

# Women's Health Disparities Vary by Ethnic Group

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WASHINGTON — More programs need to be developed to address the specific health needs of minority women, Elena Cohen said at the annual meeting of the American Public Health Association.

"Racial minorities are projected to make up almost half the population by 2050," said Ms. Cohen, senior counsel at the non-profit National Women's Law Center. "But

there's not much analysis of [health data on] racial and ethnic groups by gender."

To further examine the issue, the center analyzed data and published the results in a report titled, "Making the Grade on Women's Health," that outlines disparities in women's health care in different states.

For example, black women have the highest rate of Pap smears and the lowest rate of osteoporosis, but also have the shortest life expectancy, the highest poverty rate, and are least likely to get prenatal

care. They also have the highest mortality rates for coronary heart disease, stroke, and diabetes, and the highest incidence of AIDS and lung cancer.

Latinas have the lowest mortality rate from stroke but are the second-least likely group to be screened for cervical cancer, and they fare worse in cervical cancer incidence and mortality, she said. This group has the highest percentage of uninsured women and the highest percentage of women who do no physical activity in

their leisure time, "which is very important for obesity issues."

American Indian and Alaskan Native women had the second-lowest mortality rate from stroke, but they fared worst of all groups for smoking, binge drinking, mortality from cirrhosis, and violence against them, Ms. Cohen said.

"The Asian American/Pacific Islander group fared best in preventive health behaviors and in avoiding obesity and smoking," she added. But these women are disproportionately affected by cervical and ovarian cancer and are also the second-least likely group to have had a mammogram within the last 2 years.

Because each group's problems are different, identifying interventions can be tricky. "One way is to encourage research that is analyzed and reported by race and ethnicity, and then further by gender," said Ms. Cohen. "Another idea is to develop targeted programs to address ethnic and racial issues." ■



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