



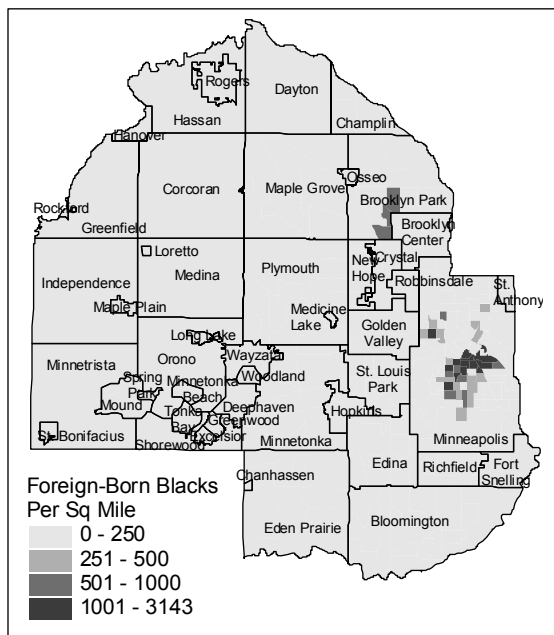
SHAPE 2002 Racial and Ethnic Data Book

Health Status of Hennepin County African-Born Black Adults

Introduction

This fact sheet highlights selected health information from the Survey of the Health of Adults, the Population, and the Environment (SHAPE 2002) about African-born Black adults 18 years of age and older in Hennepin County, Minnesota. SHAPE 2002 is a community-driven survey that collected information from 9,959 randomly selected Hennepin County adult residents, including 559 African-born Black adults. The health data presented in this fact sheet are those identified by African immigrant organizations and individuals in consultation and focus group meetings as being important to their immediate planning and policy needs. These as well as other health data can be found in the *SHAPE 2002 Racial and Ethnic Data Book*.¹

Figure 1. Geographic distribution of foreign-born black adults in Hennepin County



Data source: U.S. Census, 2000.
Data are aggregated and displayed by Census tract.

Demographic and Socioeconomic Profile

African-born Blacks – immigrants from many countries and regions in Africa – comprise one of the fastest growing immigrant groups in Hennepin County. Although estimates regarding the size of this community vary between immigrant organizations and the U.S. Census Bureau, recently released Census figures indicate that the number of African-born Blacks has increased seven-fold since 1990.² Whereas 2,810 African immigrants resided in the county in 1990, 21,000 called Hennepin County home in 2000.² Moreover, almost half (43.7%) of the county’s African-born population lived in Africa as recently as 1995.³ Most are from East Africa, primarily Somalia and Ethiopia.⁴ Close to 25% of African-born Black adults had incomes below 100% of the Federal Poverty Level in 1999, compared to 7.5% of the general adult population in Hennepin County (\$16,700 for a family of four).³

About one in five (20.1%) speak English less than well, compared to 3.2% of all adults in the county.³ And nearly 20% of African-born Blacks 25 years of age and older have not completed high school, compared to 9.4% of their counterparts in the county as a whole.³ While African immigrants reside in many parts of the county, the largest numbers live in the City of Brooklyn Park, and in the Minneapolis communities of University, Phillips, and Powderhorn (Figure 1).

How Do African-Born Black Adults View Their Health?

More than half of all African-born Black adults (54.8%) reported that their health was either “very good” or “excellent” in 2002. This compares to 64.9% of all adults in the county.

Depression and Anxiety or Panic Attack

African-born Black adults reported lower rates of ever being diagnosed with depression and anxiety/panic attack than all adults in the county. In addition, the rates for these conditions are different for men and women.

Four percent of all African-born Black adults reported that a doctor or other health professional had ever diagnosed them with depression, compared to 12.2% of all adults in the county. African-born Black women are much more likely than men to have reported this condition (6.3% vs. 2.3%).

In addition, 3.6% of all African-born Black adults reported that a doctor or other health professional had ever diagnosed them with anxiety or panic attack. This compares to 7.5% of adults in the county overall. Also, 4.1% of African-born Black women reported ever being diagnosed with anxiety or panic attack, compared to 3.2% of their male counterparts.

Common Chronic Health Conditions

SHAPE 2002 respondents were asked if they had ever been told by a doctor or other health professional that they had any of the following health conditions: asthma, diabetes (excluding gestational diabetes), heart trouble or angina, high blood pressure or hypertension, high cholesterol or triglycerides, lower back problems, arthritis of rheumatism, osteoporosis, depression, and anxiety or panic attack.

The five most commonly diagnosed chronic health conditions (Figure 2) reported by African-born Black adults in Hennepin County are:

- arthritis or rheumatism

- high cholesterol or triglycerides
- lower back problems
- high blood pressure or hypertension
- heart trouble or angina

Health Care Coverage

In 2002, seven in nine (78.4%) African-born Black adults in Hennepin County reported that they “currently” had some type of health coverage through private or public insurance programs. This compares to 93.1% of all adults in the county.

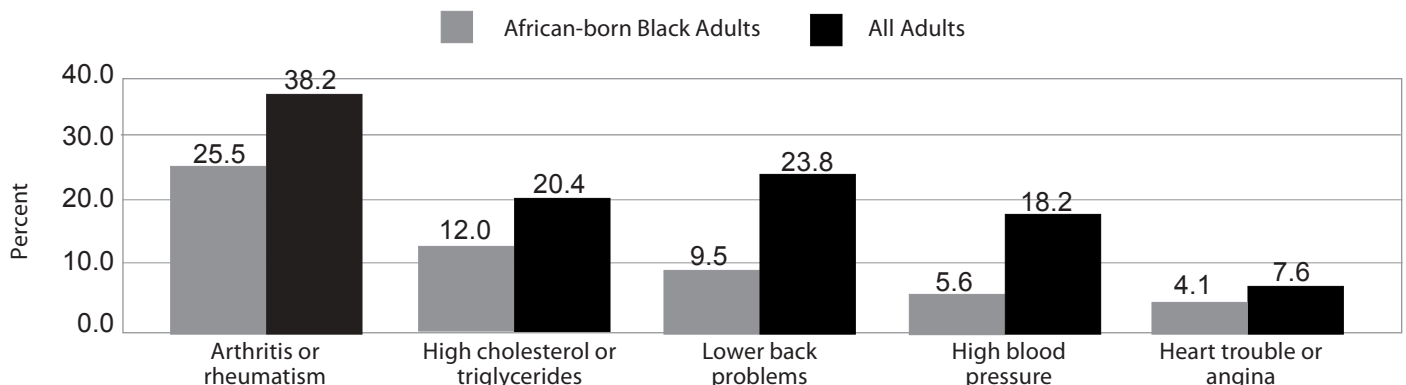
- Nearly ten percent (9.6%) of African-born Black adults were uninsured for the entire year preceding the survey, compared to 3.4% of all adults in the county.
- Among African-born Blacks who needed medical care, 19.4% reported that there was a time during the past 12 months when they needed medical care but delayed or did not get the care they needed. Cost or not having health insurance was the most common reason they delayed or did not get the medical care they thought they needed. Lack of health insurance and cost were not the only reasons, however. Figure 3 shows four other reasons they delayed or did not receive care among those who needed medical care during the previous year.

Use of Preventive Health Screening

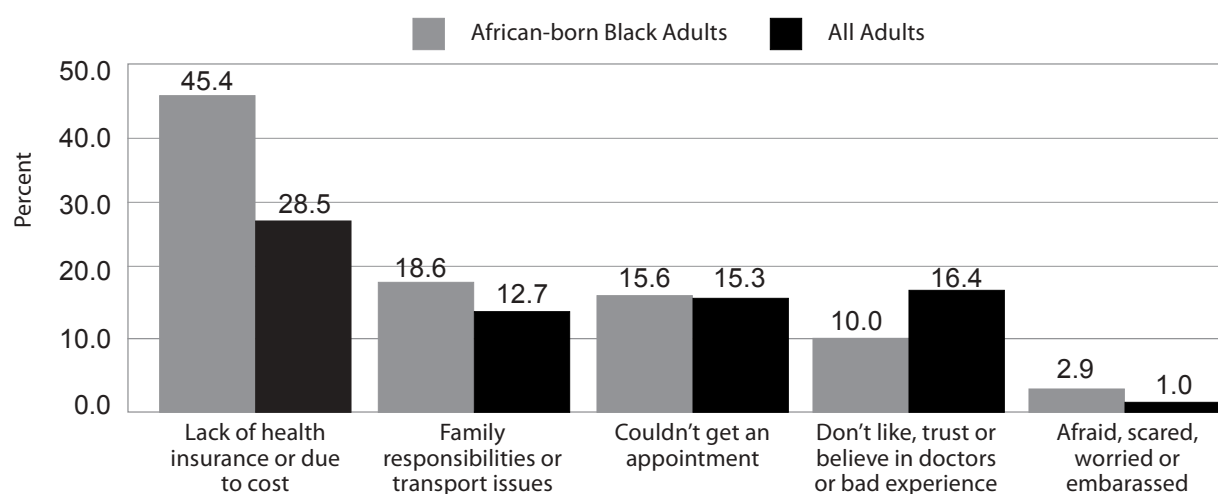
African-born Black adults are using preventive screening to detect or prevent the onset of many diseases. Many of these rates are lower than those reported by all adults in the county (Table 1). For example:

- The American Cancer Society recommends that women 40 years of age and older receive an annual mammogram. However, only slightly more than half (54.7%) of African-born Black

Figure 2. Percentage of adults who stated that a doctor or other health professional ever told them that they had this health condition, Hennepin County SHAPE 2002



**Figure 3. Reasons adults delayed or did not get the medical care they needed
Hennepin County SHAPE 2002**



women reported meeting the recommended guideline, compared to seven in ten women in the county as a whole (70.3%).

- The Healthy People 2010,⁵ the nation's public health agenda, recommends that 56% or more of all U.S. children and adults visit a dental office at least one time per year. In 2002, less than half of African-born Black adults aged 18 to 39 reported that they had visited a dentist or dental clinic for any reason during the past year (45.4%). This compares to 72.6% of 18-to-39 year-old adults in the county.

Healthy Lifestyle and Behaviors

Individual lifestyle choices and decisions about diet, smoking, drinking, and exercise – which are often influenced by many complex and interrelated factors – can influence health. Incorporating many healthy lifestyle practices into one's daily routines, such as choosing not to smoke and engaging in regular physical activity (e.g. walking), can help to reduce the rates of many chronic diseases that affect African-born Blacks and other adults.

Table 1: Preventive health care screening, Hennepin County SHAPE 2002

Type of preventive health screening	African-Born Black Adults	All Adults	Targets/Recommendations
Pap Test with the previous 3 years (among women 18 and older)	52.9%	86.6%	HP 2010—90% or more of women 18 and older
Met clinical breast exam guideline (among women 20 and older)	50.2%	77.2%	ACS— exam every three years for women 20-39, and annual exams for women 40 and older
Met mammogram guidelines (women 40 and older)	54.7%	70.3%	ACS— annual mammograms for women aged 40 and older
Ever had a prostate cancer screening test or exam (among men 50 and older)	55.6%	81.8%	—
Visited a dentist or dental clinic for any reason during the past year (among persons aged 18 to 39)	45.4%	72.6%	HP 2010— 56% or more of children & adults who use oral health care system each year
Blood stool test using a home kit within the previous two years (among persons 50 and older)	35.0%	37.8%	HP 2010— 50% of adults aged 50 and older
Cholesterol checked within the past 5 years (among persons 18 and older)	36.6%	75.6%	HP 2010— 80% or more of adults 18 and over

HP= Healthy People 2010, ACS= American Cancer Society, — Targets or recommendations not available

Current Smoking and Binge Drinking

A current smoker is defined as one who has smoked at least 100 cigarettes in his/her lifetime and who now smokes cigarettes everyday or some days.⁶ A binge drinker is defined as one who consumed five or more alcoholic drinks on at least one occasion during the past 30 days.⁷

- In Hennepin County, 6.9% of African-born Blacks are current smokers, compared to 18.5% of all adults in the county.
- In addition, the rate of binge drinking among African-born Blacks (5.5%) is one-third the rate of all adults in the county (16.6%).

Daily Fruit and Vegetable Consumption

A major goal of Healthy People 2010⁵ is to increase to 75% or more the proportion of persons two years of age and older who consume at least two daily servings of fruits. The goal for vegetable consumption is to increase to 50% or more the proportion of persons two years of age and older who consume at least three daily servings of vegetables, with at least one of them being dark green or orange.

- More than half (55.0%) of all African-born Black adults reported consuming two or more servings of fruits the previous day. This compares to 58.8% of all adults in the county. Both rates are well below the national target of 75%.
- Fourteen percent of African-born Black adults reported consuming at least three servings of vegetables the previous day, with at least one of them being dark green or orange. This compares to 29.1% of all adults in the county. Both rates are also well below the national target of 50%.

Physical Activity

The Healthy People 2010⁶ goal is to increase the proportion of adults who engage in regular moderate physical activity for at least 30 minutes per day to 30% or more.

- In Hennepin County, one-third of African-born Blacks (33.2%) reported engaging in moderate physical activity five or more days during an average week. This compares to 37.5% of all adults in the county as a whole.

Overweight and Obesity

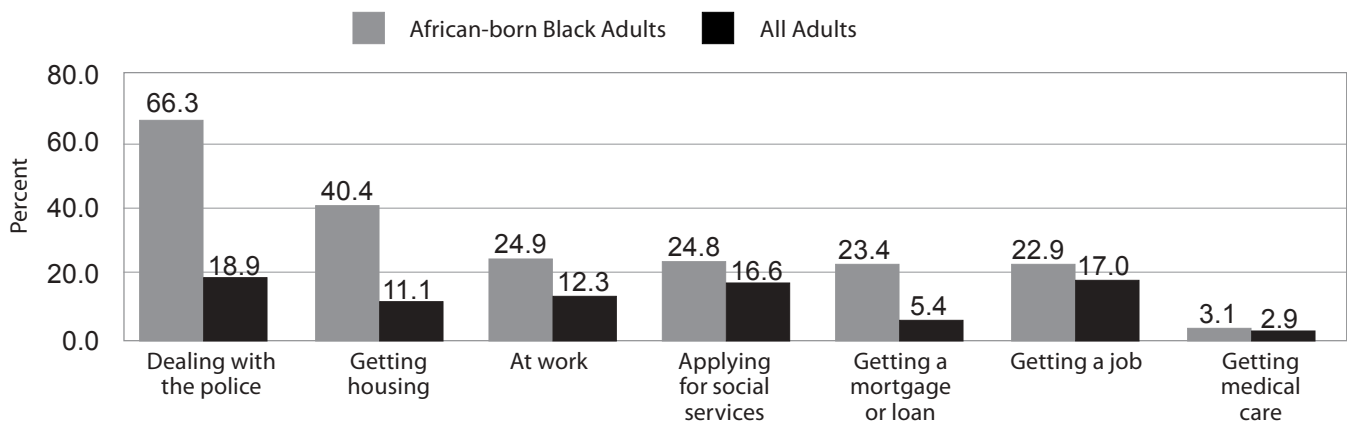
Body Mass Index (BMI) is used to determine whether or not people are overweight or obese based on their weight in relation to their height. People are considered overweight when their BMI is greater than or equal to 25.0, and they are considered obese when their BMI is greater than or equal to 30.0.⁸

- Close to half (46.7%) of all African-born Black adults are either overweight or obese compared to 51.6% of all adults in Hennepin County.

Social-Environmental Factors

Factors that affect health extend beyond whether or not people have access to health care, or whether they have met the recommended guidelines for physical activity or fruit and vegetable consumption. They also include a wide array of other factors that are based on people's social experiences within their neighborhoods or communities, such as their experience with discrimination and economic hardship.⁹

Figure 4. Percentage who felt they were discriminated against, of those who experienced the situation during the past 12 months, Hennepin County SHAPE 2002



Discrimination

In Hennepin County, African-born Blacks reported feeling discriminated against in a variety of settings during the past 12 months, such as at work, getting medical care, getting a job, applying for social services, getting housing, dealing with the police, and getting a mortgage or loan (Figure 4). In fact, they were approximately four times more likely than all adults in the county to report feeling discriminated against in dealing with the police and getting housing.

- Among those who reported feeling discriminated against in at least one of the above settings, African-born Blacks were twice as likely as all adults in the county to report that they were discriminated against because of their race, color, ethnicity, or country of origin (87.4% versus 40.7%).

Economic Hardship

Six percent of African-born Black adults reported that they had worried “often” that food would run out before they had enough money to buy more during the past year. This compares to 2.4% of all adults in the county. In addition, African-born Blacks were approximately three times (12.3%) more likely than all adults in the county (3.8%) to report that during the past year they missed a mortgage or rent payment because they did not have enough money.

Religious and Cultural Activities

Nearly seven in ten (68.9%) African-born Black adults reported attending a church, synagogue, mosque, or other place for worship or other activities on a daily or weekly basis. This compares to 43.1% of all adults in the county. In addition, 83.9% of African-born Black adults feel that it is “very important” to pass along the traditions of their ancestors to the next generation. This rate is more than two times higher than the rate for adults in the county as a whole (38.7%).

The Importance of SHAPE 2002

The Hennepin County Community Health Department is committed to working with individuals, organizations, and community groups to utilize the SHAPE 2002 information to:

- Monitor the health status of African-born Blacks in Hennepin County
- Identify health disparities across racial and ethnic groups
- Investigate the factors related to a particular health concern
- Describe the prevalence of selected health conditions and contributing factors that affect the health of African-born Blacks in Hennepin County
- Support health improvement grant applications

References

- ¹ Hennepin County Community Health Department and Bloomington Division of Public Health. SHAPE 2002: Racial and Ethnic Data Book, Survey of the Health of Adults, the Population and the Environment. Minneapolis, Minnesota; March 2003.
- ² Hennepin County Office of Planning and Development. Hennepin County Foreign Born Population By Region of Birth, 1990 & 2000. www.co.hennepin.mn.us/opd/Census_2000/reports/factsheet9/factsheet9page4.htm. Accessed on March 8, 2004.
- ³ Census 2000. Public Use Microdata Sample (PUMS file). U.S. Census Bureau.
- ⁴ Leslie, LM. Sights and Sounds of Africa Increasing in Minnesota. Star Tribune. www.startribune.com/stories/389/2879199.html. June 4, 2002.
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- ⁶ www.cdc.gov/nchs/dataawh/nchsdefs/currentsmoker.htm. Accessed on November 14, 2003.
- ⁷ Substance Abuse and Mental Health Services Administration. (2003). Results from the 2002 National Survey on Drug Use and Health: National Findings (Office of Applied Studies, NHSDA Series H-22, DHHS Publication No. SMSA 03-3836). Rockville, MD.
- ⁸ U.S. Department of Health and Human Services. Healthy People 2010: Understanding and Improving Health. 2nd ed. Washington, DC: U.S. Government Printing Office, November 2000.
- ⁹ National Center for Chronic Disease Prevention and Health Promotion. Nutrition and Physical Activity; Centers of Disease Control and Prevention: Atlanta. <http://www.cdc.gov/nccdphp/dnpa/bmi/bmi-adult.htm> Accessed on November 14, 2003.
- ⁹ Hennepin County Community Health Department and Bloomington Division of Public Health. SHAPE 2002: A Preview, Survey of the Health of Adults, the Population and the Environment. Minneapolis, Minnesota, January 2003.

Limitations of SHAPE 2002 Data

SHAPE 2002 survey results provide much useful information, but there are limitations to the data such as:

- The small sample size of the African-born Blacks in the study (N=559)
- Non-telephone bias
- Respondents recall bias

Translating SHAPE 2002 Data Into Action

The Hennepin County Community Health Department is committed to partnering with African-born Black communities to use and translate data into action to improve health. Together we can work to use and translated the SHAPE 2002 results into action!

Hennepin County Community Health Department is a resource and is committed to:

- Present survey results to community groups
- Perform data analysis on selected health issues of interest and concern
- Provide data briefs, fact sheets or reports on health issues of concern to your community

Call us with any questions that you may have on the SHAPE 2002 survey of the Data Book, or with request for additional analysis (see contact information below).

Together we can make a difference!

For More Information

This fact sheet is a product of the Hennepin County Community Health Department. It is one of several fact sheets that uses SHAPE data to describe the prevalence of selected health conditions and factors that affect the health of populations of color in Hennepin County, Minnesota. The data are primarily from the *SHAPE 2002: Racial and Ethnic Data Book*; however, this fact sheet does not include results for all variables covered in the data book.



Hennepin County provides equal access to employment, programs, and services without regard to race, color, creed, religion, age, sex (except when sex is a Bona Fide Occupation Qualification), disability, marital status, sexual orientation, public assistance, or national origin. If you believe you have been discriminated against, contact the Human Resources Department, A-400 Government Center, Minneapolis, MN 55487, 612/348-3562.

This material can be given to you in different formats, such as large print or on tape, if you call Hennepin County Human Services Department at 612/348-3925 (voice) or 612/348-0082 (TTY).

Thank You

Hennepin County wishes to thank the African community for its advice and guidance. The communities' input contributed significantly in making SHAPE 2002 possible and successful. The African community helped with survey planning, implementation and dissemination. African-born Blacks counseled the SHAPE project about what health data were needed, and they helped to make sure that survey questions were delivered in a way that respected African cultures. The African community also provided guidance and assistance in reaching community members, reviewed translations, and encouraged participation in the survey. They also advised the county on how to disseminate the results to encourage change.

Our Web Site

For more information about SHAPE 2002, the Data Book, other reports and examples of using SHAPE data, visit:

www.HennepinCommunityHealth.org/
SHAPE

Contact Us

The Hennepin County Community Health Department is committed to working with individuals, organizations, and community groups to better understand and utilize SHAPE data. These data can be made available in a variety of formats, including Powerpoint presentations, maps, or EXCEL tables/spreadsheets. For more information, please contact:

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