The Latino community in Multnomah County has been growing rapidly over the last two decades and people of Hispanic descent (Latinos) now comprise an estimated 12% of the overall county population. This estimate takes into account the fact that many sources undercount Latinos.¹

National estimates indicate that the rapid growth will continue in this youthful population. Consider the following county statistics:

- The median age for Latinos is 25 years compared to 39 years for non-Latino Whites.
- More than 40% of the Latino population is 19 years of age or under, versus 18% for non-Latino Whites.
- There are more than twice as many Latino children under five (12%) as there are non-Latino White children under five (5%). (See figures 1 and 2.)

By 2050, the Latino population in Multnomah County is expected to roughly double in size. About two of every ten county residents will be Latino. Many of them will be children or young adults, a population developing health habits for life. Efforts now to prevent chronic disease, and promote health and well-being are long-term investments that can reap substantial benefits.

**Other Demographic Factors**

About three-quarters of all Latinos in the county are originally from Mexico. The remainder come from other parts of Latin America. Although about half of the overall Latino population is US-born and half foreign-born, most Latino children were born in the US.

National data show that more than half of Latino children are second-generation (a US-born child of at least one foreign-born parent), and 37% are third-generation (US-born of US-born parents).² Statewide data from the Student Wellness Survey indicate that about half of Latino students speak Spanish at home.
Multnomah County’s Latino population is disproportionately affected by poverty and social disadvantage, as evidenced by these sobering statistics:

- Almost three times as many Latino children live in poverty than non-Latino White children.
- More than 40% of Latino youth live in single parent households compared with 27% of non-Latino White youth.
- Unstable living situations, such as living in shelters, hotels or temporarily with others, are more common for Latino youth.
- More than twice as many Latinos under 18 years of age are uninsured (13% versus 6% for non-Latino Whites).

Poverty and family instability are factors in academic failure, and indeed high school graduation rates are lower for Latino youth. Data from 2013 indicate that 52% of Latino youth in Multnomah County failed to graduate in four years with a regular diploma. Finally, unemployment levels for persons 16 years or older are higher (11% versus 8% for non-Latino Whites).

Health Risk Behaviors
Limited access to social and economic opportunities is known to have negative health consequences. In addition, with greater acculturation, second generation immigrants to the US often lose access to factors that promoted health among their parents, such as social relationships and extended families. Second generation immigrants are more likely to adopt negative health habits, such as poor diet and physical inactivity. This phenomenon appears to be occurring among Latino youth, creating a pathway to negative health outcomes and greater health disparities.

Latino youth face a high prevalence of risk factors for cardiovascular disease, diabetes, and other chronic diseases. The 2012 Communities Putting Prevention to Work Multnomah County Youth Risk Behavior Survey** (CPPW-YRBS) reports that:

- Almost one in three Latino youths (33%) consider themselves overweight or very overweight (versus 29% of non-Latino White youths); almost half (48%) are trying to lose weight (versus 39% for non-Latino Whites).
- Intake of sugar-sweetened beverages, like soda, was higher for Latinos—21% of Latinos drank one or more a day in the previous week, compared to 11% of non-Latino Whites.
- Purchase of fruit-flavored beverages at school was much higher for Latino students than non-Latino Whites (33% compared with 12%).
- Fewer than one in five Latino youth met the CDC standard of exercising for at least 60 minutes per day in the previous week, similar to the rate for non-Latino Whites.
- 8% of Latino youth use tobacco. This rate is comparable to non-Latino White youth at 7%.

Taken together, these data paint a sobering picture in which Latino youth are on par with—or, in some cases, are exceeding—the negative health habits of other Multnomah County youth. These behaviors are putting a generation at risk for preventable chronic diseases in adulthood.

Mental Health, Violence, and Substance Abuse
Behavioral health issues like mental health, substance use, and violence are as important to individual and community health and well-being as physical health issues.

Only about 15% of Latino students in Oregon (8th and 11th graders) reported fair or poor mental health. However, more than one in four said that sadness and hopelessness had interfered with their usual activities. These rates are comparable to overall statewide rates.

Rates of substance use, excluding tobacco, were also similar among Latino and Oregon overall 6th, 8th, and 11th graders. These data include alcohol consumption, binge drinking, marijuana use, glue sniffing, use of prescription drugs, and use of illicit drugs

Violence is another important health issue. Latino youth report being bullied or harassed for any reason about as often as Oregon youth overall. However, twice as many Latino 8th graders report bullying or harassment because of their ethnicity (27% of Latinos versus 14% statewide), and figures for 11th graders are roughly the same.

Latino youth in all grades were slightly more likely than Oregon youth overall to have been in a physical fight (6th grade — 27% versus 22%, 8th grade — 26% versus 21%, and 11th grade — 14% versus 10%). However, the likelihood of carrying a handgun to school was equivalent. (5% vs. 6% statewide, for 11th graders).

Teen Pregnancy and Birth, Childhood Immunization Rates, and Oral Health
A clear disparity lies in the teen pregnancy and birth rates for young Latinas. County data from 2013 indicate a more than threefold difference in birth rates
(74 per thousand for Latinas compared to 21 per thousand for non-Latina Whites) and teen pregnancy rates are approximately twice as high. However, the low birthweight rate for Latina mothers is almost the same as that of non-Latina White women in the county (6.8% compared to 6.3%).

Immunization rates are often considered to be a proxy for quality and completeness of well-child visits. Here, Latino children are doing well. In comparison to non-Latino White children (68%), two-year old immunization rates* were 83% for Latinos in Multnomah County in 2010. These figures represent an increase in Latino rates and a decrease in non-Latino White rates from 2005, in part due to parental choices among non-Latino Whites to limit immunizations.

Oral Health
Latino youth are not faring as well in the area of oral health. A 2012 statewide survey of oral health among children aged six to nine indicates that in Multnomah County, more Latino children have had a cavity (59%), compared with non-Latino White children (46%). In addition, Latino children have had more untreated tooth decay (26%) compared with non-Latino White children (19%), and more rampant tooth decay (18%) than their non-Latino White counterparts (8%). (See figure 3).

Strengths and Challenges
The youthful and vibrant Latino community is driving the growing diversity in Multnomah County and the region. This community brings with it a strong emphasis on culture, family and community ties, and a strong work ethic. Despite facing the challenges of poverty, low graduation rates, high teen pregnancy rates and ethnicity-based discrimination, the youth in the Latino population demonstrate good mental health, low smoking prevalence, and a high childhood immunization rate.

The public health community recognizes that health status is affected by a constellation of factors that go beyond medical care. Indeed, the conditions under which people live, learn, work, and play affect their health profoundly. In addition, access to social and economic opportunity are inextricably linked to many health outcomes.

Latino youth are becoming Oregon’s majority ethnic population and will be our future workforce and leaders. Yet, the data show that they face many barriers to a successful and healthy transition to adulthood. For Multnomah County’s health and prosperity, there is much that policymakers and other key stakeholders can do to help Latino youth overcome these barriers and achieve optimum health.

References and Footnote

* A complete series of 4:3:1:3:3:1 consists of 4 doses of DtaP, 3 doses of IPV, 1 dose of MMR, 3 doses HiB, 3 doses HepB, and 1 dose of Varicella
** The CPPW-YRBS was a Youth Risk Behavior Survey done as part of the CDC-funded project “Communities Putting Prevention to Work” (CPPW), and was conducted in seven school districts in Multnomah County in 2010 and 2012.

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