

# Data Brief

MDHHS 2016  
Health Equity  
Report

## Monitoring Health Disparities in Michigan, 2005-2013

*The Experience of African Americans*

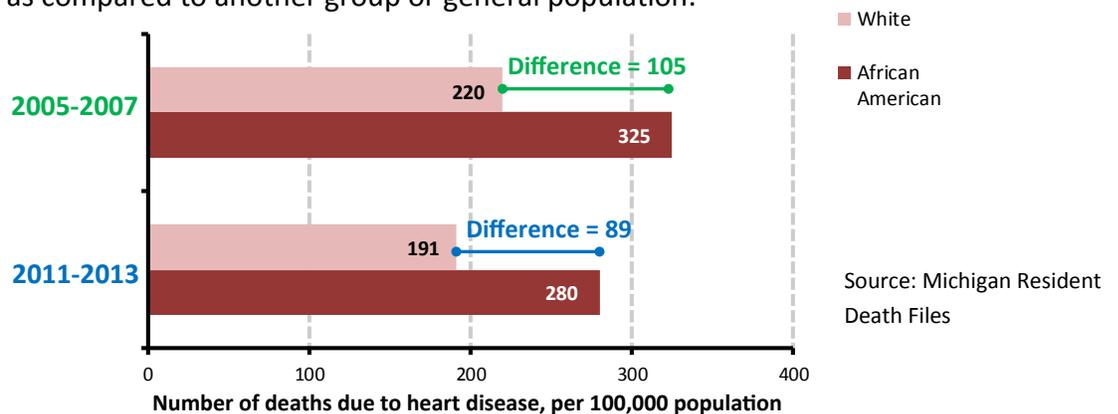


## Monitoring Health Disparities in Michigan, 2005-2013

### *The Experience of African Americans*

**Heart disease** kills more people in Michigan than any other health condition. The mortality rate for heart disease for both Whites and African Americans (AA) or Blacks dropped between 2005-2007 and 2011-2013. However, the mortality rate was still **1.5 times higher** among AA than Whites indicating a health disparity between Whites and AA for heart disease.

**Health disparities** are measurable differences in the burden of disease among specific populations as compared to another group or general population.



Imagine there are two groups of 100,000 people, one group made up of Whites and the other AA. From 2005-2007, there were **105** more heart disease deaths in the AA group than the White group in Michigan. Between 2011-2013, there were **89** more heart disease deaths in the AA group than the White group. If the AA mortality rate for heart disease was the same as the White rate in 2005-2007, an estimated **4,631 AA lives** in Michigan could have been saved. In 2011-2013, an estimated **3,859 AA lives** could have been saved.

Obesity, high blood pressure and high cholesterol are risk factors for heart disease. Lifestyle choices such as eating an unhealthy diet, physical inactivity, tobacco use and excessive alcohol use can place people at higher risk. Where people are born, live, work, and play need to be considered. Conditions and resources such as access to fresh fruits, vegetables, parks, and safe neighborhoods, all play an

While some health disparities may be due to genetics or family history, these factors cannot fully explain the disparity between Whites and AA for heart disease mortality.



important role in health.<sup>1</sup>

Estimates for additional health indicators are available in the report "Michigan Health Equity Data Project – 2016 Update," available at [www.michigan.gov/minorityhealth](http://www.michigan.gov/minorityhealth).

**Between 2011-2013, a higher proportion of AA adults reported obesity, no leisure time physical activity and high blood pressure than Whites in Michigan. It's important to consider the role of social and environmental factors in the development of these conditions. Three examples include safe neighborhoods to exercise, access to fresh fruits and vegetables, and the ability to pay for healthy foods.**

*Unsafe neighborhoods can affect the physical activity of the entire family, limiting both kids and adults from exercising and playing outside.*

In Michigan,

More than 3 out of 10 AA kids (35.2%) lived in a community that was “usually **not safe**” as reported by their parents.



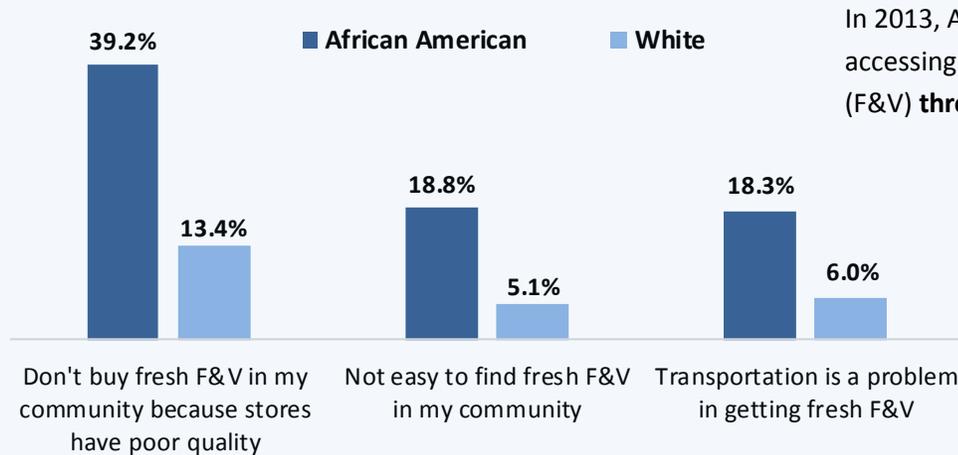
Less than 1 out of 10 White kids (6.5%) lived in a community that was “usually **not safe**” as reported by their parents.



Source: National Survey of Children's Health, Michigan, 2011-12

*When it's hard to find a good selection of fresh fruits and vegetables in one's community, eating healthy foods becomes more challenging.*

**Food Access, Michigan, 2013**

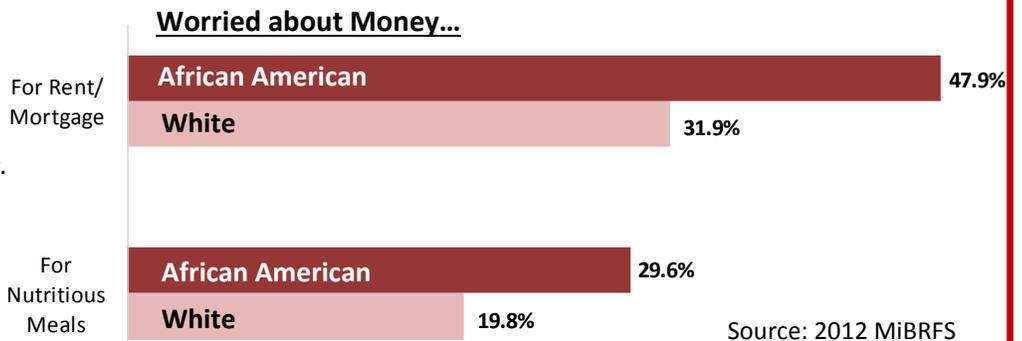


In 2013, AA adults reported barriers accessing fresh fruits and vegetables (F&V) **three times more often** than

Source: 2013 MiBRFS

*When individuals have a limited income, buying healthy foods can become more difficult since options are often more expensive.*

In 2012, AA adults reported worrying about money for rent/ mortgage as well as nutritious



Source: 2012 MiBRFS

Death mortality rates due to heart disease were age-adjusted. For all of the data, White and AA were non-Hispanic. The photos on the front page were acquired from the Public Health Image Library (<http://phil.cdc.gov/Phil/home.asp>), courtesy of the Centers for Disease Control and Prevention/Amanda Mills. **Reference:** 1. Office of Disease Prevention and Health Promotion, US Department of Health and Human Services. 2015. Social Determinants of Health. <http://www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-of-health> (November 2015). **Citation:** Hekman K, Lyon-Callo S, Weir S, McKane P. Monitoring Health Disparities in Michigan, 2005-2013 — The Experience of African Americans. Lansing, MI: Michigan Department of Health & Human Services, Division of Lifecourse Epidemiology and Genomics and Health Disparities Reduction and Minority Health Section, 2016.