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.

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- 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.

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o Overview

o Regional Considerations

o Social Determinants & Disparities: who suffers the most?

o What can we do?

o Summary

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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, patient-provider communication.

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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.

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Review of Cancer in Michigan:

o Second leading cause of death after heart disease.

o Lung cancer is the most prevalent type of cancer in Michigan.

o 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.)

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- 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?

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

- ○ Age
- ○ Ethnicity
- ○ Education
- ○ Poverty
- ○ Rural

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Age: 65 or older

○ Alcona   35%

○ Ontonagon   33.3%

○ Keweenaw   31.3%

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Race: Non-White

○ Saginaw   30.0%

○ Chippewa 29.9%

○ Ingham   29.4%

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Education-less than High School

o Lake   17.4%

o Oscoda 17.2%

o Clare   15.2%

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Poverty:

○ Isabella   27.3%

○ Lake   25%

○ Clare   23.6%

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Most Rural:

1. Keweenaw

2. Ontonagon

3. Baraga

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	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					X	332.7	167.3	+0.4
Chippewa		X				397.3	167.3	+0.4
Clare			X	X		474.9	205.5	+38.6
Ingham		X				435.7	157.1	-9.9
Isabella				X		362.1	162.2	-4.7
Keweenaw	X				X	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		X				434.4	168.8	+1.9

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What to consider:

o Funding for Health Education in schools.

o Policies around training health providers to engage low education, poor populations, e.g. Appeal to AMA, Oncology forums, offer CMEs for patient education, etc.

o Fund/reimburse for health navigators to assist utilizing the complex cancer continuum.

o Can you think of others?

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o   American Cancer Society Michigan Cancer Statistics

https://cancerstatisticscenter.cancer.org/#!/state/Michigan

o   Centers for Disease Control & Prevention

https://statecancerprofiles.cancer.gov/quick-profiles/index.php?statename=michigan#t=3

o   Ford, S et al., 2021 Gyn Onc.

https://pubmed.ncbi.nlm.nih.gov/33323276/

o   Michigan Department of Health & Human Services Cancer Atlas, 2019.

https://www.michigan.gov/documents/mdhhs/map_atlas_ADA_x_661747_7.pdf

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THANK YOU!

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