

THE NEW YORK CITY COMMUNITY OUTREACH STUDY: BIOMEDICAL AND MENTAL HEALTH STATUS AMONG A COMMUNITY SAMPLE OF URBAN HISPANICS

Objective: This report provides a snapshot of health behavior and risk in one low-income, urban, Latino community. As part of a community health and education program, 200 adult residents were asked about their health status and behavior and screened for conditions known to constitute significant health risk.

Design: A random sample of 10 buildings around a large community-based organization (CBO) service area was selected to receive personal invitation and/or door-to-door flyers announcing several days of free health screening and education at the CBO. All individuals age ≥ 18 years were eligible. Those who received screening were mailed lay descriptions of their results along with recommendations and locations for follow-up, if appropriate.

Setting and Participants: Participants were adult residents of an economically and medically under-served district in New York City, where Latinos make up $\approx 75\%$ of the population. Free screening for high blood pressure, diabetes, high cholesterol, obesity, and depression was provided.

Main Outcome Measures: The clinical outcomes of the aforementioned tests constitute the main outcomes of this report.

Results: Compared to national estimates for Hispanics, health risk was quite high in this sample, particularly with regard to diabetes and cholesterol. Moreover, participants were much less likely to have insurance or to have a regular source of health care than reported in national studies of Hispanics.

Conclusions: Though site specific, these data provide critical information to local CBOs and can be used as a tool for comparison with national data and *Healthy People 2010* goals. (*Ethn Dis.* 2007;17:99–105)

Key Words: Health Status, Hispanics, Screening

Roger Vaughan, DrPH, MS; Linda F. Cushman, PhD;
Andrea Nye, MPH

INTRODUCTION

To facilitate the *Healthy People 2010* goals of identifying significant and preventable threats to good health, considerable effort is required to assess and address the health status and needs of disadvantaged populations, including immigrants and those with minimal socioeconomic resources. Important first steps include obtaining accurate measures of health indicators and disease prevalence for different subgroups, as well as developing an understanding of the factors that affect their health. Health screenings are one mechanism to help identify those with specific conditions as well as risk factors for future health problems. On the individual level, screening may encourage persons to adopt healthier lifestyle behaviors. On a larger scale, screenings can inform outreach efforts among disadvantaged and under-studied populations. This report provides health screening results from one under-served, urban Latino community and constitutes a model for other community-based initiatives to assess and improve health among the under-served.

Health Status of Latinos

Numerous studies have pointed to complex patterns in the health status of Latinos who live in the United States. Broad generalizations are limited, however, as most research on the national level has been among Mexican Americans in the southwestern region of the country. Indeed, the amount and re-

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gency of data, as well as the specific Latino subgroups examined, tend to vary in the literature by risk factor, including studies of hypertension, cardiovascular disease, high cholesterol, diabetes, depression, and others.

Selected Health Conditions

Traditional risk factors for elevated blood pressure include being overweight, physical inactivity, and depression, all of which are found at higher rates among Latinos than among others in the United States. This rate is sometimes masked in national data; for example, analysis of the National Health and Nutrition Examination Survey (NHANES) III data showed that, among the US adult population, the prevalence of hypertension among Latinos was similar to that in other groups.¹ Nonetheless, a disproportionate burden of hypertension-related cardiovascular disease falls on Latinos because of lack of awareness, reduced access to healthcare services, lower quality of medical care, later diagnosis, and greater severity of illness. The same study showed that Mexican Americans were much less aware of their high blood pressure and were less likely to receive treatment with antihypertensive medications. Less than one third (28%) of Mexican American men were taking antihypertensive medication for their high blood pressure, and only 14%

From the Mailman School of Public Health, Department of Biostatistics (RV) and Department of Population and Family Health (LC, AN), Columbia University, New York, NY.

Address correspondence and reprint requests to Roger D. Vaughan, DrPH, MS; 722 West 168th Street; New York, NY 10032; 212-342-1260; 212-305-9408 (fax); rdv2@columbia.edu