

# Empowering Hispanic and Latino Communities: Health Equity Through Innovation and Inclusivity

In the United States, the Hispanic and Latino community faces significant challenges in achieving health equity, which is a state where everyone has a fair and just opportunity to attain their highest level of health.

Despite being one of the fastest-growing demographics in the U.S., Hispanics and Latinos often encounter barriers to healthcare access and experience poor health outcomes. Factors such as language barriers, lack of insurance and economic disparities contribute to this inequity. For instance, Hispanics and Latinos are nearly three times more likely to be uninsured compared to non-Hispanic whites, according to the Brookings Institution. This lack of coverage, coupled with cultural and systemic obstacles, leads to disparities in treatment and prevention of diseases like diabetes and mental health disorders, which disproportionately affect the Hispanic and Latino population.

## How Top Hospitals and Health Systems are Addressing Hispanic and Latino Health Equity

Michigan-based healthcare system Corewell Health ([No. 8](#) on the 2024 Top Hospitals and Health Systems list) is making significant strides in advancing health equity for Latinos. Recognizing the profound importance of fostering health equity, reducing disparities and increasing access to high-quality care in every community, the company was awarded a \$3.4 million grant by the Centers for Disease Control and Prevention (CDC) to advance health equity and prevent chronic illnesses in Latino, Black and Indigenous populations in Wayne County, MI.

This grant, known as the Racial and Ethnic Approaches to Community Health (REACH) grant, will support programming in communities experiencing health disparities.

In a [press release](#), Alicia Jackson, Director of Health Equity and Community health at Corewell Health, said: “The REACH grant will ignite our efforts in Wayne County and Detroit, enabling us to expand vital community partnerships and increase support for populations with the highest risk of chronic disease.”

Chronic illnesses, such as heart disease, cancer, diabetes and stroke, are among the most common causes of illness, disability and death in the United States. Latinos often experience increased rates of chronic illness compared with white people. For example, chronic liver disease is the leading cause of death among Latinos, and the chronic liver disease rate among Latino men and women is twice that of the non-Latino white population.

To address these health disparities, Corewell Health is implementing public health programs that prioritize physical activity, access to healthy foods and care in breastfeeding.



After the murder of George Floyd in 2020, Mayo Clinic (No. 5 on the 2024 Top Hospitals and Health Systems list) strengthened its commitment to supporting the health of minority communities, said Monica Ibarra, Enterprise Equity, Inclusion and Diversity Advisor and Course Director, I-DARE Longitudinal Course, MCASOM-MN, at Mayo Clinic. The company pledged approximately \$100 million over 10 years to combat racism and advance care for non-white patients, which is funded through five Mayo Clinic sites.

In Rochester, NY, she said there is a group of providers who are using social media to engage with the Latino community.

“They are utilizing Instagram and Facebook to get the word out for mammogram screenings for women,” Ibarra said. Based on this success, Mayo Clinic has expanded its strategy to engage with people in other languages.

Furthermore, Mayo Clinic has increased colorectal cancer screenings among the Latino community in Minnesota and Wisconsin.

“Initially, it started as [outreach to] our Black male population and has steadily [expanded] to our Latin community, as that was one of the gaps being identified as awareness, as practice, as that normalized situation of caring for one’s body,” she said. “That can also be seen in our research that we’re leaning into regarding diabetes, which is one that is really prevalent within our Latin community, as is heart disease.”

## Language and Technology Barriers and Solutions

Dr. Ashley Gomez, an Assistant Professor of Business Administration at the University of Pittsburgh and a member of The PhD Project, highlighted the complexity of navigating the healthcare system, a challenge that transcends all backgrounds. She emphasized that simplifying the healthcare system is a universal need that would benefit everyone. However, for immigrant populations, particularly those who primarily speak Spanish or Portuguese, language barriers present additional hurdles. Misunderstandings and miscommunications can occur due to things getting lost in translation and can negatively affect the quality of care a person receives.



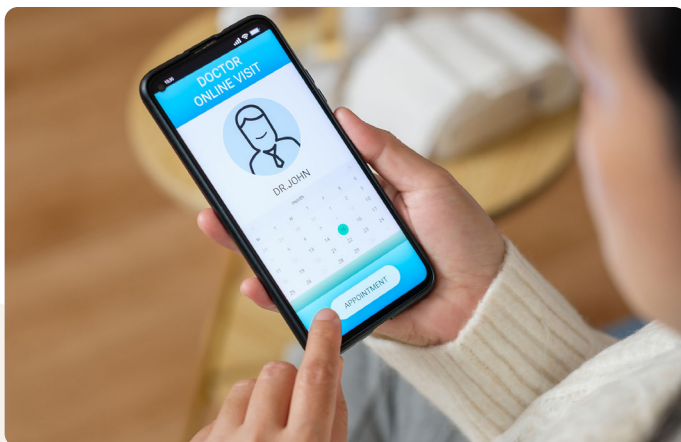
She also brought attention to the digital divide, which is often overlooked, especially when considering age differences. As healthcare systems become increasingly digital, with online appointments and digital reminders requiring an email, the technological divide becomes more apparent. This divide is particularly significant among the Hispanic and Latino community, according to Dr. Gomez's research and anecdotal evidence. Therefore, as healthcare systems evolve, it is crucial that they consider these language and technological barriers to ensure equitable access to care for all.

### **Healthcare systems can address language barriers in several ways:**

**Translation Services:** Implementing both in-person and digital translation services can help non-English speaking patients understand their healthcare information better. This could include hiring bilingual staff or using translation apps.

**Cultural Competency Training:** Healthcare providers should undergo cultural competency training to better understand and respect the diverse backgrounds of their patients. This includes understanding language nuances and cultural health beliefs.

**Patient Education Materials:** Providing patient education materials in multiple languages can help non-English speaking patients understand their health conditions and treatments better.



**Community Outreach:** Collaborating with community organizations that serve non-English speaking populations can help healthcare systems reach these patients more effectively.

**Telehealth Services:** Telehealth services can be made more accessible by offering them in multiple languages. This can help non-English speaking patients receive care without language being a barrier.

**Health Literacy:** Improving health literacy among non-English speaking populations can empower them to make informed health decisions. This can be achieved through educational programs and resources.

## **Exploring and Understanding Social Determinants of Health**

To increase health equity by supporting the economic development of Latino and Hispanic communities, Ibarra said Mayo Clinic has an advisory committee that looks at social determinants of health. When thinking about social determinants of health, she said she thinks of it as a soundboard where all the pegs are moving at different paces and places on the same board regardless of socioeconomic standing, credentialing, age or gender.

People's basic needs have changed since the inception of Maslow's Hierarchy of Needs 30 years ago. Ibarra said she is currently doing research to see how those basic needs have changed over time. She explained that Mayo Clinic is examining these changes and their implications on social determinants of health, noting that cultural competence is essential in recognizing that individuals perceive and prioritize their needs differently. She highlighted the importance of understanding these diverse perspectives, especially in vulnerable communities, and stressed that medical professionals need to consider free will, personal pain points and pressure points in identifying wellness. She said this ongoing exploration is crucial for achieving health equity and understanding social determinants of health.



“Although I feel that Maslow’s [Hierarchy] met the interpretation of society at that point in time when that theory was created ... that’s me undulating it over time to become this new thing and how it’s also partnered with those social determinants of health,” she said. “So, I really appreciate that Mayo Clinic is leaning in to take a peek of what that looks like under the hood of our lives, to understand how each one of us is interpreting that very differently from others.”

## Fostering Inclusive Entrepreneurial Ecosystems

Dr. Gomez is at the forefront of research that intersects entrepreneurship, well-being, identity and place, with a keen focus on the Hispanic and Latino community. Her research sheds light on the early stages of business development and the importance of inclusivity within entrepreneurial ecosystems. Her work emphasizes the role of entrepreneurship in promoting health and economic development among Hispanic and Latino communities. By fostering an environment where these entrepreneurs can thrive, Dr. Gomez believes we can address some of the root causes of health disparities.

Her professional experience includes collaboration with federal and local government agencies, nonprofits and community-based organizations to tackle societal inequities. She advocates for policies and strategies that not only improve access to healthcare but also enhance the overall economic conditions of Hispanics and Latinos in the U.S.

In discussing the impact of entrepreneurial initiatives on Hispanic and Latino communities, Dr. Gomez highlighted multiple intersections between health and entrepreneurship. She noted that Latinos are engaging in social entrepreneurship and starting businesses at a **faster rate** than the national average, which can help address chronic health disparities. However, financial constraints often lead them to prioritize work over well-being.

“A lot of times there’s financial constraints, meaning that if folks aren’t working, if they’re not enterprising, there’s no food being put on the table,” she said.

Dr. Gomez emphasized the importance of supporting Hispanic and Latino entrepreneurs with more than just funding and business development resources. Things like affordable housing, food security, childcare and access to healthcare must also be considered. Addressing these factors is crucial not only for improving health but also for fostering economic growth within Latino communities.

To ensure entrepreneurial ecosystems contribute positively to the health and economic development of Hispanic and Latino populations, Dr. Gomez said inclusivity and support is needed across various sectors.



“Considering them as full beings, right? I think addressing the social determinants of health is huge,” Gomez said. She pointed out the fragmentation within entrepreneurial ecosystems, which isn’t inherently negative but requires a broader perspective.

Reflecting on the diversity of Hispanic and Latino entrepreneurship, Dr. Gomez said: “A lot of times when we think of entrepreneurial ecosystems, we think of Silicon Valley and Austin and these high tech, high growth sectors. And yes, there are Latinos enterprising in those sectors, but they are also enterprising ... in construction, food and other service industries as well as healthcare.”

She stressed the need for equitable support: “If we’re not providing funding and business development for those businesses as well, not just high tech, high growth, we’re excluding a large population from the ecosystem.”