

# Residential segregation tied to worse type 1 diabetes outcomes in Black youth

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Racial residential segregation is associated with glycemic control in

Black youth with type 1 diabetes (T1D), according to a study published online April 25 in *Pediatrics*.

Deborah A. Ellis, Ph.D., from Wayne State University in Detroit, and colleagues investigated the effects of racial residential segregation on the [diabetes](#) health of young Black adolescents with T1D. The analysis included 148 participants seen at one of seven pediatric diabetes clinics in two U.S. cities.

The researchers found that hemoglobin A1c (HbA1c) was significantly associated with racial residential segregation, while youth-reported diabetes management was not. Family income, age, and insulin delivery method were all significantly associated with HbA1c in model 1 of hierarchical regression analyses, but only racial residential segregation, age, and insulin delivery method were significantly associated with HbA1c in model 2. One-quarter of variance in HbA1c was explained by model 2, even after controlling for adverse neighborhood conditions.

"Racial residential segregation was associated with [glycemic control](#) in a sample of Black youth with T1D and accounted for variance in HbA1c even after controlling for adverse neighborhood conditions," the authors write. "Policies to reduce residential segregation, along with improved screening for neighborhood-level risk, hold the potential to improve the health of a vulnerable population of youth."

**More information:** Deborah A. Ellis et al, Racial Residential Segregation and the Health of Black Youth With Type 1 Diabetes, *Pediatrics* (2023). [DOI: 10.1542/peds.2022-058856](https://doi.org/10.1542/peds.2022-058856)

J'Mag Karbeah et al, Multidimensional Approaches to Understanding Structural Racism's Impact on Type 1 Diabetes, *Pediatrics* (2023). [DOI: 10.1542/peds.2022-060800](https://doi.org/10.1542/peds.2022-060800)

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