

toward educating the concerned public about the unevenness of disease occurrence and less effort directed toward intensive epidemiologic studies in unproductive settings that leave public health scientists and the public with an unsatisfying result.

REFERENCES

- Schulte PA, Ehrenberg RL, Singal M: Investigation of occupational cancer clusters: theory and practice. *Am J Public Health* 1987; 77:52-56.
- Smith PG: Spatial and temporal clustering. *In*: Schottenfeld D, Fraumeni JF (eds): *Cancer Epidemiology and Prevention*. Philadelphia: W.B. Saunders Company, 1982.
- Black GV, McKay FS: Mottled teeth: an endemic imperfection of the teeth, heretofore unknown in the literature of dentistry. *Dent Cosmos* 1916;58:129-156.
- McKay FS: The establishment of a definite relation between enamel that is defective in its structure, as mottled enamel, and the liability to decay. *Dent*

- Cosmos* 1929; 71:747-755.
- McKay FS: Mottled enamel: the prevention of its further production through a change of the water supply at Oakley, Idaho. *J Am Dent Assoc* 1933; 20:1137-1149.
- Dean HT: Endemic fluorosis and its relation to dental caries. *Public Health Rep* 1938; 53:1443-1452.
- Grufferman S: Hodgkin's disease. *In*: Schottenfeld D, Fraumeni JF (eds): *Cancer Epidemiology and Prevention*. Philadelphia: W.B. Saunders Company, 1982; 744.
- Creech JL, Johnson MN: Angiosarcoma of the liver in the manufacture of polyvinyl chloride. *JOM* 1974; 16:150-151.

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Hispanic/Latino—What's in a Name?

What's in a name? That which we call a rose
By any other name would smell as sweet.

William Shakespeare¹

Rose is a rose is a rose is a rose.

Gertrude Stein²

Most of us are newcomers to this land. Our roots here may extend back hundreds of years or only a few days, but they end as immigrant, refugee, indentured servant or slave. At the turn of the century, our expressed ethic was to merge these past national identities in a great melting pot from which a new American identity would emerge in a classless, casteless society.

The Civil Rights movement in the middle of the present century exposed the sordid realities behind such dreams; the word ethnic came to replace the older American ethic. The term "Ethnics" was first applied to a diverse group of second and third generation European immigrants settled in inner-city neighborhoods, who feared the invasion of Blacks; the same word, "ethnic" was later applied to an equally diverse group of more recent immigrants from Latin American countries and Puerto Rico, although the latter were citizens of the United States.

American dictionaries define the word ethnic in slightly different ways but with a sharp difference from the British definition of the term. Thus, the Americans:

- "relating to a community of physical and mental traits possessed by members of a group as a product of their heredity and cultural tradition."³
- "pertaining to or characteristic of a people, especially to a speech or culture group."⁴
- designating any of the basic groups or divisions of mankind or of a heterogeneous population as distinguished by customs, characteristics, language, common history, etc."⁵

The English definition is very simple:

- "pertaining to a race; peculiar to a race or nation."⁶

This confusion of definition is reflected in the manuscripts we receive for publication in the *Journal*: ethnicity can be synonymous with race, culture, or nationality or any combination of the three different terms.

All four dictionaries agree on one point, however. The word ethnic is derived from the Greek *ethnikos* meaning race

or nation; moreover, it was first applied to nations not converted to Christianity—to heathens, pagans, i.e., groups not within the fold. Those who read the Hayes-Bautista/Chapa penetrating historical analysis in this issue of the *Journal*, of the uses to which the "ethnic" term "Hispanic" has been put in the United States⁷ will recognize the appropriateness of this application of ethnic. Whatever cohesion exists within the diverse groups covered by the term "Hispanic", it is a product of the prejudice and discrimination directed against them. Treviño, who opposes any change in current terminology, is fully in agreement on this point.⁸

The situation is reflected in an amusing way by a columnist writing in a Spanish language newspaper published in Los Angeles. Freely translated, his definition of "Hispanic" runs as follows: "Hispanic seems to be a subdivision of Latinos into which we put only those Latin Americans of low income who have black skins or are obvious half breeds."⁹

Prejudice and discrimination are hardly new to America. Quite apart from Blacks, immigrants—first from Ireland and China, then from Italy, Poland and other European countries and French speaking Canada—endured the same humiliations from those in seats of power when they arrived here. What distinguishes the "Hispanics" is that they are lumped together as a single group without even the dignity of being assigned to a country of origin, something we have not done to any other immigrant group in official statistics until the recent appearance of "Southeast Asians". In general, recent immigrants, including most "Hispanics", are comparable with Blacks: minorities that tend to be poor and poorly educated; skin color, language, accent, dress or behavior make them stand out as palpably different from the majority; hence they become objects of suspicion.

All four dictionaries consulted also agree on the definition of the term "Hispanic".* It is derived from the Latin Word for Spain, *Hispania*, and means Spanish; occasionally it is used to take in the whole Iberian peninsula. Most of those whom we call "Hispanic" (or their ancestors) may speak Spanish or Portuguese but, otherwise, they (or their ancestors) have little or no connection with the people of the Iberian peninsula. They have immigrated to the United States

* Dr. Treviño⁸ consulted a different dictionary and came up with a somewhat different definition.

from several different countries south of our border; a great many of them are native to the Western Hemisphere with American ancestry going back thousands of years; others have come from Africa as slaves; ancestors of a lesser number have come from a variety of European countries including Spain; before the arrival of the pilgrims or the first families of Virginia, one small group of predominantly Spanish ancestry had settled on land we seized from our Mexican neighbors.

We specify the characteristics of a population being studied, the stimulus variables, in order to relate them to a response variable, the population's health or health services. Characteristics like education and socioeconomic status are no more than gross indicators of specific factors that bear on access to health services or reflect diet, housing, stress, occupation, etc., that may have a more direct effect on health. "Racial" or "ethnic" characteristics may also influence the response variable directly via genetic and lifestyle factors. Among the "ethnic" group we label as "Hispanic", however, one can find wide differences in genetic background, culture, tradition, lifestyle, and health behavior¹⁰—differences related to their country of origin and when they or their ancestors arrived here, as well as their current social class. Discrimination is a characteristic that may vary less widely within the group. To isolate the effect of these different characteristics, much less the direct effect of the specific factors which they reflect, is a difficult task. It is virtually impossible without access to more information than is available through routine census or vital statistics records.

We have compounded our epidemiologic problem by lumping together Latin American immigrants from different countries, American citizens from Puerto Rico, and even those Filipinos who choose to so designate themselves in a single category. As both articles on terminology in this issue of the Journal^{7,8} imply, the reason is political, the umbrella term identifies a minority group. A newly added question from the mid-decade state census in Massachusetts makes this crystal clear. It covers the waterfront (without, incidentally, bringing in Filipinos): "Is this person of Hispanic/Latino origin or decent? (such as Puerto Rican, Cuban, Dominican, Mexican, Mexican-American, Chicano, Central American, South American)." To be answered yes or no.

Clearly the question is meant to identify a minority group, and its motivation arises from concerns about civil rights. In gathering data for official purposes, epidemiologic issues are secondary considerations if they are considered at all.

Granted the need for a conglomerate term, why choose "Hispanic"? I do not know the answer to this question. No one has taken the trouble to poll the group to be identified and asked them what they would like to be called. I do know that in some parts of the country one ridiculous term has led to another. Those who are not "Hispanics", Blacks, Asians, or Native Americans have been dubbed "Anglos". "Anglo" per se does not seem to be defined in any recent dictionary, although there are anglophiles and anglophobes. The obvious connection of "Anglo" with England has caused anglophobes of Irish and other non-English descent to write letters of justifiable complaint to this editor. I sometimes wonder if the term "Anglo" was coined by the "Hispanic" community as a kind of tit for tat. If so, perhaps "gringo" would have been more appropriate.

In this issue of the Journal, David Hayes-Bautista and Jorge Chapa, after reviewing the sordid history of our ignorant and insensitive view of our neighbors to the south, propose a new umbrella term, Latino,⁷ a term used by the *Los Angeles Times* in preference to Hispanic.¹¹ Fernando Treviño

defends continued use of the term "Hispanic", largely on pragmatic grounds: a new term would create even more confusion and might create new complications. Certainly inconsistency in terminology over time has already created complications for both researchers and government agencies.¹²

Nevertheless, the authors of both these papers would agree that, for epidemiologic and health services research, conglomerate (umbrella) terms should be avoided wherever possible. Items such as birthplace, country of origin, recency of immigration, and language facility will be more specific and relevant as has been pointed out earlier in this Journal.¹³⁻¹⁵ Reference to census or vital statistics is often necessary to calculate rates, but even here use of a conglomerate term can sometimes be avoided.

Earlier in the century, birthplace of parent was often used as an identifier. In 1916, for example, the *American Journal of Public Health* reported a study by the Chicago Board of Health comparing the distribution of country of birth of the population with the distribution of diarrheal disease deaths under two years of age.¹⁶ Three years later the *American Journal of Diseases of Children* published an extensive analysis of infant deaths per 1,000 live births in upstate New York and compared the data with those of the US Birth Registration Area. The upstate New York rate was 87 (the lowest yet recorded), native white 84, "colored" 218, foreign white 108, ranging from 72 (British) to 130 (Austro-Hungarian).¹⁷

Birthplace of parent and birthplace of decedent are still items on the recommended US standard birth and death certificates, but few studies make use of the item in spite of its availability. In spite of the limitations of this entry,^{13, 14} I am glad to say that one such study will soon be published in this Journal.¹⁸

Once the wave of late 19th and early 20th century migration had subsided and until recently, both "nationality" and "race" were ignored in most official compilations of data, White and non-White (another type of "nonterm") were the designations used. "Non-White" was virtually equivalent to Black and so regarded by most investigators. Until recently the distribution of the three major groups of Latin American immigrants—Cubans, Puerto Ricans and Mexicans—were fairly well delineated geographically in the United States. This has become less true as immigration (legal and illegal) from Central American and Latin American Caribbean countries have increased and earlier immigrants or their descendants have dispersed more widely. Nevertheless, knowledge of the community will frequently enable the investigator to estimate specific nationality from census or vital records that supply only a "Hispanic" designation. Specificity, even if approximate, is always to be preferred. Epidemiologically there is no satisfactory umbrella term.

We have discussed these problems of terminology many times at meetings of the Journal's Editorial Board. As an editor, the term "Hispanic" offends me because it is a corruption of the language, a greater corruption than the term Latino. I believe that what has been done can be undone if we so desire. We change the codification of causes of death every 10 years and create conversion terms to adjust to the change. We could do the same with Latino for Hispanic.

On the other hand, we have been unable to achieve consensus on terminology in the Editorial Board, and the two divergent articles in this issue of the Journal imply that a broader consensus may also be difficult to achieve. The federal Office of Management and Budget may have corrupt-

ed the language, but language changes over time, incorporating corruptions one after another.

If we are a democracy, what may be needed is a truly representative opinion poll of those of Latin American descent or origin. We need to know not only what they prefer to be called, but also how they would designate themselves under a variety of different questions. Perhaps the Massachusetts question is the best way to gather in all of them. Perhaps, like Romeo, they are indifferent to the name. Certain it is that we cannot free ourselves from the umbrella term until we are mature enough to discard the "racial" and "ethnic" stereotypes that continue to plague our society.

REFERENCES

1. Shakespeare W: Romeo and Juliet, II, ii, 43.
2. Stein G: Sacred Emily. *In*: Tender Buttons. New York: Claire Marie Press, 1914.
3. Webster's Third International Dictionary. Springfield: G & C Merriam, 1971.
4. Random House Dictionary of the English Language. New York: Random House, 1973.
5. Webster's New World Dictionary. New York: Simon & Shuster, 1984.
6. Compact Edition of the Oxford English Dictionary. London: Oxford University Press, 1971.
7. Hayes-Bautista DE, Chapa J: Latino terminology: conceptual basis for a standardized terminology. (*Different Views*) *Am J Public Health* 1987; 77:61-68.
8. Trevino FM. Standardized Terminology for Hispanic populations. (*Different Views*) *Am J Public Health* 1987; 77:69-72.
9. Casparino R (Burbujas): Hispanics, una subdivision de 'latinos'? Los Angeles: La Opinion, 1985.
10. Trevino FM: Health indicators for Hispanic, Black and White Americans. DHHS Pub. No. (PHS) 84-1576, Vital and Health Statistics series 10, No. 148. Hyattsville, MD: National Center for Health Statistics, 1984.
11. Los Angeles Times: Style Guide, Ethnic Identifications.
12. Chilton R, Sutton GF: Classification by race and rates. *Am Statist* 1986; 40:197-201.
13. Giachello AL, Bell R, Aday LA, Andersen RM: Uses of the 1980 census for Hispanic health services research. *Am J Public Health* 1983; 73:266-274.
14. Hayes-Bautista DE: On comparing studies of different Raza populations. *Am J Public Health* 1983; 73:274-276.
15. Deyo RA, Diehl AK, Hazuda H, Stern MP: A simple language-based acculturation in scale for Mexican Americans: Validation and application to health care research. *Am J Public Health* 1985; 75:51-55.
16. Anon. Infant Mortality and nationality in Chicago. *Am J Public Health* 1916; 6:1018.
17. Eastman PR: The relation of parental nativity to the infant mortality of New York State. *Am J Dis Child* 1919; 17:195-211.
18. Rosenwaike: Mortality differences among persons born in Cuba, Mexico, and Puerto Rico in the United States, 1979-81. *Am J Public Health* 1987; 77:(in press).

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Wisdom from Ancient India

T *Truth is hard to find by taking sides in a debate. Those who advance arguments and counterarguments as if they were finalities, never, in fact, arrive at any conclusions, going round and round like the man seated on the oil press. Therefor, letting go of this wordy warfare, apply your minds to the essential truth; for without dispersing the obscuring cloud of passion, there can be no appreciation of the object to be known."*

—from the Caraka Samhita, Jamnagar (India), Shree Gulabkunverba Ayurvedic Society, 1949