

Have health disparities improved or worsened over time for Blacks in Kent County, Michigan?

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This simple question doesn't offer simple answers. For many health care organizations, universities, funders, residents, students and professors, the question of whether or not health disparities improved or worsened over time for Blacks in Kent County, Michigan is pondered with great perplexity. Unfortunately, this question stems from the reality of Blacks experiencing the most and worst health disparities in Kent County and in many counties across the country.

For instance, Blacks in Kent County experience poorer rates of heart disease deaths, HIV prevalence, infant mortality, lung cancer deaths and prostate cancer deaths compared to all other race/ethnic groups in the county. ([HEI](#)) Thus, organizations like the Grand Rapids African American Health Institute (GRAAHI) and the Urban League of West Michigan focus their efforts on combatting these health inequities with educational programs, strategic partnerships and research-based solutions.

To investigate this matter, GRAAHI's Director of Research performed [statistical analyses](#) using race/ethnic data for seventeen indicators over a 4-5 year period in Kent County, Michigan. These data were collected from the Michigan Department of Health and Human Services (MDHHS), ensuring that the most recent data were used. While comparing these data and calculating statistical significance, the suspense grew like waiting for your doctor to present lab results. You hope it's not too bad.

So did health disparities for Blacks in Kent County improve or worsen over time? The answers are—no and no. What? How could that be? Well, among the seventeen indicators assessed in Kent County, none of the changes over time for Blacks were statistically significant, meaning the rates didn't significantly improve or worsen for Blacks. At first sight, this is disheartening for the health professionals and residents who work tirelessly in West Michigan to reverse the health conditions that plague Black residents in Kent County.

From a silver lining perspective though, there were two. First, for the seventeen indicators reviewed, the rates for Blacks moved in the healthy direction for ten of them. The indicators showing the most improvement over time for Blacks were—*depression*, *cost prevented care*, *lung cancer incidence*, and *binge drinking*. Secondly, the rates didn't significantly worsen over time for Blacks either, which may seem more like a gray lining than a silver one. Regardless, preventing multiple health disparities from getting worse is a notable feat, especially during a trying time with stagnant wages, fluctuating rates of unemployment, rising inflation, a global pandemic and social/cultural changes in all directions. Thus, keeping disparities from getting worse may be a win with multiple asterisks.

Among other race/ethnic groups, whites in Kent County did experience significant changes over time, which included significant reductions in *depression*, *cost prevented care*, and *teenage births* and a significant increase in *physical activity*. In addition, Hispanics in Kent County saw a significant increase in *physical activity* and a significant decrease in *teenage births* over time. These were all positive changes over time for whites and Hispanics, which bodes well for the entire Kent County population moving forward.

Upon learning these findings, the instinct was to contemplate solutions that could generate significant outcomes in a positive direction sooner than later. Currently, GRAAHI supports this vision with multiple initiatives. One such effort is [GRAAHI's Pathways Program](#) that focuses on promoting programs, partnerships and resources to cultivate Black professionals and other underrepresented groups across

West Michigan. Producing more Black professionals in Kent County could potentially lead to better outcomes for said group, as this [study](#) and this [study](#) indicate that Black patients respond better to and receive better care from Black health care professionals. These aren't the only studies with such findings, as the literature contains many examples of this patient-provider phenomenon among Blacks and other race/ethnic patients.

Another tool in this disparity fight is [GRAAHI's Health Equity Index](#) (Index). Since 2015, GRAAHI's Index has served as a data and disparity resource for health care organizations, hospitals, universities and businesses across the state of Michigan and other states. Not only does it showcase data and disparities by race/ethnicity in Kent County, but it also provides research reports, reviews, trend analyses, policy briefs, interactive data maps and health recommendations that inform and empower residents and institutions with information needed to tackle health inequities across West Michigan. The trend data analysis discussed in this article is located in GRAAHI's Index [here](#), so feel free to peruse this tool to experience the full weight of its value.

Since health inequities are influenced by many factors including policies, hospitals, universities, organizations and individuals, it's the duty of all parties to combat these health challenges. Not one or even two organizations can achieve this feat, so the efforts of many institutions and people will be needed to repair the insufficient health care systems and data collection measures that exist in many cities and counties. Once collective systems and programs are streamlined to target these health disparities, Blacks and other race/ethnic groups may begin experiencing the benefits of these efforts, including significant improvements over time for many health metrics.

Notes: GRAAHI's Trend Data Review only assessed seventeen indicators in Kent County. There may be other indicators, not assessed in this review, where the rates for Blacks significantly improved or worsened over time. In the trend data analysis, statistical significance could not be calculated for three of the seventeen indicators due to a lack of information.