

## Health Disparities

### Introduction

Health disparities are differences in the incidence, prevalence, mortality, and burden of diseases and other adverse health conditions that exist among specific population groups in the U.S. Significant racial and ethnic disparities exist in women's health, particularly in maternal mortality, premature births, low birth weight, obesity, and other birth outcomes. Evidence consistently shows that African American women have higher infant, fetal and perinatal mortality rates than other women.

### The Issue

Historically, many studies of diseases common to both sexes have excluded women from participation; data necessary for guiding treatment decisions for women are limited or unavailable. Additionally, disparities are most likely to be experienced by women who are members of racial and ethnic minority groups.

### Costly Issue

Disparities will cost the health care system \$337 billion over the next ten years. 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 disparities.

### What Is Needed

The federal government can help eliminate disparities through targeted research investments, public awareness campaigns, and programs to prioritize this public health challenge. These efforts should address:

- Obesity
- Medications for diabetic pregnant women
- Preterm births and low birth weight
- Vaccinations
- Preventive care
- Breastfeeding
- Cultural competency
- Domestic violence
- Preconception, prenatal, and family planning care

### What Should Congress Do?

Congress can help improve maternal and infant health outcomes by prioritizing research and programs aimed at eliminating health disparities:

- Fund Section 4302(a) of the Affordable Care Act (ACA) to collect data on race, ethnicity, sex, language, and disability in all federally supported health care programs.
- Appropriate additional funding for HRSA, NIH, CDC, and HHS to determine causes of disparities and develop interventions.
- Increase funding for the National Health Service Corps.
- Include ob-gyns in the Medicaid primary care bonus payment provided in the ACA.
- Reintroduce, cosponsor, and reauthorize the PREEMIE Act.
- Reintroduce, cosponsor, and pass the Birth Defects Prevention, Risk Reduction, and Awareness Act.
- Reintroduce, cosponsor, and pass the Stillbirth & SUID Prevention, Education, and Awareness Act.

