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Cancer death rates for African-Americans far exceed non-Hispanic Caucasians in the United States, and only community-driven approaches to reducing health disparities will lessen the gap, says Edward Partridge, M.D., president-elect of the American Cancer Society (ACS) National Board of Directors and director of the University of Alabama at Birmingham (UAB) Comprehensive Cancer Center.

Tobacco use and related cancers have decreased the mortality gap but not significantly, say Partridge and his co-author, Mona Fouad, M.D., director of the UAB Minority Health & Health Disparities Research Center, in a commentary.

The commentary appears March 17 in the *Journal of the American Medical Association (JAMA)* in a cancer-themed issue. The issue includes an introductory editorial by Boris Pasche, M.D., Ph.D., director of the UAB Division of Hematology and Oncology and deputy director of the cancer center, who says evidence-based outreach is an important cancer-fighting approach.

Partridge and Fouad say there are many contributing factors to cancer-death disparities, including limited access to care, prevalence of prevention and detection programs, differences in healthy behaviors that decrease cancer risk and other factors. Advances in oncology practice and medical technology also widen the disparity gap because not everyone benefits from those advances equally.

More work needs to be to done fully understand these factors and implement programs that reduce the disparities, Partridge and Fouad say.

"Elimination of the screening gap between African-American and white patients for breast, cervical, and colorectal cancer is perhaps the easiest way," the authors say. The commentary highlights a UAB project that increased screenings - basically eliminating the disparities for Medicare mammography rates in select Alabama and Mississippi counties.

"Screening is in many ways the low-hanging fruit that enables programs to demonstrate success, and it also is an effective way to engage the community because the task is clear, achievable and measurable in the short term," Partridge and Fouad say. The more complex solutions involve programs that target individual behaviors for change, such as increasing exercise or eliminating tobacco use.

"The first step is to engage the community," the authors say, pointing out that organizations, academic institutions and public agencies must figure out the best way to interact and bond with diverse populations so that building trust becomes inherent in cancer-prevention and intervention programs.

Partridge and Fouad highlight the World Health Organization's report on the social determinants

of health, and they list these recommendations from the report in their *JAMA* commentary:

--Improve daily living conditions.

--Tackle the inequitable distribution of power, money and resources.

--Measure and understand the problem and assess the effects of action.

The UAB Minority Health & Health Disparities Research Center is a comprehensive educational, research and community-outreach center focused on eliminating the health disparities of racial/ethnic minorities and under-served populations.

The UAB Comprehensive Cancer Center is among the 40 cancer centers in the nation to meet the stringent criteria for the National Cancer Institute's comprehensive designation. The center is a leader in groundbreaking research, reducing cancer disparities and leading-edge patient care.

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