

Colorado

Risk Reduction

Under the banner of “Citizens for a Healthier Colorado,” voluntary health organizations, tobacco control advocacy organizations, and statewide chronic disease coalitions, including the Colorado Cancer Coalition, advocated for an increase in tobacco excise taxes. These taxes would allocate 16% of new revenues for the prevention, early detection, and treatment of cancer, heart disease, and pulmonary diseases and 16% for tobacco prevention. Armed with the Colorado Cancer Plan, a broadly-supported strategic action plan based on sound data, the coalition member organizations successfully garnered public support for Amendment 35 and its cancer-related provisions.

Since 2005, nearly \$45 million has been distributed to support statewide and local efforts to prevent, detect, and treat cancer, heart disease, pulmonary disease, and related risk factors through a competitive grants program. An additional \$90 million was distributed to local health agencies and nonprofit organizations for tobacco use prevention and cessation, eliminating exposure to secondhand smoke, and reducing health disparities resulting from tobacco use. Cancer programs, including colorectal cancer screening, skin cancer education, genetics counseling and screening, patient navigation programs, prostate cancer education, and development of a health disparities action team, have received funding.

Florida

Building a Strong Referral Network

The Florida Breast and Cervical Cancer Early Detection Program (FBCCEDP), Putnam County Health Department (CHD's) *Believe in Miracles*, covers 11 rural counties in northeast Florida. The program developed an extensive network of providers that coordinates services through 10 county health departments, eight federally funded health centers, two hospitals, and 10 mammography sites. An area-wide group comprised of medical providers, social workers, university staff, and Susan G. Komen Breast Cancer Foundation and American Cancer Society staff started a monthly meeting to share information and resources and collaborate on grant projects. Additionally, Putnam CHD's *Believe in Miracles* partnered with hospitals and now has sponsored plan status in which their clients receive automatic charity eligibility if Medicaid treatment funds are not approved, opening another avenue for continuity of services.

The relationships Putnam CHD's *Believe in Miracles* staff developed within the healthcare community facilitated increased screening services and treatment that the National Breast and Cervical Cancer Early Detection Program (NBCCEDP) supports. The Putnam CHD's *Believe in Miracles* regional coordinator trained FBCCEDP regional coordinators on provider recruitment and relations. Regional coordinators used this knowledge to increase their program's effectiveness, and central office staff will use the information during new regional coordinator orientations.

Massachusetts

Using State Cancer Registry Data to Identify Disparities in Cancer Incidence and Stage at Diagnosis

The Massachusetts Cancer Registry, Massachusetts Department of Public Health (DPOH) conducted a study of racial and ethnic differences in the epidemiology of invasive cancer in Massachusetts. Using data from their own CDC-funded cancer registry, the state identified invasive cancer cases diagnosed during 2000–2004 by the four main racial and ethnic groups: white non-Hispanic (NH), black NH, Asian NH, and Hispanic. Analyses included comparisons of incidence rates, mortality rates, median ages, stage at diagnosis, and tumor size at diagnosis. Additionally, the most common cancers among Chinese, Vietnamese, Korean, Haitian, Puerto Rican, Portuguese speaking, Latin American, and Dominican populations were assessed. Based on these analyses, the Massachusetts DOPH learned about cancer disparities that occur in its state. For example, compared to white NH males, black NH males had significantly higher incidence rates of prostate and stomach cancers and significantly higher mortality rates for all cancers combined, lung cancer, and prostate cancer. Black NH males were also significantly more likely to be diagnosed at a later stage of prostate cancer. Black NH females were significantly more likely to be diagnosed at a later stage and with a large tumor size at diagnosis for breast and uterine cancers. The disparities identified by Massachusetts allowed the state to investigate the complex interaction of factors including genetics, environment, and access to health care. The disparities in mortality rates and stage at diagnosis for black NHs were identified as areas to target cancer control efforts.

South Dakota

Working Together for Greater Success

Women from the Cheyenne River Program at Eagle Butte are provided screening through the tribal program and access to Medicaid medical coverage through the state program; women not eligible for one screening program are referred to and enrolled in the other. Thus, access to screening and follow-up care is increased by breaking down barriers between programs.

In South Dakota, two National Breast and Cervical Cancer Early Detection Program (NBCCEDP) -funded programs are working together to better serve the women in their area. Collaboration between the Cheyenne River Sioux Tribal Project and the state's All Women Count! Program continues to grow through recognition and appreciation of the distinct contributions from which both programs can benefit. Staff from both programs identified opportunities to assist, collaborate, and create economies of scale in screening women for breast and cervical cancer. They hold joint meetings, provide technical assistance between programs, participate on coalitions together, communicate regularly, and are beginning to share resources for projects that benefit all the women they serve. The state program serves as the portal for access to Medicaid for women in both programs, while the tribal program helps the state program resolve issues that affect the Native American women served by the state program. They are also moving forward on efforts to develop health messages for American Indian women, with resulting materials to be used by both programs. Women throughout the state have benefited from this collaboration.