

FACT SHEET: Minority and Immigrant Health: A Snapshot of the 2012 Minority Health Surveillance Report

2012 Minority Health Surveillance Report, New York State Department of Health
http://www.health.ny.gov/statistics/community/minority/docs/surveillance_report_2012.pdf

According to the most recent Minority Health Surveillance Report released in 2012, there are major health challenges impacting immigrant and minority communities. The scope of the problem varies by disease and by ethnic/racial groups. The following statistics are a snapshot of current health conditions impacting millions of New Yorkers.

Health Indicators: From Conception to Adulthood

Racial disparities in maternal death is significant and exceeds any disparities noted in infant mortality and low birth weight. Maternal death is a serious issue prevalent in minority communities. For the past decade, teenage pregnancy rates have decreased for all racial/ethnic groups. Teenage pregnancy rates were the highest among black non-Hispanics and Hispanics (64.1 and 58.3 per 1,000 respectively), compared to white non-Hispanics and Asian/Pacific Islander non-Hispanics (11.0 and 8.2 per 1,000 respectively).

It is important to note that for the majority of health indicators highlighted in this fact sheet, lifestyle and environment are key factors in the prevalence of disease. Maternal health, teenage pregnancy, childhood health and household incomes are also intricately connected and help set the stage for disease development over a lifetime.

1. Hispanics

- a. Obesity among Hispanics has gradually increased over the past decade to 29% of the adult population in 2010.
- b. Diabetes among adult Hispanics has remained at approximately 10% over the past decade.
 - i. However hospitalization and mortality rates among Hispanics are significantly higher than the white non-Hispanics
- c. Asthma is a serious condition within the Hispanic community. Hispanic children and adults are three times more likely to be hospitalized and four times more likely to die due to asthma than their White non-Hispanic counterparts.
- d. Poor mental health is another issue affecting the Hispanic community.
 - i. According to this survey in 2007-09, Hispanic New Yorkers reported 11.5% "poor" mental health for at least 14 days during the past month.
- e. Maternal deaths in 2009 indicate 15.2 maternal deaths per 100,000 within the Hispanic community.
- f. Adequate Prenatal Care – according to the minority report in 2009, 60% of pregnant women received adequate prenatal care compared to 2000 when 53.9% did.
- g. Teenage pregnancy – according to the minority report in 2009, 58.3% Hispanic teenagers per 1,000 were pregnant, a decrease from 78.5% per 1,000 in 2000.

2. African-Americans

- a. According to the 2012 Minority Surveillance report, from 2007- 2009, 30.4% of the black community 18 years and older were considered to be obese.
- b. Diabetes among black non-Hispanics is a serious issue. The community has the highest rates of diabetes hospitalization and mortality as well as the highest adult prevalence of diabetes and obesity.

- c. Asthma prevalence within New York for black non-Hispanics has remained constant throughout the past decade, for 2001-2003, 9% of adults aged 18 years and older were diagnosed with current asthma, compared to 8.8% for 2007-2009.
- d. Poor Mental Health affects the African-American community as well.
 - i. According to this survey in 2007-09, black non-Hispanic New Yorkers reported 11.5% "poor" mental health for at least 14 days during the past month.
- e. Maternal deaths in 2009, as per the report, indicate approximately 65.2% black non-Hispanic maternal deaths per 100,000.
- f. Adequate Prenatal Care – according to the minority report in 2009, 53.4% of pregnant women received adequate prenatal care compared to 2000, when 50.2% did.
- g. Teenage pregnancy – according to the minority report in 2009, 64.1 black non-Hispanic (NH) teenagers per 1,000 were pregnant, a decrease from 91.2 per 1,000 in 2000.

3. Asian and Pacific Islander Americans

- a. Obesity rates for the Asian community according to the Minority Health Surveillance report reveal that Asians have also been affected by an increase in rates. From 2007-2009, 8.6% of adults 18 years and older were considered to be obese an increase from 2001-2003 of 4.0%.
- b. The New York State Minority Health Surveillance Report indicates diabetes has increased within the Asian community from 2001-2003, 6.1% of adults aged 18 years and older to 7.9%, in 2007- 2009 diagnosed with diabetes.
- c. Asthma has increased within the Asian community, according to the minority surveillance survey. 4.9% of adults aged 18 years and older were diagnosed with current asthma for 2007-2009, an increase from 2.9% for 2001-2003.
- d. Poor mental Health.
 - i. Asians (4.5%) were the least likely to report mental health for at least 14 days during the past month.
- e. Maternal Deaths in 2009 as per the report indicate approximately 13.4 per 100,000.
- f. Adequate Prenatal Care – according to the minority report in 2009 66.8% of pregnant women received adequate prenatal care compared to 2000 when 56.2% did.
- g. Teenage pregnancy – According to the minority report in 2009 8.2 Asian teenagers per 1,000 were pregnant. A decrease from 15.9 per 1,000 in 2000.

Major Diseases Linked to Lifestyle:

1. Obesity

- a. Obesity according to this survey is defined as “having a body mass index (BMI) of 30 or greater. (BMI is calculated by dividing weight in pounds by height in inches squared and multiplying by a conversion factor of 703).
- b. Obesity has been a serious issue affecting America as a whole. However, minorities especially have an increased risk of many diseases and health conditions due to being overweight or obese.
- c. Obesity rates, according to the 2012 Minority Health Surveillance report, found between 2007-2009 that 30.4% of black adults 18 and older were considered to be obese a minor decrease from 2001-2003, where 31.2% of black adults 18 and older were considered to be obese.
- d. In 2007-2009, 8.6% of Asian adults 18 and older were considered to be obese, an increase from 2001-2003, where 4% of Asian adults 18 and older were considered to be obese.
- e. Obesity rates in 2007-2009, indicate 29% of Hispanic adults 18 and older were considered to be obese an increase from 2001-2003, where 23.5% of Hispanic adults 18 and older were considered to be obese.

2. Diabetes

- a. Diabetes is another serious disease affecting the country as a whole; however blacks in particular have been most affected by it.
- b. The *age-adjusted* rate of black adults aged 18 years and older ever diagnosed with diabetes in 2009-2007 was 12.2% an increase from 2001-2003 11.6% of the black population.
- c. The *age-adjusted* rate of Asian adults aged 18 years and older ever diagnosed with diabetes in 2009-2007 was 7.9% an increase from 2001-2003 6.1% of the Asian population.
- d. The *age-adjusted* rate of Hispanic adults aged 18 years and older ever diagnosed with diabetes in 2009-2007 was 10.5% the same as in 2001-2003.

3. High Rates of Tobacco Use = Health Problems

- a. Studies show individuals whom do not smoke before high school graduation (age 18) odds are they never will.
- b. Smoking is directly responsible for 30% of all cancer deaths and about 87% of all lung cancer deaths.
- c. The Minority Health Surveillance Report for 2007-2009 indicated that approximately 18% of black adults older than 18, were considered current smokers a small decrease from 2001-2003 where 19.7% of black non-Hispanics older than 18 were considered current smokers.
- d. The Minority Health Surveillance Report for 2007-2009 indicated that approximately 9.5% of Asian adults 18 years and older were considered to be smokers. A decrease from 2001-2003 where 11.3% of Asian non-Hispanics older than 18 were considered current smokers.
- e. According to the 2012 Minority Report for 2007-2009, approximately 16.2% of Hispanic adults aged 18 years and older were considered to be smokers, a decrease from 19.5% for 2001-2003
- f. Although the Asian community has the smallest percentage of adults 18 years and older to be considered smokers (9.5%), the various Asian ethnic groups have differing smoker rates.
 - i. 11% of all Asians in NYC reported smoking, however, smoking rates differ significantly by Asian subgroup:
 - ii. 23% of Koreans reported smoking (36% among males and 11% among females).
 - iii. 11% of Chinese reported smoking (18% among males and 4% among females).
- g. NYU researchers also uncovered that along with gender differences, differences were also found for nativity. Foreign-born males reported higher rates of smoking compared to their U.S. born counterparts (20% vs. 11%).

Health Issues Impacting Asian-Americans:

- Health issues of special concern for Asian-American immigrants include hepatitis B, tuberculosis, thalassemia, and serious mental disorders.
- According to the New York City Department of Health, 60% of children born in the city who tested positive for hepatitis B were Asian-Americans.
- Although TB rates for New York City declined through the last decade, Asian-Americans still have the highest case rate in New York City.
- Asian immigrant teenagers are considered the most likely Americans to take up smoking, according to the US Surgeon General.
- Nearly 9% of all Asian mothers in New York City receive prenatal care either late or not at all, compared to 5% of non-Hispanic white mothers.
- In New York City, suicide was one of the ten leading causes of death for Asian-Americans of all ages, but was not a leading cause of death for any other racial group.
- Nearly 27% of Asian Americans in the New York metropolitan area lack health insurance, compared to 13% for the rest of the population.
- Emerging health care issues in China, such as increasing rates in HIV and STD infections and childhood obesity, may become issues of concern for the Chinese-American immigrant community in the future.
- 16% of Asian-Americans in New York City have diabetes, the highest rate of any racial or ethnic group.
- Source: Asian American Federation Census Information Center.