STATE SPOTLIGHT
Louisiana

The state uses BRFSS to address the following public health topics:

- Occupational Health
- Health-care access & coverage
- Service-worker wellness
- Total health
- Food & shelter insecurity
- Tobacco use

BRFSS Helps Identify:
At-Risk Populations

In Louisiana, BRFSS data suggested that service workers—individuals doing health-care support, protective services, food service, cleaning and maintenance, and personal care and service—have been facing disproportionately higher rates of poor health, chronic health conditions, and risky behavior, compared with the rates among state residents working in other industries.

“We knew we needed to take a closer look,” said Jocelyn Lewis, PhD; MSPH.

The result, Dr. Lewis said, is an analysis of 2013 and 2014 BRFSS data to develop The Louisiana Service Worker Wellness Report. It is a collaboration between the state’s Occupational Health and Environmental Public Health Tracking programs within the Louisiana Department of

Recent Resources & Media Mentions

Fact Sheets:
Caregiving/Alzheimer’s Association

TN Fruit/Vegetable Consumption
http://bit.ly/2oWiFgT

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Health Surveillance in Deaf Communities

Physical Inactivity Maps
http://bit.ly/2mMLBYd

From the States:
Iowa BRFSS Annual Reports
Health’s (LDH’s) Section of Environmental Epidemiology and Toxicology and Laurie Freyder, state BRFSS coordinator within LDH.

“Prior to this analysis, the prevalence rates of health conditions and risk behaviors for these occupations were unknown,” said Dr. Lewis, who is the Occupational Health coordinator, in the state’s Office of Public Health.

**Report Findings**

BRFSS data indicate that service-oriented jobs may employ large numbers of Louisiana residents, but they often do not pay well enough for wage-earners to afford basic necessities, such as medical care, food, and shelter.

Compared with all other workers in the state, service workers in Louisiana lacked health care coverage more often (39% vs 19%); they were more likely to report poor total health (21% vs. 15%); they were more likely to have asthma (7.4% vs. 5.0%), diabetes (8.4% vs 6.3%); a depressive disorder (18% vs 13%) and chronic obstructive pulmonary disease (6.0% vs 3.5%); more faced food- and housing insecurity (34% vs 19%, 17% vs 14%, respectively) and were more likely to be current smokers (32% vs 24%).

**More Employees, More Concerns**

Dr. Lewis noted that the numbers of Louisiana residents going to work in service-related industries is on the rise; service workers make up 17% of the total workforce. “We know that the numbers working in food service, for example, rose by about 12 percent between 2010 and 2014. With the exception of protective services, other service areas are growing as well. As the service occupational sector grows in Louisiana, it is important to evaluate worker’s health and well-being, in an effort to better inform labor and economic policy and practices.”

The day-to-day working conditions, Dr. Lewis added, can pose public health challenges as well. These jobs—many of which are held by women and minorities—often involve shift work, low wages and minimum job security. These challenges can be compounded by some of the conditions in the state, where 21% of Louisiana residents over age 25 have less than a high school education (15% nationally) and 19% of the state’s population live below the federal poverty level (16% nationally). More than 70% of jobs in Louisiana pay less than $20 per hour, with most paying less than $15 per hour. These jobs—especially service jobs that pay below $20 per hour and require only a high school
education or less—are predicted to grow far faster than higher-wage jobs over the next decade.

“These issues may not be unique to Louisiana,” said Dr. Lewis, “but because these socioeconomic concerns are so common here, they can contribute to an increase in negative health outcomes across the population.”

Sharing the Results


The complete report can be found here: [http://bit.ly/2oyzym0](http://bit.ly/2oyzym0)

Data from the report were shared through presentations made to local universities, an occupational health advisory group, and public health programs.

The report was sent to the Louisiana Workplace Safety Taskforce, whose board includes legislators and Louisiana’s Regional Medical Directors, and other stakeholders. Positive feedback has been received, Dr. Lewis said.

“We anticipate producing annual BRFSS reports for each year that Industry and Occupation data are available,” she added.

National Center for Chronic Disease Prevention and Health Promotion

Division of Population Health | Population Health Surveillance Branch
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