For many people, eating enough fruits and vegetables every day is difficult, even while living in a major city surrounded by food. But imagine how much more challenging it would be if you had few grocery stores with fresh produce nearby, and you had limited access to the ones that were there.
That’s exactly the challenge that faces many residents in the rural areas of the Alabama Black Belt and the Mississippi Delta, and it’s one reason that obesity and health disparities are a major problem among these underserved—primarily African-American—populations.

To address this issue, the UAB Comprehensive Cancer Center, through its Deep South Network for Cancer Control (DSN), in 2012 launched the Journey to Better Health Research Project, a five-year, randomized study funded by the National Cancer Institute examining weight-loss strategies and maintenance in overweight and obese African-American women in the Black Belt and Delta regions.

Specifically, the trial will target eight rural counties (four in Alabama and four in Mississippi). Participants will be randomly assigned to one of two groups for two years. The first group will follow a weight-loss program, including weekly sessions for six months followed by another year of sessions and motivational phone calls as part of a weight-loss maintenance program. The second group will follow the same weight-loss program, but the DSN will also provide seed money to the communities to help them provide greater opportunities for increased physical activity and better access to healthier foods.

“The communities receive seed grants to, for instance, modify their parks and recreational areas, such as adding an indoor walking track, or to provide discounts to existing farmers markets for people to purchase fresher produce,” says Monica Baskin, Ph.D., Cancer Center associate scientist and principal investigator on the project. “We can provide education and talk to people about doing the right thing, but the physical environment around them can make it very difficult—even when they’re motivated to do the right thing. That’s the piece where the community strategies come in.”

Needs of the Many

Part of those strategies required the DSN to conduct needs assessments in the targeted communities to identify the various issues faced, such as access and walkability. The data was presented to community leaders and nonprofits to challenge them to compete for the available funds to make improvements. The strategy is paying off. “One of our grantees is partnering with the local grocery store to connect smaller stores with farmers and make sure farmers can provide produce—even in settings where we typically don’t see a lot of it, such as convenience stores and ‘mom and pop’ stores,” Dr. Baskin says.

Access to produce is a key component of the project’s weight-loss program, Dr. Baskin says. The program encourages high consumption of fresh fruits and vegetables coupled with 30 minutes of moderate to vigorous physical activity at least five days a week, while limiting high-calorie beverages, high-fat dairy products and foods high in sugars and fats. However, the DSN team stresses taking a realistic approach to the program.

“We talk to people about not making the program so restrictive that it’s impossible to maintain,” Dr. Baskin says. “The overall goal is long-term lifestyle change.”

Women participating in the program are provided with journals to keep track of everything they eat and drink and to record their physical activity levels. The weight-loss sessions are led by local women who live in the community, which has been a key component in the success of the DSN’s other initiatives. “This program isn’t run by dietitians and behavioral psychologists at UAB. It’s a locally run program,” Dr. Baskin says. “In each county, there’s one person who works with a regional coordinator for the first six months. After that, the local coordinator runs the remainder of the program. So there’s a person within the community who has the resources and the tools to continue this even after the research study portion is over.”

As of early 2013, half of the targeted counties had completed their first phase of sessions, and the remain-
Monica Baskin, Ph.D., has recently been funded by the NCI to conduct a similar study focused solely on cancer survivors in nine Black Belt counties.

ing counties had begun recruiting participants. Over the length of the study, 400 women will be recruited and enrolled.

**Next Steps**

Before the end of the five-year grant, Dr. Baskin will begin looking at other funding mechanisms to sustain the program. The Journey to Better Health program, however, is an example of the DSN’s shift to becoming more research-focused instead of awareness-focused.

“The first five years of the DSN were devoted to developing community partnerships, and the next five years were geared to leveraging those relationships to do community-level outreach and awareness,” Dr. Baskin says. “Those things more clearly fit with what the community members saw in promoting cancer health disparities: educating residents and helping them get screenings and treatment when necessary. The NCI now wants us to conduct more randomized trials to advance the science, which is very different from what our community partners are used to. We want to stay true to the relationships we’ve had for the last 10 years, so we’ve had to help them understand the difference between outreach and research.”

As a spin-off of the Journey to Better Health project, Dr. Baskin has recently been funded by the NCI to conduct a similar study focused solely on cancer survivors in nine Black Belt counties. This study will enroll both men and women and will involve three cancers: colorectal, breast and prostate. The idea is the same as the Journey to Better Health—promoting healthier lifestyles, weight loss and weight-loss maintenance to improve quality of life.

Regardless, a key aspect of these studies—along with everything the DSN does—is gaining the involvement and participation of the community members. “The partnership forces us to realize that we know the things that are supposed to work, but our community partners know a tremendous amount about what can really work in the communities,” Dr. Baskin says. “It’s refreshing to have a true partnership where we’re all coming to the table for the same common goal. We think that model is the only one that makes sense in terms of moving things from the academic shelves to actually being on the ground in the communities where it can really make a difference.”