

Call (828) 251-8364 today to schedule an ABIPA event for your organization or church

OFF SITE ACTIVITIES

Heart Health Lunch & Learn

Wednesdays, April 10, 17, 24

From 12:30 to 2:30 p.m. at the Linwood Crump Shiloh Recreation Complex.

SAVE THE DATE

HER - Health **Education** Revolution

Health Fair. Saturday, May 18, 1 to 5 p.m. at Pisgah View Apartments.

MMMP Banquet Thursday, May 23, 7 to 9 p.m. at MAHEC.

Ladies Night Out

First Thursday of each month, 4 to 8 p.m. FREE physicals, mammograms, and health education for qualifying uninsured or underinsured women. Transportation provided. Free childcare, refreshments, bloodpressure checks, cholesterol screenings, and pap smears. Call (828) 250-6006 to make your appointment.

56 Walton Street

Office: (828) 251-8364

Mailing address: PO Box 448

Institute of Parity

ABIPA promotes economic, social, and healthy parity achievement for African Americans and other people of color in Buncombe County through advocacy, community partnerships.

www.ABIPA.org

BIPA Health Highlights

LOCATE • EDUCATE • NAVIGATE • **ADVOCATE**



align at the same time.

Studio.

Wikipedia.

Market Streets Development

Corporation and its incubator,

which will be phased out over

African American business on

the next few years, the only other

Market Street is Stefanie's Design

Fe, Fi, Pho, Fom, has

of "gentrification" as defined by

that emerges in poor urban

of a neighborhood.

areas when residential shifts,

urban planning, and other phe-

nomena affect the composition

involves population migration

Urban gentrification often

First let's explore the definition

Gentrification – a dynamic

the Gentrification

Giant Come?

Gentrification?

Have you taken a ride down Market Street recently?

by Je'Wana Grier-McEachin, Executive Director Photo by JaíEssence McEachin

As you know, as of April 1 as poor residents of a ABIPA is no longer on the Block, neighborhood are disbut, a few other establishments placed. In a community underare gone too. Amazingly it was not going gentrification, the average planned, the stars just seemed to income increases and average family size decreases. Excluding the YMI, and Eagle

This generally results in the displacement of the poorer, pregentrification residents, who are unable to pay increased rents, and property taxes, or afford real estate. Often old industrial buildings are converted to residences and shops.

New businesses, which can afford increased commercial rent, cater to a more affluent base of consumers—further increasing the appeal to higher income migrants and decreasing the accessibility to the poor. Often, resident owners, unable to pay the taxes, are forced to sell their residences and move to a cheaper community.

Political action, either to promote or oppose the gentrification, is often the community's response against unintended economic eviction. However,



Photo: Urban News

local governments may favor gentrification because of the increased tax base associated with the new high-income residents, as well as because of other perceived benefits of moving poor people and rehabilitating deteriorated areas.

Does any of this sound familiar? As anyone who is a native of Asheville or a transplant knows, this process did not just begin. It has a deep rooted history of stops and starts. I think it is an amazing phenomenon to watch and compare with similar stories told in places across the country like Washington D.C.'s U Street.

Are You Prepared?

If nothing else, I think the community should not only ask questions of the powers that be, but of yourself. When the revitalization occurs, are you poised and credit worthy to move in to the affordable housing that will

APRIL 2013

On Site Activities 56 Walton Street

Brother 2 Brother Breakfast Club

Saturday, April 13

Prostate & Diabetes Health. 8 a.m. at the ABIPA office.

Healthy Breakfast Options provided by



Dessert With a Doc

Thursday, April 18 6 p.m. at ABIPA.

Sista 2 Sista Lunch & Learn

Saturday, April 20

Breast Cancer Support Group. 12 noon at ABIPA.

be present? Do you have a business that could move into the store fronts at market rate and thrive?

••••••

If your answer is no, are you planning to get ready? Are you involved in developing and supporting cultural activities at the YMI?

Your answers to these questions will determine whether this will be just another case of gentrification or a true renaissance, if only on the Block.

Kathey Avery, RN

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Asheville Buncombe **Achievement**

April is Minority Health Awareness Month

by Kathey Avery, RN

We clearly can not slow down our efforts to change the health outcomes in our

community. Spiritually, God wants us to live a healthy prosperous life.

The health outcomes for African Americans show there is much we can do as individuals to achieve this goal. Health is closely connected to income and education. The better we do at both is predictable of our future.

ABIPA provides preventive care and parity education for individuals in WNC. We are dedicated to serving our community to improve the health and social-economics for the underserved, low income, and African Americans in our community.

What You Need to Know

African Americans have shorter survival rates at all stages of cancer diagnosis than our white counterparts.

Prostate cancer is the #1 cancer in African American men, followed by lung cancer, colon rectal cancer. African Americans have a higher death rate from prostate cancer. African American men develop prostate cancer 60% more often than white men and are twice more likely to die from it than men in any other racial or ethnic group.

Fewer African American women develop breast cancer than white women, but black women are more likely to die from the disease, followed by lung, colorectal cancer. Breast cancer is the second leading cause of death excluding lung cancer.

African Americans have the

highest colorectal cancer incidence and mortality rates of all racial groups in United States. The link between diet, weight, exercise and colorectal cancer risk are some of the strongest of any types of cancer.

Current guidelines may be inadequate in at-risk African American and Latino populations. African Americans should be screened at an earlier age according to two separate studies. Insured African Americans have a better survival rate than uninsured African Americans.

African Americans have a higher incidence of cardiovascular disease. About one out of four deaths among African Americans are due to heart disease. The rate of death from heart disease is 31 % higher among African Americans than among whites. Among African Americans, about 65,000 men and 60.000 women have a heart attack each year.

African Americans are more likely to have high blood pressure than any other racial or ethnic group in this country. In fact African Americans have one of the highest rates of high blood pressure in the world.

High blood pressure tends to develop at an earlier age, and to be more severe in African Americans than in whites. African American women are especially at risk. Compared to white women, African American women are three times more likely to die from heart disease or stroke before age 60.

Each year, more than 19,000 African Americans die of stroke.