

# Racial Disparities

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Spring 2009

# Facts about Racial Disparities in Health

- ▶ infant mortality rate:
  - ▶ white: 5.7 deaths per 1,000 live births
  - ▶ Af. Am: 13.6 deaths per 1,000 live births
  - ▶ Hispanic: 5.6 deaths per 1,000 live births
- ▶ diabetes-related mortality rate:
  - ▶ white: 23.0 deaths per 100,000 population
  - ▶ Af. Am: 49.2 deaths per 100,000 population
  - ▶ Hispanic: 21.5 deaths per 100,000 population
- ▶ annual AIDS case rate:
  - ▶ white: 7.2 cases per 100,000 population
  - ▶ Af. Am: 68.6 cases per 100,000 population
  - ▶ Hispanic: 23.3 cases per 100,000 population

## Leading Causes of Death by Race/Ethnicity, 2003

All  
Ages

Rank	White, Non-Hispanic	Hispanic	African American, Non-Hispanic	Asian and Pacific Islander	American Indian/ Alaska Native
1	Heart Disease	Heart Disease	Heart Disease	Cancer	Heart Disease
2	Cancer	Cancer	Cancer	Heart Disease	Cancer
3	CVD	Accidents	CVD	CVD	Accidents
4	Chronic Lung Disease	CVD	Diabetes	Accidents	Diabetes
5	Accidents	Diabetes	Accidents	Diabetes	Liver Disease

Ages  
25-44

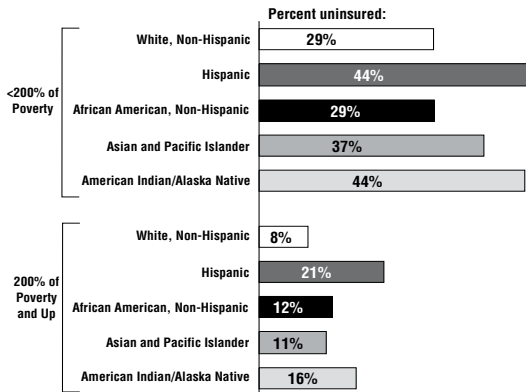
Rank	White, Non-Hispanic	Hispanic	African American, Non-Hispanic	Asian and Pacific Islander	American Indian/ Alaska Native
1	Accidents	Accidents	Heart Disease	Cancer	Accidents
2	Cancer	Cancer	Accidents	Accidents	Heart Disease
3	Heart Disease	Homicide	Homicide	Heart Disease	Suicide
4	Suicide	Heart Disease	HIV	Suicide	Liver Disease
5	Liver Disease	HIV	Cancer	CVD	Cancer

NOTE: CVD = Cerebrovascular disease.

DATA: National Center for Health Statistics, National Vital Statistics System

SOURCE: [http://www.cdc.gov/nchs/data/dvs/lcwk3\\_2003.pdf](http://www.cdc.gov/nchs/data/dvs/lcwk3_2003.pdf) and [http://www.cdc.gov/nchs/data/dvs/lcwk6\\_2003.pdf](http://www.cdc.gov/nchs/data/dvs/lcwk6_2003.pdf).

## Uninsured Rates Among the Nonelderly by Income and Race/Ethnicity, 2005

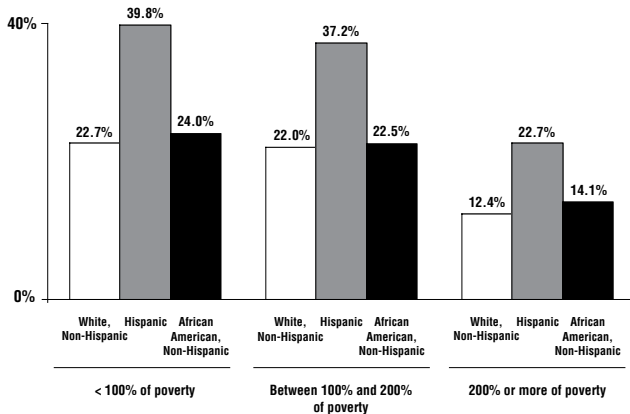


NOTE: 200% of the poverty threshold for a family of four in 2005 was \$39,942.

DATA: March 2006 Current Population Survey.

SOURCE: Urban Institute and Kaiser Commission on Medicaid and the Uninsured estimates.

## No Usual Source of Health Care: Adults 18–64 by Race/Ethnicity and Poverty Status, 2003–2004



DATA: National Center for Health Statistics, National Health Interview Survey, 2002–2003

SOURCE: *Health, United States, 2006*, Table 77.

## Policies about Race and Health

- ▶ Hill-Burton Act 1946 – provided funds to build health facilities, allowed separate but equal hospitals
- ▶ Brown vs. Board of Education 1954: separate but equal is by definition unequal
- ▶ Title VI of the Civil Rights Act 1964: prohibited discrimination and segregation in any institution receiving federal funds
- ▶ Medicare certification 1966: to receive Medicare funding, hospitals had to be certified as being racially integrated
- ▶ Convention on the Elimination of all forms of racial discrimination (CERD) 1969: international law (UN)
- ▶ DHHS, Office of Minority Health 1985
- ▶ Minority Health and Health Disparities Research and Education Act 2000: encourage research on issue, increase number of minority researchers

# Racial Disparity Studies

- ▶ IOM: Unequal Treatment, 2002:
  - ▶ significant variation in the rates of medical procedures by race, even when insurance status, income, age, and severity of conditions are comparable
  - ▶ racial/ethnic minorities are less likely to receive routine medical procedures and experience lower quality of health services
  - ▶ recommendations involve increasing awareness, evidenced-based guidelines, and more minority providers
- ▶ AHRQ: National Healthcare Disparities Report, 2007:
  - ▶ disparities in quality and access for minority groups and poor populations have not been improving overall (since 2000)
  - ▶ factor more consistently related to better quality is whether a patient is insured

# LeCook, McGuire, and Zuvekas paper

- ▶ What are the differences in the definitions of health disparities?
- ▶ Why do they prefer the IOM definition?
- ▶ Which do you think is the best one?
- ▶ What is the trend in racial/ethnic disparities?

# Oaxaca-Blinder decomposition

white health function:  $H_w = \alpha + \beta_w I_w + e$  where  $I$  is income

black health function:  $H_b = \alpha + \gamma + \beta_b I_b + e$

decomposition:

$$H_w - H_b = \alpha + \beta_w I_w + e - \alpha - \gamma - \beta_b I_b - e$$

$$\Delta H = -\gamma + \beta_w I_w - \beta_b I_b$$

$$\Delta H = -\gamma + \beta_w I_w - \beta_b I_b + \beta_w I_b - \beta_w I_b$$

$$\Delta H = \underbrace{-\gamma + (\beta_w - \beta_b) I_b}_{\text{discrimination v.}} + \underbrace{\beta_w (I_w - I_b)}_{\text{diffs in income}}$$

discrimination v. diffs in income