



# REACH

## FINDING SOLUTIONS TO HEALTH DISPARITIES

2009

### Alabama: REACHing African American women in rural Alabama and across the Mid-South

In Alabama—and across the United States—African Americans are more likely to die of cancer than white Americans. In certain Alabama counties, more African American women die of breast cancer than white women. Additionally, the percentage of African American women aged 65 years or older who reported receiving a Papanicolaou test (Pap test) decreased within the past 3 years.

With support from CDC, the Alabama Breast and Cervical Cancer Coalition at the University of Alabama at Birmingham has engaged a variety of stakeholders, key leaders, and concerned citizens from community- and faith-based organizations, state health departments, grassroots agencies, and public and private health care organizations to promote awareness of and increase participation in breast and cervical cancer screening services in selected counties throughout the state. A core group of volunteers including trained community health advisors, nurses, other health care professionals, and clergy routinely disseminate culturally appropriate health information. They also conduct community-based outreach efforts to eliminate barriers for women navigating the complex health care system.

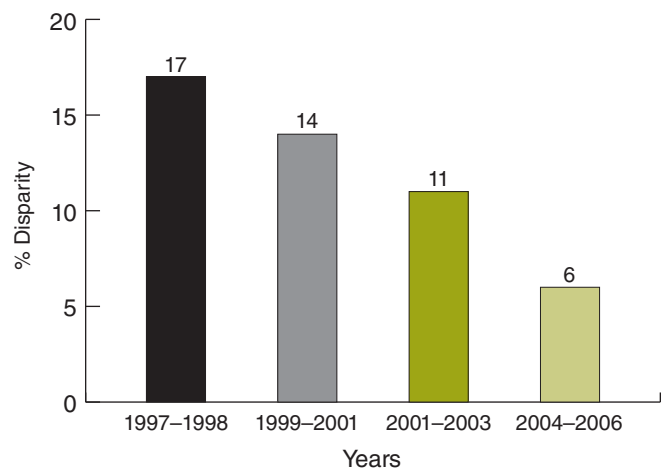
In Choctaw County, African American women were much less likely to get mammography screening compared with white women. During 1997–2006, the percentage of African Americans who received mammography screenings increased from 29% to 61%, surpassing by 13% the rate for white women who were screened.

During approximately the same time period in Dallas County, a lower mammography screening rate among African American women (30%) compared with white women (50%) was almost eliminated. According to data from the eight-county Alabama REACH program focus area, the gap in mammography screening rates between African American and white women decreased by 76%.

### California: REACHing African Americans in Los Angeles

In South Los Angeles (L.A.) County, the age-adjusted death rates from heart disease and diabetes among African Americans are much higher compared with rates for Los Angeles County as a whole. Few resources exist, however, to support a healthy lifestyle for residents of South L.A. neighborhoods.

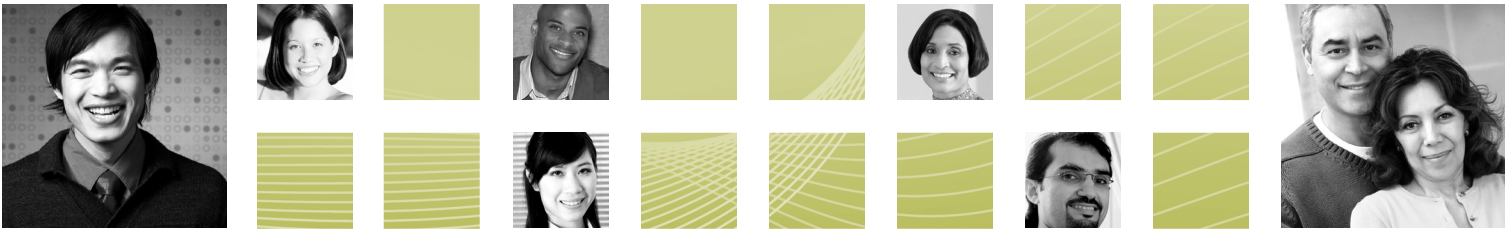
**Reduction in Disparity of Mammography Screening Among African American Women Compared with White Women (1997–2006)**



Source: Data are from Alabama Quality Assurance Foundation and REACH Intervention counties in Alabama.

Community Health Councils of Los Angeles (CHC LA) completed a study on food choices in neighborhood supermarkets, grocery stores, and restaurants and examined resources for physical activity. The study's findings revealed differences in the availability and quality of supermarkets and grocery stores found in South L.A. compared with L.A. County as a whole. Fewer markets serve more people in South L.A.—5,957 persons





per store in South L.A. compared with 3,763 persons per store in L.A. County. The study also noted differences in the availability of healthy food choices.

CHC LA assembled a cross section of key stakeholders to form the African Americans Building a Legacy of Health (AABLH) coalition. This coalition works to promote healthy communities and reduce disparities in the rates of diabetes, heart disease, and stroke among African Americans living and working in South L.A. In 2006, the AABLH coalition found that only 41% of stores in South L.A. sold fresh produce compared with 71% of stores that sold fresh produce in L.A. County. A 2005 AABLH study also reported an abundance of fast-food restaurants in South L.A. Of the total restaurants in South L.A., 25.6% are fast food; of the total restaurants in L.A. County, only 11.2% are fast food.

An examination of opportunities for adult African Americans to engage in physical activity revealed that 35% of physical activity venues in L.A. County offer adult physical activity compared with 11% of similar venues available in South L.A. Adult physical activity opportunities were offered in 58% of L.A. County communities compared with 27% in South L.A. communities. These findings reveal resource inequities and inaccessibility factors that contribute to health disparities.

With CDC support, Community Health Councils of Los Angeles has engaged a multi-sector consortium to research and evaluate strategies to (1) promote land-use management and urban design policy, (2) increase physical activity opportunities and improve existing food venues through regulatory practices and policy development, and (3) develop policies and promote investments that support new nutrition sources.

Environmental improvements are beginning to take shape. The Community Redevelopment Agency of Los Angeles has developed an incentive package to attract grocery stores and sit-down restaurants to under-resourced communities. The Los Angeles City Council unanimously approved a proposal that would prohibit new fast-food restaurants in Council Districts 8 and 9 in South L.A. for at least 1 year.

## South Carolina: REACHing African Americans in Charleston and Georgetown Counties

In South Carolina, African Americans are at greater risk than whites of developing diabetes and are at greater risk of developing diabetes-related complications such as heart disease, stroke, blindness, renal failure, and the need for an amputation. Diabetes is the sixth leading cause of death in South Carolina, claiming more than 1,600 lives each year.

The Medical University of South Carolina and the REACH Charleston and Georgetown Diabetes Coalition conducted a community needs assessment to improve diabetes self-management. The Coalition discovered that people with diabetes had high interest in using the Internet to find important information about managing their diabetes. However, 50% of older community members and 40% of people with less than 12 years of formal education needed help using the Internet. The coalition built a library partnership to support and sustain diabetes education across the community. The library partnership promotes use of online health information in the context of support systems already in place for the African American community.

Other strategies included creating walk-and-talk groups, providing diabetes medicines and supplies, creating learning environments where health professionals and persons with diabetes learn together, offering advice on how to buy and prepare healthier foods, and improving the quality of diabetes care.

Other disparities for African Americans with diagnosed diabetes have been greatly reduced. For example, during a 5-year time span, the percentage of African Americans who had their hemoglobin A1C (blood sugar) levels checked annually increased from 77% to 97%. The percentage who had their blood cholesterol level checked increased from 47% to 81%. Kidney testing increased from 13% to 53%, and foot exams increased from 64% to 97% in the same time frame.

Lower-extremity amputations among African Americans with diabetes also have decreased sharply. For example, in Charleston County, the percentage of amputations among African American males with diabetes who were hospitalized decreased by almost 54% over a 7-year time span. In Georgetown County, the rate of amputations for this same group decreased 54% over a 3-year time period.