

Hispanic people—especially men—are less likely to see a doctor, and the reasons can be complex

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Language barriers, cultural differences and systemic health inequities are among the reasons many Latino people, particularly men, avoid doctor visits—and that could lead to dire outcomes, experts warn.

Studies have suggested that of all racial and ethnic groups in the United States, Hispanic people are least likely to seek medical care for an illness. In a 2022 Pew Research Center survey, Hispanic adults were less likely than all U.S. adults to say they had seen a health care professional within the previous year.

"Foregoing needed medical care when needed or not having access to preventive medicine can have disastrous consequences in health, even in the short term," said Dr. César Caraballo Cordovez, a postdoctoral associate at the Yale School of Medicine Center for Outcomes Research & Evaluation.

In the long term, [medical conditions](#) such as [high blood pressure](#) or diabetes can be silent for years and wreak havoc on people's health if diagnosed late, he said. High blood pressure, or hypertension, and diabetes increase the risk of heart disease and stroke.

"Early diagnosis in these conditions is important, and if you don't have a usual source of care or if you don't go to the doctor regularly, they can be missed for years," Caraballo said.

The reasons many Latino people stay away from the doctor's office are complex. Lack of insurance, cultural and [language barriers](#), cost of care and immigration status all influence why people don't go.

Research shows that men in general are less likely to visit a doctor than women, a trend that cuts across race. In a 2022 Cleveland Clinic survey of about 1,000 adult men, 53% of white men said they don't get regular health screenings. For non-white men, it was 63%.

Diana Sanchez, chair of the psychology department at Rutgers University in New Jersey, said her research shows that men with more traditional views of masculinity tend to avoid routine medical screenings to appear "brave and self-sufficient." This strong sense of masculinity, or "machismo," is ingrained in Latino culture, she said.

"Given the sort of emphasis on machismo culture in the Latinx community," Sanchez said, "it's not surprising that you might see Latino men particularly disinclined to seek medical care. ... They see it as a sign of weakness or vulnerability."

Regardless of gender, there is evidence that a health care professional's race and ethnicity matter to Latino patients. They respond better when they see a doctor of a similar background, Sanchez said. But the number of Hispanic physicians has not kept pace with the rapid growth of the Latino population, according to the Association of American Medical Colleges. While Hispanic people make up nearly 19% of the U.S. population, AAMC data shows about 7% of physicians identified as Hispanic in 2021.

Language also can be a barrier, Sanchez said. Spanish is spoken in 13% of U.S. households, census data show. The number of Spanish-speaking physicians varies, but a study published last year in the *Journal of the American Board of Family Medicine* showed 22% of family physicians reported providing care in Spanish.

"So, if we're talking about a Latino community whose primary language is Spanish, identifying a doctor who they can easily communicate with might also be a challenge," Sanchez said.

Even taking time off work can pose difficulties. "Depending on whether people are underemployed or have other issues with the workplace that they're in, where they don't get paid if they leave, for example, people

can't afford literally to go to the doctor or take the time to go to the doctor," she said. "And of course, not having insurance is a huge barrier because medical expenses are so high."

Caraballo coauthored a 2021 study published in *JAMA* that showed lack of insurance prevailed as a major obstacle to health care among Hispanic people. Latino people "persistently had the largest prevalence of lack of health insurance," he said. "It was significantly reduced after 2010 with the Affordable Care Act, but still in 2018 it was three times higher than that of white people."

Other studies have found Spanish-speaking immigrants without legal U.S. status face additional obstacles to seeking preventive medical care. As a result, many of them depend on visits to the emergency room.

Regardless of the reason, experts say the reluctance to see a doctor could spell trouble because of a higher risk for certain chronic health problems among Latinos, such as obesity, diabetes and hypertension.

Caraballo said it is imperative to improve access to affordable care and insurance for Latino people. Census estimates suggest the Hispanic population could make up 28% of the U.S. population by 2060.

Establishing high-quality clinics and doctor's offices staffed by Spanish-speaking personnel in Latino neighborhoods can go a long way toward providing [medical care](#) and education about preventive health, he said.

Some Latino communities already are reaching out to recent immigrants through community health workers who serve as liaisons between residents and the health care system, Caraballo said.

"They could have profound impacts within communities by advocating for [preventive medicine](#) or maintenance of good health or healthy

lifestyles," he said. "Those would be magnificent strategies to improve the [health](#) of the Latino and Hispanic population."

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