

# AUDIENCE PROFILE: HISPANICS/LATINOS

## 12.1%

12.1% of Hispanics/Latinos over 18 have diabetes. (1)

## 31.7%

31.7% of Hispanics/Latinos have prediabetes, however only 7.5 percent know they have this condition. (1)



## 57.5 M

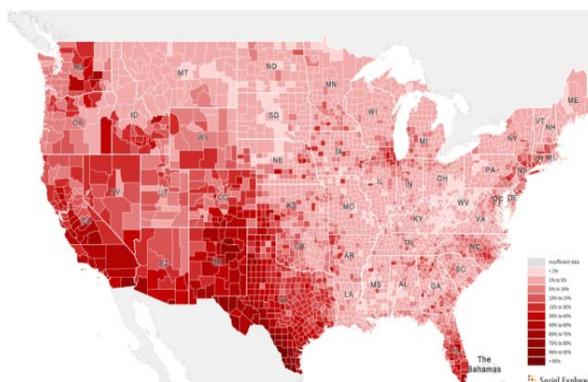
Hispanics/Latinos make up 17.8% of the nation's total population. (2) This does not include the 3.4 million people living in Puerto Rico, a U.S. territory.

The majority of the Hispanics/Latinos living in the U.S. are originally from (3):

- Mexico
- Puerto Rico
- El Salvador
- Cuba
- República Dominicana
- Guatemala

In order to successfully engage your target audience, you must have a clear understanding of their culture, beliefs and barriers to health. This audience profile includes information about the cultural nuances that need to be considered when reaching Hispanics/Latinos, based on the review of various research studies and also taking into consideration lessons learned through past experiences working with this population. This document is not an in-depth research report or analysis, as it is meant to help you have a general understanding of different factors that may affect your audience's availability, interest and/or commitment to your program. Use the questions listed at the end of this profile to validate and expand on the information provided for your local program's market.

## Understanding Hispanic/Latino Audiences



*Hispanic Map of the United States - 2017*  
 Instituto Cervantes at the Faculty of Arts and Sciences of

The Hispanic/Latino population has become the largest ethnic or racial minority group in the United States. Fifty percent of the U.S. population growth from 2010 to 2015 has come from Hispanics/Latinos. According to the U.S. Census, this population is expected to double within the next 50 years. Given their high risk for diabetes and other chronic diseases, it is important to understand how to best engage Hispanics/Latinos with healthy messages. Hispanics/Latinos come

from a number of different Spanish-speaking countries, each with their own rich culture and traditions. However, it is important to know that a significant part of the Hispanic/Latino population is made up of people that were born in the United States, as many of them are descendants from immigrants and/or people who lived in geographic locations that did not used to be a part of the United States. According to a study from the Pew Research Center, 65% of Hispanics/Latinos in 2014 were U.S. born.

Despite their differences, there are common values that stand true across Hispanic/Latino groups from different countries of origin, such as the importance of family, traditional celebrations, religion, and food. (4) Prevention programs and marketing methods that work for other populations may not work for Hispanic/Latino groups. To assist with your program development and marketing, we have compiled relevant research and data that will help you shed light on the Hispanic/Latino population to make a difference when addressing diabetes prevention.

### Geographic Location

The Hispanic/Latino population is spread throughout the country, with the largest groups located in the South West states. California is the state with the largest Hispanic/Latino population (15.3 million) followed by Texas, Florida, New York, Illinois,

Arizona, New Jersey and Colorado, all of which had a population of 1 million or more residents in 2016. (2)

The diversity of Hispanic/Latino origin also varies by state. Mexicans are the majority population in a number of states, including California, Texas, Illinois, Arizona, Colorado, and New Mexico. Puerto Ricans are the largest Hispanic/Latino population in New York and New Jersey, with Cubans being the largest group in Florida. (5)

Puerto Ricans are the second-largest Hispanic origin population living in the United States. Pew Research Center found that a majority of Hispanics of Puerto Rican origin in the United States were born in the 50 states or the District of Columbia, while about one-third of the U.S. Puerto Rican population was born in Puerto Rico. It is important to understand the relationship of Puerto Rico with the United States and to know whether Puerto Ricans in your community were born in the island or in the mainland to have a better idea of their knowledge, behaviors, and traditions. Some Puerto Ricans may be more tied to their cultural traditions and may prefer speaking Spanish, while others may be more influenced by western culture and may prefer speaking English.

#### The Commonwealth of Puerto Rico

- People born in Puerto Rico are U.S. citizens by birth. They became U.S. citizens in 1917, through the Treaty of Paris after the end of the Spanish-American War.
- The Commonwealth of Puerto Rico has the same control over its internal affairs as other U.S. states.
- The official language in Puerto Rico is Spanish, followed by English, which is considered the second official language in the island.

## Characteristics and Cultural Understanding

Hispanics/Latinos come from a collectivistic culture where activities are predominantly conducted in groups, responsibility is shared, and accountability is collective. Understanding the cultural values and constructs listed below, which are part of the lives of different Hispanics/Latinos is vital to communicate effectively with this population.

- **Familismo** refers to the central role and importance that family and family structure play in the life of Hispanic/Latino individuals.

The concept of familismo is often reflected in Hispanic/Latino media and entertainment (movies, *novelas* (soap operas), folk stories, etc.).

- **Respeto** or respect refers to the admiration and respect for individuals of power or authoritative figures, including health care providers. Hispanic/Latino seniors, especially grandparents, are respected by all members of the family and in many cases have the final say on family matters.
- **Machismo** is considered a cultural factor within Hispanic/Latino groups, which refers to masculine ideas, such as courage, honor, fearlessness, and pride. It means that the husband/father is the protector, provider, and the decision-maker for the family. It also refers to the idea that both men and women need to fit a certain role or standard within the household. This term can also have a negative connotation as it can also relate to men that do not want their spouses/partners to go out by themselves or engage in activities with other men.
- **Natural remedies** or family recipes are popular among many Hispanic/Latino groups to treat diseases or health issues. Herbs, fruits and other uncommon products are sometimes used to treat a cold, for example. This practice tends to conflict with health care providers' diagnosis and prescriptions.

### Gender Roles in the Hispanic/Latino Culture

While Hispanic/Latino women have traditionally been responsible for taking care of the children and the elderly, the traditional patriarchal structure grants the father or oldest male relative the greatest authority within the household. (6) In more traditional households, where the machismo construct is still present, women are expected to show respect and even submission to their

#### Hispanic/Latino Men

Hispanic/Latino men are expected to provide for and be in charge of their families. They are often reluctant to consult physicians for health problems and tend to wait until a visit to the emergency room becomes necessary.

husbands.

On the other hand, Hispanic/Latino women are the caregivers of the whole family, and this is consistent across groups of different ages and socioeconomic status. They are typically responsible for setting up health appointments for family members and they usually prioritize others' health above their own. Women are typically also expected to be the primary force holding the family and home together through work and cultural wisdom, care giving, and parenting. They are also more likely to check their blood pressure, blood sugar, cholesterol levels and get other prevention checks, compared to men.

### Religion

Religion occupies a central role in the lives of many Hispanics/Latinos, with Catholicism being a defining factor in most Hispanic cultures. More than 50 percent of the Hispanic/Latino population in the U.S. identified as Catholic in 2013. About 60 percent of Mexican Americans, the largest Hispanic/Latino group in the U.S., self-reported being Catholics.

The topic of religion is particularly important to consider when reaching out to Hispanics/Latinos aged 45-64 years old, given that about two thirds of those aged 50 and older are Catholic. (7) Religion is closely tied with the idea of *fatalism*, a key factor in Hispanics' attitude towards aging and health in general. Many people believe in destiny and that all that happens is God's will. *Fatalism* can lead Hispanics/Latinos to ignore their doctor's advice to follow healthy behaviors, including physical activity, not smoking, and fruit and vegetable consumption. (8) For example, Mexican Americans that self-reported as Catholics have previously expressed their need to rely on God for health improvement and have made specific requests to saints for their intervention in the progression of pain and other symptoms. (9) These religious beliefs may lead individuals to delay or hold back from seeking information from health professionals and learning the steps they need to take to improve their health.

### Hispanic/Latino Migrant Farm Workers

As with other populations, certain groups of Hispanics/Latinos in the United States, such as those that are part of the agricultural workforce, are underserved and hard-to-reach. The majority of migrant and seasonal farmworkers are immigrants that come from Latin America, particularly from

Mexico. (10) The National Agricultural Workers Survey has indicated that the majority of agricultural workers in the U.S. are immigrants with limited education, and many do not speak English as their primary language. (11) This group faces language and literacy barriers that challenge their access to health information and services and make it harder for them to lead a healthy life.

Hispanic/Latino agricultural workers are at high risk for a number of health problems, including diabetes. Identifying university-based programs that focus on Hispanic/Latino migrant farm workers to relay relevant health messages that will encourage them to make healthy lifestyle changes may help raise awareness about health concerns, especially since they have experience developing appropriate health and safety training materials for these individuals. Studies have also shown that health and safety trainings for agricultural workers should be developed in various formats (visual, hearing, hands-on) so that the information can be shared in a way that fits the learning styles that are most effective for different individuals. (10)

## Promotoras and Community Health Workers (CHWs)

Many research studies show that promotoras and CHWs can effectively reach and influence behavior

### Rural Hispanics/Latinos

- Various research studies have shown that there are significant challenges with health care delivery for this population. Some recorded barriers include: lack of transportation and childcare, lack of and limitations in health insurance coverage, high costs of health care services, and legal status/discrimination.
- A study conducted in 2014 with Hispanic/Latino adults living in six rural communities in Illinois showed that Spanish-language workshops offered within the community are the preferred health information strategy.

for the Hispanic/Latino community and can be especially helpful engaging underserved communities. Promotoras and CHWs are links between communities and health and social service providers. They are community members that act as helpers and liaisons to meaningful information and resources for their neighbors and neighborhoods. Because they share the same language, culture, ethnicity, status and experiences of their communities, they are trusted within their

community and are considered strong influencers. (12)

They generally rely on verbal communication and face-to-face interaction to provide information to communities in need. They also use different media to support training, including flipcharts, videos and cartoons, comic books, *fotonovelas*, and targeted brochures that provide information in a way that is easier to understand. (10)

## Economic Implications

### Age and Language Preference

Older Hispanics/Latinos tend to prefer communicating in Spanish. Those aged 65 years and older use language to sustain cultural roots and traditions. It is also used as a bond with younger Hispanics/Latinos who are primarily bilingual or prefer to speak English. Hispanics/Latinos aged 18-29 are the most bilingual group, while older Hispanic adults communicate primarily in Spanish and are interested in maintaining the use of their native language in the household. (4)

In 2013, about 25 percent of Hispanics/Latinos lived in family households that contained at least two adult generations or one grandparent and at least one other generation. The numbers increase when it comes to older Hispanics/Latinos. Four in 10 Hispanics/Latinos aged 55+ lived in multigenerational households, compared with just over a fifth of the total population in that group. (4)

When it comes to education, 66 percent of Hispanics/Latinos aged 25 and older had at least a high school education, while 4.7 million Hispanics/Latinos (14.8 percent) had a bachelor's degree or higher in 2015. The median income of Hispanic/Latino households in the U.S. from 2015 to 2016 was \$47,675. In contrast, the poverty rate for Hispanics/Latinos in 2016 was 19.4 percent (11.1 million people). In 2016, Hispanics/Latinos in the U.S. had the highest rate of un-insurance at 16 percent. (2)

## Language and Acculturation

### Language Preference

Language preference among Hispanics/Latinos can be tied to age, level of acculturation, education, and socioeconomic status. Those that arrived recently to the U.S., with little to no education or with a low socioeconomic status tend to prefer speaking

Spanish and/or be less proficient in English, which in many instances becomes a barrier to receiving important health messages and information. 73 percent of Hispanics/Latinos spoke Spanish at home in 2015. (3) Therefore, culturally-relevant Spanish-language messages need to be considered when targeting this population.

Even though language preference is crucial for successful message dissemination and penetration with this population, it goes hand in hand with cultural relevancy. When an advertisement/content includes aspects of Hispanic culture, 88 percent of Hispanics/Latinos will pay attention. Also, 41 percent are more favorable to a culturally relevant campaign. (13)

### Acculturated Hispanics/Latinos are still tied to their cultural values and traditions.

A study conducted with highly-acculturated, middle income Hispanics/Latinas showed that they still hold fatalistic beliefs when it comes to serious health issues. This is also true for other things, such as home or natural remedies and making decisions collectively with family or loved ones, among other things.

### Using a Universal Language

Even though the primary language for most Hispanics/Latinos is Spanish, numerous dialects and variations exist within different Spanish-speaking countries which can impact recently arrived groups. There are words or phrases within the language that have different cultural meanings depending on which Spanish-speaking country they are spoken. (14) National Hispanic/Latino media outlets and reporters typically aim to use what is commonly known as "universal Spanish-language," which refers to the use of Spanish words and phrases that are common and broadly understood by the Hispanic/Latino population. The idea is to avoid using words that may have negative connotations or different meanings in other cultures. For example, in Cuba, the Dominican Republic and Puerto Rico, "guagua" refers to a bus. However, in Chile "guagua" means baby. Similarly, the word "bicho" is used in Latin America to refer to a small insect, while in Puerto Rico it means "penis." This is particularly relevant when it comes to sharing nutrition information and resources, as different words are used among Hispanic subgroups for

certain foods, such as beans or cakes. Being aware of these differences will be crucial, to make sure that the Spanish copy used in educational resources is universally understood. It is also important to consider the specific needs of the audience you are serving and to test all messages with members of your audience to make sure that they are relevant and easy to understand.

### Acculturation

Acculturation is the process of adaptation into a new culture, which is measured by the degree that immigrants have integrated values, beliefs, and attitudes of a new country into their daily lives. (15, 16) Acculturation plays a key role in Hispanics/Latinos' decision-making process, as well as health care practices. Studies have shown that higher levels of acculturation increase the likelihood for access to certain screenings or healthcare. Highly acculturated Hispanics are generally fully bilingual and/or fluent in English, which provides them broader access to health resources and information. Acculturation is also associated with higher levels of education and better paying jobs. Because of this acculturated individuals are more likely to engage in health education programs and activities. (16)

Research findings from nationally representative surveys have consistently shown that higher acculturation is associated with better control of cardiovascular disease risk factors, such as high blood pressure, high cholesterol, and diabetes. (17) Also, studies done with Hispanics/Latinos along the U.S.-Mexico border have found an association between acculturation and health screenings. Hispanics/Latinos that prefer to communicate in English are more likely to get blood pressure, blood sugar, and cholesterol screenings. (18)

Understanding how acculturation levels and language preference among Hispanics/Latinos may influence lifestyle and health behaviors will help health professionals and health educators communicate more efficiently with their community. This may help health educators determine whether education resources should be developed in English and/or Spanish. (19)

It is important to remember that the topic of acculturation may not be relevant for all Hispanics/Latinos in the United States, as many within this population have gone through this process already and are fully acculturated.

## Health Information and Information Seeking

Hispanics/Latinos' health care seeking habits may vary upon acculturation, language preference and whether they have health insurance and access to health resources. Studies conducted with different Hispanic/Latino groups have found Spanish-language TV to be the main trusted source of health information for this population, particularly for those aged 40 years and older. There is a large body of evidence around Hispanics/Latinos' increased reliance on media outlets as a primary source of information.

It is important to keep in mind that Hispanics/Latinos from a lower socioeconomic level, who may not know how to speak/or be comfortable speaking English, will have lower trust and lower general mainstream media use patterns, when compared to those who are proficient in English. Studies have shown that low socioeconomic Hispanics/Latinos aged 20-64 years are heavily influenced by community role models when it comes to increasing physical activity and making healthier food choices. (20) Health messages shared through Hispanic/Latino community influencers will resonate more with this audience. However, it is important that these individuals speak proper Spanish and establish a connection with the community or target audience, as the message needs to be genuine and reflective of their culture and/or personal experiences. Other research findings showed that people living in underserved communities may use pharmacists as an easy-to-reach medical resource. (21) When it comes to written health messages, Hispanics/Latinos generally prefer to have illustrations and photos that can clarify and summarize the health messages. (20)

## Trusted Sources and Influencers

Hispanics/Latinos tend to seek information and advice from family members and loved ones first, as many important decisions are made collectively as a family. Community leaders, promotoras and community health workers, faith leaders, and even celebrities serve as influencers and/or models for this population. It's important to keep in mind that

trusted sources and influencers may vary by region/location, depending on the different groups within the specific community—community members' age and acculturation level, as well as their country of origin. Here are key data points to keep in mind:

Hispanics/Latinos look to community networks and interpersonal connections with health care providers (nurses, CHWs, and physicians) as sources for health information. (22) CHWs are particularly key influencers for low-income Hispanics/Latinos and those without health insurance.

Generally, Hispanics/Latinos rely more on media channels and loved ones to answer their health-related questions, than their health care providers. (23) Historically, health care providers are not the preferred sources of health information for Hispanics/Latinos living in the U.S.

Hispanic/Latino or Spanish-language media, primarily television and small community newspapers, are trusted sources for health information.

Older Hispanics/Latinos (specifically parents and grandparents) play a vital role in their multigenerational households. Their opinions and views are held in high esteem by other family members. They are often the main decision makers in the home, exerting a heavy influence on behaviors and media consumption. (4) For example, in most cases if “abuela” is at home watching a “telenovela” (soap opera), other family members that gather around the television will watch the soap opera or not change the channel out of respect.

Community-based organizations that serve Hispanic/Latino populations are closely connected to families and are also seen as credible and trusted sources of information. (24)

A significant number of Hispanics/Latinos in the U.S. have close ties with their community churches. Churches and religious communities are considered a powerful resource and support system to improve health, particularly for Hispanic/Latina women. (13)

Hispanic/Latina women aged 40 years and older prefer education and health resources to be provided in small groups through church. (13)

Hispanic/Latino celebrities, such as well-known artists and singers, can serve as influencers and

agents of behavior change, among the community. (25)

### Media Habits

U.S. Hispanics/Latinos are frequently using different media. As a whole, Hispanics/Latinos watch high definition TV more than other populations and have also become the population that uses smartphones the most. (26, 27)

### Television and Radio

- A large number of research studies found TV—primarily Spanish-language programming—to be the type of media that Hispanics/Latinos use the most.
- Hispanics/Latinos spend long hours watching television. In a survey conducted in 2013, Hispanic/Latino adults reported watching more than 27 hours of television during seven days prior to the survey. (26)
- Since 2011, the weekly national Hispanic radio audience has grown 11 percent (from 36.5 million to 40.4 million). (28) 6.3 million Hispanics/Latinos aged 50 years and older listen to radio, and they tend to listen for longer periods when compared with younger Hispanics/Latinos aged 18 to 49.
- When it comes to media channels, Univision is the top television network for Hispanics/Latinos in the U.S., with local stations in over 60 markets with large Hispanic populations. Univision also has the largest Hispanic radio network in the U.S. It also offers online news websites for different markets. Telemundo is another large and widely known television network for this population and is a NBC Universal division.

### Digital Media

- Internet follows TV as the second choice of media for Hispanic/Latinos between the ages of 20 and 64. (25)
- Since 2009, the share of Hispanic/Latino adults who report using the Internet increased from 64 percent to 84 percent in 2015. Internet usage has also grown among Spanish-dominant Hispanics/Latinos, from 36 percent to 74 percent. This has reduced the digital divide among Hispanics. (29)
- According to 2015 data, 80 percent of Hispanic/Latino adults access the Internet from a

mobile device, slightly higher than the shares among Caucasians (76 percent) and African Americans (77 percent). (29)

- Between 2011 and 2014, the percentage of Hispanic/Latino patients who reported owning a mobile phone increased from 72 percent to 79 percent. Similarly, the percentage of patients who were able to send/receive text messages increased from 54 percent to 63 percent. (30)
- According to Nielsen Mobile Insights, the average Hispanic mobile user uses 658 minutes per month on their mobile plan, which is significantly higher than the average of 510 for all consumers. When broken down by Hispanic/Latino subgroups, bilingual Hispanics/Latinos dominate in terms of minutes used, as they spend more than 762 minutes per month talking on their mobile devices. (27)
- Hispanics/Latinos that are comfortable speaking English report higher levels of Internet use (54 percent versus 14 percent) when compared with Spanish-speakers. (8)

### Print

- Even though the share of Hispanics/Latinos that read newspapers and/or print has declined over the years, print media is still a source of information for at least 42 percent of this population, according to 2012 data.
- The Hispanic/Latino population reads, on average, 12.7 magazine issues per month, compared with 11.6 for the total U.S. population (2012). (14)
- The top Hispanic/Latino magazines—from 2012-2013—aimed at women and parents are: Latina Magazine, Siempre Mujer (now available online only), Buen Hogar, Ser Padres, USA Today – Hispanic Living, and Woman’s Day for Latinas. (31) The most frequently used themes from these magazines were informative/how-to, great/inspiring, and health/beauty.
- According to Pew Hispanic Research, the top Hispanic/Latino newspapers across the U.S. with daily circulation are: La Opinion (Los Angeles, CA); El Nuevo Herald (Miami, FL); El Diario la Prensa (New York, NY); and El Nuevo Herald (Brownsville, TX).

## Considerations for Messaging

- Research studies have demonstrated that Hispanics/Latinos that only speak Spanish have greater difficulties in searching for and understanding health information. (32) In order to effectively reach Hispanics/Latinos of low socioeconomic status and low literacy levels with diabetes prevention messages, resources need to be developed in Spanish, must be easy to understand and include visuals to support and complement the copy. Spanish-language copy must be written in a way that is universally understood by Hispanics/Latinos from different countries of origin.
- Hispanics/Latinos’ lack of health insurance, limited access to health services (due in many cases to transportation, security concerns, and child care, among other concerns) and lower education and literacy levels (6) all serve as barriers for following a healthy lifestyle. Diabetes prevention programs must be flexible and address these challenges in order to secure a long-term commitment from participants.
- Many Hispanics/Latinos with low resources work more than one job and thus become challenged with having to balance their work schedules and maintaining healthy behaviors, including providing healthy food for themselves and their family members. This leaves less time for grocery shopping and food preparation, which in many cases leads them to resort to fast food options. It also makes it harder for them to set aside time for health education programs/activities. (33) To achieve behavior change in this particularly challenging area, programs must offer tools and resources that will help this audience make long-lasting lifestyle changes in spite of difficult work schedules.
- On average, Hispanics/Latinos visit a primary care physician half as often as Caucasians and two-thirds as often as African Americans. (34)
- Hispanics/Latinos have high rates of overweight and obesity and it is important to understand why. Research findings have attributed it to these factors:
  - Acculturation to mainstream U.S. eating habits.

- Culturally determined food choices or traditionally popular Latino dishes that are fried, which contribute to obesity
- Lack of choices with respect to fresh vegetables and healthy foods in low-income communities
- Belief that eating large portions and having a large body is an indicator of a successful life
- Lack of time to engage in physical activity, mainly due to having more than one job or taking care of children
- Safety concerns when it comes to walking outside or around the neighborhood
- Being too tired or preference for watching television instead of working out<sup>6</sup>
- 71.3 percent of 1438 Hispanics/Latinos that participated in a study did not meet either the physical activity guidelines or the guidelines for daily fruit and vegetable consumption. (35)
- When it comes to overweight and obesity, some members of this population tend to perceive excess weight levels differently than Caucasians. A study conducted in Texas in 2007 showed that Hispanic women perceived children and women being overweight as “healthy.” These misperceptions have been associated with less likelihood or attempts at weight loss and less physical activity. In another study conducted with primarily Hispanic/Latino women aged 40 years and older, 20 percent of overweight or obese women thought they were at their ideal body weight, and 9.6 percent of obese women reported that they were in excellent health. Program education messages and resources must highlight the importance of eating healthy and staying at a healthy weight and how that can help prevent diabetes.
- In another study conducted in 2016, Hispanic employees between the ages of 22 and 65 shared that their work schedules were their primary barrier to following a healthier lifestyle, as many have 2 part-time or full-time jobs. However, study participants agreed that a workplace program would be the ideal solution for Hispanic employees to learn about diabetes and healthy behaviors, given their busy schedules, family responsibilities, and limited resources. (33)
- Preferred information resources may vary among different Hispanic/Latino communities, depending on their demographics and accessibility of medical services. A study conducted in Los Angeles, California, found that Hispanics/Latinos in that community preferred targeted television and interpersonal communication (Cheong, 2007; Wilkin & Ball-Rokeach, 2005) efforts to receive health information. However, a recent study on the main source of health information for Hispanics/Latinos in Ohio (Britigan, Murnan, & Rojas-Guylar, 2009) found that medical centers, not media, are the number one source for their community. Therefore, there is not a “one size fits all” approach for this population. There are specific demographic nuances that need to be considered in each region or market, as they will influence communications and marketing tactics.
- Small group discussions are a preferred strategy for providing social support at the community setting. However, the lack of childcare is a barrier that many Hispanics/Latinos, primarily women, face when trying to participate in these type of community efforts. Engaging this audience in smaller, more personal groups may increase program participation.
- Even though Hispanics/Latinos of all ages are increasingly using digital media, web-based health



information resources are still not accessible for all Hispanic/Latino groups. (1) To effectively reach this population, communication tactics need to include a mix of traditional and digital media.

- There is a lack of knowledge about diabetes and how it can impact someone’s life, primarily among

Hispanic migrant farmworkers. After being diagnosed with diabetes, many Hispanic migrant farmworkers that participated in a study expressed that they didn't understand that diabetes was a chronic disease that would require lifelong management. (36) Providing basic information about diabetes and how it can affect lives may encourage these groups to take action and join a lifestyle change program.

## Proven Promotion Strategies

The development of tailored Spanish-language resources that reflect the cultural values of the Hispanic community both within the copy and through imagery is crucial to successful education and message dissemination. Working with and involving leaders and influencers from community-based organizations and faith-based organizations in the development of messages and communication tactics that address the needs of community members has been proven to increase engagement and message penetration.

Health messages shared through Spanish-language TV and radio programming have been proven to motivate Hispanics/Latinos to make healthier choices. 30-second radio segments on Spanish-language stations aired during morning drive times and 4-5 minute TV health segments during Spanish-language morning shows have shown to be successful media tactics to reach Hispanics/Latinos, especially when it comes to uninsured Mexican American women living along the U.S.-Mexico border. (37)

Health intervention programs led by CHWs or promotoras have shown to be effective in educating communities about diabetes and promoting and achieving behavior change among Hispanics/Latinos. This is especially true for underserved and low-income individuals who may be unable to receive health services at a medical office or clinic. For example, home-based interventions delivered by CHWs have resulted in clinically and statistically significant reduction in HbA1c levels in Hispanic/Latino adults with HbA1c levels higher than 6 percent. (36)

Healthy eating is one of the biggest challenges Hispanics/Latinos face when trying to lead a healthy lifestyle. Providing education on ways to improve nutrition through classes about food preparation,

nutrition principles, food label reading and understanding, and portion sizes can help Hispanics/Latinos make better food choices. Offering tips or recipes for preparing healthier versions of traditional Hispanic/Latino dishes has proven to be successful in other health awareness programs, such as heart disease prevention.

Utilizing Spanish-language traditional media, such as TV and radio, coupled with activities involving experts, community role models and/or celebrities can motivate Hispanics/Latinos to make healthy lifestyle changes, such as consuming more fruits and vegetables and increasing physical activity. (37) The media programming and the spokespeople need to be selected carefully, as both the messages and the messengers need to be culturally relevant and genuine in order to garner results.

Education efforts should be conducted in groups to reflect Hispanics/Latinos' cultural values and allow for the development of a support system where participants can encourage each other. Additionally, these programs need to be offered at convenient times, as many Hispanics/Latinos have challenges with work schedules and/or lack childcare. (13)

Working with local churches to offer education workshops and provide health resources will increase engagement with the Hispanic/Latino community, as the church provides a safe, comfortable, and familiar atmosphere for the family.

Text-message-based programs can allow health care professionals to communicate with hard-to-reach, low-income Hispanics/Latinos to share health information and resources. (30)

## Questions for Consideration

### Understanding Your Hispanic/Latino Population

- What are the demographics of your local Hispanic/Latino population?

Demographics	Statistic/Data
Population Percentage	
Median Age	
Gender	
Country of Origin	
Language (spoken)	

Population with Prediabetes	
Economic Status	

- What are the cultural and language nuances for your local Hispanic/Latino community?
- Within your community, are there particularly active or large Hispanic/Latino subgroups?

**Health Care and Health Information Seeking Behaviors**

- Where specifically does your local Hispanic/Latino population go for health care?
- How accessible is health care within the community, especially for Hispanics/Latinos?
- Are the health information seeking behaviors the same or different for your local Hispanic/Latino population compared to other populations within the community? If different, how?
- Who are the trusted sources for health information for Hispanics/Latinos? Are they different or the same as other trusted sources?

**Trusted Sources**

- Who are the trusted thought leaders in your local community?
  - Community Based Organizations?
  - Faith Communities?
  - Health Care Providers?
  - Vocal advocates?
- Who has access to these groups? With whom do you need to collaborate?
- How can you utilize these trusted sources to help you with marketing and promoting your lifestyle change program?

**Media Habits**

- Which media channels, including social and digital media, are most popular and/or preferred among Hispanics/Latinos in your community?
- What relationships do you have with these media outlets? Who do you need to reach out to?
- What infrastructure does your organization have to utilize popular social and digital channels? What do you need to strengthen?

**Messages**

- Are your messages culturally appropriate?
- Do you have images that will resonate with your Hispanic/Latino population?
- Are you working with community organizations or groups that will be able to assist with message development for your marketing materials?

**Barriers and Benefits to National DPP**

- What are the specific barriers in your community?
- How will you work to mitigate these?
- What benefits are meaningful to your audience? How can you work these benefits into your marketing materials?
- What does your lifestyle change program offer the community that other prevention programs or events don't or can't?

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