

ARAB AMERICAN HEALTH SURVEY

GENESEE COUNTY, MICHIGAN
WINTER, 2003

Conducted by
the Genesee County Health Department,
with support from the
American Arab Heritage Council

A broader definition of health:

“Health is a state of well-being and the capability to function in the face of changing circumstances. Health is, therefore, a positive concept emphasizing social and personal resources as well as physical capabilities. Improving health is a shared responsibility of health care providers, public health officials, and a variety of other actors in the community who can contribute to the well-being of individuals and populations.”

Source: Institute of Medicine, 1997



Executive Summary

During the winter of 2003, a health survey was conducted by the Genesee County Health Department with support from the American Arab Heritage Council to assess the health practices, perceived health status, and health knowledge of Arab Americans in Genesee County. This survey is an important part of the Genesee County Health Department's mission to assess health processes and health outcomes in the County as little has been known about the health status of Genesee County Arab Americans other than that the population is increasing.

The survey was collaboratively designed using existing survey questions from various health surveys. Draft documents were then shared with leaders from the American Arab Heritage Council; and the survey was translated into Arabic as an option for non-English speakers.

This report is a summary of the results of the 213 surveys returned. According to the 2000 U.S. Census report on ancestry, the estimated population of Arab Americans in Genesee County is 3,142 or 0.7% of the county population. This estimate may be an undercount as reporting is voluntary, persons who are non-English speaking or recent immigrants may not have completed the census, and it is unknown how many new immigrants have arrived in Genesee County since the Census questionnaire was distributed.

Surveys of this nature are valuable in that they provide a basis for further exploration. However, because the sampling strategy was one of convenience, rather than random sampling, because completion of the survey was voluntary, and because surveys were not distributed to all Arab Americans in the County, the survey findings cannot be considered representative of all Arab Americans in Genesee County. This survey did not reveal the denominator, or how many Arab Americans live in Genesee County, nor did it provide us with a mean, or average demographic for the County's Arab American population.

Several key areas were revealed through the survey that suggest the need for further investigation and possibly community-specific education and intervention. These include: health insurance status, access to health care, prenatal care, high blood pressure, high cholesterol, lack of physical activity, home safety, use of flu shots, resources to quit smoking, cancer screening, and overweight and obesity.



Background-Genesee County Health Department

Established in 1929 to protect and promote the public's health, the Genesee County Health Department (GCHD) assesses health processes and health outcomes for Genesee County, recommends policies to its governing board and others to improve the public's health, and performs its assurance role through its own internal resources as well as through its collaboration with other individuals and organizations. In addition, over 40 service programs are directly administered in the areas of clinical and community health, substance abuse treatment and prevention, and environmental health by nearly 200 staff members.

Recently, the Genesee County Board of Commissioners approved a comprehensive strategic plan for the Health Department for the fiscal years 2003-2007. This plan is a reflection and analysis of a four part assessment which included: 1200 mailed surveys to randomly selected Genesee County residents, 19 focus groups held throughout the County, survey of GCHD staff and Board of Health and Board of Commissioners, a local public health system assessment, discussions regarding "forces of change" that will positively or negatively impact GCHD work, and a comprehensive gathering of existing local data - morbidity, mortality, health care access, and socioeconomic measures. As stated in the plan, the mission of the Genesee County Health Department is "to improve the quality of life in Genesee County by preventing disease, promoting health and protecting the environment through activities consistent with our assessment, policy development and assurance responsibilities." The overarching goal over the next five years is "to improve the health status of Genesee County residents, with particular attention to reducing racial health disparities, through key prevention and intervention strategies."

The GCHD will engage in activities that are related to the following 10 strategies:

- Alcohol and other drug abuse prevention and treatment
- Tobacco use prevention
- Obesity reduction
- Physical activity promotion
- Promotion of healthy nutrition
- Improved access to health care
- Reduction of exposure to harmful environmental agents
- Violence and abuse prevention
- Fostering of communication and community mobilization
- Enhanced surveillance

...designed to affect three long-term impact measures – reduction of infant mortality, chronic disease mortality, and communicable disease rates.



Background-Survey Methodology

This survey is a product of conversations with various members of the American Arab community in Genesee County. Little has been known of the health status of Genesee County American Arabs, and the population size has been increasing. As part of the Genesee County Health Department's mission to assess health processes and health outcomes in Genesee County, a survey was collaboratively designed. Existing survey questions were pulled from various health surveys, including a survey conducted with the American Arab population in Detroit and surrounding communities, the Prevention Research Center of Michigan's Genesee County Health Survey, and the State of Michigan's Behavior Risk Factor Surveillance Survey. Draft documents were shared with leaders of the American Arab community for feedback and revision. A plan for dissemination of the surveys and results was developed with consultation from the American Arab Heritage Council. The survey was translated into Arabic.

The survey was distributed through the following mechanisms:

- On-site at the American Arab Health Fair on November 24, 2002
- On-site at St. George Orthodox Church on December 15 and 22, 2002
- On-site at Flint Islamic Center on December 27, 2002 and January 10, 2003
- American Arab Heritage Council mailing on February 10, 2003
- Meeting at Jerusalem Inn on January 28, 2003
- Surveys and addressed, postage-paid envelopes were left at St. George Orthodox Church and the Flint Islamic Center for further distribution at future community gatherings.

This report is a summary of the 213 surveys returned. According to the 2000 U.S. Census report on ancestry, the estimated population of Arabs in Genesee County is 3,142 or 0.7% of the county population. This estimate may be an undercount as reporting is voluntary, persons who are non-English speaking or recent immigrants may have not completed the census, and it is unknown how many new immigrants have arrived in Genesee County since the census questionnaire was distributed.

There is no accurate way to estimate how well those who completed the survey represent the American Arab population in Genesee County as a whole. Therefore, the survey results are presented as they were received and the conclusions indicate future areas for exploration.

General Health

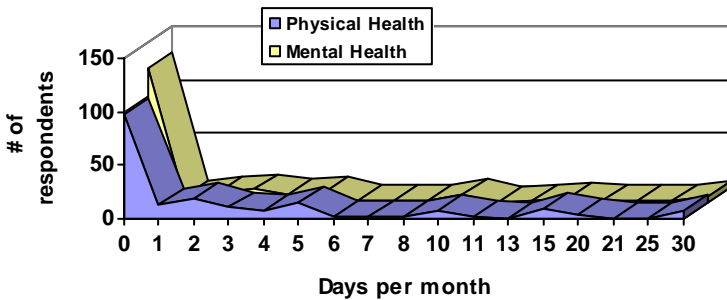
The following four “Health Related Quality of Life” questions have been used by the Centers for Disease Control and Prevention (CDC) since 1993 to assess people’s perception of their physical and mental health, to monitor changes over time, and identify health disparities across populations.

Perception of Health

Of the individuals responding, 54.5% indicated their health was excellent or very good. 31.5% percent reported their health being good, 10.4% as fair, and 1.4% reported their health as poor.

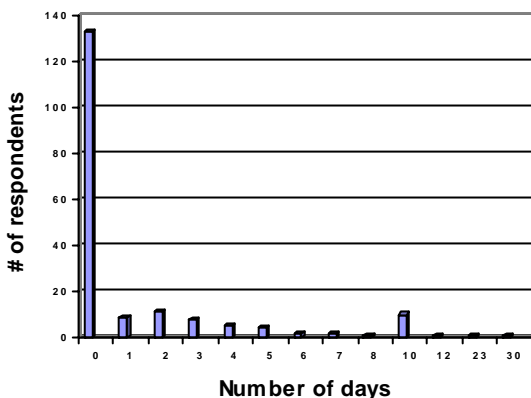


Number of Days in Last Month When Physical and Mental Health was Not Good



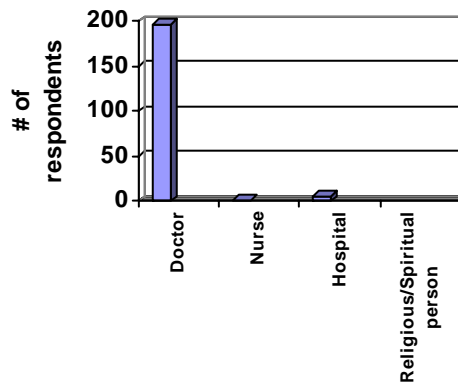
The majority of respondents indicated they had no days when their physical health (50.5%) and mental health (64.1%) was not good. Individuals reporting five days or less of physical and mental health not being good was 83.4% and 87.7%, respectively. A total of 8 respondents (4.2%) indicated all 30 days were not good physically. Some of the comments reported arthritis or other disease being the cause. Five respondents (2.6%) indicated all 30 days were not good mentally.

Number of Days in Last Month that Physical or Mental Health Limited Usual Activities



70.7% of respondents had no days where physical or mental health kept them from doing their usual activities. 90.4% reported 5 days or less of activity limitation.

Primary Source of Help When Sick

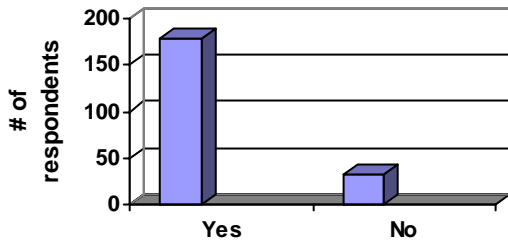


97.1% of respondents replied that people in their community go primarily to the doctor when they are sick, as opposed to other health care providers or religious/spiritual persons.

Access to Health Care

Health insurance status is an important factor in obtaining preventive health screenings (National Center for Health Statistics). Lack of health insurance has not only been linked to fewer health screenings, it has also been shown to result in delays in seeking treatment and poorer health status (MMWR, 1998). Nationally, 16.8% of persons under age 65 and 12.4% of children do not have health insurance coverage (NCHS, 2000). The respondents of this survey are similar to the national data for adults, but a higher percentage of the respondents' children are not covered by health insurance than the national figure.

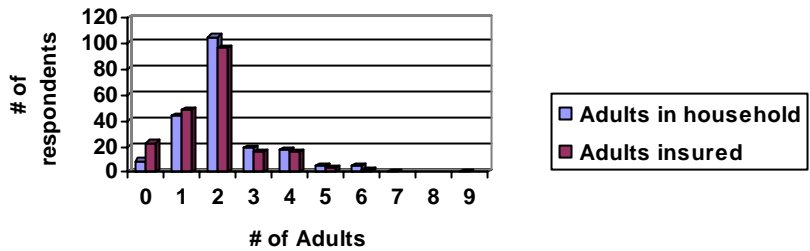
Health Insurance Status



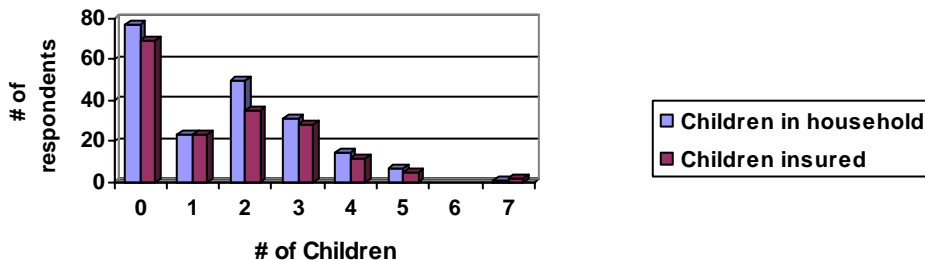
The majority (84.4%) of respondents reported having health care coverage of some kind. Thirty-two respondents (15.2%) do not have health insurance.

Most of the adults currently living in the household of the respondent are covered by health insurance. There were 198 self-identified adults and 182 covered by insurance, which is 92% coverage. The respondents who reported zero adults in household were excluded from this equation.

Number of Adults in Household and Number of Adults Covered by Health Insurance



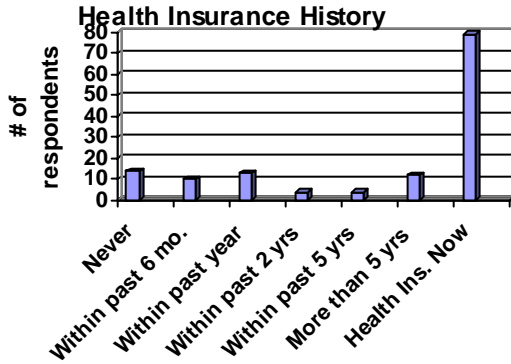
Number of Children in Household and Number of Children Covered by Health Insurance



Over 1/3 of respondents (37.7%) indicated that they had no children living in the household. The most common response was two children in household (24.5%). As with adults, most children are covered by health insurance. There were 127 children living in households of respondents, and 105 children covered by health insurance, for a coverage rate of 82.7%.

Access to Health Care (cont'd)

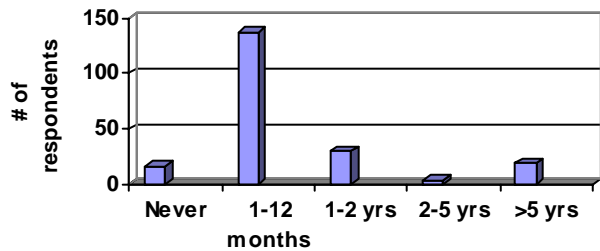
Lapses in health insurance results in less preventive health care, delays in seeking treatment, and poorer health status. In Michigan, in 2000, 6.6% of the adult population experienced a long-term lapse in health insurance (greater than one year). Although this survey data suggests that 21.1% of respondents had long-term lapses in



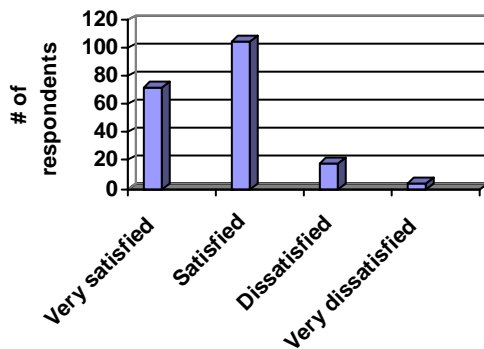
A third of the respondents (30.5%) did not answer this question. Of those who did, 56.0% reported having health insurance, 9.9% (14 people) have never had health insurance, 16.3% have had insurance within the past year, 5.6% within the past 2-5 years, and 5.6% have not had health insurance for more than five years.

66.5% of respondents have visited a doctor for a routine check-up within the last year, and 14.6% within the last 1-2 years. Sixteen people (7.5%) have never had a routine check-up, 10.8% of respondents have not had a routine check-up in greater than 2 years.

Last Time You Visited a Doctor for a Routine Check Up



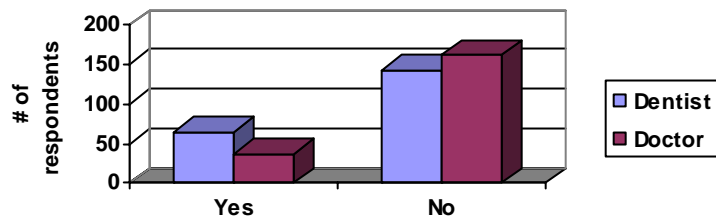
Satisfaction with Health Care Received



89.0% of respondents were very satisfied or satisfied with the health care that was received. Eighteen people (9.0%) were dissatisfied and 4 people (2.0%) were very dissatisfied with the health care received.

Most respondents did not have a time when they could not see a doctor (79.8%) or dentist (67.9%) due to cost. However, of those who reported cost being a barrier, more reported the barrier was related to dental care (65 people - 30.5%) versus medical care (37 people - 18.2%).

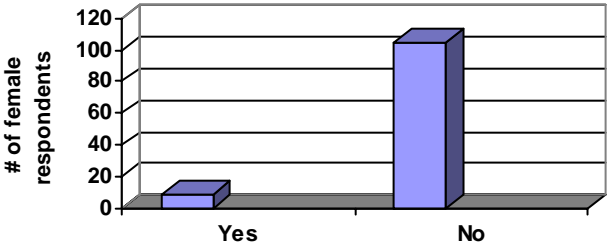
Was There a Time When You Needed to See a Doctor or Dentist But Couldn't Because of Cost?



Pregnancy and Prenatal Care

“Adequate prenatal care is believed to result in better pregnancy outcomes, including reduced maternal and infant morbidity and mortality and reduced risk for preterm delivery and for low birthweight (less than 2500 g {less than 5 lb 8 oz})” (MMWR, August 1996). According to the NCHS in 2000, 83.2% of women received prenatal care in the first trimester. Breastfeeding is beneficial to both babies and nursing mothers. Babies who are breastfed receive mother’s antibodies, have less illness, and are protected against some long-term health outcomes. Mother’s return to their normal weight faster and breastfeeding is protective against some types of can-

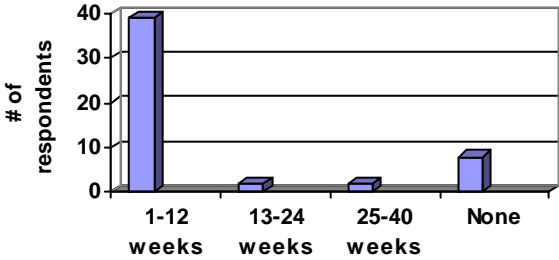
Pregnant or Had Baby in Last 12 Months



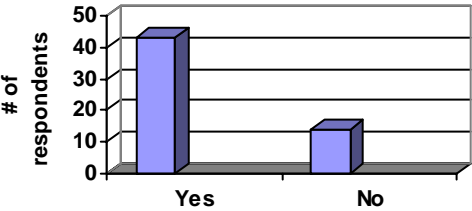
Fifty-four percent of respondents replied to this question. Of those, 90.5% were not pregnant nor had a baby in the last 12 months. 9 women (7.8%) reported being either pregnant or having a baby in the last 12 months.

Fifty-one women reported when they had their first prenatal care visit. Of these, 39 (76.5%) received prenatal care within the first trimester. Two women (4.0%) first received prenatal care in the second and the third trimester of pregnancy. Eight women (15.7%) received no prenatal care during pregnancy.

Time in Pregnancy Prenatal Care Began



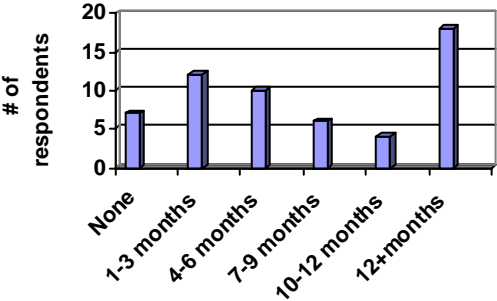
Did You or Are You Planning to Breastfeed Your Baby?



Sixty-one women responded to the question of currently or formerly breastfeeding a baby. Of those, 70.5% (43 women) responded yes, and 23.0% (14 women) are not currently, or have never, breastfed a baby.

Fifty-eight women responded to the number of months having breastfed their baby. Eighteen women breastfed their baby for one or more years. Twelve women breastfed for 1-3 months, 10 for 4-6 months, 6 for 7-9 months and 4 for 10-12 months. Seven women reported they had never breastfed their baby nor do they have plans to breastfeed.

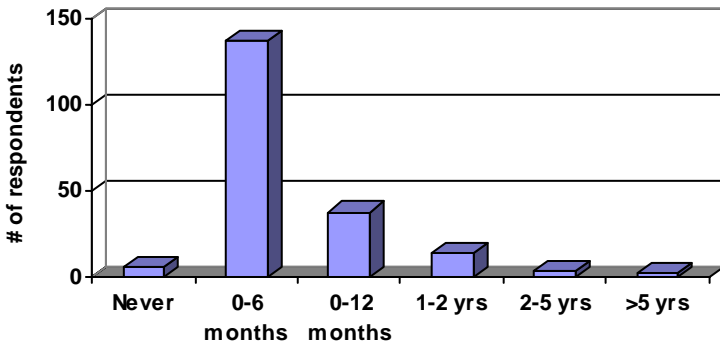
Number of Months Did or Plan to Breastfeed Baby



Medical Conditions

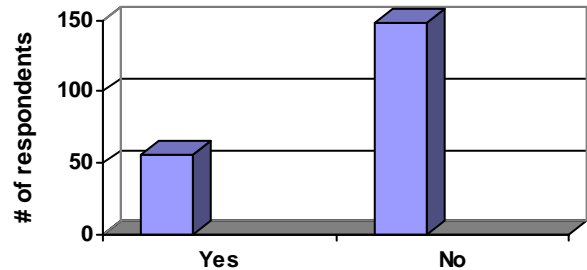
Health screenings, such as for blood pressure and cholesterol, are important for prevention of chronic conditions such as heart disease and stroke. If high blood pressure and high cholesterol are detected early, lifestyle changes and medication can be used to reduce blood pressure and high cholesterol, greatly reducing the likelihood of heart disease mortality and morbidity and stroke.

Last Time had Blood Pressure Taken



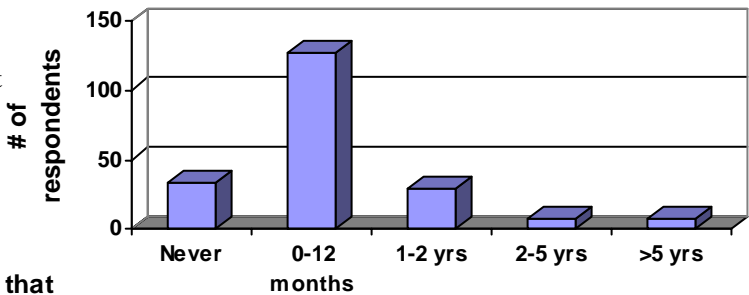
Most respondents (67.8%) have had their blood pressure taken within the last 6 months, and an additional 18.8% have had blood pressure taken within the last year. At total of 93.5% of respondents have had blood pressure taken in the past two years. Few respondents have never had their blood pressures taken (2.8%), or longer than two years ago (3.3%).

Have Been Told by a Health Professional that You Have High Blood Pressure



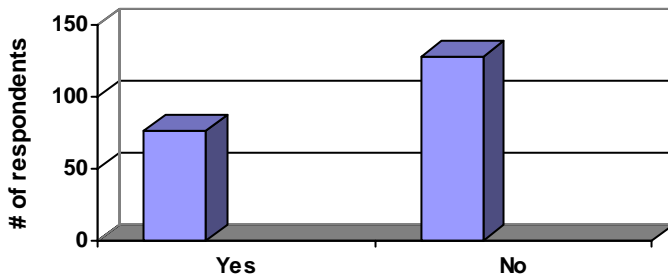
One quarter of the respondents (27.5%) reported having been told by their health care professional that they have high blood pressure.

Last Time had Blood Cholesterol Checked



Most respondents (62.0%) have had their blood cholesterol checked within the past year, and an additional 14.1% have had it checked in the past two years. Sixteen percent of respondents have never had blood cholesterol checked, and 7.8% have not been checked for two years or longer.

Have Been Told by a Health Professional that You Have High Cholesterol

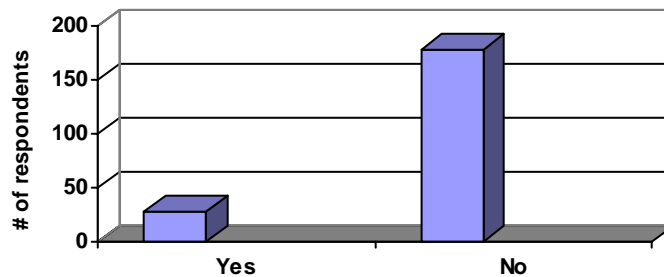


Over one third of respondents (37.4%) report that they have been told by a health care professional that they have high cholesterol.

Medical Conditions (cont'd)

Diabetes is the sixth leading cause of death in Michigan and in Genesee County (MDCH, 2001). Complications from diabetes include renal failure, vascular disease, visual impairments, amputation, and others. Diabetes can be controlled through diet and exercise and/or medication. Early and regular screening allows health professionals to guide appropriate treatment to reduce complications and death from diabetes.

Have Been Told by a Health Professional that You Have Diabetes

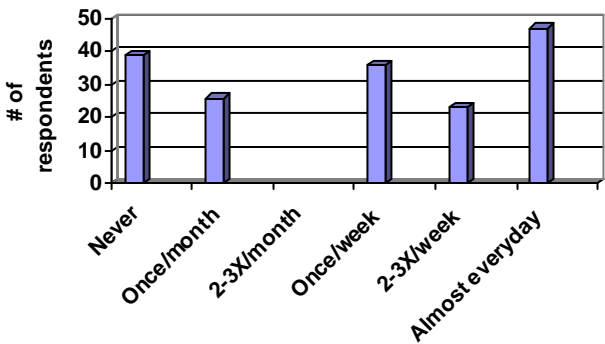


The majority of respondents (86.3%) reported that they have not been told by a health care professional that they have diabetes. Only 13.2% report having been told they have diabetes.

Physical Activity

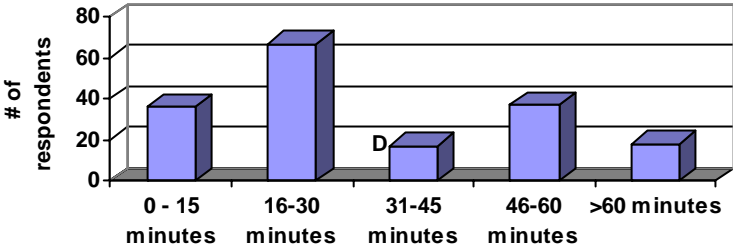
Healthy People 2000 and the 1995 Dietary Guidelines for Americans recommend 30 minutes or more of moderate-intensity physical activity on all, or most, days of the week (CDC). Physical activity assists in weight control and reduces the risk and impact of many chronic diseases, such as heart disease and diabetes.

Exercise Frequency



Responses were varied across the categories, with the most common response being exercising “almost every day” (22.7%), followed by “once a week” (17.4%). 11.1% of respondents exercise “2 - 3 times per week.” Thirty-nine respondents (18.8%) report “never” exercising, and an additional 12.6% exercise only “once a month.”

How Long Do You Usually Exercise?

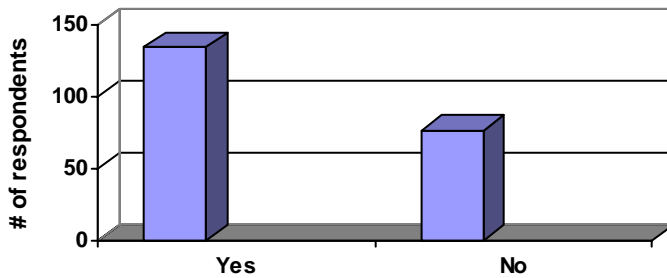


Of those who do exercise, most (38.4%) exercise between 16 - 30 minutes at a time; 21.1% exercise for 46 - 60 minutes at a time; and 10.3% exercise for more than 60 minutes at a time. One-fifth (20.6%) exercise 15 minutes or less.

Injury Control and Safety

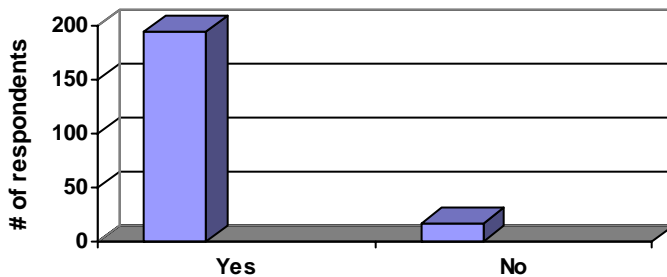
Prevention of fire-related injury and death is clearly linked to having and rehearsing an escape plan from the house or apartment in the event of a fire and having working smoke detectors placed appropriately. Flu shots are another preventive measure to reduce the complications from the flu, particularly for the elderly and those with pre-existing health conditions.

Have a Plan for How to Escape from the House or Apartment



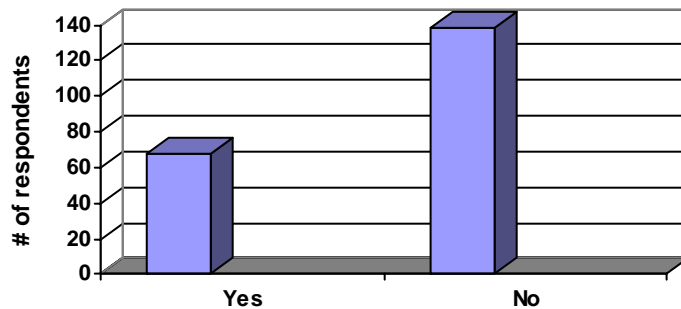
While 63.8% of respondents report that they do have a specific plan for how they would escape from their house or apartment in case of fire, one-third (36.2%) report they do not have an escape plan in event of a fire.

Have Working Smoke Detectors in the House or Apartment



92.4% of respondents do have a working smoke detector in their house. Sixteen respondents (7.6%) do not have a working smoke detector.

Flu Shot During Past 12 months

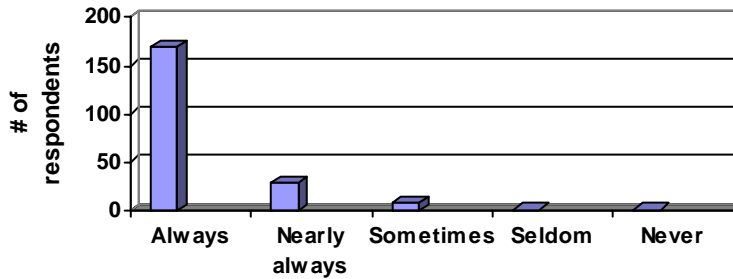


Only one-third of respondents (32.4%) report having received a flu shot in the past 12 months. Most of these (28.4%) received their flu shot at a private physician office, 7.0% at work, 3.6% at the Health Department, and 2.8% at a Senior Citizen Center.

Injury Control and Safety (cont'd)

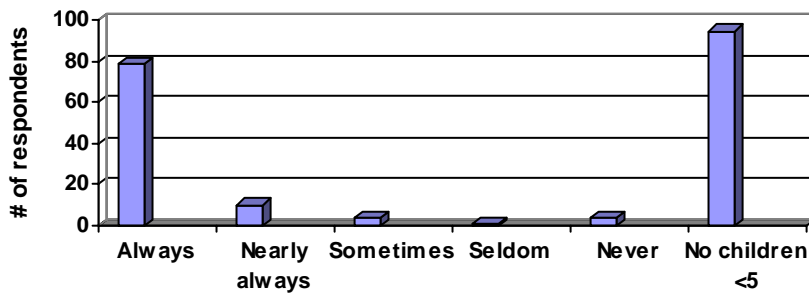
Seat belts are another important injury prevention strategy while driving or riding in a car. Motor vehicle injuries are the second injury-related cause of death in children (NCHS).

Frequency of Seat Belt Use While Driving or Riding in Car



Most respondents report *always* (80.5%) or *nearly always* (13.3%) wearing a seat belt while driving or riding in a car. Only 2 respondents (1%) report *seldom* or *never* and 8 (3.8%) respondents report only *sometimes* wearing a seat belt.

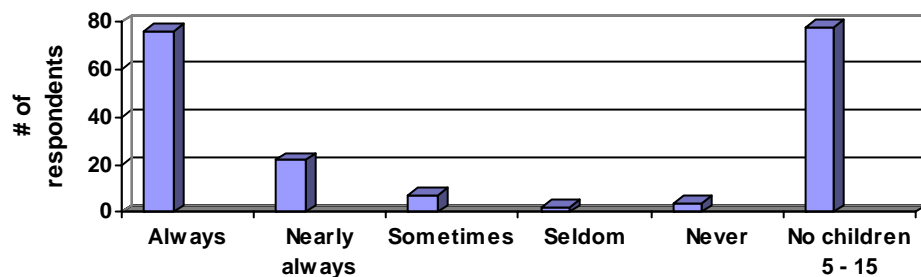
Frequency of Children Under 5 years Wearing Seatbelts



A large number of respondents did not have children under age 5 (49.2%). Of those who do, the majority (80.6%) *always* have children under 5 use child safety seats while riding in the car and 10.2% *nearly always* have children under age 5 in child safety seats. Four respondents (4.1%) report *sometimes*, 1.0% *seldom*, and 4.1% report *never* using car safety seats.

Again, 41.3% of respondents do not have children between 5 and 15 years. Of those with children between 5 and 15 years old, 68.5% *always* wear seat belts while riding in the car, and 19.8% *nearly always* wear a seat belt. 8.1% *sometimes* or *seldom* wear seat belts, and 3.6% *never* wear seat belts.

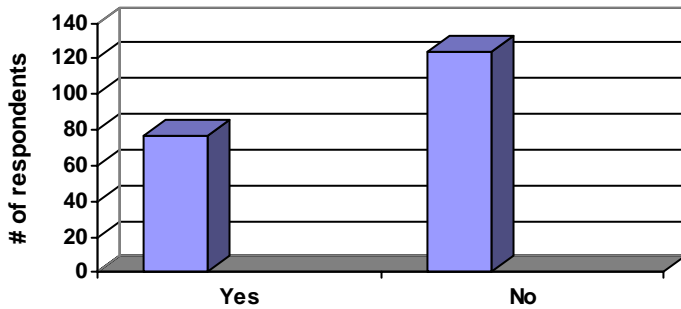
Frequency of Children Between 5 - 15 years Wearing Seatbelts



Tobacco Use

Tobacco use is the leading cause of death in the U.S. (CDC, 2002). Tobacco use has been linked to heart disease, various forms of cancer, respiratory disease, and asthma and other respiratory diseases in children living in a house with a smoker.

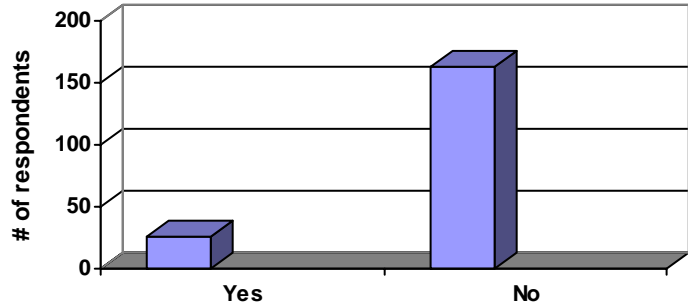
Smoked at Least 100 Cigarettes in Entire Life



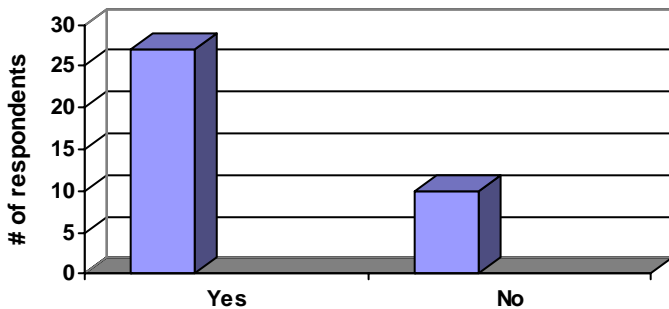
The majority of respondents (61.4%) have not smoked at least 100 cigarettes in their entire life, while 77 respondents (38.1%) have smoked at least 100 cigarettes in their life.

Smoke Now?

Although 77 respondents indicated that they have smoked at least 100 cigarettes in their life, only 26 (13.8%) report they currently smoke.



Would Like to Quit

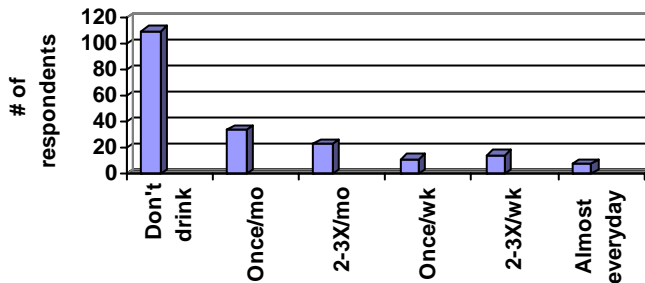


71.1% of respondents would like to quit smoking, while 10 respondents (26.3%) do not want to quit.

Alcohol Use

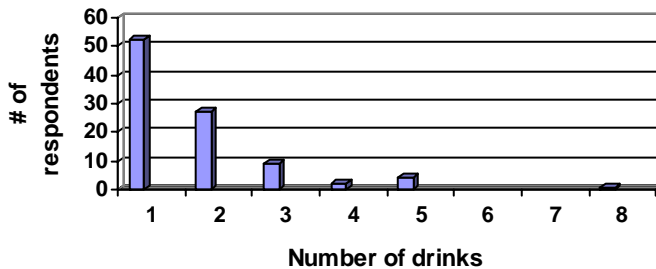
Abuse of alcohol is linked to violence, certain cancers, heart disease, and motor vehicle deaths. Alcohol-related car crashes are more serious and more deadly than other types of crashes (NHTSA, 2003). In 2000, Genesee County was ranked the number one county in persons killed or injured in "Had Been Drinking" crashes (NHTSA).

Frequency of Drinking Alcoholic Beverages During Past Month



Over half (54.8%) of respondents do not drink alcoholic beverages. Over a quarter (28.7%) report drinking alcohol 1 - 3 times per month, 5.2% drink alcohol once a week, and 6.6% drink alcohol two or three times per week. Seven respondents (3.3%) drink alcohol almost every day.

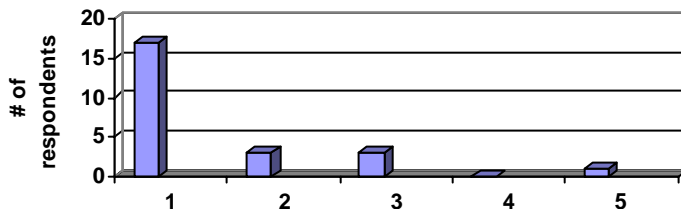
Number of Drinks Consumed on the Days Drinking



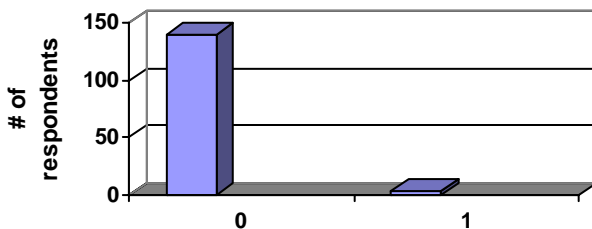
Of those who drink, most (54.7%) consume one drink per day on average, and 28.4% drink two alcoholic beverages per day on average. 11.6% drink two or three alcoholic beverages, and 5.3% drink five or more on average.

Binge drinking is defined as consuming five or more alcoholic beverages on one occasion. Twenty-four respondents reported having five or more drinks on one occasion. Of those, 17 people reported one occasion of binge drinking in a month, and 3 people reported two and three occasions, and one person binge drank five times during the past month.

How Many Times During the Past Month Did You Have Five or More Drinks on One Occasion?

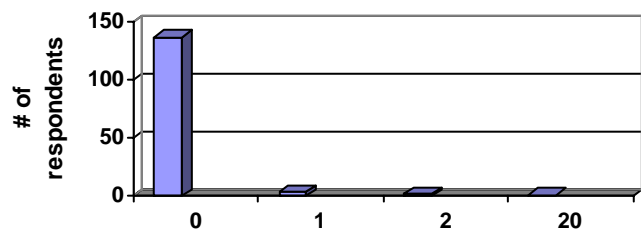


Number of Times Drove When Had Too Much to Drink



Three respondents (2.1%) report driving after having had perhaps too much to drink.

Number of Times as a Passenger When the Driver Had Too Much to Drink

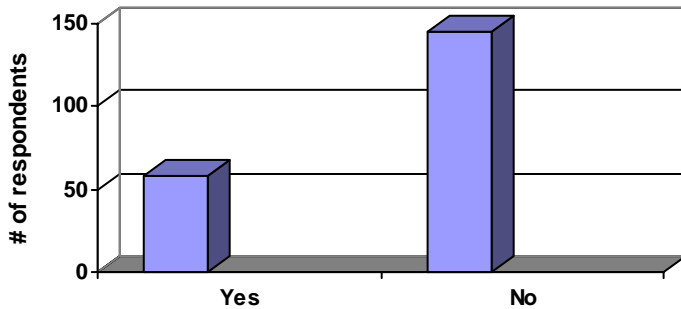


Seven respondents report having been a passenger in a motor vehicle where the driver may have had too much to drink, two or three times during the past month. One person reported 20 times as a passenger when the driver had too much to drink.

Cancer Screening

As with other types of health screening, screening is vital for early detection of cancer, which is more treatable than cancer in later stages of growth and has improved rates of recovery. Colon and rectal cancer had the fourth highest incidence in Genesee County from 1996 - 2000 (MDCH, 2003). Like many other cancers, skin cancer is more treatable the earlier it is detected.

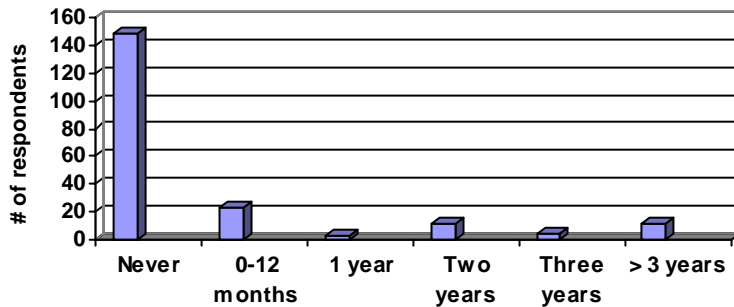
Ever Had a Proctoscopic Exam



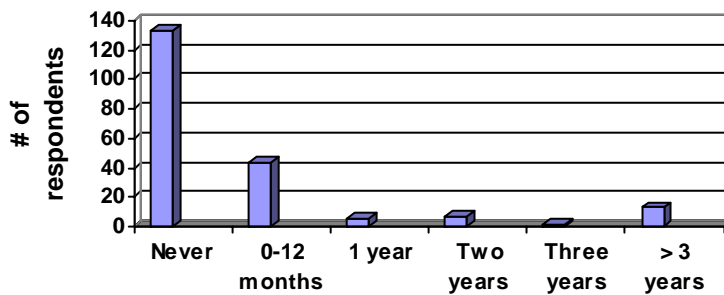
The majority of respondents (68.1%) have not had a proctoscopic exam to check for colorectal cancer and other health problems.

Last Time Used Home Blood Stool Kit

73.8% of respondents have never used a home blood stool test kit. 11.4% have used a home test kit within the past year, 9.4% have used a kit within 1 - 3 years, and 5.4% have not used a home kit for over three years.



Last Time Had Skin Cancer Screening

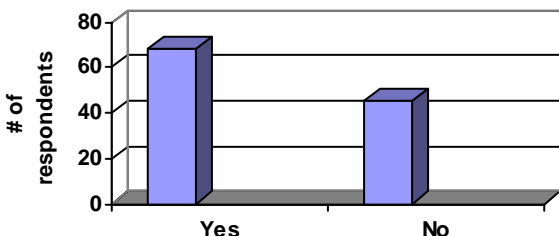


Most respondents (65.5%) have never had a routine exam of the skin by a physician. 21.7% have had a skin cancer screening in the past year, while 12.8% have had the exam over one year ago.

Cancer Screening - Women

In Genesee County, breast cancer had the third highest incidence of all cancers from 1996 - 2000 (MDCH, 2003). Breast cancer is the most common form of cancer in women, although it can be diagnosed in men (NABCO, 2003). According to the U.S. Department of Health and Human Services and the American Cancer Society, women should get a mammogram every one to two years beginning at age 40, and have a clinical breast exam yearly after age 40, and every three years between the ages of 20-39. Monthly self-examinations are also recommended for all women over 20 years old.

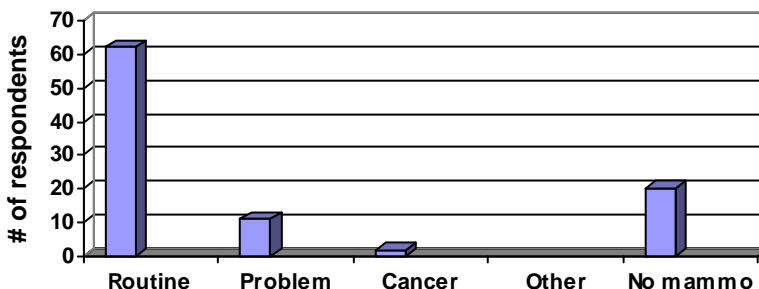
Ever Had a Mammogram



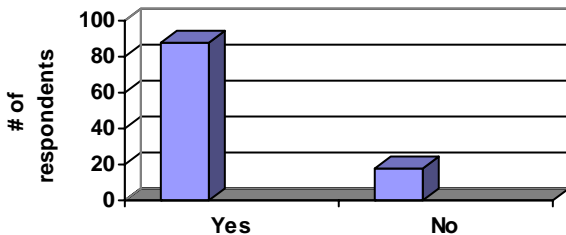
Fifty-four percent of respondents did not reply to this question. Of those who did, 59.1% reported having had a mammogram.

Reason for Mammogram

Most of the respondents (64.6%) who have had a mammogram had it as a routine check-up. 11.5% had a mammogram because there was a problem, and 2.1% because of cancer. On this question, 20.8% of respondents reported never having had a mammogram.



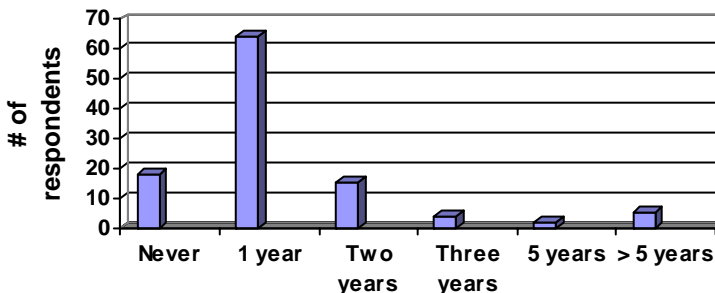
Ever Had a Clinical Breast Exam



Most women (82.2%) have had a clinical breast exam. 18 women report never having had a clinical breast exam.

And, most women (59.3%) have had a clinical breast exam within the past year. 13.9% have had one in the past two years, 3.7% within the past three years, and 6.5% three or more years ago. On this question, 18 women, or 15.7% report never having had a clinical breast exam.

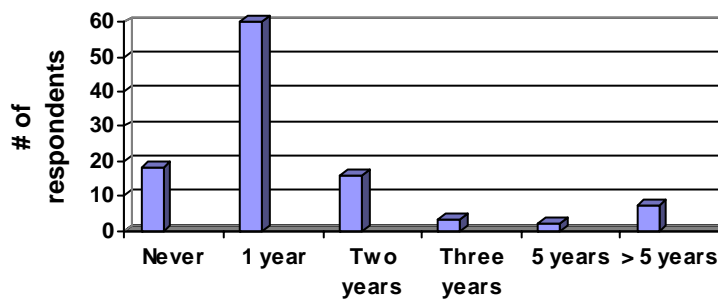
Length of Time Since Last Breast Exam



Cancer Screening - Women (cont'd)

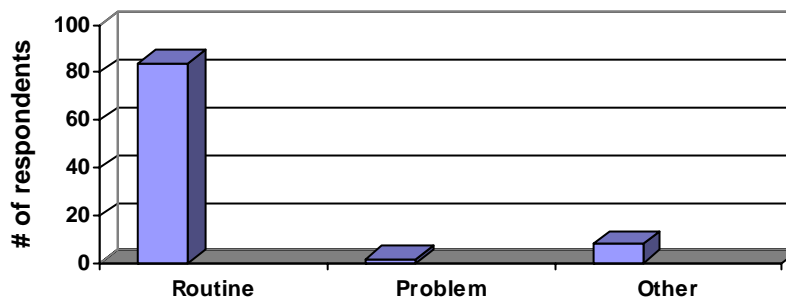
A Pap test or Pap smear is a test to check the cells of the cervix and vagina for signs of cancer or precancerous changes (ACS, 2003). Precancerous cells are treatable and almost all true-cancers can then be prevented (ACS, 2003). According to the American Cancer Society, all women should begin cervical cancer screening about three years after they begin having vaginal intercourse, but no later than when they are 21 years old. Screening should be done every year.

Length of Time Since Last Pap Smear



Most women (56.6%) have had a Pap smear within the past year. For 15.1%, it has been within two years and 2.8% are within three years. 8.5% of women respondents have not had a Pap smear in over three years. Eighteen women (16.9%) report never having had a Pap smear exam.

Reason for Pap Smear

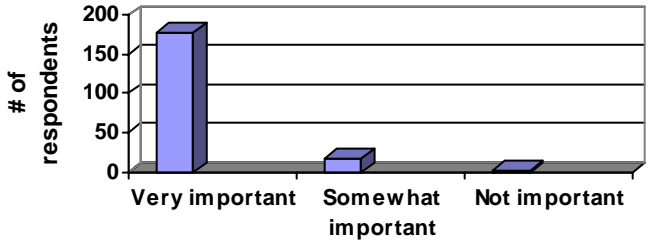


As with mammograms, most women (88.4%) have had a Pap smear as part of a routine check-up. 2.1% of the women had the exam to check on a current or previous problem, and 3.8% reported “other”.

Nutrition - Fruits and Vegetables

Fruit and vegetable consumption is important for nutrition, adequate fiber, obesity prevention, and for the prevention of certain types of cancer and vitamin deficiency conditions. The USDA recommends consuming at least five fruits and vegetables per day.

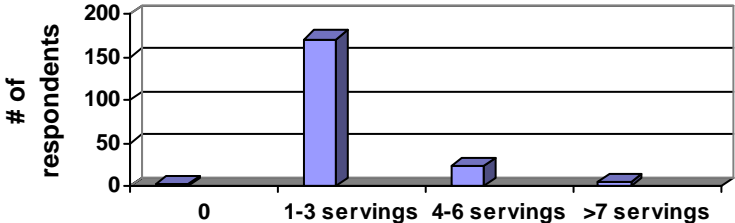
How Important Fruits and Vegetables Are For Your Diet?



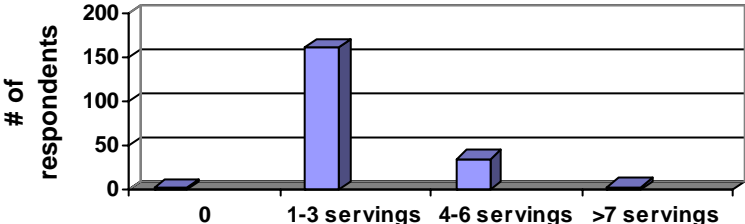
The majority of respondents (91.3%) felt that eating lots of fruits and vegetables is important to health. 8.2% felt it was somewhat important, and .5% felt it was not important at all.

How Many Servings of Vegetables Do You Usually Eat Per Day?

The majority of respondents (85.1%) report eating 1 - 3 servings of vegetables per day and an additional 14% eat more than three servings of vegetables per day.



How Many Servings of Fruit Do You Usually Eat Per Day?

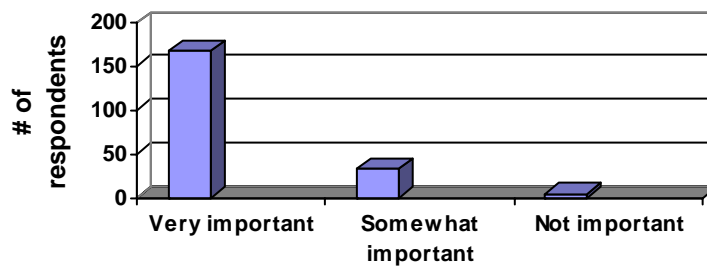


Again, most respondents (75.6%) consume 1 - 3 fruits per day and an additional 23.4% eat more than three servings of fruit per day.

Nutrition - Fat Content

Fat supplies energy and it allows for the absorption of fat-soluble vitamins. Too much fat, particularly saturated fats, leads to obesity and elevated cholesterol levels, both which are risk factors for cardiovascular disease. Unsaturated fats, like those found in vegetable oils, do not raise cholesterol (USDA, 2003).

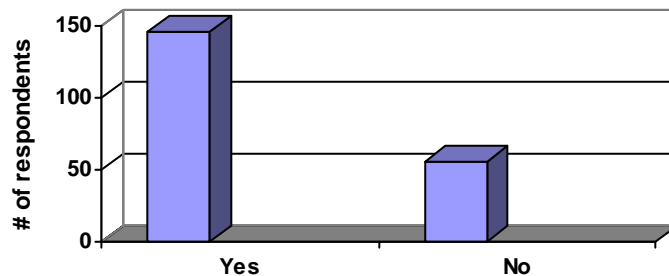
How Important is it to Decrease or Limit the Amount of Fat in Your Diet?



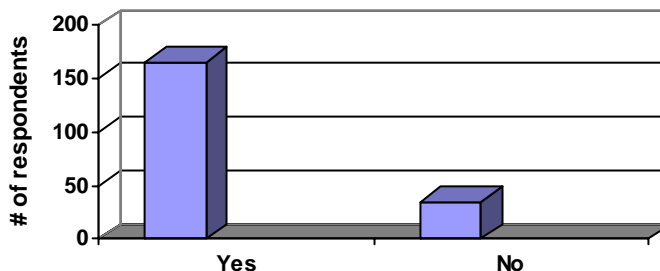
91.9% of respondents felt it was very important for health to eat a diet low to moderate in fat. 16.2% of respondents felt it was somewhat important, and 2.0% felt it was not important at all.

Taking Steps to Decrease or Limit the Amount of Fat in Your Diet?

Nearly 3/4 of respondents (72.3%) are currently taking steps to decrease or limit the amount of fat in their diet, and 27.7% are not reducing fat in their diet.



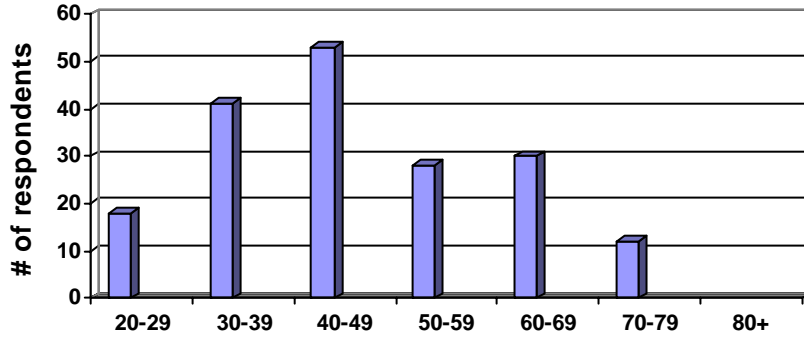
Do You Know How to Decrease or Limit Fat in Your Diet?



Most of the respondents (82.5%) felt that if they wanted or needed to decrease or limit the amount of fat in their diet, they would know how to do it. However, 17.5% of respondents do not know how to limit fat in their diet.

Demographics

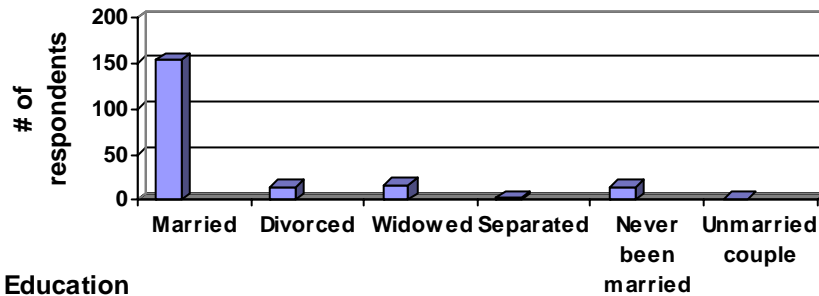
Age



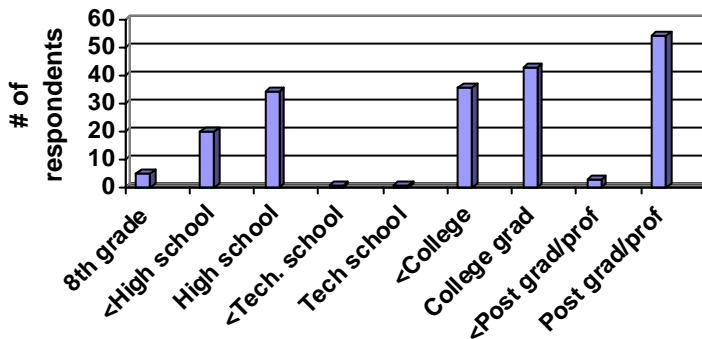
The age range of respondents approximately followed a normal bell-curve, with the most responses from the 40-49 year old age group.

Marital Status

The majority of respondents are married (74.0%), 7.2% are divorced, 8.2% widowed, 1.4% separated, 7.2% never been married, and 1.0% are members of an unmarried couple.



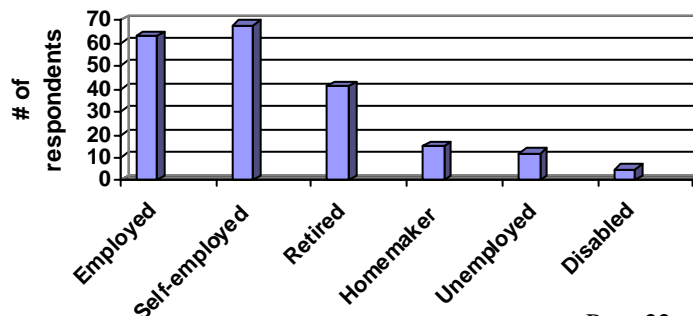
Education



Most of the respondents (27.1%) have a post graduate or professional degree. The next most common response was college graduate (21.6%), some college (18.1%), High school or GED (17.1%), some high school (10.1%), eight graduate school or less (2.5%) and other responses totaling 2.5%.

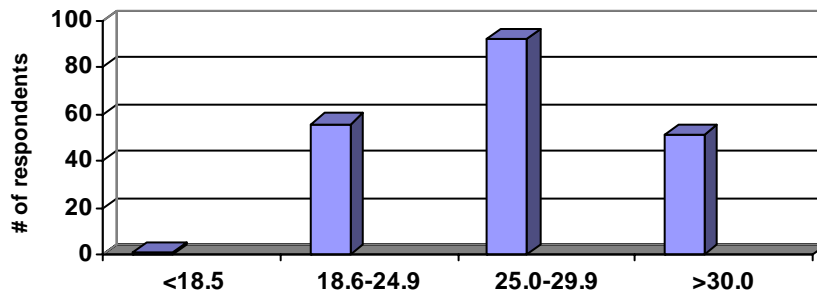
Employment

64.2% of respondents are employed for wages or self-employed. 20.1% are retired, 7.4% are homemakers, 5.9% are unemployed, and 2.5% are disabled.



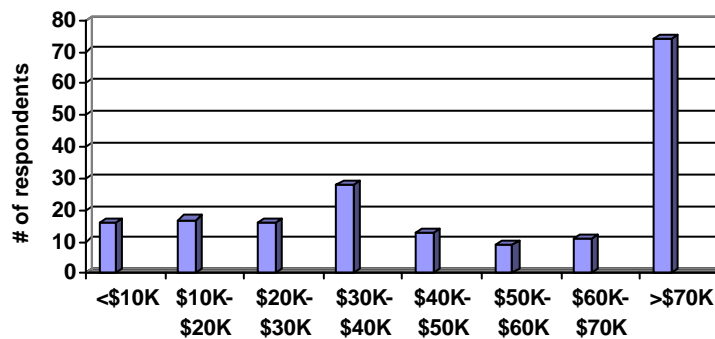
Demographics (cont'd)

Body Mass Index (BMI)



Body Mass Index (BMI) is a measure of body fat calculated using height and weight. Based upon this calculation, one respondent (0.5%) is considered underweight, or a BMI <18.5. 28% of respondents have a normal BMI, or a BMI 18.6 - 24.9. Overweight is a BMI 25.0 - 29.9, and based on this, 46% of respondents are overweight. 25.5% of respondents have a BMI >30.0, or are obese.

Income



Most of the respondents have an annual household income from all sources of over \$70,000. 17.8% have an annual household income less than \$20,000; 23.7% have an annual household income between \$20,000 and \$40,000; and 17.8% have an annual household income between \$40,000 - \$70,000.



Summary

Surveys of this nature are valuable in that they provide a base for further exploration. The sampling strategy was one of convenience, rather than random sampling. Because of this, because surveys were not distributed to all American Arabs in Genesee County, and because completing the survey was voluntary, the findings can not be considered representative of all American Arabs in Genesee County. This survey did not illuminate our denominator, or how many American Arabs live in Genesee County, nor did it provide us with a mean, or average demographic of American Arabs in the County.

Other caveats, or cautions about these survey findings, are that some respondents answered for themselves, and others included a household partner in their responses (husband primary respondent but completed the female questions for wife). There were also many questions that were not answered by some of the respondents. It is possible that they did not apply to that person or the person did not wish to reveal that information. Some of the responses had small numbers and therefore can be considered unreliable, but were in important health indicator areas, such as not having had any prenatal care.

A final caveat regarding the survey is that the population who completed this survey was more educated, had more household income, and therefore was more likely to have health insurance and better health practices than the American Arab population as a whole. It is also possible that the American Arabs living in Genesee County are more likely to be in a higher socioeconomic category than the county population as a whole.

Despite these problematic issues, this survey - as the opening statement above suggests - provides a base for further exploration. Several key areas are suggested for further investigation and possibly community-specific education and intervention.

Key Areas for Further Exploration

Health Insurance Status
Health Insurance for Children
Access to Health Care
Prenatal Care
High Blood Pressure
High Cholesterol
Physical Activity
Fire Escape Plan
Flu Shot
Quit Smoking
Colon Cancer Screening
Skin Cancer Screening
Mammograms
Frequency of Pap Smear
Overweight and Obesity

Questions about this survey may be directed to:

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Genesee County Health Department
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Flint, Michigan 48502
(810) 257-3612