Healthy People 2010 has two overarching goals: to increase the span of healthy life and to eliminate health disparities across the categories of gender, race or ethnicity, education or income, disability, geographic location, and sexual orientation. This report raises some conceptual issues and provides an innovative methodological approach germane to measuring progress toward the goal of eliminating health disparities. It highlights major issues that may affect the choice of measurement techniques and systematically reviews methods used in health disparities research. The authors recommend a sequence of steps to measure and monitor cancer-related disparity trends using a suite of indicators and measurement strategies explaining in detail the strengths and weaknesses of each.

- In most situations a single measure will not provide adequate and appropriate information for policy decisions relating to disparities in health.
- Absolute and relative measures, e.g. changes in the absolute frequency of cancer of two groups vs. the changes in the relative frequency, can often lead to different conclusions about whether health disparities between these groups are increasing or decreasing.
- It is important to take into account the size of population groups or segments and their share of the total population along with the magnitude of their disparities to determine the impact of these disparities on the public health system.

This report was written under contract from the Surveillance Research Program (SRP) and the Applied Research Program (ARP) of the Division of Cancer Control and Population Sciences of the National Cancer Institute, NIH. Additional support was provided by the Office of Disease Prevention in the Office of the Director at the National Institutes of Health. It represents the interests of these organizations in health disparities related to cancer, quantitative assessment and monitoring of these disparities, and interventions to remove them. NCI Project Officers for this contract are Marsha E. Reichman, Ph.D. (SRP), Bryce Reeve, Ph.D. (ARP), Stephen Meersman, Ph.D. (SRP) and Nancy Breen, Ph.D. (ARP).

Suggested Citation