Latinos/x are the largest racial/ethnic group in California and play an important role economically, socially, and culturally. Yet, they face challenges such as higher poverty rates, lack of insurance, and poorer health outcomes compared to other groups. This fact sheet presents select findings about the health care priorities and experiences of Latino/x Californians from a recent statewide health policy survey conducted by NORC at the University of Chicago with support from the California Health Care Foundation.

Top Health Priorities
Latinos/x Californians say the following health care issues are “extremely” or “very” important:

▸ Making sure public health departments have the resources they need to respond to emergencies and crises such as pandemics, earthquakes, and fires (89%)

▸ Making sure there are enough doctors, nurses, and health care providers across California (85%)

▸ Making sure people with mental health problems can get the treatment they need (84%)

▸ Lowering the amount that people pay for health care (83%)

▸ Making sure people have access to reproductive health care including abortion (72%)

Health Care Affordability and Medical Debt

▸ 52% of Latinos/x say they have medical debt, more than other racial and ethnic groups in California.

▸ 49% say they or a family member have skipped care due to cost — and 53% of those said skipping care made their condition worse.

▸ 40% say they or their family had problems paying at least one medical bill in the last 12 months — up from 32% last year.

Access to Health Care

▸ Latino/x Californians are less likely to say they have a primary care physician (71%) compared to Californians who are Asian (87%), White (87%), or Black (83%).

▸ Spanish-speaking Californians are less likely to say they have a primary care physician than English speakers (71% vs. 85%).

Experiences in the Health Care System

▸ 70% of Latinos say the health system “regularly” or “occasionally” treats people unfairly based on their race or ethnic background.

▸ 62% say they have experienced negative interactions with providers who didn’t listen to them, made assumptions, or didn’t treat them with respect.
31% of Spanish-speaking Californians say they would have gotten better medical care if they belonged to a different racial or ethnic group.

**Health Care Workforce**
- 50% of Latino/x Californians report that their community does not have enough mental health care providers.
- 42% say their community does not have enough primary care providers to serve their health care needs.
- Latino/x Californians are also more likely than White Californians to report that their community does not have enough medical specialists.

**Housing Impacts on Health**
- 50% of Latinos/x say housing has a big impact on health — and 54% say the state is doing “not too / not at all well” at providing mental and physical care to people experiencing homelessness.
- 40% are worried they will fall into homelessness.
- 21% say they or someone close to them has experienced homelessness in the last five years.

**Home Supports**
- 62% of Latinos/x say they would prefer living at home as they or their family members get older, but 50% say they are “not too” or “not at all” confident they will have the financial resources to pay for home-based support.
- 19% say they are providing ongoing living assistance — such as cooking, cleaning the house, or getting dressed — to a family member or close friend.

Learn more at **www.chcf.org/2023poll**

**About the Author**
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**About the Foundation**
The California Health Care Foundation (CHCF) is an independent, nonprofit philanthropy that works to improve the health care system so that all Californians have the care they need. We focus especially on making sure the system works for Californians with low incomes and for communities who have traditionally faced the greatest barriers to care. We partner with leaders across the health care safety net to ensure they have the data and resources to make care more just and to drive improvement in a complex system.

CHCF informs policymakers and industry leaders, invests in ideas and innovations, and connects with changemakers to create a more responsive, patient-centered health care system.

**About the Survey**
The CHCF California Health Policy Survey was conducted September 30, 2022, through November 1, 2022, via a mixed AmeriSpeak Panel \((n = 1,522)\) and address-based sample \((n = 217)\) design among a random, statistically representative sample of 1,739 adults aged 18 and older living in California. Interviews were administered in English \((n = 1,430)\) and Spanish \((n = 309)\). A multistage weighting design was applied to ensure accurate representation of the California adult population.