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Cancer Outreach for Homeless Services Consortium City of Madison

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Carbone's goal for community partnership

Build and expand upon authentic relationships across WI to improve the health of our communities

- Increase community awareness of cancer risk reduction strategies
- A focus towards communities with disproportionate burden
- Think about ways to connect communities and research



Goals for Today

- To provide your team with a better understanding of cancer screening, prevention, and coordination of care
- To equip you with knowledge to share with the community engaged in homelessness services
- Hear from your team about cancer –related issues and state-of-affairs with the homeless population in Dane County

Social Determinants of Health

“The circumstances in which people are born, grow up, live, work, and age and the systems put in place to deal with illness” that are shaped by the “distribution of money, power, and resources at global, national, and local levels.”



Childhood experiences



Housing



Education



Social support



Family income



Employment



Our communities



Access to health services

MPT

Social Determinants & Cancer

Social Injustice

- Am I treated equally as someone of a different race when I see a physician for a health concern?

Social Influence

- Do my friends encourage healthy behaviors?

Socioeconomic Status

- Do I have the same opportunities to be healthy as someone who makes more money than me?

Access to Health Services

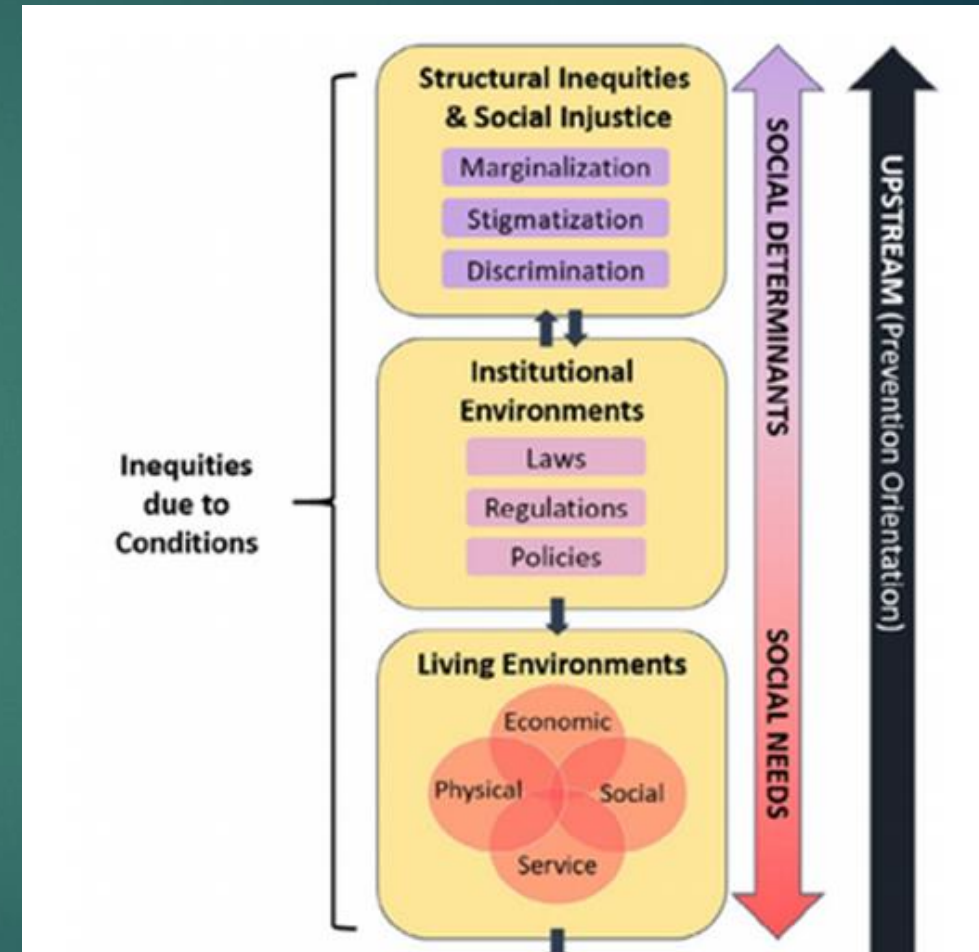
- Do I have adequate insurance coverage?
- Am I able to pay for my copayment and out-of-pocket costs for a necessary procedure?

Education

- Do I have the tools I need to make an informed decision about my health?

Physical Environment

- How far do I need to travel to get to my screening appointment?



How Carbone is Addressing Social Determinants

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- Community Advisory Boards
- Increase racial representation in clinical trials participation
- Work with communities to engage in research from the start
- Work with stakeholders to prioritize cancer prevention/education work across Wisconsin
- Work to change institutional and state policy (clinical trials reimbursement)
- Work to provide travel to/from home to cancer appointments
- Break down barriers of systemic racism and inequalities
- Dedicate resources and support hiring UIM into the cancer pipeline



Goals



SCREENING



PREVENTION



**COORDINATION OF
CARE**

Cancer in Wisconsin

Cancer: Wisconsin's Leading Cause of Death

in WISCONSIN

every day
87 PEOPLE
will hear the words
"You have cancer."

Most common CANCERS in Wisconsin

LUNG & BRONCHUS
BREAST
PROSTATE
COLORECTAL

More than **ONE** person **EVERY HOUR**
EVERY day dies of cancer.

Half of all cancer deaths **ARE** preventable.

WE can decrease cancer in Wisconsin by:

- Eliminate tobacco use & exposure
- Encourage healthy balanced diets
- Support active lifestyles
- Limit high risk alcohol consumption
- Reduce risky tanning behaviors
- Promote recommended cancer screenings
- Promote cancer preventive vaccinations

Wisconsin Cancer Collaborative
Together...Reducing the burden of CANCER in Wisconsin
wicancer.org

Some cancers occur more often and people die from them more in Wisconsin than the U.S. as a whole.

Cancers occurring more often in WI than the rest of the U.S.

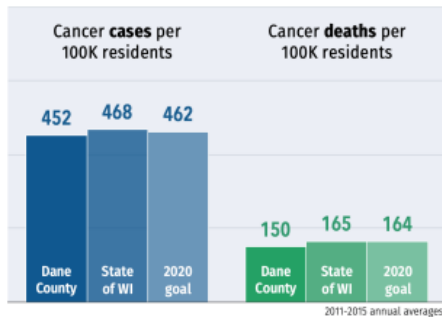
Uterine	Prostate
Kidney	Brain
Leukemia	Esophageal
Bladder	Non-Hodgkin's Lymphoma

Cancer in Dane County

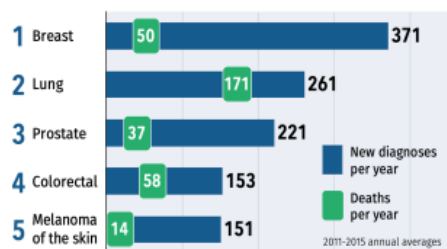


County population (2016):	531,273	State:	5.78 million
Percent rural:	12 %	State:	30 %
Percent racial minorities:	20 %	State:	18 %
Poverty rate:	11 %	State:	12 %

Dane County cancer stats



County's 5 most common cancers



How Dane ranks among other counties

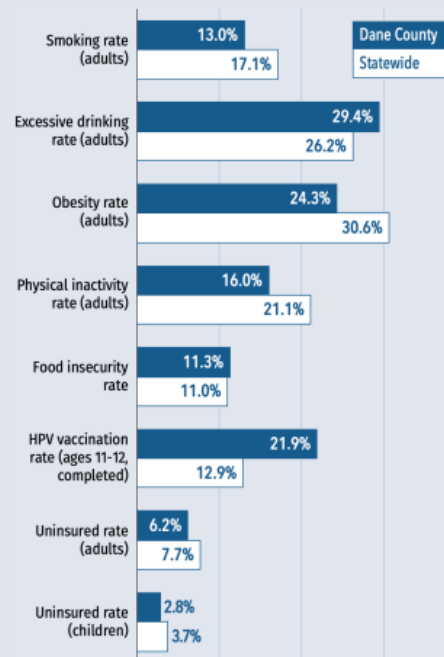
1st rank indicates the county with the highest 2011-2015 cancer rate

	All cancers	Lung	Prostate	Breast	Colorectal	HPV-related
New cases	40 th (72)	54 th (72)	63 rd (71)	9 th (72)	58 th (71)	34 th (69)
Deaths	63 rd (72)	62 nd (71)	45 th (65)	50 th (65)	55 th (64)	--

Number in parentheses indicates number of Wisconsin's 72 counties that have sufficient data to be ranked for each measure.

What affects cancer outcomes in Dane County?

A snapshot of social determinants and behaviors that can increase or decrease cancer risk



See reverse for more data & sources ▶

Cancer in Dane County

Cancer in the homeless population

- ▶ Homeless individuals are at increased risk of cancer due to numerous behavioral and environmental factors (cigarette/alcohol abuse, chronic hep c, HIV, dietary inadequacy, sun exposure)
- ▶ 2x more likely to die from cancer
- ▶ Few studies have focused on oncology care in persons experiencing homelessness
 - ▶ However we know present with advanced stages of cancer
 - ▶ And screen less

Barriers to care

- ▶ Lack of accompanying companion to procedures
- ▶ Fear from prior trauma
- ▶ Lack of access
- ▶ Low health literacy
- ▶ Low rates of health education during clinical encounters
- ▶ If screened,
 - ▶ Lack access of appropriate follow up care

Basic prevention

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See your Provider
every Year



Quit Tobacco



Nutrient-dense
diet



Increase activity



Maintaining a
Healthy Weight



Limit or Avoid
alcohol



Use sun
protection

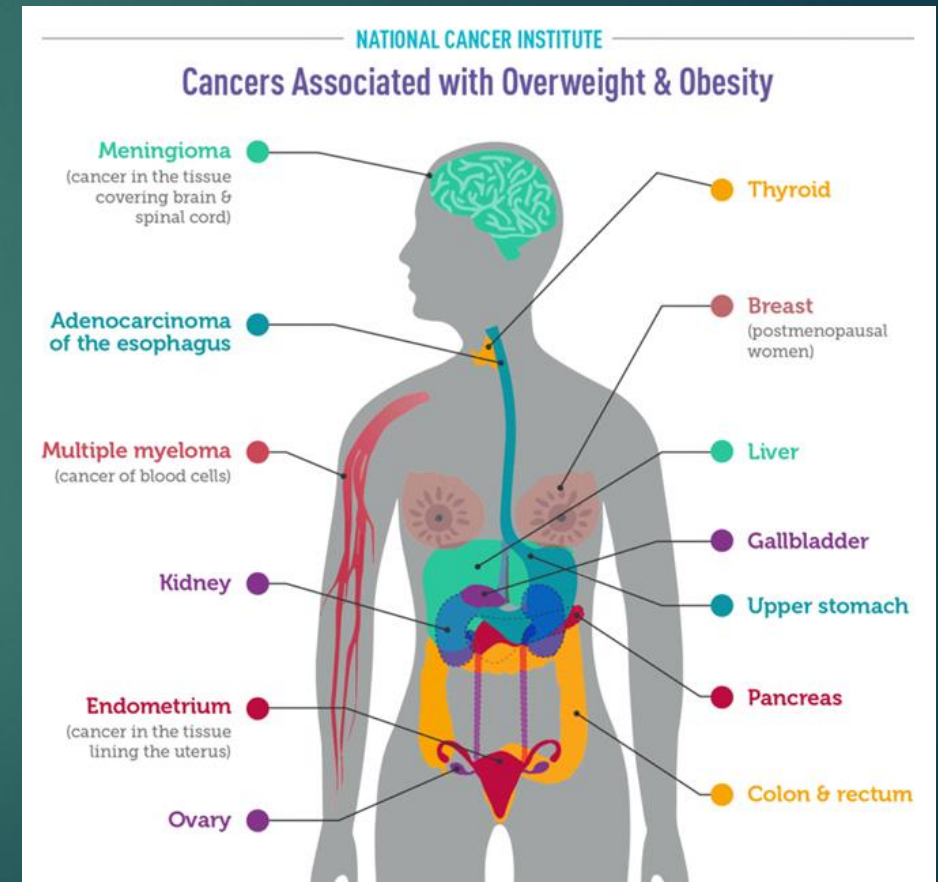


HPV Vaccine

Obesity and Cancer Rates

- A person who is obese (BMI >30) may have higher cancer risk than someone at a healthy weight (BMI=18.5-under 25)

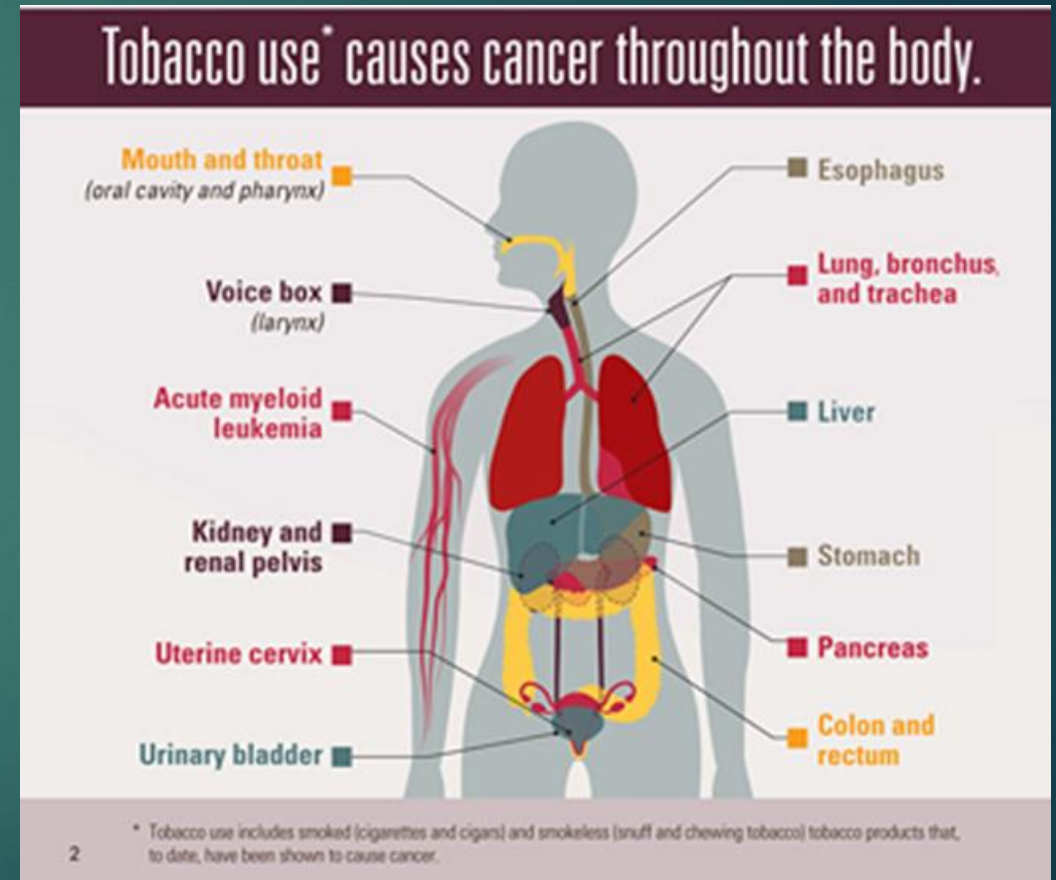
Some cancers, including liver, stomach, esophageal, kidney, and endometrial, can be as much as twice the risk for a person who is obese than person who is at a healthy weight



Tobacco use and Cancer

Tobacco use increases your risk of developing cancer and is attributable to cancers that take place all over the body.

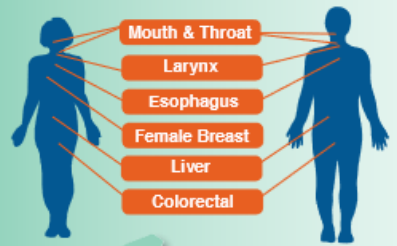
It's important to note that a person who **does not** use tobacco can still be at risk for these cancers but will be at lower risk than someone who **does** use tobacco.



Alcohol and Cancer

Addressing High-Risk Drinking to Reduce Cancer Burden in Wisconsin

Alcohol has been shown to cause **7 different cancers:**



The **MORE** alcohol a person drinks, the **HIGHER** their risk for cancer.

in WISCONSIN

High-risk drinking is a **PROBLEM.**



Wisconsin ranks **3rd** nationally in rates of **heavy** and **binge** drinking.

Heavy Drinking for
Women = **8+** Men = **15+**
drinks per week



Binge Drinking for
Women = **4+** Men = **5+**
drinks on one occasion



WE can decrease alcohol-related cancers in Wisconsin.

DECREASE alcohol consumption.

DISCOURAGE underage drinking.

SUPPORT policies that discourage high-risk alcohol use.

ENCOURAGE healthcare providers to discuss the health risks of alcohol use with patients.



Cancer	Screening	Age	Prevention
Breast	Mammography MRI or US	Starting at 50yr. USPSTF*	<ol style="list-style-type: none"> Regular, high-quality mammogram Clinical breast exam
Cervical	<ol style="list-style-type: none"> Pap HPV test 	21yr-65yr. Every 5yr (co-test with Pap) or Pap every 3yr	HPV vaccination Starting as early as 9yr- 26yr.
Colorectal	<ol style="list-style-type: none"> Colonoscopy Stool tests (Cologuard- FIT+ DNA, FIT-Kit antibodies) 	Starting at 45yr – 75yr.	<ol style="list-style-type: none"> Regular Colonoscopy/Stool tests, varies frequency Addressing risks/ symptoms with provider
Lung	CT scan	50yr.-80yr. Current or former smokers Ex: 1 pack daily /20yrs or 2 packs daily/ 10 yrs.+	<ol style="list-style-type: none"> Quit Tobacco Environmental Exposure reduction (Radon, asbestos, secondhand smoke)
Skin	Dermatologic skin exam	Varying reports	<ol style="list-style-type: none"> Self-assessment of skin changes/ moles Reducing sun exposure SPF
Prostate	PSA*	Starting as early as 45yr.	Address risks/symptoms with provider

*recommendations may vary

Who needs to be tested?

Age	What to do
Under 40	Talk to your doctor
40 - 49	Talk to your doctor
50 - 74	Get a mammogram every 2 years
75+	Talk to your doctor

Who should get tested early?

You have a higher risk of breast cancer if:

- You or someone in your family has had breast cancer
- You had radiation therapy to your chest or breast
- You had your 1st menstrual period before age 12
- You had your 1st baby before age 30, or never had a full term pregnancy
- Your mother used DES estrogen treatment to prevent miscarriage, and you were born between 1940-1971

Wisconsin Well Woman

Breast & Cervical Screenings

Wisconsin Well Woman Program

Dawn Henslee
Public Health Madison/Dane
County
2705 E Washington Ave
Madison, WI 53704
Phone: 608-242-6385
Fax: 608-266-4858
dhenslee@publichealthmdc.com

Ana Karina Burton
UW Health Outreach Patient
Navigator
aburton@uwhealth.org

Paying for the test:

MPT

Health insurance

Breast cancer tests are free with health insurance.

Well Woman Program

Pays for breast cancer tests if you:

- Are between ages 45-65
- Don't have health insurance, or need help paying for a breast cancer exam
- Have a monthly income between:

Family Size	1	2	3	4	5
Annual Income	\$36,450	\$49,300	\$62,150	\$75,000	\$87,850

Count the income of all people in your family

Lung Cancer Resources

- ▶ Quit Line – 800-QUIT-NOW
 - ▶ Free Phone support
 - ▶ Free 2-wk sample of nicotine gum, lozenges or patch
- ▶ Free Smoking Cessation counseling and medications*
- ▶ UW Clinical Trials

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Colorectal Cancer Screenings

- ▶ Access Community Health Centers or other FQHC
 - ▶ Cologuard

Colorectal Cancer:
2nd Most Common Cancer in Wisconsin

in WISCONSIN
7 PEOPLE every DAY will find out they have colorectal cancer.


90% of colorectal cancer cases are **DIAGNOSED** in individuals age **50** or older. MPT

Screening is a **POWERFUL** tool to **detect** colorectal cancer early.

1 out of 4 WI adults aged **50-75** are **NOT** getting their colorectal screening **as** recommended.

WE can decrease colorectal cancer in Wisconsin.

- Eliminate tobacco use
- Encourage healthy balanced diets
- Support active lifestyles
- Promote recommended cancer screenings
- Support comprehensive coverage of colonoscopy

 **Together...** Reducing the burden of **CANCER** in Wisconsin
wicancer.org

What can clinicians do?

- ▶ Be aware of barriers
- ▶ Connect to social services and resources
- ▶ Prioritizing education about general health and cancer prevention during primary care visits
- ▶ Longer clinic appointments
- ▶ Trauma-informed approaches to physical exam
- ▶ Include homeless populations in research

What can housing workers do?

Red Flag Symptoms

- Blood in stool, urine; coughing up blood
- Unintended and/or rapid weight loss
- Night sweats
- Masses, lumps, or bumps that are unresolved
- Skin changes – such as rashes or moles that have changed shape/color/size
- Narrowed or changing stools (shape, consistency, frequency)
- Difficulty swallowing
- Jaundice – yellowing of the skin, whites of eyes
- The feeling that ‘something isn’t right’

What can housing workers do?

Focused action for change

RECOMMENDATION	KEY DOMAIN(S)		
	PRACTICE	RESEARCH	POLICY
Recommendations to address structural inequities and social injustice			
◦ Address income and wealth inequality			•
◦ Support targeted provisions			•
◦ Support models of care that consider social risk	•		•
◦ Enhance multilevel research		•	
◦ Implement focused training for health care providers	•		
Recommendations to address institutional environments			
◦ Improve access to high-quality care			•
◦ Enhance standards relevant to patients' social circumstances	•	•	
◦ Enhance navigation and service integration	•	•	
Recommendations to address living environments			
◦ Enhance surveillance data and data integration		•	•
◦ Increase cross-sectoral collaboration	•	•	
Cross-cutting recommendations			
◦ At the leadership level, commit to eliminating disparities	•	•	•
◦ Proactively partner with disadvantaged communities/patients	•	•	•
◦ Consistently monitor progress and provide feedback	•	•	•

What can housing workers do?:

Call	Regardless of insurance coverage: Call Cancer Connect to help find care: (608) 262-5223 or (800) 622-8922.
Refer	Refer to the DHS Breast and Cervical Well Woman Program
Assist	Assist in financial assistance program applications through UW Health's Patient Financial Assistance Program https://www.uwhealth.org/forms/financial-assistance-program

Learn More: Additional Resources/Information

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Social Determinants and Cancer

<https://acsjournals.onlinelibrary.wiley.com/doi/epdf/10.3322/caac.21586>

Cancer Disparities in Wisconsin

https://www.cdc.gov/pcd/issues/2020/20_0183.htm?s_cid=pcd17e122_x

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3088484/>

Wisconsin Cancer Collaborative

<https://wicancer.org/resources/infographics/>

<https://wicancer.org/resources/12148-2/county-cancer-profiles/>

National Cancer Institute/ CDC

<https://statecancerprofiles.cancer.gov/quick-profiles/index.php?statename=wisconsin#t=4>

Learn More: Additional Resources/Information

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Well Woman Wisconsin Program

<https://www.dhs.wisconsin.gov/wwwp/index.htm>

Wisconsin Tobacco Quit Line

<https://quitline.wisc.edu/>

Wisconsin Association of Free and Charitable Clinics

<https://www.wafclinics.org/uploads/1/2/2/0/122077427/findaclinicspreadsheet2023.pdf>

Wisconsin Health Literacy

<https://wisconsinliteracy.org/health-literacy/index.html>

References

1. United Nations Human Rights: Special Rapporteur on the right to adequate housing. <https://www.ohchr.org/en/special-procedures/sr-housing>
2. Baggett TP, Hwang SW, O'Connell JJ, et al: Mortality among homeless adults in Boston: Shifts in causes of death over a 15-year period. JAMA Intern Med 173:189-195, 2013
3. Asgary R: Cancer screening in the homeless population. Lancet Oncol 19:e344-e350, 2018 [Crossref](#), [Medline](#)
4. Alcala HE, Keim-Malpass J, Mitchell EM: Sexual assault and cancer screening among men and women. J Interpers Violence 36:NP6243-NP6259, 2021 [Crossref](#), [Medline](#)
5. Drescher, NR, Oladeru, OT: Cancer Screening, Treatment, and Outcomes in Persons Experiencing Homelessness: Shifting the Lens to an Understudied Population. JCO Oncology Practice 2023 19:3, 103-105

Questions? Connect with us here

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