



SOUTH CAROLINA FAMILY AND COMMUNITY LEADERS

Affiliated with National Volunteer Outreach Network, Country Women's Council, U.S.A., Associated Country Women of the World and in partnership with Clemson University Cooperative Extension Service

SCFCL website: <http://www.scfcl.com>

Leader Training Guide

Hypertension as a Health Disparity

Objectives:

The participants will be able to:

1. Educate leaders on risk factors and social environments of hypertension.
2. Equip leaders with evidence-based knowledge about hypertension, including its causes, risk factors, complications, prevention strategies, and evidence-based approaches to management.
3. Connect leaders to community, local, and state resources to support self-management of hypertension to promote overall wellness.

Lesson Overview/Introduction:

Approximately 119.9 million Americans have been diagnosed with hypertension, making it one of the most common chronic diseases in the United States. In South Carolina, an estimated 1.5 million people have been medically diagnosed with this condition, which is often asymptomatic and is known as the "silent killer." Hypertension affects nearly half of the adult population and is influenced by factors such as family history, geographic location, access to healthcare, age, and lifestyle. Understanding the risk factors, signs and symptoms, and available treatment options can help individuals manage hypertension, improve their quality of life, and reduce the risk of serious complications such as heart disease, stroke, and kidney disease.

Lesson:

What is a healthcare disparity?

A healthcare disparity is a preventable difference in access to healthcare, quality of care, or health outcomes among different populations. These disparities are often influenced by factors such as race, income, education, geographic location, insurance coverage, and access to healthcare services. These social and environmental barriers can lead to delayed treatment, poorer health outcomes, and a lower quality of life. Individuals in rural communities such as South Carolina are more at risk of experiencing these types of inequalities in healthcare. Some common experiences are of individuals who reside in areas that are experiencing accelerated unemployment rates, high food insecurity rates, and increased homelessness.

Many healthcare disparities are impacted by the population and location, creating a challenge to properly address the healthcare needs of the individuals who are residing in the area. An example of this would be a rural community where the unemployment rate is high, there is no local hospital, and many people lack medical insurance. Residents living in an area like this are more likely to be limited in healthcare accessibility due to a lack of funding for specialty medical professionals to either

telecommute or relocate to these areas. Those areas may also be restrictive of telehealth opportunities due to broadband connectivity issues (dead zones with no cell service and no internet service).

What is hypertension?

Hypertension is an increased amount of blood pressure placed on the arteries when the heart is pumping and at rest. The blood pressure is measured using a sphygmomanometer and is reported in mm Hg (millimeters of mercury). The blood pressure reading is reported as two different numbers, which are the systolic (top) and diastolic (bottom) numbers. The systolic reading is the amount of pressure in the arteries while the heart is contracting, and the diastolic reading is the amount of pressure in the arteries while the heart is at rest. Hypertension can affect the systolic or diastolic blood pressure.

The Centers for Disease Control and Prevention (CDC) reports blood pressure readings as:

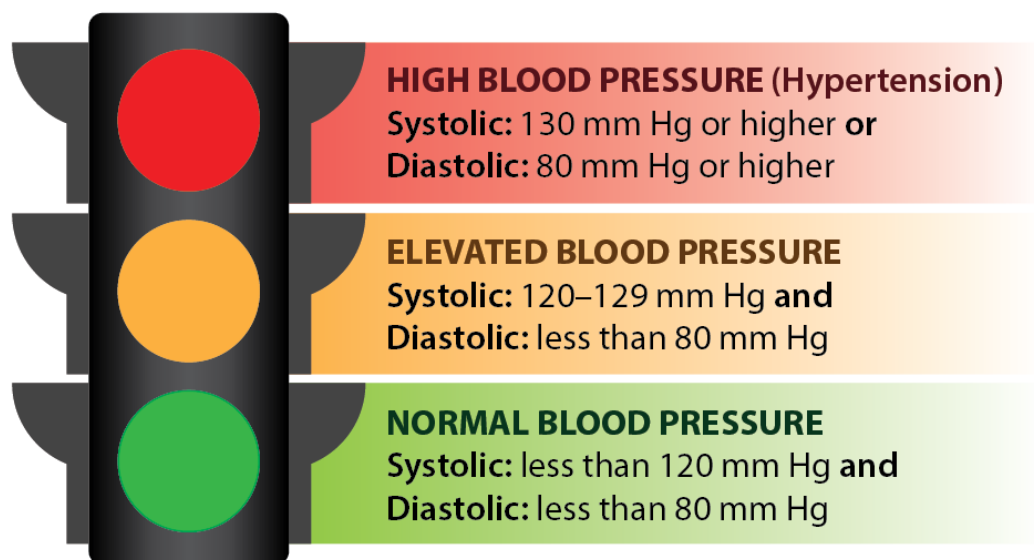


Figure 1: CDC Illustration

Signs / Symptoms of Hypertension

- Chest pains
- Shortness of breath
- Back pain
- Numbness /weakness
- Blurred vision
- Slurred speech
- Please consider that some individuals do not experience any signs nor symptoms

Complications from Hypertension

- Atherosclerosis: Plaque buildup inside arterial walls
- Increased risk of enlarged heart
- Cognitive decline
- Pre-eclampsia: High blood pressure onset during pregnancy
- Peripheral Arterial Disease: Plaque buildup inside arteries in limbs (usually legs)
- Increased risk of heart attack, stroke, and other cardiovascular issues such as heart failure

Do healthcare disparities impact the risks of individuals developing hypertension?

Healthcare disparities can significantly increase the risk of developing hypertension, as well as the likelihood that hypertension will go undiagnosed, untreated, or poorly controlled. While disparities do not directly cause high blood pressure, they influence the social, economic, and environmental conditions that contribute to its development and management.

Some of the primary ways healthcare disparities impact hypertension include:

Note to Lesson Leader: Links in this section provide in-depth information on each topic.

- **Limited access to healthcare:** Individuals without consistent access to primary care, health insurance, or affordable medications are less likely to receive routine blood pressure screenings, early diagnosis, and effective treatment. [Find Clinics - SC Free Clinic Association](#) *Look up Free Clinics available in your area.*
- **Socioeconomic factors:** Lower income, unemployment, lower educational attainment, and food insecurity are associated with higher rates of hypertension. These factors can make it difficult to afford healthy foods, medications, or regular medical visits. [DCI](#) *Look up zip codes near you to identify Distress Scores.*
- **Neighborhood and environmental conditions:** Communities with limited access to grocery stores, safe places to exercise, and quality housing often experience higher rates of hypertension due to increased stress and fewer opportunities for healthy lifestyles.
- **Chronic stress:** Financial strain, discrimination, job insecurity, and exposure to violence or unsafe living conditions can lead to prolonged stress, which contributes to elevated blood pressure over time. [Stress and the Autonomic Nervous System – Extension Rural Health & Nutrition](#)
- **Nutrition and food access:** Living in areas with limited access to fresh fruits, vegetables, and other nutritious foods can increase reliance on processed foods that are high in sodium, a major risk factor for hypertension. The American Heart Association suggests no more than 1,500-2,300 mg of sodium per day. [SC State Farmers Market | South Carolina Department of Agriculture](#) *Look up SC Farmers Market info across the state.*
- **Health education:** Individuals who have difficulty understanding health information or navigating the healthcare system may be less likely to recognize hypertension risk factors, follow treatment plans, or make recommended lifestyle changes. [Hypertension Management Program \(HMP\) Toolkit | High Blood Pressure | CDC](#) *Toolkit for detailed information on hypertension.*
- **Systemic inequities:** Historical and ongoing inequities in healthcare delivery, quality of care, and social policies have contributed to disproportionately higher rates of hypertension and related complications in some populations.

Suggested Activities:

Activity 1: Play some relaxing music and complete deep breathing exercises; increase intensity of breaths per cycle. This activity will assist in the ability to retain focus, increase blood flow, and promote stress relief in efforts to reduce hypertension readings. Note that if the participant has any auditory disabilities, please refrain from using this activity.

Activity 2: The CDC recommends eating a heart-healthy diet that consists of consuming foods that are lower in sodium content. The Dietary Approaches to Stop Hypertension (DASH) eating plan assists in the prevention and management of hypertension. In this activity, participants are reviewing the options for healthier food consumption using DASH as a resource. <https://www.nhlbi.nih.gov/health/dash-eating-plan>

Activity 3: Provide food labels for participants to review for awareness of sodium content. Ask participants to answer these questions:

1. How much sodium is in this item?
2. How much of your daily sodium intake does one serving of this food provide?
3. What is one way I can reduce the amount of sodium in this item?

Suggested Materials:

Electronic or manual blood pressure cuffs for participants; blood pressure log and pen or pencil to track blood pressure readings.

For community medical resources [Homepage \(New\) | SCDHHS](#)

MyPlate resources www.myplate.gov

South Carolina Free Food Resources [South Carolina Free Food Free Food Resources - Food Banks, Food Pantries, Food Assistance in South Carolina](#)

South Carolina Department of Aging Resources <http://aging.sc.gov>

Lesson Summary:

The lesson highlights the importance of hypertension and health integrity in aging adults. Hypertension can be self-managed by reducing the risks of stressors through regular engagement in physical and social activities, mental stimulation, and effective resource navigation. Promoting equitable access to healthcare and community resources is essential, particularly for vulnerable populations, to support overall well-being and maintain cognitive health as individuals age.

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