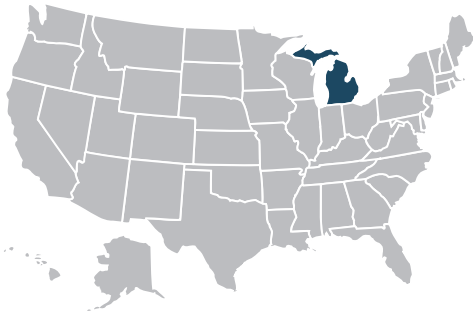


Issue Brief

HEALTH IN MICHIGAN



In 2009, nearly one out of seven persons in Michigan described their health as fair or poor.

WHAT IS SOCIETAL DISTRESS?

Societal distress describes living conditions that do not satisfy basic human needs, such as food, shelter, health, income, and education.

Visit www.humanneeds.vcu.edu for more details.

What is health?

Health is defined by the World Health Organization as “a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity.” **Health distress** is measured here in terms of shorter life expectancy, premature mortality (e.g., deaths before age 65), chronic illnesses, serious psychological distress, hospitalizations, and inadequate access to health care (being uninsured, lacking a usual source of care, or having to defer care due to costs).

How many Michigan residents are affected?

- More than one quarter (26.3%) of all deaths in 2007 in Michigan occurred prematurely—before age 65.

In 2009—the most recent year for which complete data are available:

- Nearly half of (48.8%) Michigan adults age 18 or older suffered from at least one of the following five chronic diseases: diabetes, cardiovascular disease, asthma, arthritis, and cancer.
- Serious psychological distress was reported by 8.1% ($\pm 0.7\%$) of Michigan adults.
- More than one out of six (16.2%, $\pm 1.2\%$) of Michigan adults (1.0 million $\pm 83,000$ residents) reported being uninsured.
- Approximately 14.0% ($\pm 0.9\%$) of Michigan adults reported deferring medical care due to cost.

In 2007, although the life expectancy at birth in the United States was approximately 78 years...

...one out of four deaths occurred before **age 65** (retirement).



THE PROJECT ON SOCIETAL DISTRESS is an initiative of the Virginia Commonwealth University Center on Human Needs, which examines the prevalence of societal distress in five domains—food security, housing, health, education, and income—and makes the information available to the public and policymakers. This research effort focuses on presenting accurate data on the number of Americans affected by these conditions and not examining the causes or proposing solutions. The Project on Societal Distress is funded by the W.K. Kellogg Foundation.

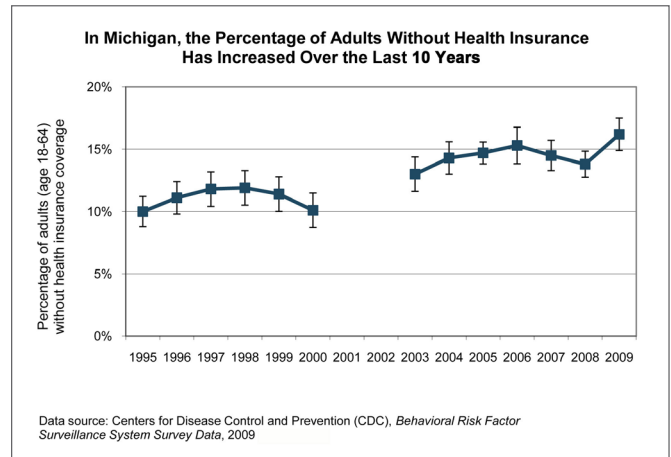
As of 2007, blacks in Michigan were 1.8 times more likely than whites to die before reaching age 65.

WHY DOES IT MATTER?

Poor health and complications from diseases can induce suffering, compromise quality of life, and precipitate early deaths. Illness affects educational attainment and workforce productivity, and the rising costs of health care are straining the budgets of households, employers, and government.

What are the trends?

In the past decade, the percentage of the population that is uninsured has increased from one in 10 to approximately one in six.



Who is affected?

Children: In 2007, one of every 15 premature deaths in Michigan occurred before age 20.

Seniors: In 2009, more than three out of four (80.4%) adults age 65 and older suffered from at least one of five chronic diseases.

Minorities: In 2005, black infants in Michigan were more than two-and-a-half times as likely as whites to die before their first birthday.

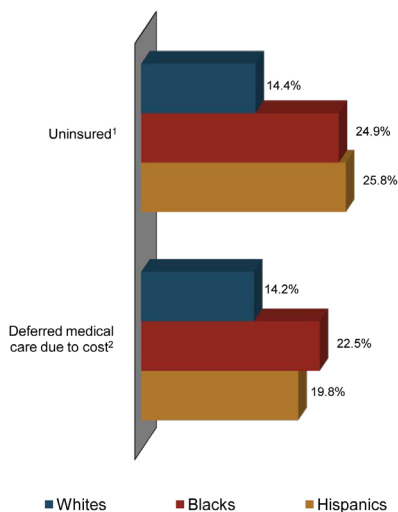
The Poor: In 2009, families with incomes below \$20,000 were more than three times as likely to report fair or poor health, and twice as likely to report serious adult psychological distress than families with incomes of at least \$35,000. Approximately one-third of households with incomes below \$20,000 were uninsured.

Households with Less Education: In 2009, the prevalence of diabetes among adults age 25 and older was 19.6% ($\pm 3.2\%$) among persons with less than a high school diploma—three times the rate among those with a college or technical degree (6.4%, $\pm 0.8\%$). Fair or poor health status was more than five times as likely.

SOURCES AND METHODS

The statistics reported here were obtained from the Centers for Disease Control and Prevention 2007 *CDC Wonder* tool and the 2009 *Behavioral Risk Factor Surveillance System*. The data underwent statistical analysis by the research staff of the Virginia Commonwealth University Center on Human Needs. Analytic methods are detailed at www.humanneeds.vcu.edu.

Some Minorities Face Greater Barriers to Health Care in Michigan (Adults Age 18 to 65 Years)



Data source: Centers for Disease Control and Prevention (CDC), Behavioral Risk Factor Surveillance System Survey Data, 2009

THE VIRGINIA COMMONWEALTH UNIVERSITY CENTER ON HUMAN NEEDS (www.humanneeds.vcu.edu) was chartered in 2007 to provide the public and policymakers with information about the prevalence of societal distress in the United States. Its mission is to document how many Americans confront food insecurity, precarious housing or homelessness, inadequate health and health care, inferior education, and inadequate income/poverty.

For more details, visit www.humanneeds.vcu.edu.