

---

San Marcos, Summer 2020

Research Day, San Marcos Campus

---

Summer 8-19-2020

## Remedying Healthcare Disparities Affecting the Black Community

Savonna Reed

University of St. Augustine for Health Sciences, [s.reed1@usa.edu](mailto:s.reed1@usa.edu)

Follow this and additional works at: <https://soar.usa.edu/casmsummer2020>



Part of the [Health and Medical Administration Commons](#), [Health Services Research Commons](#), [Inequality and Stratification Commons](#), [Physical Therapy Commons](#), and the [Physiotherapy Commons](#)

---

### Recommended Citation

Reed, Savonna, "Remedying Healthcare Disparities Affecting the Black Community" (2020). *San Marcos, Summer 2020*. 3.

<https://soar.usa.edu/casmsummer2020/3>

This Poster/presentation is brought to you for free and open access by the Research Day, San Marcos Campus at SOAR @ USA. It has been accepted for inclusion in San Marcos, Summer 2020 by an authorized administrator of SOAR @ USA. For more information, please contact [soar@usa.edu](mailto:soar@usa.edu), [erobinson@usa.edu](mailto:erobinson@usa.edu).



# Remedying Healthcare Disparities Affecting the Black Community

## Savonna Reed SPT

### BACKGROUND

Healthcare disparities impacting the healthcare outcomes of minorities are the result of :

- underrepresentation of people of color as clinicians
- socioeconomic environment
- limited access to adequate healthcare insurance/services.

Minority communities have fewer supermarkets to purchase healthy foods and are targeted to purchase lower quality, cheaper junk food leading to an increased risk of disease and mortality due to metabolic syndrome.<sup>1,2</sup>

Inadequate nutrition has been associated with <sup>1</sup>:

- decreased physical activity
- emotional eating
- depressive symptoms

The well-documented healthcare disparities that impact the Black community require immediate intervention.

### PURPOSE

The purpose of this literature review is to determine how black communities are being impacted by racial/social determinants of cardiovascular health, and to investigate potential healthcare solutions to eliminate these disparities. As physical therapists, we commonly treat patients following lumbar spinal fusion surgery. Post-op outcomes have been found to be impacted by racial disparities in decision making in whether care providers offer surgical care, differences in access to care due to socioeconomic barriers, and differences in attitudes towards surgical care among ethnic groups.<sup>3</sup>

### METHODS

Search USA was used to search multiple databases with keywords “healthcare disparities and was limited to peer reviewed articles published in academic journals within the last 10 years, resulting in >50k articles. Addition of the terms cardiovascular disease, food insecurity, lumbar spinal fusion surgery, and healthcare disparities in the black community narrowed the study to X articles. Strategies regarding the impact of race on the outcome of lumbar spinal fusion surgery, community-based programs to reduce rates of hypertension and food insecurity in minority communities, cultural competence training of physicians, and implicit bias present in healthcare practitioners were included.

### RESULTS

#### Increased risk of complications following lumbar fusion surgery

Black patients were 8%-14% more likely than white patients to experience spine surgery specific complications.<sup>5</sup>

Black patients experienced increases postoperative length of stay, major complications, and need for continued care post-op.<sup>5</sup>

Black patients experienced higher risk for mortality, higher 30-and 90-day readmissions and higher surgical cost.<sup>5</sup>

#### Increased Cardiovascular and Mortality Risk

With new guidelines of 130/80 established by American Heart Association in 2017, the HTN rate of African American men and women increased to 59% and 56% respectively.<sup>4</sup>

Los Angeles barbershop study resulted in systolic BP decrease of 21.6 mmHg and diastolic BP decrease of 14.9 mmHg after 6-months.<sup>4</sup>

African Americans are 1.8 times more likely to die from stroke, 1.5 times increased chance of death from CVD, and 4.2 times increased chance of death from renal disease compared to whites.<sup>4</sup>

Gap between life expectancy of Asian females in and black males living in urban areas in is 20.7 years.<sup>8</sup>

15 y.o black men and women in living in urban areas were, respectively 4.7 and 3.8 times more likely to die before age 45.<sup>8</sup>

#### Systemic Disparities Reducing Quality of Patient Care

50% of uninsured Americans are of historically underrepresented groups.<sup>2</sup>

3% of Physical therapy students are Black, 6% Hispanic, and 8% Asian.<sup>9</sup>

African Americans reported poor communication with physician with limited use of lay-person language, limited eye contact, and lack of empathy.<sup>10</sup> Individuals also expressed belief that patient care was guided by revenue rather than the best interest of the patient.<sup>10</sup>

#### Limited access to community and healthcare resources

Predominantly white neighborhoods had 4 times as many supermarkets than black neighborhoods with fewer parks, green spaces, and bike paths to engage in physical activity.<sup>1</sup> 2/3 of patients at community health centers identify as racial and ethnic minorities.<sup>2</sup>

Local food environment presents challenges with food shopping experience of caregivers including access to supermarkets, variety, quality and price of foods, and customer service/ treatment in the local stores.<sup>6</sup>

Food available at local supermarket was considered low-quality and sold at higher prices than larger supermarkets outside of the local neighborhood.<sup>6</sup>

Participants relied on social networks and community support for transportation to stores outside of their neighborhood.<sup>6</sup>

Native Americans and low-income Southern blacks self-reported the lowest rates healthcare coverage.<sup>8</sup>

### Ethnic Minority & Disadvantaged Socioeconomic Status



### DISCUSSION/CONCLUSION

Review of current literature has revealed that more research should be done to establish ways of remedying the systemic and environmental issues influencing healthcare disparities.

Methods that have been proposed to mediate disparities impacting the well-being of minorities populations are:

- Community-based programs to establish trust with the medical profession within the black community
- Improve access to adequate affordable healthcare, nutritious foods, and other health resources
- Increase recruitment of minorities into healthcare professions

### REFERENCES



### ACKNOWLEDGMENT

Thank you Dr. Gonzalez-Cabrera and Dr. Balakrishnan for your guidance through this project.