



185 Using the American Community Survey to Describe Factors Contributing to Occupational Health Disparities Among Hispanic/Latino Workers in North Carolina, 2010-2014

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Eagle, Boise Centre

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BACKGROUND: Health disparities exist in North Carolina, in part due to high concentrations of racial/ethnic minority (e.g. Hispanic-identified Latino) workers in high-risk, low-wage industries and occupations. Compared to non-Hispanic (NH) White workers, Hispanic workers are 1.75 (95%CL 1.04, 2.80; $p < 0.05$) times more likely to die on the job. Previous findings have suggested certain socioeconomic barriers may also contribute to disparities in occupational health. Understanding and characterizing these barriers in greater detail can help state occupational health surveillance programs address the burden that work-related health disparities present to North Carolinians.

METHODS: The American Community Survey (ACS) provides information on many social, demographic, and economic population characteristics from a large sample that can be used to estimate

the socioeconomic burden among workers. Data were obtained from the 2010-2014 ACS 5-year Public Use Microdata Sample. Only subjects aged ≥ 16 years, employed and working in NC were selected for analysis.

RESULTS: From 2010 through 2014, the NC total weight estimate workforce consisted of 4,089,818 employed persons, 42% (95%CL 41.8,42.1) of the total sampled population. NH Whites comprised 68%, NH Blacks 19%, and Hispanics 8%. Almost 10% of respondents had some high school education or less, 27% reported not speaking English very well or not at all, 18% had no health insurance coverage, 8% lived at/below the poverty threshold, and 7% were non-US citizens. Among Hispanics, 43% had some high school education or less, 39% spoke English not very well or not at all, 56% had no healthcare coverage, 21% lived at or below the poverty threshold, and 60% were non-US citizens. Among non-US citizens, 45% had some high school education or less, 44% spoke English not very well or not at all, 59% had no healthcare coverage, and 22% lived at/below the poverty threshold. Among Hispanic non-US citizens, 59% had some high school education or less, 53% spoke English not very well or not at all, 75% had no healthcare coverage, and 27% lived at/below the poverty threshold.

CONCLUSIONS: Socioeconomic barriers exist that can disproportionately affect the health outcomes of Latino workers in North Carolina. Low levels of education and English-speaking abilities, lack of health insurance coverage and high poverty levels are especially prevalent among non-US-citizen Latino workers as compared to the general, Latino, or non-US-citizen working populations. Further studies should be conducted to collect more detailed worker experience data to highlight and describe other potential factors contributing to occupational health disparities in North Carolina.

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