

CDC's Health Disparities and Inequalities Report – United States, 2011

- ❑ Published as *MMWR Supplement*, January 14, 2011
- ❑ National level data with some state-specific results
- ❑ Findings to be used as baseline estimates for monitoring and reporting changes in health disparities and inequalities
- ❑ Addresses:
 - Social determinants of health
 - Environmental hazards
 - Mortality and morbidity
 - Behavioral risk factors
 - Health-care access
 - Preventive health services



Topics Covered

- ❑ Education and Income
- ❑ Inadequate and Unhealthy Housing
- ❑ Unhealthy Air Quality
- ❑ Health Insurance Coverage
- ❑ Influenza Vaccination Coverage
- ❑ Colorectal Cancer Screening
- ❑ Infant Deaths
- ❑ Motor Vehicle-Related Deaths
- ❑ Suicides
- ❑ Drug-Induced Deaths
- ❑ Coronary Heart Disease and Stroke
- ❑ Homicides
- ❑ Obesity
- ❑ Preterm Births
- ❑ Potentially Preventable Hospitalizations
- ❑ Current Asthma
- ❑ HIV Infection
- ❑ Diabetes
- ❑ Hypertension and Hypertension Control
- ❑ Binge Drinking
- ❑ Adolescent Pregnancy and Childbirth
- ❑ Cigarette Smoking

Key Issues

- ❑ Health disparities persist in the U.S., despite recent progress
- ❑ Combined effects of dual strategies are required:
 1. Universal interventions available to everyone
 2. Targeted interventions for populations with special needs
- ❑ Data in the report provide compelling argument for action
- ❑ Analyzing specifics of a problem and selecting interventions requires concerted effort at the local level – underscores need to coordinate clinical care and public health interventions/approaches

Select Findings

- ❑ Low income residents report 5 to 11 fewer healthy days per month than high income residents
- ❑ Men (18.4 per 100,000) 4 times more likely to die by suicide than women (4.8 per 100,000)
- ❑ Binge drinking more prevalent in high income (18.5%) than low income (12.1%) persons
- ❑ Binge drinking more frequent (4.9 vs 3.6 episodes) and intense (7.1 vs 6.5 drinks) in low income persons
- ❑ Hypertension more prevalent in non-Hispanic blacks (42%) than whites (28.8%); HTN control lower for Mexican Americans (31.8%) than for non-Hispanic whites (46.5%)
- ❑ Preventable hospitalization rates increase as incomes decrease; no disparities would prevent ~1 million stays and save \$6.7 billion in health care costs each year.

State/Topic Specific Slide

- ❑ Health officers and staff – please insert customized slide(s) here based on specific state data or health topic

What Can Be Done

- ❑ Increase community awareness of disparities
- ❑ Set priorities among disparities
- ❑ Articulate valid reasons to expend resources to reduce and eliminate priority disparities
- ❑ Implement universal and targeted intervention programs
- ❑ Aim to achieve a faster rate of improvement among vulnerable groups

For More Information:

www.cdc.gov/mmwr

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The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.



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