In 2003, the death rate for African Americans was higher than Whites for heart diseases, stroke, cancer, asthma, influenza and pneumonia, diabetes, HIV/AIDS, and homicide. (Source: U.S. Department of Health & Human Services, The Office of Minority Health, <u>http://www.omhrc.gov/templates/browse.aspx?lvl=2&lvlID=51</u>.)

Poor outcomes in education and economics are closely tied to poor outcomes in health. Like the disparities in education, disparities in health persist from the beginning of life onwards. The black infant mortality rate is more than twice as high as that for white infants. The following statistics give some illustration of other grave health concerns that disproportionately affect African Americans.

- 1 African Americans make up 13% of the American population, but half of all cases of HIV and AIDS. Once diagnosed, African-Americans are less likely than whites to receive the most effective HIV treatments such as antiretroviral therapy.
- 2 African Americans are 25% more likely to die of cancer than white Americans, and more than twice as likely to die of diabetes.
- 3 Seven in ten African Americans suffer from obesity, compared to 6 in 10 white Americans. African American children are also more likely to be obese than white children.

Access to Health Insurance

Although African Americans only comprise 13% of the U.S. population, they account for the highest percentage of people living below the poverty level. In comparison, Whites comprise approximately 80% of the US population and have the lowest percentage of people living below the poverty line. African Americans comprise 15% of the uninsured in this country and are significantly less likely to obtain health insurance coverage through employer sponsored health insurance. Additionally, African Americans are more likely to obtain coverage through publicly funded programs like Medicaid, Medicare, and SCHIP.

Distribution of Medicare Enrollees, 2005

Medicare Enrollees	Number	Percent
White	28,618,740	83%
Black	2,895,500	8%
Hispanic	1,917,520	6%
Other	1,222,360	4%
Total	34,654,120	

Source: statehealthfacts.org. Persons of Hispanic origin may be of any race; all other racial/ethnic groups are non-Hispanic. "Other" includes Asian-Americans, Pacific Islanders, American Indians, Aleutians, Eskimos and persons of "Two or More Races". These groups have been combined due to their small populations in many states which prevent meaningful statistical analyses of the groups individually.

Medicaid Coverage Rates for the Non-elderly by Race/Ethnicity, 2005

Medicaid Coverage	Number	Percent
White	15,555,990	9%
Black/African American	8,214,680	25%
Hispanic	8,784,650	22%
Other	2,247,430	13%
Total	34,802,750	

Source: statehealthfacts.org

Persons of Hispanic origin may be of any race; all other racial/ethnic groups are non-Hispanic. "Other" includes Asian-Americans, Pacific Islanders, American Indians, Aleutians, Eskimos and persons of "Two or More Races". These groups have been combined due to their small populations in many states which prevent meaningful statistical analyses of the groups individually. The distribution of the Non-elderly with Medicaid by Race/Ethnicity for the United States only is as follows: White, 15,555,992 (9.3%), Black, 8,214,677 (25.2%), Hispanic, 8,784,647 (21.6%), American Indian, 304,832 (19.7%), Asian-Americans and Pacific Islanders, 1,006,477 (8.6%), and Two or More Races, 936,122 (22.4%).

In 2003, 51.5 percent of African-Americans compared to 65.6 non-Hispanic Whites used employer-sponsored health insurance. Also in 2003, 23.7 percent of African-Americans compared to 10.4 percent of non-Hispanic Whites relied on public health insurance. (Source: U.S. Department of Health & Human Services, The Office of Minority Health, http://www.omhrc.gov/templates/browse.aspx?lvl=2&lvlID=51.)

Data in the first half of 2004 show that Hispanics (33.4 percent) and non-Hispanic blacks (15.9 percent) were more likely to lack health insurance than non-Hispanic whites (10.1 percent). (Source: Center for Disease Control: National Center for Health Statistics-National Health Interview Survey, January – June, 2004)

In 2005, 19.5 percent of African-Americans compared to 11.2 percent of non-Hispanic Whites were uninsured. (Source: U.S. Department of Health & Human Services, The Office of Minority Health, http://www.omhrc.gov/templates/browse.aspx?lvl=2&lvlID=51.)

HIV/AIDS

Racial and ethnic minorities have been disproportionately affected by HIV/AIDS since the beginning of the epidemic and now represent the majority new AIDS cases (71%) and of those estimated to be living with AIDS (65.5%) in 2005. African Americans have the highest AIDS case rates of any racial/ethnic group followed by Latinos, American Indian/Alaska natives, Whites and Asian/Pacific Islanders. The AIDS case rate per 100,000 for African Americans was more than 9 times that of Whites in 2005.

Race/ethnicity	2004	2005	Cumulative
White, not Hispanic	5,13	7 5,006	235,879
Black, not Hispanic	9,302	2 8,562	211,559
Hispanic	2,664	4 2,444	77,125
Asian/Pacific Islander	113	97	3,383
American Indian/Alaska Nat	ive 85	81	1,657
Region of residence			
Northeast	4,904	4 3,948	174,327
Midwest	1,619	9 1,541	52,933
South	8,35	3 8,240	191,845
West	2,57	7 2,588	111,652
Total for 50 states and the			
District of Columbia	17,4	53 16,310	530,756

Estimated Numbers of Deaths of Persons with AIDS 2004-2005 and Cumulative

Note. The numbers do not represent reported case counts. They are point estimates, which result from adjustments of reported case counts. The reported case counts have been adjusted for reporting delays and for redistribution of cases in persons initially reported without an identified risk factor, but not for incomplete reporting. Source: HIV/AIDS Surveillance Report. Volume 17. Department of Health & Human Services

People Living with AIDS, 2005

Race/ethnicity	Percentage	Number
White	34.5	150,997
Black	43.1	188,730
Hispanic	20.5	89,915
Asian/Pacific Islander	1.0	4,410
American Indian/Alaska Native	0.4	1,597
Unknown Race or Multiple Races	0.5	2,331
Total		437,980

(Source: statehealthfacts.org)

Black Women & HIV/AIDS: Early in the epidemic, HIV infection and AIDS were diagnosed for relatively few women and female adolescents. Today, women account for more than one quarter of all new HIV/AIDS diagnoses. Women of color are especially affected by HIV infection and AIDS. In 2002 (the most recent year for which data are available), HIV infection was the leading cause of death for African American women aged 25–34 years, the third leading cause of death for African American women aged 35–44 years, the fourth leading cause of death for African American women aged 45–54 years and for Hispanic women aged 35–44.

As of 2004, of the 123,405 women living with HIV/AIDS, 64% were African American, 19% were white, 15% were Hispanic, less than 1% were Asians and Pacific Islanders, and less than 1% were American Indians and Alaska Natives. Of the HIV/AIDS diagnoses for women during 2001–2004, an estimated 15% were for women aged 13–24 years. (Source: The Center for Disease Control & Prevention - <u>http://www.cdc.gov/hiv/topics/</u> women/resources/factsheets/women.htm)

Obesity

To date, the American Obesity Association has reported that approximately 127,000,000 Americans are overweight; 60,000,000 are obese, while 9,000,000 are severely obese. Most alarming is the fact that 64.5 percent of U.S. adults, age 20 years and older, are overweight and 30.5% are classified as obese.

Obesity is a frightening health risk because it increases the chance for developing one or more serious medical conditions, which can inevitably lead to poor health and premature death. Obesity is associated with more than 30 medical conditions, and scientific evidence has established a strong relationship with at least 15 of those conditions.

Many obesity related diseases are found in higher rates among various members of racialethnic minorities compared with Whites. In fact, according to the Centers for Disease Control and Prevention (CDC), 77% of African-American women and 62% of African-American men are overweight while only 47% of White women and 62% of White men are overweight – which helps explain why African Americans lead in many statistics for obesity-related conditions, like cancer, diabetes, and cardiovascular disease. Further, nearly 70% of African Americans are considered medically obese.

Being overweight or obese increases the risk of many diseases and health conditions, including the following:

- Hypertension
- Dyslipidemia (high total cholesterol or high levels of triglycerides)
- Type 2 diabetes

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- Coronary heart disease
- Stroke
- Gallbladder disease
- Osteoarthritis
- Sleep apnea and respiratory problems
- Some cancers (endometrial, breast, and colon)

(Source: Centers for Disease Control)

United States Adult Obesity Rates, 2005

Race/ethnicity	Percentage
White	57.8
Black	68.2
Hispanic	59.6
Asian/Pacific Islander	37.1
American Indian/Alaska Native	66.5
Other	58.2

(Sources: statehealthfacts.org; Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System Survey Data, 2005, unpublished data.)

Overweight and obesity are risk factors for many chronic conditions such as diabetes, hypertension, arthritis, and other musculoskeletal problems. Among three major racialethnic groups, the prevalence of obesity was highest for non-Hispanic black women (49 percent) (when compared to non-Hispanic whites (male/female), non-Hispanic blacks (male/female) and Mexican Americans (male/female) over the age of 20). (Source: National Health and Nutrition Examination Survey, 1999-2002Center for Disease Control: National Center for Health Statistics)

Heart Disease

 $\sqrt{\text{Heart disease is the leading killer across most racial and ethnic minority communities in the United States, accounting for 27% of all deaths in 2004.}$

 $\sqrt{\text{African Americans are 1.5 times as likely as non-Hispanic whites to have high blood pressure. 31.5% of African Americans have hypertension compared to 21.3% of whites. <math>\sqrt{\text{African American men are 30\% more likely to die from heart disease than non-Hispanic white males. This occurs despite the fact that 10.3% of African Americans have heart disease vs. 12.6% of whites. (Source: Office of Minority Health, 2005)$

According to a Centers for Disease Control and Prevention (CDC) report, there are continuing racial/ethnic disparities in the prevalence of hypertension and in the percentages of those with high blood pressure (HBP) who are aware of, are being treated for, and are in control of their condition. Because of the serious health consequences associated with HBP, greater efforts are needed to prevent HBP and/or improve BP control and HBP diagnosis rates among all populations.

Greater efforts are needed specifically to prevent HBP among non-Hispanic blacks, who have a higher prevalence, and to increase BP treatment and control among Mexican Americans, who appear to have lower rates of treatment and control, compared with other racial/ethnic populations. (Source: Centers for Disease Control and Prevention <u>http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5401a3.htm</u>)

Cancer

In 2003 cancer (and heart disease) accounted for about 48% of deaths in the black population (Source: National Vital Statistics Reports, August 2007).

In 2003, African American women were 10% less likely to have been diagnosed with breast cancer, however, they were 36% more likely to die from breast cancer, compared to non-Hispanic white women. In 2003, African American women were 2.3 times as likely to have been diagnosed with stomach cancer, and they were 2.2 times as likely to die from stomach cancer, compared to non-Hispanic white women. (Source: U.S. Department of Health & Human Services, The Office of Minority Health, http://www.omhrc.gov/templates/browse.aspx?lvl=2&lvlID=51. For more information on African Americans & Cancer, please see: http://www.omhrc.gov/templates/content.aspx?lD=2826)

Diabetes

Today, diabetes is one of the most serious health challenges facing women in the United States, especially women of color. Complications from diabetes rank among the top 10 causes of death for all women. Whether diabetes is an underlying cause or among multiple causes of death, the toll on women, especially women of color, is significant. For African American women, the diabetes death rates are the highest in terms of both underlying cause (49.6 per 100,000 compared to 19.9 for white women) and multiple causes (130.6 per 100,000 compared to 61.9 for white women). (Source: Centers for Disease Control and Prevention, National Center for Health Statistics, Healthy Women: State Trends in Health and Mortality.)

Death from diabetes within the black population tends to be higher for women than for men (Source: National Vital Statistics Reports, August 2007).