

REFRESH NEIGHBORHOOD DATA PROJECT

HEALTH STATUS

From summer 2017 to winter 2018, Broad Community Connections (BCC) led a community-based participatory research study to collect information on the health, wellbeing, wants and needs of residents living near the ReFresh Project. The below information is a synthesis of data regarding peoples' health status collected from 200 door-to-door surveys with adult residents, all living within one-square mile of the ReFresh Project at 300 N Broad Street in New Orleans. The survey area covered parts of the Treme-Lafitte, Tulane-Gravier, Mid-City, and Bayou St. John neighborhoods. BCC also conducted focus groups with key resident demographic groups to augment survey findings.



ReFresh
PROJECT

The ReFresh Project is a community health hub and collaborative of cross-sector partners working to achieve health equity in New Orleans neighborhoods along North Broad Street. Through health education programming, community engagement, data collection, information sharing, and systems-change advocacy, we work to ensure that all local residents have the tools, education and supports needed to be healthy and happy.

HEALTH DISPARITIES

A person's health does not exist in a vacuum. While someone's eating, exercising, and health care behaviors surely influence their health, if they do not have real access to quality education (including health education), affordable housing, fresh healthy foods, a living wage, transportation, and other resources necessary for overall wellbeing, they are more at risk for sickness and early death. While these systems are imperfect for everyone, communities of color often face especially deep, entrenched barriers to meeting their highest physical, mental, and emotional health potential.

With the ReFresh Neighborhood Data Project, we seek to better understand the current health status of neighbors in our community. While we are interested in the barriers all people face when trying to meet their highest health potential, we pay special attention to the differences, or disparities, between different racial and ethnic groups in the area. Disparities in health status between these groups help point to the places in policy and local resources which privilege one group over others. It is the work of the ReFresh Collaboration to not only help individuals and families learn about which resources are available to them and what their rights are in accessing these resources, but to work to address inequitable policies and institutional practices at their root. The ReFresh Neighborhood Data Project's "Health Behaviors" Data Sheet shows how survey respondents are taking care of their physical, mental, and emotional health, and barriers they confront when trying to do so.



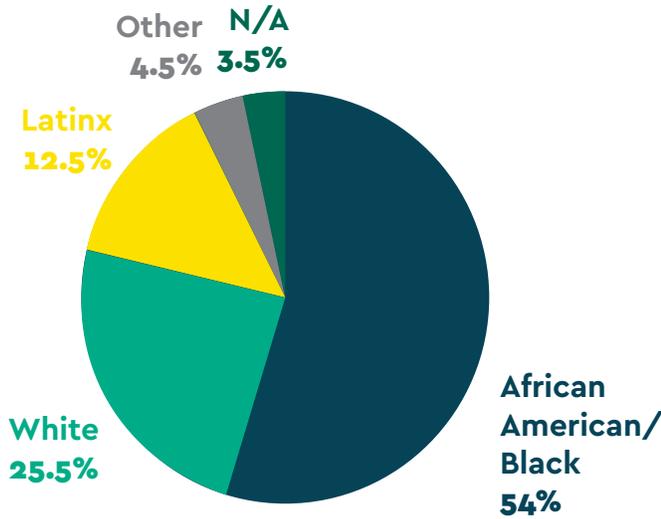
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GENERAL DEMOGRAPHICS

ReFresh neighborhoods are generally home to a diverse mix of older Black or African American* adults with deep roots in the neighborhood, young and childless white adults new to the neighborhood, and young Latinx** immigrant families with low levels of formal education.

RACE + ETHNICITY

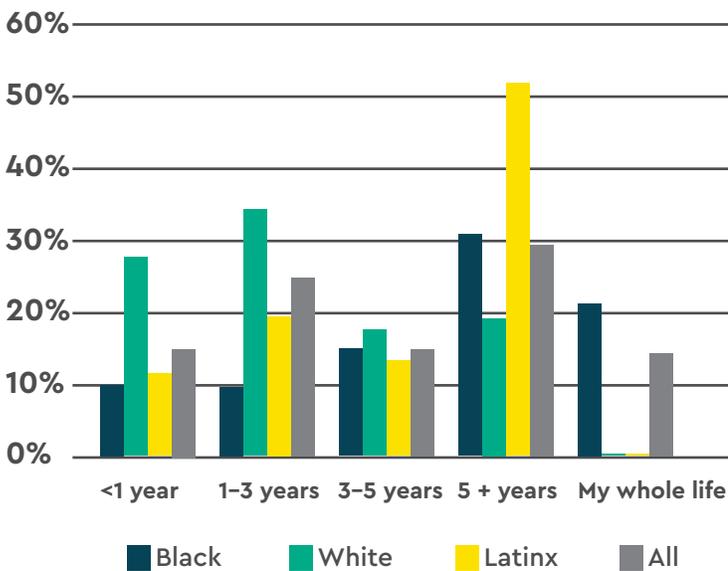


The majority of survey respondents identified as Black (54%), followed by white (25.5%) and Latinx (12.5%), respectively. Approximately 4.5% of survey respondents identified as Native American, Asian, or multi-racial, shown here as "Other". A separate 3.5% of participant responses (seven people total) did not identify as a discernable race or ethnicity. In an effort to make our graphs readable, we do not show outcomes for "Other" or for respondents who did not identify as any race or ethnicity in the remainder of this brief. If interested in this data, please contact ReFresh.

*The survey asked residents to identify their race from a list of options taken from the U.S. Census Bureau. One option was "Black or African American." For the sake of brevity and the desire to be inclusive of people of African descent from countries other than the United States, the term "Black" is used for the remainder of this brief when referencing residents who chose this option.

** "Latinx" is a gender-neutral term sometimes used in lieu of "Latino" or "Latina". For the purposes of this brief, "Latinx" is used to describe the residents who responded "Yes" to the survey question "Do you consider yourself Latino?".

HOW LONG HAVE YOU LIVED IN THIS NEIGHBORHOOD?



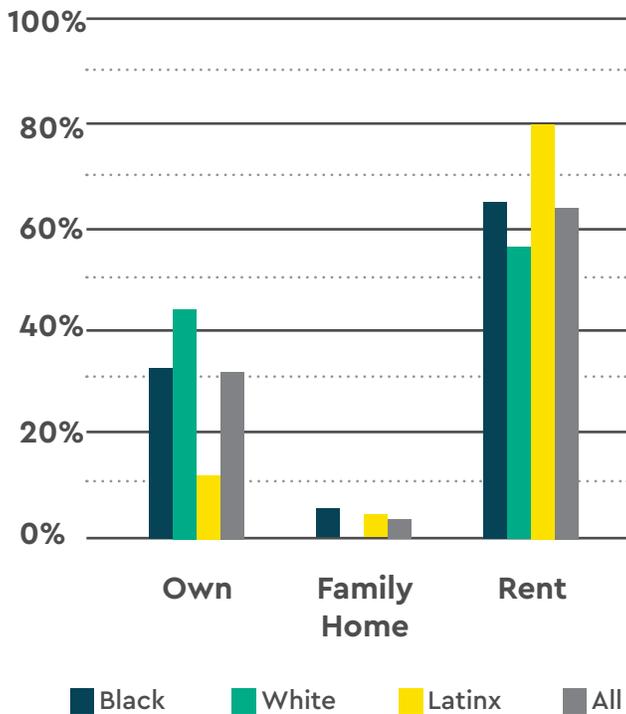
Black residents have the deepest roots in the ReFresh neighborhoods, followed by Latinxs, then white residents. Fifty-four percent of Black respondents had lived in the neighborhood for at least five years, with 22% having lived in the neighborhood their whole life or "close to it". Fifty-two percent of Latinx respondents had lived in the neighborhood for five years or more, yet none had lived there for their whole life. No white respondents had lived in the neighborhood their whole lives, and 81% had moved into the neighborhood within the past five years.



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DO YOU RENT OR OWN THIS HOME?



The majority of respondents in each racial and ethnic group rented their home. Despite being the newest group to ReFresh neighborhoods, white respondents led other racial and ethnic groups in homeownership at 43%. Of Black residents, 32% owned their home or lived in a family-owned home, followed by 16% of Latinx respondents. In follow-up focus group discussions, many Black homeowners reported owning their homes for a long time with some living in homes passed from generation to generation.



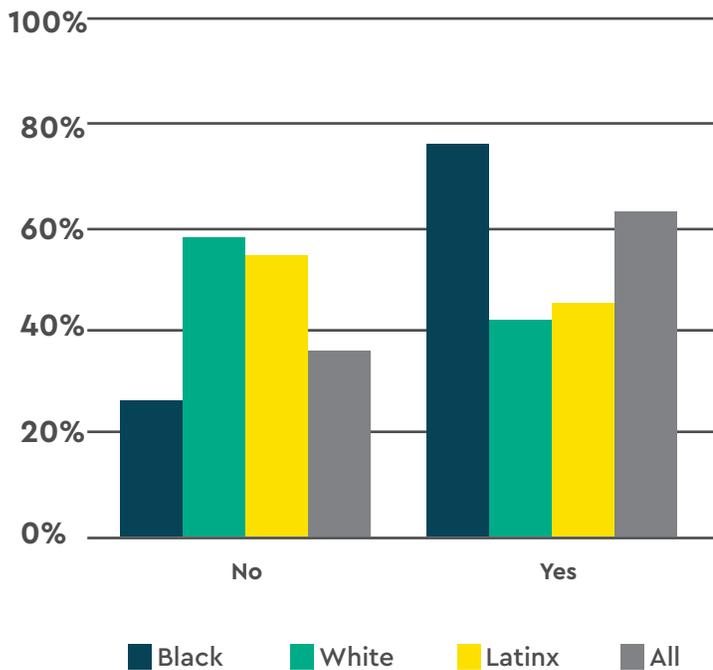
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CHRONIC CONDITION DIAGNOSIS

Hypertension was the number one diagnosed chronic illness in the neighborhood among respondents of all racial and ethnic groups. Black respondents had the highest rates of overall diagnosed chronic illness, while it's possible that Latinxs are underdiagnosed due to a low rate of healthcare coverage. White respondents generally felt they were in good health at a higher rate than Black and Latinx respondents.

HAS A HEALTH CARE PROFESSIONAL EVER DIAGNOSED YOU WITH A CHRONIC CONDITION?



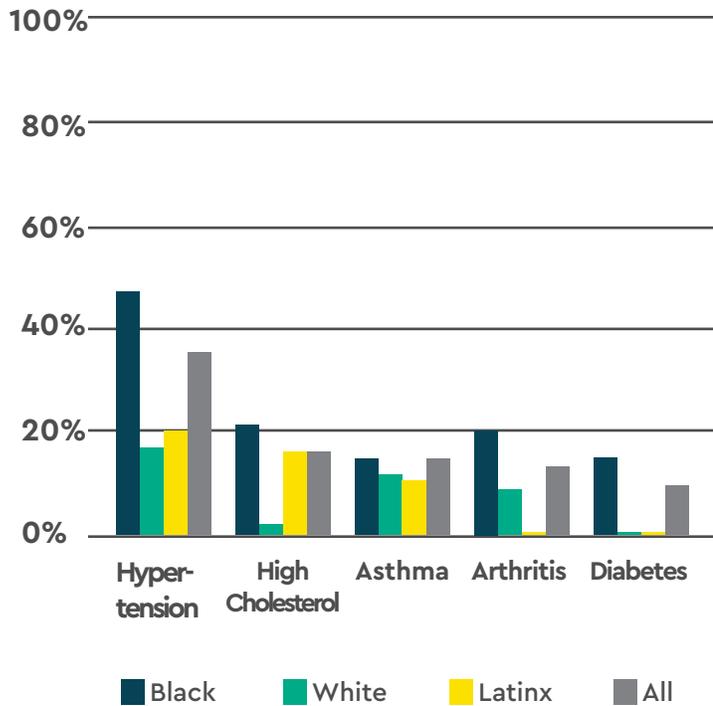
Seventy-six percent of Black respondents had been diagnosed with a chronic condition by a health professional, the highest percentage of all racial or ethnic groups. A majority of white and Latinx respondents reported not having been diagnosed with a chronic condition (59% and 56% respectively). Given the low level of healthcare coverage among Latinx respondents, however, it is possible that some residents in this group have a chronic condition, yet have not been formally diagnosed. Generally, the older the group of respondents, the more people within that group had been diagnosed with a chronic condition. For respondents of all racial and ethnic groups age 35 - 44, 59% reported a chronic condition diagnosis; this percentage rises for each age group until reaching 100% for those aged 75 and older.



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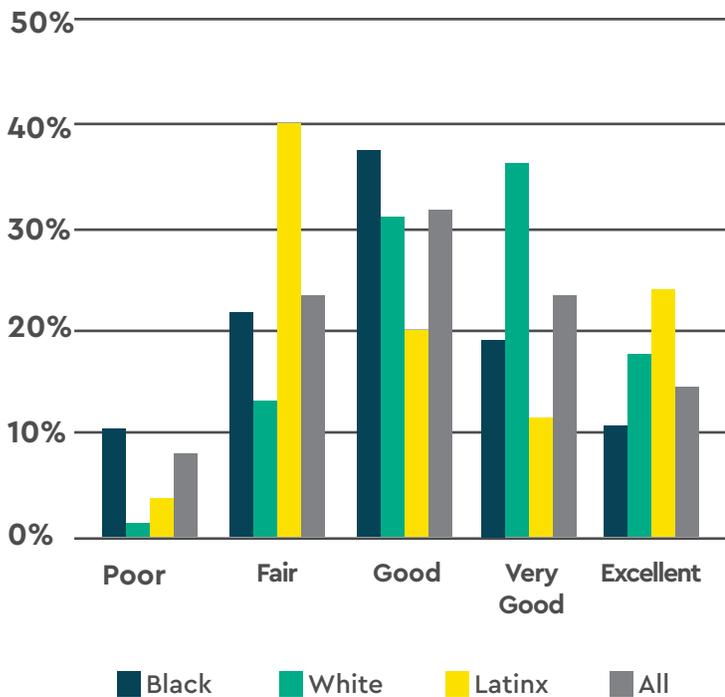
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CHRONIC CONDITION DIAGNOSIS



This graph shows the percentage of chronic condition diagnoses in each racial or ethnic category. The five most common chronic condition diagnoses reported by respondents were hypertension, high cholesterol, asthma, arthritis, and diabetes (in that order). Black respondents had the highest rate of diagnosis of all five conditions compared to their white and Latinx neighbors, and almost half of all Black respondents had been diagnosed with hypertension at some point in their lives (45%). Eight percent of all survey respondents had been previously diagnosed with diabetes, however none of the white or Latinx reported a diabetes diagnosis, leaving the burden of diabetes on Black respondents at 15%. It is possible that age is a factor in these results as the majority of Black respondents were middle aged or older and white and Latinx respondents on the whole were younger.

HOW WOULD YOU RATE YOUR GENERAL HEALTH?



When asked how they felt about their health in general, one third (32%) of all respondents said that they felt they were in "good" health, and about one-third (31%) of all participants felt that they were in either "poor" or "fair" health. Forty-four percent of Latinx respondents reported being in "poor" or "fair" health, as did 32% of Black respondents. Only 16% of white respondents reported being in "poor" or "fair" health, and whites had the highest percentage of respondents reporting their health as "very good" or "excellent" at 53%.



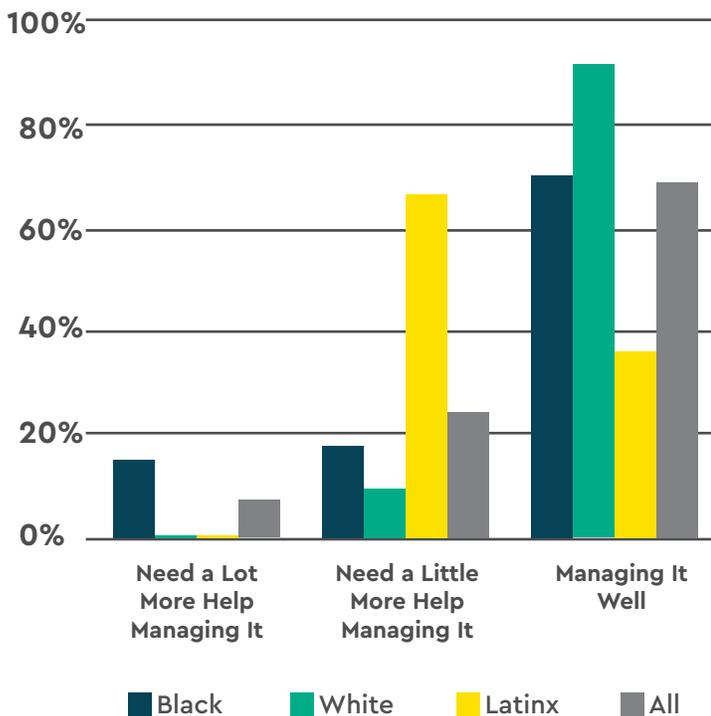
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HEALTH MANAGEMENT AND STRESSORS

While no one racial or ethnic group feels they are perfectly managing their disease diagnosis, Latinx respondents mentioned struggling much more to manage their health conditions than Black or white respondents. At least one fifth of respondents from each group also stated that their health or that of a dependent limited what they were able to do on a daily basis. Regarding things that stress people out, money, work, and family were the top three stressors for each racial and ethnic group, and the majority of respondents reported receiving the necessary emotional support they need from friends and family.

HOW WELL ARE YOU MANAGING YOUR DIAGNOSIS?



Of people who had been diagnosed with a chronic condition, 91% of white respondents and 70% of Black respondents felt they were managing their health conditions "well", while only 36% of Latinxs felt this way. Sixty-four percent of Latinx respondents, 30% of Black respondents, and 10% of white respondents who had been diagnosed with a chronic condition mentioned needing "a little" to "a lot" more help managing their health condition(s). Latinxs on the whole have low healthcare coverage and different barriers to healthcare than other groups, potentially contributing to these unmet needs.

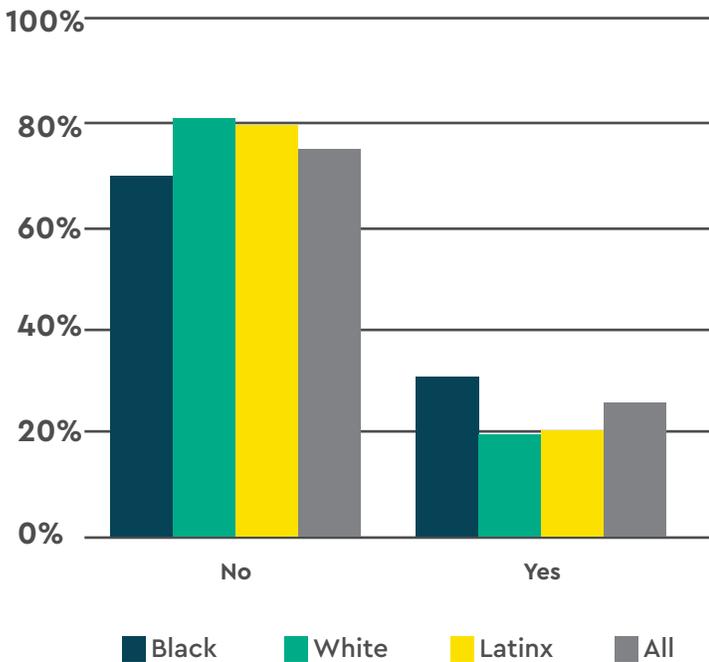
In focus groups with Black adults and seniors, participants talked at length about issues they have had with health providers when trying to manage their conditions, including: doctors not listening to their ideas or concerns, being quickly prescribed but not wanting to take lots of medications; poorly coordinated care and having multiple specialists for the same issue, and; the idea that doctors overly schedule appointments and order tests in order to make money. There was an agreement among most participants that it was better to try and control your own health through lifestyle changes like improved diet than follow the care plan designed by a physician.



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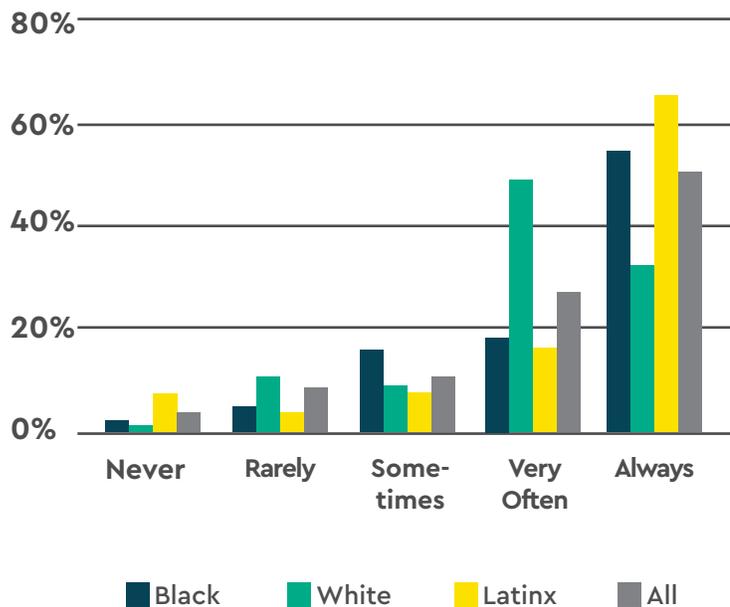
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IN THE PAST MONTH, HAS THE HEALTH OF YOURSELF OR A DEPENDENT KEPT YOU FROM DOING THINGS?



One quarter (25%) of all respondents reported that their own health or the health of a dependent had kept them from doing things they wanted or needed to do in the past month. Black respondents reported this limitation more than any other group at 30%, followed by 20% of Latinx and white respondents stating they had also been limited in the past month.

HOW OFTEN DO YOU GET THE EMOTIONAL HELP AND SUPPORT YOU NEED FROM YOU FRIENDS AND/OR FAMILY?



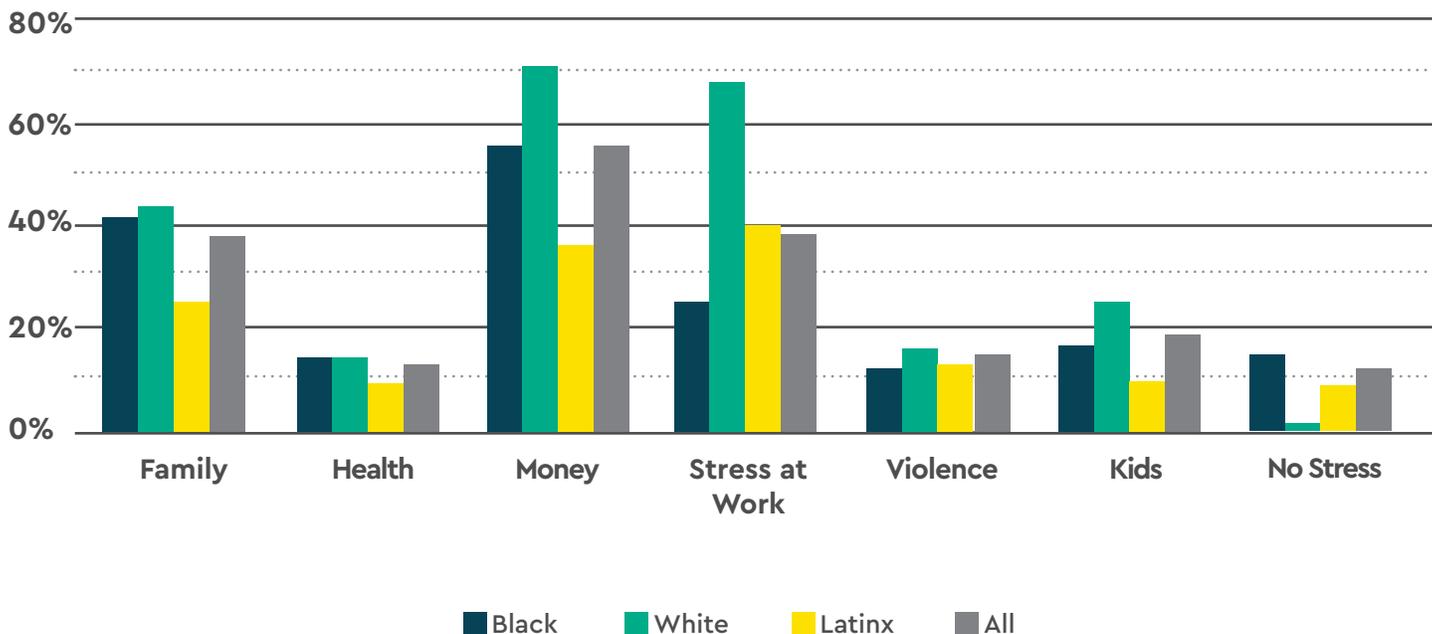
The majority of respondents from all races and ethnicities stated that they frequently receive the emotional help and support from friends and/or family when they need it; 80% of white and Latinx respondents state they receive this support "very often" or "always", as did 75% of Black respondents. However, twelve percent of white and Latinx respondents and 10% of Black respondents said they "never" or "rarely" receive the emotional help and support needed from their friends and/or family.



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WHAT ARE THE TOP THREE THINGS THAT CAUSE YOU STRESS?



When asked to identify the three biggest stressors in their lives, participants across all races and ethnicities cited money, stress at work, and family, yet in different orders. Money was the leading stressor among white and Black respondents, with 71% of white and 56% of Black respondents choosing this option. For white respondents, money was followed closely by stress at work with 69% of white respondents citing this as a top stressor. Stress at work was the number one stressor for Latinx respondents at 40%, followed by money at 36%. Stress relating to family was highest among whites at 43%, followed quickly by Black respondents at 41% and Latinx respondents at 24%. Sixteen percent of Black respondents, eight percent of Latinx respondents, and two percent of white respondents reported having no stress.



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