The members of the Umatilla County Community Health Partnership are pleased to present the 2012 Hispanic Community Health Assessment Report of our community. Last year this partnership was able to bring to the residents of our county the first comprehensive county-wide community health assessment of its kind. Every effort had been made to assure that this report contained valid and reliable data. Yet, our Hispanic Community, which represents approximately a quarter of our population, was not well represented in this survey.

We presented the 2011 report to residents in two community wide events held in Pendleton and Hermiston. Feedback from these meetings provided the Partnership two mandates: First, they wanted to make sure that we came up with an implementation plan to address the needs identified in the survey. Second, we were charged with identifying the needs of our Hispanic Community. I am proud to say that over the past year our community partners have worked hard to deliver on these issues.

The Partnership formed a Hispanic Community Health Assessment Work Group last August to discuss how we could start the process of the assessment by the fall of 2012. Agencies represented in this work group included: Good Shepherd Health Services, Migrant Health Promotion Inc., Oregon Child Development Coalition, St. Anthony Hospital, Umatilla County Public Health, and Yakima Valley Farm Workers Clinics (Hermiston and Walla Walla). Before the meeting was complete, both the funding of the project and how to deal with the issues that hindered Hispanic participation were addressed. Instead of taking a year to begin the process of the assessment we started last fall. We decided to continue working with The Hospital Council of Northwest Ohio (HCNO), which was the same group that helped us successfully complete the Umatilla County Community Health Assessment earlier that year.

The strategic planning group of the partnership used the date of the report along with the feedback from the community meetings to identify the following issues as a community to work together to address: obesity, tobacco use, diabetes and asthma. It is the intention of the Partnership with local Community Health Partnerships (CHPs) to develop strategic implementation plans to address these needs in their respective communities (Hermiston, Milton-Freewater, Mission and Pendleton). Results of this report will be incorporated into the respective implementation plans. It is anticipate that each of these CHPs will have their part of the strategic implantation plan completed by this summer.

Sincerely,

Rod Harwood, M.Div., M.A., BCC
Chair
Umatilla County Community Health Partnership
Acknowledgements

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Umatilla Public Health

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Oregon Child Development Coalition

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Project Management, Secondary Data, Data Collection, and Report Development

Hospital Council of Northwest Ohio
Britney L. Ward, MPH, Assistant Director of Health Planning
Margaret Wielinski, MPH, Health Improvement Data Specialist
Michelle Von Lehmden, Health Assessment Coordinator
Shari Gorski, Administrative Assistant
Natalie Dugan, Graduate Assistant, University of Toledo
Amy Nagle, Undergraduate Assistant, University of Toledo

Data Collection & Analysis

James H. Price, Ph.D., MPH, Professor Emeritus of Health Education,
University of Toledo
Joseph A. Dake, Ph.D., MPH, Professor and Chair of Health Education,
University of Toledo
Timothy R. Jordan, Ph.D., M.Ed., Professor of Health Education,
University of Toledo

Contact Information

Rod P. Harwood, M.Div., M.A., BCC
Director of Mission Operations
St. Anthony Hospital
1601 SE Court Ave.
Pendleton, OR 97801
(541) 278-3239
# Table of Contents

Executive Summary | Section 1-Pages 1-10
--- | ---
Trend Summary | Section 2-Page 1
Hispanic Health Status Perceptions | Section 3-Pages 1-2
Hispanic Health Care Coverage | Section 4-Pages 1-3
Hispanic Health Care Access and Utilization | Section 5-Pages 1-3
Hispanic Cardiovascular Health | Section 6-Pages 1-4
Hispanic Cancer | Section 7-Pages 1-2
Hispanic Diabetes | Section 8-Pages 1-2
Hispanic Arthritis | Section 9-Page 1
Hispanic Asthma | Section 10-Pages 1-2
Hispanic Adult Weight Status | Section 11-Pages 1-2
Hispanic Tobacco Use | Section 12-Pages 1-4
Hispanic Alcohol Consumption | Section 13-Pages 1-4
Hispanic Marijuana and Other Drug Use | Section 14-Pages 1-2
Hispanic Women’s Health | Section 15-Pages 1-4
Hispanic Men’s Health | Section 16-Pages 1-4
Hispanic Preventive Medicine and Health Screenings/Enviromental Health | Section 17-Pages 1-3
Hispanic Sexual Behavior and Pregnancy Outcomes | Section 18-Pages 1-7
Hispanic Quality of Life and Safety | Section 19-Pages 1-2
Hispanic Social Context | Section 20-Page 1
Hispanic Mental Health and Suicide | Section 21-Pages 1-2
Hispanic Oral Health | Section 22-Pages 1-2
Hispanic Parenting | Section 23-Page 1
Hispanic Adult Clinic Population Health | Section 24-Pages 1-2
Hispanic Housing Group Health | Section 25-Pages 1-2
Health Assessment Hispanic Information Sources | Appendix i-Pages 1-4
List of Acronyms and Terms | Appendix ii-Pages 1-2
Hispanic Adult Demographic Profile | Appendix iii- Page 1
Hispanic Demographics and Household Information | Appendix iv- Pages 1-8
Umatilla County
Hispanic Adult Health Assessment

Executive Summary
This executive summary provides an overview of health-related data for Umatilla County Hispanic adults (19 years of age and older), who participated in a county-wide health assessment survey during 2012. The findings are based on a self-administered survey using a structured questionnaire. The questions were modeled after the survey instrument used by the Centers for Disease Control and Prevention for their national and state Behavioral Risk Factor Surveillance System (BRFSS). The Hospital Council of Northwest Ohio collected the data, guided the health assessment process and integrated sources of primary and secondary data into the final report.

Primary Data Collection Methods

Design
This community health assessment was cross-sectional in nature and included a written survey of Hispanic adults within Umatilla County. From the beginning, community leaders were actively engaged in the planning process and helped define the content, scope, and sequence of the study. Active engagement of community members throughout the planning process is regarded as an important step in completing a valid needs assessment.

Instrument Development
The Hispanic adult survey instrument was designed and pilot tested for this study. As a first step in the design process, health education researchers from the University of Toledo and staff members from the Hospital Council of NW Ohio met to discuss potential sources of valid and reliable survey items that would be appropriate for assessing the health status and health needs of adults. The investigators decided to derive the majority of the adult survey items from the BRFSS. This decision was based on being able to compare local data with state and national data.

The Project Coordinator from the Hospital Council of NW Ohio conducted a series of meetings with the planning committee from Umatilla County. During these meetings, banks of potential survey questions from the BRFSS survey were reviewed and discussed. Based on input from the Umatilla County planning committee, the Project Coordinator composed drafts of surveys containing 117 items for the adult survey. The draft was reviewed and approved by health education researchers at the University of Toledo. English and Spanish versions of the survey were made available.

Sampling
Hispanic adults ages 18 and over living in Umatilla County were used as the sampling frame for the adult survey. Since U.S. Census Bureau age categories do not correspond exactly to this age parameter, the investigators calculated the population of those 18 years and over living in Umatilla County. There were 10,651 Hispanic adults ages 18 and over living in Umatilla County. The investigators conducted a power analysis to determine what sample size was needed to ensure a 95% confidence level with a corresponding confidence interval of 5% (i.e., we can be 95% sure that the “true” population responses are within a 5%
Primary Data Collection Methods

margin of error of the survey findings.) A sample size of at least 371 was needed to ensure this level of confidence. Surveys were collected from three different populations: 1) A random sample of Hispanic adults that use services at various clinics in Umatilla County (Clinic Population); 2) A random sample of Personally Interviewed Hispanic Housing Group adults of North Umatilla County (Hispanic Housing Group-HHG); and 3) a survey sent through the mail to random Hispanic adults in Umatilla County (General Hispanic Population). The random sample of mailing addresses of adults from Umatilla County was obtained from American Clearinghouse in Louisville, KY.

Procedure

Clinic Surveys
Surveys were collected from three different sites. Surveys were randomly given to patients that came to the Mirasol Family Health Center and Yakima Valley Farm Workers Clinic. Oregon Child Development Coalition did face-to-face interviews with their client population during regularly scheduled home visits.

Personal Interviews

Personally Interviewed Hispanic Housing Group of North Umatilla County (HHG) group was designed to reach a population representative of the larger Hispanic community in the given area, whether or not they were receiving services, identified as such by a service agency, and regardless of occupation. Various housing units or areas were identified throughout the given geographical area that was exclusively or almost exclusively Hispanics. Based on an age and gender distribution driven by the nature of the housing unit or area (i.e., areas known to be predominately male were assigned only a gender distribution of males and an elderly area or unit assigned only respondents over 65 years of age), each housing area or unit was assigned a distribution of required respondents. Promotores(as) from the community who were bilingual were trained on the sampling design, safety issues, and survey structure and questions, and scenarios on possible difficulties. These interviews were obtained by going door-to-door in the assigned areas and utilizing the sampling plan.

Mail Survey

Prior to mailing the survey to adults, an advance letter was mailed to 500 adults in Umatilla County. This advance letter was personalized, printed on Umatilla County Community Health Partnership stationery and was signed by Rod Harwood, M.Div, MA, BCC, Director of Mission Operations, St. Anthony Hospital and Chair, Umatilla County Community Health Partnership. The letter introduced the county health assessment project and informed the readers that they may be randomly selected to receive the survey. The letter also explained that the respondents’ confidentiality would be protected and encouraged the readers to complete and return the survey promptly if they were selected.

Two weeks following the advance letter, a three-wave mailing procedure was implemented to maximize the survey return rate. The initial mailing included a personalized hand signed cover letter (on Umatilla County Community Health Partnership stationery) describing the purpose of the study; a questionnaire printed on colored paper; a self-addressed stamped return envelope; and a $2 incentive. Approximately two weeks after the first mailing, a second wave mailing included another personalized cover letter encouraging them to reply, another copy of the questionnaire on colored paper, and another reply envelope. A third wave postcard was sent two weeks after the second wave mailing. Surveys returned as undeliverable were not replaced with another potential respondent. The response rate for the Umatilla County adult mailing was 27% (n=127; CI= 8.64%).
Primary Data Collection Methods

Data Analysis

Individual responses were anonymous and confidential. Only group data are available. All data were analyzed by health education researchers at the University of Toledo using SPSS 17.0. Crosstabs were used to calculate descriptive statistics for the data presented in this report.

Limitations

As with all county assessments, it is important to consider the findings in light of all possible limitations. If any important differences existed between the respondents and the non-respondents regarding the questions asked, this would represent a threat to the external validity of the results (the generalizability of the results to the population of Umatilla County). If there were little to no differences between respondents and non-respondents, then this would not be a limitation. We attempted to minimize this by collecting data in three different ways to reach a diverse sample.

Second, it is important to note that, although several questions were asked using the same wording as the CDC questionnaires and the NSCH questionnaire, the adult and parent data collection method differed. CDC adult data and NSCH child data were collected using a set of questions from the total question bank and adults were asked the questions over the telephone rather than as a mail survey. The youth CDC survey was administered in schools in a similar fashion as this county health assessment.

Finally, like all surveys, the self-reported results are subject to lapses in memory and to responding in a socially desirable manner. If these problems occurred it would be a threat to the internal validity of the findings.
Data Summary

Health Perceptions

In 2012, nearly one-third (30%) of the Umatilla County Hispanic adults rated their health status as excellent or very good. Conversely, 35% of Hispanic adults, increasing to 65% of those over the age of 65, described their health as fair or poor.

Health Care Coverage

The 2012 health assessment data has identified that 43% of Umatilla County Hispanic adults were without health care coverage. Those most likely to be uninsured were Hispanic adults under age 30 and those with an income under $25,000. In Umatilla County, 38.5% of Hispanic residents live below the poverty level.

(Source: U.S. Census, American Community Survey 3 Year Estimates, 2009-2011)
Health Care Access

The 2012 health assessment project identified that 43% of Umatilla County Hispanic adults had visited a doctor for a routine checkup within the last year. 49% reported they had one particular doctor or healthcare provider they went to for routine medical care.

Cardiovascular Health

Heart disease (14%) and stroke (6%) accounted for 20% of all Oregon Hispanic adult deaths in 2010 (Source: OHA Vital Statistics). The 2012 Umatilla County health assessment found that 3% of Hispanic adults had survived a heart attack and 2% had survived a stroke at some time in their life. More than one-quarter (26%) of Umatilla County Hispanic adults have been diagnosed with high blood pressure, 25% have high blood cholesterol, 43% were obese and 10% were smokers, four known risk factors for heart disease and stroke.

Cancer

In 2012, 7% of Umatilla County Hispanic adults had been diagnosed with cancer at some time in their life. The American Cancer Society advises that reducing tobacco use, increasing cancer education and awareness, healthy diet and exercise habits, and early detection may reduce overall cancer deaths.

Diabetes

In 2012, 18% of Umatilla County adults had been diagnosed with diabetes. A major risk factor is obesity.

Arthritis

According to the Umatilla County survey data, 22% of Umatilla County Hispanic adults were diagnosed with arthritis. According to the 2011 BRFSS, 16% of Oregon Hispanic adults and 15% of U.S. Hispanic adults were told they have arthritis.

Asthma

According to the Umatilla County survey data, 6% of Umatilla County adults had been diagnosed with asthma.
Adult Weight Status

The 2012 Health Assessment identified that 76% of Umatilla County Hispanic adults were overweight or obese based on BMI. The 2011 BRFSS indicates that 29% of Oregon and 29% of U.S. Hispanic adults were obese by BMI. More than two-fifths (43%) of Umatilla County Hispanic adults were obese. More than one-third (37%) of Hispanic adults were trying to lose weight.

Adult Tobacco Use

In 2012, 10% of Umatilla County adults were current smokers and 14% were considered former smokers. In 2012, the American Cancer Society (ACS) stated that tobacco use was the most preventable cause of disease and early death in the world, accounting for approximately 5 million premature deaths each year. ACS estimated that tobacco use would be linked to approximately one in five deaths in the U.S. (Source: Cancer Facts & Figures, American Cancer Society, 2012)
Data Summary

Respondents were asked:
“Have you smoked at least 100 cigarettes in your entire life?
If yes, do you now smoke cigarettes every day, some days, or not at all?”

Adult Alcohol Consumption
In 2012, the health assessment indicated that 3% of Umatilla County Hispanic adults were considered frequent drinkers (drank an average of three or more days per week, per CDC guidelines). 44% of Hispanic adults who drank had five or more drinks (for males) or four or more drinks (for females) on one occasion (binge drinking) in the past month. Nine percent of Hispanic adults drove within a couple hours after drinking alcohol.

Umatilla County Hispanic Adult Drinkers Who Binge Drank in Past Month*

*Based on adults who have drank alcohol in the past month. Binge drinking is defined as having five or more drinks (for males) or four or more drinks (for females) on one occasion.

HHG - Personally Interviewed Hispanic Housing Group of North Umatilla County
Data Summary

Adult Marijuana and Other Drug Use

In 2012, 5% of Umatilla County Hispanic adults had used marijuana during the past 6 months. 8% of Hispanic adults had used medication not prescribed for them or took more than prescribed to feel good or high and/or more active or alert during the past 6 months.

Women’s Health

In 2012, more than one-third (34%) of Umatilla County Hispanic women over the age of 40 reported having a mammogram in the past year. 37% of Umatilla County Hispanic women ages 19 and over had a clinical breast exam and 38% had a pap smear to detect cancer of the cervix in the past year. The health assessment determined just over one-quarter of Hispanic women (27%) had high blood pressure, 28% had high blood cholesterol, 46% were obese, and 6% were identified as smokers, known risk factors for cardiovascular diseases.
Men’s Health

In 2012, more than one-quarter (26%) of Umatilla County Hispanic males over the age of 50 had a Prostate-Specific Antigen (PSA) test in the past year. One in eight (13%) Hispanic males over the age of 50 had a digital rectal exam in the past year. The health assessment determined that 3% of men had survived a heart attack and 1% had survived a stroke at some time in their life. More than one-quarter (26%) of men had been diagnosed with high blood pressure, 23% had high blood cholesterol, and 18% were identified as smokers, which, along with obesity (37%), are known risk factors for cardiovascular diseases.
Data Summary

Preventive Medicine and Health Screenings

42% of Hispanic adults over the age of 50 have received a colorectal cancer screening at some time in their life. Nearly three-fifths (59%) of Hispanic adults have had a tetanus shot in the past 10 years.

Adult Sexual Behavior & Pregnancy Outcomes

In 2012, more than three-fourths (76%) of Umatilla County Hispanic adults had sexual intercourse. 13% of adults had more than one partner.

Quality of Life and Safety

In 2012, the health assessment identified that 22% of Umatilla County Hispanic adults kept a firearm in or around their home. The most limiting health problems were arthritis, back or neck problems, and walking problems.

Social Context

In 2012, 6% of Umatilla County Hispanic adults were threatened or abused in the past year. 15% of Hispanic adults needed help with general daily needs, such as food, clothing, shelter or paying utility bills.

Mental Health and Suicide

In 2012, 5% of Umatilla County Hispanic adults attempted suicide. 26% of Hispanic adults felt sad, blue or depressed almost every day for two or more weeks in a row.

Oral Health

The 2012 health assessment project has determined that nearly half (46%) of Umatilla County Hispanic adults had visited a dentist or dental clinic in the past year. The 2010 BRFSS reported that 62% of U.S. Hispanic adults had visited a dentist or dental clinic in the previous twelve months.

Parenting

The 2012 Health Assessment project identified that Hispanic parents took their child to the doctor an average of 1.5 times for regular checkups and 1.0 times for dental visits in the past year. About four-fifths (81%) of children spent less than one hour of unsupervised time after school on an average day.

Clinic Hispanics

The 2012 Health Assessment reported that 35% of Hispanic adults from the clinic did not have health care coverage. 29% of adults had high blood pressure. 8% were current smokers. 24% needed help meeting their general daily needs such as food, clothing, shelter, or paying utility bills.

Hispanic Housing Group (HHG)

The 2012 Health Assessment reported that 56% of Hispanic Housing Group (HHG) adults did not have health care coverage. 22% of adults kept firearms in and around their household. 15% of women have had a mammogram in the past year.
<table>
<thead>
<tr>
<th></th>
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<tbody>
<tr>
<td><strong>Alcohol Use</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Had at least one alcoholic beverage in past month</td>
<td>29%</td>
<td>51%</td>
<td>59%</td>
<td>49%</td>
</tr>
<tr>
<td>Binged in past month (5 or more drinks in a couple of hours on an occasion)</td>
<td>12%</td>
<td>18%</td>
<td>22%</td>
<td>21%</td>
</tr>
<tr>
<td><strong>Tobacco Use</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Current smoker (currently smoke some or all days)</td>
<td>10%</td>
<td>18%</td>
<td>20%</td>
<td>20%</td>
</tr>
<tr>
<td>Former smoker (smoked 100 cigarettes in lifetime &amp; now do not smoke)</td>
<td>14%</td>
<td>17%</td>
<td>17%</td>
<td>19%</td>
</tr>
<tr>
<td><strong>Arthritis, Asthma &amp; Diabetes</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Has been diagnosed with arthritis</td>
<td>22%</td>
<td>32%</td>
<td>16%</td>
<td>15%</td>
</tr>
<tr>
<td>Has been diagnosed with asthma</td>
<td>6%</td>
<td>20%</td>
<td>18%</td>
<td>12%</td>
</tr>
<tr>
<td>Has been diagnosed with diabetes</td>
<td>18%</td>
<td>13%</td>
<td>N/A</td>
<td>12%</td>
</tr>
<tr>
<td><strong>Cardiovascular Health</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Had angina</td>
<td>4%</td>
<td>4%</td>
<td>N/A</td>
<td>3%</td>
</tr>
<tr>
<td>Had a heart attack</td>
<td>3%</td>
<td>5%</td>
<td>N/A</td>
<td>3%</td>
</tr>
<tr>
<td>Had a stroke</td>
<td>2%</td>
<td>2%</td>
<td>N/A</td>
<td>2%</td>
</tr>
<tr>
<td>Has been diagnosed with high blood pressure</td>
<td>26%</td>
<td>31%</td>
<td>13%</td>
<td>22%</td>
</tr>
<tr>
<td>Has been diagnosed with high blood cholesterol</td>
<td>25%</td>
<td>36%</td>
<td>23%</td>
<td>33%</td>
</tr>
<tr>
<td><strong>Health Status and Coverage</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Has health care coverage</td>
<td>57%</td>
<td>84%</td>
<td>65%</td>
<td>64%</td>
</tr>
<tr>
<td>Rated health as excellent or very good</td>
<td>30%</td>
<td>53%</td>
<td>45%</td>
<td>40%</td>
</tr>
<tr>
<td>Rated general health as fair or poor</td>
<td>35%</td>
<td>15%</td>
<td>N/A</td>
<td>24%</td>
</tr>
<tr>
<td><strong>Preventive Health</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dental visit within past year</td>
<td>46%</td>
<td>63%</td>
<td>N/A</td>
<td>62%*</td>
</tr>
<tr>
<td>Age 40 &amp; over had a mammogram in past 2 years</td>
<td>58%</td>
<td>67%</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td><strong>Weight Control</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Obese</td>
<td>43%</td>
<td>32%</td>
<td>29%</td>
<td>29%</td>
</tr>
<tr>
<td>Overweight</td>
<td>33%</td>
<td>35%</td>
<td>39%</td>
<td>39%</td>
</tr>
</tbody>
</table>

*N/A – Data is not available

* 2010 BRFSS
Hispanic Health Status Perceptions

Key Findings
In 2012, nearly one-third (30%) of the Umatilla County Hispanic adults rated their health status as excellent or very good. Conversely, 35% of Hispanic adults, increasing to 65% of those over the age of 65, described their health as fair or poor.

General Health Status
♦ In 2012, nearly one-third (30%) of Umatilla County Hispanic adults rated their health as excellent or very good. Umatilla County Hispanic adults with higher incomes (37%) were more likely to rate their health as excellent or very good, compared to 28% of those with incomes less than $25,000.
♦ 35% of Hispanic adults rated their health as fair or poor. The 2011 BRFSS has identified that 24% of U.S. Hispanic adults self-reported their health as fair or poor.
♦ Umatilla County Hispanic adults were most likely to rate their health as fair or poor if they:
  o Were widowed (70%)
  o Were 65 years of age or older (65%)
  o Had high blood pressure (51%) or high blood cholesterol (50%)
  o Had an annual household income under $25,000 (43%)

Physical Health Status
♦ In 2012, 22% of Umatilla County Hispanic adults rated their physical health as not good on four or more days in the previous month.
♦ Umatilla County Hispanic adults were most likely to rate their physical health as not good if they:
  o Were 65 years of age or older (38%)
  o Had an annual household income more than $25,000 (24%)

Mental Health Status
♦ In 2012, 22% of Umatilla County Hispanic adults rated their mental health as not good on four or more days in the previous month.
♦ Umatilla County Hispanic adults were most likely to rate their mental health as not good if they:
  o Were 65 years of age or older (38%)
  o Were female (27%)
♦ One in eight (12%) adults reported that poor mental or physical health kept them from doing usual activities such as self-care, work, or recreation on four or more days in the previous month.

<table>
<thead>
<tr>
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</tr>
</thead>
<tbody>
<tr>
<td>Rated health as excellent or very good</td>
<td>30%</td>
<td>53%</td>
<td>45%</td>
<td>40%</td>
</tr>
<tr>
<td>Rated health as fair or poor</td>
<td>35%</td>
<td>15%</td>
<td>N/A</td>
<td>24%</td>
</tr>
</tbody>
</table>

N/A – Data is not available

(Source: BRFSS 2011 for Oregon and U.S.)
Hispanic Health Status Perceptions

The following graph shows the percentage of Umatilla County Hispanic adults who described their personal health status as excellent/very good, good, and fair/poor. Examples of how to interpret the information include: 30% of all Umatilla County Hispanic adults, 46% of those under age 30, and 14% of those ages 65 and older rated their health as excellent or very good. The table shows the percentage of Hispanic adults with poor physical and mental health in the past 30 days.

*Respondents were asked: “Would you say that in general your health is excellent, very good, good, fair or poor?”

HHG - Personally Interviewed Hispanic Housing Group of North Umatilla County

*Totals may not equal 100% as some respondents answered “Don’t know/Not sure”.

<table>
<thead>
<tr>
<th>Health Status</th>
<th>No Days</th>
<th>1-3 Days</th>
<th>4-5 Days</th>
<th>6-7 Days</th>
<th>8 or More Days</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Physical Health Not Good in Past 30 Days</strong>*</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Males</td>
<td>56%</td>
<td>11%</td>
<td>6%</td>
<td>2%</td>
<td>14%</td>
</tr>
<tr>
<td>Females</td>
<td>53%</td>
<td>14%</td>
<td>7%</td>
<td>1%</td>
<td>13%</td>
</tr>
<tr>
<td>Total</td>
<td>54%</td>
<td>13%</td>
<td>7%</td>
<td>2%</td>
<td>13%</td>
</tr>
<tr>
<td><strong>Mental Health Not Good in Past 30 Days</strong>*</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Males</td>
<td>68%</td>
<td>10%</td>
<td>6%</td>
<td>1%</td>
<td>6%</td>
</tr>
<tr>
<td>Females</td>
<td>52%</td>
<td>11%</td>
<td>5%</td>
<td>1%</td>
<td>18%</td>
</tr>
<tr>
<td>Total</td>
<td>58%</td>
<td>10%</td>
<td>5%</td>
<td>1%</td>
<td>14%</td>
</tr>
</tbody>
</table>

*Health Status: Excellent/Very Good  | Good  | Fair/Poor
Hispanic Health Care Coverage

Key Findings
The 2012 health assessment data has identified that 43% of Umatilla County Hispanic adults were without health care coverage. Those most likely to be uninsured were Hispanic adults under age 30 and those with an income under $25,000. In Umatilla County, 38.5% of Hispanic residents live below the poverty level. (Source U.S. Census, American Community Survey 3 Year Estimates, 2009-2011)

General Health Coverage

- In 2012, 57% of Umatilla County Hispanic adults had health care coverage, leaving 43% who were uninsured. The 2011 BRFSS reports Hispanic uninsured prevalence rates for Oregon (35%) and the U.S. (37%).
- In the past year 43% of Hispanic adults were uninsured, increasing to 51% of those under the age of 30, and 55% of those with incomes less than $25,000.
- 44% of Hispanic adults with children did not have healthcare coverage, compared to 67% of those who did not have children living in their household.
- The following types of health care coverage were used: employer (48%), Medicaid or medical assistance (13%), Medicare (11%), someone else’s employer (8%), multiple-including government sources (6%), multiple-including private sources (6%), self-paid plan (2%), and other (5%).
- Umatilla County Hispanic adult health care coverage included the following: medical (99%), prescription coverage (86%), dental (80%), vision (72%), immunizations (71%), own choice of physicians (67%), mental health (60%), their children (56%), their spouse (52%), preventive care (51%), alcohol or substance abuse treatment (26%), skilled nursing (15%), home care (14%), and hospice (12%).
- The top six reasons uninsured Hispanic adults gave for being without health care coverage were:
  1. They could not afford to pay the insurance premiums (25%)
  2. They lost their job or changed employers (23%)
  3. They became ineligible (age or left school) (11%)
  4. They became a part-time or temporary employee (8%)
  5. Their employer did not/stopped offering coverage (6%)
  6. Their benefits from an employer/former employer ran out (6%)
   (Percentages do not equal 100% because respondents could select more than one reason)

Oregon Health Care Statistics

According to the Office for Oregon Health Policy and Research:
- In 2011, one in four (25.9%) Hispanics/Latinos were identified as uninsured.

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</thead>
<tbody>
<tr>
<td>Uninsured</td>
<td>43%</td>
<td>16%</td>
<td>35%</td>
<td>37%</td>
</tr>
</tbody>
</table>
Hispanic Health Care Coverage

The following graph shows the percentages of Umatilla County Hispanic adults who were uninsured by demographic characteristics. Examples of how to interpret the information in the first graph include: 43% of all Umatilla County Hispanic adults were uninsured, 55% of Hispanic adults with an income less than $25,000 reported being uninsured, and 51% of those under age 30 lacked health care coverage. The pie chart shows sources of Umatilla County Hispanic adults’ health care coverage.

Uninsured Umatilla County Hispanic Adults

Source of Health Insurance Coverage for Umatilla County Hispanic Adults

HHG - Personally Interviewed Hispanic Housing Group of North Umatilla County
Hispanic Health Care Coverage

The following chart shows what is included in Umatilla County Hispanic adults’ insurance coverage.

<table>
<thead>
<tr>
<th>Health Coverage Includes:</th>
<th>Yes</th>
<th>No</th>
<th>Don’t Know</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medical</td>
<td>99%</td>
<td>1%</td>
<td>0%</td>
</tr>
<tr>
<td>Prescription Coverage</td>
<td>86%</td>
<td>5%</td>
<td>9%</td>
</tr>
<tr>
<td>Dental</td>
<td>80%</td>
<td>15%</td>
<td>5%</td>
</tr>
<tr>
<td>Vision</td>
<td>72%</td>
<td>23%</td>
<td>5%</td>
</tr>
<tr>
<td>Immunizations</td>
<td>71%</td>
<td>11%</td>
<td>18%</td>
</tr>
<tr>
<td>Choice of Physicians</td>
<td>67%</td>
<td>16%</td>
<td>17%</td>
</tr>
<tr>
<td>Mental Health</td>
<td>60%</td>
<td>13%</td>
<td>27%</td>
</tr>
<tr>
<td>Your Children</td>
<td>56%</td>
<td>39%</td>
<td>5%</td>
</tr>
<tr>
<td>Your Spouse</td>
<td>52%</td>
<td>40%</td>
<td>8%</td>
</tr>
<tr>
<td>Preventive Health</td>
<td>51%</td>
<td>13%</td>
<td>36%</td>
</tr>
<tr>
<td>Alcohol/Substance Abuse Treatment</td>
<td>26%</td>
<td>17%</td>
<td>57%</td>
</tr>
<tr>
<td>Skilled Nursing</td>
<td>15%</td>
<td>27%</td>
<td>58%</td>
</tr>
<tr>
<td>Home Care</td>
<td>14%</td>
<td>29%</td>
<td>57%</td>
</tr>
<tr>
<td>Hospice</td>
<td>12%</td>
<td>25%</td>
<td>63%</td>
</tr>
</tbody>
</table>

Healthy People 2020
Access to Quality Health Services

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</thead>
<tbody>
<tr>
<td>AHS-1.1: Persons under age of 65 years with health care insurance</td>
<td>54%</td>
<td>65%</td>
<td>64%</td>
<td>100%</td>
</tr>
</tbody>
</table>

*U.S. baseline is age-adjusted to the 2000 population standard  
(Source: Healthy People 2020 Objectives, BRFSS, 2011 Assessment)
Hispanic Health Care Access and Utilization

Key Findings

The 2012 health assessment project identified that 43% of Umatilla County Hispanic adults had visited a doctor for a routine checkup within the last year. 49% reported they had one particular doctor or healthcare provider they went to for routine medical care.

Health Care Access

- In 2012, 43% of Umatilla County Hispanic adults had visited their doctor for a routine checkup within the past year; 64% had visited their doctor within the past two years; 74% had visited their doctor within the past 5 years; and 8% had never visited their doctor for a routine checkup.
- 49% of Umatilla County Hispanic adults reported they had one particular doctor or healthcare professional they went to for routine medical care. 19% of Hispanic adults had more than one particular doctor or healthcare professional they went to for routine medical care, and 31% did not have one at all.
- Umatilla County Hispanic adults reported the following reasons for not having a usual source of medical care: no insurance/cost (26%), had two or more usual places (23%), had not needed a doctor (17%), did not know where to go (4%), previous doctor unavailable/moved (3%), did not like/trust/believe doctors (2%), language barrier (1%), and other reasons (7%).
- 43% of Umatilla County Hispanic adults chose to go outside of Umatilla County for health care services in the past year. The top 5 services sought outside of Umatilla County were: dental services (13%), specialty care (11%), primary care (10%), obstetrics/gynecology (8%), and pediatric care (5%).
- Umatilla County Hispanic adults went to the following places for health care needs outside of Umatilla County: Tri-city (37%), Walla Walla (31%), Portland (11%), Spokane (2%), and some other place (33%).
- 69% of Hispanic adults traveled less than 20 miles to the place they usually went when they were sick or needed health advice; 19% traveled 20 to 40 miles, 7% traveled 41 to 60 miles, and 2% traveled more than 60 miles.
- Hispanic adults did not get the medical care they needed for the following reasons: cost/no insurance (40%), distance (4%), no transportation (4%), too long of a wait for an appointment (3%), too long of a wait in the waiting room (3%), could not find a doctor to take them as a patient (3%), language barrier (2%), too embarrassed to seek help (2%), office was not open when they could get there (2%), confidentiality concerns (1%), no child care (1%), could not find a doctor to take Medicaid/Medicare (1%), no access for people with disabilities (1%), discrimination (1%), and other reasons (5%). 45% of Hispanic adults reported receiving medical care.
- The following might prevent Umatilla County Hispanic adults from seeing a doctor if they were sick, injured, or needed some kind of health care: cost (49%), no insurance (34%), might find something wrong (12%), could not get time off work (8%), difficult to find/no transportation (8%), worried/frightened of the procedure or doctor (6%), difficult to get an appointment (4%), hours not convenient (4%), did not trust or believe doctors (3%), and some other reason (4%).

Hispanics and Health Care in the U.S.

Access to health care can be defined in any number of ways, but one widely used approach is to consider whether a person reports having a usual place, other than an emergency room, to seek health care and advice.

- Defined this way, having a usual provider correlates with preventive care and monitoring. Both are associated with better long-term health outcomes, including better control of chronic conditions.
- Latino men (36%) are more likely to lack a regular health care provider than women (17%).
- Younger Hispanics are especially likely to lack a regular health care provider (37% of those 18-29 do not have one).

Hispanic Health Care Access and Utilization

- During the past year, Umatilla County Hispanic adults did not get a prescription from their doctor filled because: they had no insurance (29%), they could not afford to pay the out-of-pocket expenses (16%), their co-pays were too high (5%), they did not think they needed it (4%), their deductibles were too high (3%), they did not have transportation (3%), they were taking too many medications (3%), there was no generic equivalent of what was prescribed (2%), their premiums were too high (2%), and they opted out of prescription coverage because they could not afford it (1%). 58% of Hispanic adults reported having all of their prescriptions filled.

- Umatilla County Hispanic adults had the following issues regarding their healthcare coverage: premiums were too high (24%), deductibles were too high (23%), co-pays were too high (21%), could not understand their insurance plan (7%), opted out of certain coverage because they could not afford it (4%), high HSA account deductible (2%), working with their insurance company (2%), and opted out of certain coverage because they did not need it (<1%).

- 25% of Umatilla County Hispanic adults had visited the emergency room 1-2 times in the past year; 3% had been there 3-4 times, and 2% had been to the emergency room 5 or more times.

Availability of Services

- 6% of Umatilla County Hispanic adults looked for a program to assist in care for the elderly or disabled adult (either in-home or out-of-home) for either themselves or a loved one. Of those who looked, 41% looked for in-home care, 18% looked for a disabled person program, 14% looked for an assisted living program, 9% looked for out-of-home placement, 5% looked for day care, and 14% looked for multiple types of care.

- 5% of Hispanic adults looked for a program to quit smoking.

<table>
<thead>
<tr>
<th>Types of Programs (% of all Hispanic adults who looked for the programs)</th>
<th>Umatilla County Hispanic adults who have looked but have NOT found a specific program</th>
<th>Umatilla County Hispanic adults who have looked and have found a specific program</th>
</tr>
</thead>
<tbody>
<tr>
<td>Smoking (5% of all Hispanic adults looked)</td>
<td>60%</td>
<td>40%</td>
</tr>
</tbody>
</table>

Principles for Culturally Proficient Health Services for Hispanic/Latino Families and Communities

- Involve family members.
- Show respect – Always be respectful and explain without being condescending.
- Get personal – Hispanics prefer being closer to each other in space than non-Hispanic whites.
- Ask about their life (family, friends, and work), and share life stories and pictures.
- Encourage them to ask questions.
- Take seriously the responsibility and respect conferred on the provider.
- Reach out to the community – Community-based organizations within Hispanic neighborhoods, barrios, colonias, and other ethnic enclaves provide a significant point of entry and opportunity to expand on any outreach effort in which you may be involved.
- Respect traditional healing approaches – Hispanic patients may combine respect for the benefits of mainstream medicine, tradition, and traditional healing with a strong religious component.

Hispanic Health Care Access and Utilization

Latino Access to Health Care

According to the National Council of La Raza, nearly one in three (30.7%) people uninsured in the U.S. is Hispanic.

- Hispanics are nearly three times more likely than Whites to be uninsured.
- Uninsurance is generally lower among children than adults, but Latino children are still more than two times more likely than White children to be uninsured.
- 84% of uninsured Latinos live in families, a rate higher than uninsured Whites (69%).
- Across age groups, rates of uninsurance are substantially higher among noncitizen Latinos than U.S.-born and naturalized Latinos.
- Employer-based insurance (ESI) is the most common type of coverage held by Hispanics (38.2%), but their likelihood of having ESI is significantly lower than their non-Hispanic peers.
- Latinos are about two times more likely than Whites to have coverage through Medicaid or the Children’s Health Insurance Plan (CHIP); nearly half (49.3%) of Latino children have Medicaid or CHIP.
- Despite high rates of Medicaid/CHIP coverage, Latinos make up the largest share (39.1%) of children estimated to be eligible for but unenrolled in these programs.
- Among the nonelderly, about nine-tenths of insured Latinos have a specific, ongoing source of health care (a rate similar to their insured White and Black peers), compared to only about half (49.5%) of uninsured Latinos.
- Hispanics with private (15%) and public (30.4%) health insurance were more likely than their insured non-Hispanic peers to report not having a usual source of care due to financial or insurance reasons.
- In 2008, Hispanics made up nearly one-sixth (15.7%) of U.S. residents but less than one-tenth (9%) of the nation’s total health care costs.
- Latinos under age 65 are less likely to have incurred a health expense than their non-Hispanic White peers, a difference that is greatest among the uninsured.
- Among low-income, nonelderly Latinos, the uninsured incur lower health care expenses but pay more total dollars out-of-pocket than their insured peers.
- One in four (25%) Hispanics reported withdrawing money from savings to pay for health care costs.
- Although Hispanics make up about one-third of uninsured Americans, they make up a smaller share—about one-quarter (24.4%) of people receiving uncompensated care.

Key Findings

Heart disease (14%) and stroke (6%) accounted for 20% of all Oregon Hispanic adult deaths in 2010 (Source: OHA Vital Statistics). The 2012 Umatilla County health assessment found that 3% of Hispanic adults had survived a heart attack and 2% had survived a stroke at some time in their life. More than one-quarter (26%) of Umatilla County Hispanic adults have been diagnosed with high blood pressure, 25% have high blood cholesterol, 43% were obese and 10% were smokers, four known risk factors for heart disease and stroke.

Heart Disease and Stroke

♦ In 2012, 3% of Umatilla County Hispanic adults reported they had survived a heart attack or myocardial infarction, increasing to 22% of those over the age of 65.
♦ 2% of Umatilla County Hispanic adults reported having had survived a stroke.
♦ 4% of Hispanic adults reported they had angina or coronary heart disease, increasing to 26% of those over the age of 65.

High Blood Pressure (Hypertension)

♦ More than one-quarter (26%) of Umatilla County Hispanic adults had been diagnosed with high blood pressure. The 2011 BRFSS reports hypertension prevalence rates of 13% for Oregon and 22% for the U.S.
♦ 3% of Hispanic adults were told they were pre-hypertensive/borderline high.
♦ Umatilla County Hispanic adults diagnosed with high blood pressure were more likely to:
  o Be age 65 years or older (67%)
  o Have rated their health as poor (65%)
  o Be classified as obese by Body Mass Index-BMI (33%)

High Blood Cholesterol

♦ One-fourth (25%) of Hispanic adults had been diagnosed with high blood cholesterol. The 2011 BRFSS reported that 23% of Oregon Hispanic adults and 33% of U.S. Hispanic adults have been told they have high blood cholesterol.
♦ Nearly two-fifths (39%) of Hispanic adults had their blood cholesterol checked in the past year.
♦ Umatilla County Hispanic adults with high blood cholesterol were more likely to:
  o Have rated their health as poor (60%)
  o Be age 65 years and older (57%)
  o Be classified as overweight by Body Mass Index-BMI (29%)

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<tbody>
<tr>
<td>Had angina</td>
<td>4%</td>
<td>4%</td>
<td>1%*</td>
<td>3%</td>
</tr>
<tr>
<td>Had a heart attack</td>
<td>3%</td>
<td>5%</td>
<td>2%*</td>
<td>3%</td>
</tr>
<tr>
<td>Had a stroke</td>
<td>2%</td>
<td>2%</td>
<td>2%*</td>
<td>2%</td>
</tr>
<tr>
<td>Had high blood pressure</td>
<td>26%</td>
<td>31%</td>
<td>13%</td>
<td>22%</td>
</tr>
<tr>
<td>Had high blood cholesterol</td>
<td>25%</td>
<td>36%</td>
<td>23%</td>
<td>33%</td>
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*2010 Data used from BRFSS
Risk Factors for Cardiovascular Disease That Can Be Modified or Treated:

**Cholesterol** – As blood cholesterol rises, so does risk of coronary heart disease. A person's cholesterol level is also affected by age, sex, heredity and diet. Total cholesterol levels should be less than 200 mg/dL. Among Mexican Americans age 20 and older, 50.1% of men and 46.5% of women have total blood cholesterol levels of 200 mg/dL or higher.

**High Blood Pressure** – High blood pressure increases the heart's workload, causing the heart to thicken and become stiffer and causes the heart not to work properly. It also increases the risk of stroke, heart attack, kidney failure and congestive heart failure. Among Mexicans age 20 and older, 27.8% of men and 28.9% of women have high blood pressure.

**Obesity and Overweight** – People who have excess body fat are more likely to develop heart disease and stroke even if they have no other risk factors. Excess weight increases the heart's work. Among the Mexican Americans age 20 and older, 77.5% of men and 75.1% of women are overweight or obese. Of these, 31.4% of men and 43.4% of women are obese. Many obese and overweight people may have difficulty losing weight. However, just losing as few as 10 pounds can lower risk of heart disease.

**Smoking** – Smokers' risk of developing coronary heart disease is 2-4 times that of nonsmokers. People who smoke a pack of cigarettes a day have more than twice the risk of heart attack than people who have never smoked. In 2010, 15.2% of Hispanic males and 9.0% of Hispanic females age 18 and older smoke cigarettes.

**Physical Inactivity** – An inactive lifestyle is a risk factor for coronary heart disease. Regular, moderate-to-vigorous physical activity helps prevent heart and blood vessel disease. Physical activity can help control blood cholesterol, diabetes and obesity, as well as help lower blood pressure in some people. In 2010, only 14.4% of Hispanic or Latinos age 18 and older met the 2008 Federal Physical Activity (PA) Guidelines.

**Diabetes Mellitus** – Diabetes seriously increases the risk of developing cardiovascular disease. Even when glucose levels are under control, diabetes increases the risk of heart disease and stroke, but the risks are even greater if blood sugar is not well controlled. Among Mexican Americans, the prevalence of physician diagnosed diabetes is 11.0% in men and 12.7% in women.

(Source: American Heart Association, Risk Factors for Coronary Heart Disease, 6-20-11 & American Heart Association, Statistical Fact Sheet 2012 Update)
Hispanic Cardiovascular Health

The following graphs show the number of Umatilla County Hispanic adults who have been diagnosed with high blood pressure or high blood cholesterol. Examples of how to interpret the information on the first graph include: 26% of all Umatilla County Hispanic adults have been diagnosed with high blood pressure, 26% of all Umatilla County males, 27% of all females, and 67% of those 65 years and older.

*Does not include respondents who indicated high blood pressure during pregnancy only.

HHG - Personally Interviewed Hispanic Housing Group of North Umatilla County

Umatilla County Hispanic Adults Diagnosed with High Blood Pressure*

Umatilla County Hispanic Adults Diagnosed with High Blood Cholesterol

*HHG - Personally Interviewed Hispanic Housing Group of North Umatilla County
Hispanic Cardiovascular Health

The following graphs show the Umatilla County and Oregon age-adjusted mortality rates per 100,000 population for heart disease and stroke.

- The 2012 assessment shows that heart attacks are more prevalent than strokes in Umatilla County.

![Hispanic Adults Cardiovascular Disease Prevalence]

**Healthy People 2020 Objectives**

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<tbody>
<tr>
<td>HDS-5: Reduce proportion of adults with hypertension</td>
<td>26%</td>
<td>13%</td>
<td>22%</td>
<td>27%</td>
</tr>
</tbody>
</table>

*All U.S. figures age-adjusted to 2000 population standard.
(Source: Healthy People 2020, 2011 BRFSS, 2012 Umatilla County Hispanic Health Assessment)

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<tbody>
<tr>
<td>HDS-6: Increase proportion of adults who had their blood cholesterol checked within the preceding 5 years</td>
<td>62%</td>
<td>59%</td>
<td>63%</td>
<td>82%</td>
</tr>
<tr>
<td>HDS-7: Decrease proportion of adults with high total blood cholesterol (TBC)</td>
<td>25%</td>
<td>23%</td>
<td>33%</td>
<td>14%</td>
</tr>
</tbody>
</table>

*All U.S. figures age-adjusted to 2000 population standard.
(Source: Healthy People 2020, 2011 BRFSS, 2012 Umatilla County Hispanic Health Assessment)
Key Findings
In 2012, 7% of Umatilla County Hispanic adults had been diagnosed with cancer at some time in their life. The American Cancer Society advises that reducing tobacco use, increasing cancer education and awareness, healthy diet and exercise habits, and early detection may reduce overall cancer deaths.

Adult Cancer
♦ 7% of Umatilla County Hispanic adults were diagnosed with cancer at some point in their lives, increasing to 18% of those ages 65 and over.

Lung Cancer
♦ The American Cancer Society reports that smoking tobacco is associated with cancers of the lungs, mouth, lips, nasal cavity (nose) and sinuses, larynx (voice box), pharynx (throat), and esophagus (swallowing tube). Also, smoking has been associated with cancers of the stomach, pancreas, kidney, bladder, breast, uterine, cervix, and acute myeloid leukemia. The 2012 health assessment project has determined that 10% of Umatilla County Hispanic adults are current smokers and many more were exposed to environmental tobacco smoke, also a cause of heart attacks and cancer.
♦ In Umatilla County, 18% of male Hispanic adults are current smokers\(^1\) and 13% have stopped smoking for one or more days in the past 12 months because they were trying to quit. (Source: 2012 Umatilla County Health Assessment)
♦ Approximately 6% of female Hispanic adults in the county are current smokers\(^1\) and 54% have stopped smoking for one or more days in the past 12 months because they were trying to quit. (Source: 2012 Umatilla County Health Assessment)
♦ According to the American Cancer Society, smoking causes 87% of lung cancer deaths in the U.S. In addition, individuals living with smokers have a 30% greater risk of developing lung cancer than those who do not have smokers living in their household. Working in an environment with tobacco smoke also increases the risk of lung cancer.

Breast Cancer
♦ In 2012, 37% of Umatilla County females reported having had a clinical breast examination in the past year.
♦ 34% of Umatilla County females over the age of 40 had a mammogram in the past year.
♦ If detected early, the 5-year survival rate for breast cancer is 90%. (Source: American Cancer Society Facts & Figures 2012)
♦ For women age 40 and older, the American Cancer Society recommends annual mammograms and annual clinical breast exams. For women in their 20s and 30s, a clinical breast exam should be done at least once every 3 years. Mammograms for women in their 20s and 30s are based upon increased risk (e.g., family history, past breast cancer, smoking, diet) and physician recommendation. (Source: American Cancer Society Facts & Figures 2012)
♦ Breast cancer can also occur in males. (Source: American Cancer Society Facts & Figures 2012)

Oregon Hispanics
Leading Cancer Deaths
2010
Total All Sites: 149
♦ Lung and Bronchus: 25 deaths
♦ Lymphatic: 18 deaths
♦ Colon and Rectum: 12 deaths
♦ Pancreas: 11 deaths
♦ Breast: 11 deaths
(Source: OHA Vital Statistics, Mortality Data)

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\(^1\)Have smoked over 100 cigarettes in lifetime and currently smoke some or all days.
Colon and Rectum Cancer

♦ The American Cancer Society reports several risk factors for colorectal cancer including: age; personal or family history of colorectal cancer, polyps, or inflammatory bowel disease; alcohol use; a high-fat or low-fiber diet lacking an appropriate amount of fruits and vegetables; physical inactivity; obesity; diabetes; and smoking.

♦ In the U.S., most cases of colon cancer occur in individuals over the age of 50. Because of this, the American Cancer Society suggests that every person over the age of 50 have regular colon cancer screenings. In 2012, 42% of Umatilla County Hispanic adults over the age of 50 reported having been screened for colorectal cancers at some time in their life.

Prostate Cancer

♦ More than one-quarter (26%) of Umatilla County males over the age of 50 had a PSA test in the past year.

♦ For the most common cancers (prostate, female breast, colorectal, and lung), incidence and death rates are lower among Hispanics than among non-Hispanic whites. In addition, about 60% of prostate cancers occur in men over the age of 65, and 97% occur in men 50 and older. Other risk factors include strong familial predisposition, diet high in processed meat or dairy foods, and obesity. Prostate cancer is more common in North America and Northwestern Europe than in Asia and South America. (Source: Cancer Facts & Figures 2012, The American Cancer Society)

2012 Hispanic Cancer Estimations

- About 53,000 new cancer cases in men and 59,200 cases in women are expected to be diagnosed among Hispanics in 2012.
- Prostate cancer is expected to be the most commonly diagnosed cancer in Hispanic men and breast cancer the most common in Hispanic women.
- 18% of estimated cancer deaths for Hispanic men will be from lung and bronchus cancers (15% Hispanic women)
- Cancers for which rates are higher in Hispanics than non-Hispanics include stomach, cervix, liver, acute lymphocytic leukemia, and gallbladder.

Hispanic Diabetes

Key Findings
In 2012, 18% of Umatilla County Hispanic adults had been diagnosed with diabetes, a major risk factor is obesity.

Diabetes
♦ The 2012 health assessment project has identified that 18% of Umatilla County Hispanic adults had been diagnosed with diabetes, increasing to 54% of those over the age of 65. The 2011 BRFSS U.S. Hispanic prevalence of diabetes was 12% and was not available for Oregon Hispanic adults.
♦ The average age of onset (diagnoses) was 41.2 years old.
♦ More than four-fifths (84%) of Hispanic adults with diabetes reported that they felt they had received enough information on how to manage their diabetes themselves.
♦ Umatilla County Hispanic adults diagnosed with diabetes also had one or more of the following characteristics or conditions:
  o 88% were obese or overweight
  o 66% had been diagnosed with high blood pressure
  o 60% had been diagnosed with high blood cholesterol

Diabetes Risk among Hispanic Americans
♦ Diabetes is twice as common among Mexican-Americans and Puerto Rican Americans as among Caucasian Americans.
♦ Approximately 44% of Mexican-Americans met blood sugar goal levels (A1C) compared to 53% of whites and blacks in 2007-2010 data.
♦ Obesity and physical inactivity are the main risk factors for diabetes among Hispanic Americans.
♦ Although Hispanic Americans have higher rates of diabetic retinopathy and kidney disease, they have lower rates of heart disease from diabetes than Caucasian Americans.


Umatilla County Hispanic Adults Diagnosed with Diabetes

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<tbody>
<tr>
<td>Diagnosed with diabetes</td>
<td>18%</td>
<td>13%</td>
<td>N/A</td>
<td>12%</td>
</tr>
</tbody>
</table>

N/A – data is not available
Who is at Greater Risk for Type 2 Diabetes?

You are at risk for type 2 diabetes if:

- You are 45 years of age or older
- You are overweight or obese
- You have a parent, brother, or sister with diabetes
- Your family background is Hispanic/Latino, African American, American Indian, or Asian American or Pacific Islander
- You have had diabetes while you were pregnant (gestational diabetes) or you gave birth to a baby weighing 9 pounds or more
- You have been told to have high blood sugar (glucose) levels
- Your blood pressure is 150/90 or higher, or you have been told to have high blood pressure
- Your cholesterol (lipid) levels are not normal. Your HDL cholesterol (“good” cholesterol) is less than 35 or your triglyceride level is higher than 250
- You are fairly inactive. You are physical active less than three times a week
- You have been told to have polycystic ovary syndrome (PCOS)
- The skin around your neck or in your armpits appears dirty no matter how much you scrub it. The skin appears dark, thick and velvety. This is called acanthosis nigricans
- You have been told that you have blood vessel problems affecting the heart, brain, or legs


Hispanics/Latinos – Link Between Type 2 Diabetes and Cardiovascular Disease

- According to the 2011 BRFSS, 12% of Hispanic adults in the U.S. were diagnosed with diabetes.
- According to the American Diabetes Association, from 2007-2009, the age-adjusted diabetes prevalence rate among Hispanic adults was 12%. Among Hispanics were:
  - 8% for Cubans
  - 13% for Mexican Americans
  - 14% for Puerto Ricans
- Cardiovascular disease is the leading cause of death for people with diabetes. Adults with diabetes have heart disease rates about two to four times higher than adults without diabetes.
  - In 2011, 3% of Hispanic adults reported having a heart attack (2011 BRFSS).
- The risk for stroke is two to four times higher among people with diabetes.
  - 2% of Hispanic adults reported having a stroke (2011 BRFSS).
- About 75% of adults with diabetes also have high blood pressure.
  - 22% of Hispanic adults reported having been diagnosed with high blood pressure, in 2011 (2011 BRFSS).
- Smoking doubles the risk for heart disease in people with diabetes.
  - In 2011, 20% of Hispanic adults were current tobacco users.

Hispanic Arthritis

Key Findings
According to the Umatilla County survey data, 22% of Umatilla County Hispanic adults were diagnosed with arthritis. According to the 2011 BRFSS, 16% of Oregon Hispanic adults and 15% of U.S. Hispanic adults were told they have arthritis.

Arthritis
♦ Nearly one-quarter (22%) Umatilla County Hispanic adults were told by a health professional that they had some form of arthritis.
♦ Nearly two-thirds (64%) of those over the age of 65 were diagnosed with arthritis.
♦ According to the 2011 BRFSS, 16% of Oregon Hispanic adults and 15% of U.S. Hispanic adults were told they have arthritis.
♦ At least 1 in 5 U.S. Hispanic adults experienced adverse effects associated with arthritis such as activity limitations and pain, in 2009. (Source: CDC Arthritis Spotlight: Hispanics and Arthritis, updated 2011)
♦ Adults are at higher risk of developing arthritis if they are female, have genes associated with certain types of arthritis, have an occupation associated with arthritis, are overweight or obese, and/or have joint injuries or infections. (Source CDC)

Arthritis
An estimated 3.1 million Hispanic adults in the United States have arthritis.
♦ Approximately 1.4 million Hispanics had activity limitations due to arthritis, making it the most common attributable effect across Hispanic groups.
♦ Puerto Ricans (22%) had the highest percentage of age-adjusted prevalence of arthritis across Hispanic populations.

Obesity is a risk factor for osteoarthritis and joint pain is strongly associated with body weight.
♦ Being only 10 pounds overweight increases the force on the knee by 30-60 pounds with each step.
♦ 39% of Hispanics in the U.S. are overweight (39% Oregon) and 29% are obese (29% Oregon).
♦ Losing weight can decrease the development and progression of arthritis and also lower the risk of adverse effects associated with arthritis.


Umatilla County Hispanic Adults Diagnosed with Arthritis

<table>
<thead>
<tr>
<th>Gender</th>
<th>Total</th>
<th>Males</th>
<th>Females</th>
<th>Under 30</th>
<th>30-64 Years</th>
<th>65 &amp; Over</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diagnosed with arthritis</td>
<td>22%</td>
<td>18%</td>
<td>25%</td>
<td>0%</td>
<td>25%</td>
<td>64%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Income</th>
<th>General</th>
<th>Clinic</th>
<th>HHG</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diagnosed with arthritis</td>
<td>23%</td>
<td>23%</td>
<td>29%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Diagnosed with arthritis</td>
<td>22%</td>
<td>32%</td>
<td>16%</td>
<td>15%</td>
</tr>
</tbody>
</table>

HHG = Personally Interviewed Hispanic Housing Group of North Umatilla County
Hispanic Asthma

Key Findings

According to the Umatilla County survey data, 6% of Umatilla County Hispanic adults had been diagnosed with asthma.

Asthma & Other Respiratory Disease

♦ In 2012, 6% of Umatilla County Hispanic adults had been diagnosed with asthma, increasing to 10% of those over the age of 65.
♦ In the past year, Hispanic adults with asthma went to an emergency room or urgent care center because of an asthma attack an average of 0.2 times.
♦ 18% of Oregon and 12% of U.S. Hispanic adults have ever been diagnosed with asthma. (Source: 2011 BRFSS)
♦ There are several important factors that may trigger an asthma attack. Respiratory infections, allergens, chemicals, air pollution, odors, physical activity, emotions, seasonal changes, and smoking can all irritate the airways, causing asthma symptoms. (Source: American Lung Association, Luchando por el Aire: The Burden of Asthma on Hispanics, 2011)

Asthma and Hispanic Americans

♦ According to The Office of Minority Health, 3,600,000 Hispanics reported that they had asthma, in 2010.
♦ Puerto Rican Americans have a 2.6 times higher rate of asthma as compared to the overall Hispanic population.
♦ Hispanics are 39% more likely to visit the hospital for asthma, as compared to non-Hispanic Whites.
♦ Puerto Rican children are 2.4 times more likely to have asthma, as compared to non-Hispanic Whites.
♦ Hispanic children are 40% more likely to die from asthma, as compared to non-Hispanic Whites. (Source: The Office of Minority Health, Asthma and Hispanic Americans, updated 8/24/2012 from http://minorityhealth.hhs.gov/templates/content.aspx?ID=6173)

Umatilla County Hispanic Adults Diagnosed with Asthma

<table>
<thead>
<tr>
<th>Category</th>
<th>Total</th>
<th>Males</th>
<th>Females</th>
<th>Under 30</th>
<th>30-64</th>
<th>65 &amp; Over</th>
<th>Income &lt;$25K</th>
<th>Income $25K Plus</th>
<th>General</th>
<th>Clinic</th>
<th>HHG</th>
</tr>
</thead>
<tbody>
<tr>
<td>Had been diagnosed with asthma</td>
<td>6%</td>
<td>6%</td>
<td>6%</td>
<td>4%</td>
<td>6%</td>
<td>10%</td>
<td>8%</td>
<td>4%</td>
<td>7%</td>
<td>10%</td>
<td>4%</td>
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</tbody>
</table>

HHG - Personally Interviewed Hispanic Housing Group of North Umatilla County

2012 Adult Comparisons

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<tbody>
<tr>
<td>Had been diagnosed with asthma</td>
<td>6%</td>
<td>20%</td>
<td>18%</td>
<td>12%</td>
</tr>
</tbody>
</table>
The following graphs demonstrate the lifetime and current prevalence rates of asthma for Hispanic Oregon and U.S. residents.

**Burden of Asthma on Hispanics**

**Population:**
- In Oregon, Hispanics make up 12.0% (466,071) of the population (U.S. Census Bureau, 2011 ACS 1-year estimates).
- In Umatilla County, Hispanics make up 24.4% (18,741) of the population (U.S. Census Bureau, 2011 ACS 1-year estimates).

**Contributing Factors to Asthma in Hispanics**
- Access to quality of health care
  - They are more likely to work in low-paying agriculture, construction and service jobs that rarely provide health benefits and often expose workers to serious respiratory hazards.
- Environmental exposures at home, work, and in the community
  - Hispanics are 165% more likely to live in counties with unhealthy levels of particulate matter pollution.
  - 51% more likely to live in counties with unhealthy levels of ozone compared to non-Hispanic Whites.
- Poverty and social stress
- Biological susceptibility

Key Findings

The 2012 Health Assessment identified that 76% of Umatilla County Hispanic adults were overweight or obese based on BMI. The 2011 BRFSS indicates that 29% of Oregon and 29% of U.S. Hispanic adults were obese by BMI. More than two-fifths (43%) of Umatilla County Hispanic adults were obese. More than one-third (37%) of Hispanic adults were trying to lose weight.

Adult Weight Status

♦ In 2012, the health assessment indicated that more than three-fourths (76%) of Umatilla County Hispanic adults were either overweight (33%) or obese (43%) by Body Mass Index (BMI). This puts them at elevated risk for developing a variety of diseases.
♦ More than one-third (37%) of Hispanic adults were trying to lose weight, 36% were trying to maintain their current weight or keep from gaining weight, and 4% were trying to gain weight.
♦ Umatilla County Hispanic adults did the following to lose weight or keep from gaining weight: ate less food, fewer calories, or foods low in fat (37%), exercised (31%), ate a low-carb diet (12%), used a weight loss program (2%), went without eating 24 or more hours (2%), took diet pills, powders, or liquids without a doctor’s advice (2%), took prescribed medications (2%), participated in a prescribed dietary or fitness program (2%), smoked cigarettes (1%), and vomited or took laxatives (1%).
♦ On an average day, Hispanic adults spent time doing the following: 2.7 hours watching television, 1.8 hours on their cell phone, 1.1 hours on the computer outside of work, and 0.3 hours playing video games.

Physical Activity

♦ In Umatilla County, 46% of Hispanic adults were engaging in physical activity for at least 30 minutes on 3 or more days per week. 24% of Hispanic adults were exercising 5 or more days per week. More than one-third (35%) of Hispanic adults were not participating in any physical activity in the past week, including those who were unable to exercise.
♦ Umatilla County Hispanic adults gave the following reasons for not exercising: weather (21%), time (20%), too tired (16%), pain/discomfort (12%), could not afford a gym membership (12%), they chose not to exercise (11%), did not know what activity to do (6%), no sidewalks (3%), safety (3%), no child care (2%), no walking or biking trails (2%), no gym available (2%), doctor advised them not to (2%), and other (9%).
♦ The Office of Minority Health reported that in 2010, Hispanic adults were 40% less likely to engage in active physical activity as Non-Hispanic Whites (Source: Office of Minority Health).
♦ The CDC recommends that adults participate in moderate exercise for at least 2 hours and 30 minutes every week or vigorous exercise for at least 1 hour and 15 minutes every week. Whether participating in moderate or vigorous exercise, CDC also recommends muscle-strengthening activities that work all major muscle groups on 2 or more days per week (Source: CDC, Physical Activity for Everyone).

Nutrition

♦ In 2012, 14% of Hispanic adults were eating 5 or more servings of fruits and vegetables per day. 78% were eating between 1 and 4 servings per day. The American Cancer Society recommends that adults eat 5-9 servings of fruits and vegetables per day to reduce the risk of cancer and to maintain good health.
♦ 72% of Umatilla Hispanic adults drank soda pop, punch, Kool-Aid, energy drinks, sports drinks or other fruit flavored drinks in the past week. 25% of Hispanic adults drank at least one of these drinks every day.
♦ Umatilla Hispanic adults ate out in a restaurant or brought takeout food home to eat an average of 1.6 times per week.

Obesity & Hispanic Americans

♦ In 2010, Hispanic Americans were 1.2 times as likely to be obese than Non-Hispanic Whites, in the U.S.
♦ In 2010, Hispanic adults were 40% less likely to engage in physical activity as Non-Hispanic Whites, in the U.S.
♦ Overweight: Adults with a BMI of 25 to 29.9.
♦ Obese: Adults with a BMI of 30 or greater.

Hispanic Adult Weight Status

The following graphs show the percentage of Umatilla County Hispanic adults who are overweight or obese by Body Mass Index (BMI) and the percentage of Umatilla County Hispanic adults who are obese compared to Oregon and U.S. Examples of how to interpret the information include: 23% of all Umatilla County Hispanic adults were classified as normal weight, 33% were overweight, and 43% were obese.

(Umatilla County Hispanic Adult BMI Classifications)

(Percentages may not equal 100% due to the exclusion of data for those who were classified as underweight)

HHG - Personally Interviewed Hispanic Housing Group of North Umatilla County

(Umatilla County Oregon U.S. Obesity in Umatilla County, Oregon, and U.S. Hispanic Adults)

(Source: 2012 Umatilla County Health Assessment and 2011 BRFSS)

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<tbody>
<tr>
<td>Obese</td>
<td>43%</td>
<td>32%</td>
<td>29%</td>
<td>29%</td>
</tr>
<tr>
<td>Overweight</td>
<td>33%</td>
<td>35%</td>
<td>39%</td>
<td>39%</td>
</tr>
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</table>
Hispanic Adult Tobacco Use

Key Findings
In 2012, 10% of Umatilla County Hispanic adults were current smokers and 14% were considered former smokers. In 2012, the American Cancer Society (ACS) stated that tobacco use was the most preventable cause of death worldwide, and is responsible for the deaths of approximately half of long-term users. Each year, tobacco use is responsible for approximately 5 million premature deaths each year, and by 2030 this number is expected to increase to 8 million. (Source: Cancer Facts & Figures, American Cancer Society, 2012)

Adult Tobacco Use Behaviors
♦ The 2012 health assessment identified that one in ten (10%) Umatilla County Hispanic adults were current smokers (those who indicated smoking at least 100 cigarettes in their lifetime and currently smoke some or all days). The 2011 BRFSS reported Hispanic current smoker prevalence rates of 20% for Oregon and 20% for the U.S. One in seven (14%) Hispanic adults indicated that they were former smokers (smoked 100 cigarettes in their lifetime and now do not smoke).
♦ Umatilla County adult smokers were more likely to:
  o Have never been married (22%)
  o Have been age 65 or older (18%)
  o Have been male (18%)
♦ 2% of Umatilla County Hispanic adults reported using chewing tobacco, snuff or snus, and <1% did so every day.
♦ Umatilla County Hispanic adults used the following other tobacco products: flavored cigarettes (8%), cigarillos (7%), e-cigarettes (3%), hookah (3%), swishers (2%), Black and Milds (2%), cigars (1%), chewing tobacco (1%), little cigars (1%), and bidis (<1%).
♦ 28% of the current smokers responded that they had stopped smoking for at least one day in the past year because they were trying to quit smoking.
♦ 5% of Hispanic adults had looked for a program to stop smoking for themselves or a loved one. Of those who looked, 40% found a program.
♦ Umatilla County Hispanic adults had the following rules about smoking in their home: smoking is not allowed inside their home at any time (82%), there are no rules about smoking (5%), smoking is allowed in some places at some times (5%), and smoking is allowed anywhere (4%).

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<tbody>
<tr>
<td>Current smoker</td>
<td>10%</td>
<td>18%</td>
<td>20%</td>
<td>20%</td>
</tr>
<tr>
<td>Former smoker</td>
<td>14%</td>
<td>17%</td>
<td>17%</td>
<td>19%</td>
</tr>
</tbody>
</table>

Tobacco Use and Hispanics
♦ According to the 2010 National Health Interview Survey, 12.5% of Hispanic adults in the United States are current smokers (15.8% of men and 9.0% of women).
♦ The 2011 BRFSS Hispanic current smoker prevalence rate was 20% in Oregon (20% U.S.).
♦ Hispanic smokers tend to consume fewer cigarettes than non-Hispanic white smokers. 13% of Hispanic adults smoke compared to 21% of non-Hispanic whites.
♦ While smoking rates among Latina women are lower than those among White or African American women, almost half of Latina women who have ever smoked remain current smokers.

Hispanic Adult Tobacco Use

The following graph shows the percentage of Umatilla County Hispanic adults who used tobacco. Examples of how to interpret the information include: 10% of all Umatilla County Hispanic adults were current smokers, 14% of all Hispanic adults were former smokers, and 75% had never smoked.

Smoking and Lung Cancer

- Tobacco use is a major cause of cancer in the U.S. and is responsible for about 30% of all cancer deaths.
- 87% of all lung cancers deaths in the U.S. can be attributed to smoking.
- Smoking causes cancers, heart disease, stroke, and lung diseases (including emphysema, bronchitis, and chronic airway obstruction).
- Lung cancer incidence rates among Hispanics are about half those of non-Hispanic whites because of traditionally lower rates of cigarette smoking. Also, Hispanics who do smoke are less likely to be daily smokers.
- Lung cancer is the third-most commonly diagnosed cancer in Hispanic men and the fourth most common in Hispanic women.
- About 3,200 lung cancer deaths in men and 2,100 deaths in women are expected to occur among Hispanics in 2012. Lung cancer is the leading cause of cancer death among Hispanic men and the second-leading cause among Hispanic women.
- In 2012, there was an estimated 4,700 new cases of lung and bronchus cancer for Hispanic males, and an estimated 4,200 new cases of lung and bronchus cancer for Hispanic females.
- In 2012, there is an estimated 3,200 lung and bronchus deaths for Hispanic males, and an estimated 2,400 lung and bronchus cancer deaths for Hispanic females.

Hispanic Adult Tobacco Use

The following graphs show Umatilla County, Oregon, and U.S. Hispanic adult cigarette smoking rates and age-adjusted mortality rates per 100,000 population for chronic lower respiratory diseases (formerly COPD) and trachea, bronchus and lung cancers in comparison with the Healthy People 2020 objectives. The BRFSS rates shown for Oregon and the U.S. were for Hispanic adults 18 years and older. These graphs show:

♦ Umatilla County Hispanic adult cigarette smoking rate was lower than the rate for Oregon, the U.S. and Healthy People 2020 Goal.
♦ The percentage of tobacco linked deaths in Umatilla County exceeded the state rate each year, from 2005 to 2009.
♦ From 2005 to 2009 the percentage of mothers who smoked during pregnancy in Umatilla County fluctuated slightly from year to year, but was generally higher than the Oregon rate.

(Source: 2012 Assessment, 2011 BRFSS and HP2020)

Hispanic Adult Tobacco Use

Umatilla County Births to Mothers who Smoked
By Race/Ethnicity
2008-2010

Umatilla County Total Number of Live Births
By Race/Ethnicity
2008-2010

(Source for graph: OHA, Demographic Characteristics of Mother by Race/Ethnicity, Umatilla County, 2008-2010, Birth Data)
Hispanic Adult Alcohol Consumption

Key Findings
In 2012, the health assessment indicated that 3% of Umatilla County Hispanic adults were considered frequent drinkers (drank an average of three or more days per week, per CDC guidelines). 44% of Hispanic adults who drank had five or more drinks (for males) or four or more drinks (for females) on one occasion (binge drinking) in the past month. Nine percent of Hispanic adults drove within a couple hours after drinking alcohol.

Umatilla County Adult Alcohol Consumption
- In 2012, more than one-quarter (29%) of the Umatilla County Hispanic adults had at least one alcoholic drink in the past month, increasing to 42% of males The 2011 BRFSS reported current drinker prevalence rates of 59% for Hispanic Oregon adults and 49% for Hispanic U.S. adults.
- Three percent (3%) of Hispanic adults were considered frequent drinkers (drank on an average of three or more days per week).
- Of those who drank, Umatilla County Hispanic adults drank 3.1 drinks per occasion on average, increasing to 4.8 drinks per occasion for those under the age of 30.
- One in eight (12%) Hispanic adults were considered binge drinkers. The 2011 BRFSS reported binge drinking rates of 22% for Oregon Hispanics and 21% for U.S. Hispanic adults
- 44% of those who drank reported they had five or more alcoholic drinks (for males) or four or more alcoholic drinks (for females) on an occasion in the last month and would be considered binge drinkers by definition.
- 9% of Hispanic adults reported driving within a couple hours after having 2 or more alcoholic beverages, increasing to 13% of those under the age of 30.
- 2% of Hispanic adults have used a program or service to help with alcohol problems for themselves or a loved one. 91% of Hispanic adults did not need such a service. Reasons for not using such a program include: had not thought of it (2%), could not afford it (2%), did not know how to find a program (2%), did not want to miss work (1%), fear (1%), stigma of seeking alcohol services (<1%), and other reasons (2%).

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<tr>
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</tr>
</thead>
<tbody>
<tr>
<td>Drank alcohol at least once in past month</td>
<td>29%</td>
<td>51%</td>
<td>59%</td>
<td>49%</td>
</tr>
<tr>
<td>Binge drinker (drank 5 or more drinks for males and 4 or more for females on an occasion)</td>
<td>12%</td>
<td>18%</td>
<td>22%</td>
<td>21%</td>
</tr>
</tbody>
</table>

Excessive alcohol consumption is a primary cause of cirrhosis and liver cancer. Alcohol consumption also increases the risk of cancers of the oral cavity and pharynx, esophagus, larynx, colorectum, and female breast.

The American Cancer Society’s dietary guidelines for cancer prevention and risk reduction state that individuals should limit their alcohol consumption to no more than 2 drinks per day for men and no more than 1 drink per day for women.

Alcohol consumption is of special concern among Hispanics because of their higher rates of liver cancer compared to other population groups.

Approximately 2% of Hispanic women and 4% of Hispanic men reported heavy alcohol consumption, compared to 6% of non-Hispanic white women and 7% of non-Hispanic white men.

(Source: American Cancer Society, Cancer Facts & Figures for Hispanics/Latinos, 2012)
Hispanic Adult Alcohol Consumption

The following graphs show the percentage of Umatilla County Hispanic adults consuming alcohol and the amount consumed on average. Examples of how to interpret the information shown on the first graph include: 67% of all Umatilla County Hispanic adults did not drink alcohol in the past month, 53% of Umatilla County males did not drink and 75% of adult females reported they did not drink in the past month.

Percentages may not equal 100% as some respondents answered “don’t know”

HHG - Personally Interviewed Hispanic Housing Group of North Umatilla County

HHG - Personally Interviewed Hispanic Housing Group of North Umatilla County

Hispanic Adults Average Number of Drinks Consumed Per Occasion

HHG - Personally Interviewed Hispanic Housing Group of North Umatilla County
Hispanic Adult Alcohol Consumption

### Umatilla County Hispanic Adult Drinkers Who Binge Drank in Past Month*

<table>
<thead>
<tr>
<th>Category</th>
<th>Under 30</th>
<th>30-64</th>
<th>65 &amp; Over</th>
<th>Income &lt;$25K</th>
<th>Income $25K Plus</th>
<th>General</th>
<th>Clinic</th>
<th>HHG</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Males</td>
<td>44%</td>
<td>43%</td>
<td>54%</td>
<td>50%</td>
<td>44%</td>
<td>44%</td>
<td>36%</td>
<td>53%</td>
</tr>
<tr>
<td>Total Females</td>
<td>47%</td>
<td>43%</td>
<td>54%</td>
<td>50%</td>
<td>44%</td>
<td>44%</td>
<td>36%</td>
<td>49%</td>
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<tr>
<td>Under 30 Males</td>
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<td></td>
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<tr>
<td>Under 30 Females</td>
<td></td>
<td></td>
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<td></td>
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<td></td>
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<tr>
<td>30-64 Males</td>
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<tr>
<td>30-64 Females</td>
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<td>65 &amp; Over Males</td>
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<td>65 &amp; Over Females</td>
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<tr>
<td>Income &lt;$25K Males</td>
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<td>Income &lt;$25K Females</td>
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<td>Income $25K Plus</td>
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<td>Income $25K Plus Females</td>
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</table>

*Based on adults who have drank alcohol in the past month. Binge drinking is defined as having five or more drinks (for males) or four or more drinks (for females) on an occasion.

HHG - Personally Interviewed Hispanic Housing Group of North Umatilla County

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### Adult Binge Drinkers*

<table>
<thead>
<tr>
<th>Region</th>
<th>2012</th>
<th>2011 Total</th>
<th>Oregon Hispanic 2011</th>
<th>U.S. Hispanic 2011</th>
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</thead>
<tbody>
<tr>
<td>Umatilla Hispanic</td>
<td>12%</td>
<td>18%</td>
<td>22%</td>
<td>21%</td>
</tr>
<tr>
<td>Umatilla Total</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Oregon Hispanic</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>U.S. Hispanic</td>
<td></td>
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</tbody>
</table>

(Source: 2011 BRFSS, 2012 Umatilla County Hispanic Health Assessment)

*Based on all adults. Binge drinking is defined as males having five or more drinks on an occasion, females having four or more drinks on one occasion.
Hispanic Adult Alcohol Consumption

**Binge Drinking**

- The National Institute on Alcohol Abuse and Alcoholism defines binge drinking as a pattern of drinking that brings a person's blood alcohol concentration (BAC) to 0.08 grams percent or above. This typically happens when men consume 5 or more drinks, and when women consume 4 or more drinks, in about 2 hours.

- Binge drinking accounts for more than half of the estimated 80,000 average annual deaths and three quarters of $223.5 billion in economic costs resulting from excessive alcohol consumption in the United States.

- The prevalence of binge drinking among non-Hispanic whites (18.0%) was similar to the prevalence among Hispanics (17.9%), but significantly higher than the prevalence for non-Hispanic blacks (12.7%). The frequency of binge drinking was similar across racial and ethnic groups, but the highest intensity was reported by binge drinkers who were non-Hispanics from other racial and ethnic groups (8.7 drinks) and by Hispanics (8.4 drinks on occasion).

(Source: CDC, Vital Signs: Binge Drinking Prevalence, Frequency, and Intensity Among Adults — United States, 2010)
Hispanic Adult Marijuana and Other Drug Use

**Key Findings**

In 2012, 5% of Umatilla County Hispanic adults had used marijuana during the past 6 months. 8% of Hispanic adults had used medication not prescribed for them or took more than prescribed to feel good or high and/or more active or alert during the past 6 months.

**Adult Drug Use**

- 5% of Umatilla County Hispanic adults had used marijuana in the past 6 months, increasing to 11% of those under the age of 30. 2% of Hispanic adults reported using medical marijuana.
- 2% of Umatilla County Hispanic adults reported using other recreational drugs such as cocaine, heroin, LSD, inhalants, ecstasy, and methamphetamines.
- When asked about their frequency of marijuana and other recreational drugs use in the past six months, 26% of Umatilla County Hispanic adults who used did so almost every day, and 4% did so less than once a month.
- 8% of Hispanic adults had used medication not prescribed for them or they took more than prescribed to feel good or high and/or more active or alert during the past 6 months, increasing to 12% of those ages 65 and older.
- When asked about their frequency of medication misuse in the past six months, 25% of Umatilla County Hispanic adults who used these drugs did so almost every day, and 17% did so less than once a month.
- Umatilla County Hispanic adults indicated they did the following with their unused prescription medication: took as prescribed (41%), threw it in the trash (27%), kept it (20%), flushed it down the toilet (9%), took it to the Medication Collection program (5%), gave it away (2%), sold it (1%), and some other destruction method (11%).

**Substance Use in Hispanics/Latinos**

- In 2010, rates of illicit drug use were lower among Hispanic adults than the national averages for adults. Hispanic adults accounted for 6.6% compared to the national average at 7.9%.
- Hispanic adults who were born in the United States had higher rates of substance use than Hispanic adults who were not born in the United States, regardless of age.
- Among Hispanic adults, substance use varied greatly by subgroup:
  - 13% for Spanish origin (from Spain)
  - 4% for Dominican origin

(Source: Substance Abuse and Mental Health Services Administration (SAMHSA): Behavioral Health and Hispanics/Latinos, 2010)

**Need for Substance Use Treatment among Hispanics**

- Combined 2003 to 2011 data shows that Hispanics were more likely than non-Hispanics to have needed substance use treatment in the past year.
- 9.9% of Hispanics (3.4 million) needed substance use treatment, compared to 9.2% of non-Hispanics (19.7 million) who needed substance use treatment.
- An estimated 3.1 million Hispanics needed specialty treatment, but did not get it.
- Hispanics were less likely than non-Hispanics to have received treatment.
- Among Hispanics who needed but did not receive treatment in the past year, 94.4% did not feel the need for it, 3.6% felt the need for treatment but did not make an effort to get it, and 2% felt the need for treatment and did make an effort to get it.

Hispanic Adult Marijuana and Other Drug Use

The following graphs are data from the 2012 Umatilla County Health Assessment indicating adult marijuana use in the past six months and medication misuse. Examples of how to interpret the information include: 5% of all Umatilla County Hispanic adults used marijuana in the past six months, 11% of Hispanic adults under the age of 30 were current users, and 7% of Hispanic adults with incomes less than $25,000 were current users.
Hispanic Women’s Health

Key Findings

In 2012, about one-third (34%) of Umatilla County Hispanic women over the age of 40 reported having a mammogram in the past year. 37% of Umatilla County Hispanic women ages 19 and over had a clinical breast exam and 38% had a pap smear to detect cancer of the cervix in the past year. The health assessment determined just over one-quarter of Hispanic women (27%) had high blood pressure, 28% had high blood cholesterol, 46% were obese, and 6% were identified as smokers, known risk factors for cardiovascular diseases.

Women’s Health Screenings

♦ In 2012, half (50%) of Umatilla County Hispanic women had a mammogram at some time and more than one-fifth (21%) had this screening in the past year.
♦ About one-third (34%) of Hispanic women ages 40 and over had a mammogram in the past year and 58% had one in the past two years. The 2010 BRFSS reported that 77% of Hispanic women 40 and over in the U.S., and 81% of Hispanic women 50 and over in the U.S. have had a mammogram within the past two years.
♦ 83% of Umatilla County Hispanic women have had a clinical breast exam at some time in their life and 37% had one within the past year.
♦ This assessment has identified that most (90%) Umatilla County Hispanic women have had a pap smear and 38% reported having had the exam in the past year. 63% of Hispanic women had a pap smear in the past two years.

Pregnancy

♦ 36% of Umatilla County Hispanic women had been pregnant in the past 5 years.
♦ During their last pregnancy, Umatilla County Hispanic women: took a multi-vitamin (68%), got a prenatal appointment in the first 3 months (56%), terminated/aborted the pregnancy (21%), experienced perinatal depression (7%), had a miscarriage (4%), experienced domestic violence (3%), and used drugs (1%).

Women’s Health Concerns

♦ Hispanic women used the following as their usual source of services for female health concerns: general or family physician (35%), private gynecologist (13%), family planning clinic (13%), no usual place (11%), community health center (10%), health department clinic (10%), and some other place (1%).
♦ Major risk factors for cardiovascular disease include smoking, obesity, high blood cholesterol, high blood pressure, physical inactivity, and diabetes. In Umatilla County the 2012 health assessment has identified that:
  • 73% of all Hispanic women were overweight or obese.
  • 28% of Hispanic women were diagnosed with high blood cholesterol.
  • 27% of Hispanic women were diagnosed with high blood pressure.
  • 18% of Hispanic women had been diagnosed with diabetes.
  • 6% of all Hispanic women were current smokers.

2012 Adult Comparisons

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Had a mammogram in the past two years (age 40 &amp; over)</td>
<td>58%</td>
<td>67%</td>
<td>N/A</td>
<td>N/A</td>
</tr>
</tbody>
</table>

N/A – Data is not available

U.S. Hispanic Females Leading Types of Death, 2009

Total Deaths: 63,419

1. Cancer (22% of all deaths)
2. Heart Diseases (21%)
3. Stroke (6%)
4. Diabetes (5%)
5. Unintentional Injuries (4%)

Hispanic Women’s Health

The following graph shows the percentage of Umatilla County Hispanic female adults that had various health exams in the past year. Examples of how to interpret the information shown in the graph include: 21% of Umatilla County females have had a mammogram within the past year, 37% have had a clinical breast exam, and 38% have had a Pap smear.

**Umatilla County Hispanic Women's Health Exams Within the Past Year**

<table>
<thead>
<tr>
<th>Health Exam</th>
<th>Total</th>
<th>Under 40</th>
<th>40 &amp; Older</th>
<th>Income &lt;$25K</th>
<th>Income &gt;$25K</th>
<th>General</th>
<th>Clinic</th>
<th>HHG</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mammogram</td>
<td>21%</td>
<td>4%</td>
<td>33%</td>
<td>34%</td>
<td>35%</td>
<td>41%</td>
<td>40%</td>
<td>38%</td>
</tr>
<tr>
<td>Breast Exam</td>
<td>4%</td>
<td>32%</td>
<td>33%</td>
<td>44%</td>
<td>44%</td>
<td>30%</td>
<td>30%</td>
<td>25%</td>
</tr>
<tr>
<td>Pap Smear</td>
<td>34%</td>
<td>34%</td>
<td>30%</td>
<td>46%</td>
<td>46%</td>
<td>30%</td>
<td>30%</td>
<td>47%</td>
</tr>
</tbody>
</table>

**Screening Guidelines for Hispanic Women**

- **Cervix:** Screening should begin approximately 3 years after a woman begins having vaginal intercourse, but no later than 21 years of age. Doctors recommend Pap tests one every year for women. However, women should get screened more often if she has risk factors such as HIV infection or a weak immune system.
- **Colon and rectum:** Beginning at age 50, women should begin screening with one of the examination schedules below:
  - A flexible sigmoidoscopy every 5 years.
  - A double-contrast barium enema every 5 years.
  - Computed tomographic colonography every 5 years.
- **Breast:** The following recommendations for women include:
  - Clinical breast exams about every 3 years for women in their 20s and 30s, and every year for women 40 and older.
  - Yearly mammograms starting at age 40.
  - Knowing how their breasts normally feel and look.
  - Reporting any breast change promptly to their health care providers.

Hispanic Women’s Health

The following graph shows the Oregon age-adjusted mortality rate for heart disease and stroke. The graph shows:

♦ In 2010, the female age-adjusted mortality rate was lower than the male rate for heart disease but higher for stroke.
♦ In 2010, the female U.S. age-adjusted heart disease and stroke mortality rates were 153.7 and 56.9, respectively.

*Note – Rates per 100,000 population
(Source for graphs: OHA, Vital Statistics Mortality)

Hispanic Women and Breast Cancer

Breast cancer is the most commonly diagnosed cancer among Hispanic women. An estimated 17,000 Hispanic women are expected to be diagnosed with breast cancer in 2012. Within the Hispanic population, the incidence rate is 50% lower in foreign-born women than in US-born women. Non-modifiable risk factors for breast cancer include:

❖ Age: A woman’s chance of getting breast cancer increases with age. Rates begin to increase after the age of 40, and are highest in women over 70.
  - Age 20 1 in 1,681  Age 30 1 in 232  Age 40 1 in 69
  - Age 50 1 in 42  Age 60 1 in 29  Age 70 1 in 27

❖ Family history: A family history of certain types of cancer can increase your risk of breast cancer. This may be due to genetic factors, shared lifestyle factors, or other family traits. Women who have one immediate female relative with breast cancer have almost twice the risk of a woman without a family history. Women with more than one immediate female relative with a history of breast cancer have a risk about three to four times higher than women without such a history.

❖ Early menarche: Starting menstrual periods at a young age has a small link to an increase in breast cancer. Women who began their periods before age 12 have about a 20% higher risk compared to those who began their periods after age 14.

❖ Late menopause: The risk for breast cancer increases for women going through menopause at a later age. Women who go through menopause after age 55 have about a 30% higher risk of breast cancer than women who go through menopause before age 45.

The following graphs show the Umatilla County age-adjusted mortality rates per 100,000 population for women’s health with comparison to Healthy People 2020 objectives when available. The graphs show:

♦ From 2005-2009, the Oregon age-adjusted mortality rate for Hispanic female lung cancer was higher than the national rate but extremely lower than the Healthy People 2020 target objective.

♦ The Oregon Hispanic age-adjusted colon/rectum cancer mortality rate for 2005-2009 was lower than the national rate and the Healthy People 2020 target objective.

♦ From 2005-2009, the Oregon age-adjusted Hispanic breast cancer mortality rate was lower than the national rate and the Healthy People 2020 target objective.

*Note: Umatilla County data was suppressed for Uterine and Cervical Cancer due to few reported cases.

**Note: the Healthy People 2020 target rates are not gender specific and are not specifically targeted for Ovarian and Uterine Cancer
**Key Findings**

In 2012, more than one-quarter (26%) of Umatilla County Hispanic males over the age of 50 had a Prostate-Specific Antigen (PSA) test in the past year. One in eight (13%) Hispanic males over the age of 50 had a digital rectal exam in the past year. The health assessment determined that 3% of men had survived a heart attack and 1% had survived a stroke at some time in their life. More than one-quarter (26%) of men had been diagnosed with high blood pressure, 23% had high blood cholesterol, and 18% were identified as smokers, which, along with obesity (37%), are known risk factors for cardiovascular diseases.

**Men’s Health Screenings**

- One-third (33%) of Umatilla County Hispanic males have had a Prostate-Specific Antigen (PSA) test at some time in their life and 17% had one in the past year.
- More than one-third (36%) of men have had a digital rectal exam in their lifetime and 12% had one in the past year.
- 59% of Hispanic males age 50 and over have had a PSA test at some time in their life, and 26% had one in the past year.
- 63% of Hispanic males age 50 and over have had a digital rectal exam at some time in their life, and 13% had one in the past year.
- 27% of men have been taught by a healthcare professional how to do a testicular exam, increasing to 36% of those ages 65 and older.

**Men’s Health Concerns**

- In 2012, the health assessment determined that 3% of men had survived a heart attack and 1% had survived a stroke at some time in their life.
- Major risk factors for cardiovascular disease include smoking, obesity, high blood cholesterol, high blood pressure, physical inactivity, and diabetes. In Umatilla County the 2012 health assessment has identified that:
  - 81% of all Hispanic men were overweight or obese.
  - 26% of all Hispanic men were diagnosed with high blood pressure.
  - 23% of all Hispanic men were diagnosed with high blood cholesterol.
  - 18% of all Hispanic men have been diagnosed with diabetes.
  - 18% of all Hispanic men were current smokers.

**Hispanic Men and Prostate Cancer**

- An estimated 15,400 Hispanic men are expected to be diagnosed with prostate cancer in 2012, making it the most commonly diagnosed cancer among Hispanic men.
- An estimated 1,600 deaths from prostate cancer are expected among Hispanic men in 2012, making prostate cancer the fourth-leading cause of cancer death.
- About 77% of prostate cancers are discovered at a localized stage in Hispanic men compared to 81% in non-Hispanic white men, for which 5-year cause-specific survival is approximately 97% for both groups. The survival rate for those diagnosed at a distant stage is 31.2% among Hispanic men and 28.6% among non-Hispanic whites.

Hispanic Men’s Health

The following graph shows the percentage of Umatilla County Hispanic males surveyed that have had the listed health exams in the past year. Examples of how to interpret the information shown on the graph include: 17% of Umatilla County Hispanic males had a PSA test within the past year and 12% had a digital rectal exam.

Recommended Health Screenings for Hispanic Men

- **Blood Cholesterol Screenings**: Have your cholesterol checked regularly starting at age 35. If you are younger than 35, talk to your doctor about whether to have your cholesterol checked if you smoke, have diabetes, or if heart disease runs in your family.
- **Blood Pressure**: Have your blood pressure checked at least every two years.
- **Colorectal Cancer Tests**: Regular screening for colorectal cancer begins at age 50, unless earlier screenings are recommended based on family history, medical history and lifestyle. Your doctor can help you decide which test is right for you. How often you need to be tested will depend on which test you have.
- **Diabetes Tests**: Have a test to screen for diabetes if you have high blood pressure or high cholesterol.
- **Depression**: If you've felt "down," sad, or hopeless, and have felt little interest or pleasure in doing things for two weeks straight, talk to your doctor about whether he or she can screen you for depression.
- **Sexually Transmitted Diseases**: Talk to your doctor to see whether you should be screened for sexually transmitted diseases, caused by viruses, such as HIV and Herpes.
- **Prostate Cancer Screening**: Talk to your doctor about the possible benefits and harms of prostate cancer screening if you are considering having a prostate-specific antigen (PSA) test in which blood is drawn or digital rectal examination (DRE).

Hispanic Men’s Health

The following graph shows the Oregon age-adjusted mortality rate for heart disease and stroke. The graph shows:
♦ In 2010, the Oregon male age-adjusted mortality rate was higher than the female rate for heart disease but lower for stroke.
♦ In 2010, the U.S. age-adjusted heart disease and stroke mortality rates were 169.5 and 39.7, respectively.

Heart Health Facts for Hispanic Men

- 31% of Mexican American males age 20 and older have Cardiovascular Disease (CVD), 6% have Coronary Heart Disease (CHD), and 2% have had a stroke.
- Among Hispanics males age 20 and older, 28% have high blood pressure.
- In 2010, 15% of Hispanic males age 18 and older smoke cigarettes.
- 50% of Hispanic men age 20 and older have total blood cholesterol levels of 200 mg/dL or higher. Of these, 17% of men have levels of 240 mg/dL or higher. 42% of men have a LDL cholesterol of 130 mg/dL or higher. 32% of men have HDL cholesterol less than 40 mg/dL.
- Using the American Diabetes Association criteria of fasting plasma glucose of 126 mg/dL or more, the prevalence of undiagnosed diabetes among Mexican American men is 6%. The prevalence of physician diagnosed diabetes in Hispanic men is 11%, and 45% of Hispanic men have pre-diabetes.
- Among Mexican Americans age 20 and older, 76% of men are overweight or obese. Of these, 31% of men are obese.

**Hispanic Men’s Health**

The following graph shows the Umatilla County age-adjusted mortality rates per 100,000 population for men’s health with comparison to Healthy People 2020 objectives. The graph shows:

♦ From 2005-2009, the Oregon age-adjusted mortality rate for Hispanic male lung cancer was lower than the U.S. rate and the Healthy People 2020 objective.

♦ The Oregon Hispanic age-adjusted mortality rate from 2005-2009 for colon and rectum cancer was lower than the U.S. rate and Healthy People 2020 objective.

♦ The age-adjusted prostate cancer mortality rate in Oregon for 2005-2009 was lower than the U.S. rate and Healthy People 2020 objective.

*Note: the Healthy People 2020 target rates are not gender specific. (Source: National Cancer Institute, State Cancer Profiles, [http://statecancerprofiles.cancer.gov/index.html](http://statecancerprofiles.cancer.gov/index.html) and Healthy People 2020)*
Hispanic Adult Preventive Medicine and Health Screenings

Key Findings

About two-fifths (42%) of Hispanic adults over the age of 50 have received a colorectal cancer screening at some time in their life. Nearly three-fifths (59%) of Hispanic adults have had a tetanus shot in the past 10 years.

Preventive Medicine

♦ Umatilla Hispanic adults received their last flu shot from the following places: doctor’s office or health maintenance organization (23%), workplace (8%), store/pharmacy (6%), health department (6%), hospital or emergency room (5%), senior/recreation/community center (5%), another type of clinic or health center (4%), and some other place (2%).
♦ Those who did not receive the flu vaccine reported the following reasons for not doing so: did not need it (45%), cost (30%), got sick from it (11%), insurance would not pay for it (2%), time (1%), religious beliefs (1%), vaccine not available (1%), transportation (1%), and other reasons (8%).
♦ Nearly three-fifths (59%) of Hispanic adults have had a tetanus shot in the past 10 years.

Preventive Health Screenings and Exams

♦ Nearly one-fifth (19%) of Hispanic adults have had a colorectal cancer screening at some time in their life, increasing to 42% of those ages 50 and over.
♦ In the past year, 34% of Umatilla County women ages 40 and over have had a mammogram.
♦ In the past year, 26% of men ages 50 and over had a Prostate-Specific Antigen (PSA) test.
♦ See the Women and Men’s Health Section for further prostate, mammogram, clinical breast exam, and Pap smear screening test information for Umatilla County Hispanic adults.
♦ Umatilla County Hispanic adults reported the following as symptoms of a heart attack: chest pain or discomfort (69%), shortness of breath (51%), pain or discomfort in the arms and shoulder (49%), feeling weak, lightheaded, or faint (40%), pain or discomfort in the jaw, neck, or back (32%), and sudden trouble seeing in one or both eyes (25%).
♦ Umatilla County Hispanic adults reported the following as symptoms of stroke: sudden numbness or weakness of face, arm or leg (56%), sudden confusion or trouble speaking (51%), sudden trouble walking, dizziness or loss of balance (44%), severe headache with no known cause (43%), sudden trouble seeing in one or both eyes (36%), and sudden chest pain or discomfort (23%).

Preventive Counseling Services

♦ Umatilla County Hispanic adults indicated that their doctor or other health professional had discussed the following topics with them within the past year: physical activity/exercise (37%), diet/eating habits (33%), immunizations (28%), depression/anxiety/emotional problems (22%), significance of family history (19%), sexual practices (15%), injury prevention (14%), alcohol use when taking prescription drugs (13%), domestic violence (8%), quitting smoking (7%), alcohol use (7%), and illicit drug abuse (6%).
Umatilla County Hispanic Adults Having Discussed Healthcare Topics With Their Healthcare Professional in the Past 12 Months

<table>
<thead>
<tr>
<th>HEALTHCARE TOPICS</th>
<th>2012</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical Activity or Exercise</td>
<td>37%</td>
</tr>
<tr>
<td>Dieting or Eating Habits</td>
<td>33%</td>
</tr>
<tr>
<td>Immunization</td>
<td>28%</td>
</tr>
<tr>
<td>Depression, Anxiety, or Emotional Problems</td>
<td>22%</td>
</tr>
<tr>
<td>Significance of Family Health History</td>
<td>19%</td>
</tr>
<tr>
<td>Sexual Practices Including Family Planning, STDs, AIDS, &amp; Condom Use</td>
<td>15%</td>
</tr>
<tr>
<td>Injury Prevention Such As Safety Belt Use &amp; Helmet Use</td>
<td>14%</td>
</tr>
<tr>
<td>Alcohol Use When Taking Prescription Drugs</td>
<td>13%</td>
</tr>
<tr>
<td>Domestic Violence</td>
<td>8%</td>
</tr>
<tr>
<td>Quitting Smoking</td>
<td>7%</td>
</tr>
<tr>
<td>Alcohol Use</td>
<td>7%</td>
</tr>
<tr>
<td>Drug Use</td>
<td>6%</td>
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</tbody>
</table>

Umatilla County Hispanic Adult Health Screening Results

<table>
<thead>
<tr>
<th>GENERAL SCREENING RESULTS</th>
<th>Total Sample</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diagnosed with High Blood Pressure</td>
<td>26%</td>
</tr>
<tr>
<td>Diagnosed with High Blood Cholesterol</td>
<td>25%</td>
</tr>
<tr>
<td>Diagnosed with Diabetes</td>
<td>18%</td>
</tr>
<tr>
<td>Diagnosed with a Heart Attack</td>
<td>3%</td>
</tr>
<tr>
<td>Diagnosed with a Stroke</td>
<td>2%</td>
</tr>
</tbody>
</table>

(Percentages based on all Umatilla County Hispanic adults surveyed)
Hispanic Environmental Health

Key Findings

Rodents and bed bugs were the two most important perceived environmental health issues that threatened Umatilla County Hispanic adults’ health in the past year.

Environmental Health

♦ Umatilla County Hispanic adults thought the following threatened their health in the past year:
  - Rodents or mice (15%)
  - Bed bugs (10%)
  - Insects (6%)
  - Private well water (4%)
  - Temperature regulation (4%)
  - Mold (2%)
  - Storage of leftover foods (2%)
  - Unsafe water supply (2%)
  - Plumbing problems (1%)
  - Lead paint (1%)
  - Sewage/waste water problems (1%)
  - Safety hazards (1%)
  - Chemicals found in household products (1%)
  - Asbestos (1%)
  - Cockroaches (1%)
  - Radiation (<1%)

Disaster Preparedness

♦ Umatilla County households had the following disaster preparedness supplies: cell phone (72%), working flashlight and working batteries (48%), 3-day supply of nonperishable food for everyone who lives there (39%), 3-day supply of water for everyone in the household (1 gallon of water per person per day) (39%), 3-day supply of prescription medication for each person who takes prescribed medicines (28%), and working battery operated radio and working batteries (27%).

♦ 21% of households did not have any disaster preparedness supplies.

♦ Umatilla County Hispanic adults would use the following as their main method or way of getting information from authorities in a large-scale disaster or emergency: cell phone (54%), television (50%), radio (41%), internet (31%), neighbors (22%), land-line telephone (20%), law enforcement (18%), reverse 911 (14%), social media (12%), print media (10%), CSEPP Radio (7%), and other (1%).

Lead Paint Exposure

In adults, exposure to lead can cause:
♦ Muscle and joint pain
♦ Memory and concentration problems
♦ Nerve disorders
♦ Digestive problems
♦ High blood pressure
♦ Fertility problems (in men and women)
♦ Harm to a developing fetus
♦ Increased chance of high blood pressure during pregnancy


Things You Should Know About Mold

♦ Potential health effects and symptoms associated with mold exposures include allergic reactions, asthma, and other respiratory complaints.
♦ There is no practical way to eliminate all molds and mold spores in the indoor environment; the way to control indoor mold growth is to control moisture.
♦ In areas where there is a perpetual moisture problem, do not install carpeting.
♦ Clean mold off hard surfaces with water and detergent, and dry completely.
♦ If mold is a problem in your home or school, you must clean up the mold and eliminate sources of moisture.

Hispanic Adult Sexual Behavior and Pregnancy Outcomes

Key Findings
In 2012, more than three-fourths (76%) of Umatilla County Hispanic adults had sexual intercourse. 13% of adults had more than one partner. Even though young people aged 15-24 represent only 25% of the sexually experienced population, they acquire nearly half of all STDs (Source: CDC, STDs in Adolescents and Young Adults, 2011 STD Surveillance).

Adult Sexual Behavior
♦ Over three-fourths (76%) of Umatilla County Hispanic adults had sexual intercourse in the past year.
♦ 13% of adults reported they had intercourse with more than one partner in the past year, increasing to 33% of those under the age of 30.
♦ Umatilla County Hispanic adults used the following methods of birth control: abstinence (17%), condoms (17%), tubes tied (15%), hysterectomy (10%), birth control pill (8%), IUD (6%), rhythm method (4%), withdrawal (3%), shots (3%), vasectomy (3%), contraceptive implants (1%), diaphragm (1%), contraceptive patch (<1%), and some other method (1%).
♦ 15% of Umatilla County Hispanic adults were not using any method of birth control.
♦ 7% of adults had been forced to participate in sexual activity when they did not want to, increasing to 9% of females and those with incomes less than $25,000.
♦ Umatilla County Hispanic adults made the following sexual behavior changes in the past year based on what they know about HIV and STDs: had sexual intercourse with the same partner (47%), decreased their number of sexual partners or became abstinent (10%), and always used condoms for protection (9%). 27% did not make any changes.

STDs and Hispanics/Latinos
♦ In 2010, the gonorrhea rate among Hispanics was 49.9 cases per 100,000 population, which was 2.2 times the rate among whites.
♦ Disparity in gonorrhea rates for Hispanics was highest in the Northeast and lowest in the West.
♦ In 2010, the chlamydia rate among Hispanics was 369.6 cases per 100,000 population, which was a 4.4% increase from the 2009 rate of 353.9 cases per 100,000 and nearly three times the rate among whites.
♦ Hispanics/Latinos are disproportionately affected by HIV/AIDS. In 2009, Latinos accounted for 20% of new HIV infections in the U.S. while representing approximately 16% of the total US population.
♦ Latino men accounted for 79% of new infections among all Latinos (21%), in 2009.

Contributing Factors to the HIV Epidemic in Latino Communities
♦ Cultural factors may affect the risk of HIV infection for Hispanics. Some may avoid testing, counseling, or treatment if infected due to fear of discrimination, stigmatization, or immigration status.
♦ Latino men and women are most likely to be infected with HIV as a result of sexual contact with men. Stigma around homosexuality may add to prevention challenges.
♦ Socioeconomic factors such as migration patterns, poverty, lower educational attainment, inadequate health insurance, limited access to health care or language barriers add to Latino HIV infection rates.
♦ Hispanic immigrants may be less likely to access HIV prevention services, get an HIV test, or receive adequate treatment and care due to fear of disclosure.
Hispanic Adult Sexual Behavior and Pregnancy Outcomes

The following graph shows the sexual activity of the Umatilla County Hispanic adults. Examples of how to interpret the information in the graph include: 63% of all Umatilla County Hispanic adults had one sexual partner in the last 12 months and 13% had more than one, and 57% of males had one partner in the past year.

Respondents were asked: “During the past 12 months, with how many different people have you had sexual intercourse?”

HHG - Personally Interviewed Hispanic Housing Group of North Umatilla County
Hispanic Adult Sexual Behavior and Pregnancy Outcomes

The following graphs show Umatilla County Hispanic chlamydia and gonorrhea disease cases per 100,000 population, reported by the Oregon Health Authority Epidemiology User System, ORPHEUS. The graphs show:

♦ Umatilla County Hispanic chlamydia cases fluctuated from 2007 to 2011.
♦ From 2007 to 2011, the number of total Hispanic female chlamydia cases was much greater than the number of total Hispanic male cases.
♦ In 2011, the Umatilla County Hispanic/Latino rate for new chlamydia cases was 384.6 per 100,000 population. (Source: OHA, ORPHEUS, Sexually Transmitted Infections, 2011)
♦ In 2011, the Oregon rate for new chlamydia cases was 356.1 per 100,000 population. (Source: OHA, ORPHEUS, Sexually Transmitted Infections, 2011)

(Source for graphs: OHA, Oregon Public Health Epi-User System (ORPHEUS) Reported STIs, through 2011)
Hispanic Adult Sexual Behavior and Pregnancy Outcomes

♦ Umatilla County Hispanic gonorrhea cases fluctuated from 2007 to 2011.
♦ From 2007 to 2011, there was a greater total number of Hispanic female gonorrhea cases, than Hispanic male cases in Umatilla County.
♦ In 2011, the Umatilla County Hispanic/Latino rate for new gonorrhea cases for the total population was 10.7 per 100,000 population. (Source: OHA, ORPHEUS, Sexually Transmitted Diseases, 2011)
♦ In 2011, the Oregon rate for new gonorrhea cases for the total population was 38.8 per 100,000 population. (Source: OHA, ORPHEUS, Sexually Transmitted Diseases, 2011)

![Annualized Count of Gonorrhea Cases for Umatilla Total Population & Umatilla Hispanic Population](chart1)

![Annualized Count of Gonorrhea Cases for Umatilla Hispanics, by Gender](chart2)

(Source for graphs: OHA, Oregon Public Health Epi-User System (ORPHEUS) Reported STIs, through 2011)
Hispanic Adult Sexual Behavior and Pregnancy Outcomes

Pregnancy Outcomes
*Please note that the pregnancy outcomes data includes all births to adults and adolescents.

♦ The Umatilla County Hispanic birth rate was greater than the Oregon Hispanic birth rate, from 2008 to 2010.

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Oregon HIV Infection Cases for Hispanic Adults by Gender
2008 to 2012

(Source for graph: OHA, Oregon Public Health Epi-User System (ORPHEUS), HIV/AIDS Reports and Data, updated 10/11/2012)
*Note: Data for 2012 reported through September 30

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Umatilla County Total Live Births By Race/Ethnicity
2008-2010

(Source for graph: OHA, Oregon Public Health Epi-User System (ORPHEUS))

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Hispanic Adult Sexual Behavior and Pregnancy Outcomes

Pregnancy Outcomes
*Please note that the pregnancy outcomes data includes all births to adults and adolescents.

♦ The percentage of births to Hispanic unwed mothers in Umatilla County was 41% of all unwed births and 19% of total births in Umatilla County, from 2008 to 2010.
♦ In 2010, 49% of Oregon (53% U.S.) births were to unwed Hispanic mothers. (Source: CDC, National Vital Statistics Report, August 28, 2012)

(Source for graphs: OHA, Medical or Health Characteristics of Birth, updated May 7, 2012)

(Umatilla County Unwed Births By Race/Ethnicity 2008-2010)

(Source for graph: OHA, Demographic Characteristics of Mother by Race/Ethnicity, Umatilla County, 2008-2010, Birth Data)
Pregnancy Outcomes

*Please note that the pregnancy outcomes data includes all births to adults and adolescents

♦ From 2008 to 2010, 33% of births with 1st trimester prenatal care were to Hispanic mothers.
♦ In 2011, 64% of Umatilla County (75% Oregon) mothers received prenatal care during the first trimester (OHA, Birth Data, 2011).
♦ In 2010, 6.2% of Oregon (7.0% U.S.) live births were low birth weight babies to Hispanic mothers (Source: CDC, National Vital Statistics Report, August 28, 2012)

*Low Birth Weight is defined as weighing less than 2,500 grams or 5 pounds, 8 ounces.

This graph shows mothers who delivered low birth weight babies between 28 and 40 weeks of gestation. (Source for graphs: OHA, Demographic Characteristics of Mother by Race/Ethnicity, Umatilla County, 2008-2010, Birth Data)
Hispanic Quality of Life and Safety

Key Findings
In 2012, the health assessment identified that 22% of Umatilla County Hispanic adults kept a firearm in or around their home. The most limiting health problems were arthritis, back or neck problems, and walking problems.

Impairments and Health Problems
♦ The following impairments or health problems limited Umatilla County Hispanic adults’ activities: arthritis (12%), back or neck problems (11%), walking problems (11%), diabetes (8%), depression, anxiety, or emotional problems (6%), high blood pressure (6%), obesity (5%), eye/vision problems (5%), fractures, bone/joint injuries (4%), lung/breathing problems (3%), hearing problems (2%), heart problems (2%), tobacco dependency (1%), cancer (1%), learning disabilities (1%), developmental disabilities (<1%), stroke-related problems (<1%), and other impairments (4%).
♦ Umatilla County Hispanic adults’ activities were limited because of: physical problems (17%), emotional problems (3%), and mental problems (1%).
♦ In the past month, 21% of Umatilla County Hispanic adults provided regular care or assistance to a friend or family member who had a health problem, long-term illness or disability.

Safety
♦ More than one-fifth (22%) of Umatilla County Hispanic adults kept a firearm in or around their home. 1% of adults reported they were unlocked and loaded.
♦ 15% of Umatilla County Hispanic adults had deliberately tested all of the smoke detectors in their home in the past month; 39% had tested them in the past 6 months; and 49% has tested the smoke detectors in their home within the past year. 7% reported having no smoke detectors in their Umatilla County home.

Impact of Arthritis on Hispanics
♦ Arthritis is the leading cause of disability in the United States, affecting 1 in 5 adults.
♦ Arthritis causes more pain and limitations for Hispanics than for whites.
♦ Hispanics were 46% less likely to report having arthritis than whites. However, Hispanics with arthritis were almost twice as likely to report severe joint pain and work limitations attributed to their arthritis when compared to whites.
♦ The reason for the racial and ethnic differences, while unknown, may result from a lack of access to health care, language barriers and cultural differences.

Hispanic Quality of Life and Safety

Firearm Injury Prevention

According to The American College of Emergency Physicians (ACEP), the improper use of firearms results in death and injury. Below are some of the College supported efforts to prevent firearm-related injuries and deaths:

- Aggressively enforce current laws against illegal possession, purchase, sale, or use of firearms.
- Encourage the creation and evaluation of community and school-based education programs targeting the prevention of firearm injuries.
- Educate the public about the risks of improperly stored firearms, especially in the home.
- Increase funding for the development, evaluation, and implementation of evidence-based programs and policies to reduce firearm-related injury and death.
- Work with stakeholders to develop comprehensive strategies to prevent firearm injury and death.

(Source: Firearm Injury Prevention, Annals of Emergency Medicine, v. 57 issue 6, 2011, p. 691)

Hispanic Firearm Facts

- In 2010, Hispanic adults in Oregon were the second leading race/ethnicity to die from gun-related deaths, followed by non-Hispanic Whites. (Source: OHA, Vital Statistics, County Data Book, Mortality 2010)
- In 2008, the age-adjusted firearm-related mortality rate for the U.S. Hispanic population was 10.3.

(Source: Centers for Disease Control and Prevention, Health, United States, 2011, http://www.cdc.gov/nchs/data/hus/hus11.pdf#040)
Hispanic Social Context

Key Findings
In 2012, 6% of Umatilla County Hispanic adults were threatened or abused in the past year. 15% of Hispanic adults needed help with general daily needs, such as food, clothing, shelter or paying utility bills.

Social Context
- In the past 30 days, 15% of Umatilla County Hispanic adults needed help meeting their general daily needs such as food, clothing, shelter or paying utility bills, increasing to 23% of those with annual incomes less than $25,000.
- Umatilla County Hispanic adults sought assistance for the following in the past year: food (23%), utilities (8%), clothing (7%), free tax preparation (5%), rent/mortgage (3%), legal aid services (3%), transportation (2%), home repair (1%), credit counseling (1%), and emergency shelter (1%).
- More than one-third (35%) Umatilla County Hispanic adults attempted to get assistance from a social service agency. They attempted to get assistance from the following: a community agency (39%), friends or family (4%), and somewhere else (4%). 53% of Hispanic adults attempted to get assistance from multiple places, and 1% did not know where to look for assistance.
- 13% of Hispanic adults reported that there was a community group that advocated for them.
- Umatilla County Hispanic adults experienced the following situations in the past year: a close family member had to go in the hospital (25%), death of a family member or close friend (18%), had bills they could not pay (15%), someone in their household lost their job (9%), someone in their household had their work hours reduced (9%), moved to a new address (9%), someone close to them had a problem with drinking or drugs (8%), fear their neighborhood is unsafe (6%), became separated or divorced (5%), had someone homeless living with them (4%), someone in their household went to jail (3%), were hit or slapped by their spouse or partner (2%), were homeless (1%), were involved in a physical fight (1%), and their child was hit or slapped by their spouse or partner (<1%).
- 6% of Umatilla County Hispanic adults were threatened or abused in the past year. They were threatened or abused by the following: a spouse or partner (41%), someone outside the home (18%), a child (9%), another family member (9%), a parent (5%), and someone else (27%).
- Those who were abused were abused in the following ways: verbally (73%), emotionally (55%), physically (41%), financially (23%), and sexually (23%).
- Hispanic adults had lived in Umatilla County for: 5 or more years (76%), 3-4 years (11%), 1-2 years (9%), and less than 1 year (4%).
- Hispanic adults indicated that Umatilla County residents need more education about the following: drug abuse (49%), teenage pregnancy (44%), violence (40%), driving under the influence-DUI (37%), distracted driving (36%), bullying (33%), parenting classes (31%), suicide prevention (26%), sexting (24%), speeding (24%), seat belt/restraint usage (23%), tobacco use (22%), bicycle safety (15%), falls (9%), and other issues (6%).

Smoke Alarm Safety Tips
- Install smoke alarms in every bedroom, outside each separate sleeping area and on every level of the home, including the basement. Interconnect all smoke alarms throughout the home. When one sounds, they all sound.
- Test alarms at least monthly by pushing the test button.
- Smoke rises; install smoke alarms following manufacturer's instructions high on a wall or on a ceiling. Save manufacturer's instructions for testing and maintenance.
- Replace batteries in all smoke alarms at least once a year. If an alarm “chirps”, warning the battery is low, replace the battery right away.
- Replace all smoke alarms, including alarms that use 10-year batteries and hard-wired alarms, when they are 10 years old or sooner if they do not respond properly.

Hispanic Mental Health and Suicide

Key Findings
In 2012, 5% of Umatilla County Hispanic adults attempted suicide. 26% of Hispanic adults felt sad, blue or depressed almost every day for two or more weeks in a row.

Adult Mental Health
♦ Umatilla County Hispanic adults were diagnosed or treated for the following mental health issues: mood disorder (8%), anxiety disorder (6%), and some other mental health disorder (1%).
♦ 6% of Hispanic adults have taken medications for a mental health disorder.
♦ In the past year, Umatilla County Hispanic adults experienced the following almost every day for two weeks or more in a row: did not get enough rest or sleep (30%), felt worried, tense, or anxious (30%), felt sad, blue or depressed (26%), had high stress (25%), and felt very healthy and full of energy (15%).
♦ Five percent (5%) of Hispanic adults attempted suicide.
♦ Umatilla County Hispanic adults received the social and emotional support they needed from the following: family (70%), friends (46%), church (25%), neighbors (7%), a professional (4%), community (4%), self-help group (2%), and someone else (3%).
♦ 19% of Hispanic adults have hit their head hard enough that they were dizzy, had a concussion, or were knocked out.

Hispanics and Mental Health in the U.S.
♦ In 2010, the percentage of Hispanics aged 18 or older with past year mental illness was 18%.
♦ 5% of Hispanics suffered from a serious mental illness.
♦ The percentage of Hispanics who suffered from a major depressive episode was 6%.
♦ 4.3% of Hispanics experience a co-occurring mental illness and substance abuse disorder.

(Source: Substance Abuse and Mental Health Services Administration (SAMHSA) : Behavioral Health and Hispanics/Latinos, 2010)

Mental Health Needs of Elderly Hispanics
♦ Approximately one-fifth of Hispanic and other, non-Hispanic adults age 65 years or older reported that they were not receiving the support they need, compared to one-tenth of older white adults.
♦ Hispanics had a higher prevalence of frequent mental distress (FMD) compared to other races.
  o Hispanics: 13%
  o Black, non-Hispanics: 11%
  o White, non-Hispanics: 8%
♦ Hispanic adults age 50 or older reported more current depression than other races.
  o Hispanics: 11%
  o Black, non-Hispanics: 9%
  o White, non-Hispanics: 7%
♦ Hispanic adults age 50 or older were more likely to report a lifetime diagnosis of an anxiety disorder compared to other races.
  o Hispanics: 15%
  o White, non-Hispanics: 13%
  o Black, non-Hispanics: 11%

Key Barriers to Mental Health Treatment for Hispanics/Latinos
♦ Language barriers
♦ Stigma associated with mental illness
♦ Economic barriers (cost, lack of insurance)
♦ Mental health professional shortages
♦ Lack of awareness about mental health issues and services
♦ Lack of appropriate intervention strategies
♦ Lack of culturally appropriate services
♦ Lack of education and pervasive poverty

Hispanic Mental Health and Suicide

The following graphs show the Oregon crude suicide mortality rates per 100,000 population and the number of suicide deaths by age group for the state. The graphs show:

♦ From 2003-2010, 40% of all Oregon suicide deaths occurred to those ages 45-64 years old.

Hispanic Oral Health

Key Findings
The 2012 health assessment project has determined that nearly half (46%) of Umatilla County Hispanic adults had visited a dentist or dental clinic in the past year. The 2010 BRFSS reported that 62% of U.S. Hispanic adults had visited a dentist or dental clinic in the previous twelve months.

Access to Dental Care
♦ In the past year, 46% of Umatilla County Hispanic adults had visited a dentist or dental clinic, decreasing to 34% of those under the age of 30.
♦ When asked how long it had been since their last visit to a dentist or dental clinic, 13% of Umatilla County Hispanic adults reported that it had been more than one year but less than two years, 12% reported that it had been more than two years but less than five years, and 13% responded it had been five or more years ago.
♦ More than three-fifths (62%) of Umatilla County Hispanic adults with dental insurance have been to the dentist in the past year, compared to 48% of those without dental insurance.
♦ When asked the main reason for not visiting a dentist in the last year, 60% said cost, 40% had no dental insurance, 14% had no reason to go, 8% did not have/ know a dentist, 5% could not get to the office/clinic, 3% had other priorities, and 5% had other reasons they did not visit the dentist.
♦ More than two-fifths (42%) of Hispanic adults had one or more of their permanent teeth removed, increasing to 79% of those ages 65 and over.

Oral Health and Hispanics
♦ In the U.S Hispanics self-rate their overall oral health as:
  o Excellent 20%
  o Good 47%
  o Fair 21%
  o Poor 11%
♦ More than one-third (36%) of U.S. Hispanics say they have experienced oral health problems severe enough to impact daily activities in 2011, compared to one in five (22%) among the general population.
♦ Number of licensed dentists in the state: 3,454
♦ Number of licensed dental hygienists in the state: 3,284


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<th>Adult Oral Health</th>
<th>Within the Past Year</th>
<th>Within the Past 2 Years</th>
<th>Within the Past 5 Years</th>
<th>5 or More years</th>
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<td>12%</td>
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Total may not equal 100% as respondents answered do not know.

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<td>Adults who have visited the dentist in the past year</td>
<td>46%</td>
<td>63%</td>
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<td>62%*</td>
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<td>Adults who had one or more permanent teeth removed</td>
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<td>40%</td>
<td>31%*</td>
<td>42%*</td>
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<tr>
<td>Adults 65 years and older who had all of their permanent teeth removed</td>
<td>21%</td>
<td>17%</td>
<td>N/A</td>
<td>14%*</td>
</tr>
</tbody>
</table>

N/A – data is not available
* 2010 BRFSS data is available
Hispanic Oral Health

The following graphs provide information about the frequency of Umatilla County adult and youth dental visits. Examples of how to interpret the information on the first graph include: 46% of all Umatilla County Hispanic adults had been to the dentist in the past year, 34% of those under the age of 30 and 38% of those with incomes less than $25,000.

Hispanics and Oral Health: Obstacles to Treatment

- Hispanics often lack awareness of available oral health services and lack of oral health knowledge.
- Language barriers negatively affect pathways to health care for the Hispanic/Latino community.
- Hispanics/Latinos tend to seek less information both before and after being diagnosed with a particular health condition.
- Research shows that Hispanics want more information about health and are interested in the health care issues relevant to their Latino community.
- Hispanics report more difficulties in communicating with their physicians than do non-Hispanic Whites.

**Hispanic Parenting**

**Key Findings**
The 2012 Health Assessment identified that Hispanic parents took their child to the doctor an average of 1.4 times for regular checkups and 1.0 times for dental visits in the past year. About four-fifths (81%) of children spent less than one hour of unsupervised time after school on an average day.

**Parenting**

♦ In the past year, Hispanic parents took their child to the doctor for: regular checkups (an average of 1.4 times), dental visits (1.0 times), other visits for an illness (1.0 times), ear infections (0.3 times), injuries (0.2 times), asthma (0.1 times), behavioral problems (0.1 times), and head lice (0.01 times).

♦ Umatilla County Hispanic parents indicated they knew which immunizations their child needs through the following: physician or nurse told them (70%), school/day care (38%), their own personal files (30%), received a card in the mail (13%), memory (6%), and other (3%). 4% indicated they did not know which immunizations their child needed.

♦ 81% of children spent less than one hour of unsupervised time after school on an average day. 17% spent 1-2 hours, 1% spent 3-4 hours, and 1% spent more than 4 hours per day unsupervised.

♦ Hispanic parents discussed the following with their 12-to-17 year old in the past year: eating habits (70%), screen time (56%), respectful communication (55%), exercise (54%), academic performance (48%), dating and relationships (46%), negative effects of marijuana and other drugs (45%), abstinence and how to refuse sex (43%), it is not okay for adults to give minors alcohol (40%), negative effects of alcohol (40%), negative effects of tobacco (37%), school/legal consequences of using tobacco/alcohol/other drugs (37%), social media issues (35%), bullying (30%), body image/weight (29%), drinking and driving (29%), energy drinks (28%), condom use/safer sex/STD prevention (23%), refusal skills/peer pressure (20%), anxiety/depression/suicide (17%), birth control (14%), sexting (12%), and hearing protection (9%).

♦ Hispanic parents used the following programs for their infant-to-4-year-old child: WIC (75%), Head Start (34%), out-of-home daycare (10%), public health home visits (4%), and Healthy Start (2%).

**Out-of-School Time Programs for Hispanic Children**

Out-of-school-time programs can enhance the lives of children of immigrants because these programs can offer resources that may be unavailable at home or at school. Programs provide:

♦ Structure and supervision
♦ Emotional support
♦ Cultural support
♦ Additional academic assistance
♦ Connection with counseling services

(Source: Child Trends, Children of Latino Immigrants and Out-of-School Programs, 2011)

**Tips for Parents to Help Children Maintain a Healthy Weight**

The percentage of overweight children and adolescents 6 through 11 years of age in 2007-2011 is higher in racial/ethnic minorities: Mexican American girls (22.4%), Mexican American boys (24.3%), Non-Hispanic White girls (14.0%), and Non-Hispanic White boys (18.6%). According to the CDC, parents should:

♦ Encourage healthy eating habits by providing fruits, vegetables, whole grains, low-fat or non-fat dairy products, and lean meats and proteins for their family.

♦ Limit or reduce the consumption of calorie-rich, sugary and/or saturated fat in your home.

♦ Add physical activity into the family's routine and encourage their child to join. Examples of moderate intensity physical activity include playing tag, jumping rope, playing soccer, swimming, and dancing.

♦ Limit the time their children watch television, play video games, or surf the web to no more than 2 hours per day.

Key Findings
The 2012 Health Assessment reported that 35% of Hispanic adult clinic population did not have health care coverage. 29% of adults had high blood pressure. 8% were current smokers. 24% needed help meeting their general daily needs such as food, clothing, shelter, or paying utility bills.

General Health and Health Care
♦ The data below compares Umatilla County Hispanic adult clinic populations who were given the survey in a clinic to those Hispanic adults who received a general mail survey.
♦ In 2012, 35% of the Umatilla County Hispanic adult clinic population did not have health care coverage, compared to 32% other Umatilla County Hispanic adults.
♦ 32% of the Umatilla County Hispanic adult clinic population rated their health as excellent or very good, compared to 34% of other Umatilla County Hispanic adults.
♦ The Hispanic adult clinic population was less likely to have been diagnosed with:
  o Arthritis (21% compared to 29% of other Umatilla Count Hispanic adults).
  o High blood pressure (29% compared to 31% of other Umatilla County Hispanic adults).
  o Diabetes (15% compared to 20% of other Umatilla County Hispanic adults).
  o High blood cholesterol (17% compared to 39% of other Umatilla County Hispanic adults).
♦ Hispanic adult clinic population was more likely to have been diagnosed with:
  o Cancer (12% compared to 5% of other Umatilla County Hispanic adults).
  o Asthma (10% compared to 7% of other Umatilla County Hispanic adults).
♦ Hispanic adult clinic population was less likely to:
  o Have had a heart attack (4% compared to 5% of other Umatilla County Hispanic adults).
  o Have had their blood cholesterol checked in the past year (38% compared to 53% of other Umatilla County Hispanic adults).
  o Have had a colorectal cancer screening at some time in their life (20% compared to 27% of other Umatilla County Hispanic adults).
  o Have had a mammogram in the past year (17% compared to 30% of other Umatilla County Hispanic adults).
  o Have had a breast exam in the past year (39% compared to 46% of other Umatilla County Hispanic adults).
  o Have had a PSA test in the past year (0% compared to 21% of other Umatilla County Hispanic adults).
  o Be overweight or obese (66% compared to 77% of other Umatilla County Hispanic adults).
  o Be a current smoker (8% compared to 10% of other Umatilla County Hispanic adults).
  o Have consumed alcohol in the past 30 days (26% compared to 31% of other Umatilla County Hispanic adults).
  o Have kept firearms in their household (14% compared to 25% of all Umatilla County General Hispanic adults).

Hispanic Health Statistics
❖ Hispanic adults tend to have a lower prevalence of chronic health conditions than the U.S. adult population.
❖ Exceptions to the lower prevalence of chronic conditions in the Hispanic population are diabetes and obesity.
❖ 71% of Hispanic adults received information about health and health care from their doctor within the past year.

Hispanic Adult Clinic Population Health

- Hispanic adult clinic population were more likely to:
  - Have had a stroke (2% compared to 1% of other Umatilla County Hispanic adults).
  - Have used marijuana in the past 6 months (4% compared to 2% of other Umatilla County Hispanic adults).
  - Have had multiple sexual partners in the past year (13% compared to 1% of all Umatilla County adults).
  - Have been forced to have sexual activity when they did not want to (12% compared to 8% of all Umatilla County adults).
  - Eat 5 or more servings of fruits and vegetables per day (11% compared to 8% of other Umatilla County Hispanic adults).
  - Have needed help meeting their general daily needs such as food, clothing, shelter, or paying utility bills (24% compared to 14% of all Umatilla County General Hispanic adults).
  - Have been threatened or abused in the past year (10% compared to 5% of all Umatilla County General Hispanic adults).
  - Have attempted suicide in the past year (4% compared to 0% of other Umatilla County Hispanic adults).
  - Have had a pap smear in the past year (47% compared to 44% of other Umatilla County Hispanic adults).
  - Have had a digital rectal exam in the past year (40% compared to 13% of other Umatilla County Hispanic adults).
  - Have been to the doctor for a routine check-up in the past year (55% compared to 51% of the rest of Umatilla County General Hispanic adults).
  - Have been to the dentist in the past year (63% compared to 61% of other Umatilla County Hispanic adults).
  - Have had one or more permanent teeth removed (48% compared to 45% of all Umatilla County General Hispanic adults).
Hispanic Housing Group Health

Key Findings
The 2012 Health Assessment reported that 56% of Hispanic Housing Group (HHG) adults did not have health care coverage. 22% of adults kept firearms in and around their household. 15% of women had a mammogram in the past year.

General Health and Health Care
♦ The data below compares the Personally Interviewed Hispanic Housing Group of North Umatilla County (HHG) to those Hispanic adults who received a general mail survey.
♦ In 2012, 56% of Umatilla County HHG adults did not have health care coverage, compared to 32% of other Umatilla County Hispanic adults.
♦ 26% of HHG adults rated their health as excellent or very good, compared to 34% of the rest of Umatilla County General Hispanic adults.
♦ Hispanic Housing Group adults were less likely than other Umatilla County Hispanic adults to have been diagnosed with:
  o High blood pressure (21% compared to 31%).
  o High blood cholesterol (19% compared to 39%).
  o Diabetes (18% compared to 20%).
  o Arthritis (16% compared to 29%).
  o Asthma (4% compared to 7%).
♦ Hispanic Housing Group adults were less likely compared to other Umatilla County Hispanic adults to:
  o Have had a heart attack (2% compared to 5%).
  o Have had their blood cholesterol checked in the past year (29% compared to 53%).
  o Have had a tetanus shot in the past 10 years (52% compared to 66%).
  o Have had a colorectal cancer screening at some time in their life (13% compared to 27%).
  o Have had a mammogram in the past year (15% compared to 30%).
  o Have had a breast exam in the past year (25% compared to 46%).
  o Have had a pap smear in the past year (22% compared to 44%).
  o Have had a PSA test in the past year (15% compared to 21%).
  o Have had a digital rectal exam in the past year (9% compared to 13%).
  o Have been to the doctor for a routine check-up in the past year (30% compared to 51%).
  o Have been to the dentist in the past year (25% compared to 61%).
  o Have had one or more permanent teeth removed (37% compared to 45%).
  o Have consumed alcohol in the past 30 days (29% compared to 31%).
  o Have been forced to have sexual activity when they didn’t want to (4% compared to 8%).
  o Have needed help meeting their general daily needs such as food, clothing, shelter, or paying utility bills (11% compared to 14%).
  o Have kept firearms in their household (22% compared to 25%).

Hispanic Health Care Access Statistics
❖ According to the Pew Hispanic Center and Robert Wood Johnson Foundation Latino Health Survey, 30% of foreign born Hispanic adults lack a usual health care provider.
❖ The foreign-born who are, primarily Spanish speaking, lack U.S. citizenship, or who have been in the U.S. for a short period of time, are less likely than other Latinos to lack a usual source for medical treatment.
❖ Those Hispanic adults least likely to have a usual health care provider are as follows:
  o Men
  o Young (18-29 years old)
  o Have less than a high school diploma
  o Uninsured

Hispanic Housing Group adults were more likely than other Umatilla County Hispanic adults to:

- Have angina or coronary heart disease (5% compared to 3%).
- Have had a stroke (2% compared to 1%).
- Be a current smoker (12% compared to 10%).
- Have used marijuana in the past 6 months (8% compared to 2%) Hispanic adults).
- Have misused prescription drugs in the past 6 months (9% compared to 7%).
- Have had multiple sexual partners in the past year (22% compared to 1%).
- Be overweight or obese (80% compared to 77%).
- Eat 5 or more servings of fruits and vegetables per day (20% compared to 8%).
- Have been threatened or abused in the past year (6% compared to 5%).
- Have attempted suicide in the past year (8% compared to 0%).
# Umatilla County Health Assessment
## Hispanic Information Sources

<table>
<thead>
<tr>
<th>Source</th>
<th>Data Used</th>
<th>Website</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>American Heart Association</strong></td>
<td>♦ Statistical Fact Sheet 2012 Update for Hispanics/Latinos</td>
<td><a href="http://www.heart.org/ids/groups/heart-public/@wcm/@sop/@smd/documents/downloadable/ucm_319572.pdf">http://www.heart.org/ids/groups/heart-public/@wcm/@sop/@smd/documents/downloadable/ucm_319572.pdf</a></td>
</tr>
<tr>
<td><strong>American Psychiatric Association (APA), 2010.</strong></td>
<td>♦ Barriers to Care</td>
<td><a href="http://www.psych.org">www.psych.org</a></td>
</tr>
<tr>
<td><strong>CDC, Morbidity and Mortality Weekly Report,</strong></td>
<td>♦ Vital Signs: Binge Drinking Prevalence, Frequency, and Intensity Among Adults — United States, 2010</td>
<td><a href="http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6101a4.htm">http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6101a4.htm</a></td>
</tr>
</tbody>
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</tr>
</thead>
<tbody>
<tr>
<td>CDC, Seasonal Influenza (Flu)</td>
<td>♦ Flu Vaccination Coverage</td>
<td><a href="http://www.cdc.gov/flu/professionals/vaccination/coverage_1112estimates.htm">http://www.cdc.gov/flu/professionals/vaccination/coverage_1112estimates.htm</a></td>
</tr>
<tr>
<td>CDC, STD Surveillance, 2011</td>
<td>♦ STDs in Adolescents and Young Adults</td>
<td><a href="http://www.cdc.gov/std/stats11/adol.htm">http://www.cdc.gov/std/stats11/adol.htm</a></td>
</tr>
<tr>
<td>Environmental Protection Agency (EPA)</td>
<td>♦ Lead Paint Exposure 2012 ♦ Mold and Moisture</td>
<td><a href="http://www.epa.gov">http://www.epa.gov</a></td>
</tr>
</tbody>
</table>
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## Hispanic Information Sources

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<thead>
<tr>
<th>Source</th>
<th>Data Used</th>
<th>Website</th>
</tr>
</thead>
<tbody>
<tr>
<td>National Center for Chronic Disease Prevention and Health Promotion, CDC</td>
<td>♦ Arthritis in Hispanic groups&lt;br&gt;♦ Healthy Weight&lt;br&gt;♦ Nutrition and physical activity&lt;br&gt;♦ Obesity statistics</td>
<td><a href="http://www.cdc.gov">www.cdc.gov</a></td>
</tr>
</tbody>
</table>
## Umatilla County Health Assessment
### Hispanic Information Sources

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<thead>
<tr>
<th>Source</th>
<th>Data Used</th>
<th>Website</th>
</tr>
</thead>
<tbody>
<tr>
<td>Oregon Health &amp; Science University, 2001-2013</td>
<td>♦ Diabetes Statistics</td>
<td><a href="http://www.ohsu.edu/xd/health/health-information/topic-by-id.cfm?ContentTypeId=85&amp;ContentId=P00353">http://www.ohsu.edu/xd/health/health-information/topic-by-id.cfm?ContentTypeId=85&amp;ContentId=P00353</a></td>
</tr>
<tr>
<td>Substance Abuse and Mental Health Services Administration (SAMHSA), 2010</td>
<td>♦ Substance Use&lt;br&gt;♦ Mental Health</td>
<td><a href="http://www.samhsa.gov/obhe/hispanic-latino.aspx">http://www.samhsa.gov/obhe/hispanic-latino.aspx</a></td>
</tr>
<tr>
<td>U. S. Department of Commerce, Census Bureau; Bureau of Economic Analysis, Hispanic/Latino population</td>
<td>♦ American Community Survey 1 to 3 year estimates&lt;br&gt;♦ Oregon and Umatilla County 2011 Census demographic information&lt;br&gt;♦ Oregon and U.S. health insurance sources&lt;br&gt;♦ Small Area Income and Poverty Estimates&lt;br&gt;♦ Federal Poverty Thresholds</td>
<td><a href="http://www.census.gov">www.census.gov</a></td>
</tr>
</tbody>
</table>
# List of Acronyms and Terms

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>AI/AN</td>
<td>American Indian or Alaska Native</td>
</tr>
<tr>
<td>Adult</td>
<td>Defined as 19 years of age and older.</td>
</tr>
<tr>
<td>Age-Adjusted Mortality Rates</td>
<td>Death rate per 100,000 adjusted for the age distribution of the population.</td>
</tr>
<tr>
<td>Binge drinking</td>
<td>Consumption of five alcoholic beverages or more (for males) or four or more alcoholic beverages (for females) on one occasion.</td>
</tr>
<tr>
<td>BMI</td>
<td>Body Mass Index is defined as the contrasting measurement/relationship of weight to height.</td>
</tr>
<tr>
<td>BRFSS</td>
<td>Behavior Risk Factor Surveillance System, an adult survey conducted by the CDC.</td>
</tr>
<tr>
<td>CDC</td>
<td>Centers for Disease Control and Prevention.</td>
</tr>
<tr>
<td>Current Smoker</td>
<td>Individual who has smoked at least 100 cigarettes in their lifetime and now smokes daily or on some days.</td>
</tr>
<tr>
<td>Crude Mortality Rates</td>
<td>Number of deaths/estimated mid-year population times 100,000.</td>
</tr>
<tr>
<td>HHG</td>
<td>Personally Interviewed Hispanic Housing Group of North Umatilla County</td>
</tr>
<tr>
<td>Health Indicator</td>
<td>A measure of the health of people in a community, such as cancer mortality rates, rates of obesity, or incidence of cigarette smoking.</td>
</tr>
<tr>
<td>High Blood Cholesterol</td>
<td>240 mg/dL and above</td>
</tr>
<tr>
<td>High Blood Pressure</td>
<td>Systolic ≥140 and Diastolic ≥ 90</td>
</tr>
<tr>
<td>N/A</td>
<td>Data not available.</td>
</tr>
<tr>
<td>OHA</td>
<td>Oregon Health Authority</td>
</tr>
<tr>
<td>Acronym</td>
<td>Definition</td>
</tr>
<tr>
<td>---------</td>
<td>------------</td>
</tr>
<tr>
<td>Race/Ethnicity</td>
<td><strong>Census 2010:</strong> U.S. Census data consider race and Hispanic origin separately. Census 2010 adhered to the standards of the Office of Management and Budget (OMB), which define Hispanic or Latino as “a person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race.” Data are presented as “Hispanic or Latino” and “Not Hispanic or Latino.” Census 2010 reported five race categories including: White, Black or African American, American Indian &amp; Alaska Native, Asian, Native Hawaiian and Other Pacific Islander. Data reported, “White alone” or “Black alone”, means the respondents reported only one race.</td>
</tr>
<tr>
<td>YPLL/65</td>
<td>Years of Potential Life Lost before age 65. Indicator of premature death.</td>
</tr>
</tbody>
</table>
# Umatilla County Hispanic Sample Demographic Profile*

<table>
<thead>
<tr>
<th>Variable</th>
<th>2012 Hispanic Survey Sample</th>
<th>Umatilla County Hispanic Census 2010</th>
<th>Oregon Hispanic Census 2010</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Age</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>20-29</td>
<td>23.0%</td>
<td>17.3%</td>
<td>17.3%</td>
</tr>
<tr>
<td>30-39</td>
<td>18.6%</td>
<td>14.9%</td>
<td>16.8%</td>
</tr>
<tr>
<td>40-49</td>
<td>19.1%</td>
<td>11.6%</td>
<td>11.2%</td>
</tr>
<tr>
<td>50-59</td>
<td>19.9%</td>
<td>6.6%</td>
<td>6.2%</td>
</tr>
<tr>
<td>60 plus</td>
<td>12.2%</td>
<td>4.4%</td>
<td>4.6%</td>
</tr>
<tr>
<td><strong>Marital Status†</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Married Couple</td>
<td>59.8%</td>
<td>46.8%</td>
<td>47.0%</td>
</tr>
<tr>
<td>Never been married/member of an unmarried couple</td>
<td>18.0%</td>
<td>40.4%</td>
<td>40.1%</td>
</tr>
<tr>
<td>Divorced/Separated</td>
<td>13.0%</td>
<td>11.4%</td>
<td>10.9%</td>
</tr>
<tr>
<td>Widowed</td>
<td>5.5%</td>
<td>1.4%</td>
<td>2.0%</td>
</tr>
<tr>
<td><strong>Education†</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Less than High School Diploma</td>
<td>46.9%</td>
<td>54.6%</td>
<td>44.9%</td>
</tr>
<tr>
<td>High School Diploma</td>
<td>25.2%</td>
<td>23.5%</td>
<td>23.6%</td>
</tr>
<tr>
<td>Some college/ College graduate</td>
<td>23.5%</td>
<td>21.8%</td>
<td>31.5%</td>
</tr>
<tr>
<td><strong>Income (Families)</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>$14,999 and less</td>
<td>22.9%</td>
<td>21.4%</td>
<td>14.7%</td>
</tr>
<tr>
<td>$15,000 to $24,999</td>
<td>26.0%</td>
<td>12.5%</td>
<td>16.5%</td>
</tr>
<tr>
<td>$25,000 to $49,999</td>
<td>19.2%</td>
<td>32.5%</td>
<td>34.1%</td>
</tr>
<tr>
<td>$50,000 to $74,999</td>
<td>7.8%</td>
<td>18.0%</td>
<td>17.5%</td>
</tr>
<tr>
<td>$75,000 or more</td>
<td>5.3%</td>
<td>15.6%</td>
<td>17.2%</td>
</tr>
</tbody>
</table>

* The percents reported are the actual percent within each category who responded to the survey. The data contained within the report however are based on weighted data (weighted by age, race, sex, and income). Percents may not add to 100% due to missing data (non-responses).

† The Oregon and Umatilla County Census percentages are slightly different than the percent who responded to the survey. Marital status is calculated for those individuals 15 years and older. Education is calculated for those 25 years and older.
## Hispanic Demographics

### Umatilla County Hispanic Population by Age Groups and Gender

#### U.S. Census 2010

<table>
<thead>
<tr>
<th>Category</th>
<th>Total</th>
<th>Males</th>
<th>Females</th>
</tr>
</thead>
<tbody>
<tr>
<td>Umatilla County</td>
<td>18,107</td>
<td>9,823</td>
<td>8,284</td>
</tr>
<tr>
<td>0-4 years</td>
<td>2,300</td>
<td>1,166</td>
<td>1,134</td>
</tr>
<tr>
<td>1-4 years</td>
<td>1844</td>
<td>950</td>
<td>894</td>
</tr>
<tr>
<td>&lt; 1 year</td>
<td>456</td>
<td>216</td>
<td>240</td>
</tr>
<tr>
<td>1-2 years</td>
<td>943</td>
<td>496</td>
<td>447</td>
</tr>
<tr>
<td>3-4 years</td>
<td>901</td>
<td>454</td>
<td>447</td>
</tr>
<tr>
<td>5-9 years</td>
<td>2,117</td>
<td>1,080</td>
<td>1,037</td>
</tr>
<tr>
<td>5-6 years</td>
<td>872</td>
<td>466</td>
<td>406</td>
</tr>
<tr>
<td>7-9 years</td>
<td>1,245</td>
<td>614</td>
<td>631</td>
</tr>
<tr>
<td>10-14 years</td>
<td>1,918</td>
<td>967</td>
<td>951</td>
</tr>
<tr>
<td>10-12 years</td>
<td>1,150</td>
<td>579</td>
<td>571</td>
</tr>
<tr>
<td>13-14 years</td>
<td>768</td>
<td>388</td>
<td>380</td>
</tr>
<tr>
<td>12-18 years</td>
<td>2,653</td>
<td>1,399</td>
<td>1,254</td>
</tr>
<tr>
<td>15-19 years</td>
<td>1,864</td>
<td>1,029</td>
<td>835</td>
</tr>
<tr>
<td>15-17 years</td>
<td>1,121</td>
<td>621</td>
<td>500</td>
</tr>
<tr>
<td>18-19 years</td>
<td>743</td>
<td>408</td>
<td>335</td>
</tr>
<tr>
<td>20-24 years</td>
<td>1,603</td>
<td>931</td>
<td>672</td>
</tr>
<tr>
<td>25-29 years</td>
<td>1,532</td>
<td>896</td>
<td>636</td>
</tr>
<tr>
<td>30-34 years</td>
<td>1,387</td>
<td>784</td>
<td>603</td>
</tr>
<tr>
<td>35-39 years</td>
<td>1,303</td>
<td>694</td>
<td>609</td>
</tr>
<tr>
<td>40-44 years</td>
<td>1,141</td>
<td>627</td>
<td>514</td>
</tr>
<tr>
<td>45-49 years</td>
<td>952</td>
<td>542</td>
<td>410</td>
</tr>
<tr>
<td>50-54 years</td>
<td>752</td>
<td>434</td>
<td>318</td>
</tr>
<tr>
<td>55-59 years</td>
<td>445</td>
<td>248</td>
<td>197</td>
</tr>
<tr>
<td>60-64 years</td>
<td>298</td>
<td>166</td>
<td>132</td>
</tr>
<tr>
<td>65-69 years</td>
<td>214</td>
<td>103</td>
<td>111</td>
</tr>
<tr>
<td>70-74 years</td>
<td>119</td>
<td>70</td>
<td>49</td>
</tr>
<tr>
<td>75-79 years</td>
<td>88</td>
<td>48</td>
<td>40</td>
</tr>
<tr>
<td>80-84 years</td>
<td>47</td>
<td>23</td>
<td>24</td>
</tr>
<tr>
<td>85-89 years</td>
<td>20</td>
<td>11</td>
<td>9</td>
</tr>
<tr>
<td>90-94 years</td>
<td>6</td>
<td>3</td>
<td>3</td>
</tr>
<tr>
<td>95-99 years</td>
<td>1</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>100-104 years</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>105-109 years</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>110 years &amp; over</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Total 85 years and over</td>
<td>27</td>
<td>15</td>
<td>12</td>
</tr>
<tr>
<td>Total 65 years and over</td>
<td>495</td>
<td>259</td>
<td>236</td>
</tr>
<tr>
<td>Total 19 years and over</td>
<td>10,253</td>
<td>5,777</td>
<td>4,476</td>
</tr>
</tbody>
</table>
## General Hispanic Demographic Characteristics
(Source: U.S. Census Bureau, Census 2010)

### Total Hispanic Population

<table>
<thead>
<tr>
<th>Year</th>
<th>Population</th>
</tr>
</thead>
<tbody>
<tr>
<td>2010</td>
<td>18,107</td>
</tr>
<tr>
<td>2000</td>
<td>11,366</td>
</tr>
</tbody>
</table>

Largest City—Hermiston

<table>
<thead>
<tr>
<th>Year</th>
<th>Hispanic Population</th>
</tr>
</thead>
<tbody>
<tr>
<td>2010</td>
<td>5,852 100%</td>
</tr>
<tr>
<td>2000</td>
<td>3,168 100%</td>
</tr>
</tbody>
</table>

### Population By Race/Ethnicity

<table>
<thead>
<tr>
<th>Race/Ethnicity</th>
<th>2010</th>
<th>2000</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Population</td>
<td>76,725</td>
<td>100%</td>
</tr>
<tr>
<td>White Alone</td>
<td>67,745</td>
<td>88.3%</td>
</tr>
<tr>
<td>Hispanic or Latino (of any race)</td>
<td>18,107</td>
<td>23.6%</td>
</tr>
<tr>
<td>African American</td>
<td>467</td>
<td>0.6%</td>
</tr>
<tr>
<td>American Indian and Alaska Native</td>
<td>1,434</td>
<td>1.9%</td>
</tr>
<tr>
<td>Asian</td>
<td>765</td>
<td>1.0%</td>
</tr>
<tr>
<td>Two or more races</td>
<td>3,175</td>
<td>4.1%</td>
</tr>
<tr>
<td>Other</td>
<td>2,874</td>
<td>3.7%</td>
</tr>
</tbody>
</table>

### Hispanic Population By Age

<table>
<thead>
<tr>
<th>Age Group</th>
<th>2010</th>
<th>2000</th>
</tr>
</thead>
<tbody>
<tr>
<td>Under 5 years</td>
<td>2,300</td>
<td>12.7%</td>
</tr>
<tr>
<td>5 to 19 years</td>
<td>5,899</td>
<td>32.6%</td>
</tr>
<tr>
<td>20 to 24 years</td>
<td>1,603</td>
<td>8.9%</td>
</tr>
<tr>
<td>25 to 44 years</td>
<td>5,363</td>
<td>29.7%</td>
</tr>
<tr>
<td>45 to 64 years</td>
<td>2,447</td>
<td>13.6%</td>
</tr>
<tr>
<td>65 years and more</td>
<td>495</td>
<td>2.8%</td>
</tr>
</tbody>
</table>

**Median age (years)** 23

### Household By Type

2006-2010 ACS 5-year estimates

<table>
<thead>
<tr>
<th>Type</th>
<th>2010</th>
<th>2000</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Households</td>
<td>4,186</td>
<td>100%</td>
</tr>
<tr>
<td>Family Households (families)</td>
<td>3,660</td>
<td>87.4%</td>
</tr>
<tr>
<td>Married-Couple Family Households</td>
<td>2,176</td>
<td>52.0%</td>
</tr>
<tr>
<td>Male household, no wife present</td>
<td>498</td>
<td>11.9%</td>
</tr>
<tr>
<td>Female Householder, No Husband Present</td>
<td>986</td>
<td>23.6%</td>
</tr>
<tr>
<td>Non-family Households</td>
<td>526</td>
<td>12.6%</td>
</tr>
<tr>
<td>Householder living alone</td>
<td>399</td>
<td>9.5%</td>
</tr>
<tr>
<td>65 years and over</td>
<td>73</td>
<td>1.7%</td>
</tr>
</tbody>
</table>

**Average Household Size** 3.60 people

**Average Family Size** 3.75 people
### General Hispanic Demographic Characteristics, Continued
(Source: U.S. Census Bureau, Census 2010)

2006-2010 ACS 5-year estimates

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>Estimate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Median Monthly Owner Costs</td>
<td>$1,007</td>
</tr>
<tr>
<td>Housing Units with a Mortgage</td>
<td>1,478</td>
</tr>
<tr>
<td>Median Monthly Owner Costs (Not Mortgaged)</td>
<td>$312</td>
</tr>
<tr>
<td>Renter-Occupied</td>
<td>2,137</td>
</tr>
<tr>
<td>No Telephone Service</td>
<td>161</td>
</tr>
<tr>
<td>Lacking Complete Kitchen Facilities</td>
<td>20</td>
</tr>
<tr>
<td>Lacking Complete Plumbing Facilities</td>
<td>64</td>
</tr>
</tbody>
</table>

### Hispanic/Latino Selected Social Characteristics
(Source: U.S. Census Bureau, Census 2010)

2006-2010 ACS 5-year estimates

#### School Enrollment

<table>
<thead>
<tr>
<th>Grade Level</th>
<th>Population 3 Years and Over Enrolled In School</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nursery &amp; Preschool</td>
<td>312 (5.3%)</td>
</tr>
<tr>
<td>Kindergarten</td>
<td>331 (5.7%)</td>
</tr>
<tr>
<td>Elementary School (Grades 1-8)</td>
<td>3,051 (52.3%)</td>
</tr>
<tr>
<td>High School (Grades 9-12)</td>
<td>1,410 (24.2%)</td>
</tr>
<tr>
<td>College or Graduate School</td>
<td>733 (12.6%)</td>
</tr>
</tbody>
</table>

#### Educational Attainment

<table>
<thead>
<tr>
<th>Education Level</th>
<th>Population 25 Years and Over</th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt; 9th Grade Education</td>
<td>2,757 (36.3%)</td>
</tr>
<tr>
<td>9th to 12th Grade, No Diploma</td>
<td>1,391 (18.3%)</td>
</tr>
<tr>
<td>High School Graduate (Includes GED Equivalency)</td>
<td>1,786 (23.5%)</td>
</tr>
<tr>
<td>Some College, No Degree</td>
<td>889 (11.7%)</td>
</tr>
<tr>
<td>Associate Degree</td>
<td>376 (5.0%)</td>
</tr>
<tr>
<td>Bachelor’s Degree</td>
<td>325 (4.3%)</td>
</tr>
<tr>
<td>Graduate Or Professional Degree</td>
<td>63 (0.8%)</td>
</tr>
<tr>
<td>Percent High School Graduate or Higher</td>
<td>3,439 (45.3%)</td>
</tr>
<tr>
<td>Percent Bachelor’s Degree or Higher</td>
<td>388 (5.1%)</td>
</tr>
</tbody>
</table>
### Hispanic/Latino Selected Social Characteristics, Continued
(Source: U.S. Census Bureau, Census 2010)

2006-2010 ACS 5-year estimates

#### Marital Status
Population 15 Years and Over
- Never Married: 4,325 (40.4%)
- Now Married, Excluding Separated: 5,005 (46.8%)
- Separated: 354 (3.3%)
- Widowed: 154 (1.4%)
- Divorced: 865 (8.1%)
  - Female: 391 (3.7%)

#### Grandparents As Caregivers
- Grandparent Responsible for Grandchildren: 52 (100%)
  - 30 to 59 years old: 52 (100%)
  - 60 years and over: 0 (0.0%)

### Hispanic Selected Economic Characteristics
(Source: U.S. Census Bureau, Census 2010)

2006-2010 ACS 5-year estimates

#### Employment Status
Population 16 to 64 years
- In Labor Force: 7,202 (69.8%)
- Not In Labor Force: 3,115 (30.2%)

Females 16 to 64 years
- In Labor Force: 2,822 (61.9%)
- Not In Labor Force: 1,740 (38.1%)
## Hispanic Umatilla County Profile

### Hispanic Selected Economic Characteristics, Continued
(Source: U.S. Census Bureau, Census 2010)

2006-2010 ACS 5-year estimates

#### Occupations

<table>
<thead>
<tr>
<th>Occupation</th>
<th>Employed Civilian Population 16 Years and Over</th>
<th>6,198</th>
<th>100%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Management, Professional, and Related Occupations</td>
<td></td>
<td>667</td>
<td>10.8%</td>
</tr>
<tr>
<td>Sales and Office Occupations</td>
<td></td>
<td>700</td>
<td>11.3%</td>
</tr>
<tr>
<td>Service Occupations</td>
<td></td>
<td>1,051</td>
<td>17.0%</td>
</tr>
<tr>
<td>Production, Transportation, and Material Moving Occupations</td>
<td></td>
<td>1,990</td>
<td>32.1%</td>
</tr>
<tr>
<td>Natural Resources, Construction, and Maintenance Occupations</td>
<td></td>
<td>1,790</td>
<td>28.9%</td>
</tr>
</tbody>
</table>

#### Leading Industries

<table>
<thead>
<tr>
<th>Industry</th>
<th>Employed Civilian Population 16 Years and Over</th>
<th>6,198</th>
<th>100%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Educational, health and social services</td>
<td></td>
<td>655</td>
<td>10.6%</td>
</tr>
<tr>
<td>Trade (retail and wholesale)</td>
<td></td>
<td>850</td>
<td>13.8%</td>
</tr>
<tr>
<td>Manufacturing</td>
<td></td>
<td>1,163</td>
<td>18.8%</td>
</tr>
<tr>
<td>Arts, entertainment, recreation, accommodation, and food services</td>
<td></td>
<td>580</td>
<td>9.4%</td>
</tr>
<tr>
<td>Professional, scientific, management, administrative, and waste management services</td>
<td></td>
<td>378</td>
<td>6.1%</td>
</tr>
<tr>
<td>Transportation and warehousing, and utilities</td>
<td></td>
<td>241</td>
<td>3.9%</td>
</tr>
<tr>
<td>Finance, insurance, real estate and rental and leasing</td>
<td></td>
<td>76</td>
<td>1.2%</td>
</tr>
<tr>
<td>Other services (except public administration)</td>
<td></td>
<td>148</td>
<td>2.4%</td>
</tr>
<tr>
<td>Construction</td>
<td></td>
<td>344</td>
<td>5.6%</td>
</tr>
<tr>
<td>Public administration</td>
<td></td>
<td>224</td>
<td>3.6%</td>
</tr>
<tr>
<td>Information</td>
<td></td>
<td>15</td>
<td>0.2%</td>
</tr>
<tr>
<td>Agriculture, forestry, fishing and hunting, and mining</td>
<td></td>
<td>1,524</td>
<td>24.6%</td>
</tr>
</tbody>
</table>

#### Class of Worker

<table>
<thead>
<tr>
<th>Class of Worker</th>
<th>Employed Civilian Population 16 Years and Over</th>
<th>6,198</th>
<th>100%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Private Wage and Salary Workers</td>
<td></td>
<td>5,398</td>
<td>87.1%</td>
</tr>
<tr>
<td>Government Workers</td>
<td></td>
<td>701</td>
<td>11.3%</td>
</tr>
<tr>
<td>Self-Employed Workers in Own Not Incorporated Business</td>
<td></td>
<td>99</td>
<td>1.6%</td>
</tr>
<tr>
<td>Unpaid Family Workers</td>
<td></td>
<td>0</td>
<td>0.0%</td>
</tr>
</tbody>
</table>

#### Median Earnings

<table>
<thead>
<tr>
<th>Earnings Description</th>
<th>Median Earnings</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male, Full-time, Year-Round Workers</td>
<td>$26,803</td>
</tr>
<tr>
<td>Female, Full-time, Year-Round Workers</td>
<td>$28,475</td>
</tr>
</tbody>
</table>
Hispanic Umatilla County Profile

*Hispanic Selected Economic Characteristics, Continued*
*(Source: U.S. Census Bureau, Census 2010)*

*2006-2010 ACS 5-year estimates*

**Household Income**

<table>
<thead>
<tr>
<th>Income Range</th>
<th>Households</th>
<th>% of Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt; $10,000</td>
<td>4,186</td>
<td>100%</td>
</tr>
<tr>
<td>$10,000 to $14,999</td>
<td>428</td>
<td>10.2%</td>
</tr>
<tr>
<td>$15,000 to $24,999</td>
<td>209</td>
<td>5.0%</td>
</tr>
<tr>
<td>$25,000 to $34,999</td>
<td>639</td>
<td>15.3%</td>
</tr>
<tr>
<td>$35,000 to $49,999</td>
<td>672</td>
<td>16.1%</td>
</tr>
<tr>
<td>$50,000 to $74,999</td>
<td>812</td>
<td>19.4%</td>
</tr>
<tr>
<td>$75,000 to $99,999</td>
<td>825</td>
<td>19.7%</td>
</tr>
<tr>
<td>$100,000 to $149,999</td>
<td>402</td>
<td>9.6%</td>
</tr>
<tr>
<td>$150,000 to $199,999</td>
<td>175</td>
<td>4.2%</td>
</tr>
<tr>
<td>$200,000 or more</td>
<td>14</td>
<td>0.3%</td>
</tr>
</tbody>
</table>

**Median Household Income**  
$37,591

**Family Income**

<table>
<thead>
<tr>
<th>Income Range</th>
<th>Families</th>
<th>% of Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt; $10,000</td>
<td>3,660</td>
<td>100%</td>
</tr>
<tr>
<td>$10,000 to $14,999</td>
<td>434</td>
<td>11.9%</td>
</tr>
<tr>
<td>$15,000 to $24,999</td>
<td>348</td>
<td>9.5%</td>
</tr>
<tr>
<td>$25,000 to $34,999</td>
<td>458</td>
<td>12.5%</td>
</tr>
<tr>
<td>$35,000 to $49,999</td>
<td>597</td>
<td>16.3%</td>
</tr>
<tr>
<td>$50,000 to $74,999</td>
<td>594</td>
<td>16.2%</td>
</tr>
<tr>
<td>$75,000 to $99,999</td>
<td>659</td>
<td>18.0%</td>
</tr>
<tr>
<td>$100,000 to $149,999</td>
<td>371</td>
<td>10.1%</td>
</tr>
<tr>
<td>$150,000 to $199,999</td>
<td>175</td>
<td>4.8%</td>
</tr>
<tr>
<td>$200,000 or more</td>
<td>14</td>
<td>0.4%</td>
</tr>
</tbody>
</table>

**Median Family Income**  
$34,855

**Per Capita Income**  
$10,781

*2006-2010 ACS 5-year estimates*

**Poverty Status in the past 12 months**

<table>
<thead>
<tr>
<th>Category</th>
<th>% Poverty Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>All people (in the past 12 months)</td>
<td>27.6%</td>
</tr>
<tr>
<td>People in families (in the past 12 months)</td>
<td>26.9%</td>
</tr>
</tbody>
</table>
Selected Economic Characteristics, Continued
(Source: U.S. Bureau of Economic Analysis)

Bureau of Economic Analysis (BEA) Per Capita Personal Income Figures

<table>
<thead>
<tr>
<th>Income</th>
<th>Rank of Oregon counties</th>
</tr>
</thead>
<tbody>
<tr>
<td>BEA Per Capita Personal Income 2011</td>
<td>$30,701 26th of 36 counties</td>
</tr>
<tr>
<td>BEA Per Capita Personal Income 2010</td>
<td>$29,349 25th of 36 counties</td>
</tr>
<tr>
<td>BEA Per Capita Personal Income 2009</td>
<td>$29,110 25th of 36 counties</td>
</tr>
<tr>
<td>BEA Per Capita Personal Income 2008</td>
<td>$29,210 28th of 36 counties</td>
</tr>
<tr>
<td>BEA Per Capita Personal Income 2000</td>
<td>$21,944 25th of 36 counties</td>
</tr>
<tr>
<td>BEA Per Capita Personal Income 1999</td>
<td>$21,108 24th of 36 counties</td>
</tr>
</tbody>
</table>

(BEA PCPI figures are greater than Census figures for comparable years due to deductions for retirement, Medicaid, Medicare payments, and the value of food stamps, among other things)

Employment Statistics

<table>
<thead>
<tr>
<th>Category</th>
<th>Umatilla</th>
<th>Oregon</th>
</tr>
</thead>
<tbody>
<tr>
<td>Labor Force</td>
<td>38,003</td>
<td>1,944,663</td>
</tr>
<tr>
<td>Employed</td>
<td>34,642</td>
<td>1,783,409</td>
</tr>
<tr>
<td>Unemployed</td>
<td>3,361</td>
<td>161,254</td>
</tr>
<tr>
<td>Unemployment Rate* in December 2012</td>
<td>8.0</td>
<td>8.4</td>
</tr>
<tr>
<td>Unemployment Rate* in November 2012</td>
<td>8.1</td>
<td>8.4</td>
</tr>
<tr>
<td>Unemployment Rate* in December 2011</td>
<td>8.4</td>
<td>9.0</td>
</tr>
</tbody>
</table>

*Rate equals unemployment divided by labor force.
(Source: Oregon Employment Department, March 2013, Obtained from: http://www.qualityinfo.org/olumiz/OlmisPortal?zineid=2b)
**Hispanic Umatilla County Profile**

### Estimated Poverty Status in 2010

<table>
<thead>
<tr>
<th>Age Groups</th>
<th>Number</th>
<th>90% Confidence Interval</th>
<th>Percent</th>
<th>90% Confidence Interval</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Umatilla County</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>All ages in poverty</td>
<td>11,172</td>
<td>9,203 to 13,141</td>
<td>15.5%</td>
<td>15.2 to 15.4</td>
</tr>
<tr>
<td>Ages 0-17 in poverty</td>
<td>4,232</td>
<td>3,283 to 5,181</td>
<td>21.3%</td>
<td>16.5 to 26.1</td>
</tr>
<tr>
<td>Ages 5-17 in families in poverty</td>
<td>2,777</td>
<td>2,088 to 3,466</td>
<td>19.5%</td>
<td>14.7 to 24.3</td>
</tr>
<tr>
<td>Median household income</td>
<td>$43,691</td>
<td>41,144 to 46,238</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Oregon</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>All ages in poverty</td>
<td>596,649</td>
<td>1,746,640 to 1,796,168</td>
<td>15.8%</td>
<td>15.6 to 16.0</td>
</tr>
<tr>
<td>Ages 0-17 in poverty</td>
<td>184,511</td>
<td>178,153 to 190,869</td>
<td>21.7%</td>
<td>21.0 to 22.4</td>
</tr>
<tr>
<td>Ages 5-17 in families in poverty</td>
<td>119,412</td>
<td>113,929 to 124,895</td>
<td>19.5%</td>
<td>18.6 to 20.4</td>
</tr>
<tr>
<td>Median household income</td>
<td>$46,536</td>
<td>46,018 to 47,054</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>United States</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>All ages in poverty</td>
<td>46,215,956</td>
<td>45,975,650 to 46,456,262</td>
<td>15.3%</td>
<td>15.2 to 15.4</td>
</tr>
<tr>
<td>Ages 0-17 in poverty</td>
<td>15,749,129</td>
<td>15,621,395 to 15,876,863</td>
<td>21.6%</td>
<td>21.4 to 21.8</td>
</tr>
<tr>
<td>Ages 5-17 in families in poverty</td>
<td>10,484,513</td>
<td>10,394,015 to 10,575,011</td>
<td>19.8%</td>
<td>19.6 to 20.0</td>
</tr>
<tr>
<td>Median household income</td>
<td>$50,046</td>
<td>49,982 to 50,110</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>


### Federal Poverty Thresholds in 2012 by Size of Family and Number of Related Children Under 18 Years of Age

<table>
<thead>
<tr>
<th>Size of Family Unit</th>
<th>No Children</th>
<th>One Child</th>
<th>Two Children</th>
<th>Three Children</th>
<th>Four Children</th>
<th>Five Children</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Person &lt;65 years</td>
<td>$11,945</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 Person 65 and &gt;</td>
<td>$11,011</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 people Householder &lt;65 years</td>
<td>$15,374</td>
<td>$15,825</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 People Householder 65 and &gt;</td>
<td>$13,878</td>
<td>$15,765</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 People</td>
<td>$17,959</td>
<td>$18,480</td>
<td>$18,498</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 People</td>
<td>$23,681</td>
<td>$24,069</td>
<td>$23,283</td>
<td>$23,634</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 People</td>
<td>$28,558</td>
<td>$28,974</td>
<td>$28,087</td>
<td>$27,400</td>
<td>$26,981</td>
<td></td>
</tr>
<tr>
<td>6 People</td>
<td>$32,847</td>
<td>$32,978</td>
<td>$32,298</td>
<td>$31,647</td>
<td>$30,678</td>
<td>$30,104</td>
</tr>
<tr>
<td>7 People</td>
<td>$37,795</td>
<td>$38,031</td>
<td>$37,217</td>
<td>$36,651</td>
<td>$35,594</td>
<td>$34,362</td>
</tr>
<tr>
<td>8 People</td>
<td>$42,271</td>
<td>$42,644</td>
<td>$41,876</td>
<td>$41,204</td>
<td>$40,249</td>
<td>$39,038</td>
</tr>
<tr>
<td>9 People or &gt;</td>
<td>$50,849</td>
<td>$51,095</td>
<td>$50,416</td>
<td>$49,845</td>
<td>$48,908</td>
<td>$47,620</td>
</tr>
</tbody>
</table>