#### ACS Cancer Action Network 2021 Michigan Policy Forum

# THE FACES OF CANCER

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The 2021 forum focus is to look at State of Michigan and access to care hurdles that Michiganders are facing across the entire state.



- The 2019 Policy Forum concentrated on Detroit that has a high cancer burden.
- Here, we consider nuanced outcomes for other communities/counties that are driven by social determinants.



- Overview
- Regional Considerations
- Social Determinants & Disparities: who suffers the most?
- O What can we do?
- Summary



### Incidence vs. Mortality

- Use mortality to consider drivers of severe cancer burden.
- Lack of follow-up is also a key factor in cancer mortality (Ford et al., 2021).
- Often compounded by other factors including implicit bias, patient distrust of medicine, patientprovider communication.



#### Social Determinants vs. Health Risk Behaviors

- Social Determinants: factors driven by birthright, where we live and work, and age, etc.
- Health Risk Behaviors: e.g., smoking, substance use, tanning, etc.
- Often compounded by other outside factors including implicit bias, low health literacy, clinical processes, and payor.



#### **Review of Cancer in Michigan:**

- Second leading cause of death after heart disease.
- Lung cancer is the most prevalent type of cancer in Michigan.
- Michigan's cancer mortality rate is 156.6
  persons per 100,000. This is higher than the U.S. rate of 146.2. (2019 rates.)

- About 150 Michiganders will be diagnosed with cancer and 57 will die from cancer every day.
- We know the greatest cancer burden is carried by Detroit and Grand Rapids environs.
- What about the rest of the state that may have barriers to access for diagnosis, treatment, and survivorship?



Many cancer barriers and social determinants are associated drivers of the cancer burden:

- Age
- Ethnicity
- Education
- Poverty
- Rural



Age: 65 or older

Alcona35%

Ontonagon 33.3%

Keweenaw 31.3%



Race: Non-White

Saginaw 30.0%

Chippewa 29.9%

o Ingham 29.4%

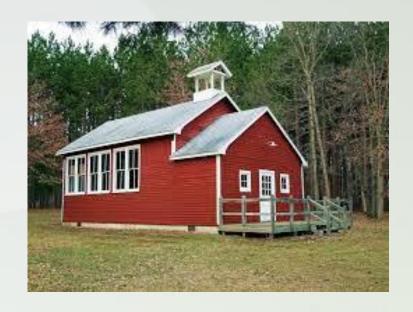


## Education-less than High School

Lake 17.4%

Oscoda 17.2%

Clare 15.2%



## Poverty:

o Isabella 27.3%

Lake 25%

Clare 23.6%





#### **Most Rural:**

- 1. Keweenaw
- 2. Ontonagon
- 3. Baraga



	Age 65+	Non- White	Less than HS	Below Poverty	Rural	Incidence	Mortality	% diff
Michigan						435.2	166.9	
Alcona	X					394.8	168.2	+2.2
Baraga					Χ	332.7	167.3	+0.4
Chippewa		Χ				397.3	167.3	+0.4
Clare			X	X		474.9	205.5	+38.6
Ingham		Χ				435.7	157.1	-9.9
Isabella				X		362.1	162.2	-4.7
Keweenaw	X				Χ	337.2	133.2	-33.7
Lake			X	X		362.5	186.4	+19.5
Ontonagon	X				X	395.8	195.3	+28.4
Oscoda			X			397.9	181.9	+15.0
Saginaw		Χ				434.4	168.8	+1.9



#### What to consider:

- Funding for Health Education in schools.
- Policies around training health providers to engage low education, poor populations, e.g. Appeal to AMA, Oncology forums, offer CMEs for patient education, etc.
- Fund/reimburse for health navigators to assist utilizing the complex cancer continuum.
- Can you think of others?

- American Cancer Society Michigan Cancer Statistics
   <a href="https://cancerstatisticscenter.cancer.org/#!/state/Michigan">https://cancerstatisticscenter.cancer.org/#!/state/Michigan</a>
- Centers for Disease Control & Prevention
   <a href="https://statecancerprofiles.cancer.gov/quick-profiles/index.php?statename=michigan#t=3">https://statecancerprofiles.cancer.gov/quick-profiles/index.php?statename=michigan#t=3</a>
- Ford, S et al., 2021 Gyn Onc.
   <a href="https://pubmed.ncbi.nlm.nih.gov/33323276/">https://pubmed.ncbi.nlm.nih.gov/33323276/</a>
- Michigan Department of Health & Human Services Cancer Atlas, 2019.
   <a href="https://www.michigan.gov/documents/mdhhs/map\_atlas\_ADA\_x\_661747\_7">https://www.michigan.gov/documents/mdhhs/map\_atlas\_ADA\_x\_661747\_7</a>.
   <a href="pdf">pdf</a>



## THANK YOU! sford@msu.edu

