

# Black groups seek closure of cultural divide

WASHINGTON (AP)—A cultural division is emerging between American-born blacks and a fast-growing population of black immigrants, civil rights advocates said Thursday.

The black population grew 31 percent between 1980 and 2000, from 26 million to 34 million. But the population of blacks from Africa and the Caribbean grew roughly seven times as fast, according to an analysis of Census Bureau data by the Lewis Mumford Center at the State University of New York at Albany.

The National Coalition on Black Civic Participation held a conference to discuss ways to bridge the gaps between the groups.

"There is a cultural ignorance we have about each other," said Clayola Brown, civil rights director for the Union of Needletrades, Industrial and Textile Employees. "The only way we can overcome that is to educate both immigrants and the native-born."

For example, Brown and other participants said many American blacks do not realize those born overseas must overcome the same disparities in housing, education and health care that they do in America.

The number of blacks who arrived from or claimed ancestry to the Caribbean or West Indies, such as Jamaica or Haiti, more than tripled between 1980 and 2000 to 1.5 million, the study found.

More than one-third of Afro-Caribbean population lives in the New York City area, with most of the rest settled in big cities along the East Coast.

The 537,000 blacks who came from or had ties to sub-Saharan African countries such as Nigeria or Ghana is six times the number from two decades earlier. The Washington, D.C., New York and Atlanta metropolitan areas have the largest concentrations of African-born residents.

Socioeconomic differences between black immigrants and native-born blacks has created friction in some communities, said Roderick Harrison, a demographer with the Joint Center for Political and Economic Studies in Washington. He studies income, education trends and other issues that affect the socioeconomic and political status of minorities.

More than 84 percent of blacks of recent African de-

cent were born overseas, compared with 70 percent of Afro-Caribbeans, and just 2 percent of African-Americans.

The median household income for blacks from the Caribbean or Africa is about \$40,000, nearly \$7,000 more than for African-Americans. Those with African descent tend to have more education - an average of more than 14 years in school compared

with less than 13 for Afro-Caribbeans and African-Americans.

The unemployment rate of 10 percent for African-Americans in 2000 was about 3 percentage points higher than for Afro-Caribbeans and 5 percentage points higher for those of African descent.

Those differences exist mainly because immigration policies, especially for those arriving from Africa, is more

selective, Harrison said. Many of those who come from Africa are political refugees who tend to be more educated.

In New York and south Florida, places with large pockets of immigrants, political tensions have risen when an election pits a native-born black versus an Afro-Caribbean.

Language barriers also often act as an obstacle, said

William Spriggs, executive director of the National Urban League's Institute for Opportunity and Equality.

But Spriggs pointed out that his organization and other groups have started reaching out to newer immigrant communities by hiring bilingual workers and doing voter outreach.

There have been recent signs of unity. Civil rights groups descended on Florida

last October after a boat carrying 216 Haitians ran aground in Key Biscayne, and after the 2000 elections.

Blacks of different backgrounds protested after the highly publicized police brutality cases in New York of black immigrants Amadou Diallo and Abner Louima.

Incidents such as those, as well as struggles to overcome disparities, are common for all blacks, Spriggs said.

## National Women's Health Week: May 11-17, 2003

### WOMEN: Know Your Risk Factors

The following article was submitted by The Healthy Hearts Project, which is committed to preventing cardiovascular disease in the African American Community. For more information about lowering your risk of cardiovascular disease, please contact The Healthy Hearts Project at 702-940-5423.

The Healthy Hearts Project is one of many programs offered by the University of Nevada Cooperative Extension.

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#### More Information About Cardiovascular Disease

Heart attacks and strokes, while different conditions, both are caused by a lack of blood flow. A heart attack, caused by coronary heart disease, occurs when blood flow to the heart is critically reduced. Lack of blood flow to the brain from a blood clot, or bleeding in the brain from a broken blood vessel, causes a stroke. Sometimes called a "mini stroke", a person can also have a transient ischemic attack (TIA), which raises the risk for a full stroke.

- ♥ Heart disease is the number one killer of American women. More women die of heart disease each year than men.
- ♥ Almost twice as many women die from cardiovascular disease (mostly heart attacks and strokes) than from all forms of cancer combined.

#### Risk Factors for Cardiovascular Disease

- ♥ Cardiovascular disease affects women of all racial and ethnic groups, however, African American women are more likely to die from heart disease than other groups of women. Smoking, high blood pressure, high blood cholesterol, inactivity, increasing age, family history of heart disease, obesity and diabetes are risk factors for cardiovascular disease.

#### Reducing Your Risk

There are several steps you can take to reduce your risk for cardiovascular disease:

- ♥ Don't smoke or quit if you do.
- ♥ Keep your blood pressure below 140/90 mm Hg; below 130/85 mm Hg for people with kidney damage or heart failure; or below 130/80 mm Hg for people with diabetes. Ask your health care provider about how often you need your blood pressure checked.
- ♥ Eat healthy.
- ♥ Lower your cholesterol to the right level, based on your personal risk.
- ♥ Get at least 30 minutes of exercise on most days of the week.
- ♥ Maintain a healthy weight. Ask your health care provider what a healthy weight is for you.
- ♥ Have a normal fasting blood glucose level (below 110 mg/dL). Ask your health care provider when you should be tested. If you have diabetes, monitor and control your blood sugar levels.
- ♥ Talk with your health care provider about your heart disease risks and your family's heart disease history.

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