



Health Outcomes: Socialecology, Ethnicity & Culture

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Director, CCARE
City of Hope**

**“Of all forms of inequality, injustice in health care is
the most shocking and inhumane.”**

Reverend, Dr. Martin Luther King, Jr.



Terminology

- ❖ **Culture = a way of life**
- ❖ **Ethnicity = Country/Region of parental/ancestral origin + culture**
- ❖ **Socialecology = Socioeconomic status + life burden + living situation + neighborhood context + social support**



Health Disparities and Ethnicity

- ❖ **Quality of care differs by ethnicity & SES- people of color, ethnic minorities lower SES persons receive inferior care**
- ❖ **Ethnic minorities, especially African Americans experience high incidences & disproportionate chronic morbidity (pain & physical complications), and mortality due to chronic diseases.**

Institute of Medicine (2002)



Why Health Disparities Exist

- ❖ **Biological: Genes**
- ❖ **Societal: Health Discrimination**
- ❖ **Financial: Quality**
- ❖ **Cultural: Normative Practices (i.e. foods)**
- ❖ **Personal: Behavioral practices
(i.e. lifestyle)**
- ❖ **Institutional Factors: Economic and
Health care system**



Correlates of Chronic Diseases

- ❖ **Heart disease, cancer and diabetes risks are linked to lifestyle, income, education quality of care and insurance status rather than genes.**
- ❖ **Similarly, disparate health outcomes are for the most part linked to health care system, means & socioecologic factors like quality of care & community resources rather than biological factors.**

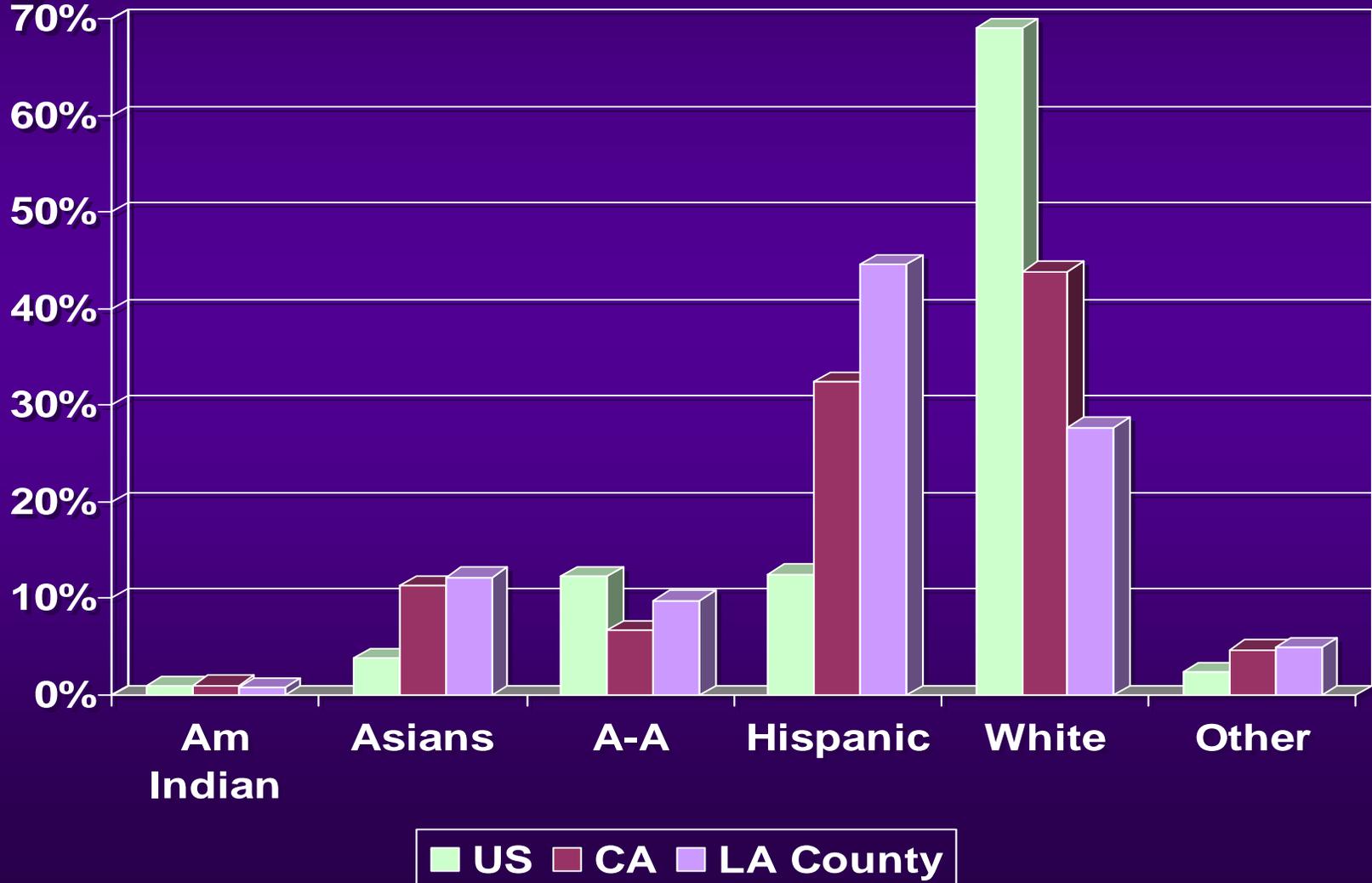


Health Equity: Including Diverse Communities

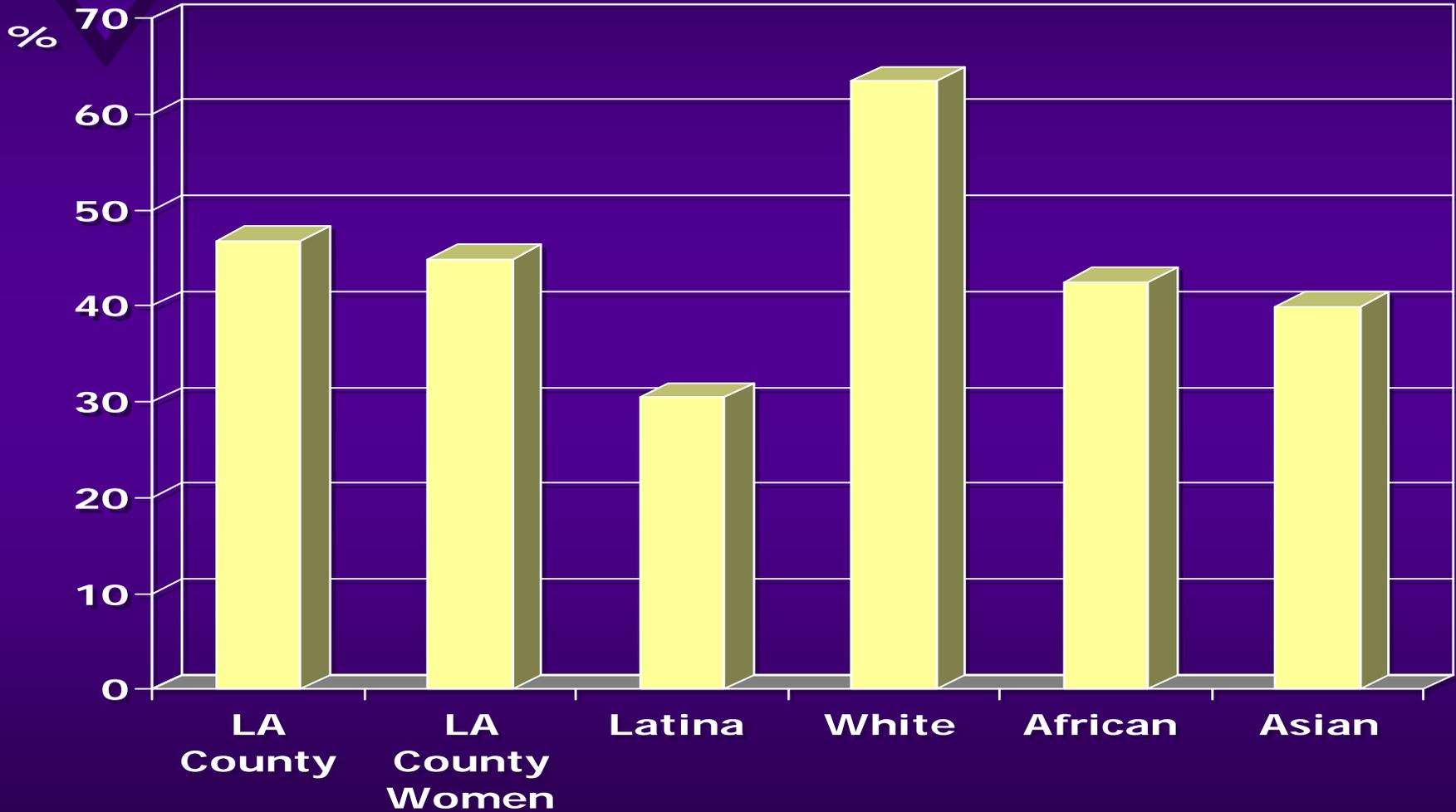
- ❖ Ethnic minorities equal 33% US population & growing
- ❖ Ethnic minorities equal 64%, women equal 46% and ethnic minority women equal 28% of the LA workforce
- ❖ Providers within underserved communities have limited access to optimal health care resources
- ❖ Ethnic & socioeconomic status dictate access & QOC
- ❖ Ethnic minorities bear unequal burden
- ❖ Health education and advocacy are lacking
- ❖ Research participation among ethnic minorities is minimal
- ❖ Federal and State laws and policies are inclusionary

Population by Race/Ethnicity

2000 U.S. Census



Self-Rated Health for Women

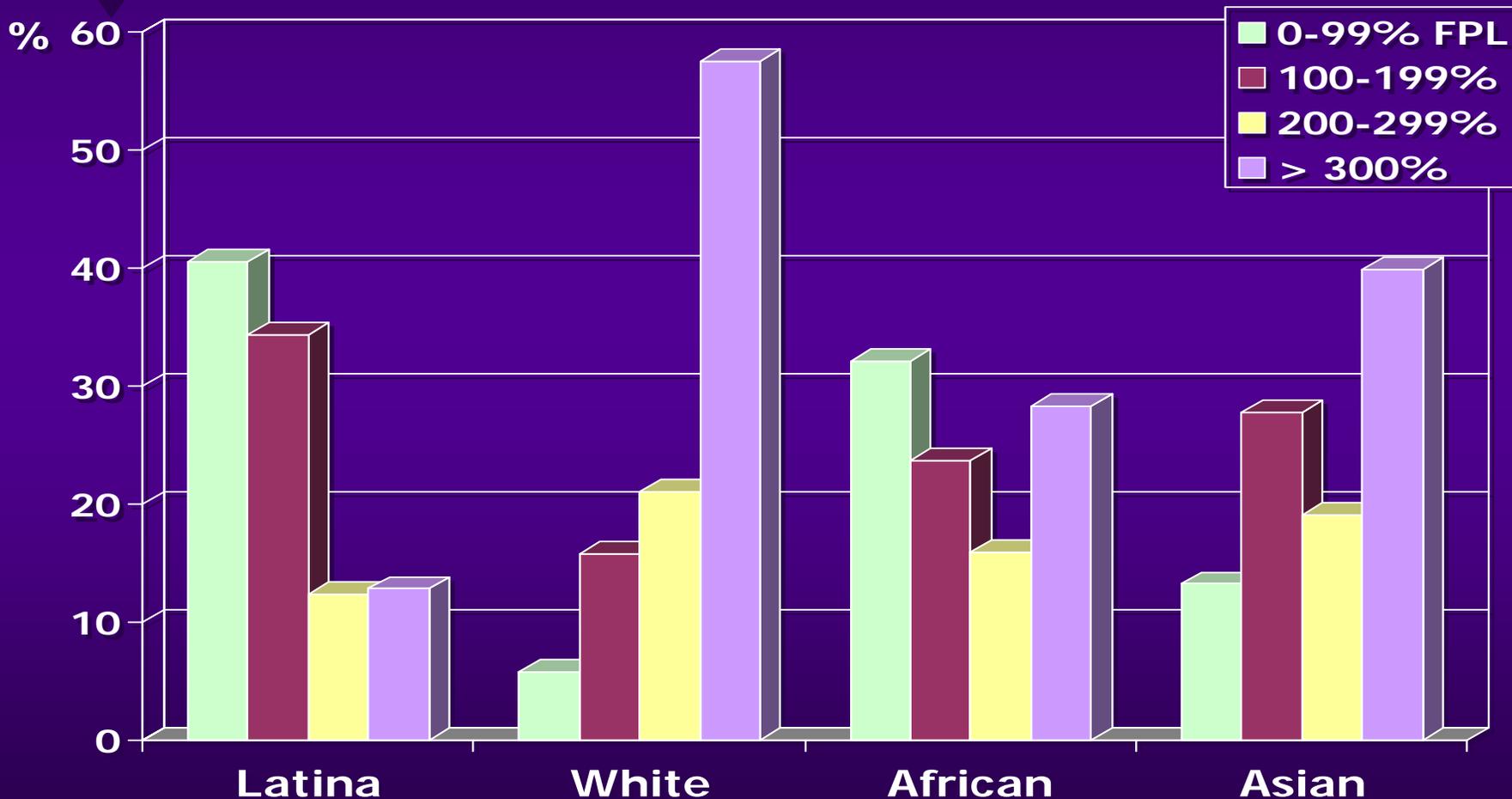


* Percent of adult women reporting their health to be excellent or very good

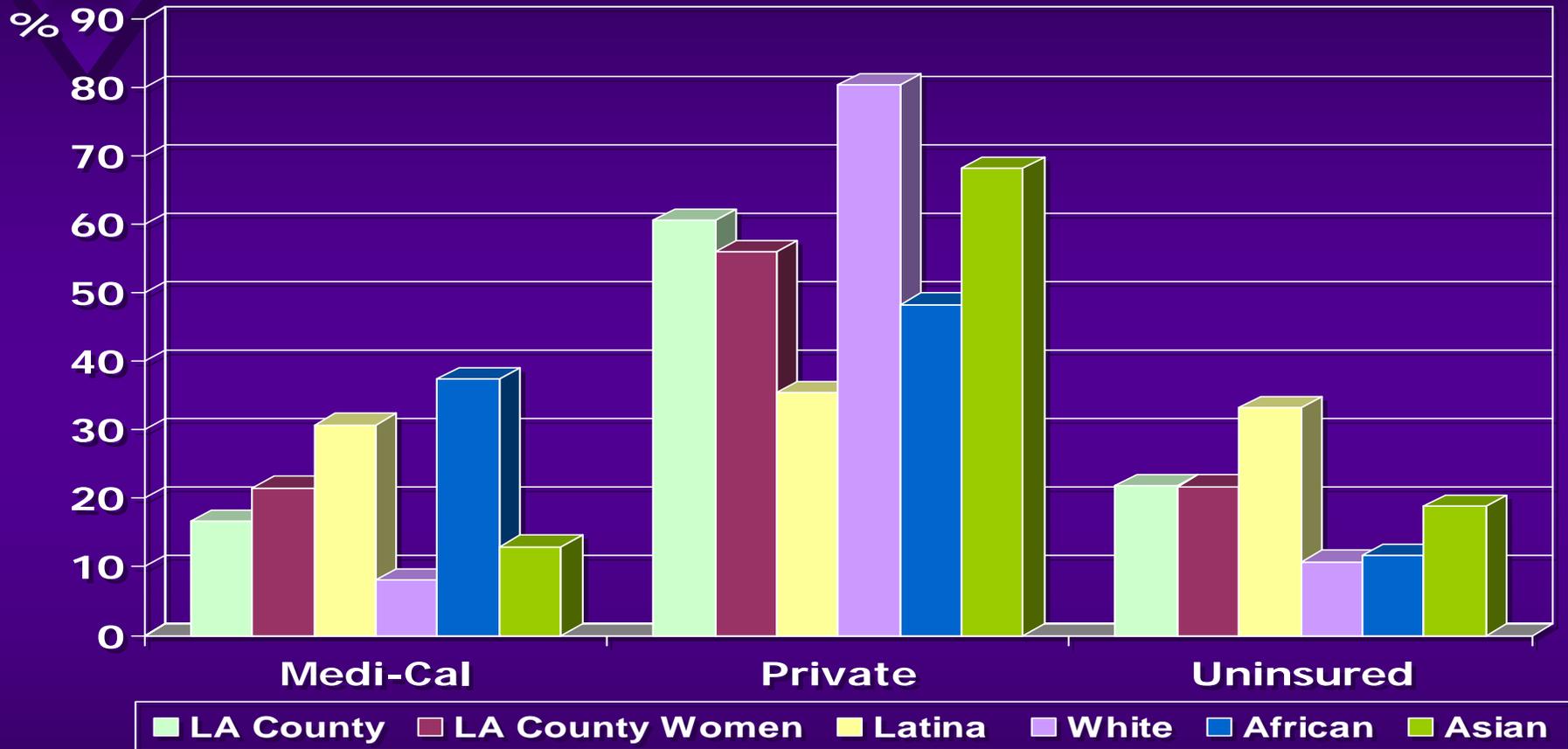
* Reference: Self-rated health, unhealthy days, days of activity limitation. Atlanta, Georgia: CDC, 2000



Federal Poverty Level (FPL) among Women in LA by Race/Ethnicity, 2005

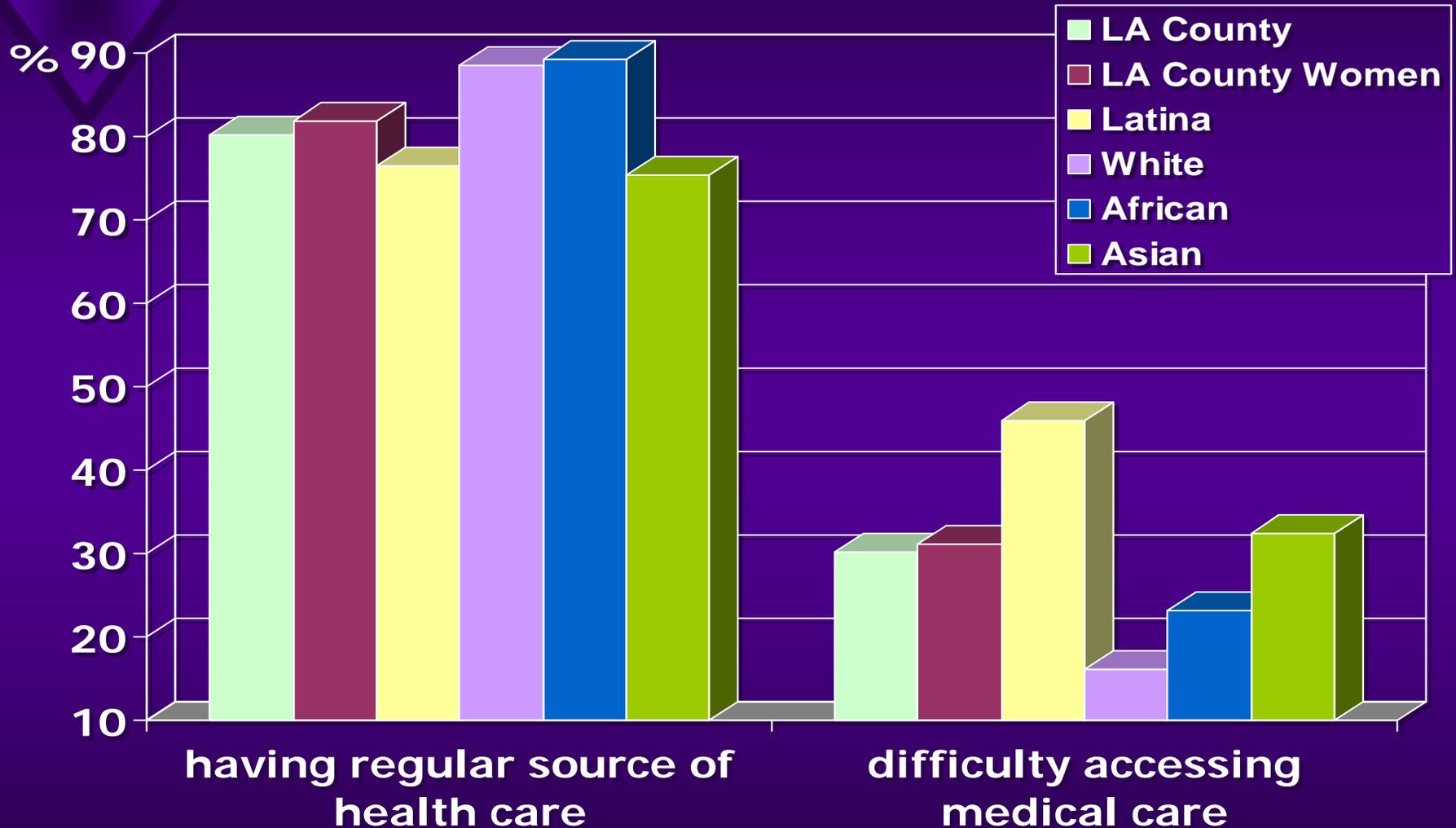


Type of Health Insurance for Women 18-64 years by Ethnicity



Ethnic Minority women overrepresented among the uninsured:
Need for health care coverage reform for all women

Access to Care for Women by Ethnicity

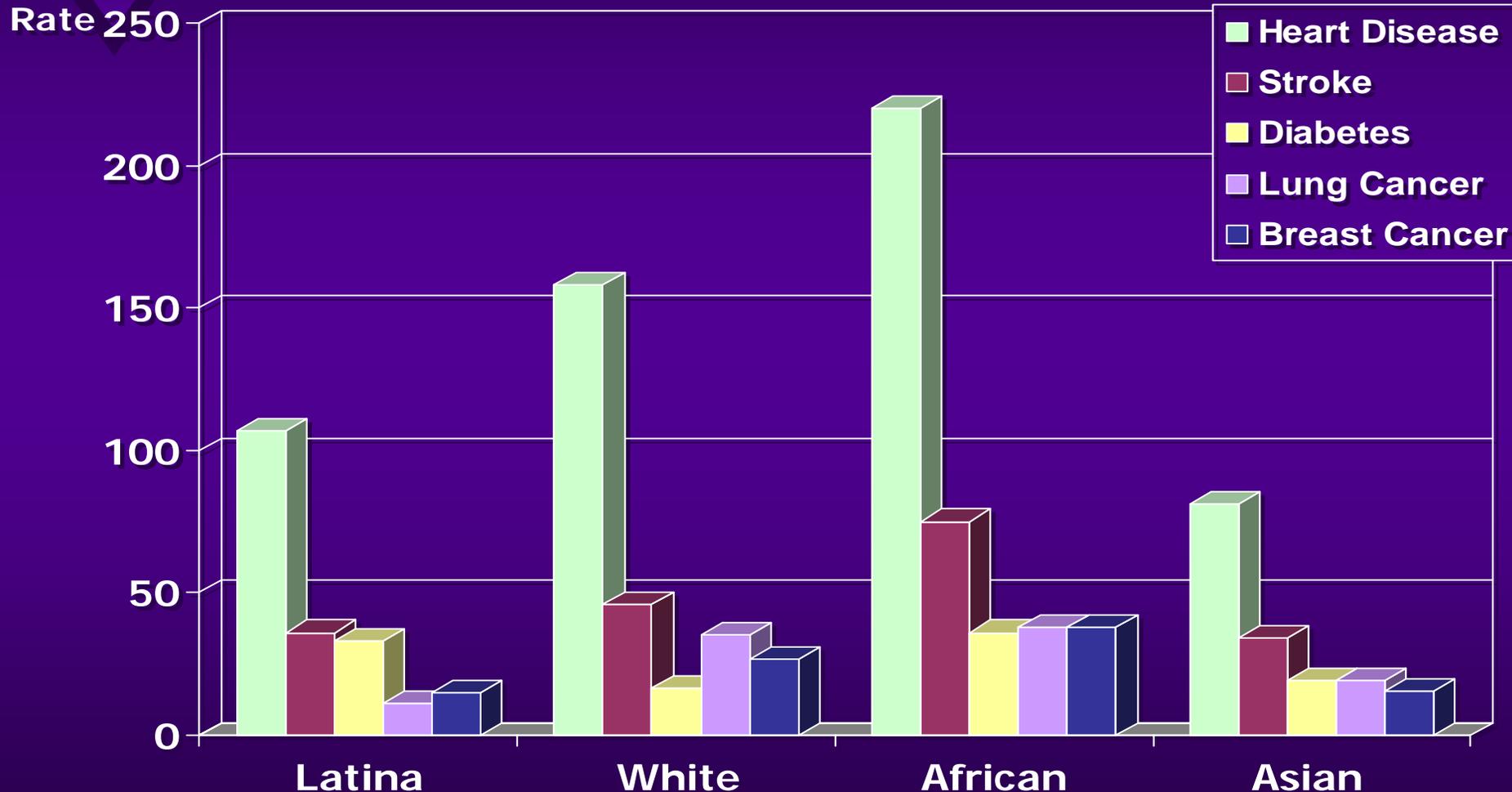


* Having regular source of health care: percent of adult women with a regular source of health care

* difficulty accessing medical care: percent of adult women who reported difficulty accessing medical care

* Reference: LA County Dept. of Public Health, 2005

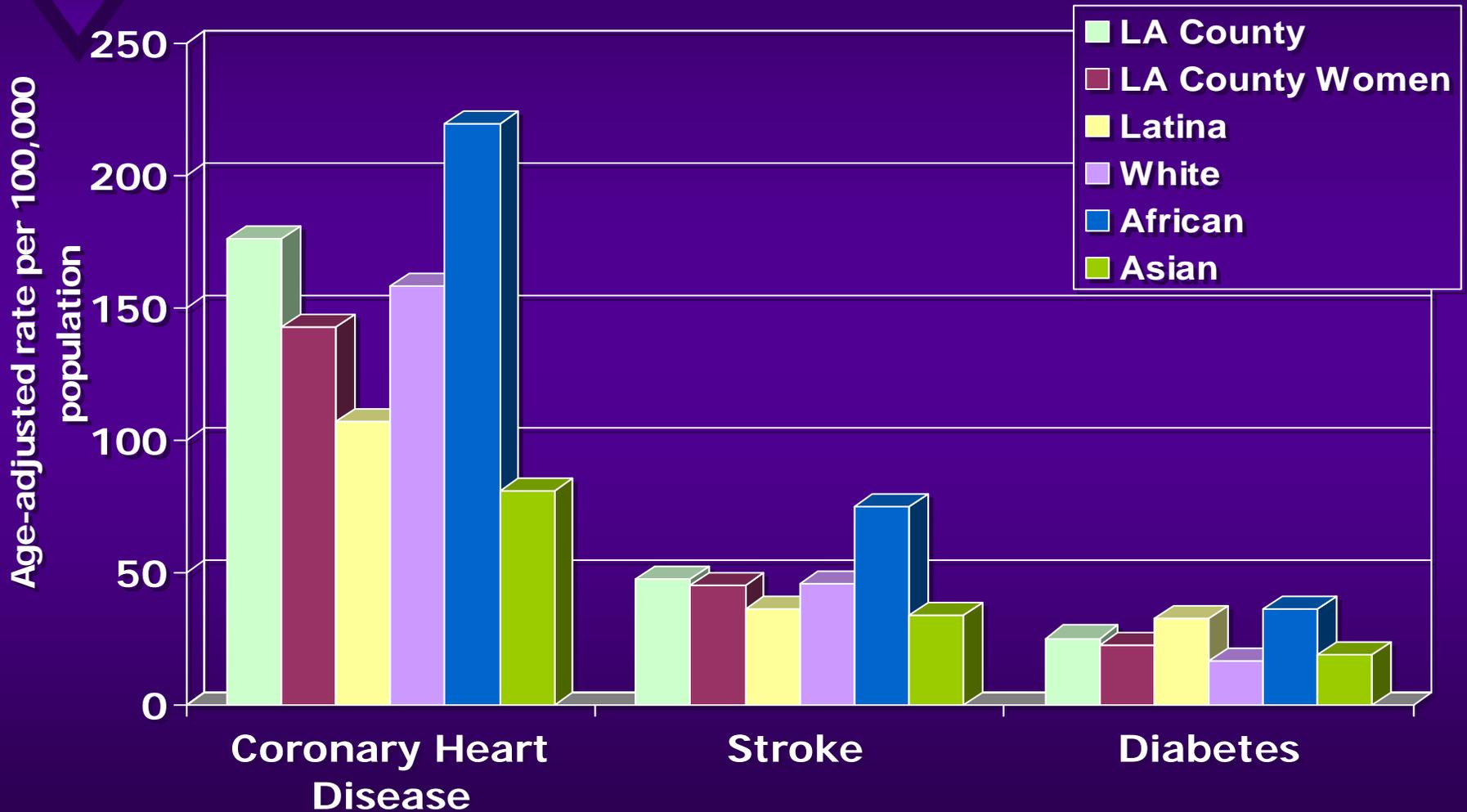
Causes of Death for Women in LA County by Race/Ethnicity 2004



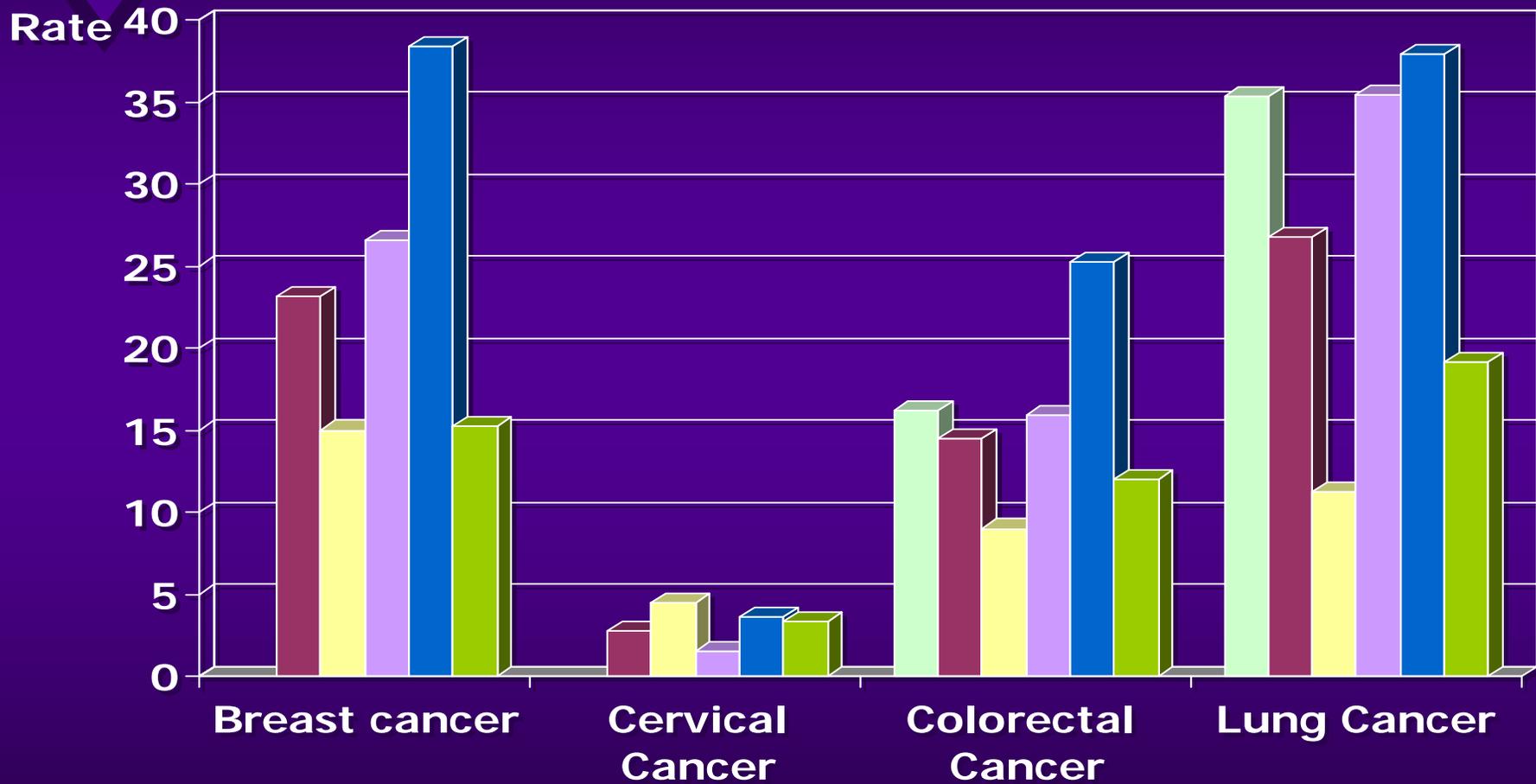
* Age-adjusted death rates per 100,000 population

* Reference: LA County Department of Public Health, Mortality in LA County 2004: Leading causes of death. May 2007

Cardiovascular Disease & Diabetes Mortality for Women by Ethnicity



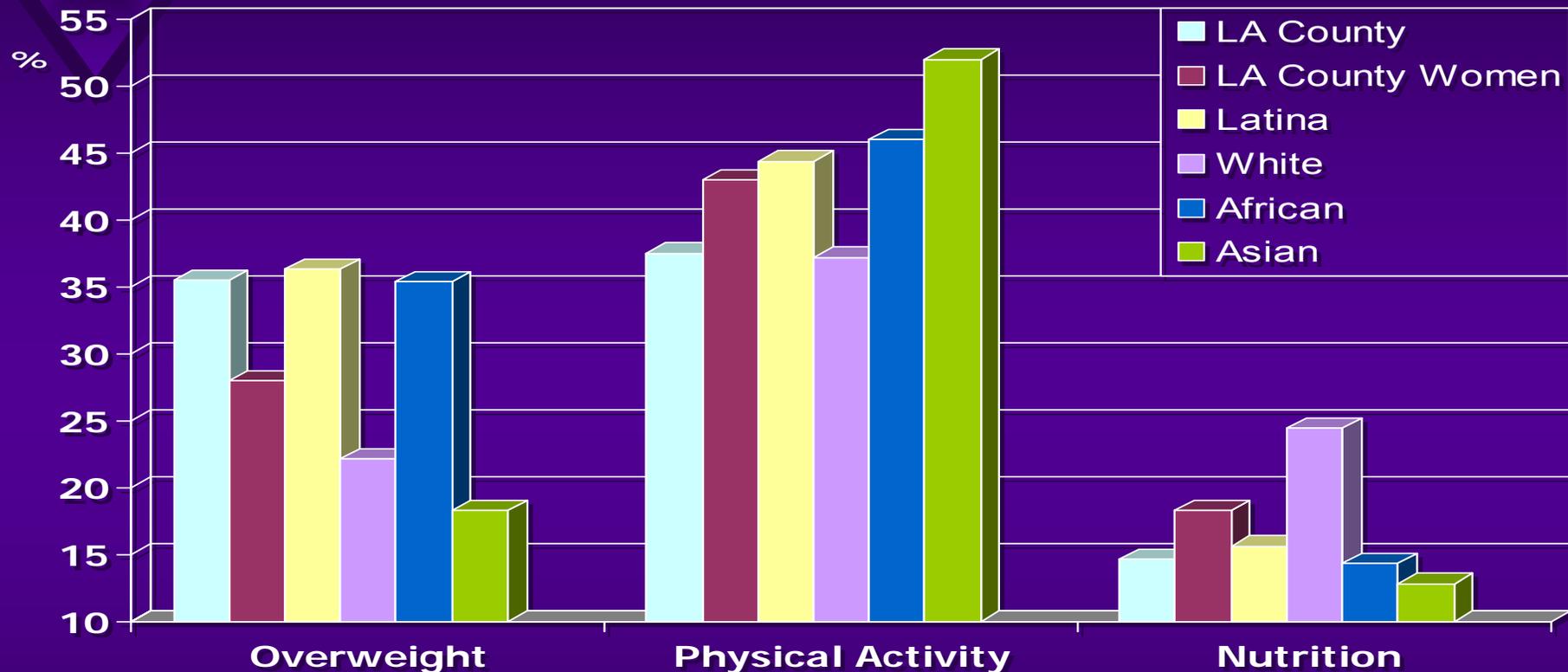
Cancer Mortality for women by Ethnicity



■ LA County
 ■ LA County Women
 ■ Latina
 ■ White
 ■ African
 ■ Asian

* Age-adjusted death rates per 100,000 population * Reference: LA County Dept. of Public Health, 2005

Health Risks and Behaviors for Women by ethnicity



Need for Nutrition and Physical Activities Initiatives that target Women, particularly Ethnic Minority Women

* Overweight:: Percent of adult women who are overweight ($25 \leq \text{BMI} < 30$);

* Physical Activity: Percent of adult women who are minimally active or inactive

* Nutrition: Percent of adult women who consume five or more servings of fruits and vegetables a day

** Reference: L A County Department of Public Health, Mortality in L A County 2004: Leading causes of death, May 2007



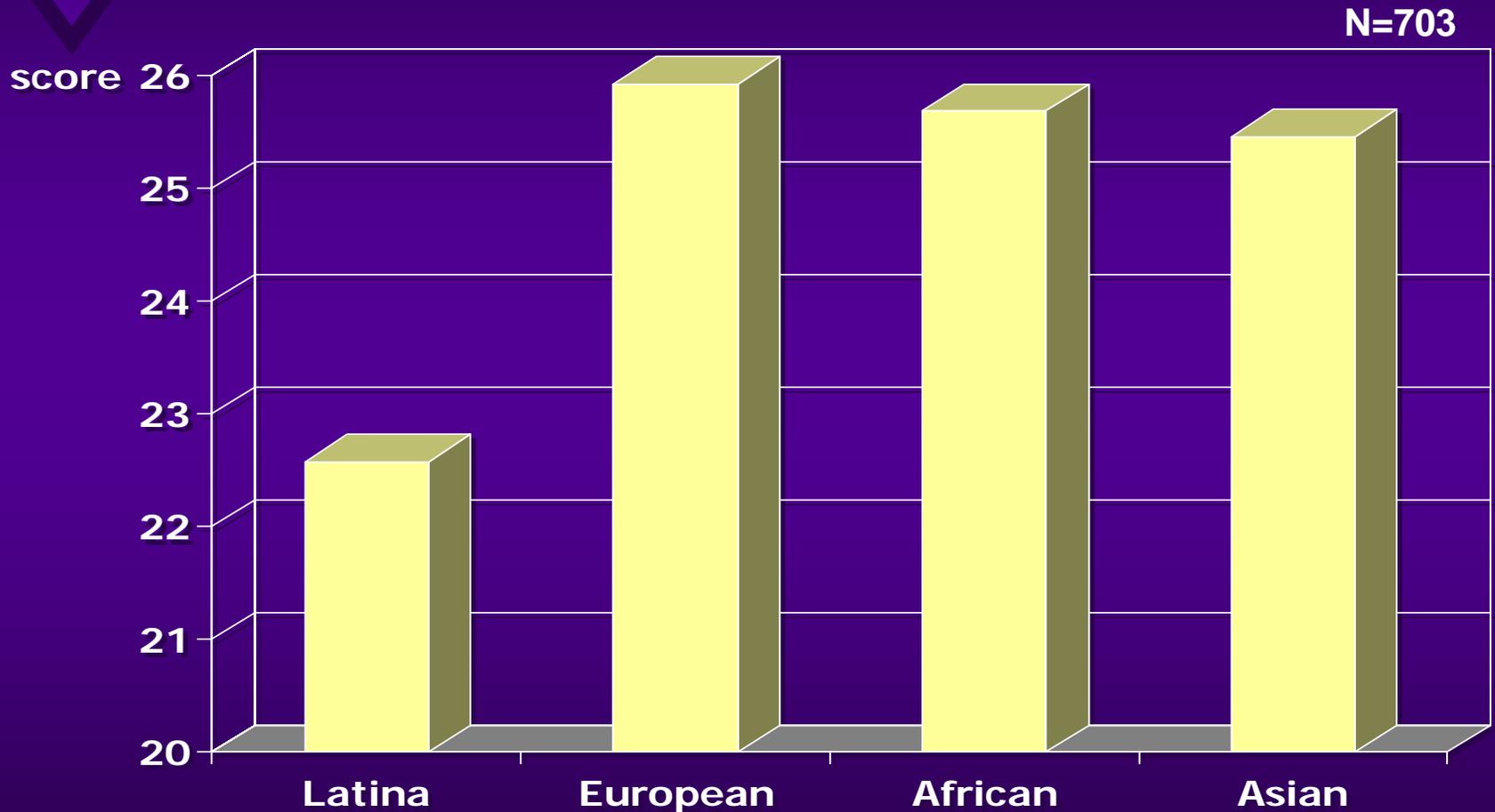
Obesity, Diabetes & Cancer

- ❖ Increased risk of developing Cancer & Heart disease¹:
- ❖ Increased Mortality¹
 - ❖ 62% higher for women & 52% higher for men
- ❖ Increase risk for more aggressive tumors^{2,3}
- ❖ Increased risk for recurrence
- ❖ Increased risk for interference w/ treatments
- ❖ Decrease screening participation

¹Calle et al. 2003, Stoll, 2002.; ²McTiernan, 2005; ³Rose et al., 2004; Stoll, 2002.



Satisfaction with QoC for Breast Cancer Survivors



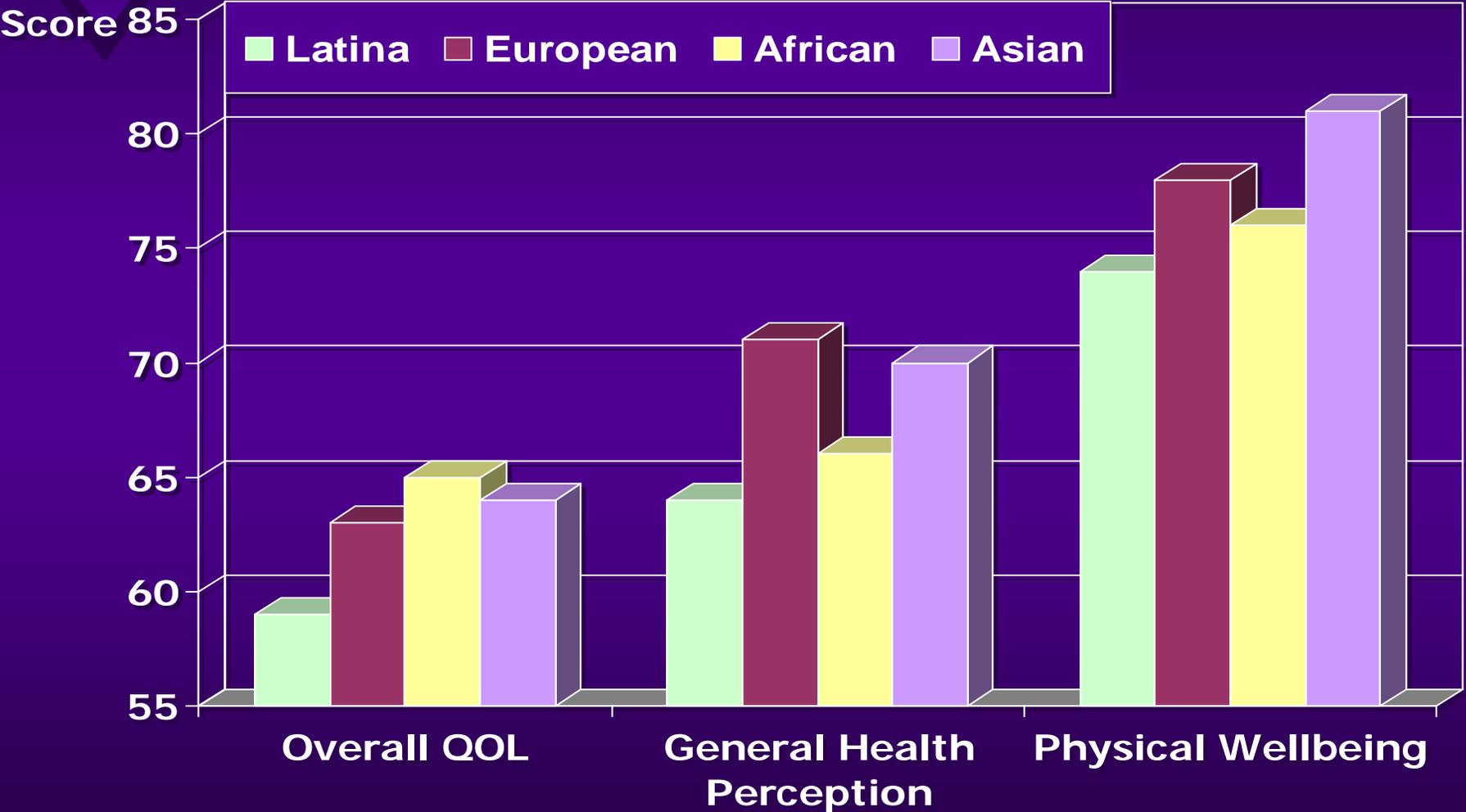
* Higher scores indicates better scores in satisfaction with treatment measured by adherence determinant questionnaires

* This value differed significantly among the ethnic groups ($p < 0.001$)



QOL, Health Perception, and physical wellbeing for Breast Cancer Survivors

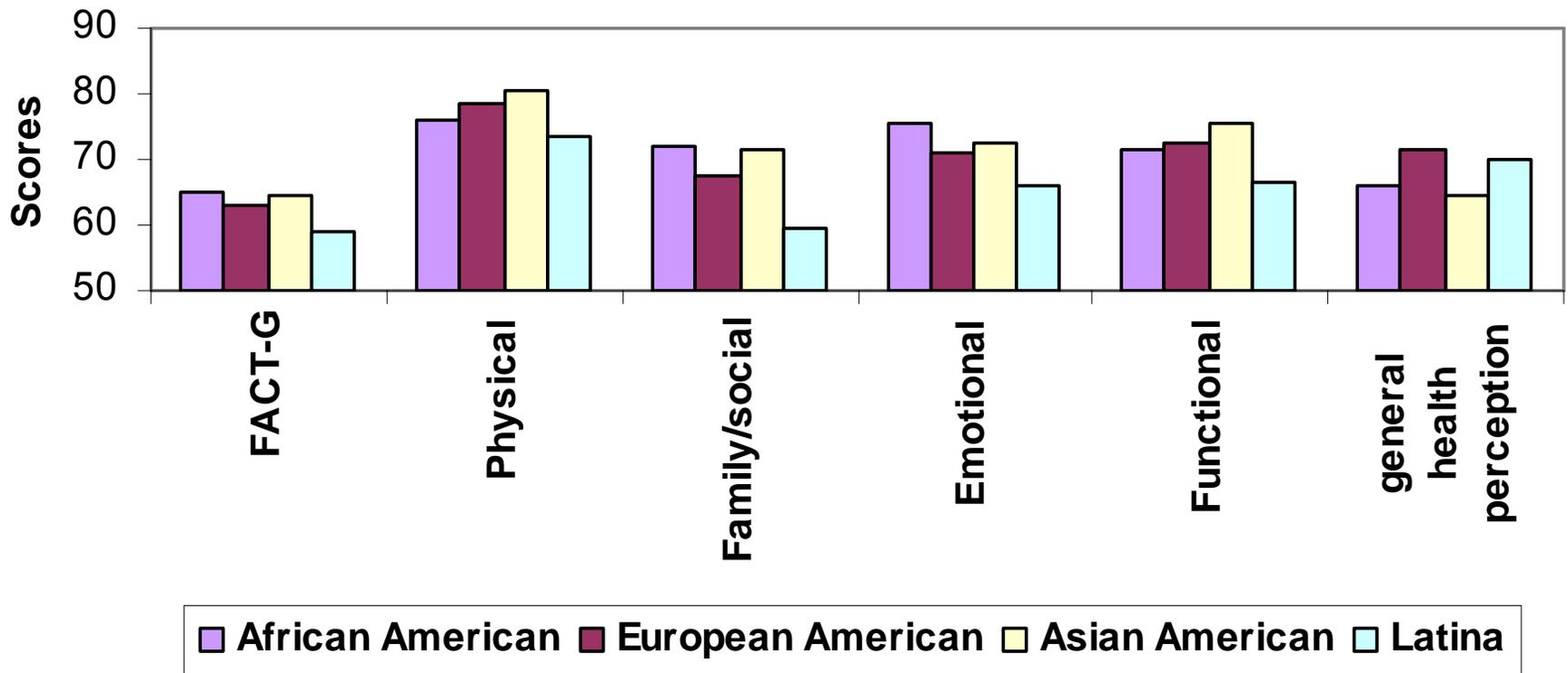
N=703



* Higher scores indicates better scores in overall QOL, Health Perception, and Physical Wellbeing
* All scores differed significantly among the ethnic groups (p <0.001)

Breast Cancer Survivors

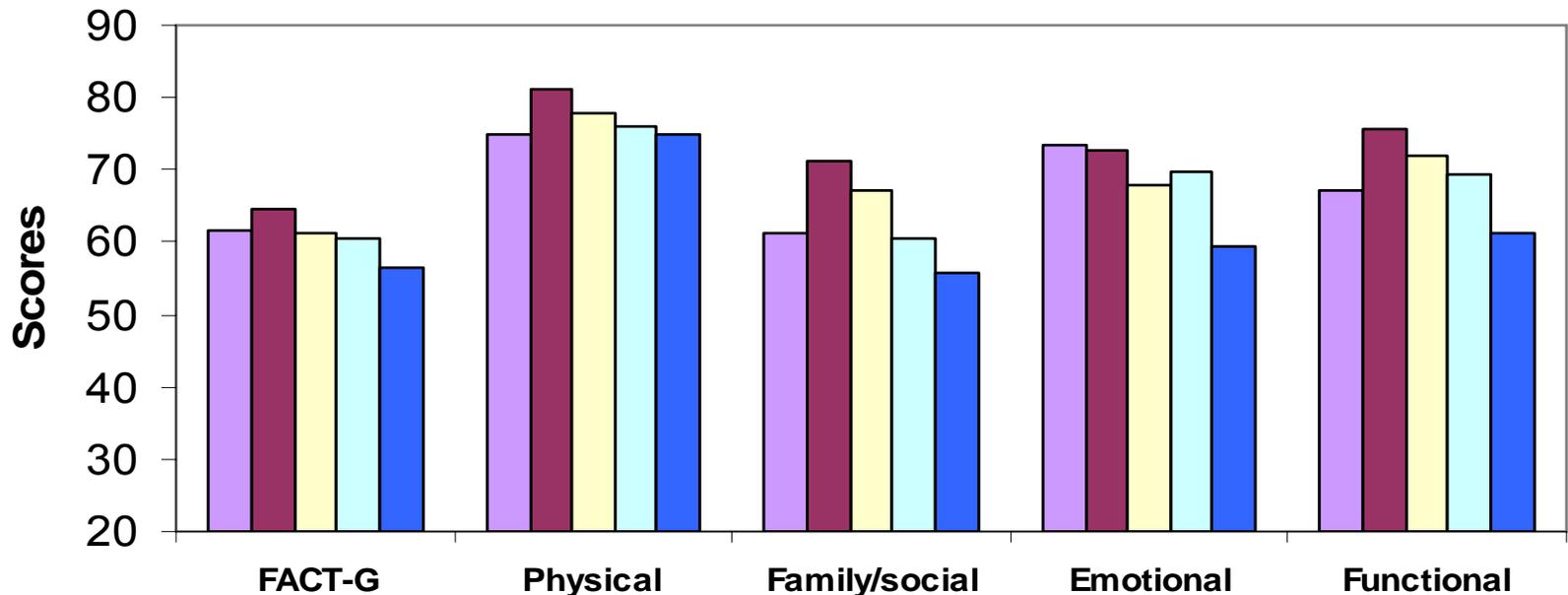
HRQOL scores by ethnicity



* HRQOL scores are significantly different according to ethnicity at a $p < 0.001$

Cervical Cancer Survivors

HRQOL scores by ethnicity



■ African American

■ European American

■ Asian American

■ English speaking Latina

■ Spanish speaking Latina

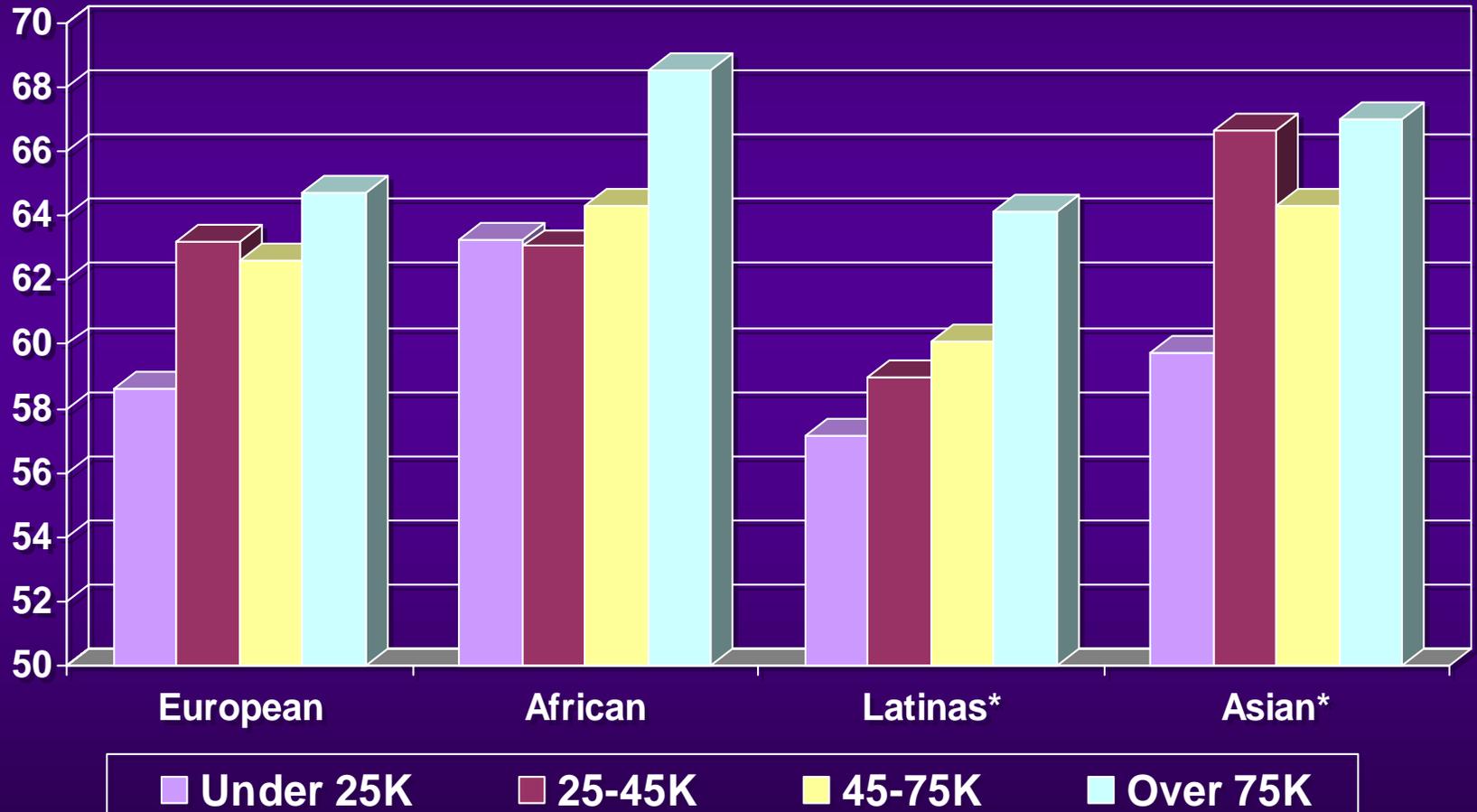
* HRQOL scores are significantly different according to ethnicity at a $p < 0.001$



HRQOL Differences by Income & Ethnicity⁺ in Breast Cancer Survivors

N=703

FACT-G
scores



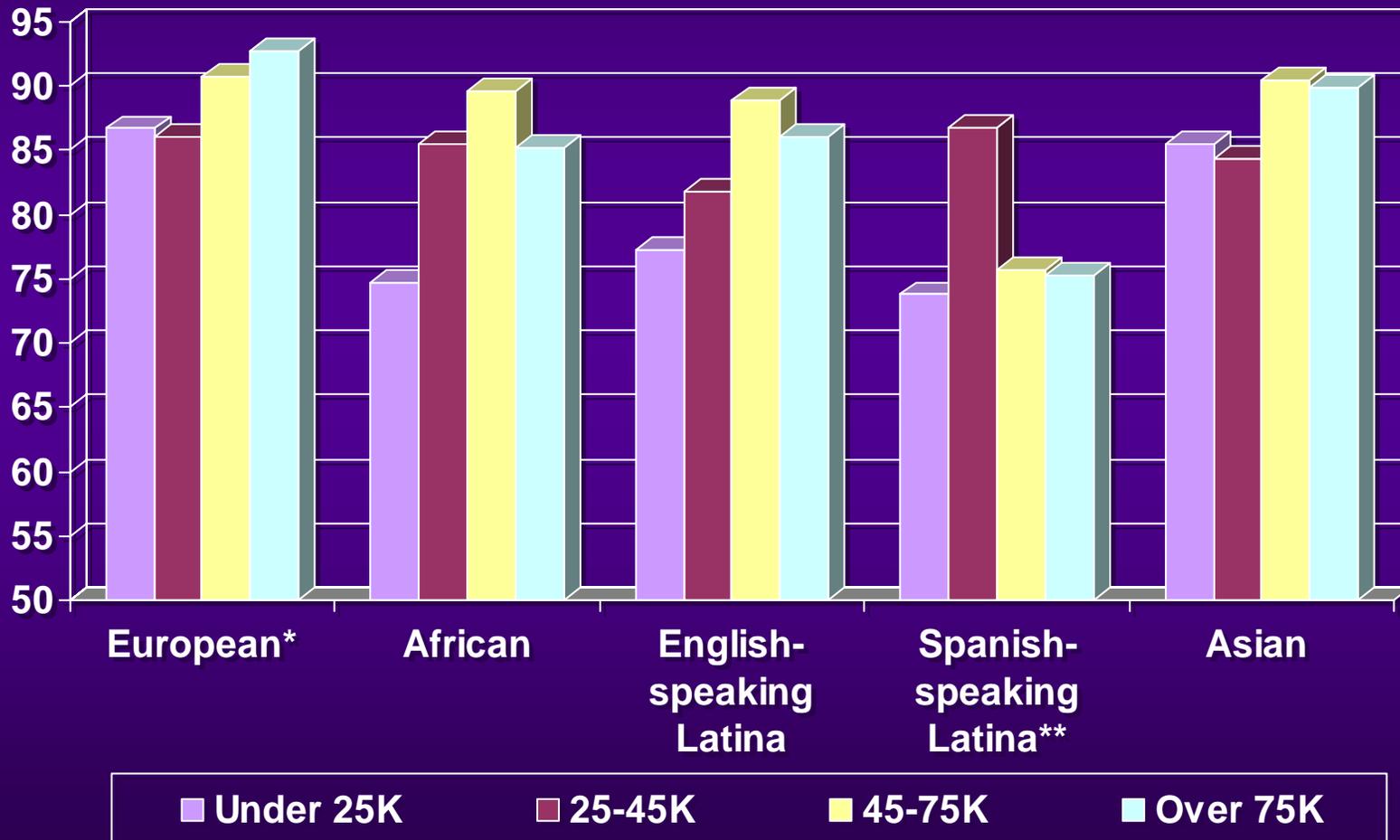
* HRQOL is significantly different according to income at a $p < 0.001$

* HRQOL is significantly different according to ethnicity at a $p < 0.001$

HRQOL Differences by Income & Ethnicity⁺ in Cervical Cancer Survivors

N=666

FACT-G
scores

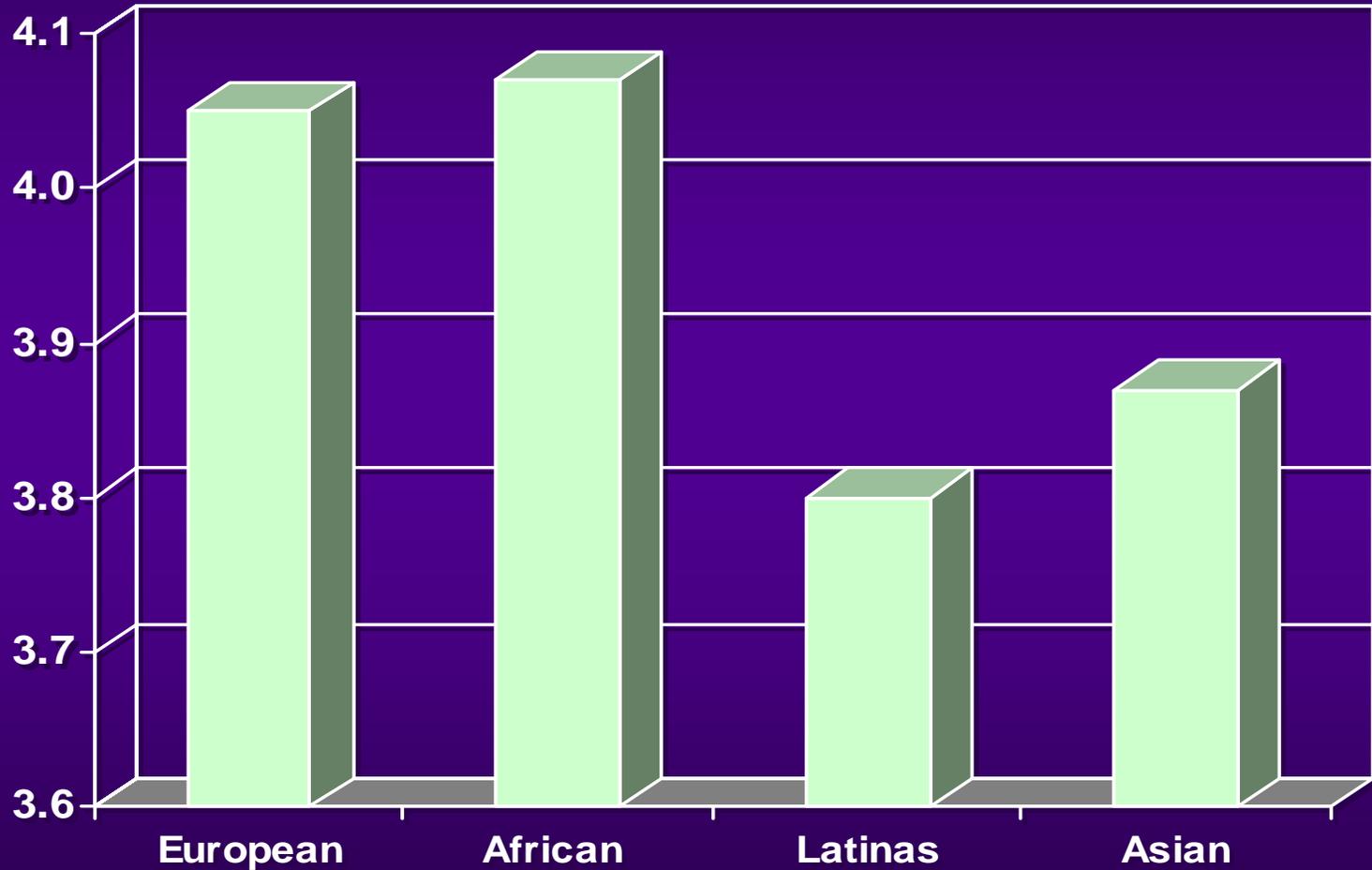


* P < 0.05; ** p < 0.01

⁺ HRQOL is significantly different according to ethnicity at a p < 0.001



Social Support by Ethnicity



* Higher scores indicates better scores in social support and QOL

** Perceived social support differed significantly among the ethnic groups ($p < 0.01$)



Unequal QOL Burden of Cancer

Findings on a population-based cohort of N=1585
Multiethnic, multilingual cancer survivors:

- ❖ Latinas had the least favorable outcomes of all groups with the lowest overall HRQOL, social, emotional, physical and functional outcomes [$p < .01$].
- ❖ African- and Asian American reported poorer general health perception than did Caucasian. [$p < .05$].
- ❖ African- and Latina- Americans experienced worst physical and functional outcomes [$p < .01$].
- ❖ African Americans endorsed favorable overall HRQOL despite reporting physical, functional and general health perceptions challenges.



Legislation & Health Disparities

- ❖ **Civil Rights Act 1964**
- ❖ **Healthcare Research And Quality Act Of 1999 (U.S. PI 106-129)**
- ❖ **The Minority Health And Health Disparities Research And Education Act Of 2000 (U.S. PI 106-525)**
- ❖ **Ca: the Breast And Cervical Cancer Detection And Treatment Program**



Public Policy & Health Disparities

- ❖ **Health Care Coverage for All**
- ❖ **Health Insurance Plan Accountability (prevention program)**
- ❖ **Parks and Recreation Development**
- ❖ **Exercise Campaigns for General Population (5-30-LIVE)**
- ❖ **State and federal Truth Ad campaigns re the 'consumable goods' industry**
- ❖ **Sustainability of Nutrition-Related Programs**
 - ❖ **Healthy Families, WIC, First Five**
- ❖ **Nutrition Campaigns for General Population (9-A-Day)**



Championing Health Equity

- ❖ **Governmental, private & public sectors and community coalitions are vital**
- ❖ **Disparate conditions must be eliminated**
- ❖ **Conditions of housing, education, cost of living as well as access and utilization to health care must improve**
- ❖ **The root cause and maintenance of health disparities must be reconciled**



Value & Practice Statement

- ❖ CCARE engages with the community in a symbiotic relationship to co-educate and exchange knowledge and wisdom. CCARE and the community infuse the best scientific practice with socioecologic and cultural relevance to improve health outcomes and reduce health disparities among diverse and medically underserved communities

Cancer Prevention & Control Programs in Underserved Communities



Community-Collaboratives

Target Problems

- Education/screening
- Prevention
- Quality of care
- Research Participation
- Unequal cancer burden

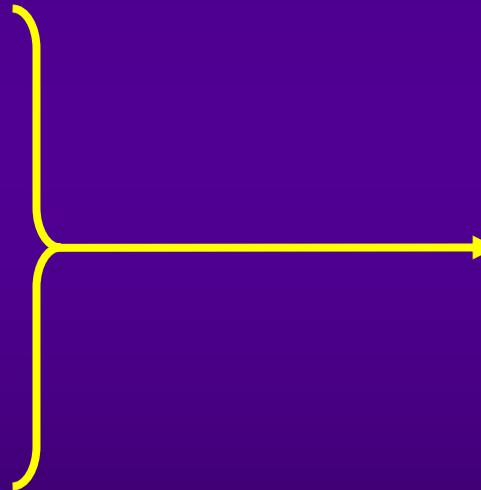
Participants

COH Community:
Physicians,
Scientists,
practitioners

Diverse Community:
Providers,
survivors,
advocates,
members

Outcomes

- Knowledge
- Health
- Promotion
- Competency
- Representation
- Quality of Care
- Community Capacity





QUOTES

“The trauma of discriminatory beliefs and practices is a shared moral, ethical, financial, social, psychological and spiritual experience, and its damage persists as long as there is a surviving member of the afflicter and the afflicted”

- Kimlin Tam Ashing-Giwa, Ph.D.



Contact Information

Kimlin Tam Ashing-Giwa, Ph.D.

Professor & Founding Director

**Center of Community Alliance for Research
and Education (CCARE)**

City of Hope National Medical Center

Duarte, CA

626-256-4673

626-256-8700 (fax)

kashing@coh.org

CCARE Community Flyers



City of Hope Comprehensive Cancer Center Center of Community Alliance for Research and Education



Center for Community Alliance
for Research and Education

*CCARE was developed to further
collaborative cancer education
and control programs
with diverse communities.*

We are inviting breast and cervical cancer survivors to participate in studies to improve quality of life and reduce the burden of cancer.
Call us toll-free at 1-866-704-0474

We also have other clinical studies and services that may benefit you.
Please visit clinicaltrials.coh.org.

For information on best practices in cancer treatment, please visit
www.cityofhope.org/ccc/geninfo/nci.asp.

The City of Hope Cancer Screening & Prevention Program Network and two community health-care systems have established genetic cancer risk-assessment clinics for patients at high risk for inherited cancers. The project provides access to services for multi-ethnic, underserved and underinsured populations.
Call 626-256-8662 for information.

Department of Continuing Education provides health professionals and patient advocates with culturally informed seminars about cancer clinical trials for underserved populations. Please visit cityofhope.org/cme.



City of Hope®
Cancer Center

1500 Duarte Rd., Duarte CA, 91010
866-434-HOPE (4673)

Centro Comprensivo de Cáncer en City of Hope Centro de Investigación y Educación de Aliados en la Comunidad



Centro de Investigación y Educación
de Aliados en la Comunidad

*CCARE fue creado para promover
programas de educación y control
de cáncer en colaboración con
diversas comunidades.*

Estamos invitando sobrevivientes de cáncer del seno y cáncer cervical a participar en estudios para reducir la molestia del cáncer y mejorar la calidad de vida.
Llámenos al numero gratuito 1-866-704-0474

También tenemos otros estudios clínicos y servicios que le pueden beneficiar.
Por favor visite clinicaltrials.coh.org.

Para información sobre mejores entrenamientos y tratamientos del cáncer,
por favor visite www.cityofhope.org/ccc/geninfo/nci.asp.

El programa en la red sobre examinación, prevención y dos sistemas de salud médica en la comunidad han establecido clínicas de asesoramientos sobre riesgos genéticos y el cáncer para pacientes con alto riesgo de cánceres hereditarios. El proyecto proporciona acceso de servicios para diversos grupos culturales, poblaciones sin ningún servicio o sin seguro médico.
Para mas información llame al 626-256-8662.

El departamento de educación continua proporciona profesionales de la salud y consejero de pacientes con seminarios informados culturales sobre ensayos clínicos para poblaciones sin ningún servicio. Por favor visite www.cityofhope.org/cme.



City of Hope®
Cancer Center

1500 Duarte Rd., Duarte CA, 91010
866-434-HOPE (4673)



COMMUNITY FORUM

More African-Americans Die from Cancer — Learn to Beat the Odds

*African-Americans have higher rates of cancer and shorter survival times.
Often cancer is not found until it has spread.*

Many factors influence whether someone will get cancer and survive it. In this community forum, renowned expert Dr. Lovell Jones will discuss how differences in lifestyle, access to health care, use of early detection and screening programs, and genetics contribute to the increased risk of cancer in African-Americans. He will review how these factors are being explored through new research, and what the future holds.



Lovell Jones, Ph.D., is a professor at the University of Texas M.D. Anderson Cancer Center in Houston and serves as the director of the Center for Research on Minority Health. His work focuses on how cancer and other health problems more often affect minorities and the medically underserved.

Monday, March 20, 2006

6:30 p.m.

Jackie Robinson Center

1020 N. Fair Oaks Ave., Pasadena

Free to the public. Refreshments will be served.

For more information or to reserve a seat, call 800-535-1390, ext. 65669

Sponsored by:



**City of Hope®
Cancer Center**

Co-sponsors:



COH Community Events



COH Community Events

THE WELLNESS COMMUNITY-
FOOTHILLS PRESENTS

FIRST ANNUAL WOMEN OF COLOR CANCER AWARENESS CONFERENCE

NETWORK & LEARN MORE ABOUT
CANCER EDUCATION & PREVENTION

SATURDAY, OCTOBER 14, 2006
9:00 - 2:00 PM

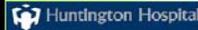
JACKIE ROBINSON
COMMUNITY CENTER
1020 N. FAIR OAKS AVE.
PASADENA

CONTINENTAL BREAKFAST &
LUNCH PROVIDED FOR ALL
REGISTERED ATTENDEES

the
wellness.
community[®]
foothills

The mission of The Wellness Community is to help people affected by cancer enhance their health & well-being through participation in a professional program of emotions support, education & hope. **All services are free of charge** WWW.TWCFOOTHILLS.ORG

IN PARTNERSHIP WITH:



Pasadena Church of God



A FREE WOMAN'S HEALTH EDUCATION PROGRAM FEATURING

KEYNOTE SPEAKER & CANCER SURVIVOR

DR. PAULETTE SADDLER, M.D.

Assistant Professor of Family Medicine USC Keck School of Medicine

&

DR. CATHIE CHUNG, M.D.

Assistant Professor of Clinical Oncology USC Norris Cancer Center

ALSO FEATURING:

- FREE MAMMOGRAMS ON-SITE TO QUALIFYING WOMEN
- FREE HEALTH EDUCATION & PRESENTATIONS
- CELEBRITY GUEST & ENTERTAINMENT

REGISTRATION REQUIRED FOR FREE MAMMOGRAMS

626-796-1083

This program made possible by
an educational grant from



It's Talk About

PROSTATE CANCER

Free Education and Screening Forum

Are You At Risk?
Get the Facts!

and supported by these
community partners:

Huntington Hospital



Jackie Robinson Center and
Pasadena Public Health Department/
MAP Campaign



City of Hope
Cancer Center

Pasadena Church of God



1.800.ACS.2345
www.cancer.org

SATURDAY, JUNE 23, 2007

Registration: 9:30 a.m.

Event time: 10:00 a.m. to 2:00 p.m.

Jackie Robinson Center

1020 N. Fair Oaks Avenue, Pasadena 91103

Come to the 5th Annual Prostate Cancer Forum:

- Helpful Info on Risk Factors, Prevention and Treatment
- Free Lunch
- Prostate Cancer Screening*
- Opportunity to win fun door prizes!

To register for this free event, call (626) 744-7300 by June 18.

* A limited number of free Prostate Screenings will be provided by
Huntington Memorial Hospital. Reservations strongly encouraged.



The American Cancer Society is the nationwide community-based voluntary health organization dedicated to eliminating cancer as a major health problem by preventing cancer, saving lives, and diminishing suffering from cancer through research, education, advocacy, and service.

Vamos a Hablar
Sobre el

CÁNCER DE LA PRÓSTATA

Esta Propenso a Tener
Cáncer de la Próstata?

Foro Educativo y examen gratis

Este evento esta patrocinado por las
siguientes organizaciones comunitarias:

Huntington Hospital



Jackie Robinson Center and
Pasadena Public Health Department/
MAP Campaign



City of Hope
Cancer Center

Pasadena Church of God



1.800.ACS.2345
www.cancer.org

SÁBADO, JUNIO 23, 2007

Registración: 9:30 a.m.

Hora del Evento: 10:00 a.m. a 1:30 p.m.

Jackie Robinson Center

1020 N. Fair Oaks Avenue, Pasadena 91103

Foro Anual del Cáncer de la Próstata:

- Información útil sobre factores de riesgo, prevención y tratamiento
- Almuerzo Gratis
- Examen para detectar Cáncer de la Próstata*
- Oportunidad de ganar premios!

Para registrarse a este evento gratuito, llame al
(626) 744-7300 antes de Junio 18.

* El Hospital Huntington proporcionara un número limitado de exámenes gratuitos para
detectar el cáncer de la próstata. Por esta razón recomendamos que se registre lo
antes posible.



The American Cancer Society is the nationwide community-based voluntary health organization dedicated to eliminating cancer as a major health problem by preventing cancer, saving lives, and diminishing suffering from cancer through research, education, advocacy, and service.