



EARLY DETECTION SAVES LIVES

Cancer Prevention and Control Programs

OVERVIEW

Cancer is the second-leading cause of death in the city, but many cancers are preventable. Colorectal cancer is the second-leading cause of cancer death in New York City, after lung cancer. Each year in NYC, about 1,200 adults die from colon cancer and more than 3,500 New Yorkers are newly diagnosed.

One of the most effective ways to prevent cancer are through early detection and screenings. For this reason the the New York City Department of Health and Mental Hygiene (DOHMH) Cancer Prevention and Control Program prioritizes early detection of colorectal cancer. The DOHMH leads efforts in New York City to ensure that all men and women who lack health insurance – have access to free cancer screening for breast, cervical, colorectal and prostate cancer. When detected early, these cancers are more easily treated. Failing to have these cancers detected early can lead to deadly consequences.

The DOHMH Cancer Prevention and Control Program manages three primary initiatives: 1) Citywide Colon Cancer Control Coalition (C5); 2) the Colonoscopy Patient Navigator Program; and 3) the NYC Community Cares Project.

Free Colon Cancer Screenings for the Uninsured —NYC Community Cares Project

The DOHMH's NYC Community Cares Project (CCP) provides all aspects of colonoscopy screenings free of charge to uninsured patients referred from primary care sites. CCP facilitates partnerships between endoscopy centers and primary care centers, such as Community Health Centers. This collaboration offers a unique opportunity to improve colorectal cancer screening rates and tackle persisting health disparities for uninsured New Yorkers. Since August 2013, thousands of uninsured New Yorkers have completed colonoscopy screenings through CCP.

Colonoscopy Patient Navigator Program Model

The DOHMH's Colonoscopy Patient Navigator Program (CPNP) trains and supports Patient Navigators who assist patients referred for colorectal cancer screening colonoscopies in hospitals. Patient Navigators guide patients through the screening process, helping them access health care, connect with hospital personnel and track health interventions and outcomes.

The CPNP provides education for Patient Navigators, as well as technical assistance to interested local hospitals that employ Patient Navigators for screening in hospital settings. The technical assistance includes the initial training of Patient Navigators on protocols and record documentation, as well as ongoing education.

Since the program started in 2003, Patient Navigators have helped more than 100,000 New Yorkers get colonoscopies. They have prevented potential cancers in nearly 20,000 people who have had polyps removed.

Citywide Colorectal Cancer Control Coalition

This public-private partnership offers strategic direction and expertise on Health Department initiatives, including educational campaigns, clinical guidelines and clinical practice improvement. Since C5's inception in 2003, the screening colonoscopy rate among adults ages 50 and older in the city has increased by 64% (from 42% in 2003 to 69% in 2018) and eliminated almost all inequities by race/ethnicity in colorectal cancer prevention.

NEW YORK CITY COUNCIL CANCER INITIATIVES

In addition the critical work done by the DOHMH, the each year the New York City Council provides discretionary funding to community organizations through its Cancer Initiative. These funds have empowered critical services in under-resourced communities for more than twenty years.

In 2021 the City Council Cancer Initiative provided funding to the following organizations: Astoria/Queens Share-ing and Care-ing, Inc., the Charles B. Wang Community Health Center, Inc., Gilda's Club New York City, New York Cancer Center, Richmond Medical Center, SHARE: Self-Help for Women with Breast or Ovarian Cancer, and Tell Every Amazing Lady About Ovarian Cancer Foundation.

MORE IMPORTANT THAN EVER BEFORE

Cancer patients have long faced significant barriers to accessing care. COVID-19 has magnified these barriers, with 46% of cancer patients and survivors reporting a change in their ability to pay for care due to the pandemic, and 79% experiencing delays in active treatment. The pandemic has also shone a spotlight on health disparities across populations. People of color are more likely to be uninsured, increasing the likelihood they will be diagnosed with advanced cancer.

While policymakers are addressing acute needs related to COVID-19, we need city leaders to continue their commitment to the fight against cancer. These efforts have never been more important to the health of New Yorkers. The COVID-19 pandemic and resulting economic downturn have led to loss of health coverage among lower income earning New Yorkers. According to the Community Services Society, 22% of lower income earning New Yorkers who lost employment income in their household due to COVID-19 said that they or someone in their household lacked health insurance coverage since the start of the pandemic, double the share of those who did not experience wage or job loss (11 percent).

BUDGET RECCOMENDATIONS:

- New York City should renew its commitment to reducing cancer death rates by maintaining its current commitment of \$1.6 Million in 2021-2022 to the New York City Department of Health and Mental Hygiene Cancer Prevention and Control Program. This funding will allow the DOHMH to focus on getting cancer preventive screenings to those who need them.
- The City Council should renew its commitment to improving screening in under-resourced communities by maintaining its current commitment of \$1 Million in 2021-2022 in funding to community partners through the City Council's discretionary funding.

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