



MINORITY HEALTH FACTS

Native Americans

IN RHODE ISLAND



2011 MINORITY HEALTH FACT SHEETS PREPARED BY:

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www.health.ri.gov/programs/minorityhealth

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Introduction

This report provides information about major health indicators for the American Indian/Alaska Native population in the state, hereafter referred to as Rhode Island’s “Native American” population. An American Indian/Alaska Native is defined by the Office of Management and Budget (Directive 15) as a person having origin in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment. A White person is defined as a person having origins in any of the original peoples of Europe, the Middle East, and North Africa.

This report presents data on socio-economic characteristics, morbidity and mortality, behavioral risks, infectious diseases, maternal and child health, and access to care among Native American Rhode Islanders in comparison to the White and the overall state populations. Please note that race and ethnic status for some Department of Health data sets are based on self-identification. All groups reported in this fact sheet are non-Hispanic unless otherwise indicated. The tables present point estimates which should not be used to imply statistical significance.

Population Demographics

According to the US Bureau of the Census, 2010 Census, there are about 4,020 Native Americans living in Rhode Island. Tribal affiliation is diverse, with more than ten tribes with more than 100 members and numerous others with fewer than 100 members. The Narragansett tribe holds the largest membership with over 2,000 people. Over 60% of the urban Native American population lives in Providence County. The median age for the Native American population is 26 years whereas the total state median age is 39.4 years. While 86% of the state population is age 65 or younger, 93% of the Native American population is age 65 or younger.

Socio-Economic Characteristics

The following are socio-economic characteristics of Rhode Island’s Native American population. These characteristics may affect the health of the Native American population living in Rhode Island. Except for the high school graduation rate, the socio-economic data source for Native Americans is the 2000 Census, while the data source for Whites and the state overall is based on the 2007-2009 American Community Survey 3-Year Estimates.

- The percentage of Native American living below the poverty level is more than three times higher than that of the overall state population and almost five times higher than that of the White population.
- The median household income for Native Americans is \$22,800. This is \$31,900 less than the state median and \$36,700 less than that for the White population.
- A lower percentage of Native Americans graduate from high school compared to the overall state and the White populations.
- A greater percentage of Native Americans are unemployed compared to the overall state and the White populations.

TABLE A: SOCIO-ECONOMIC DATA

	NATIVE AMERICAN ¹	WHITE ²	STATE ²
Percentage of population living in poverty*	39%	8.2%	11.9%
Percentage of population that is unemployed	6.5%	4.4%	5.2%
Median household income**	\$22.8K	\$59.5K	\$54.7K
High school graduation rate ³	69%	91%	89%

Sources: 1. US Bureau of the Census, 2000
2. US Bureau of the Census, 2007-2009 American Community Survey 3-Year Estimates
3. Rhode Island Department of Elementary and Secondary Education, 2006-2007 School Year

*The 100% federal poverty level for a family of 4 in 2008 was \$21,200.

**The median income is the middlemost amount which divides the incomes into two equal groups, half having incomes above the median and half having incomes below the median. Household income takes into account any wage earners who share a household regardless of relation.

Behavioral Risk Factors

Native Americans have a slightly higher percentage of overweight or obese individuals compared to the White and the overall state populations. This trend is also seen when only the obese percentages are presented.

The percentage of Native Americans who smoke cigarettes is almost two times higher than that of the White and the overall state populations.

Native Americans have a lower percentage of adults who consume at least five daily servings of fruits and vegetables when compared to the White and overall state populations.

Chronic Diseases

Racial and ethnic disparities exist in health outcomes related to chronic diseases such as asthma, diabetes, heart disease, and stroke. For detailed reports of the burden of these chronic diseases on the health of Rhode Island residents and the disproportionate impact on the state's minority residents, visit the Rhode Island Department of Health website at www.health.ri.gov

Mortality

The two leading causes of death for the Native American, White, and overall state populations are heart disease and cancer.

Infectious Diseases

From 2005 to 2007, there were no known cases of tuberculosis among Native Americans in Rhode Island.

Due to the small population of Native Americans in Rhode Island, the available statistics on sexually transmitted diseases and HIV/AIDS are too limited to report reliably.

TABLE B: BEHAVIORAL RISK FACTOR INDICATORS (ADULTS 18 YEARS AND OLDER)

	NATIVE AMERICAN	WHITE	STATE
Percentage of adult population who participates in light to moderate physical activity for at least 30 minutes per day (2003, 2005, 2007)	59.1	51.9	50.3
Percentage of adult population (20 yrs+) who is overweight/obese ¹ (2005-2008)	66.9	61.2	61.4
Percentage of adult population (20 yrs+) who is obese ² (2005-2008)	29.1	21.6	22.2
Percentage of adult population who consumes at least 5 daily servings of fruits and vegetables (2003, 2005, 2007)	20.4	28.9	28.5
Percentage of adult population who smokes cigarettes (2005-2008)	34.0	18.6	18.4
Percentage of adult population who consumed 5+ drinks on one or more occasions in past month (binge-drinking) (2005-2008)	13.5	18.2	17.3

Source: Rhode Island Department of Health, Behavioral Risk Factor Surveillance System

1. Overweight/obesity defined by the Centers for Disease Control and Prevention (CDC) as body mass index (BMI) ≥ 25

2. Obesity defined by CDC as BMI ≥ 30

TABLE C: LEADING CAUSE OF DEATH

DISEASE	NATIVE AMERICAN	WHITE	STATE
1	Heart Disease	Heart Disease	Heart Disease
2	Cancer	Cancer	Cancer
3	+	Chronic Respiratory Diseases	Chronic Respiratory Diseases
4	+	Stroke	Stroke
5	+	Unintentional Injuries	Unintentional Injuries

Source: Rhode Island Department of Health, Office of Vital Records, RI Resident Deaths, ICD-10 Codes, 2005-2009

+ Data too small for meaningful analysis

TABLE D: SELECTED INCIDENCE RATES OF INFECTIOUS DISEASES: CASES PER 100,000 POPULATION

DISEASE	NATIVE AMERICAN	WHITE	STATE
Gonorrhea ¹	+	19.7	38.0
Chlamydia ¹	+	146	300
Tuberculosis ²	0	1.3	3.7
HIV/AIDS ³	+	11.0	17.9

Sources: Rhode Island Department of Health, Division of Infectious Disease and Epidemiology

1. Sexually Transmitted Diseases (STD) Surveillance Data, 2007

2. Tuberculosis Database, 2005-2007

3. HIV/AIDS Surveillance Data, 2007

+ Data too small for meaningful analysis

According to the 2010 Census, there are about 4,020 Native Americans who live in Rhode Island.

TABLE E: MATERNAL AND CHILD HEALTH INDICATORS

	NATIVE AMERICAN	WHITE	STATE
Percentage of pregnant women with delayed prenatal care ^{1,~}	23.9	13.5	15.5
Rate of births to teens ages 15-19 (per 1000 teens) ^{1*}	129.1	27.1	28.3
Percentage of births to mothers with less than 12 years of education ¹	35.7	14.2	16.6
Percentage of infants with low birth weight (<5.5 lbs) ¹	13.6	7.4	8.0
Infant mortality rate (per 1000 live births) ²	+	5.5	6.3
Percentage of children in poverty (<18 years old) ³	+	9.1	17.1

Sources: 1. Rhode Island Department of Health, Center for Health Data and Analysis, 2005-2009

2. Rhode Island Department of Health, Center for Health Data and Analysis, 2005-2009 (births to mothers who are Rhode Island residents)

3. US Bureau of the Census, 2007-2009 American Community Survey 3-Year Estimates

* Note: Teens aged 15-19: Rates are calculated using 2006-2008 American Community Survey Estimates; all race categories, excluding Whites, include Hispanic ethnicity.

~ Delayed prenatal care is defined as beginning prenatal care in the second or third trimester or receiving no prenatal care at all.

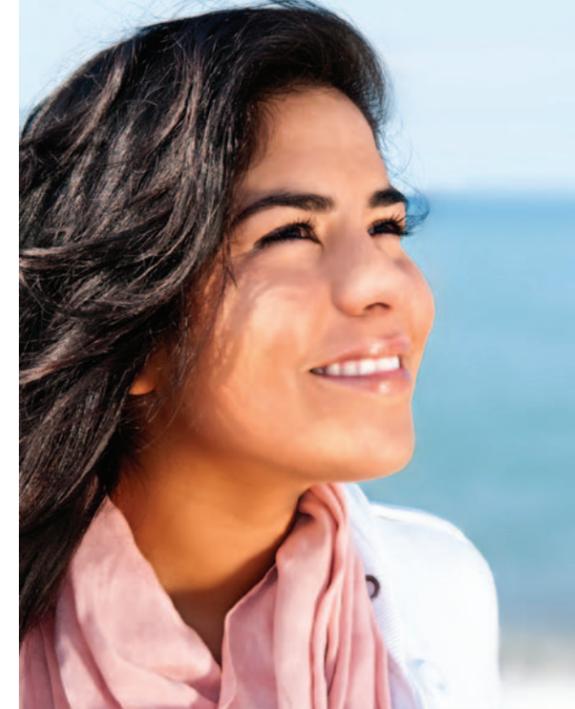
+ Data too small for meaningful analysis

TABLE F: ACCESS TO HEALTHCARE INDICATORS (ADULTS 18 YEARS AND OLDER)

	NATIVE AMERICAN	WHITE	STATE
Percentage of adults younger than 65 years old who reported having no health insurance (2005-2008)	23.8	6.4	9.3
Percentage of adults who reported having no specific source of ongoing healthcare (2001, 2006)	+	10.0	10.9
Percentage of adults who had no routine checkup within the past year (2005-2008)	26.9	19.5	20.2
Percentage of women aged 40+ who reported not receiving a mammogram in the past 2 years (2006, 2008)	+	16.4	16.7
Percentage of women who reported not having a pap test in the past 3 years (2006, 2008)	+	12.7	12.9
Percentage of adults who reported being unable to afford to see a doctor at least once in the past year (2005-2008)	29.4	7.8	10.0

Source: Rhode Island Department of Health, Behavioral Risk Factor Surveillance System

+ Data too small for meaningful analysis



Maternal and Child Health

The overall state and the White populations have more favorable maternal and child health outcomes than the Native American population in Rhode Island.

Native Americans are about twice as likely to receive delayed prenatal care compared to the White population.

The percentage of Native American teens (ages 15-19) who give birth is about four times greater than that of the White and overall state teen populations.

Native Americans have the highest percentage of infants with low birth weight of all racial and ethnic groups.

Access To Healthcare

Most samples are too small to draw reliable conclusions regarding Native Americans and access to healthcare.

A higher percentage of Native American adults report being unable to afford to see a doctor in the past year compared to adults in the White and the overall state populations.

The percentage of Native Americans having no health insurance is more than two times that of the overall state population and nearly four times that of the White population.