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AHDC Email Network – Data, News, Articles and Policies Related to Health Disparities
January 26 – February 1, 2012

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1) Caring for Vulnerable Populations

The AHA Committee on Research each year takes an in-depth look at a single topic to provide the hospital field with relevant recommendations for advancing health care. In 2011, the committee examined emerging hospital-centered practices in effective care coordination for vulnerable populations, focusing the examples on the critical “dual eligible” population – individuals eligible for both Medicare and Medicaid. The committee’s comprehensive report, *Caring for Vulnerable Populations*, is available along with its appendices and associated presentation slides at <http://www.aha.org/caring>. This publication provides background on dual eligible, as well as state and national policy initiatives designed to change payment structures to lead to more coordinated care; twelve best practice elements to be included within care programs for vulnerable populations; sample metrics to monitor progress in care coordination; and examples of best practices from across the hospital field.

2) 2010 Census Shows Nearly Half of American Indians and Alaska Natives Report Multiple Races

The U.S. Census Bureau released a 2010 Census brief, *The American Indian and Alaska Native Population: 2010*, that shows almost half (44 percent) of this population, or 2.3 million people, reported being

American Indian and Alaska Native in combination with one or more other races. This multiracial group grew by 39 percent from 2000 to 2010. Overall, 5.2 million people, or 1.7 percent of all people in the United States, identified as American Indian and Alaska Native, either alone or in combination with one or more races. This population grew by 27 percent from 2000 to 2010. Those who reported being American Indian and Alaska Native alone totaled 2.9 million, an increase of 18 percent from 2000 to 2010. The multiple race American Indian and Alaska Native population, as well as both the alone and alone-or-in-combination populations, all grew at a faster rate than the total U.S. population, which increased by 9.7 percent from 2000 to 2010. A majority of the American Indian and Alaska Native alone-or-in-combination population (78 percent) lived outside of American Indian and Alaska Native areas. At the same time, most counties with relatively higher proportions of American Indians and Alaska Natives tended to be in close proximity to reservations, trust lands or Oklahoma tribal statistical areas. This was especially evident in counties throughout the West and in Oklahoma. The 10 states with the largest American Indian and Alaska Native alone-or-in-combination population in 2010 were California, Oklahoma, Arizona, Texas, New York, New Mexico, Washington, North Carolina, Florida and Michigan. Among these states, Texas, North Carolina and Florida experienced substantial rates of growth in this population at 46 percent, 40 percent and 38 percent, respectively. The American Indian and Alaska Native alone population experienced growth of at least 20 percent in Texas, North Carolina, Florida and New York. The multiple-race American Indian and Alaska Native population increased by more than 50 percent in 18 states. North Carolina, Delaware and South Dakota experienced the most rapid growth in this population at more than 70 percent. In all but three states, the multiple-race proportion of the American Indian and Alaska Native alone-or-in-combination population increased from 2000 to 2010. The largest number of people who identified with an American Indian tribal grouping, either alone or in combination, identified as Cherokee (819,000). The Navajo tribal grouping had the largest number of individuals who identified with one tribal grouping and no other race (287,000). Among the largest American Indian tribal groupings, Blackfeet had the highest proportion who reported more than one tribal grouping or race. Seventy-four percent of Blackfeet individuals reported an additional race and/or tribal grouping.

http://content.govdelivery.com/attachments/USCENSUS/2012/01/25/file_attachments/89007/AIAN%20BMULTI-RACE%2B1.10.jpg

3) School Lunches to Have More Veggies, Whole Grains

Schoolchildren's favorite lunch, the ubiquitous frozen pizza is about to get healthier, reported by the Associated Press. The first major nutritional overhaul of school meals in more than 15 years means most offerings — including the always popular pizza — will come with less sodium, more whole grains and a wider selection of fruits and vegetables on the side.

<http://www.google.com/hostednews/ap/article/ALeqM5gLyRVuUfghzUmJ48oaGIM89jSpRw?docId=adf16508f8d4503b05ff223607d1cff>

4) How Churches Can Batter Obesity

In her Salud America! pilot research project, Dr. Meizi He of UT San Antonio conducted interviews and focus groups among church leaders and congregations to gather their insights on childhood obesity. She found that Latino church leaders are aware of and willing to address childhood obesity among their congregations. The preliminary results of Dr. He's study highlight the need for obesity prevention among Latino children and reveal the strong potential of a faith-based community as a venue and infrastructure for implementing effective obesity-prevention strategies.

<http://www.salud-america.org/sites/www.salud-america.org/files/upload/He.pdf>

5) Empty Plates at Empty Tables

A new report from the Food Research and Action Center (FRAC) finds millions of Americans report it is "not easy to get affordable fresh fruits and vegetables." Low-income people and Hispanics and Blacks report the greatest accessibility challenges.

http://frac.org/pdf/half_empty_plate_dec2011.pdf

6) The Impact of Substance Abuse: A Snapshot of Arizona (2011)

The Arizona Governor's Office Substance Abuse Epidemiology Work Group (Epi Work Group) released this report, which details the impact of methamphetamine, alcohol, prescription drugs and emerging issues on Arizona, paying special attention to vulnerable populations such as detained youth and incarcerated adults.

For more information, please see attachment #1 at

<http://www.azminorityhealth.gov/AHDCweeklyUpdate.htm> under "Data, News, Articles and Policies Related to Health Disparities, January 26 – February 1, 2012."

7) Study Explores Population-Based Sleep Position Trends by Race

"This study found differing trends in infant sleep positioning from 1996 to 1997 between white and black infants in South Carolina," state the authors of an article published in the February 2012 issue of the *Maternal and Child Health Journal*. In 1992, the American Academy of Pediatrics (AAP) issued the first in a series of recommendations advocating non-prone infant sleep positioning. Beginning in 2005, responding to new results on the risk of lateral sleeping for sudden infant death syndrome (SIDS), AAP recommended that infants be placed for sleep in the supine position only and explicitly discouraged lateral sleep positioning for the first time. The article presents findings from a population-based survey to examine trends in infant sleep positioning in South Carolina. The authors also explore factors associated with prone and lateral positioning among blacks vs whites. The researchers used data from the 1996-2007 South Carolina Pregnancy Risk Assessment Monitoring System (PRAMS). The analytic

sample included 9,015 mothers (5,028 white; 3,987 black) interviewed from 2000 to 2007. The authors found that in 1996, less than one-third (28.2 percent) of white infants were placed for sleep in the supine position. By 2007, the prevalence of supine positioning had increased to 66.7 percent. The prevalence of supine positioning increased among black infants over the study period, from 22.6 percent in 1996 to 47.1 percent in 2007. White infants born in 2006 or 2007 had lower odds of being placed for sleep in the lateral (vs. supine) position compared with those born in 2000-2005. No statistically significant association was observed between infant's year of birth and sleep positioning among black infants. Significant predictors for white infants being placed in the prone position were different from those for black infants. Additionally, with regard to lateral sleep positioning, more significant predictors were observed among white infants. "The racial differences we observed in trends in infant sleep positioning indicate that additional efforts are necessary to increase the proportion of black mothers who adhere to infant sleep positioning recommendations, while still communicating these recommendations effectively to white mothers," conclude the authors.

<http://www.springerlink.com/content/m24t0156253rthh7>

8) HHS Launches Leading Health Indicators 2012 Series

The U.S. Department of Health and Human Services is addressing challenges associated with access to primary health services in the first installment of its monthly series, *Who's Leading the Leading Health Indicators?* Leading Health Indicators (LHIs), part of the Healthy People 2020 initiative, are critical health issues that, if addressed appropriately, can help reduce the leading causes of preventable deaths and illnesses. Ensuring that all Americans have access to high quality, affordable, health care is central to the new health care reform law. The first webinar on January 25, 2012, focused on improving access to primary health services.

<http://healthypeople.gov/2020/LHI/default.aspx>

9) Better Health and Well-Being: Making Improvements for Lesbian, Gay, Bisexual, Transgender (LGBT) Americans

The U.S. Department of Health and Human Services has taken specific actions in 2011 to promote equal treatment of Lesbian, Gay, Bisexual, Transgender (LGBT) Americans, to provide enhanced resources for LGBT health issues, and develop better information regarding LGBT health needs. The document summarizes how the Affordable Care Act is improving access to health coverage for LGBT Americans.

http://www.hhs.gov/secretary/about/lgbthealth_update_2011.html

10) Number of Hispanic medical students on the upswing

Reflecting in part the “explosive” growth in the number of Hispanics in the U.S., a growing number of Hispanic applicants are applying to and enrolling in medical school, reports the *Chicago Sun-Times*. This number has climbed nearly 23 percent since 2004, and six percent between 2010 and 2011, the article notes, citing Association of American Medical Colleges data.

<http://www.suntimes.com/news/metro/9400237-418/numbers-of-hispanics-studying-medicine-on-the-rise.html>

11) Health Care Trends

The report, produced by the American Medical Association, provides timely, relevant information on current trends affecting the health care system. Chapters on health inequities, patient expectations and perceptions, health economics, public health infrastructure, globalization, science and technology in medicine, and health care resources are now available online.

<http://www.ama-assn.org/ama/pub/about-ama/our-people/ama-councils/council-long-range-planning-development/environmental-analysis.page>