

Six Major Health Burdens for Minority Populations

Minority populations face serious health burdens as a result of their socioeconomic status, race and ethnicity. Specifically, these populations are affected by health disparities related to: infant mortality, cancer screening and management, cardiovascular disease, diabetes, HIV/AIDS, and immunizations.

Infant Mortality

In comparison to Caucasian infants, American Indian, African American and Puerto Rican infants have higher death rates. In 2000, infant mortality among African American occurred at a rate of 14.1 deaths per 1,000 live births, more than twice the national average. Sudden infant death syndrome (SIDs) is higher among American Indians and Alaskan Natives when in comparison with Caucasians. Higher rates of infant mortality among minority populations are a result of a multitude of factors: smoking, drug and alcohol abuse, poor nutrition, stress, insufficient prenatal care, chronic illness or other medical problems.

Cancer Screening and Management

Cancer is the second leading cause of death in the United States and has a disproportionate effect on minority populations. The rates of mortality due to cervical cancer for African-American women are twice as high as Caucasian women. Furthermore, African-American women have a great risk of dying from breast cancer than Caucasian women. African-American men have a greater risk of dying from colon, rectum, prostate and lung cancer than Caucasian men. This disproportionate effect is likely attributed to lack of proper screening and disease management programs for minority populations, reduced access to healthcare services and lack of patient knowledge.

Cardiovascular Disease

In the United States, heart disease and stroke are the leading causes of death among minority populations. In 2000, mortality rates for cardiovascular disease were 29 percent higher among African-Americans than among Caucasians. This is attributed to a higher prevalence of hypertension among African-Americans as well as other minority populations. Research demonstrates that socioeconomic status increases the risk of CVD, especially among minority populations. Also, behavioral risks such as poor nutrition and tobacco use increase the risk of CVD among minority populations. Modifications in behavior and lifestyle and prevention programs are appropriate public health measures that can help reduce this health burden among minority populations.

Diabetes

In the United States, 7 percent, or 20 million individuals, are affected by diabetes. American-Indians and Alaska Natives are 2.6 times more likely to be affected by diabetes due to genetic and social factors. African-Americans are twice as likely to develop diabetes and Hispanics are 1.9 times more likely to develop diabetes in comparison to Caucasians. Reducing the burden of diabetes among minority populations can be achieved through early screening and disease management programs that will improve their health outcomes and quality of life.

HIV/AIDS

HIV/AIDS has a disproportionate burden on minority populations. Statistics demonstrate that it is the leading cause of death for African-American males, ages 35-44. African-Americans and Hispanics make up approximately 26 percent of the US population but account for 66 percent of adult AIDS cases and 82 percent of pediatric AIDS cases. It is important note that 78 percent of women diagnosed with HIV/AIDS are minorities. Healthcare providers can reduce the burden of HIV/AIDS on minority population through early screening methods and access to appropriate healthcare services and medications.



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Immunizations

Disparities among immunization rates for minority populations, especially among adults, continue to persist. In 2001, African-Americans and Hispanics, ages 65 and older, received fewer influenza and pneumococcal vaccines when compared to Caucasians. Research also demonstrates that children living in poverty had lower immunization rates. Public health professionals can reduce disparities associated with lower immunization rates through awareness campaigns, enhancing delivery of vaccines to minority populations, and reducing barriers affecting access.

These have been identified as the six major health burdens because they affect individuals of all ages among minority populations. State policymakers can reduce the disproportionate effects of these health burdens on minority populations through effective public policy measures that emphasize access to preventive and primary healthcare services and culturally sensitive health promotion programs that focus on increasing health education and improving quality of life.

Source: Centers for Disease Control and Prevention. Eliminating Racial and Ethnic Health Disparities. Accessed from <http://www.cdc.gov/omh/AboutUs/disparities.htm>



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