#### 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 (HTN) 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; if no disparities, would prevent ~1 million stays and save \$6.7 billion in health care costs each year

### 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:

http://www.cdc.gov/minorityhealth/CHDIReport.html

#### For more information please contact Centers for Disease Control and Prevention

1600 Clifton Road NE, Atlanta, GA 30333 Telephone, 1-800-CDC-INFO (232-4636)/TTY: 1-888-232-6348 E-mail: cdcinfo@cdc.gov Web: www.cdc.gov

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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