2020 NPCR GEORGIA CANCER REGISTRY SUCCESS STORY

STORY TOPIC: Collaborative partnership

STORY CATEGORY: Public Health Impact

STORY TITLE: Targeting Cancer Screening at the Worksite

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SUMMARY

Georgia launched a worksite program to increase cancer screening among high-risk population. The Georgia Breast and Cervical Cancer Screening Program (BCCP) collaborated with the Georgia Cancer Registry (GCR) and the Occupational Health Surveillance Program (OH) to analyze the Behavioral Risk Factor Surveillance System cancer screening by occupation and industry as well as cancer incidence and mortality data. Occupation with low prevalence of cancer screening were identified while cancer incidence and mortality data identified geographical areas. BCCP developed Cancer Screening Worksite Guidance to completement Georgia's initiative "Work Healthy Georgia Toolkit." As a result, three Public Health Districts agreed to participate.

CHALLENGE

Georgia breast cancer incidence and mortality rates are higher than the United States, while cervical cancer incidence and mortality is similar or slightly lower than the United States overall. Georgia's breast and cervical cancer screening prevalence were stagnant at around 79% for women 50-75 years of age who had a mammogram within the last two years for the last seven years. Prevalence did increase by one percentage point (79% to 80%) for cervical cancer screening among women 21-65 years of age in the past three years. Georgia did not meet Healthy People 2020 (HP2020) objectives for breast cancer screening (81.1%) and cervical cancer screening (93%) even though Georgia's been achieving the screening performance measures set by the CDC's National Breast and Cervical Cancer Early Detection Program (NBCCEDP), and the Georgia Comprehensive Cancer Control (GC3) Steering Committee made breast and cervical cancer screening its priority.

Additionally, Georgia's overall age-adjusted breast cancer incidence rate has been stable since 2005, with a significant and steady increase among non-Hispanic (NH) Black females since 2000. There has been no significant change in late-stage age-adjusted breast cancer rate by race/ethnicity. As for breast cancer mortality, there was a significant decrease for both Black and White females in Georgia since 2000. As for cervical cancer, incidence rate decreased significantly among both NH Black and NH White females, additionally this decrease was faster among NH Black females (2.9%) than NH White females (0.4%). Similarly, the age-adjusted late-stage cervical cancer rate decreased significantly from 2000 to 2015 and then increased for 2016 and 2017.

Data Sources: Georgia Behavioral Risk Factor Surveillance System, Georgia Cancer Registry and Georgia Vital Records.

SOLUTION

Implementing cancer screening at the workplace and/or implementing policies that would support cancer screening would improve overall cancer screening in Georgia as well as improve cancer screening disparities among women of low income and low education level. Moreover, research suggests that implementing worksites wellness program does not have negative effect on profitability. In fact, employers who offer paid leave for medical reasons such as screening, may realize a healthier and more productive workforce and tend to spend less on direct medical costs, worker compensation and disability costs, replacement costs for ill or injured workers who are absent, and costs for recruiting and training new workers.

Georgia women had significantly lower breast and cervical cancer screening rates than the overall population when they work in occupations such as: Legal; Food Preparation and Serving Related; Building and Grounds Cleaning; Maintenance; Personal Care and Services; and Transportation and Material Moving. The BCCP team created worksite cancer policy guidance as a supplement to Work Healthy Georgia Tool. The GA-BCCP team reached out to all 18 Georgia Public Health Districts and three participated. These participants had breast and cervical cancer screening prevalence lower than the overall Georgia prevalence and breast and cervical cancer incidence rates that were the same or higher than the Georgia overall breast and cervical cancer rates.

RESULTS

Overall, almost one out of every four working women age 40 years and older, did not have a mammogram within past 2 years. According to the American College of Obstetricians and Gynecologists, women aged, 40-74 with average risk should get screened with mammography and clinical breast exams annually. ¹ Breast cancer screening is significantly lower among women working in Legal 54.7% even though 93% of these women have health coverage; while 60% of women working in Food Preparation and Serving Related had their mammogram but only 55.7% had health coverage; and 57.8% among those working in Personal Care and Service had their mammograms while 65.4% had health care coverage. One out of seven working women 21-65 years of age did not have their Pap test in the last three years. Georgia women working in Transportation and Material Moving (71.6%) had significantly lower Pap test screening prevalence in the past 3 years than all working women (85.1%) in Georgia. Additionally, Georgia women working in these occupations had a significantly lower prevalence of health care coverage 53.9% and 73%, respectively.

Three Public Health Districts agreed to participate North (2-0), East Metro (3-4) and Northeast (10) covering a total of 28 out of 159 counties in Georgia.

	Mammogra m 2014-2018 Percent	Pap Test 2014- 2018 Percen t	Breast Cancer Incidence 2013-2017 Rate/100,00 0	Breast Cancer Mortality 2013-2017 Rate/100,00 0	Cervical Cancer Incidence 2013-2017 Rate/100,00 0	Cervical Cancer Mortality 2013-2017 Rate/100,00 0
Georgi a	74	85.1	126.7	22.4	7.8	2.3
District 2-0	72.8	81.4	122.1	17.7	7.3	1.7
District 3-4	71.2	76.4	129.6	23.5	7.1	2.1
District 10	74.6	77.3	129.0	22.6	7.8	2.6

Even though the country and Georgia are in the mist of the COVID pandemic, the three Public Health Districts agreed to participate and in the process of recruiting highlighted occupations to participate in the project.

SUSTAINING SUCCESS

Georgia has been looking for innovative way to improve breast and cervical cancer screenings. More than 2 million women are employed in Georgia, providing worksite cancer screening guidance for all businesses should improve cancer screening. Having three Georgia Public Health Districts agreeing to participate has been a great success and will shed light on the implementation of this Guidance. BCCP, GCR and OH Programs will recruit additional Public Health Districts each year. Additionally, the Georgia Comprehensive Cancer Leadership team will highlight this effort with partners and stakeholders to speed the adoption of this targeted strategy.

REGISTRY CONTACT INFORMATION

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Source

¹ American College of Obstetricians and Gynecologists Breast Cancer Risk Assessment and Screening in Average-Risk Women

https://www.acog.org/clinical/clinical-guidance/practice-bulletin/articles/2017/07/breast-cancer-risk-assessment-and-screening-in-average-risk-women