

in collaboration with The Texas Cancer Council

December 2006



TEXAS DEPARTMENT OF STATE HEALTH SERVICES

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December 2006

The Honorable Rick Perry
The Honorable David Dewhurst
The Honorable Tom Craddick
Members of the Texas Legislature
All Texans

The Department of State Health Services is proud to present the first Texas Cervical Cancer Strategic Plan, developed in accordance with the statutory charge of the 79th Legislature, House Bill 2475, by Representative Dianne Delisi.

Following the blueprint of the Texas Cancer Plan and the Action Plan on Breast and Cervical Cancers, the Cervical Cancer Strategic Plan provides a framework for guiding statewide activities and unifying efforts to reduce the impact of cervical cancer in Texas.

The strategic plan development included a steering committee and three work groups to research and make recommendations regarding barriers and access to care, new screening technologies, best practices and opportunities for collaborations and partnerships.

Many individuals and entities were involved in developing the Texas Cervical Cancer Strategic Plan, including more than 50 physicians, nurses, epidemiologists, researchers, social workers, health educators, public health experts and other health care professionals from a wide range of organizations, such as medical schools, government public health agencies, community-based organizations and advocacy organizations.

The Department of State Health Services would like to thank the individuals and institutions who participated in this worthy project by sharing their expertise and passion for improving the health of women in Texas.

Sincerely,

David L. Lakey, M.D.

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Commissioner

ACKNOWLEDGMENTS

The Department of State Health Services and the Texas Cancer Council would like to extend thanks to the many individuals and organizations that generously contributed their time, expertise and skill in the research and development of this document.

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House Bill No. 2475 By: Representative Dianne Delisi A Bill to Be Entitled

An Act relating to a cervical cancer initiative.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:

SECTION 1. CERVICAL CANCER INITIATIVE.

- (a) The Department of State Health Services shall develop a strategic plan to eliminate mortality from cervical cancer by 2015.
- (b) The department shall collaborate with the Texas Cancer Council and may convene workgroups as necessary that may include:
 - (1) physicians and nurses specializing in cervical cancer screening, treatment or research:
 - (2) cancer epidemiologists;
 - (3) representatives of medical schools or schools of public health;
 - (4) high school or college health educators;
 - (5) representatives from geographic areas or other population groups at increased risk of cervical cancer:
 - (6) representatives of community-based organizations involved in providing education, awareness or support relating to cervical cancer; or
 - (7) other representatives the department determines are necessary.
- (c) In developing the plan, the Department of State Health Services shall:
 - (1) identify barriers to effective screening and treatment for cervical cancer, including specific barriers affecting providers and patients;
 - (2) identify methods to increase the number of women screened regularly for cervical cancer;
 - (3) review current technologies and best practices for cervical cancer screening;
 - (4) review technology available to diagnose and prevent infection by Human Papilloma Virus;
 - (5) develop methods to create partnerships with public and private entities to increase awareness of cervical cancer and the importance of regular screening;
 - (6) review current screening, treatment, and related activities in this state and identify gaps in service;
 - (7) identify actions to be taken to reduce the morbidity and mortality from cervical cancer by the year 2015 and a time line for taking those actions; and
 - (8) make recommendations to the legislature on policy changes and funding needed to achieve the strategic plan.
- (d) Not later than December 31, 2006, the Department of State Health Services shall deliver the strategic plan to the governor and members of the legislature.
- (e) This section expires January 1, 2007.

SECTION 2: EFFECTIVE DATE. This Act takes effect September 2005.

Executive Summary

Cervical cancer is one of the most preventable cancers, and it can be diagnosed in the earliest stages with screening, leading to better treatment outcomes. Access to appropriate screening and treatment remains critical to the goal of eradicating cervical cancer as a threat to women. Unless every Texas woman can receive timely cervical cancer screening, treatment, and information on prevention, cervical cancer deaths will not be eliminated.

Cervical Cancer in Texas

Texas is a large and diverse state with a population of over 20 million people. Every year, more than 85,000 Texans are diagnosed with cancer, and another 37,000 die from the disease. In 2006, it is projected that more than 1,100 women will be diagnosed, and 391 women are expected to die from cervical cancer in Texas. More than half of new cases are diagnosed in women under 50, and two-thirds of cervical cancer deaths occur in women over 50.

Although Texas cervical cancer incidence rates are declining, following a national trend, minority women bear an unequal burden and are more likely to develop and die of the disease.

Cervical cancer incidence rates are highest in Hispanic women in Texas, with mortality rates highest in African-American women. Women in these two groups are more likely to be diagnosed with cervical cancer at later stages, when the disease has already spread and is more difficult to treat.

In addition to ethnic and racial disparities in cervical cancer, marked geographic disparities also exist. Cervical cancer incidence rates are higher along the Texas-Mexico border, regardless of ethnicity. Hispanic women living on the Texas-Mexico border have higher cervical cancer rates than Hispanics living anywhere else in the U.S. Mortality and incidence rates also are higher in rural — rather than urban — Texas counties.

Cervical cancers detected at the earliest stage have 10-year survival rates of 99 percent. Overall, the rate of women in Texas having had a Pap test in the last three years is high at 82 percent. Yet, significantly lower screening rates exist for identified groups of women, including those: 1) with low educational levels,



2) who identify as Hispanic as well as African-Americans, Asian/Pacific Islanders and Native Americans, 3) over 65 and 4) women living in rural and Texas-Mexico border counties.

New discoveries into the causes of cervical cancer are leading to screening and prevention technologies that can change the future effects of the disease. The most recent cervical cancer



advances involve the human papillomavirus (HPV). HPV is a virus recognized as the leading cause of cervical cancers. Almost all men and women become infected with HPV at some point in their lives, and for many, their body's immune system will fight the virus. For some women however, the HPV persists, and can lead to cervical cancer. To eliminate cervical cancer, we must fight HPV.

In 2006, the U.S. Food and Drug Administration approved the first vaccine preventing HPV infection. The vaccine is effective against HPV types that cause approximately 70 percent of cervical cancers. Armed with this new HPV vaccine, we can achieve the moment when we know our goal — eliminating cervical cancer death and suffering — is in reach.

Charge

Women in Government, a non-profit, bi-partisan organization of women state legislators, launched the Challenge to Eliminate Cervical Cancer Campaign in 2004. Through this initiative, Women in Government urged "state legislators to address cervical cancer prevention by increasing access to advanced and appropriate screening and preventive technologies, particularly for underserved women, and improving education about this disease and its cause, the human papillomavirus." The Texas Legislature responded to this challenge in 2005.

To achieve the goal of eliminating cervical cancer in Texas, the 79th Texas Legislature directed the Department of State Health Services (DSHS) to develop the Texas Cervical Cancer Strategic Plan (HB 2475 by Delisi), in cooperation with the Texas Cancer Council.

In response, DSHS and the Texas Cancer Council created a Steering Committee and three work groups to research and make recommendations regarding barriers, access to care, new screening technologies, best practices and opportunities for collaborations and partnerships.

Many individuals and organizations were involved in developing the Texas Cervical Cancer Strategic Plan, including more than 50 physicians, nurses, epidemiologists, researchers, social workers, health educators, public health experts and other health care professionals from a wide range of organizations, such as medical schools, government public health agencies, community-based organizations and advocacy organizations.

The first meeting took place in December of 2005. Three work groups addressed the areas outlined in the legislation — technology, education and policy. The work groups were charged with researching barriers; confirming information in other reports and the relevance to Texas; and using the state's Texas Cancer Plan and Action Plan on Breast and Cervical Cancers to identify potential strategies and pertinent information. The work groups met intensely from January to June 2006 through face-to-face meetings and conference calls, developing proposed objectives, strategies and recommendations. Participants researched and provided supporting documentation for all components, laying the foundation for the Texas Cervical Cancer Strategic Plan.

Challenges

Eliminating cervical cancer mortality requires HPV vaccination and support for routine cervical cancer screening and treatment for every woman in the state. By addressing access issues for prevention, screening, early detection, and treatment of cervical cancer, Texas can make dramatic strides toward being the first state to reach the goal of eliminating this disease by 2015.

Yet, HPV vaccination and screening are only one component in the fight.

Texas leads the U.S. in the number of uninsured residents. The reality of more than 5 million uninsured Texans poses the greatest challenge to eradicating cervical cancer deaths because we must expand access to comprehensive cervical cancer care. One current venue includes the existing DSHSadministered Breast and Cervical Cancer Services (BCCS) program. Breast and Cervical Cancer contractors provide cervical cancer screening and diagnostic services to qualified women. This program is the gateway to cancer treatment services funded by the Medicaid Treatment Act as authorized by the Texas Legislature in 2001. The Family Planning programs administered by DSHS and The Health and Human Services Commission also provide routine cervical cancer screening services and referrals for diagnostic tests, if appropriate, to eligible women. Increased funding and support for this program and other public screening and early detection programs can lead to improved incidence and mortality rates for cervical cancer.

The reality of more than 5 million uninsured Texans poses the greatest challenge to eradicating cervical cancer deaths because we must expand access to comprehensive cervical cancer care.

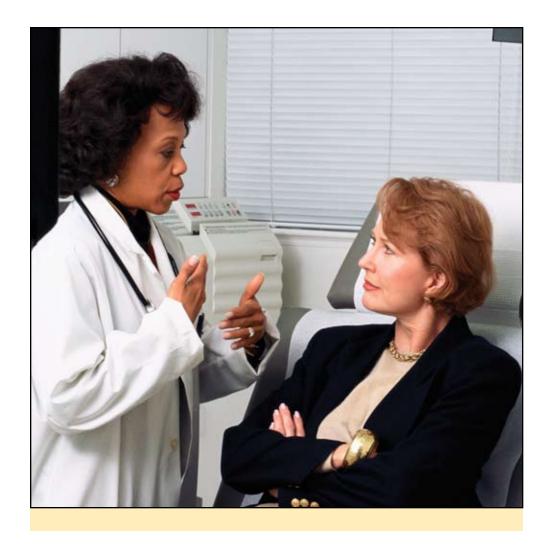
Strategic Plan

The Texas Cervical Cancer Strategic Plan is a comprehensive guide to statewide activities, unifying public and private efforts to reduce this disease's impact throughout Texas.

Recommendations are provided for public agencies to establish a clear state priority and commitment to address the problem of cervical cancer in Texas. The Strategic Plan also includes goals, objectives and strategies to provide a framework and guide for health care providers, advocacy groups, nonprofit organizations, health and human service agencies, state and community leaders and all Texans to aid in planning and implementing actions to eradicate cervical cancer in Texas within the next decade.

The Strategic Plan follows the foundations established by the Texas Cancer Plan (2005) and the Action Plan on Breast and Cervical Cancers (2003).

Texas Cancer Plan Goals: Goal I: Prevention Information & Services Goal II: Early Detection & Treatment Goal III: Professional Education & Practice Goal IV: Cancer Data Acquisition & Utilization Goal V: Survivorship Texas Cervical Cancer Strategic Plan Goals: Goal I: Information & Communication Goal II: Access to & Use of Services Goal III: Collaboration Goal IV: Professional Education & Practice Goal V: Data



Texas Cervical Cancer Strategic Plan

The Texas Cervical Cancer Strategic Plan builds upon the foundation established by the 2005 Texas Cancer Plan and the 2003 Action Plan on Breast and Cervical Cancer. The Texas Cancer Plan is the State of Texas' primary blueprint for cancer prevention and control. The Texas Cancer Council leads the development of the plan, identifying strategic, evidence-based approaches to cancer control for Texas. The Action Plan on Breast and Cervical Cancer was also a statewide effort coordinated by the Texas Cancer Council with funding provided by the (former) Texas Department of Health, with a grant from the Centers for Disease Control and Prevention.

The Cervical Cancer Strategic Plan is organized into five goals with recommendations for state agency policy and action and comprehensive objectives and strategies to guide public and private partners in cervical cancer prevention and control:



Goal I: Information & Communication. All Texans, especially high-risk populations, will have access to and increased utilization of accurate, useful information about cervical cancer prevention, screening, diagnosis, treatment, rehabilitation, survivorship and support.



Goal II: Access to and Use of Services. All Texans will have prompt access to and increased use of quality prevention, screening, diagnosis, treatment, clinical trials, rehabilitation, and survivorship and/or support services for cervical cancer.



Goal III: Collaboration. Stimulate and support development and continuation of collaborations to reduce health system fragmentation, improve continuity and quality of care and use available resources most efficiently.



Goal IV: Professional Education and Practice. Enhance health care professionals' attitudes, knowledge, skills and practices in cervical cancer prevention, screening, diagnosis, treatment, rehabilitation, quality-of-life and survivorship services, including pain management, palliative and end-of-life issues.



Goal V: Data. Ensure the continuity, quality and timely availability of cervical cancer data in Texas to assess progress in preventing and controlling cervical cancer and to support research development to advance the goals of the Texas Cervical Cancer Strategic Plan.

In addition to the Strategic Plan and as directed in HB 2475, the work groups developed recommendations for funding and policy changes needed to achieve the Strategic Plan. Recommendations are included with the corresponding goals (I-V) in the Strategic Plan.

GOAL I: Information & Communication



All Texans, especially high-risk populations, will have access to and increased utilization of accurate, useful information about cervical cancer prevention, screening, diagnosis, treatment, rehabilitation, survivorship and support.

Cancer Prevention

Up to two-thirds of all cancers may be preventable through healthy lifestyle habits. Regular cancer screenings can help detect many cancers at the earliest, most treatable, stages. Good nutrition, physical activity, avoiding tobacco and getting recommended cancer screenings can reduce the risk of developing cancer.

Cervical cancer is no exception.

The Texas Cancer Plan describes cancer prevention as activities aimed at eliminating or reducing cancer risk, as well as minimizing the effects of the disease. Primary prevention is a main component of cancer prevention. Primary prevention is the reduction and control of factors that are believed to cause a health problem, such as not smoking to prevent lung cancer. Also included in primary prevention are health-service interventions, such as vaccinations or chemoprevention therapy, such as Tamoxifen to prevent breast cancer.

Cancer prevention can improve morbidity and mortality rates, increase life expectancy and improve quality of life. Primary cancer prevention is a priority because it plays a role in reducing the cancer impact in Texas. Prevention has proven to be effective in numerous health conditions including cancer — and, specifically, cervical cancer.

Cervical Cancer Prevention

Cervical cancer prevention includes two components. The first is to prevent precancerous changes and the second is to have regular screening to detect abnormal cervical changes as early as possible, allowing treatment before cancer develops — essentially, treating cancer before it develops.

Cervical cancer prevention includes avoiding known risk factors including:

- ◆ HPV infection. HPV infection is the primary risk factor for cervical cancer. More than 80 types of HPV exist, with 30 of those transmitted sexually. Half of the sexually transmitted HPV types, about 15, are linked to cervical cancer. HPV infection is common, and only a small number of women progress to cervical cancer.
- Sexual history. Women who had many sexual partners are at increased risk of HPV infection and, ultimately, cervical cancer. Barrier methods of birth control, such as condoms, offer some protection, but do not completely protect against HPV.
- Reproductive history. Having more than seven full-term pregnancies increases risk for women.
- ◆ Use of oral contraceptives. Long-term use, more than five years, increases risk.
- Smoking. Cigarette smoking is associated with an increased risk.
- Screening history. Women who don't have regular Pap tests; women who have never been screened; and women who haven't been screened in the last five years are at increased risk because precancerous cells cannot be identified and treated.

Knowing the risk factors for cervical cancer helps individuals avoid them and enables them to modify their risk, helping prevent cervical cancer. Having this knowledge is key, underscoring the critical role information plays in making sure all women have the opportunity to reduce their risk of developing cervical cancer.

Preventing Cervical Cancer in Texas

Cervical cancer rates have decreased significantly over the last 50 years because of the Pap test's development and widespread use. Yet, the American Cancer Society estimates that more than 1,100 women in Texas will be diagnosed with cervical cancer in 2006, and nearly 400 will die from the disease. Almost all cervical cancers could be prevented if women received appropriate screening, as well as treatment and follow-up care for precancerous lesions. Information and communication can help ensure women receive recommended care.

Despite the fact that cervical cancer is preventable, women continue to suffer from this disease. Unfortunately, lack of information is one key factor affecting total cervical cancer prevention. The dissemination and communication of information, particularly to high-risk populations, regarding cervical cancer risk, screening and treatment is essential in eliminating cervical cancer mortality in Texas.

Insuring that information about cervical cancer prevention is provided to public health policy decision makers is also vital in preventing cervical cancer in Texas. Together, cervical cancer survivors and health care professionals can illuminate issues affecting cervical cancer care. Increasing public knowledge, reducing the stigma associated with cervical cancer and sexually transmitted diseases and survivorship issues are all areas where cervical cancer education is needed.

Texas has progressive cancer care policies, including colonoscopy coverage, genetic testing protections and breast reconstruction following breast cancer. Now, an opportunity exists for policy changes to keep Texas at the forefront of health policy, making the state a leader in policy transformation required to eliminate cervical cancer.

The experts convened for the Texas work group and those in health care affirmed the importance of timely and high quality information and communication in cervical cancer prevention. Critical elements to assuring adequate information and education on cervical cancer include:

- ◆ Increasing awareness of risk factors and the preventable nature of the disease;
- Providing culturally competent, linguistically appropriate information;
- Maintaining centrally located updated data and resources on cervical cancer for Texas' diverse populations.
- Improving communication between patients and health care professionals.
- Educating policy and decision-makers about the role and necessity of cancer control agencies and programs.

I. Recommendations to Promote Information and Communication

The Department of State Health Services and the Texas Cancer Council are key state agencies that must collaborate to develop, implement, and evaluate evidence-based education efforts to raise awareness about cervical cancer risk and prevention, including screening and HPV vaccination. Some key actions that can be taken include:

- ◆ DSHS should develop and maintain an agency website for the general public and health professionals to provide comprehensive, up-to-date information on all aspects of cervical cancer prevention, including HPV infection, as well as data on the problem of cervical cancer in Texas.
- DSHS and the Texas Cancer Council should convene stakeholders to promote collaboration on public information campaigns on HPV infection and cervical cancer.
- ◆ DSHS will coordinate to develop a resource guide for health care professionals and entities on state and local resources for cervical cancer.
- DSHS and the Texas Cancer Council will collaborate to complete a biennial report on state developments and advancements in eliminating cervical cancer.
- DSHS and the Texas Cancer Council shall develop educational programs for parents regarding HPV and awareness regarding a minor's need for preventive services for cervical cancer and its precursors.



II. Addressing Information and Communication to Eliminate Cervical Cancer - Objectives and Strategies

Multiple objectives and strategies are recommended for public and private agencies and entities to work to improve information and communication regarding the problem of cervical cancer in Texas.

Objectives	Strategies
Objective A: Assess public awareness, knowledge, attitudes and behaviors that impact the risk and prevalence of cervical cancer	Strategy 1: Use existing data sources (e.g. Behavioral Risk Factor Surveillance System, Texas Cancer Data Center) and organizations to identify the current level of public knowledge, attitudes and behaviors about cervical cancer issues including what additional information is needed, and report on findings. Strategy 2: Assess the level of public awareness and knowledge about cervical cancer issues, including HPV infection and preventive strategies and report on findings.
Objective B: Increase the percentage of Texans who seek valid information to become more knowledgeable about cervical cancer prevention, risk factors, screening, treatment and survivorship, including clinical trials, post-treatment, quality-of-life and end-of-life issues.	Strategy 1: Increase awareness about cervical cancer care¹ by developing and implementing public awareness campaigns that are easily accessible to all Texans. Strategy 2: Promote awareness of the availability of cervical cancer control services in a culturally and linguistically appropriate manner, particularly among high-risk groups and the medically underserved. Strategy 3: Promote use of evidence-based interventions — multicomponent, small-media and one-on-one interventions, as well as client reminders, — to increase cervical cancer screening rates. Strategy 4: Increase awareness and use among health care professionals and the general public about existing cervical cancer control programs, resources, and tools, including those developed for priority populations. Strategy 5: Promote use of certified community health workers to increase awareness about cervical cancer care and promote healthy behaviors. Strategy 6: Support research on effective dissemination and replication of cervical cancer prevention and early detection strategies.

¹For the Purposes of this document, the term cervical cancer encompasses all aspects of cervical health and includes, but is not limited to: risk assessment, prevention, early detection, treatment, follow-up, support services and survivorship.

Objectives	S trategies
	Strategy 7: Increase awareness of and enrollment in cervical cancer care clinical trials. Strategy 8: Promote evidence-based, age-appropriate curricula for Texas public schools on cervical cancer control, including HPV infection and screening, as well as how nutrition, tobacco use and high-risk behaviors affect risk of developing the disease.
Objective C: Increase the number of Texans participating in informed and shared medical decision-making about cervical cancer prevention, screening, diagnosis, treatment and survivorship.	Strategy 1: Encourage health care professionals to use shared medical decision-making with patients about cervical cancerrelated decisions. Strategy 2: Develop culturally and linguistically appropriate targeted messages that help patients and caregivers to more effectively communicate with their health care professionals about cervical cancer care. Strategy 3: Identify effective methods to implement and disseminate evidence-based cervical cancer education and treatment services to health care professionals. Strategy 4: Increase availability of effective cervical cancer educational and decision-making support services, such as support groups, patient navigators², case managers and health literacy educational programs, particularly among medically underserved communities. Strategy 5: Promote and encourage communication between health care professionals and patients to increase patients' knowledge and facilitate their decision-making about HPV testing, diagnosis and prevention, including vaccination. Strategy 6: Enhance health care professional-patient communication by developing and implementing training programs for health care professionals, emphasizing the importance of patient education, communication skills and culturally competent care. Strategy 7: Increase availability of quality medical language interpretation and translation services.

²"Patient navigation" in cancer care refers to assistance offered to health care consumers (patients, survivors, families and caregivers) to help them access and chart a course through the health care system, including overcoming any barriers to quality care. A patient navigator can be a registered nurse or social worker thet functions as a guide. Navigators help their patients move through the comlexities of the health cae system— arranging more timely treatment, as well as more information about treatment options and preventive behaviors.

Objectives

Strategies

Objective D:

Increase health care professionals' awareness of resources for patient referral to cervical cancer screening and treatment services.

Strategy 1: Maintain a referral resource guide for health care professionals with information about state, regional and local cervical cancer care, including relevant clinical trial information.

Objective E:

Increase public and private sector policy maker knowledge about issues related to cervical cancer prevention, early detection, screening, diagnosis, treatment and survivorship care, securing their commitment to provide adequate coverage.

Strategy 1: Identify and educate policy makers on the policy and funding needs for cervical cancer care, particularly for underinsured/uninsured Texas women.

Strategy 2: Collaborate with advocate organizations and individuals to establish an ongoing educational outreach group focusing on key state legislators and decision-makers to increase their awareness and understanding of challenges and barriers that Texas cervical cancer patients face.



GOAL II: Access to & Use of Services



All Texans will have prompt access to and increased use of quality prevention, screening, diagnosis, treatment, clinical trials, rehabilitation, and survivorship and/or support services for cervical cancer.

Cancer Screening

Cancer screening allows cancer to be detected at its earliest, most treatable, stages. Early detection of cancer provides the highest survival potential. In screening exams, health care providers examine healthy individuals with no symptoms to discover any signs of a particular disease — in this case, cancer. Screening exams exist for many types of cancer, including breast, prostate, cervix, colorectal and skin. The principle behind screening is that it must be able to detect cancer early. The Pap test for cervical cancer is a perfect example of a successful screening tool.

The Pap test (or Pap smear) reveals whether the cells in a woman's cervix show any abnormal changes. During a pelvic exam, the health professional collects a small sample of cervical cells and submits them to the lab to test for cancer or other pre-cancerous changes. The U.S. Preventive Services Task Force guidelines for cervical cancer screening indicate that women should begin having a Pap test three years after becoming sexually active or at age 21 (whichever comes first). Most women should have a Pap test at least once every three years.

Participating in regular screenings is one of the most important actions an individual can take to reduce their chance of dying from cancer. Cervical cancer screening can identify cells that have become cancerous. Additionally, cervical cancer can even be prevented if these abnormal cells are found and treated early — before they develop into cancer. Research has proven that cervical cancer screening can reduce mortality rates for this disease.

Cervical Cancer Screening in Texas

The rates of cervical cancer screening in Texas are lower than the U.S. rates (Texas 82 percent, U.S. 85 percent). And, although screening rates have risen steadily since introduction of the Pap test, women throughout the state and nation are failing to receive screening that may save their lives. Thousands of the women who are not getting regular screening reside in Texas.

Promotion of the Pap test for cervical cancer screening has contributed significantly to rising screening rates in recent years. However, particular groups of women have failed to receive

the messages or have received insufficient information — and are not getting screened. These women include those with low education levels, non-white women, women over 65 and those living in Texas rural and border counties. Additionally, uninsured women have the lowest screening rates. This information sheds light on why every woman doesn't get screened and spotlights areas where we should focus efforts to reduce the burden of cervical cancer.

Access to Care

Women must have access to cervical cancer screening to eliminate cervical cancer in Texas. The National Cancer Institute reports that groups of women with high cervical cancer mortality:

- ◆ Tend not to have a usual source of health care, such as a family physician;
- Are less likely to participate in regular cancer screenings and receive other preventive health services (such as the HPV vaccine);
- ◆ Have low income and education levels; and
- ♦ Have high rates of other cancers, chronic disease and other poor health indicators.

Pap tests are inexpensive (DSHS reimburses contractors approximately \$15.00 for a Pap test), easily administered and effective. As a result, cervical cancer deaths can be 100 percent preventable. If all women underwent Pap tests according to established guidelines, any precancerous changes discovered would be treatable — meaning no woman would ever develop cervical cancer. If the barriers to cervical cancer screening are identified and removed, it is predicted that a sharp rise in cervical cancer screening rates in Texas will occur. In turn, if adequate access to cervical cancer care is addressed, it can lower the number of cervical cancer deaths, bringing the state closer to the ultimate goal of eliminating this disease.

HPV and Vaccines

New discoveries into the causes of cervical cancer are leading to screening and prevention technologies that can change the future impact of the disease in Texas. Today's major advances in cervical cancer involve the human papillomavirus (HPV). HPV is a virus recognized as the leading cause of cervical cancers. Almost all men and women become infected with HPV at some point in their lives, and for many, their body's immune system will fight the virus. For some women however, the HPV persists, and can lead to cervical cancer. To eliminate cervical cancer, we must fight HPV infections.

In 2006, the U.S. Food and Drug Administration approved the first vaccine preventing HPV infection. Widespread vaccination is a key to reducing cervical cancer incidence in Texas.

Survivorship

Advances in cancer care, including cervical cancer, are resulting in increasing numbers of cancer survivors. More than 10 million cancer survivors are living in the U.S. today, and the numbers are growing every year, according to National Cancer Institute estimates. The number of cancer



survivors in Texas could easily exceed an estimated 66,000. Because more people are living past cancer, access to care includes the spectrum of cervical cancer care, from screening and prevention to survivorship and support services.

Although eliminating cervical cancer remains the ultimate goal, caring for cervical cancer survivors has become an important component in reducing the cervical cancer burden on Texans. According to the Texas Cancer Plan, the growing population of cancer survivors has created a burgeoning demand for:

- Long-term follow-up health care;
- Psychological and social support services and programs;
- Public policies ensuring a survivor's rights to equal access to health care and employment; and
- Consideration of cultural competency and linguistic appropriateness to ensure relevance, understanding and compliance with health care recommendations.

For all survivors, including cervical cancer survivors, we must provide equal access to care for all aspects of the cancer experience, including survivorship.

I. Recommendations to Improve Access and Use of Services

As long as all women do not have access to necessary preventive health services, including low cost screening, cervical cancer will remain as a health threat in Texas. Recommendations to eliminate cervical cancer must prioritize access to care and improve the quality of cervical cancer services in public health settings. Access to the Pap test is not enough. Women must also be able to access the latest discoveries and technologies in cervical cancer. Recent advancements in cervical cancer care technology include the liquid-based cytology for Pap test; Pap test combined with HPV test; and the availability of HPV vaccines.

Recommendation for improving the quality of publicly funded cervical cancer services:

• Require all health care professionals performing publicly funded Pap tests or cervical biopsies to send specimens to laboratories that either 1) use the 2001 Bethesda System for reporting cervical/vaginal cytological diagnoses and 2) are accredited by Clinical Laboratory Improvement Act (CLIA) or a CLIA equivalent accreditation organization.

Recommendations for Funding:

- Provide adequate funding to provide routine cervical cancer screening to 100 percent of the Texas females who have no health coverage and are not eligible for other benefits.
- Support expansion of the Treatment Act of 2000 as allowable by federal law, to enable more eligible women to receive Medicaid coverage for cervical cancer.
- Provide reimbursement for liquid-based preparations for cervical cytology and HPV typing, for women served in publicly funded clinics.
- Provide sufficient state funding to comply with federal Food and Drug Administration and Advisory Committee on Immunization Practices recommendations for HPV vaccination for age appropriate Texas females in public health programs.

Recommendation to Promote Survivorship from Cervical Cancer:

◆ DSHS and the Texas Cancer Council will disseminate information recognizing survivorship as an essential component of comprehensive cervical cancer care.

II. Addressing Access & Services to Eliminate Cervical Cancer - Objectives and Strategies

Multiple objectives and strategies are recommended for public and private entities to address access and services to eliminate cervical cancer in Texas. These objectives and strategies address increasing access to services, enhancing the quality of services, and cervical cancer survivorship.

Objectives	Strategies
Objective A:	
Increase the number of	Strategy 1 : Use existing data sources and organizations to assess
Texans who have access	women's use of cervical cancer care.
to and use appropriate,	
comprehensive, quality	Strategy 2 : Increase adoption and implementation of evidence-
cervical cancer prevention,	based interventions to promote participation in cervical cancer
screening, diagnosis,	care.
treatment, support,	
rehabilitation and	Strategy 3 : Develop and promote incentives to increase the num-
survivorship services.	ber of health care professionals who provide cervical cancer care,
	especially in Primary Care Health Professional Shortage Areas.
	Strategy 4 : Provide cervical cancer care coverage for women who
	do not qualify for DSHS Breast and Cervical Cancer Services care.

Objectives	Strategies
	Strategy 5 : Heighten awareness among eligible recipients about Medicaid benefits for cervical cancer screening.
	Strategy 6: Heighten awareness among eligible recipients about Medicare benefits for cervical cancer screening in women age 65 and older.
	Strategy 7 : Increase cervical cancer care resources, particularly for women with no health care coverage and women who are not eligible for other benefits.
	Strategy 8 : Evaluate the need to regionalize cervical cancer funding to ensure adequate coverage throughout Texas, with particular attention to underserved areas of the state.
	Strategy 9 : Consider funding options for demonstration projects in Texas areas where cervical cancer incidence and mortality rates are higher than the state average.
Objective B: Establish survivorship as	Strategy 1 : Support survivorship research and test models of interdisciplinary survivorship care in diverse communities.
a distinct phase of cancer and treat individuals with appropriate evidence- based interventions that	Strategy 2 : Ensure survivor access to affordable long-term health care and encourage coverage of other cervical cancer survivorship needs - physical, psychological, social, spiritual, and economic.
yield high-level results and minimize the medical and social hazards of survivorship.	Strategy 3 : Minimize adverse effects of cancer on employment by supporting cervical cancer survivors who have short and/or long-term limitations in their ability to work.
	Strategy 4 : Support incentives and provide funding to educational and research facilities to conduct survivorship research, including developing and testing models of interdisciplinary survivorship care.
	Strategy 5 : Develop incentives for companies employing survivors and addressing survivorship issues such as pre-existing conditions and continuum of care needs.
	Strategy 6 : Follow national initiatives requiring health care professionals to provide a comprehensive care summary and follow-up plan for each cancer survivor — a survivorship plan that is clearly, effectively explained to the patient and family members.

Objectives	Strategies
Objective C: Enhance the quality of cervical cancer screening, diagnostic, treatment, and support services.	Strategy 1: Promote best practices in cervical cancer screening, diagnostic, treatment, and support services. Strategy 2: Encourage and promote health care professional's use and compliance with standard of care guidelines from recognized authorities for the early detection, prevention, and treatment of cervical cancer and make guidelines publicly available. Strategy 3: Recognize and provide incentives to health care facilities for adopting appropriate cervical cancer standard of care guidelines from recognized authorities. Strategy 4: Ensure that cervical cancer screening, diagnostic, and treatment facilities meet established standards and are accredited by the appropriate accrediting institutions. Strategy 5: Increase the percentage of Texans who follow nationally recognized, approved, established screening guidelines for detecting cervical cancers early.
Objective D: Identify and reduce the barriers to delivery and receipt of quality cervical cancer prevention, screening, diagnosis, treatment, support, rehabilitation and survivorship services.	Strategy 1: Assess and report on barriers health care professionals experience when providing and implementing quality cervical cancer care. Strategy 2: Design, implement and evaluate interventions to reduce the barriers health care professionals experience when providing quality cervical cancer care. Strategy 3: Promote use of patient navigators to help women receive appropriate cervical cancer care when an abnormality is detected. Strategy 4: Design and implement a transportation and childcare system that addresses local and regional access gaps for cervical cancer patients and women at risk for cervical cancer. Strategy 5: Create a comprehensive health care approach that promotes a medical home for women who rely on publicly funded cervical cancer care.

Objectives

Strategies

Objective E:

Increase the number of Texas residents with access to cervical cancer prevention, screening, diagnosis, treatment, and survivorship services delivered in a culturally appropriate manner throughout the continuum of care **Strategy 1:** Promote and implement policies and programs that increase health care professionals' awareness and use of culturally competent care techniques.

Strategy 2: Promote training and use of certified community health workers to provide cervical cancer information and support services.

Strategy 3: Increase recruitment and retention of culturally and ethnically diverse female health care professionals.

Strategy 4: Increase availability of culturally and linguistically appropriate cervical cancer support services throughout the continuum of care.

Strategy 5: Promote and implement policies and programs that reduce health care disparities, including increased access to preventive vaccines and other health services for the medically underserved.

Strategy 6: Encourage Texans to work toward eliminating cervical cancer by providing incentives for health care professionals and students to practice in underserved areas of the state through student loans, scholarships, medical school tracks for underserved care, reduced liability costs and improved Medicaid reimbursement for cervical cancer care.



GOAL III: Collaboration

Stimulate and support development and continuation of collaborations to reduce health system fragmentation, improve continuity and quality of care and use available resources most efficiently.



The fight against cervical cancer is a long, tough battle. No single individual, health care professional or organization can conquer cervical cancer alone. The saying, "It takes a village to raise a child," applies here. Efforts of everyone in the state are required to eliminate cervical cancer in Texas.

Comprehensive cancer control is defined by the Centers for Disease Control and Prevention as "an integrated and coordinated approach to reducing cancer incidence, morbidity and mortality through prevention, early detection, treatment, rehabilitation and palliation." Collaborations allow integration and coordination of the state's efforts to reduce the cervical cancer burden. According to the National Cancer Institute, collaborations can:

- Reduce health system fragmentation;
- ◆ Improve continuity of care; and
- ◆ Make the most efficient use of available resources.

Collaborations can significantly impact cervical cancer rates by building a system of comprehensive care, helping provide a medical home and reducing barriers to care. Collaborations are critical to reaching the Texas Cervical Cancer Strategic Plan goals and coordinating the state's fight to eliminate cervical cancer. Coordinated efforts are needed between state and local stakeholders, including governmental agencies, academic entities, community-based organizations, advocacy groups, hospitals, cancer centers, health care professionals, local business communities and the citizens of Texas. These efforts can take different forms such as:

- Coalitions
- Partnerships
- ◆ Task forces
- ◆ Research cooperation

Through collaboration, stakeholders throughout the state can work toward common goals, combining resources and sharing information for a greater, more rapid impact. The objectives

and strategies can guide stakeholders and help to unify their efforts. By using the Texas Cervical Cancer Strategic Plan as a blueprint, everyone can become part of a statewide effort to battle cervical cancer in a comprehensive, unified manner.

I. Recommendations to Promote Collaboration

DSHS and the Texas Cancer Council are key agencies that can promote increased collaboration between public and private stakeholders and reach cervical cancer goals.

- ◆ DSHS will convene a cervical cancer advisory group to monitor the cervical cancer plan.
- ◆ DSHS and the Texas Cancer Council will disseminate and promote the cervical cancer plan to communities across the state.
- Support existing DSHS and TCC state programs in their efforts to aid cervical cancer coalitions in funding programs and services that improve access to patient-centered, integrated and coordinated cervical cancer care.
- ◆ Expand Texas Cancer Council support to encourage counties to develop and implement a plan for cervical cancer care for county residents.

II. Using Collaboration to Eliminate Cervical Cancer - Objectives and Strategies

Collaboration is one of the keys for public and private individuals and agencies to join resources and efforts to eliminate cervical cancer. These objectives and strategies identify approaches such as promoting local community-based collaborations as well as formal collaborations between professional organizations on comprehensive cervical cancer.

Objectives	Strategies Strategies
Objective A:	Strategy 1: Identify and convene key stakeholders to develop,
Increase the number of	maintain and enhance local or regional cervical cancer coalitions.
local or regional cancer	
networks that include broad	Strategy 2: Establish and sustain financial and other support for a
representation from all	statewide network of local or regional cervical cancer coalitions.
stakeholders.	
	Strategy 3 : Promote collaborations between breast and cervical
	cancer organizations to reduce duplication of effort and overcome
	access barriers, extending the ability of organizations to reach the
	maximum number of Texans.

Objectives	Strategies
Objective B: Help local communities create partnerships to address unmet needs and access federal, state and private funding for cervical cancer prevention, early detection, treatment and survivor services.	Strategy 1: Assist communities to develop and maintain strategic partnerships, including assistance with needs assessments, coalition building, funding procurement, program development and evaluation. Strategy 2: Encourage communities to adopt cervical cancer control as a community health priority. Strategy 3: Promote partnerships in underserved communities, using nontraditional networks, such as faith-based organizations, civic groups, extension agents, rural associations and cross-border collaborations to improve access to health care and preventive services.
Objective C: Enable community partners to collaboratively implement the Cervical Cancer Strategic Plan.	Strategy 1: Distribute and promote the plan to stakeholders. Strategy 2: Assist communities in identifying and organizing stakeholders to implement action plan strategies. Strategy 3: Designate a standing committee of cervical cancer stakeholders, with Department of State Health Services oversight, to monitor and evaluate the implementation of the Cervical Cancer Strategic Plan.
Objective D: Increase and improve health care professionals' knowledge, attitudes and practices about cervical cancer early detection, prevention, diagnosis, treatment and survivorship care.	Strategy 1: Continue to emphasize cervical cancer awareness, screening, diagnosis and treatment as integral components of Texas' undergraduate, postgraduate and continuing education for allied health, nursing, medical and public health curricula. Strategy 2: Review and evaluate health care professionals' education programs and training curricula to assure cervical cancer care is appropriately addressed, including prevention, early detection, use of multidisciplinary approaches and effective communication with patients, including shared medical decision-making ³ . Strategy 3: Develop and provide cervical cancer care professional education and training based on needs identified during evaluation of professional education programs and training curricula.

³A process by which patients are educated about likely treatment outcomes, with supporting evidence, and engaging with them in deciding which choice is best for them, taking into account their preferences, values and lifestyles.

Objectives

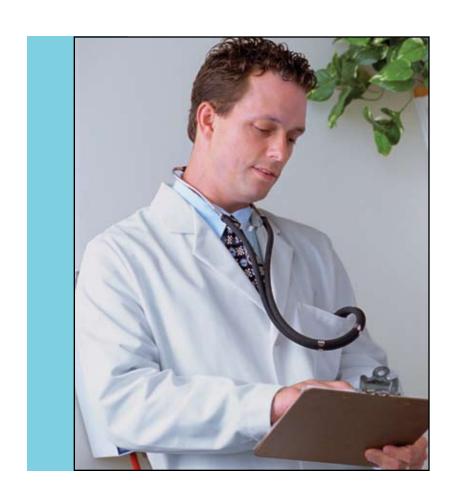
Strategies

Objective E:

Increase the number of Texas health care professionals who follow established guidelines for cervical cancer early detection, prevention, diagnosis, treatment and survivorship care.

Strategy 1: Encourage adoption of electronic health records to include tracking of cervical health and preventive services.

Strategy 2: Assess and monitor the number of Texas health care professionals who follow nationally recognized, approved established guidelines and practice pathways for cervical cancer care.



GOAL IV: Professional Education & Practice



Enhance health care professionals' attitudes, knowledge, skills and practices in cervical cancer prevention, screening, diagnosis, treatment, rehabilitation, quality-of-life and survivorship services, including pain management, palliative and end-of-life issues.

Professional Education

Health care professionals — physicians, nurses, physical therapists, dentists, dieticians and many others — battle cervical cancer on the front lines. They function as primary sources of information, recommendations and referrals for patients. For this reason, health care professionals must have the knowledge, skills and tools necessary to help prevent cancer, and detect it as early as possible.

The health care team plays an important role in ensuring proper care, including screening to prevent cervical cancer. Cancer care advances occur daily. To remain up-to-date and be equipped to incorporate new knowledge into practice, health care professionals must have ongoing professional education. Professional education and practice improvement can take many forms including:

- ◆ Academic curricula
- Continuing education
- **◆** Telemedicine
- ◆ Training opportunities
- ◆ Practice management
- ◆ Literature reviews

Statewide oncology education initiatives, undergraduate and graduate schools and professional organizations provide the framework for collaboration in professional education. The demand for cancer-related continuing education topics is high, but access remains low. We can take advantage of this opportunity and provide cervical cancer continuing education on topics, such as:

- Advancements in cervical cancer screening technology
- ♦HPV and vaccines
- Cervical cancer screening guidelines
- ◆ Caring for cervical cancer survivors
- ◆Communication skills
- ◆Clinical trials for cervical cancer
- Cervical cancer best practices

Professional education can arm health care professionals with the knowledge and skills necessary to reduce cancer morbidity and mortality through collaboration among the public, private and volunteer sectors of the state.

The educated health care professional has an opportunity to reduce the impact of cervical cancer through promoting screening, delivering quality care and serving as an advocate to patients and caregivers. Goal IV: Professional Education and Practice proposes strategies and recommendations that facilitate state agencies in partnering with health care professionals to eliminate cervical cancer.

I. Recommendations for Professional Education and Practice

These recommendations focus on increasing public and professionals' knowledge and skills in cervical cancer care.

- Support the Higher Education Coordinating Board, medical and nursing schools, health care licensing boards and professional organizations in evaluating and implementing curriculum changes and continuing education requirements to include the most current information about HPV and cervical cancer best practices, communication skills, shared decision-making, cultural literacy and health promotion behaviors.
- Provide incentives for health care professionals and students to practice in underserved areas of the state through student loans, scholarships, medical school tracks for underserved care, reduced liability costs and improved Medicaid reimbursement for cervical cancer care.

II. Professional Education and Practices - Objectives and Strategies

These goals and objectives are aimed to enhance health care professionals' attitudes, knowledge, skills and practices in cervical cancer prevention, screening, diagnosis, and treatment.

Objectives

Strategies

Objective A:

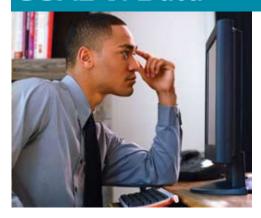
Increase and improve health care professionals' knowledge, attitudes and practices about cervical cancer early detection, prevention, diagnosis, treatment and survivorship care. **Strategy 1**: Continue to emphasize cervical cancer awareness, screening, diagnosis and treatment as integral components of Texas' undergraduate, postgraduate and continuing education for allied health, nursing, medical and public health curricula.

Strategy 2: Review and evaluate health care professionals' education programs and training curricula to assure cervical cancer care is appropriately addressed, including prevention, early detection, use of multidisciplinary approaches and effective communication with patients, including shared medical decision-making.

Objectives	Strategies
	Strategy 3 : Develop and provide cervical cancer care professional education and training based on needs identified during evaluation
Objective B: Increase the number of Texas health care professionals who follow established guidelines for cervical cancer early detection, prevention, diagnosis, treatment and survivorship care.	Strategy 1: Encourage adoption of electronic health records to include tracking of cervical health and preventive services.



GOAL V: Data



Ensure the continuity, quality and timely availability of cervical cancer data in Texas to assess progress in preventing and controlling cervical cancer and to support research development to advance the goals of the Texas Cervical Cancer Strategic Plan.

Data Supports Understanding and Change

Continuous, quality and timely data are critical for understanding and addressing the Texas cervical cancer burden. Without data, we cannot define the full extent and cost of the problem (economically and socially), limited resources may not be allocated to the areas that need them most and progress or setbacks cannot be adequately measured and addressed.

A first step includes assessing available cervical cancer data, as well as identifying data gaps, to provide for adequate monitoring and evaluation of all cervical cancer control, prevention, screening, diagnosis, treatment and survivorship activities. Additionally, we must provide ongoing support for the various sources of cervical cancer data so that data meets national standards and are readily available.

A data-related goal is an essential element of the Texas Cervical Cancer Strategic Plan. This goal includes:

- Evaluating the effectiveness of the Texas Cervical Cancer Strategic Plan, including achievement of goals, objectives and strategies
- Assessing overall cervical cancer burden, including monitoring cervical cancer trends over time and determining patterns in various populations
- Guiding and conducting adequate planning, implementation and evaluation for cervical cancer control activities at the community, state and national levels
- Helping set priorities for allocating health resources
- Adequately addressing significant cervical cancer health disparities
- Determining whether prevention, screening and treatment efforts are making a difference (e.g. HPV vaccine)
- ◆ Advancing clinical, epidemiologic and health services research.

I. Recommendations for Using Data

These recommendations identify timely and essential state actions to ensure the continuity, quality and timely availability of cervical cancer data.

- Continue support for the Texas Cancer Registry in maintaining its recognition as a nationally certified cancer registry
- Maintain updated information on cervical cancer rates in Texas and by county and region on the DSHS cervical cancer website.
- Promote the use of the DSHS ImmTrac registry to monitor the use of the HPV vaccine in Texas.

II. Using Data to Eliminate Cervical Cancer - Objectives and Strategies

These objectives and strategies reinforce the need to assure Texas data is of high quality and used to develop interventions and to monitor the state's accomplishments in reducing cervical cancer.

Objectives	Strategies Strategies
Objective A: Collect the data necessary to evaluate achievement of the Cervical Cancer Strategic Plan goals and objectives.	Strategy 1: Continue to support the Texas Cancer Registry's efforts to maintain recognition as a nationally certified cancer registry; improve education for cancer registrars; and enhance information technology to achieve ongoing improvements of Texas Cancer Registry data quality and timeliness. Strategy 2: Identify evaluation measures for the strategic plan, including potential data sources and screening centers. Strategy 3: Direct the Department of State Health Services to collect data for evaluation of the cervical cancer strategic plan. Strategy 4: Direct the Department of State Health Services to analyze strategic plan evaluation data and report the results to stakeholders.

Objectives

Strategies

Objective B:

Evaluate data needs to better identify gaps and strategies pertaining to cervical cancer prevention, screening, early detection, diagnosis, treatment and survivorship care. **Strategy 1**: Identify deficiencies in data needed for adequate evaluation of the cervical cancer strategic plan, goals, and objectives.

Strategy 2: Implement measures to assure improvement in data collection for adequate evaluation of the cervical cancer strategic plan, goals and objectives, and report to stakeholders.

Strategy 3: Delegate the Department of State Health Services and Texas Cancer Council to summarize cervical cancer data and research findings for dissemination.

Strategy 4: Allocate appropriate state funding and information technology support to implement a statewide system that collects current, accurate comprehensive data for public and professional use.



CASE STUDY

Case Study on Cervical Cancer in Texas

The following case study is a real patient from a Texas hospital. This patient's experience represents the challenges, issues and barriers to cervical cancer care facing thousands of women statewide.

Alice (not her real name) is a 42-year-old African-American woman in Harris County. With a 9th-grade education, she has spent most of her life caring for others, primarily as a housekeeper. In 1996, Alice quit her job to care for her sister, who died at age 29 of breast cancer, leaving behind four children.

Today, Alice lives with and cares for seven family members: her mother, partially paralyzed from a stroke; her own child; her deceased sister's four children, one of whom is mentally disabled; and another niece. The family has no personal transportation.

During 2004 and 2005, Alice made multiple emergency room visits before receiving a referral to a gynecologist in December 2005. At that point in her life, she didn't know she needed a Pap smear. In the very last days of 2005, health care professionals detected a tumor, performed a biopsy and diagnosed Alice with Stage III cervical cancer. In January 2006, she developed kidney failure and was admitted to a hospital after another emergency room visit.

As one of Texas' 5 million uninsured residents, she made many phone calls to public health agencies. But without transportation to obtain and submit the required forms, she found it impossible to get a Gold Card that would have qualified her for health care in Harris County.

Alice was referred to The University of Texas M. D. Anderson Cancer Center for radiation treatment. There, she received the required financial forms which she completed and submitted to obtain her Gold Card.

In April 2006 — four months after her Stage III cancer diagnosis — she finally got the forms required to qualify for treatment coverage. Until then, the single obstacle blocking Alice from her cancer treatment was paperwork.

Alice, like many women struggling to support their families, subjugated her personal health needs to the more immediate needs of her family. She is one person, putting food on the table, paying the utility bill, spending mornings getting five children ready for school and the rest of the day bathing and feeding disabled family members, cooking dinner every evening for her family of eight. These daily, basic needs all took precedence over Alice's own needs, particularly her health — until her illness became life threatening.

Now, as she faces late-stage cancer, she encounters barriers further impacting her health. These barriers include limited or inaccurate knowledge about prevention and cancer screening exams, no transportation and lack of knowledge and skills to navigate the health care system, especially without insurance.

For Alice and the 5 million uninsured Texans like her, we must overcome these roadblocks to appropriate medical care.

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