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## Summary of the State of Health Equity in Kent County, Michigan

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### Introduction

This research brief summarizes the current state of *health equity* in Kent County, Michigan. It showcases *health equity* progress, setbacks, and potential solutions that can be adopted to improve health inequities, especially among Black and other marginalized populations. With the Grand Rapids African American Health Institute (GRAAHI) focused on eradicating health disparities for Black people by influencing health policy and practice, this brief serves as an informational tool to be used by others to ensure all Michiganders achieve optimal health.

Earlier this year, the national government [revoked](#) *health equity programs and initiatives* across the federal government and workforce regarding diversity, equity, and inclusion (DEI). This controversial action from the national government reignited national debates on whether or not DEI policies and opportunities were deserving and fair. Instead, the premise of solely providing opportunities based on merit was presented, and that a person's social, economic, and historical conditions should not be considered. Moreover, these entities believe that enough affirmative action and DEI opportunities have already been given to level the playing field. This brief highlights the importance of continuing *health equity work by promoting conditional support* in West Michigan via policies and strategies to combat health inequities among Black and other marginalized populations.

### Key Findings and National Health Equity Concerns

- The **country is currently divided** by political affiliation, race, gender, sexual orientation, religious affiliation, and several other factors. For society to move forward, a common ground must be established and pursued by all parties. Continuing to spread hate and misinformation across groups will only result in more grief, pain, and damage in this country.
- **Mental health** remains a significant issue in society. Black and White people both experienced an increase in poor mental health rates in Kent County, Michigan, from 2017 to 2023. The poor mental health rate increased **by 71% for Black people** and **by 32% for White people**. Improving resources and funding towards mental health issues should be a priority.
- All Americans endured **major inflation rates** (a 36% increase) and financial burden over the past decade. The simple act of buying groceries, gas, and necessities is a struggle for many. It is important to challenge political and community leaders in Kent County, Michigan, to advocate for employment opportunities that pay livable wages. With the **advent of artificial intelligence (AI)**, it is likely that more jobs will be lost in the next few years, as it is estimated that [AI will reshape up to 2.8 million jobs](#) in Michigan over the next 5 to 10 years.
- Michigan's children are falling behind in **education**. Black and Hispanic children need the most help, being most likely to attend public schools that lack sufficient resources. It is imperative that Michigan's children have access to schools with qualified teachers and sufficient resources. Since lead exposure can impact learning ability, efforts should continually address this critical issue in Kent County and across the state.
- Black and White people both experienced significant rises in **stroke mortality** in Kent County, Michigan, from 2019 to 2023. The stroke mortality rate increased **by 82% for Black people** and **by 50% for White people**. This occurred



during the pandemic. It is essential for public health authorities and doctors to encourage Michiganders to seek help and take patients seriously when warning signs are mentioned.

- On a positive note, **poverty rates** significantly declined for Black people (by 39%), White people (by 24%), and Hispanic people (by 30%) in Kent County, Michigan, from 2019 to 2024. Even though more efforts are needed, this is a sign of progress. Understanding how this occurred would be beneficial to stimulate more success.
- The practice of providing **conditional support** should be a priority in health care. *Conditional support is the practice of providing resources to a population based on conditions that increase their chances of negative outcomes. The population at risk typically does not control these conditions.* Lead exposure, poor schools in Black neighborhoods, and police brutality are examples of conditions that negatively impact Black populations. Therefore, local, state, and national measures should be taken to give such populations a fair chance of living healthy lives.
- Some **potential policies and strategies** to promote *conditional support* among Black people include the following:
  - [Increase the number of affordable housing options](#) to influence more homeowners in the U.S., especially with the elevated house prices and interest rates. This could improve Black homeownership rates that have declined in recent years.
  - [Support and expand the Earned Income Tax Credit \(EITC\)](#) to increase after-tax incomes and reduce poverty. Such legislation would support Black people who experience high poverty rates.
  - [Encourage more states to pass parity laws to enforce the Mental Health Parity and Addiction Equity Act](#), increasing the scope and enforcement of this act that ensures health plans provide equity coverage of mental health and substance use disorder treatment.
  - [Implement strategies from the National Action Plan to Improve Health Literacy](#) from the U.S Department of Health and Human Services, while also [increasing support for local financial education programs to improve financial literacy](#).
- The “**One Big Beautiful Bill Act (OBBBA)**” that was recently passed will impact all Americans, including residents of Kent County, Michigan. Some potential outcomes of that bill may include:
  - OBBBA will cut \$1 trillion from Medicaid services, resulting in roughly 15 million Americans losing health care coverage by 2034. This will impact people’s access to health care services and treatment, exacerbating existing health inequities among Kent County residents, such as heart disease mortality, cancer mortality, and mental health issues.
  - OBBBA places new restrictions on Supplemental Nutrition Assistance Program (SNAP) benefits. These restrictions may cause thousands of low-income Michigan families to lose access to food options to feed their families. With Black families being more likely to live in food deserts and in poverty than White families, they are more likely to be negatively impacted by these changes.
  - OBBBA is likely to reverse or stall much of the health disparity progress in Kent County, MI, with its new restrictions and criteria. To inform Kent County residents of these new restrictions and criteria, GRAAHI is creating the “**Medicaid Coordinated Outreach and Support Initiative**” and collaborating with other organizations and leaders across the state to ensure Michiganders stay informed of these new policy developments.



## Why Health Equity Is Still Important?

**What is the meaning of health equity?** The [World Health Organization](#) states that *health equity* is determined by the conditions in which people are born, grow, live, work, play, and age, and that *health equity* can only be achieved when everyone can attain their full potential for health and well-being. It is known that Black and other marginalized populations experience a multitude of challenges (via social and economic determinants of health), preventing them from attaining their full potential for health. Below are a few of those examples:

- a) **Lead:** Black people are more likely to live in neighborhoods with [high levels of lead exposure](#). This outcome is linked to racial segregation and poor housing conditions that are linked to systemic inequities. It was found that Black children with high levels of lead exposure have lower reading scores. Therefore, it is important to understand these types of conditions that influence poor academic performance among certain groups.
- b) **Poor Education and Schools:** Black children are more than 6 times more likely to attend a high-poverty [school](#) than White children. Reciting test scores from Black children without this fact does this issue a disservice. This results from housing discrimination, neighborhood segregation, and inequitable policies that prevented Black economic mobility for decades. Neither school systems nor Black people can remedy this issue alone. It will take systemic policies to improve these school conditions to give children the best chances of educational success.
- c) **Unemployment:** Black people are more likely to be [unemployed](#) compared to all other racial/ethnic groups except American Indian/Alaska Native people in the U.S. Due to [systemic barriers](#), injustices, redlining, segregation, and the destruction of thriving Black communities such as Tulsa, Oklahoma, it became difficult for Black people to accumulate wealth and businesses that could be passed down through generations. Many Black people still thrive and succeed in this country, but the educational and employment fields were never balanced and equal for all to prosper, influencing high unemployment rates among Black people.

**Who are the true beneficiaries of DEI policies?** The notion that Black people already received restorative justice via DEI and affirmative policies is a complete misnomer. It is known that [White women](#) benefit the most from DEI and affirmative action policies. DEI policies stem from the [Civil Rights Act of 1964](#), which was heavily influenced by the [Civil Rights Movement](#) in the 1950s and 1960s due to systemic oppression of Black people in this country. Despite this, Black people never received the majority of DEI benefits in this country, leaving many injustices and racial problems in place.

- a) **The merit-based angle:** Many people agree that awarding opportunities or employment to people based on merit and/or ability is fair. However, society never operated based on merit alone. It is widely known that having the proper networks, resources, and phenotypic traits increases a person's chances of being successful. *"It's not what you know, but who you know."* A [study](#) even found that nearly 50% of human resource managers admit to bias in their hiring practices. Since Black people do not manage or operate the majority of systems in this country, it is necessary to implement *health equity* initiatives that focus on creating parity in these environments, especially for Black people who have endured injustices in this country the longest.



## Trend Data Rates In Kent County, Michigan

The tables below showcase data rates over time for Black and White people for 12 health indicators in Kent County, Michigan, from 2014-2024. Key findings are detailed below each table.

### Trend Data Rates for Black People in Kent County, Michigan

Indicator	Base Year(s)	Base Rate	Latest Year(s)	Latest Rate	Rate Change
Breast cancer mortality	2014-2018	22 per 100,000	2018-2022	22 per 100,000	0
Depression	2017-2019	23.0%	2021-2023	18.1%	-21%
Diabetes	2017-2019	22.2%	2021-2023	10.0%	-55%
Health insurance cov.	2019	92.3%	2024	94.8%	+3%
Heart disease mortality	2016-2018	269 per 100,000	2019-2021	290 per 100,000	+8%
HIV	2018	695 per 100,000	2022	797 per 100,000	+15%
Infant mortality	2019	17 per 1,000	2021-2023	12 per 1,000	-29%
Obesity	2017-2019	50.4%	2021-2023	39.2%	-22%
Poor mental health	2017-2019	13.9%	2021-2023	23.7%	+71%
Poverty	2019	30.4%	2024	18.6%	-39%
Stroke mortality	2019	38 per 100,000	2023	69 per 100,000	+82%
Unemployment	2019	10.6%	2024	7.6%	-28%

Sources: GRAAHI's Health Equity Index, Michigan Department of Health and Human Services, US Census

**Key Findings:** Black people experienced an 82% increase in *stroke mortality* (from 2019 to 2023) and a 71% increase in *poor mental health* (from 2017-2019 to 2021-2023). On a positive note, Black people experienced a 55% decrease in *diabetes incidence* (from 2017-2019 to 2021-2023) and a 39% decrease in *poverty* (from 2019 to 2024) in Kent County, Michigan.

### Trend Data Rates for White People in Kent County, Michigan

Indicator	Base Year(s)	Base Rate	Latest Year(s)	Latest Rate	Rate Change
Breast cancer mortality	2014-2018	17 per 100,000	2018-2022	19 per 100,000	+12%
Depression	2017-2019	24.5%	2021-2023	26.0%	+6%
Diabetes	2017-2019	9.0%	2021-2023	10.7%	+19%
Health insurance cov.	2019	95.1%	2024	96.0%	+1%
Heart disease mortality	2016-2018	165 per 100,000	2019-2021	176 per 100,000	+7%
HIV	2018	106 per 100,000	2022	109 per 100,000	+3%
Infant mortality	2019	4 per 1,000	2021-2023	3 per 1,000	-25%
Obesity	2017-2019	29.6%	2021-2023	31.3%	+6%
Poor mental health	2017-2019	11.1%	2021-2023	14.7%	+32%
Poverty	2019	8.3%	2024	6.3%	-24%
Stroke mortality	2019	30 per 100,000	2023	45 per 100,000	+50%
Unemployment	2019	3.4%	2024	2.9%	-15%

Sources: GRAAHI's Health Equity Index, Michigan Department of Health and Human Services, US Census

**Key Findings:** White people experienced a 50% increase in *stroke mortality* (from 2019 to 2023) and a 32% increase in *poor mental health* (from 2017-2019 to 2021-2023). On a positive note, White people experienced a 25% decrease in infant mortality (from 2019 to 2021-2023) and a 24% decrease in poverty from 2019 to 2024 in Kent County, Michigan.



## Economic and Education Status in Kent County, Michigan

### Education Status in Michigan

- In 2024, [Michigan](#) ranked 44<sup>th</sup> in the country in 4th-grade reading and 31<sup>st</sup> in 4th-grade math.
- [During 2023-2024](#), 60% of Michigan's 3<sup>rd</sup> graders were reading below grade level, while 68% of Michigan's 7<sup>th</sup> graders were performing below grade level in math.
- In 2024, on the [M-STEP test](#), Black and Hispanic students, multilingual learners, and students with disabilities all scored at least 10 percentage points below the state average on the 3rd-grade reading and 7th-grade math tests.

### Poverty Status in Kent County, Michigan

Poverty rates significantly declined for Black, White, and Hispanic people from 2019 to 2024 in Kent County, Michigan, while the rates for Asian people did not change significantly:

- a) The poverty rate for **Black people** was 30.4% in 2019 compared to 18.6% in 2024, **representing a 39% decrease**.
- b) The poverty rate for **White people** was 8.3% in 2019 compared to 6.3% in 2024, **representing a 24% decrease**.
- c) The poverty rate for **Hispanic people** was 21.9% in 2019 compared to 15.4% in 2024, **representing a 30% decrease**.
- d) The poverty rate for Asian people was 3.8% in 2019 compared to 5.4% in 2024, but the statistical margin of error was too great to denote a significant change. [Source: US Census](#)

The **unemployment rate for Hispanic people nearly doubled from 4.2% to 8.0%** from 2019 to 2024 in Kent County, Michigan, while the unemployment rates for Black and White people did not change significantly during this same time period. The sample size was too small to review the unemployment rate for Asian people during this time period. [Source: US Census](#)

### Cost of Living Status in Kent County, Michigan

Wages have not increased equally with the cost of living in Kent County, Michigan, since 2012. In 2022, the median annual wage in Kent County was \$42,730, while the income needed to afford the median rent was \$47,840. Renters are spending \$400 more per month than they can afford in Kent County, Michigan.

- a) **Housing cost burden:** From 2017-2021, **more than half (54%) of Black renters** spent more than 30% of their gross income on housing costs compared to 51% of Hispanic renters and 42% of White renters in Kent County, Michigan.
- b) **Severe housing cost burden:** From 2017-2021, **nearly 30% of Black renters** spent more than 50% of their gross income on housing costs compared to 24% of Hispanic renters and 19% of White renters in Kent County, Michigan. [Source: Housing Kent](#)

From 2015-2025, the [inflation rate increased by 36%](#), averaging a 3.2% increase each year in the U.S. The largest inflation rate occurred in 2022 with an increase of 8%. For example, \$2,711 in 2015 is now worth \$3,695 in 2025. So what \$100 could buy in groceries in 2015, it now takes \$136 to purchase the same amount of groceries in 2025. This affects people of all backgrounds.