

# *News from the Wyoming Department of Health*

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## **Report Describes Health Challenges for Minority Groups**

Minority racial and ethnic groups in Wyoming experience a number of health-related challenges known as disparities, according to a new Wyoming Department of Health report.

The “Racial and Ethnic Disparities in Wyoming: 2012 Report” is the first comprehensive examination of health disparities in Wyoming and includes more than 30 health and related social indicators.

According to the report, health disparities are gaps in issues of health and healthcare services among distinct segments of the population. “These inequalities have no boundaries from state to state and can also vary by gender, race, ethnicity, sexual orientation, education, income, disability or geographic location,” the report explains.

In 2010, Wyoming’s total population was 563,626, an increase of 14 percent from 493,782 in 2000. In 2010, more than 10 percent of Wyoming was Hispanic compared to 7.2 percent in 2000. The state’s second largest non-white racial/ethnic group is American Indian.

“We’re hoping this report serves as informative resource for major health indicators,” said Lillian Zuniga, Office of Multicultural Health manager. “Wyoming may have a smaller minority population than many other states, but the health disparities described in this report are real.”

According to the report:

Hispanics in Wyoming are more likely than non-Hispanics to:

- Have lower median family incomes;
- Have single parent households;
- Live below poverty level;
- Not own their own homes;
- Not receive prenatal care in the first trimester;
- Not receive any prenatal care;
- Not smoke during pregnancy;
- Have higher teen birth rates;
- Have children without continuous health insurance coverage;
- Smoke and drink while high school students;
- Drop out of school;
- Have lower levels of educational attainment;
- Smoke as an adult;
- Be exposed to secondhand smoke at work;
- Be overweight or obese;

- Be very obese;
- Have fair or poor health;
- Not get health care due to cost

American Indians in Wyoming are more likely than whites to:

- Have lower median family incomes;
- Have single parent households;
- Live below poverty level;
- Not own their own homes;
- Not receive prenatal care in the first trimester;
- Not receive any prenatal care;
- Smoke during pregnancy;
- Have higher teen birth rates;
- Have high infant mortality rates;
- Have higher overall child death rates and child death rates due to unintentional injuries;
- Drop out of school;
- Have a college degree;
- Be overweight or obese;
- Smoke as adults;
- Be exposed to secondhand smoke at work;
- Have fair or poor health;
- Not get health care due to cost;
- Have higher unintentional injury and motor vehicle crash mortality rates.

Many of the same disparities are also experienced by other racial/ethnic groups in Wyoming such as blacks, Asians and Hawaiian/Pacific Islanders.

Zuniga noted that socioeconomic status also affects health disparities. “Families with lower incomes often have limited access to healthcare because they may not have insurance or a primary care physician,” she said. “A family struggling to make ends meet may find it difficult to make healthy eating habits and regular exercise a priority.”

The full report is available online at <http://www.health.wyo.gov/rfhd/multicultural/index.html>.

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