

Did You Know? Health Disparities

Did you know? Health inequities will cost the health care system \$337 billion over the next ten years.¹

- A 2009 Urban Institute report looked at the costs of preventable diseases including diabetes, hypertension, stroke, and poor general health, and found that Medicare could save nearly \$220 billion and Medicaid \$27 billion over ten years by eliminating health inequities.



Did you know? African-American women have higher infant, fetal and perinatal mortality rates than women of other ethnicities.

- The percentage of infants born at low birth weight is higher for Non-Hispanic black women (13.7%) than for Non-Hispanic white (7.2%) or Hispanic women (7%)²

Did you know? An African-American woman is 3–6 times more likely to have a pregnancy-related death than a white woman.

- While maternal mortality ratios for all ethnic groups have declined over the past half century, racial and ethnic disparities in maternal mortality have actually increased.

Did you know? The preterm birth rate for African-American women is 17.5%, 11.1% for white women³.

- The higher rate of preterm birth among African American women cannot be accounted for by known risk factors.

Did you know? Language and literacy barriers interfere with patient-physician communication.

- 20% percent of Latinos report not seeking medical care due to language barriers.⁴ In one study of Medicare patients, 33.9% of English-speaking and 53.9% of Spanish-speaking respondents had inadequate or marginal health literacy.⁵

Did you know? Over 20% of all women are smokers and 20% are obese.⁶

- Smoking and obesity are major challenges that put the health of women at risk. These are both known risk factors for a wide range of chronic illnesses. Obesity was highest among Black women, and smoking was highest among American Indian and Alaska Native women, with high smoking rates among white women as well.

Definitions

Health Disparities: Differences in the incidence, prevalence, mortality, and burden of diseases and other adverse health conditions that exist among specific population groups in the United States. These differences can be assessed according to a variety of factors including gender, race or ethnicity, education, income, disability, geographic location, or sexual orientation.



Data Needs

Collection of data on race, ethnicity, sex, primary language, and disability status is needed to inform research priorities such as:

- Preterm births and low birth weight
- Obesity
- Preconception, prenatal, and family planning care
- Preventive care
- Cultural competency
- Breast feeding
- Domestic violence

Recommendations

1. Fund Section 4302(a) of ACA to collect data on race, ethnicity, sex, primary language, and disability in all federally conducted or supported health care or public health programs
2. Increase funding for research at NIH, CDC, HRSA, and HHS to determine causes of health disparities and develop and evaluate interventions to address these causes

3. Include ob-gyns in the Medicaid primary care bonus payment provided in the ACA
4. Increase funding for the National Health Service Corps to recruit minorities to the health professions and mentor them to levels of leadership
5. Attract and retain qualified nurses and other health professionals to care for underserved women.
6. Provide high quality, compassionate, and ethically sound health care services to all and improve cultural competency in the physician-patient relationship
7. Use national best practice guidelines to reduce unintended variation in health care outcomes
8. Increase public awareness of the benefits of preventive health care
9. Improved access to programs that develop fluency in English among non-English speakers.
10. Increase training of health care providers about racial and ethnic disparities
11. Support safety net providers that are more likely to provide health care to minority populations.

Endnotes

¹ Estimating the Cost of Racial and Ethnic Health Disparities." *The Urban Institute | Research of Record*. Web. <<http://www.urban.org/publications/411962.html>>.

² Martin JA, Hamilton BE, Sutton PD, Ventura SJ, Mathews TJ, Kirmeyer S, Osterman MJK. Births: Final data for 2008. National vital statistics reports; vol 59 no. 1. Hyattsville, MD: National Center for Health Statistics. 2010 <http://www.cdc.gov/nchs/data/nvsr/nvsr59/nvsr59_01.pdf>

³ *ibid*

⁴ Institute of Medicine (US). Unequal treatment: confronting racial and ethnic disparities in healthcare. Washington, DC: The Institute; 2003.

⁵ Gazmararian JA, Baker DW, Williams MV, Parker RM, Scott TL, Green DC, et al. Health literacy among Medicare enrollees in a managed care organization. *JAMA* 1999;281:545–51.

⁶ Henry J. Kaiser Family Foundation. *Putting Women's Health Care Disparities On The Map: Examining Racial and Ethnic Disparities at the State Level*. Rep. Print.