

Using Data to Advance Health Equity for Men of Color

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During Men's Health Month, as we raise awareness of the important steps that men can take to improve their health, we are also raising the dialogue on new efforts to ensure that all men achieve better health outcomes, including minority men.

The health status of racial and ethnic minority men has lagged far too long behind the general population, despite our nation's vast advances in science, public health and health care. Reducing health disparities and achieving health equity so that everyone has the opportunity to reach their full potential for health is a priority of the Administration. An important factor in making progress toward this priority is our ability to understand why disparities occur and how to eliminate them.

A new data brief by the Office of Minority Health, examining the characteristics of uninsured adult males by race and ethnicity, is a useful tool to inform federal, state and community efforts aimed at improving insurance coverage of targeted populations. This type of data will enhance our ability to better measure and track health differences of racial and ethnic minority populations in the future.

Using data from the 2012 American Community Survey (ACS), an annual ongoing survey conducted by the U.S. Census Bureau, the data brief highlights several factors that impact health and access to health care for minority men.

Examples of key findings include:

- Nearly 2 out of 5 African-American and Latino adult males less than 35 years old were uninsured.
- A majority of uninsured adult males across all racial and ethnic groups have a high school diploma.
- A high proportion of uninsured adult males across all racial and ethnic groups reported family incomes at or below 100 percent of the Federal Poverty Level (FPL).
- A majority of uninsured adult males across all racial and ethnic groups report having a full-time worker in the household.
- African American males reported the highest proportion (60 percent) of respondents with family income at or below 100 percent of the Federal Poverty Level (FPL).
- Twenty-eight percent of uninsured adult Asian and 24 percent of uninsured adult Latino males reside in a limited English proficient household.

- A lower percentage of uninsured Latino (6 percent) and Asian (5 percent) males reported experiencing a disability compared to 12 percent of White and 11 percent of African American uninsured males.

While data from the 2012 ACS survey shows disparities among uninsured males, through the Affordable Care Act (ACA), progress has been made in increasing access to affordable health care coverage:

- Over the course of the first Health Insurance Marketplace enrollment period, more than 8 million people were enrolled as part of the ACA.
- New data from the Kaiser Family Foundation shows that as many as six in 10 people who purchased health insurance through the Marketplace were previously uninsured.
- Accordingly to recent Gallup data, the [most dramatic drops in the insured rate](#) were among African Americans, Latinos and low-income Americans.

National data repositories are powerful tools to advance health equity. Data informs our knowledge about uninsured minority men and can help inform targeted interventions and outreach at the federal, state and community levels to ensure that more men of color and their families obtain quality, affordable health care. It also informs efforts to improve minority men's access to opportunities for coverage and preventive health benefits through the Affordable Care Act. Because we understand that at its most basic level health is about opportunity, we are committed to removing barriers to achieving good health for all.

During Men's Health Month, we're encouraging all men to take a powerful step towards good health by making healthier food choices, avoiding smoking, staying active, reducing risk for injury and scheduling a check-up. Men and their families may still be eligible to enroll in affordable health coverage through the Health Insurance Marketplace by qualifying for a [special enrollment](#) period or through Medicaid. Visit www.HealthCare.gov for more information.

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