ASTHMA DISPARITIES IN HISPANIC POPULATIONS



While asthma rates are relatively low for the Hispanic population in total, wide variations between Hispanic subgroups exist.



Much of the existing asthma data do not account for Hispanic subgroups. Where available, data point to stark asthma disparities in Puerto Rican populations.

Puerto Ricans have the highest rate of asthma prevalence compared to any other racial or ethnic group in the United States.¹

Compared to white individuals, Puerto Rican individuals in the United States are nearly 2 times as likely to experience asthma attacks.1

Asthma-related deaths in Puerto Rico are nearly 3 times that of the broader Hispanic and white populations in the United States.23

What Causes Asthma Disparities in Hispanic Populations?



Inequities in education, which can impact health knowledge and literacy

Occupational segregation

rates, wages, access to quality jobs, and job stability



In 2017, **29**% of Puerto Rican adults obtained a post-secondary degree, compared to 45% of white adults.4



Access to health care due to geographic, financial, cultural, language, or psychosocial barriers



In 2017, **27**% of Hispanic individuals reported they have no consistent source of health care, compared to 17% of white individuals.5



Lower quality of care caused by a shortage of Hispanic health care providers, language barriers, and individual discrimination



In 2019, Hispanic populations faced **63**% pollution inequity while white populations experienced a pollution advantage of 17%.6



Environmental pollution that makes asthma symptoms worse



Medical beliefs and distrust that impact treatment adherence

Addressing Asthma Disparities

In the last 10 years, some progress has been made in reducing asthma disparities in Hispanic individuals.



Current asthma prevalence and lifetime asthma prevalence have been declining in Hispanic individuals since 2010. However, asthma attack prevalence is on the rise.1



5 million Hispanic individuals gained insurance coverage under the Affordable Care Act.7

However, the work is not over.

To improve health outcomes for Hispanic individuals with asthma, our future efforts should:



Improve data collection to better monitor disparities experienced by Hispanic subgroups



Reduce pollution exposure by supporting home-based assessment and intervention programs



Increase access to quality early childhood education and care



Increase representation in research cohorts and patient advisory councils



Expand access to care by addressing provider shortage areas and removing barriers to primary care services



Train community health workers and patient advocates to identify and remedy problems in patientprovider communication



aafa.org/asthmadisparities

CDC, National Center for Health Statistics, National Health Interview Survey (2018)

Puerto Rico Department of Health, Technical report, Puerto Rico Asthma Project (2010–2015)
CDC, National Center for Health Statistics, National Vital Statistics System: Mortality (2018)

⁴ National Center for Education Statistics, Digest of Education Statistics (2017)) ⁵ Agency for Healthcare Research and Quality, Medical Expenditure Panel Survey (2017)

PTessum, et al., Inequity in consumption of goods and services adds to racial—ethnic disparities in air pollution exposure (2019) PU.S. Census Bureau, American Community Survey (2010-2018)