the youngest has just started high school, Blanca said with pride.

“My major goal is to finish putting my last daughter through school, something I wasn’t able to do,” she said. But she and her husband also want to build a food cart area on their property.

Because of their business income, Blanca and her husband earn too much for care under the Oregon Health Plan, but find that private health insurance is too expensive, she said. “We’re right in that middle.”

Blanca served on the Madras Chamber of Commerce board in the past, and currently serves on the Madras Redevelopment Commission. The No. 1 problem in her city is lack of housing, and the commission is looking into building homes on the outskirts of Madras, she said. “There are so many people who don’t have a place to live.”

## SOURCES FOR FURTHER READING

Links to data sources utilized for this report:

### EXECUTIVE SUMMARY

<https://oregoncf.org/community-impact/research/latinos-in-oregon-report/>  
[https://oregonencyclopedia.org/articles/hispanics\\_in\\_oregon/#.XImRVCJKjIU](https://oregonencyclopedia.org/articles/hispanics_in_oregon/#.XImRVCJKjIU)  
<https://research.newamericaneconomy.org/report/power-of-the-purse-how-hispanics-contribute-to-the-u-s-economy/>

### POPULATION

The American Community Survey (ACS) is a survey of randomly selected households the Census Bureau conducts yearly between the official 10-year Census counts. Because it is based on a sample, rather than the entire population, the ACS produces estimates. To aid data users, the Census Bureau calculates and publishes a margin of error for every estimate. For guidance on making comparisons, please visit [data.census.gov](http://data.census.gov)

### EMPLOYMENT

Estimates of Migrant and Seasonal Farmworkers 2018 update  
<https://www.ohdc.org/uploads/1/1/2/4/11243168/05-24-18-awhft-oregon-msfw-enumeration-study.pdf>

### HEALTH

Data on lack of health insurance comes from the U.S. Census American Community Survey 2014-2018, accessed from the Communities Reporter Tool on Jan. 29, 2020.  
<https://oe.oregonexplorer.info/rural/CommunitiesReporter/>

Mosaic Medical:

<file:///G:/My%20Drive/Marketing/REPORT%20%20Latinos%20in%20Central%20Oregon/HEALTH/2017%20Mosaic%20Medical%20Health%20Center%20Profile.html>

Volunteers in Medicine:

[https://www.vim-cascades.org/file\\_download/inline/39f45056-9e0c-47ad-81eb-b87b5b9e821f](https://www.vim-cascades.org/file_download/inline/39f45056-9e0c-47ad-81eb-b87b5b9e821f)

## EDUCATION

<https://www.oregon.gov/ode/educator-resources/assessment/Pages/Kindergarten-Assessment.aspx>

To view a profile and test scores for a particular school district, visit:

<https://www.ode.state.or.us/data/reportcard/reports.aspx>

<https://www.oregon.gov/ode/reports-and-data/students/Pages/Cohort-Graduation-Rate.aspx>  
Select School Year 2018-2019, Cohort Graduation Rate 2018-2019 Media File

## HOUSING

From the Regional Housing Needs Assessment, 2019, page 3

<https://coic2.org/wp-content/uploads/2019/04/housing-for-all-april-2019-materials-packet.pdf>

From the 2016-2019 Central Oregon Regional Health Improvement Plan, page 38

[https://www.deschutes.org/sites/default/files/fileattachments/health\\_services/page/1863/rhip\\_2016-2019.pdf](https://www.deschutes.org/sites/default/files/fileattachments/health_services/page/1863/rhip_2016-2019.pdf)