

Pandemic's devastation among Latinos too often made invisible

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The U.S. population includes some 60 million people who are Latinx—a gender-neutral term to describe people of Latin American heritage. They have a plurality of political beliefs and cultural practices, and this diversity plays out in their population health data. While some health indicators suggest being a member of a Latinx community is advantageous, other data shows it carries inequitable disease burdens and uneven distribution of environmental and occupational risks.

The April issue of *AMA Journal of Ethics*[®] (@JournalofEthics) explores how America's colonial past persists in the discrimination and marginalization of Latinx people.

“Understanding the health of Latinx communities in the United States is a complex task,” wrote the editors of the theme issue, Fernando De Maio, PhD, Diana N. Derige, DrPH, and Diana Lemos, PhD, MPH, all of the AMA Center for Health Equity. “Doing this well requires moving beyond broad generalizations and recognizing that the Latinx community is not monolithic but actually very diverse.”

Articles include:

1 “Latino Invisibility in the Pandemic.”

Devastating effects of COVID-19 among Latinos have not been adequately emphasized by media, public health, research or government.

2 “How Should Clinicians Express Solidarity With Asylum Seekers at the U.S.-Mexico Border?”

Transnational violence has been created by international policy, militaristic interventions and multinational organizational administration of border operations.

3 “How Should Health Equity Researchers Consider Intersections of Race and Ethnicity in Afro-Latino Communities?”

Diversity is key to generating better understandings of health inequity’s causes in U.S. Latino communities.

4 “How Should Representation of Subjects With LEP Become More Equitable in Clinical Trials?”

Underrepresentation of individuals with limited English proficiency (LEP) who speak Spanish is ongoing in phase 3 biomedical clinical trials and exacerbates health inequity.

Find out more about the AMA’s strategic plan to embed racial justice and advance health equity.

Listen and learn

The journal’s April “Ethics Talk” podcast features Ruth Enid Zambrana, PhD, MSW, distinguished university professor in the Harriet Tubman Department of Women, Gender and Sexuality Studies at the University of Maryland in Baltimore, who discusses how decisions about demographic data collection can either illuminate or obscure health inequity.

Later on, De Maio, Derige and Lemos detailed the work the AMA Center for Health Equity has been doing to advance Latinx health equity. DeMaio is the center’s director of research and data use and professor of sociology at DePaul University. Derige is vice president of health equity strategy and development at the AMA, and adjunct faculty at the University of North Carolina Gillings School of Global Public Health. Lemos directs evaluation and learning at the AMA Center for Health Equity and is an adjunct professor in the Program in Public Health at Northwestern University.

The April issue also features five author-interview podcasts. Listen to previous episodes of the “Ethics Talk” podcast or subscribe in iTunes or other services.

“Latinx COVID-19 Health Inequities Report: Insights for the Health Care Field” was produced by the AMA Center for Health Equity and gleaned from interviews with physicians and other key health stakeholders “at the intersection of the Latinx community and the COVID-19 response.” Download the report now.

Earn CME

These *AMA Journal of Ethics* CME modules are each designated by the AMA for a maximum of 1 *AMA PRA Category 1 Credit*[™]:

- Should Clinicians Be Activists?
- What Should Count as Best Practices of Forensic Medical and Psychological Evaluations for Children Seeking Asylum?
- Recognizing and Dismantling Raciolinguistic Hierarchies in Latinx Health.

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A look ahead

Upcoming issues of the *Journal* will focus on unregulated supplements and health care in conflict zones. Sign up to receive email alerts when new issues are published.