



WISCONSIN CHRONICLES ON BLACK HEALTH DISPARITIES

****Special issue on Black Men's Health****

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Open Letter to Black Men

Dear Husband, Father, Brother, Uncle, Grandpa, Son:

We need you! We know that it may seem like the world is against you and seemingly have little power to change the plight of your future. But the truth is, you do have power! You have the power to take control of your health. Despite all the polite nudging, which you may consider to be nagging, that the women in your life may do to get you to be more healthy, your health really is not going to change until you decide within your own mind that you want to truly live healthier. Once you decide that you indeed are going to live a healthier life, you then must take steps to make sure you are around past the distressing statistics and live without you being held prisoner to bad health. Good health is one of the most valuable things that one can have. The absence of good health keeps you from enjoying life and living up to your potential.

The simple act of reading this newsletter is a good start to you taking control of your health, but it is only one step. Don't just let this information go wasted on deaf ears, apply the tips to your daily lives and seek to improve your health each and every day.

You seeking health information and going to the doctor does not make you less of a man, it does not mean that you are weak or have personally failed. In fact it makes you more of a man when you take charge of your life and seek medical care when you start experiencing health problems. No one can know your body like you, so it is up to you to pay attention to your body and seek care when anything out of the norm occurs. More importantly, it is imperative that you take preventative steps to insure that you do not fall victim to health problems. It is much easier to protect yourself from becoming ill than trying to get rid of an illness once you have it. Make learning the symptoms of different health conditions a priority so that you can easily know when something may be going on. You do not have to continue suffering in silence. Self-diagnoses and self-medicating is not the answer, getting qualified medical help as soon as possible will help you have a fighting chance.

Black man you alone have the power to start eating healthy, stop smoking, exercising on a regular basis, stop abusing drugs and alcohol, stop participating in high-risk sex behaviors, stop the violence, etc. You can no longer afford to live in a state of ignorance when it comes to health. You can no longer afford to keep saying that you are going to die of something, so what you do or don't do really doesn't matter. You can no longer feel that you are the invincible tough guy and nothing is going to happen to you. It is time for you to 'man up' and be the man that we truly know you to be.

The Black man is often referred to as the 'endangered species' based upon him dying quicker than any other group, this is a sad reality that has to change. Our homes, communities, churches, schools, and businesses need you. We don't need you just existing, but we need you thriving as well. Take charge of your destiny - so that you can start living longer and healthier lives.

With Love,

Your Wife, Mother, Sister, Aunt, Granny, Daughter

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The Grim Facts on Black Men's Health

- ◆ Life expectancy for African-American men is 7.1 years less than for white men, 7.5 years less than for African-American women and 12.7 years less than for white women.
- ◆ African-American men die of heart disease at a rate of 244.7 per 100,000 - more than 2.5 times the rate of white women.
- ◆ Cerebrovascular disease is twice as likely to kill African-American men, at a rate of 50.5 per 100,000, as it is to kill white men or women. And 221.1 per 100,000 African-American men die of cancer - more than twice the rate for white women.
- ◆ For HIV/AIDS, the differences are huge. African-American men die of complications from HIV/AIDS at a rate of 62.7 per 100,000, compared with 25.5 for Latino men, 19.1 for African-American women, 12.5 for white men, 5.9 for Latino women and 1.8 for white women.
- ◆ Poverty, income inequality, low educational status and unemployment are more likely to affect men of color.
- ◆ Residential segregation by race and income is a powerful cause of poor health, concentrating multiple economic and social problems and undermining the quality of housing and services.
- ◆ African-American and Latino men are less likely than white men to see a doctor, even when they are in poor health.
- ◆ For non-elderly men, 46 percent of Latinos and 28 percent of African-Americans lack health insurance. Men of color are less likely than white men to have job-based insurance, and only 6 percent to 8 percent of Latino and African-American men have Medicaid.
- ◆ Regardless of insurance status, men of color are less likely to receive timely preventive services, and more likely to suffer the consequences of delayed attention, such as limb amputations and radical cancer surgery. The Institute of Medicine has found significant racial and ethnic disparities within the health care system.

- Source: Center for the Advancement of Health, Facts of Life: Issue Briefings for Health Reports Vol. 8, No. 5 May 2003

Wisconsin/National Health Statistics for Men

Heart Disease Deaths

Black Men

- ◆ 316 deaths per 100,000 population

All Wisconsin

- ◆ 261 deaths per 100,000 population

Cancer Deaths

Black Men

- ◆ 342 deaths per 100,000 population

All Wisconsin

- ◆ 227 deaths per 100,000 population

Stroke Deaths

Black Men

- ◆ 70 deaths per 100,000 population

All Wisconsin

- ◆ 56 deaths per 100,000 population

Heart Disease Hospitalizations

Black Men

- ◆ 2,103 hospitalizations per 100,000 population

All Wisconsin

- ◆ 1,535 hospitalizations per 100,000 population

Cancer Hospitalizations

Black Men

- ◆ 621 hospitalizations per 100,000 population

All Wisconsin

- ◆ 444 hospitalizations per 100,000 population

Stroke Hospitalizations

Black Men

- ◆ 367 hospitalizations per 100,000 population

All Wisconsin

- ◆ 254 hospitalizations per 100,000 population

Guest Commentary

Jim Addison

Program Coordinator, HIV/AIDS Project - Black Health Coalition of Wisconsin

I can remember in February of 2000, when I was hired by the Black Health Coalition of WI, Inc. I came across a quote from Dr. Martin Luther King Jr. That quote was: "Of all the forms of injustice, injustice in health care is the most shocking and inhumane". I had grown up admiring Dr. King for his captivating oratory skills, his ability to mobilize the masses and his family man persona. For some reason, I did not expect a statement that emphasized the importance of good health to come from an individual who fought for our rights to be equal in this society. The information contained in this newsletter is enough to make me take a second look at this statement these eight years later. This edition has pointed out that the overall healthcare system is failing African American Men on many fronts. We should not add fuel to the fire by not taking care of ourselves. I must admit that as I have attempted to take my rightful place within the dream of Dr. King, I haven't done so well with my overall health. You know how it is, taking care of things at the church, taking care of things at the house, taking care things at the job, taking care of things in the community. Well, without good health none of those things will matter. I intend to have a complete physical in the next 30 days. I want to be able to report that I'm taking care of my weight, taking care of my blood pressure, and taking care of my stress. I appeal to all the African American males reading this to keep getting your education, keep developing your gifts, keep raising your families, keep reaching out to your community, but please, please make efforts take care of your health. We need you.

Wisconsin/National Statistics (continued from page 2)

Diabetes Deaths

Black Men

- ◆ 52 deaths per 100,000 population

All Wisconsin

- ◆ 27 deaths per 100,000 population

Diabetes Hospitalizations

Black Men

- ◆ 521 hospitalizations per 100,000 population

All Wisconsin

- ◆ 139 hospitalizations per 100,000 population

Unintentional Injury Deaths

Black Men

- ◆ 57 deaths per 100,000 population

All Wisconsin

- ◆ 53 deaths per 100,000 population

Unintentional Injury Hospitalizations

Black Men

- ◆ 1,012 hospitalizations per 100,000 population

All Wisconsin

- ◆ 823 hospitalizations per 100,000 population

Homicide

Black Men

- ◆ 46 deaths per 100,000 population

All Wisconsin

- ◆ 5 deaths per 100,000 population

HIV Infections

Black Men

- ◆ 46.9 reported cases per 100,000 population

White Men

- ◆ 5.3 reported cases per 100,000 population

-Based on the 2000 U.S. Census, the overwhelming majority (73%) of Wisconsin's Black population resided in Milwaukee.

National Death Rate for Men, 2004

Black Men

- ◆ 1281.7 deaths per 100,000 population

White Men

- ◆ 949.9 deaths per 100,000 population

No Usual Source of Care for Men Age 18 & Over, 2005

Black Men

- ◆ 21.2%

White Men

- ◆ 15.8%

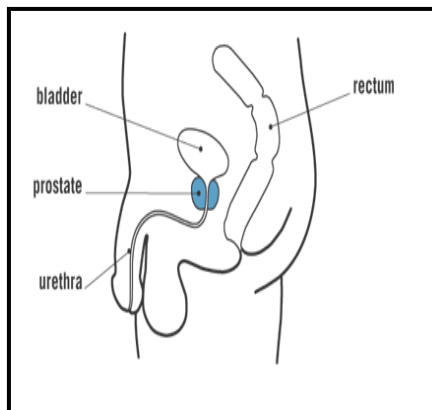
Sources: Wisconsin Department of Health and Family Services, Division of Public Health, Bureau of Health Information and Policy. **Wisconsin Minority Health Report, 2001-2005** (PPH 5716). January 2008

The Health Status of African American Men in the United States, Race, Ethnicity & Health Care Fact Sheet, The Henry J. Kaiser Family Foundation, April 2007

Prostate Cancer 101

What is the prostate?

The prostate is a walnut-sized gland that only men have. It is part of the reproductive system that makes the fluid that carries sperm. The prostate is located in front of the rectum and just below the bladder. The urethra (the tube that carries urine from the bladder to outside the body) runs through the center of the prostate. As men age, the prostate tends to increase the size. This can cause the urethra to narrow and decrease urine flow.



What is prostate cancer?

Prostate cancer is made up of cells that do not grow normally. The cells divide and create new cells that the body does not need, forming a mass of tissue called a tumor. These abnormal cells sometimes spread to other parts of the body, multiply, and cause death.

What causes prostate cancer?

As with many types of cancers, medical experts do not know what causes prostate cancer.

Can prostate cancer be prevented?

Medical experts do not know how to prevent prostate cancer. But they are studying many factors. They do know that not smoking, eating a healthy diet, staying physically active, and seeing your doctor regularly contribute to overall good health.

What are the symptoms of prostate cancer?

Many men with prostate cancer have no symptoms. If symptoms appear, they can include:

- ◆ Blood in the urine;
- ◆ The need urinate frequently, especially at night;
- ◆ Weak or interrupted urine flow;
- ◆ Pain or burning feeling while urinating;
- ◆ The inability to urinate;
- ◆ Constant pain in lower back, pelvis, or upper thighs.

If you have any of these symptoms, you should see your doctor as soon as possible. Keep in mind that these symptoms may also be caused by other problems common to older men that are not cancer, such as an infection or an enlarged prostate.

What does “screening” mean?

Screening means looking for signs of disease in people who have no symptoms. So screening for prostate cancer is looking for early-stage disease when treatment may be more effective. The main screening tools for prostate cancer are the digital rectal examination (DRE) and the prostate specific antigen (PSA) test. The DRE and the PSA test cannot tell if you have cancer; they can only suggest the need for further tests.

What is the DRE?

The DRE or digital (finger) rectal examination is a quick exam for checking the health of the prostate. For this test, the doctor inserts a gloved and lubricated finger into the rectum. This allows the doctor to feel the back portion of the prostate for size and any irregular or abnormally firm areas.

What is the PSA test?

PSA stands for “prostate specific antigen.” PSA is a substance produced only by cells from the prostate gland and released into the blood. The PSA test measures the PSA level in the blood. A small amount of blood is drawn from the arm. The doctor checks the blood to see if the PSA level is normal. The doctor may also use this test to check for any change in your PSA level compared to your last PSA test.

As a rule, the higher the PSA level in the blood, the more likely a prostate problem is present. But many factors can affect PSA levels. Some prostate glands produce more PSA than others. PSA levels tend to increase with age. In addition, PSA levels tend to be higher in African American men than in others. PSA levels can also be affected by:

- ◆ Certain medical test or procedures;
- ◆ An enlarged prostate; and/or
- ◆ A prostate infection.

Since many factors can affect PSA levels, your doctor is the best person to interpret your test result.

Are African American men at increased risk for prostate cancer?

Yes. Though all men are at risk, African American men have higher rates of getting and dying from prostate cancer than men of other racial or ethnic groups in the United States.

What is the lifetime risk of prostate cancer in African American men?

An African American man in his lifetime has about a:

- ◆ 19 percent chance (1 in 5) of being diagnosed with prostate cancer.
- ◆ 5 percent chance (1 in 20) of dying from prostate cancer.

Source: *Prostate Cancer Screening: A Decision Guide for African Americans*, Centers for Disease Control & Prevention October 2003

Recommended Health Screenings for Men

Screening tests can find diseases early when they are easier to treat. Health experts from the U.S. Preventive Services Task Force have made recommendations, based on scientific evidence, about testing for the conditions below. Talk to your doctor about which ones apply to you and when and how often you should be tested.

◆ Obesity:

Have your body mass index (BMI) calculated to screen for obesity. (BMI is a measure of body fat based on height and weight). You can also find your own BMI with the BMI calculator from the National Heart, Lung, and Blood Institute at <http://www.nhlbisupport.com/bmi/>.

◆ High Cholesterol:

Have your cholesterol checked regularly starting at age 35. If you are younger than 35, talk to your doctor about whether to have your cholesterol checked if:

- You have diabetes.
- You have high blood pressure.
- Heart disease runs in your family.
- You smoke.

◆ High Blood Pressure:

Have your blood pressure checked at

least every 2 years. High blood pressure is 140/90 or higher.

◆ Colorectal Cancer:

Have a test for colorectal cancer starting at age 50. Your doctor can help you decide which test is right for you. If you have a family history of colorectal cancer, you may need to be tested earlier.

◆ Diabetes:

Have a test for diabetes if you have high blood pressure or high cholesterol.

◆ Depression:

Your emotional health is as important as your physical health. If you have felt "down," sad, or hopeless over the last two weeks or have felt little interest or pleasure in doing things, you may be depressed. Talk to your doctor about being screened for depression.

◆ Sexually Transmitted Infections:

Talk to your doctor to see whether you should be tested for gonorrhea, syphilis, chlamydia, or other sexually transmitted infections.

◆ HIV:

Talk to your doctor about HIV screening if you:

- Have had sex with men since 1975
- Have had unprotected sex with multiple partners
- Have used or now use injection drugs
- Exchange sex for money or drugs or have sex partners who do.
- Have past or present sex partners who are HIV-infected, are bisexual, or use injection drugs.
- Are being treated for sexually transmitted diseases.
- Had a blood transfusion between 1978 and 1985.

◆ Abdominal Aortic Aneurysm:

If you are between the ages of 65 and 75 and have ever smoked (100 or more cigarettes during your lifetime), you need to be screened once for abdominal aortic aneurysm, which is an abnormally large or swollen blood vessel in your abdomen.

Source: *Men: Stay Healthy at Any Age - Your Checklist for Health*. AHRQ Publication No. 07-IP006-A, February 2007. Agency for Healthcare Research and Quality, Rockville, MD. <http://www.ahrq.gov/ppip/healthymen.htm>

Impact of Incarceration on Men's Health

The impact of incarceration has rippling effects all throughout society, especially for African American men. The numbers that are incarcerated are startling, a recent study by the Pew Center on the States reported that one in nine Black men between the ages of 20 and 34 is behind bars. This is a huge number out of the total Black population. Sadly, once one enters the criminal justice systems, that reality follows them the rest of their lives.

The racial disparities in the incarceration population is a major influence to the health disparities that Black men endure. Based on having a criminal

record, many Black men are not able to secure employment that provides livable wages and health coverage. As a result, they go with medical needs that are unmet. If one is fortunate enough to be healthy when they enter prison, oftentimes they exit the prison doors with deteriorating health conditions. The community feels the impact with the increased rates of many infectious and chronic diseases ranging from HIV/AIDS to hepatitis to tuberculosis as well as mental health problems.

Although a man may have Medicaid prior to enter prison, they become ineligible once they are incarcerated. Thus, upon their release, they have a lag in care as they

seek to reapply for Medicaid or they just may not get any care.

Sources: *High Incarceration Rates of Black Men Impact Minority Communities and Health Problems Mount*, Community Voices: Healthcare for the Underserved - An Initiative of the National Center for Primary Care at Morehouse School of Medicine (3/4/08 online resource)

More Than One in 100 Adults is Behind Bars, Making U.S. the World's Top Incarcerator, Associated Press, February 29, 2008

Signs and Symptoms Men Should Be Aware Of

Heart Disease

- ◆ Rapid pounding of your heart
- ◆ Swelling in your legs
- ◆ Shortness of breath
- ◆ Pain located generally in the center of your chest
- ◆ Fainting

High Blood Pressure

- ◆ Headaches
- ◆ Dizziness
- ◆ Weakness
- ◆ Temporary blindness
- ◆ Chest pains
- ◆ Nose bleeds

Stroke

- ◆ Sudden blurred or decreased vision in one or both eyes
- ◆ Numbness, weakness, and paralysis of the face, upper or lower limbs, or one or both sides of the body
- ◆ Difficulty speaking or understanding
- ◆ Dizziness, loss of balance, or unexplained falling
- ◆ Difficulty swallowing
- ◆ Headache (usually severe and of abrupt onset) or any unexplained change in the pattern of headaches

Type 2 Diabetes

- ◆ Fatigue
- ◆ Frequent urination, especially at night
- ◆ Unusual thirst
- ◆ Sudden weight loss
- ◆ Blurred vision or any vision changes
- ◆ Slow healing of skin, gums, and urinary tract infections
- ◆ Tingling or numbness in feet, legs, or fingers
- ◆ Frequent skin infections
- ◆ Irritability

Cancer

- ◆ Change in bowel or bladder habits
- ◆ A sore throat that doesn't heal
- ◆ Unusual bleeding or discharge from the genital, urinary, or digestive tract
- ◆ Thickening or a lump in a breast or elsewhere
- ◆ Indigestion or difficulty swallowing
- ◆ Obvious change in a wart or mole
- ◆ Nagging cough or hoarseness

Please see a doctor as soon as possible if you experience any of these symptoms!

-Source: The Black Man's guide to Good Health, James W. Reed, M.D., F.A.C.P., & Neil B. Shulman, M.D. & Charlene Shucker 2001

High Blood Pressure: The Black Man and Woman's Guide to Living with Hypertension James W. Reed, M.D., F.A.C.P., F.A.C.E. and Hilton M. Hudson, II., M.D., F.A.C.S. 2002

"Excluding pregnancy- related office visits, women make twice as many preventative care visits as men."

-Utilization of Ambulatory Medical Care by Women:
United States, 1997 - 98, CDC

Black men have the lowest life expectancy and highest death rate compared to men and women in other racial/ethnic groups in the United States.

Healthy Living Tips for Men

Eat Healthy

“An apple a day keeps the doctor away.” There’s more truth to this saying than we once thought. What you eat and drink and what you don’t eat and drink can definitely make a difference to your health. Eating five or more servings of fruits and vegetables a day and less saturated fat can help improve your health and may reduce the risk of cancer and other chronic diseases. Have a balanced diet, and watch how much you eat.

Maintain a Healthy Weight

Obesity is at an all time high in the United States, and the epidemic may be getting worse. Those who are overweight or obese have increased risks for diseases and conditions such as diabetes, high blood pressure, heart disease, and stroke. Eat better, get regular exercise, and see your health care provider about your health concerns to make sure you are on the right track to staying healthy.

Get Moving

More than 50 percent of American men and women do not get enough physical activity to provide health benefits. For adults, thirty minutes of moderate physical activity on most, preferably all, days of the week is recommended. It doesn’t take a lot of time or money, but it does take commitment. Start slowly, work up to a satisfactory level, and don’t overdo it. You can develop one routine, or you can do something different every day. Find fun ways to stay in shape and feel good, such as dancing, gardening, cutting the grass, swimming,

walking, or jogging.

Be Smoke-Free

Health concerns associated with smoking include cancer and lung disease. Smoking triples the risk of dying from heart disease among those who are middle-aged. Second-hand smoke - smoke that you inhale when others smoke - also affects your health. If you smoke, quit today! Help lines, counseling, medications, and other forms of support are available to help you quit.

Get Routine Exams and Screenings

Sometimes they’re once a year. Other times they’re more or less often. Based on your age, health history, lifestyle, and other important issues, you and your health care provider can determine how often you need to be examined and screened for certain diseases and conditions. These include high blood pressure, high cholesterol, diabetes, sexually transmitted diseases, and cancers of the skin, prostate, and colon. When problems are found early, your chances for treatment and cure are better. Routine exams and screenings can help save lives.

Get Appropriate Vaccinations

They’re not just for kids. Adults need them too. Some vaccinations are for everyone. Others are recommended if you work in certain jobs, have certain lifestyles, travel to certain places, or have certain health conditions. Protect yourself from illness and disease by keeping up with your vaccinations.

Manage Stress

Perhaps now more than ever before, job stress poses a threat to the health of workers, and in turn, to the health of organizations. Balancing obligations to your employer and your family can be challenging. What’s your stress level today? Protect your mental and physical health by engaging in

activities that help you manage your stress at work and at home.

Know Yourself and Your Risks

Your parents and ancestors help determine some of who you are. Your habits, work and home environments, and lifestyle also help to define your health and your risks. You may be at an increased risk for certain diseases or conditions because of what you do, where you work, and how you play. Being healthy means doing some homework, knowing yourself, and knowing what’s best for you... because you are one of a kind.

Be Safe-Protect Yourself

What comes to mind when you think about safety and protecting yourself? Is it fastening seat belts, applying sunscreen, wearing helmets, or having smoke detectors? It’s all of these and more. It’s everything from washing your hands to watching your relationships. Did you know that men at work die most frequently from motor vehicle incidents, machine-related injuries, homicides, and falls? Take steps to protect yourself and others wherever you are.

Be Good to Yourself

Health is not merely the absence of disease; it’s a lifestyle. Whether it’s getting enough sleep, relaxing after a stressful day, or enjoying a hobby, it’s important to take time to be good to yourself. Take steps to balance work, home, and play. Pay attention to your health, and make healthy living a part of your life.

Source: Centers for Disease Control & Prevention, Tips for a Healthy Life for Men

HIV & Circumcision Connection for Black Men

A recent study dispels a common misconception in the men who have sex with men (MSM) community in reference to circumcision being a protection against the spread of HIV. The findings showed that circumcised Black MSM were as likely to have become HIV-positive as those who were not uncircumcised. Thus, male circumcision does not provide any level of protection against HIV. The research also noted that there was no protection for a subset of Black MSM who recently had sex with female partners or among MSM who reported recent unprotected sex with a male partner in which they were exclusively the insertive male partner. The study involved 1,079 Black and 957 Latino bisexual and homosexual men from New York City, Los Angeles, and Philadelphia. The study participants completed a computer survey and were tested for the AIDS virus.

These findings bring much needed attention to a lifestyle in the Black community that many prefer to deny or totally ignore. The health ramifications are huge when you look at the high number of Black men who get infected with HIV, pass the infection on to their partners - including Black women, and the huge numbers of Black men and women who are dying of AIDS.

Another recent study points out that Black MSM are twice as likely as white MSM to be living with HIV. According to Kevin Fenton, director of HIV prevention at the Centers for Disease Control and Prevention, "Men who have sex with men account for almost half of all people estimated to be living with HIV in the United States, and African-Americans are the most heavily impacted." Although this is not a lot of clear evidence why this disparity exists, a possible causal factor could include Black men being more likely than whites to be living with another sexually transmitted infection (which makes them more likely to contract or transmit HIV). Another suspected cause could be due to Blacks being less likely to be taking antiretroviral drugs. This is important because antiretroviral drugs can lower the concentration of HIV in the bloodstream and the chance of transmitting the virus to others.

Overall, 46 percent of Black gays and bisexuals were infected with HIV, twice the rate among whites.

Sources: *Circumcision does not affect HIV in U.S. men: Study*, Reuters, December 3, 2007

Gay blacks at highest AIDS risk: Researchers seek to explain racial disparity among gay, bisexual men, Baltimore Sun, December 4, 2007

HPV is Not Just a Concern for Women

In recent years, there has been a lot of attention on the Human papillomavirus (HPV) in the news and women's magazines. Several forms of the virus are the leading causes of cervical cancer in women. Considering the high morbidity and mortality rates of cervical cancer, it is understandable why there was so much attention and excitement regarding the recent discovery of a vaccine to protect women from getting HPV. HPV is a sexually transmitted disease that not only women should be concerned with, a recent study asserts. Specifically, HPV is said to be a leading cause of oral cancer in men. A report by John Hopkins University reported that about 5,600 yearly incidents of upper throat cancer are due to HPV. This finding is being attributed to the high rates of oral sex. Prior reports show the increased numbers of cancers that occur in the tonsils, lower tongue and upper throat. Although there is now a HPV vaccine, it is only given to girls and young men.

The increased numbers of oral cancers in men was seen to steadily increase between 1973 to 2004, so much so that the rates have reached the levels of cancers related to tobacco and alcohol usage. Fortunately, HPV-related oral cancers are easier to treat in comparison to other cancers that men more commonly get, like prostate and lung cancer.

In addition to oral sex being a suspected cause of oral cancers, researchers are also considering unwashed hands spreading the virus to the mouth as well.

HPV can also cause genital warts, penis and anal cancer; yet little attention is given to these dangers. Merck, the makers of the HPV vaccine for women, plans to seek U.S. Food and Drug Administration approval for the vaccine in men later this year. A government decision is not expected until sometime in 2009.

Source: *HPV Causing More Oral Cancer in Men*, Associated Press, February 4, 2008

Black Men Get ‘the Blues’ Too

Depression, and other mental health disorders, is another one of those issues that is not talked about much in the Black community, especially for men. From the time they are barely out of diapers and starting to walk, boys are told not to cry and to stop acting like a girl whenever they show any signs of emotion. The goal is to toughen boys up, but in reality this process begins to cripple boys emotionally. Once into manhood, the years of stifling their feelings lead them to continue the bravado of being tough and not letting life get to them. So despite having to deal with racism, poverty, joblessness, poor health, incarceration, and so many other ills, few Black men admit and get treated for depression. Yet, so many of them suffer from it. Sadly instead of getting the help that they need, Black men tend to self-medicate with drugs and alcohol and/or get involved with criminal activity.

Hopefully the following facts will help to bring about more awareness on the importance of mental health concerns for Black men:

- ◆ 7% of African American men will develop depression during their lifetime - this is likely to be underestimated due to lack of screening and treatment services.
- ◆ African American men have death rates that are at least twice as high as those for women for suicide, cirrhosis of the liver, and homicide.
- ◆ From 1980 to 1995, the suicide rate for African American male youth (ages 15-19) increased by 146%. Among African American males aged 15-19 years, firearms were used in 72% of suicides, while strangulation was used in 20% of suicides.
- ◆ For African American men, especially in urban areas, the abuse of alcohol and its consequences appear more grave when compared to statistics for white men, white women or African American women.
- ◆ African American men with higher earnings and higher education are less at risk for depression. Black males who report no earnings have increased susceptibility for depression.
- ◆ Poverty, racism and the impact of past trauma (particularly violence) are the primary contributing factors to the mental health disorders of young African American men.
- ◆ Young blacks are more likely to commit suicide after an altercation or perceived victimization by institutional authorities such as the police, criminal justice system, school officials, landlord or welfare department.
- ◆ Among African Americans, especially males, the possibility of “being someone”, making a significant contribution to society, and attaining basic respect and self esteem is seldom a reality, predisposing them to suicidal and homicidal acts of destruction.

Good mental health should not be seen as a taboo subject because the negative consequences of untreated conditions are too great. Men must seek out care that is affordable and respectful.

Source: *Souls of Black Men: African American Men Discuss Mental Health*, Black Mental Health Alliance - Community Voices, July 2003

“It is wrong to be unjust, to be dishonest, to hate. It is wrong now and was wrong 2,000 years ago.”

Dr. Martin Luther King Jr.

Norfolk Journal and Guide

March 9, 1957

Findings from Report on the Health of African American Men

The following text is the summary of the major findings and conclusions taken directly from Arline T. Geronimus' paper titled; *"The Health of Urban African American Men: Excess Mortality and Causes of Death."*

Overall Health and Mortality

- ◆ Young adult and middle-aged African American men living in impoverished urban areas experience about 3 to 4 times the white national death rate or as many as 1,296 more deaths per 100,000 population each year than white men nationwide.
- ◆ African American men in some poor urban areas face lower probabilities of survival to age 45 than white men nationwide face to age 65. In these urban areas two-thirds of 15 year old males cannot expect to survive to age 65. This represents less than half the probability of survival to age 65 of white males nationwide.
- ◆ African American men in poor urban locales who do survive into middle age are as much as three times more likely to suffer a health-induced disability than white men nationwide. Residents of poor urban populations experience about the same prevalence of disability at age 20 as do 50 year old whites nationwide. Combining their probabilities of early death and disability, at least half of 15 year old boys in some poor urban locales can expect to die or become disabled by age 50.
- ◆ Black baby boys in major metropolitan areas face 2.1 to 3.5 times the risk of dying in infancy of white baby boys. In poor African American communities, the health of young women deteriorates sufficiently rapidly that postponing childbearing beyond the teen ages increases their infants' risk of having a low birth weight or dying.

Causes of Excess Mortality

- ◆ Deaths to circulatory diseases alone constitute more than one-third of all deaths to young adult through middle-aged African American men in poor urban areas and about one fourth of the excess deaths they experience each year relative to white men of these ages nationwide.
- ◆ For 15 - 19 year old African American males in major metropolitan areas homicide is the leading cause of death. Among males of these ages, the number of excess deaths due to homicide doubled in New York City and tripled in the Detroit and Chicago metropolitan areas between 1980 and 1990.
- ◆ For older young adult and middle-aged urban African American men homicide contributes between 10 - 20% of all deaths, but homicide accounts for virtually none of the growth in their excess death rates between 1980 and 1990. Growth in excess death rates for men in this age group was accounted for by increases in deaths due to circulatory disease, cancer, and in some locales, AIDS. For example, in Harlem, between 1980 and 1990, deaths due to circulatory diseases or to cancer each doubled for men, while AIDS deaths added an additional 300 excess deaths per 100,000 men per year.

Conclusions and Implications

African American men in poor urban locals are uniquely disadvantaged. No identified group of young through middle-aged adults suffers as staggering or growing mortality disadvantages - - not black men in impoverished rural areas, nor black women in poor urban areas, nor with men in poor urban areas, nor black men in higher-income urban areas. Even if all deaths to homicide or AIDS were eliminated, African American men in poor urban areas would suffer significantly higher death rates than members of any of these comparison groups. Chronic disease deaths in young adulthood and middle age are critical contributors to these disparities.

Black Men at More Risk for Kidney Complications

The controlling of one’s blood pressure is becoming even more important, especially for Black men. Elevated blood pressure readings can put Black men at increased risk for kidney disease complications. Properly managing blood pressure can help protect kidney disease patients from entering into the later stages of the disease. Once into the kidney failure stage, individuals must receive a kidney transplant or regular dialysis to survive.

Research has shown that Blacks with kidney disease progress five time faster to kidney failure than whites with kidney disease. Black men are least likely to have their blood pressure under control, which puts them at greater risks than other groups. Controlling one’s blood pressure can help to slow down the progression of kidney disease. Slowing down the disease becomes even more important for Black men because of the low number of Black donors on the organ donor registry.

The kidney is a vital organ. When functioning properly, it removes

waste from your blood. The waste then leaves your body in your urine.

A healthy blood pressure to maintain is 130/80 (<130 mm Hg systolic and/or <80 mm Hg diastolic). In addition to high blood pressure being a cause of kidney disease, diabetes and heart disease are leading factors as well. Most people who have kidney disease are now aware they have it. Symptoms to pay attention to include; feeling tired, feeling weak, loss of appetite, not sleeping, not thinking clearly and swelling of the feet and ankles.

Sources: *Black Men Most at Risk for Kidney Disease Complications: Black women also less likely to have blood pressure under control, study finds.*, U.S. News & World Report, February 4, 2008

Race and Sex Differences in Hypertension Control in CKD: Results From the Kidney Early Evaluation Program (KEEP), American Journal of Kidney Diseases, Vol. 51, Issue 2 February 2008



Cancer Rates Persist for Black Men

The American Cancer Society recently released it’s annual report that gives cancer facts and figures on the national and state-by-state level. The findings detailed that there continues to be a wide disparity between the cancer death rates of Black men versus white men.

their Caucasian counterparts. The study found this to be a sad reality that was just as bad in 2002 as in 1992, despite efforts to address the disparities.

“I think individual racism likely accounts for a small amount of (the problem), but not a large amount. What I would refer to as institutional or societal racism accounts for a much larger component of it,” stated Dr. Otis Brawley, chief medical officer of the American Cancer Society.

National Cancer Death Rates by Level of Education, 2001

	Black Men	White Men
All sites		
<12 years of education	214.4	163.8
>12 years of education	90.1	73.0
Lung		
<12 years of education	73.1	61.0
>12 years of education	25.8	18.1
Colorectal		
<12 years of education	20.6	14.2
>12 years of education	11.3	7.9
Prostate		
<12 years of education	10.5	3.3
>12 years of education	4.8	2.2

The widest disparities were seen in lung, colon, and rectal cancers. Among patients with early stage lung cancer, Blacks were 19% less likely than whites to get surgical removal of the tumor. Blacks with rectal cancer were 27 percent less likely to get additional chemotherapy to get rid of any remaining cancer cells after surgical removal of a tumor. Any Blacks with colon cancer were 24% less likely to get such chemotherapy. And Black men diagnosed with prostate cancer were 11% less likely to get surgical or radiation treatment.

In addition to the noted racism as a cause for this continued disparity, other possible factors of influence include Blacks having less access to quality care due to socioeconomic and other reasons, some Blacks being more likely to have other chronic medical conditions like diabetes that could complicate cancer therapy, and Blacks perhaps being less trusting of the medical establishment.

*Rates are for individuals aged 25-64 at death, per 100,000, and age-adjusted to the 2000 US standard population.

The increased cancer death rates of Black men can be seen as a result of them not receiving quality cancer treatment as evidenced in a report published in American Cancer Society’s *Cancer journal* in February. According to the report, African Americans continue to get inferior cancer treatment compared to

Sources: American Cancer Society. *Cancer Facts & Figures 2008*. Atlanta: American Cancer Society: 2008.

Racial disparities persist in U.S. cancer treatment, Reuters, January 7, 2008.



WISCONSIN CHRONICLES ON BLACK HEALTH DISPARITIES

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Contributing Factors to Poor State of Black Men's Health

- ◆ Lack of affordable health services
- ◆ Poor health education
- ◆ Cultural and linguistic barriers
- ◆ Poverty
- ◆ Jobs that don't provide health insurance
- ◆ Insufficient medical and social services that cater specifically to the needs of Black men

-Be Healthy September 2006

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"Of all of the forms of injustices, injustices in health care is the most shocking and inhumane."

-Dr. Martin Luther King Jr.

Men Start Ahead, But Quickly Lose Their Status

- ◆ 115 males are conceived for every 100 females
- ◆ The male fetus is at greater risk of miscarriage and stillbirth
- ◆ Male births outnumber female births (105 to 100), but boys have a higher death rate if born premature: 22 percent compared with 15 percent for girls
- ◆ More newborn males die than females, 5 to 4
- ◆ Teenage boys die at 2x the rate of girls
- ◆ Men are 4 times as likely to commit suicide
- ◆ Men have a higher death rate from pneumonia and influenza than women
- ◆ By age 36, women outnumber men
- ◆ Men account for 92% of workplace deaths
- ◆ American men typically die almost six years before women do
- ◆ By age 100, women outnumber men 8 to 1

Source: *The Weaker Sex*, New York Times Magazine, March 16, 2003