



# Closing Gaps in Cancer Prevention and Early Detection

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Nevada Cancer Summit  
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# Impact of the COVID-19 Pandemic

Total Cases

**94,973, 074**

Cases in Last 7 Days

**471,806**

Total Deaths

**1,044,461**

Source: CDC, [COVID Data Tracker](#)

# A New Normal



**A closer look**

## CANCER DEATHS IN THE UNITED STATES

Cancer death rates  
dropped 27% from  
2001 to 2020.

27%



[cdc.gov/cancer](https://cdc.gov/cancer)

Source: CDC, [An Update on Cancer Deaths in the United States](#)

# Despite Progress, Disparities Persist

racial and ethnic  
minority groups;



individuals of different  
ancestry;



individuals of low  
socioeconomic status;



individuals with  
disabilities;



individuals who lack  
or have limited health  
insurance coverage;



residents in certain  
geographic locations,  
including rural areas;



members of the lesbian,  
gay, bisexual, and  
transgender community;



immigrants;



refugees or asylum seekers;



adolescents  
and young  
adults;  
and



the elderly.



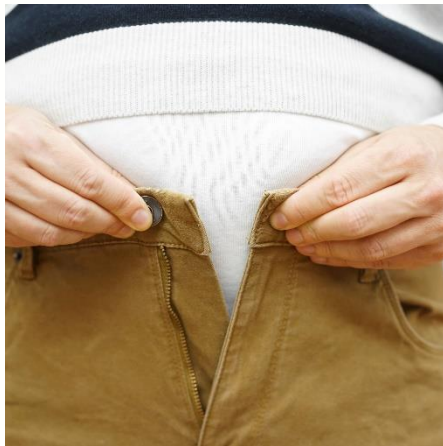
Source: American Association for Cancer Research, [Cancer Disparities Progress Report 2020](#)

# Health Consequences of COVID-19

## Health Behaviors of U.S. Adults Since the Pandemic

**42%**

gained weight with an average gain of **29 lbs.**



**35%**

Sleeping less



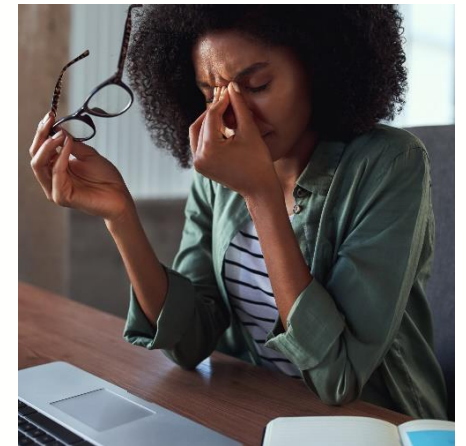
**23%**

Drinking more alcohol to cope



**48%**

experiencing greater levels of stress



Source: [American Psychological Association. \(2021, March 11\). One year later, a new wave of pandemic health concerns.](#)



# Challenges with Adolescent HPV Vaccination During Pandemic

Recommitment to EBI implementation and use needed to promote HPV vaccination

- Structural barriers
- Patient/ parental fears of coming into the clinic
- Logistical challenges
- Shift in priorities

“

HPV Probably Not at the Top of Our List

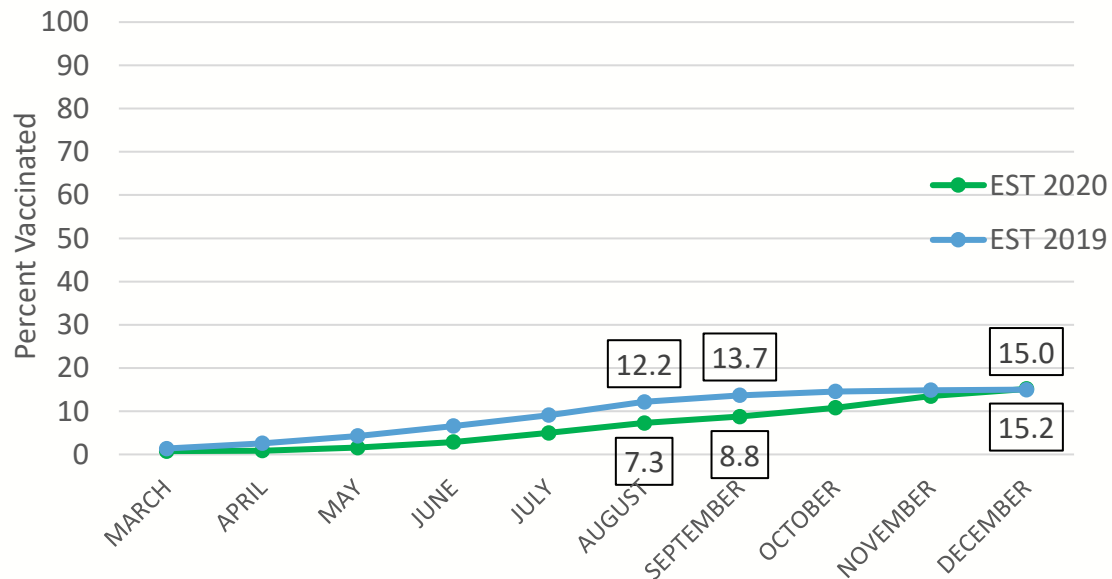
”

Source: Ryan G, Gilbert PA, Ashida S, Charlton ME, Scherer A, Askelson NM. Challenges to Adolescent HPV Vaccination and Implementation of Evidence-Based Interventions to Promote Vaccine Uptake During the COVID-19 Pandemic: “HPV Is Probably Not at the Top of Our List”. Prev Chronic Dis 2022;19:210378. DOI: <http://dx.doi.org/10.5888/pcd19.21037>

# Human Papillomavirus (HPV) Vaccination During the Pandemic

Estimated vaccination uptake\* with  $\geq 1$  HPV vaccine dose among teens ages 13–17 years who had not received a dose of HPV vaccine as of March 1st, United States, 2019 and 2020

- HPV vaccination increasing but still below other routinely recommended vaccines
- Disparities in HPV vaccination coverage by Metropolitan Statistical Area (MSA)



## Teens Up to Date with HPV Vaccination

54.2%  
2019



58.6%  
2020

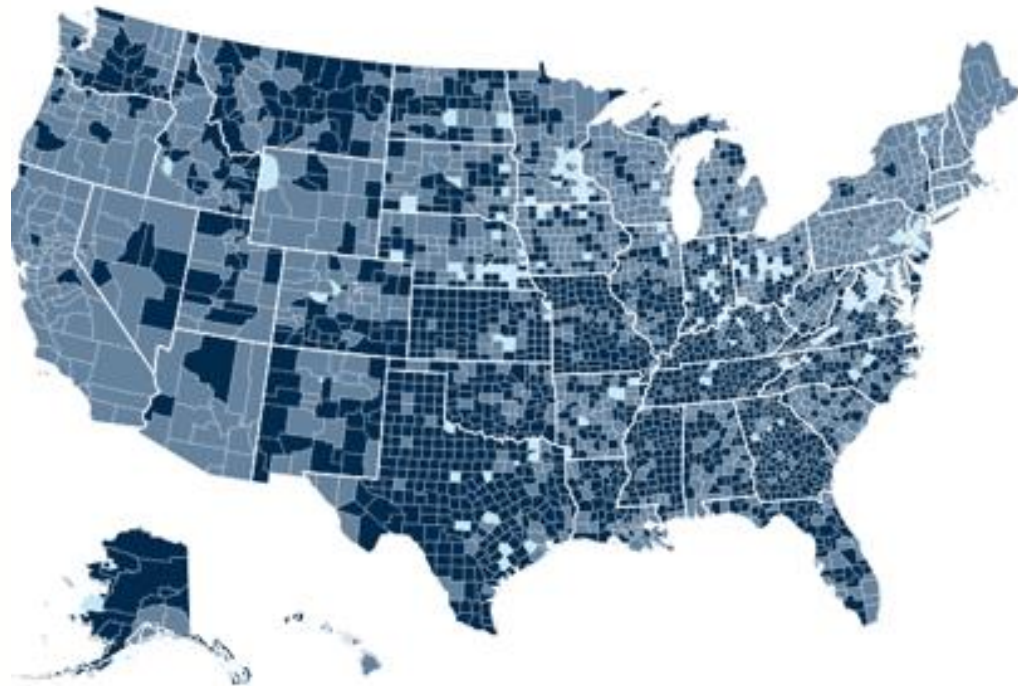
\*National Immunization Survey–Teen (NIS-Teen)

Source: supplemental figure, CDC, Pingali C, Yankey D, Elam-Evans LD, et al. National, Regional, State, and Selected Local Area Vaccination Coverage Among Adolescents Aged 13–17 Years — United States, 2020. MMWR Morb Mortal Wkly Rep 2021;70:1183–1190. DOI: <http://dx.doi.org/10.15585/mmwr.mm7035a1>

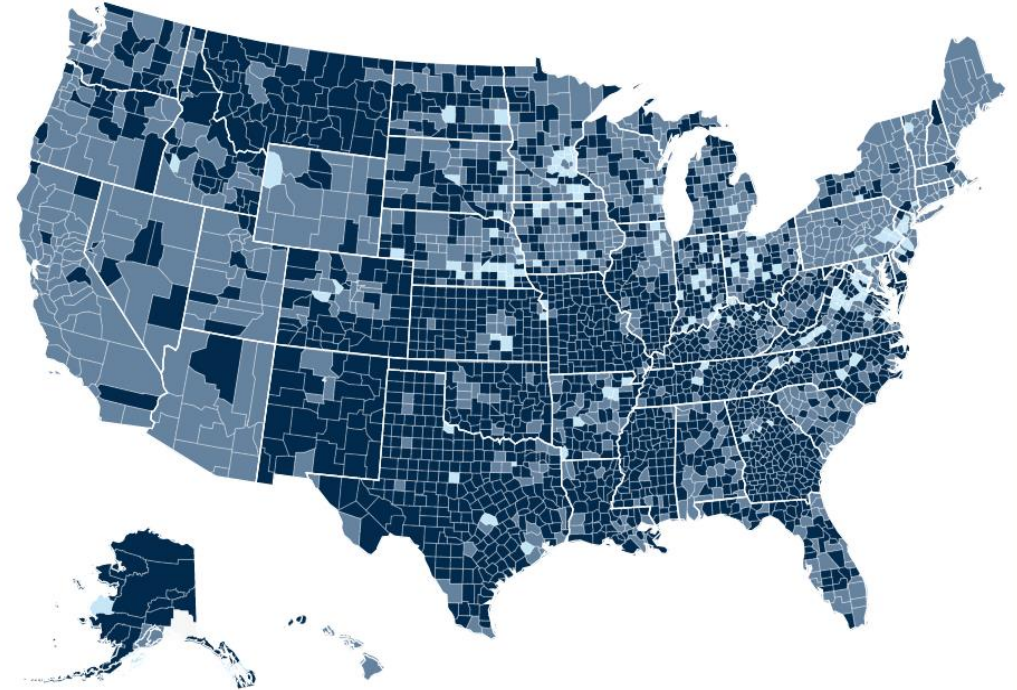


# Primary Care Provider Shortage Areas

Primary Care Shortage Areas by County, 2019

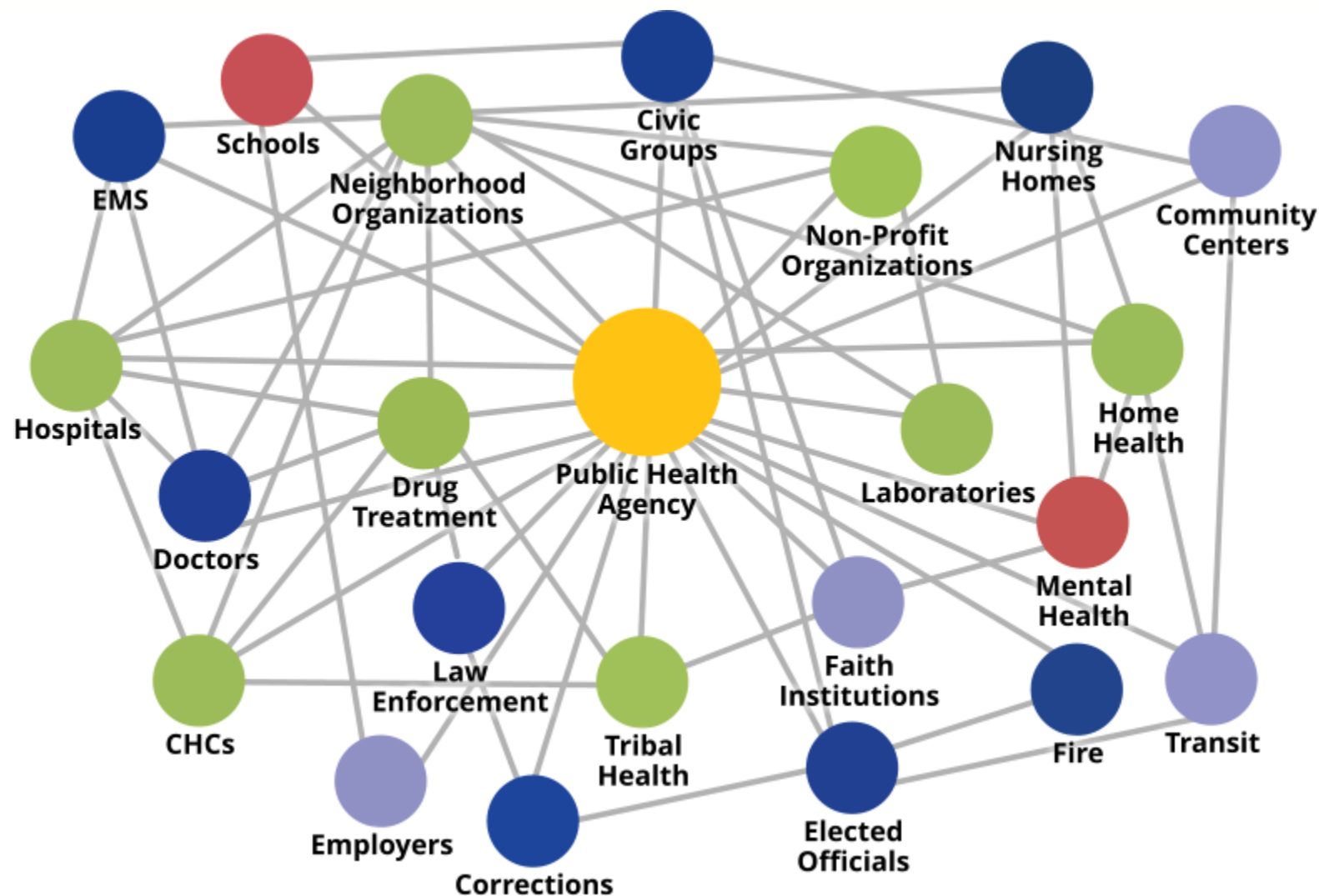


Primary Care Shortage Areas by County, 2022



Rural health Information Hub, [Data Visualization](#)

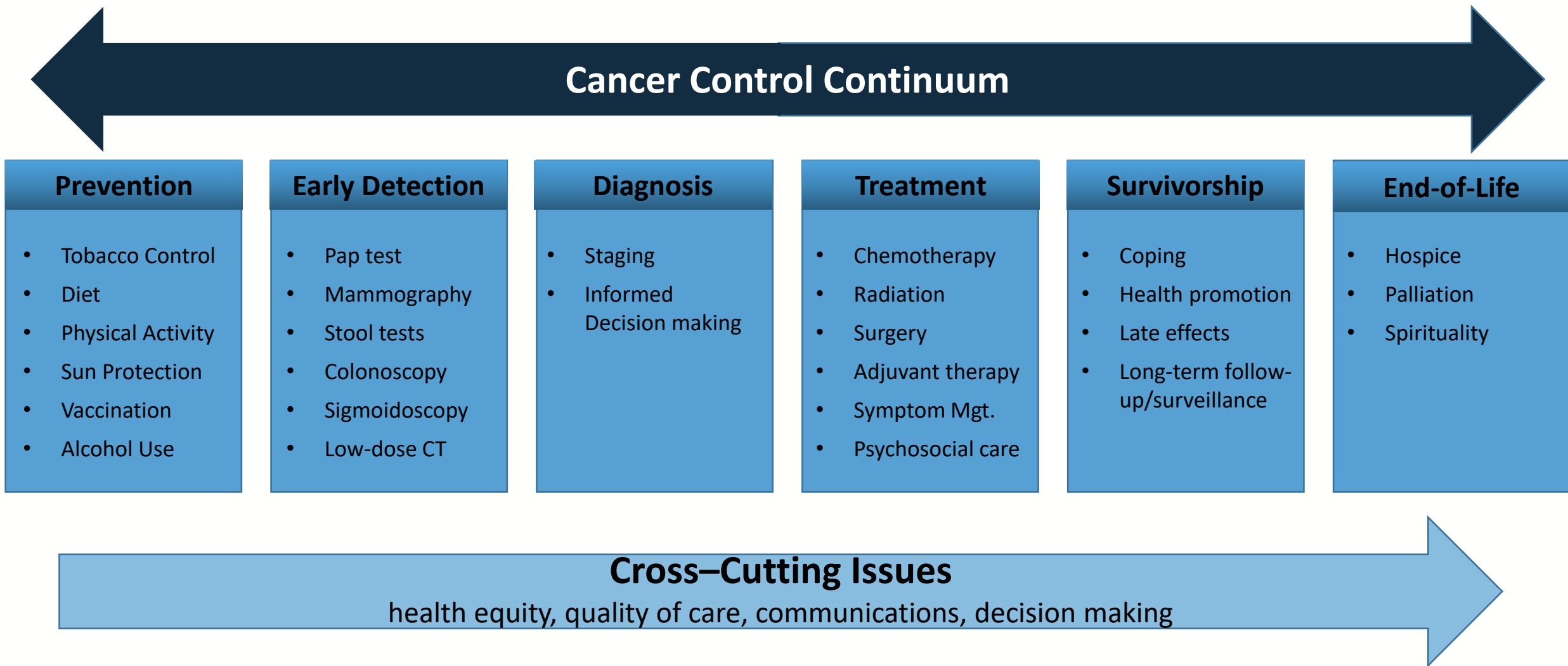
# Public Health System Partners



# Strategies for Improving Cancer Screening



# The Cancer Control Continuum



# Screening for Common Cancers Still Recovering

January 2021-October 2021

↓ 2.7% Breast Cancer Screening = 68,000 missed

↓ 3.4% Colorectal Cancer Screening = 27,000 missed

↓ 10% Cervical Cancer Screening = 9,000 missed

Source: Epic Research; [Troubling Cancer Screening Rates Still Seen Nearly Two Years Into the Pandemic](#)

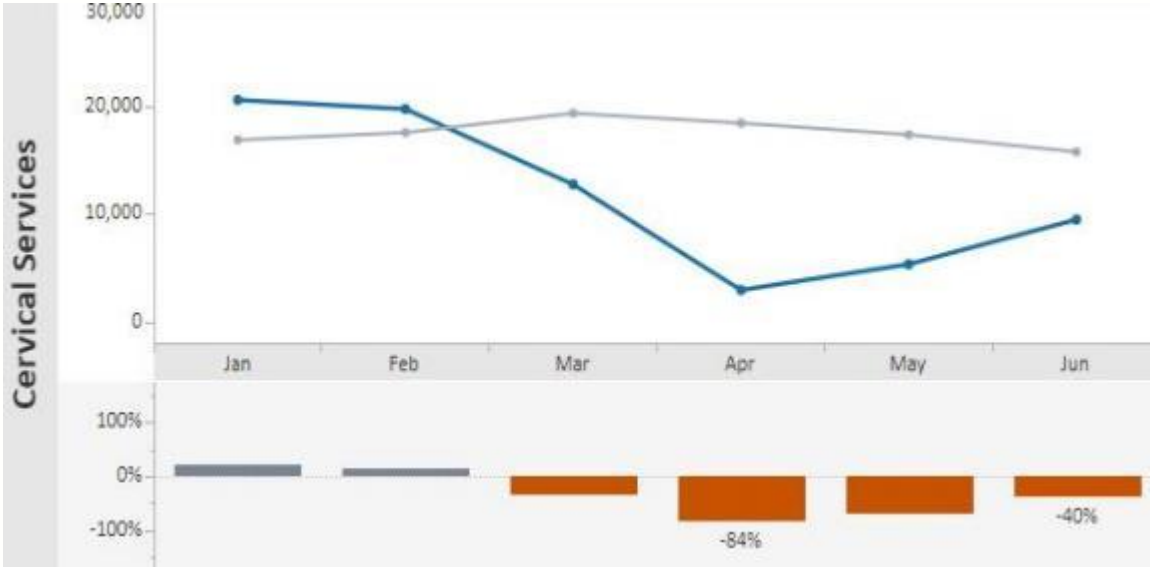
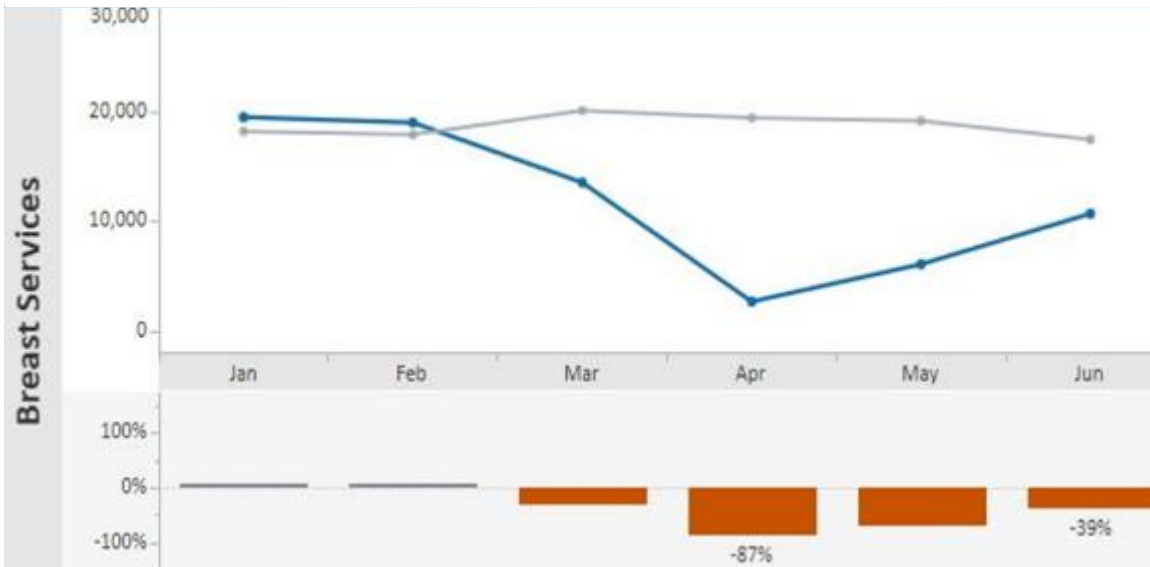


Reliable. Trusted. Scientific.



# National Breast and Cervical Cancer Early Detection Program (NBCCEDP) Monthly screening tests Decline During Pandemic

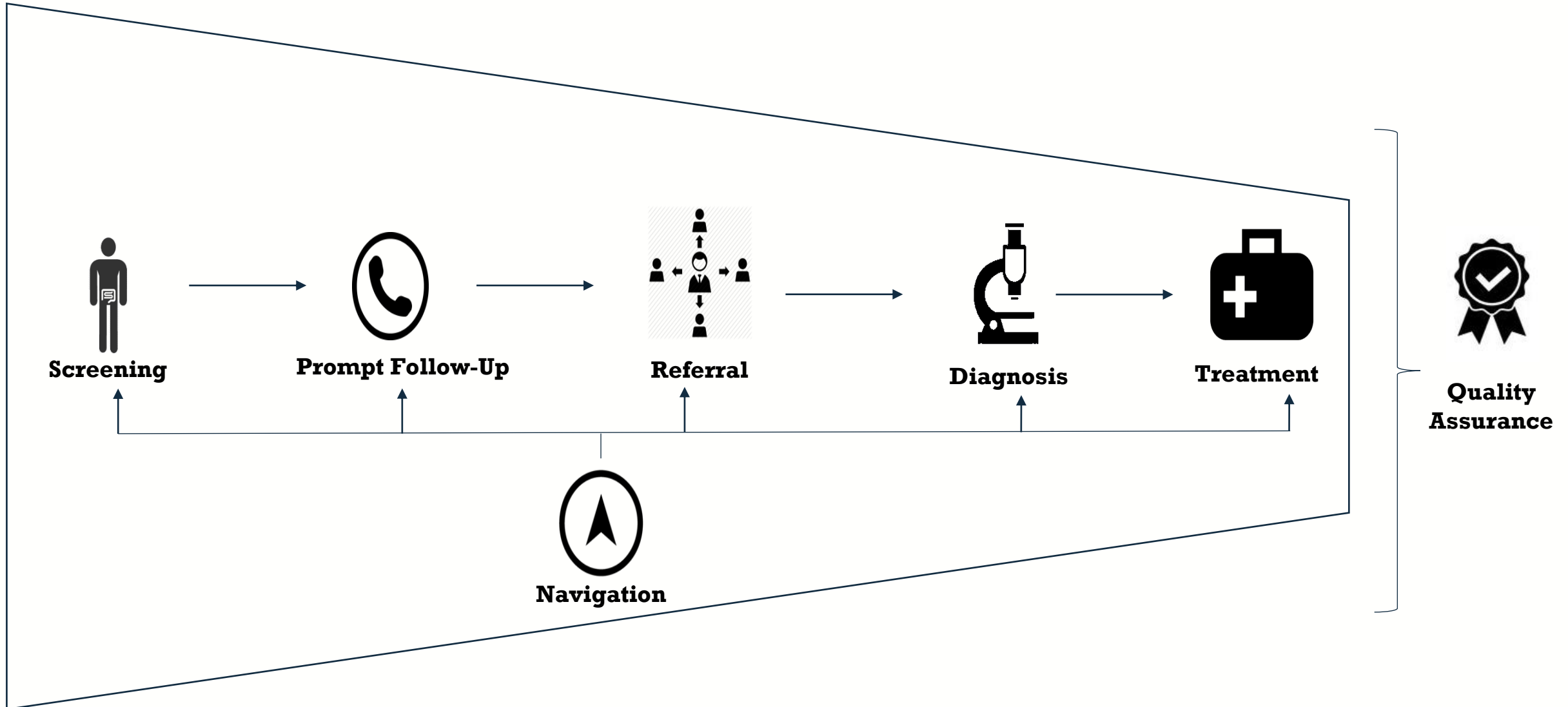
January–June 2020 Compared to the 5-Year Average in 2015–2019



Blue line represents screening tests conducted in 2020; grey line represents average screening tests conducted over the 5-year period, 2015-2019.

Source: MDE data submission, October 2020

# Cancer Screening is More than a Test





# National Breast & Cervical Early Detection Program (NBCCEDP)

30 Years of outreach, education, screening and diagnostic services



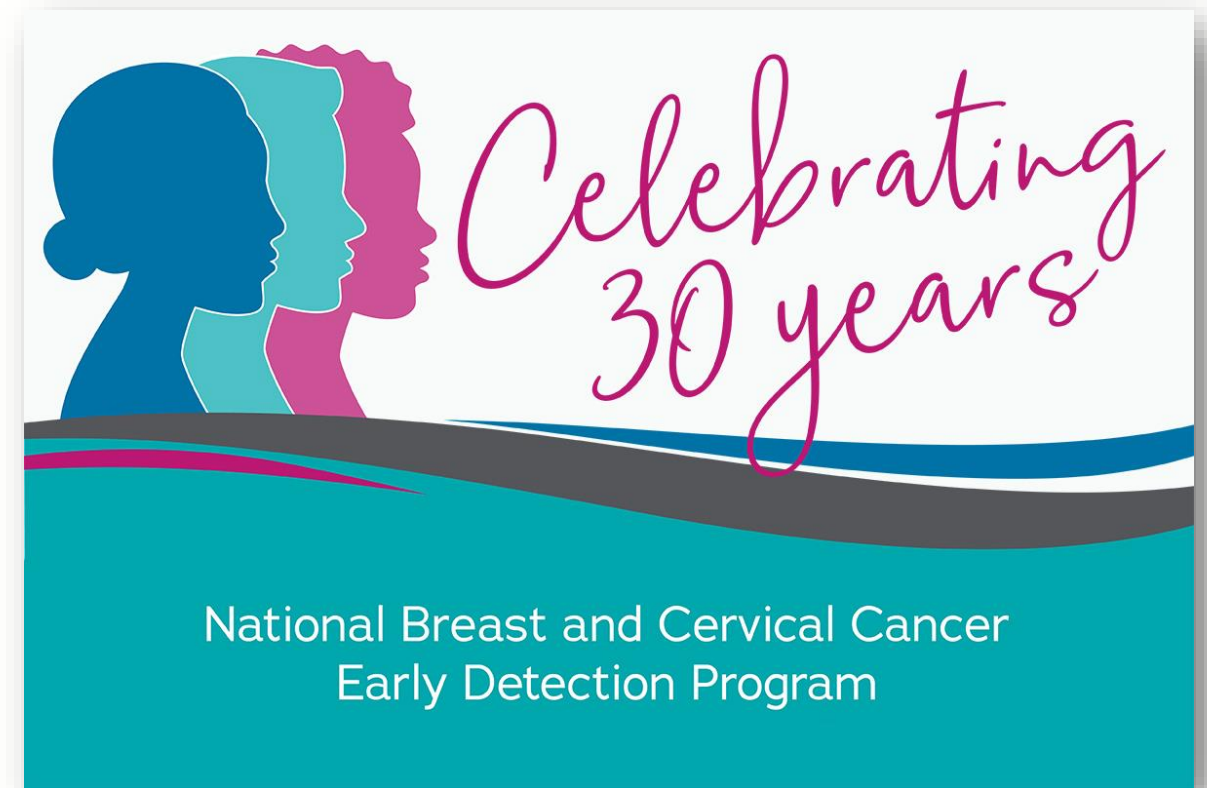
- Serves low-income, uninsured or under-insured women
- Provides screening and diagnostic services
- Focuses on women geographically or culturally isolated or of racial/ethnic minorities
- Supports evidence-based strategies to increase screening

Source: CDC, [National Breast and Cervical Early Detection Program](#)

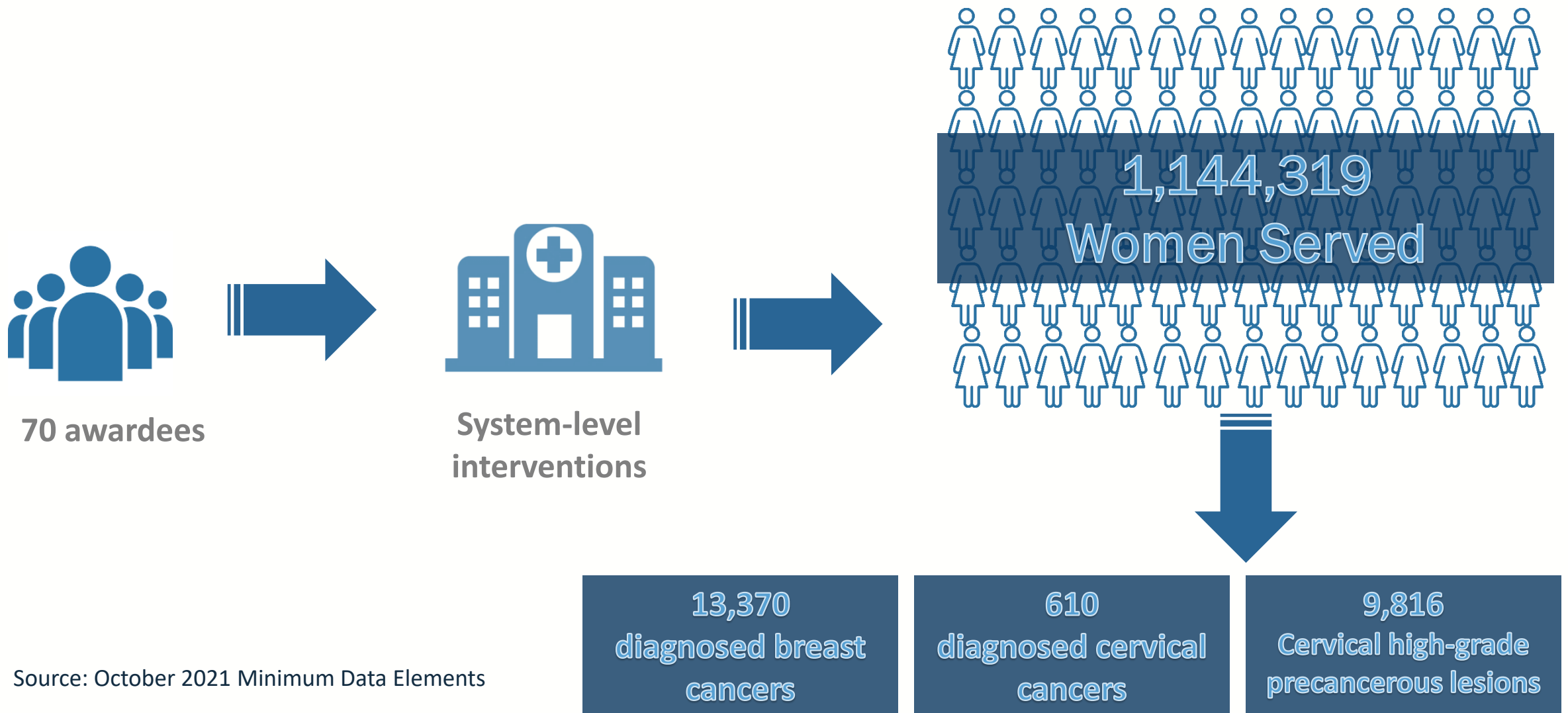
# National Breast and Cervical Cancer Early Detection Program Since Inception

- >30 years of service
- 6.0 million women served
- 15.6 million breast and cervical cancer screening examinations provided
- Diagnosed 5,066 invasive cervical cancers and 232,428 premalignant cervical lesions, of which 39% were high-grade.

Source: October 2021 Minimum Data Elements submission



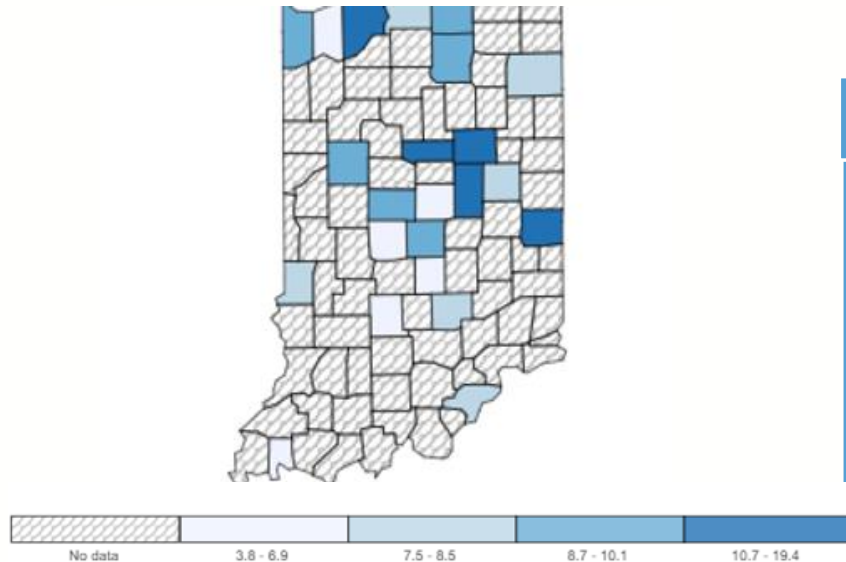
# NBCCEDP Reach, 2016-2020



# Program Success Amid Pandemic – Indiana

## Screening Reminders Help Indiana Clinic Save Lives from Cervical Cancer

Rate of New Cervical Cancers in Indiana, all ages, Races, ethnicities, 2015-2019



“ This project has changed the way I practice  
April Fife, Nurse Practitioner ”

### Provider Reminder System

Staff reviewed medical records for all women with scheduled appointment who were due for cancer screening

### Reducing Structural Barriers

Cancer screening integrated into routine care

### Patient Reminders

Phone follow up to schedule appointments

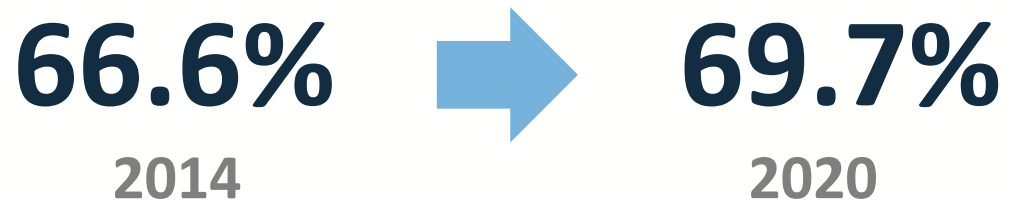
Cervical Cancer Screening Rates **increased 34%** from 65% to 87%

Source – (County map) U.S. Cancer Statistics Working Group. U.S. Cancer Statistics Data Visualizations Tool, based on 2021 submission data (1999-2019): U.S. Department of Health and Human Services, Centers for Disease Control and Prevention and National Cancer Institute; <https://www.cdc.gov/cancer/dataviz>, released in June 2022.

Source: (Story) CDC, [Screening Reminders Help Indiana Clinic Save a Life](#)

# Colorectal Cancer Screening in the United States

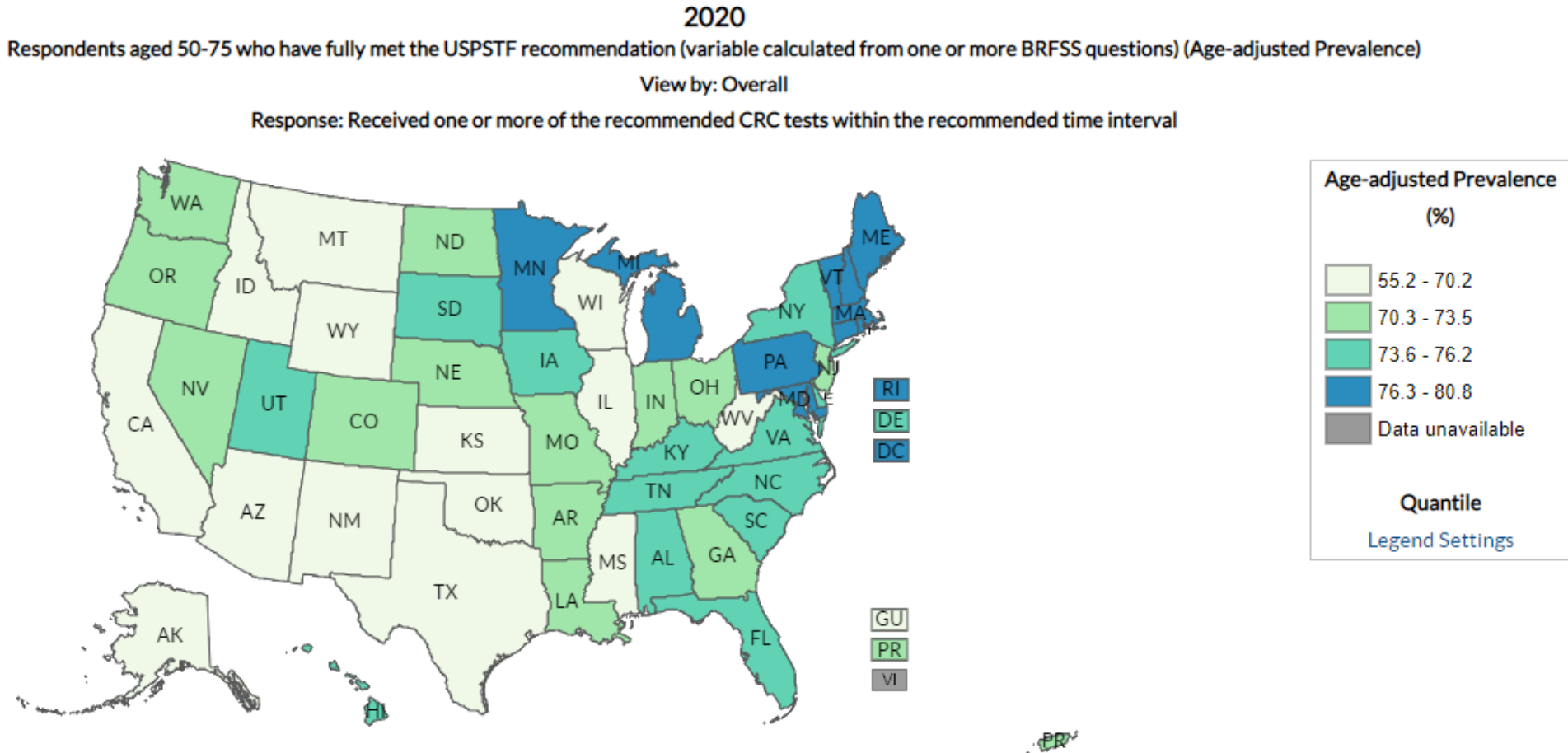
People aged 50-75 who fully met the USPSTF CRC screening recommendation **increased 4.7%** from 2014 to 2020.



Source: CDC, [Use of Colorectal Cancer Screening Tests](#)

Please note: In May 2021, the U.S. Preventive Services Task Force changed its colorectal cancer screening recommendation. The age at which adults at average risk of getting colorectal cancer were recommended to begin screening was lowered from 50 to 45. The data shown here do not include adults younger than age 50.

# Adults Up-to-Date with Colorectal Cancer Screening

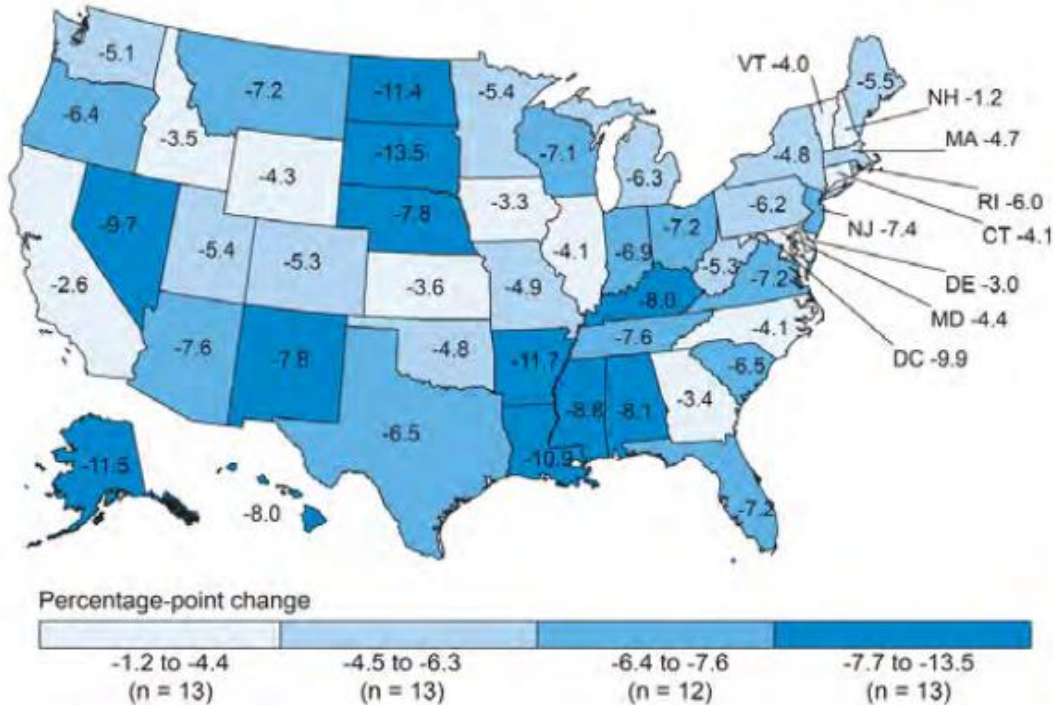


Source: CDC, Behavioral Risk Factor Surveillance System (BRFSS) [Prevalence & Data Trends](#)

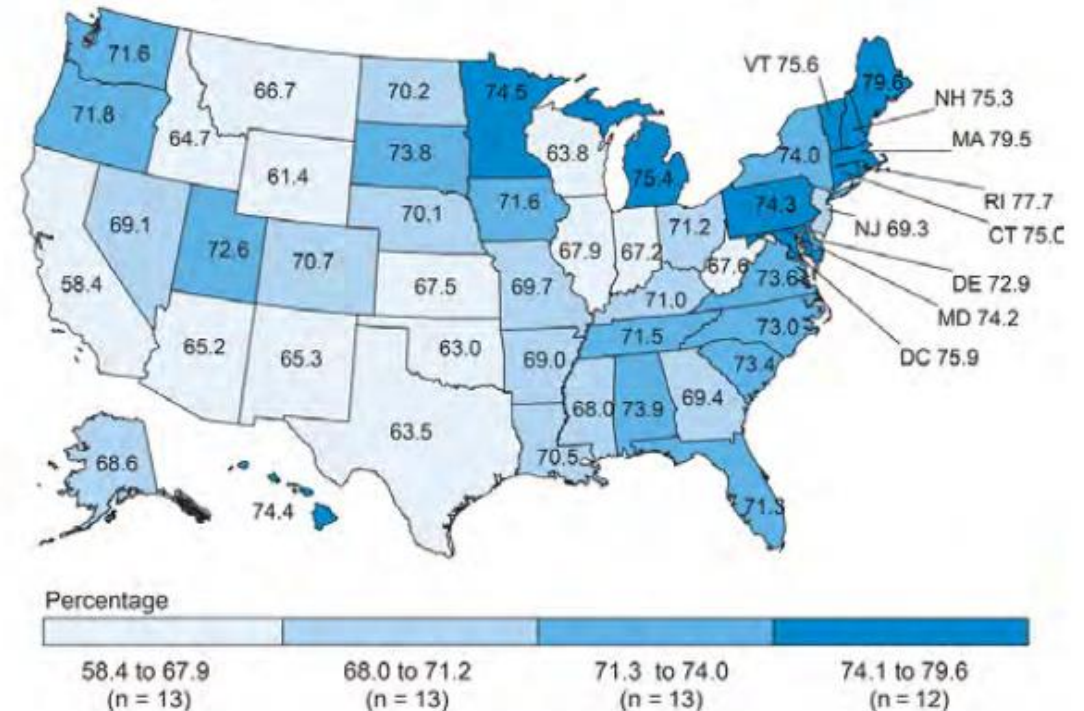


# Adults Never Screened for Colorectal Cancer

**A** Change in percentage of respondents aged 50–75 years who reported they were never screened for colorectal cancer, 2012 to 2020



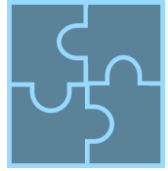
**B** Percentage of respondents aged 50–75 years who reported being up to date with colorectal cancer screening, 2020



Source: Richardson LC, King JB, Thomas CC, Richards TB, Dowling NF, Coleman King S. Adults Who Have Never Been Screened for Colorectal Cancer, Behavioral Risk Factor Surveillance System, 2012 and 2020. *Prev Chronic Dis* 2022;19:220001. DOI: <https://doi.org/10.5888/pcd19.220001>.



# Colorectal Cancer Control Program (CRCCP) Model Tenets



**Integrate public health  
and primary care**



**Focus on defined,  
high-need populations**



**Establish partnerships to  
support implementation**



**Implement sustainable  
health system changes**



**Use evidence-based  
strategies to maximize  
limited public health dollars**



**Encourage innovation in  
adaptation of EBIs**







**Use data for program  
improvement and  
performance management**

Source: CDC, [Colorectal Cancer Control Program \(CRCCP\)](#)

# Evidence-Based Interventions and Supporting Activities to Increase Cancer Screening

## Evidence-based Interventions (EBIs)\*

-  Patient reminders
-  Provider reminders
-  Provider assessment and feedback
-  Reducing structural barriers

## Supporting Activities (SA)

-  Small media
-  Patient navigation
-  Community health workers
-  Provider education

\*Source: [The Guide to Community Preventive Services \(The Community Guide\)](#)

# CRCCP Grantee Reach, 2015-2020



**264**

Health  
systems



**836**

Clinics



**6,397**

Providers

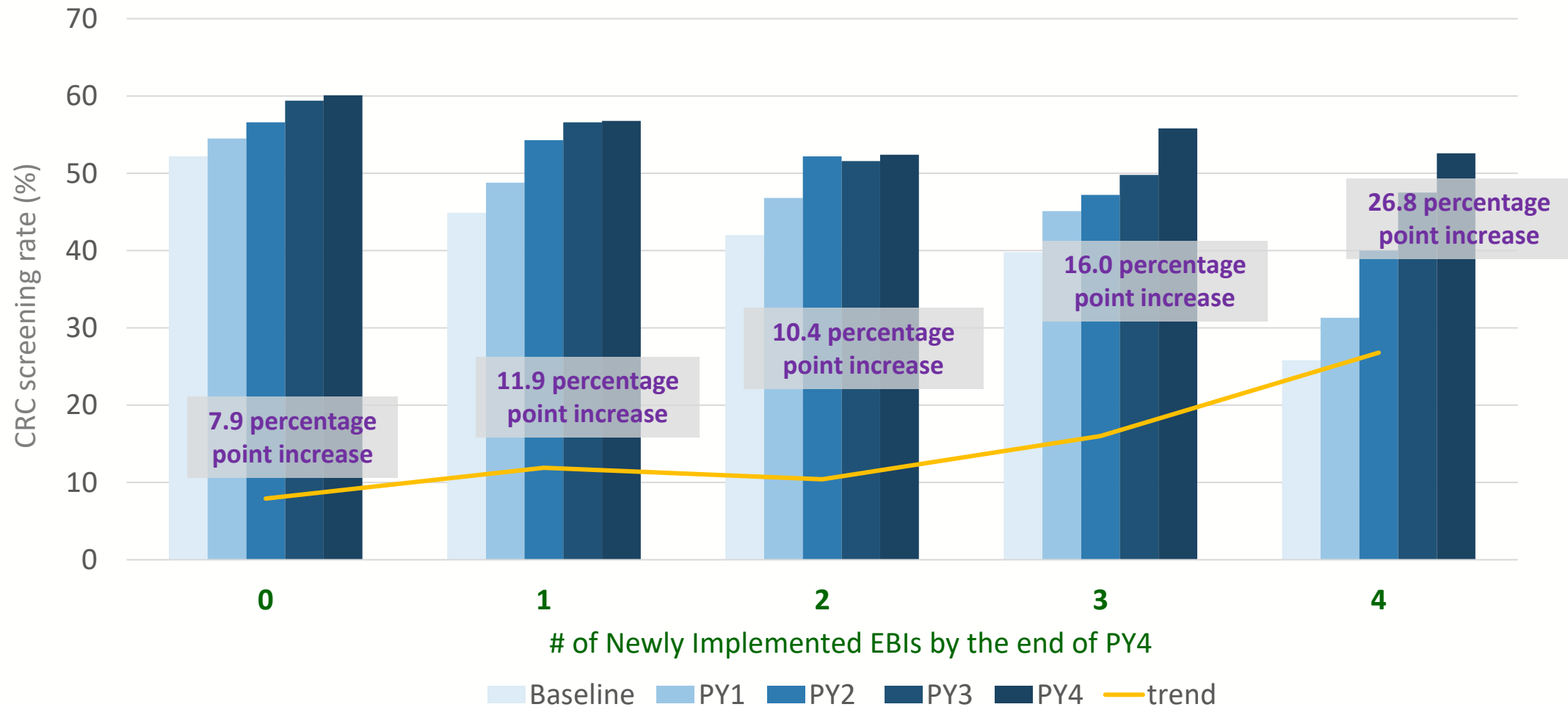


**1,302,806**

Patients  
aged 50-75

Source: Clinic data submission, March 2021 (Includes all clinics recruited in DP15-1502, Program Years 1-5)

# More evidence-based interventions translate into greater screening rate increases



Source: CRCCP Clinic Data March 2020 data submission. PY1 Clinics only; Years 1-4.

# Multiple analyses found several factors associated with greater CRC screening rates



**Implemented  
3-4 EBIs**



**Enhanced  
existing EBIs and  
implemented  
new EBIs**



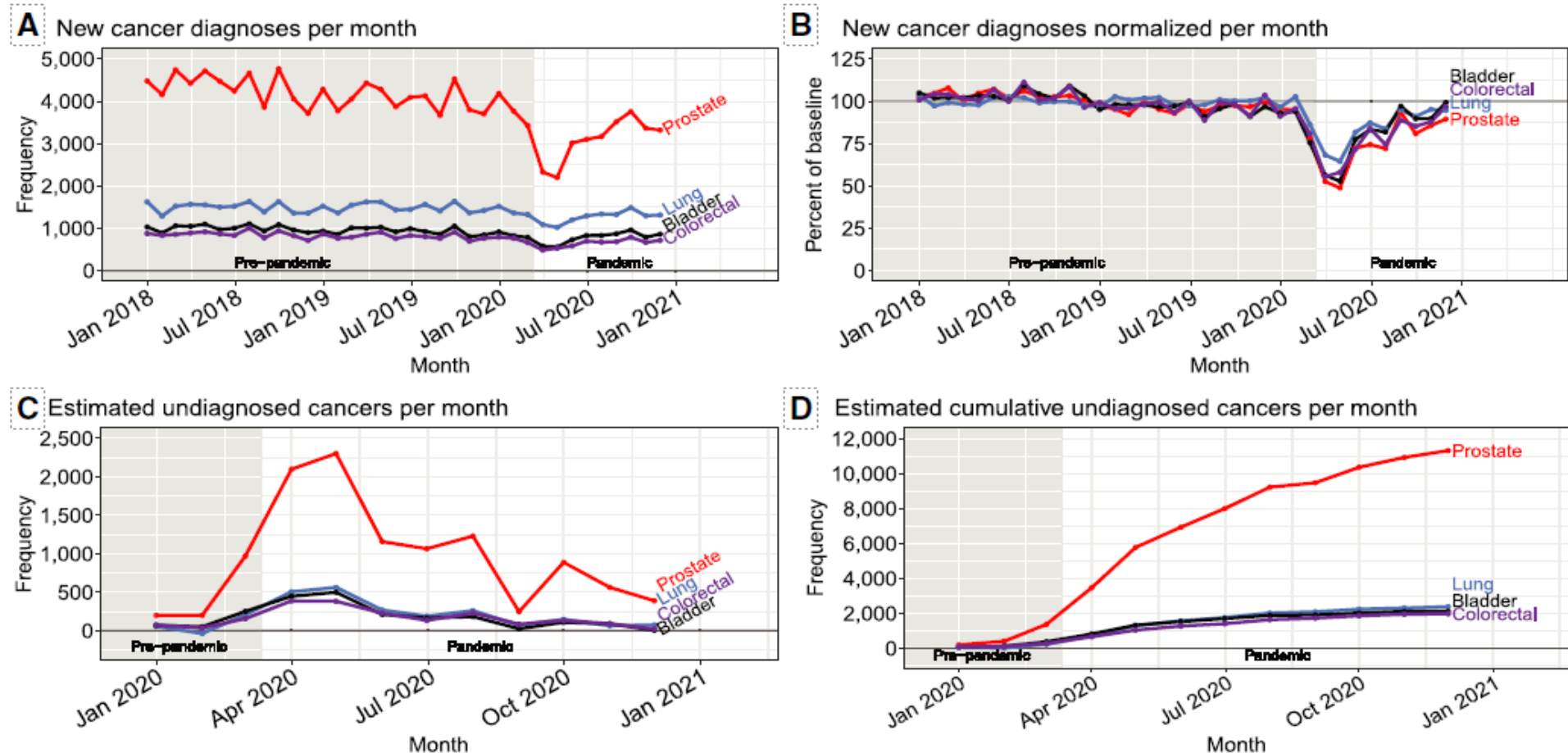
**Clinics with  
lower baseline  
screening rates**



**CRC screening  
champions**

Source: Sharma KP, Leadbetter S, DeGroff A. Characterizing clinics with differential changes in the screening rate in the Colorectal Cancer Control Program of the Centers for Disease Control and Prevention. Cancer. 2021 Apr 1;127(7):1049-1056. doi: 10.1002/cncr.33325. Epub 2020 Dec 10. PMID: 33301173.

# Monthly Changes in New Cancer Diagnoses



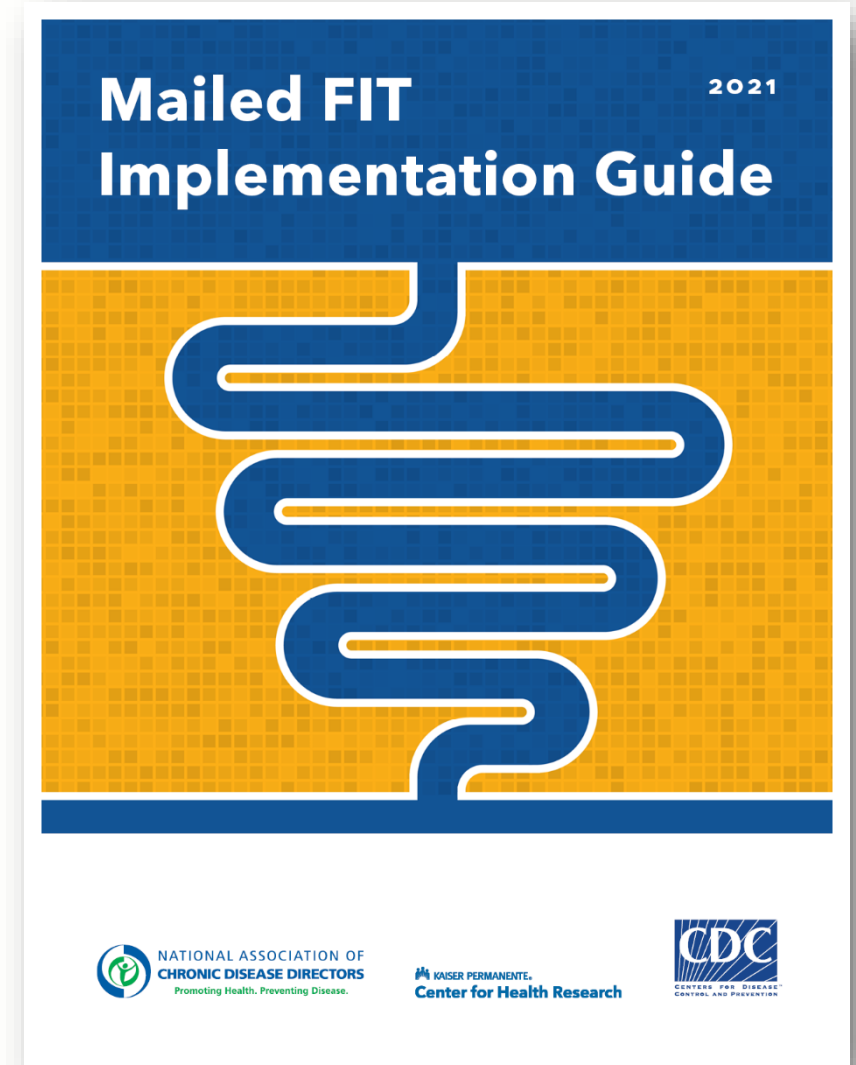
Source: Englum BR, Prasad NK, Lake RE, Mayorga-Carlin M, Turner DJ, Siddiqui T, Sorkin JD, Lal BK. Impact of the COVID-19 pandemic on diagnosis of new cancers: A national multicenter study of the Veterans Affairs Healthcare System. *Cancer*. 2022 Mar 1;128(5):1048-1056. doi: 10.1002/cnrc.34011. Epub 2021 Dec 6. PMID: 34866184; PMCID: PMC8837676.

# Mailed FIT Implementation Guide

Addressing Workflow and Policy



[Mailedfit.org](https://mailedfit.org)



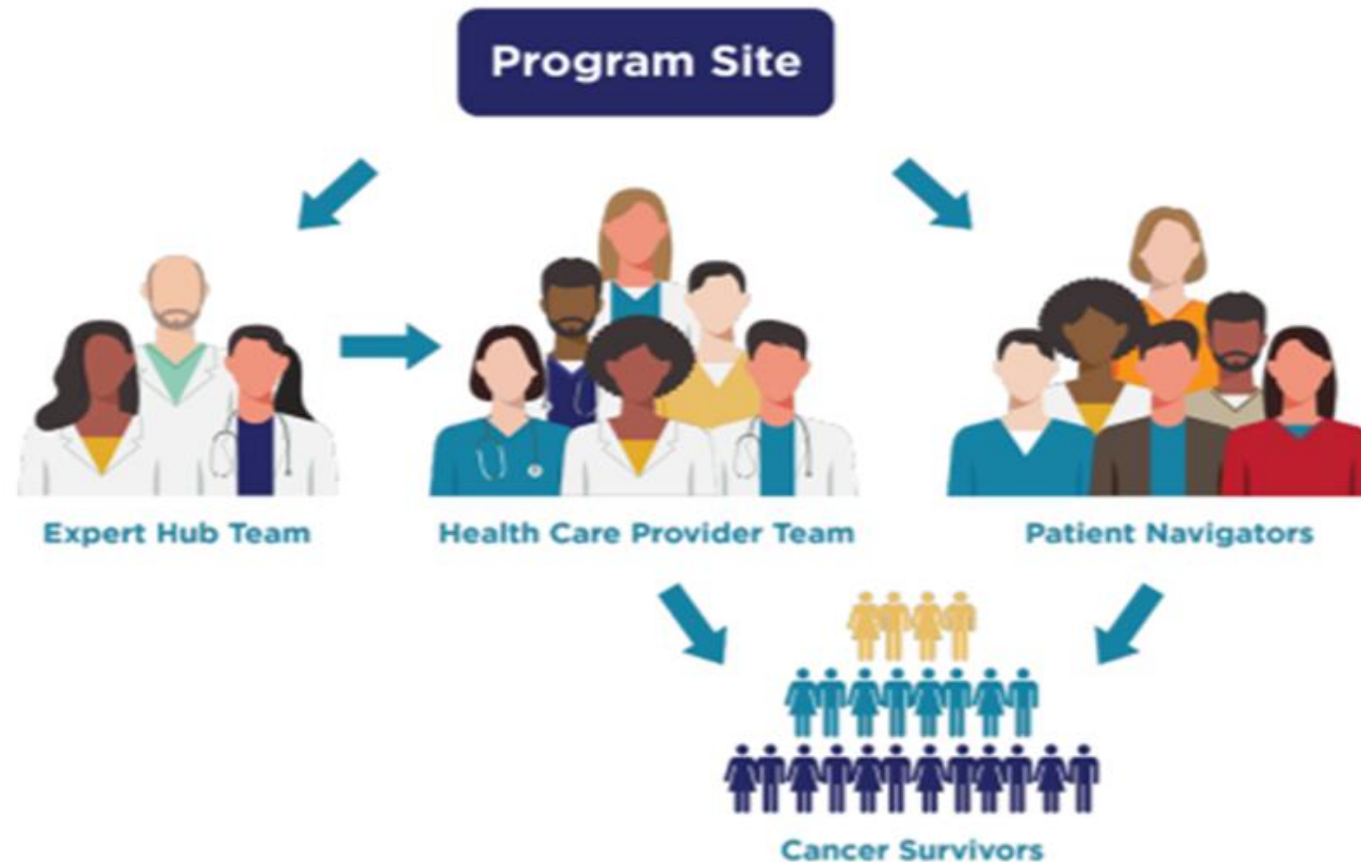


# Patient Navigation through Telehealth Nevada Success Story



# Using Both Population-and Individual-Level Interventions

## Project ECHO Telementoring + Patient Navigation



Source: Rohan E, et al Pairing Project ECHO and patient navigation as an innovative approach to improving the health and wellness of cancer survivors in rural settings. J Rural Health. 2022 May 25. doi: 10.1111/jrh.12682. Epub ahead of print. PMID: 35611881. Graphic: CDC, [Using Project ECHO and Patient Navigation to Improve the Health and Wellness of Cancer Survivors in Rural Communities](#)

# Pilot Findings



## Project ECHO

21

ECHO sessions were delivered.

240

participants attended ECHO sessions.

79%

of ECHO session participants said they intended to apply what they learned during the sessions.

92%

of participants said they learned something during the sessions.



## Patient Navigation

16

patient navigators were trained to serve cancer survivors in rural areas.

164

survivors were helped by patient navigators.

Source: CDC, [Using Project ECHO and Patient Navigation to Improve the Health and Wellness of Cancer Survivors in Rural Communities](#)

# All Nevada counties are classified as rural



Nevada has only 5 accredited Commission on Cancer facilities in the state.



Nevada has an estimated 132,950 cancer survivors.



The average distance between acute care hospitals in rural & frontier areas is 109 miles.



Rural and frontier counties exhibit increased cancer incidence and mortality rates.

Source: Nevada Cancer Coalition

# Project ECHO

## Nevada Cancer Coalition

- **Purpose:** Increase capacity of rural primary care providers and community health workers to care for and support rural cancer survivors
- **Target audience:** Rural-based primary care providers and ancillary care workers; primarily in the northeastern Nevada area extending towards Utah.
- **ECHO Hub:** University of Nevada-Reno
- **Series:** 6 session series, occurring twice monthly from September – December 2020

Source: Nevada Cancer Coalition pilot data submission

<b>September 2020</b>	Program Orientation
<b>October 2020</b>	Addressing the Needs of Breast Cancer Survivors Post Mastectomy
<b>October 2020</b>	Solving the "Unsolvable" Problems Post Mastectomy: Treating Lymphedema and Radiation Damage
<b>November 2020</b>	Late and Long-Term Side Effects of Radiation Therapy
<b>November 2020</b>	Late and Long-Term Side Effects of Cancer and Cancer Medicine Related Treatments
<b>December 2020</b>	Rural-based Physical Therapy and the Management of Cancer Treatment Orthopedic Side Effects

# Patient Navigation

## Nevada Cancer Coalition

- **Purpose:** Improve quality of life for rural cancer survivors and their caregivers by increasing access to patient navigation services, support services, and resources
- **Target audience:** Adult cancer survivors and their caregivers residing in Nevada's rural and frontier communities as well as health care providers serve rural survivors, rural primary care providers, and community health workers
- **Referral partner:** Cancer survivors, caregivers, and providers self-refer to the ThriveNV program
- **Recruitment:** Newsletters, promotional materials, and website referral forms



## CANCER SUPPORT FOR NEVADA

— ▢ —

Navigating a cancer diagnosis is complex.  
If you or a family member is dealing with  
a cancer diagnosis, is in treatment, or is  
a cancer survivor, we can help.

Source: Nevada Cancer Coalition pilot data submission

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## Other Resources





# AMIGAS: Cervical Cancer Screening

Ayudando a las Mujeres con Información, Guía, y Amor para su Salud (Helping Women with Information, Guidance, and Love for their Health)

- Delivery by trained *promotoras* (community health workers)
- Designed in conjunction with community
- For use in low-resource locations and communities



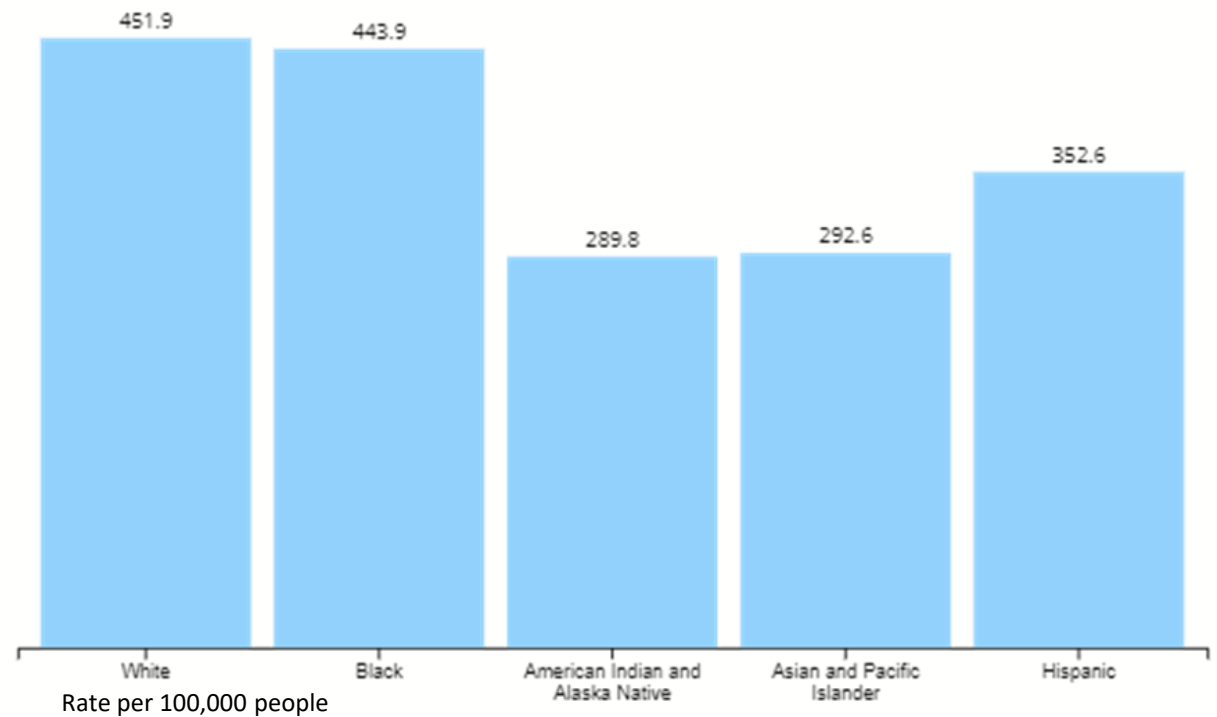
Sources: CDC, Cervical Cancer, [AMIGAS](#)

Smith JL, Wilson KM, Orians CE, Byrd TL. (2013). AMIGAS: Building a cervical cancer screening intervention for public health practice. *Journal of Women's Health*, 22: 718-23.

# Adapting AMIGAS for Black or African American Women

- Concentrates on reaching never/rarely screened women
- Developed in conjunction with national advisory group of experts
- Designed for delivery by community health workers

Rate of New Cancers By Race and Ethnicity, Both Sexes All Types of Cancer, United States, 2015-2019



Source - U.S. Cancer Statistics Working Group. U.S. Cancer Statistics Data Visualizations Tool, based on 2021 submission data (1999-2019): U.S. Department of Health and Human Services, Centers for Disease Control and Prevention and National Cancer Institute; <https://www.cdc.gov/cancer/dataviz/>, released in June 2022.

# Face Your Health



**FACT:** Studies show that African American women are more likely to die from cervical cancer than other women in the U.S.

**Here's what you can do to protect yourself.**

**FACT:** Studies from  
**Here**

**Know your risk.  
Get screened.  
BE THE FACE OF CHANGE.**

**FACE YOUR RISK**  
A free session

For more information, call (888) 555-1234

**FACT:** Studies show that African American women are more likely to die from cervical cancer than other women in the U.S.

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**FACE YOUR HEALTH**  
A free learning session for women

For more information, call (888) 555-5234.

# My Next Cervical Cancer Screening APPOINTMENT

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Clinic Name: \_\_\_\_\_ Clinic Phone Number: \_\_\_\_\_


Clinic Address: \_\_\_\_\_

When: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ at \_\_\_\_ : \_\_\_\_ am / pm  
 Month Day Year

Bus or Train Route: \_\_\_\_\_

**What To Bring With You:**


- ▶ Picture identification (Driver's License, state ID card, etc.)
- ▶ Insurance card (if you have one)
- ▶ Other forms: \_\_\_\_\_



BRING YOUR HEALTH

Before You Go: What You Should Know	While You're There: What You Should Ask
<p>Two days before your exam:</p> <p>Don't have sex, use tampons, or jelly            insert in your vagina</p> <p>Don't use the clinic,            schedule your</p> <p>Name: _____</p>	<p>What tests are you doing today?</p> <p> <input type="checkbox"/> HPV  <input type="checkbox"/> Pap  <input type="checkbox"/> Other: _____           </p> <p>When do I get my results?</p> <p>Who do I call with questions?</p>

**Remember:** Cervical cancer is not enough. Regular screening can help find it early when it's easier to treat. Get screened for cervical cancer at least every 3 years.



## CERVICAL CANCER SCREENING: Where to Go

When you're ready to schedule an appointment, here are nearby clinics that do free or low-cost cervical cancer screening. Call your community health worker for help setting up an appointment, finding a way to get there, and arranging for child care if you need it.

### What To Bring With You

- ✓ Picture identification (driver's license, state ID card, etc.)
- ✓ Insurance card (if you have one)
- ✓ Other forms: \_\_\_\_\_

### What To Know Before You Go

#### Two days before your exam:

- Don't douche
- Don't use a birth control foam, cream, or jelly
- Don't use a medicine or cream in your vagina
- Don't use a tampon
- Don't have sex

*If you get your period, call the clinic. They might need to re-schedule your appointment.*

Clinic Name	Address, Phone Number, Website	Hours	Bus or Train Route #
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## yourself FROM CERVICAL CANCER

are more likely to die from cervical cancer in the U.S.

*This doesn't have to happen.*

Phone Number:

Regular screening can prevent cervical cancer. It's easier to cure. Get screened.



# FACE THE *Facts*

## PROTECT *Yourself* FROM CERVICAL CANCER

African American women are more likely to die from cervical cancer than other women in the U.S.

*This doesn't have to happen.*

### Know Your Risk

- Most cervical cancer is caused by a virus, called the human papillomavirus, or HPV
- You get HPV from sexual contact.
- Most of the time, HPV doesn't cause any health problems and goes away on its own.
- But sometimes, HPV causes problems with your cervix. In rare cases, it can turn into cervical cancer.
- Cervical cancer is easy to cure, if you find it early.

### Get Screened

- Regular screening can prevent cervical cancer, or help find it early
- Here's how you can protect your health:
  - ✓ **When you turn 21**, get your first Pap test to screen for cervical cancer.
  - ✓ **When you turn 30**, get a Pap test every 3 years **OR** a Pap with an HPV test every 5 years.
  - ✓ **When you turn 65**, you may be able to stop getting screened. Talk with your doctor.

### Be the Face of Change

- Talk with your community health worker about where you can get screened. She can help find a place that's right for you.
- Make a promise to yourself, and make an appointment today!

**Community Health Worker's Name:**

**Agency:**

**Phone:**

**REMEMBER:** One screening is not enough. Get screened for cervical cancer at least every 3 years. Make this a promise to yourself for life.



Source: CDC, [Face Your Health](#)

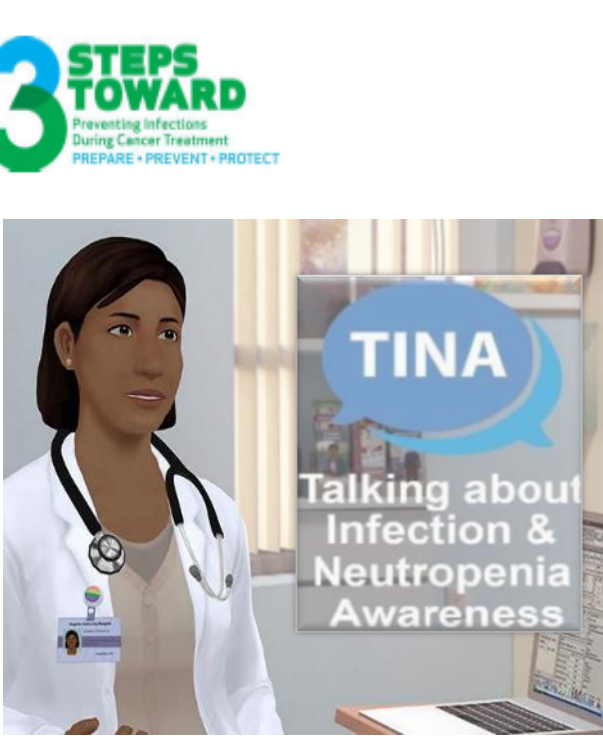


# Improving Knowledge About Risk and Prevention



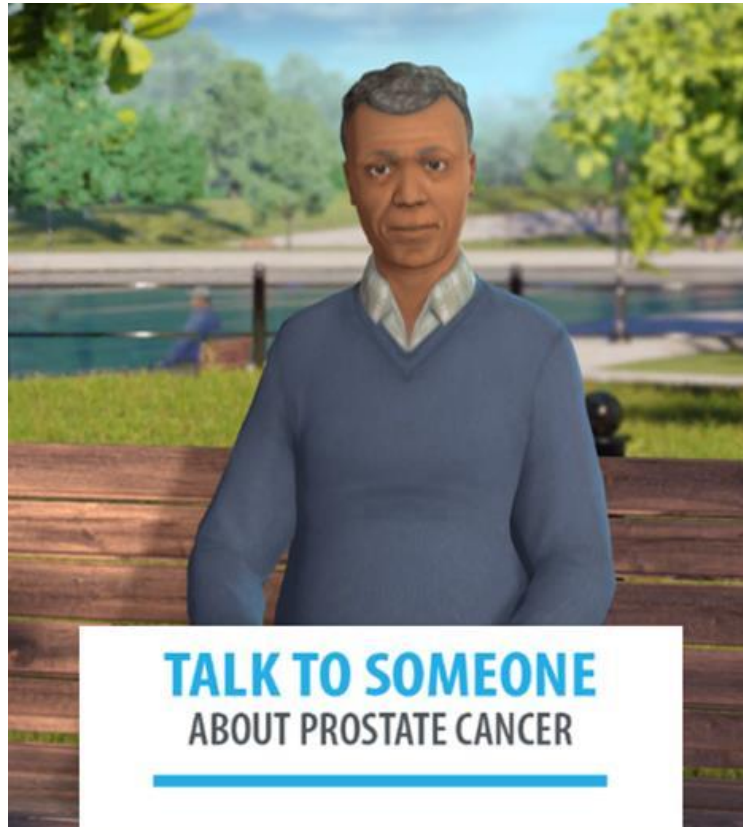
The first panel shows a woman in a red jacket with the text "Talk to Someone ANXIETY & DISTRESS". The second panel shows a woman in a yellow jacket with the text "Talk to Someone TOBACCO". The third panel shows a woman in a yellow jacket with the text "Talk to Someone PHYSICAL ACTIVITY & NUTRITION". The fourth panel shows a woman in a yellow jacket with the text "Talk to Someone ALCOHOL".

Creating Healthy Habits for Breast Cancer Recovery



The top left features the logo "3 STEPS TOWARD Preventing Infections During Cancer Treatment PREPARE • PREVENT • PROTECT". The main image shows a doctor in a white coat next to a poster that reads "TINA Talking about Infection & Neutropenia Awareness".

Reducing Infection Risk During Chemo



The image shows a man in a blue sweater standing in a park. Below him is a white box with the text "TALK TO SOMEONE ABOUT PROSTATE CANCER".

Prostate Cancer Awareness for Screening and Treatment

Source: CDC, [Cancer Simulations](#)

# Ending Cancer as We Know It

## Cancer Moonshot Initiative 2.0

### Goals:

- Reduce the death rate from cancer by 50% over the next 25 years
- Improve the experience of people and their families living with and surviving cancer.
- Call to action to jumpstart progress on cancer screenings that were missed as a result of the pandemic



Source: White House, [Fact Sheet: President Biden Reignites Cancer Moonshot to End Cancer as We Know It](#)

# Thank you!

Go to the official federal source of cancer prevention information:  
[www.cdc.gov/cancer](http://www.cdc.gov/cancer)



Division of Cancer Prevention and Control

Reliable. Trusted. Scientific.

*The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.*