

HEALTH LEGISLATIVE ISSUES

The following pieces of legislation regarding health and minority populations may be relevant to readers of *Ethnicity & Disease*. Information on these bills was current when this issue went to press. We encourage readers to further investigate legislation of interest to your health discipline.

HR 161: HEALTHY PEOPLE, HEALTHY CHOICES ACT OF 2005

In the United States, an estimated 108 million or 61% of adults are overweight or obese. High rates of obesity are associated with a greater incidence of diseases including heart disease, diabetes, and various forms of cancers including breast, uterine, and colon cancer among others. A lack of access to culturally sensitive medical care and guidelines for healthy eating and exercise habits contributes to poor health outcomes for minority citizens. Among members of ethnic minority populations, rates of obesity and disease are increased markedly.

According to the 2001 Behavioral Risk Factor Surveillance System 34.7% of African American adults reported no leisure-time physical activity. Among African American women, 28.4% are inactive, meaning they engage in <10 minutes per week of moderate physical activity, as well as 20.8% of African American men. Rates of physical activity are low for both African American men and women, with 40.3% of men and 31.4% of women participating in a regular fitness routine. Among Latino or Hispanic American adults, 39.8% are not

physically active, compared to only 22.5% of non-Hispanic White adults.

This act will authorize the director of the Centers for Disease Control and Prevention to conduct minority health programs. The director shall conduct public outreach campaigns to increase the awareness of African Americans and other minority populations, particularly those who are disproportionately impacted by higher incidences of obesity and related diseases, about the following: 1) nutrition and fitness; 2) access to, and the affordability of, healthy foods

and dietary supplements; 3) the need for health promotion to African Americans and other minority groups; 4) how to prepare inexpensive, healthy meals; and 5) how to incorporate dietary supplements and physical activity into daily life.

Sponsor: Rep. Juanita Millender-McDonald (D-Calif)
Introduced 1/4/2005

Status: Referred to the Subcommittee on Health

HR 159: MINORITY POPULATIONS DIABETES PREVENTION AND CONTROL ACT OF 2005

Minority populations, including African Americans, Hispanics, Native Americans, and Asians, have the highest incidence of diabetes and the highest rates of complications of the disease. These groups are rapidly growing segments of the population and specific programs of research, education, and treatment must be carried out to address its ravaging effects on minority populations. The Centers for Disease Control and Prevention has had great success

with comprehensive, state-based diabetes initiatives. An example is support for a program carried out in the state of New York, where in only two years diabetes-related hospitalization rates decreased by 35% and diabetes-related amputations of extremities decreased by 39%. Because of funding constraints, only 16 states have received support for such programs.

This bill will provide, with respect to diabetes in minority populations, for an increase in

the extent of activities carried out by the Centers for Disease Control and Prevention and the National Institutes of Health. The Secretary of Health and Human Services, acting through the Centers for Disease Control and Prevention, shall increase, relative to fiscal year 2004, the extent of activities carried out regarding diabetes in minorities, including grants for state-based initiatives. Activities shall include prevention research; cooperation with states to deter-

mine the national incidence and prevalence in various minority populations and the reasons therefore; and treatment projects.

Sponsor: Rep. Juanita Millender-McDonald (D-Calif)
Introduced 1/4/2005

Status: Referred to the Subcommittee on Health

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HR 427: ENVIRONMENTAL JUSTICE ACT OF 2005

The purposes of this act are to focus federal agency attention on the environmental and human health conditions in minority, low-income, and Native American communities. This act will ensure that all federal agencies develop practices that promote environmental justice

and increase cooperation and coordination among federal agencies as they seek to achieve environmental justice. This act will provide minority, low-income, and Native American communities greater access to public information and opportunity for participation in

decisionmaking affecting human health and the environment. This act is designed to mitigate the inequitable distribution of the burdens and benefits of federal programs that have significant effects on human health and the environment.

Sponsor: Rep. Mark Udall,
(D-Colo)

Introduced 1/26/2005

Status: Referred to the Subcommittee on Environment and Hazardous Materials