

**University of Illinois Center for Population Health and Health Disparities
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Abstract

This Center has four aims: 1) to use the elements of the Berkman and Glass model to address the disparity that we have defined as the Center's theme, "The Apparent Disconnect between Rates of Screening and the Stage of Diagnosis of Breast Cancer by Race and Ethnicity". The "disconnect" arises because African American women and Hispanic women increasingly report receiving mammography at rates equivalent to those reported by Caucasian women. Yet, African American and Hispanic women continue to experience higher breast cancer mortality rates compared to Caucasian women; 2) to develop this model and the variables to the point where it can be tested with breast cancer and then eventually, be extended to other cancers where similar disparities exist; 3) to develop the capacity to conduct multidisciplinary research that addresses the biological, behavioral, social and environmental factors that affect prognosis and outcome of cancer; 4) to demonstrate through a sustainable partnership with one or more community-based organizations the use of theory-driven interventions which, if shown to be successful, can be integrated into the way in which cancer is detected and managed in the community. Four projects and four cores comprise this Center. The Cores are: Core A: Administration, Core B: Ascertainment of patients; Core C: Survey Research Core, and Core D, The Statistical; Core. These cores support four projects. **Project 1: Neighborhood and Individual Effect on Stage at Diagnosis** (Richard B. Warnecke, PI). This project is being carried out with a community-based partner. **Project 2: Social Network Effects on Breast Cancer Prognosis** Yoosik Youm, PI). **Project 3: Breast Cancer Delay in Black, Hispanic and White Women.** (Carol Estwing Ferrans, PI). **Project 4: Mediators of Ethnic Disparity in Breast Cancer Prognosis** (Garth Rauscher, P). All studies have interdisciplinary teams and the questions asked by each study are interrelated and focus on the four levels of impact on breast cancer disparity from the community, to the interpersonal network to the individual and finally to the issues of access to care. All are multilevel and include social, behavioral and community level issues.

Community Partners

- Healthcare Consortium of Illinois (Healthy South Chicago and the Greater Roseland Health District Council)
- Chicago Breast Health Task Force – Chicago Department of Public Health
- Illinois State Cancer Register – Illinois Department of Public Health