CDC’s Programs and Research Addressing Cancer Disparities

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Centers for Disease Control and Prevention
CDC goals in common with Community Networks Program

To reduce cancer disparities through programs (including education, training) and research with community partners to bring research into practice

Discuss today some programs developed to address those goals
CDC Program Examples

Comprehensive Cancer Control
Guide to Community Preventive Services
Racial and Ethnic Approaches to Community Health
Steps to a Healthier US
National Tobacco Control Program
Nutrition and Physical Activity Program
National Program of Cancer Registries
National Breast and Cervical Cancer Early Detection Program
Colorectal Cancer Initiatives
Prevention Research Centers
Cancer Prevention and Control Research Network
American Samoa, Commonwealth of Northern Mariana Islands, Federated States of Micronesia, Guam, and Republic of the Marshall Islands are funded through a cooperative agreement with the University of Hawaii.
Comprehensive Cancer Control

State, tribe, and territory CCC coalitions include health departments, cancer centers, ACS regional offices, NCI-CIS, health plans, health care providers, cancer advocacy groups, researchers, academics.

CCC national partners include NCI, ACS, C-Change, ACoS, ICC, others
Comprehensive Cancer Control (CCC)

Increase coordination, collaboration, and synergies across agencies/organizations at national, state, and local levels

Coordinate across cancer sites and interventions from primary prevention through survivorship

Address the range of activities from surveillance through preventive and clinical services to workforce development

Reduce gap between research/evidence-based interventions and practice.
Comprehensive Cancer Control

Local CCC coalitions develop and implement plans with priority activities for cancer control in their communities.

Plans propose a number of initiatives, including policy (e.g., regulations on insurance coverage & access).

Focus on underserved.

Include public education and outreach.
CCC Information

More information, including contacts with states, tribes, territories

[cdc.gov/cancer/nccp/](cdc.gov/cancer/nccp/)

CCC national partners provide leadership, funding, training, and resources.

Excellent example of collaborative support to CCC partners:

Cancer Control Planet

[cancercontrolplanet.cancer.gov/](cancercontrolplanet.cancer.gov/)
Opportunities for CNP Grantees With CCC

Access and utilize resources, e.g., at Cancer Control Planet

Coordinate with other local efforts addressing disparities

Collaborate with CCC coalition partners

CNP Maryland grantee works with the Maryland CCC coalition
The Guide to Community Preventive Services

What Works to Promote Health?

Edited by Stephanie Zaza • Peter A. Briss • Kate W. Harris
The “Community Guide” provides evidence-based recommendations on the effectiveness of community interventions to promote health and prevent disease, disability, and premature death, including cancer.
Community Guide Reviews & Recommendations Related to Cancer

Community interventions to
Reduce tobacco use
Increase cancer screening use
Increase physical activity
Reduce obesity
Improve nutrition
Reduce alcohol abuse
Increase vaccine coverage
Community Guide

Similar to USPSTF Guide to Clinical Preventive Services

DHHS initiative / CDC coordination

Numerous partners (including NIH)

Systematic literature reviews

What’s effective, needs research

Referenced in reports by National Cancer Policy Board (IOM)
Non-Federal Leadership of the Community Guide
Task Force Member Affiliations

Lineberger Comprehensive Cancer Center
UCLA School of Medicine
UT Texas – Houston School of Public Health
Midwest Business Group on Health
Merck & Company, Inc.
Health Partners (managed care) Minnesota
Group Health Cooperative of Puget Sound
U.S. Cochrane Center, Brown University
Rhode Island Department of Health
L. A. County Department of Health
Users of the Community Guide

People who plan, fund, or implement services and policies for health care systems, communities, and states

Public health departments
Health care delivery systems
Purchasers of health care
Government and foundations
Community organizations
CCC coalitions
Examples of Community Guide Recommended interventions

Tobacco control: Increased price (taxes)
   Smoking bans

Physical activity: Creation or enhanced access to places for PA

Mammography: Patient tracking and reminder systems
Overall, there is excellent evidence supporting the use of tracking/reminder systems by health care providers of racial/ethnic minority patients (Evidence Grade A).
Community Guide Applicability for Underserved CNP Communities

Reviews examine evidence on the populations and communities included in the intervention studies, e.g., by race/ethnicity and SES.

Recommendations identify groups to whom recommendations are likely to apply and gaps in research.
CNP Grantee Use of the Community Guide?

Training and education: ID interventions shown to work in similar communities/populations

Research: ID gaps in knowledge about applicability of interventions with certain populations and communities

CDC use CNP grantee research:
- include CNP publications in Community Guide reviews to help provide guidance to CDC and partners
Cancer Control Planet
Link to the Community Guide and Research Tested Intervention Programs
cancercontrol.cancer.gov/rtips

Use this Web site to:

- Find research-tested intervention programs and products.
- Review summary information and usefulness/integrity scores for each program.
- Order or download materials to adapt for use in your own program.
- Obtain readability scores for products distributed to the public.

Program topics now available:

- Breast cancer screening promotion
  - Community-based interventions
  - Physician-based curriculums

New programs featured:

- Physical Activity
  - Wheeling Walks (Post date: June 2005)
Racial and Ethnic Approaches to Community Health (REACH) 2010

REACH 2010
A cornerstones of CDC’s efforts to eliminate racial and ethnic disparities in health
2004-5: 40 projects, $34.5 million funding
Supports community coalitions in designing, implementing, and evaluating community-driven strategies to improve health
REACH 2010
Breast and Cervical Cancer Screening

Access Community Health Network (IL)
Albuquerque Area Indian Health Board (NM)
Boston Public Health Commission (MA)
Special Services for Groups, Inc. (CA)
University of California, San Francisco (CA)
University of Alabama, Birmingham (AL)
National Center for Chronic Disease Prevention and Health Promotion
REACH 2010

Healthy People 2010, which describes the nation’s health objectives for the decade, has as one of its goals eliminating racial and ethnic disparities in health. The Centers for Disease Control and Prevention (CDC) plays a major leadership role in carrying out the goals set forward in this initiative. At CDC, Racial and Ethnic Approaches to Community Health (REACH) 2010 is the cornerstone initiative aimed at eliminating disparities in health status experienced by ethnic minority populations in key health areas.

- Goals for 2010
- Collaboration
- Evaluation
Overview of Steps Cooperative Agreement Program
Steps to a Healthier US

Help Americans take steps to
- Be physically active each day
- Eat a nutritious diet
- Get preventive screening
- Make healthy choices

Funds community partnerships, use evidence-based strategies

2005 funding: $45.6 million
Steps Awardees Representing 40 Communities

**State-coordinated Small Cities/Rural Communities**
- WA – 4 counties
- AZ – 3 counties
- CO – 4 counties
- NY – 4 counties

**Tribes/Tribal Entities**
- Intertribal Council of Michigan
- Cherokee Nation Health Services Group (Oklahoma)
- Southeast Alaska Regional Consortium

**Large Cities/Urban Communities**
- Seattle-King county, WA
- Salinas-Monterey county, CA
- Austin-Travis county, TX
- New Orleans, LA
- St. Petersburg-Pinellas county, FL
- Boston, MA
- Philadelphia, PA
- San Antonio, TX
- Cleveland, OH
- Santa Clara county, CA
- Dekalb county, GA
- Hillsborough county, FL
Steps information.....

Contact: e-mail address
nccdodsteps@cdc.gov

On-line brochure:
CDC National Tobacco Control Program

Comprehensive, science-based program funds, training, & assistance

Goals:

- prevention of initiation
- cessation among smokers
- elimination of 2nd hand smoke
- elimination of disparities
CDC National Tobacco Control Program

50 states, DC, 7 U.S. Territories

7 national networks to address tobacco control in populations defined by race, ethnicity, gender, sexual preference, SES, and age

7 Tribal Support Centers

Additionally:

11 states to identify and eliminate disparities
CDC Tobacco Control Programs

General:

cdc.gov/tobacco

State Tobacco Activities Tracking and Evaluation System

cdc.gov/tobacco/STATESystem
CDC Funded States for Nutrition & Physical Activity to Prevent Obesity and Other Chronic Diseases

http://www.cdc.gov/nccdphp/dnpa/obesity/state_programs/index.htm
Note: These data are based on progress reports from the 20 state Obesity Prevention Programs in January 2004.
CDC Nutrition Program Information

General:

cdc.gov/nccdphp/dnpa/

State-Based Nutrition and Physical Activity Program to Prevent Obesity and Other Chronic Diseases

cdc.gov/nccdphp/dnpa/obesity/
state_programs/
Public Law 102-515, October, 1992

Population-based cancer registries in all states
uniform, timely, high-quality data

cancer reporting by those who treat it
annual registry reporting

For CNP grantees: data on populations not previously served by a registry
National and State-Specific Cancer Incidence
Joint Publication by CDC and NCI
CDC Surveillance Information

National Program of Cancer Registries

cdc.gov/cancer/npcr

Additional data available for CNP communities:
Behavioral Risk Factor Surveillance System
Risk factors and use of preventive services in your communities

cdc.gov/cancer/brfss
National Breast and Cervical Cancer Early Detection Program
Key Elements of NBCCEDP

Provides breast and cervical cancer screening to underserved women
low income (<250% of poverty), uninsured

Program activities include:
- Coalitions and partnerships to reach underserved women
- Public education and outreach
- Professional education
- Screening, follow-up, case management
- Quality assurance and surveillance

Treatment is provided through Medicaid
The National Breast and Cervical Cancer Early Detection Program

American Indian Initiative:
- Arctic Slope Native Assn, Ltd – North Slope Borough, Barrow, AK
- Cherokee Nation – Tahlequah, OK
- Cheyenne River Sioux Tribe – Eagle Butte, SD
- Hopi Tribe – Kykotsmovi, AZ
- Kaw Nation – Kaw City, OK
- Mississippi Band of Choctaw – Philadelphia, MS

Native American Rehabilitation Assn of the Northwest, Inc
- Navajo Nation – Window Rock, AZ
- Poarch Band of Creek Indians – Atmore, AL
- South Puget Intertribal Planning Agency – Shelton, WA
- Southcentral Foundation – Anchorage, AK
- Southeast Alaska Regional Health Consortium – Sitka, AK
- Yukon-Kuskokwim Health Corp – Bethel, AK

Basic Implementation
Number of Women Screened for Fiscal Years 1991-2004

Total number of women ever screened = 2,316,632

Source: Minimum Data Elements through 06/30/2004 paid with NBCCEDP funds, National Breast & Cervical Cancer Early Detection Program
Distribution of Women Receiving Papanicolaou Tests, by Race/Ethnicity, 1991-2004 (N=1,589,723)

- White: 51.4%
- Black: 14.3%
- Hispanic: 21.3%*
- American Indian: 6.5%
- Asian/Pacific Islander: 4.2%
- Multiracial: 0.2%
- Other/Unknown: 2.2%

* Includes Hispanics of any race

Source: Minimum Data Elements through 06/30/2004 paid with NBCCEDP funds, National Breast & Cervical Cancer Early Detection Program

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Colorectal Cancer Initiatives

Screen for Life Campaign
Study of Endoscopic Capacity
National Colorectal Cancer Roundtable
Support for state interventions
Surveillance of screening practices
Patterns of Care Research
Intervention Research
Prevention Research Centers

CDC’s PRC program conducts research to improve health promotion and disease prevention focuses on high-priority public health issues promotes application of scientific knowledge in public health practice enhances cooperation between academic institutions and state and local health
Prevention Research Centers Funded in FY 2005

- University of Washington at Seattle
- University of California at Berkeley
- University of California at Los Angeles
- Oregon Health and Sciences University
- University of Colorado
- University of Arizona
- University of New Mexico
- University of Oklahoma
- University of Minnesota
- University of Illinois at Chicago
- University of Iowa
- St. Louis University
- Texas A&M University
- Tulane University
- University of Texas Houston Health Science Center
- University of Alabama at Birmingham
- University of South Florida
- Morehouse School of Medicine
- Harvard University
- Columbia University
- University of Pittsburgh
- The Johns Hopkins University
- University of Rochester
- Yale University
- State University of New York at Albany
- University of Michigan
- University of North Carolina at Chapel Hill
- University of South Carolina
- Emory University
- University of Rochester
- AK
- HAWAII
Prevention Research Centers

2005 Core Funding: $29.7 million
Additional funding from other parts of CDC for specific studies, including cancer
Opportunity for CNP grantees to collaborate with PRCs
Examples of PRC projects:
  Improving health in California’s Korean-American community
  Reducing health disparities in rural southwest Georgia
Prevention Research Centers: information

General Information:  
[cdc.gov/prc/]

Grantee Center profiles:  
[cdc.gov/prc/centers/]

e-mail contact Barbara Gray:  
[BGray@cdc.gov]
Prevention Research Centers: Cancer Prevention and Control Network

Collaboration between CDC and NCI
Increase expertise in community-based intervention research in cancer prevention and control
Facilitate translation of effective interventions into practice
Primary Objectives of the CPCRN

Research on how to disseminate into communities cancer-related community interventions recommended by the *Guide to Community Preventive Services*

Research on effectiveness of community interventions for which new evidence can change a *Community Guide* finding of insufficient evidence into a recommendation.
Primary Objectives of the CPCRN

Research replicating Community Guide-recommended interventions in populations and communities in which they have not yet been evaluated, particularly underserved populations.

Research on interventions commonly used by community groups and health departments and for which there is insufficient evidence for a Community Guide recommendation.
CPCRN Network Center Map

University of Washington
University of California at Los Angeles
University of Texas
Emory University
Morehouse School of Medicine
University of North Carolina
Harvard University
Saint Louis University
## CPCRN Principal Investigators

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<tr>
<th>Member Center</th>
<th>Principal Investigator</th>
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<td>University of Washington</td>
<td>Jeffrey Harris, MD, MPH, MBA</td>
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The **Cancer Prevention and Control Research Network** (CPCRN) provides an infrastructure for applying relevant research to local cancer prevention and control needs. Its members conduct community-based participatory cancer research across its eight network centers, crossing academic affiliations and geographic boundaries. The CPCRN forms a subgroup of [Prevention Research Centers (PRCs)](http://www.cpcrn.org/), which are CDC’s flagship program for preventing and controlling chronic diseases.

The CPCRN represents a collaboration of cancer divisions from two federal agencies: The [Division of Cancer Prevention and Control](http://www.cpcrn.org/) of the CDC’s [National Center of Chronic Disease Prevention and Health Promotion](http://www.cpcrn.org/), and the [Division of Cancer Control & Population Sciences](http://www.cpcrn.org/) of the [National Cancer Institute](http://www.cpcrn.org/).
Information about CDC’s Division of Cancer Prevention & Control

www.cdc.gov/cancer