

Arab American in Michigan: Health Snapshot



Concerns:

CVD is a concern for the Arab American population, with high rates of diabetes, hypertension, and hypercholesterolemia. Almost half of respondents to a 2001 survey* said they have been told they have **high cholesterol**. Cancer, diabetes and HIV have been identified by the community as chronic health concerns: only 26.5% report having been screened for cancer. Through a community focus group, **access to culturally appropriate services** are identified as a blockage to better physical health as well as mental health. It was also identified that drug and **tobacco use** are seen as problems, and immigration policy affects community health.

Doing better:

The use of tobacco and alcohol is lower for Arab Americans than the Michigan average, with 15% reporting smoking, and 6.7% reporting alcohol use (however, tobacco use was identified as a concern by Arab Americans who participated in a MDCH focus group). ACCESS, area providers, and Medicare have all been identified as groups currently working to improve the health of Arab Americans.

Key social and environmental health determinants:

The median household income is \$45,545. Among those 25 years and older, 76.3% are high school graduates and 28.3% have a bachelor's degree or higher. 57.7% are cost-burdened renters (rent \geq 30% of income). **44% are foreign born, with 66.5% speaking a language (most commonly Arabic) other than English at home.** Michigan, specifically the greater Detroit area, has the largest Arab population in North America. Lack of transportation and proximity to health centers are identified as blockages to better healthcare. The community also identified a **lack of knowledge about Arab Americans by the population at large** as an issue that affects health at many levels.

Total Population (US Census): 155,351
 Total Population (ACCESS* estimate): 300,000
 % of population: 1.5-3.0
 Age Distribution:
 under 5: 10.7%
 5-17: 24.3%
 18-65: 58.5%
 over 65: 6.6%

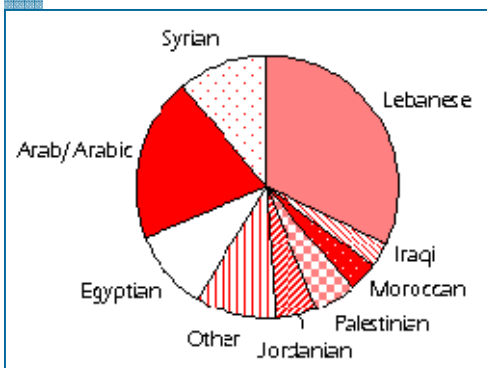
Key health status, behavior, and healthcare access indicators:

Arab Americans report 20.5% uninsured, 18.8% covered by Medicaid, and 60.7 covered through employer or private insurance. 80.0% report eating a healthy diet and 60.0% report exercising. 30.9% of females respondents report using birth control.

Looking Forward.

Keys for improving the health of Arab Americans in Michigan were solicited through a community conversation held in 2009. Some of the priorities included:

- Healthcare system that is accessible to more people and easier to navigate
- Improvement in cultural competence of providers and availability of linguistic services
- Community engagement and education through the media and faith networks
- Change in policies to decrease youth tobacco and drug use



Ancestry of MI Arab Population, 2001

Notes:

Due to the relatively small population of Arab Americans in Michigan, understanding the health status through traditional surveillance methods can be difficult or impossible. Alternative data sources, such as the 2001 Health Survey conducted by the Arab Community Center for Economic and Social Services (ACCESS), are key to understanding the health needs of this population, and to build programming and policy that effectively meets the needs of the community.

Sources: Michigan Vital Statistics 07 data; *Health Survey of the Arab, Muslim, and Chaldean American Communities in Michigan, 2001 American Community Survey 05-07 (US Census); Photo courtesy of Arab American News; 2009 Community Conversations, MDCH. Please contact the Health Disparities Reduction/Minority Health Section at colorme-healthy@michigan.gov for more information.

