

# NYS Cancer Consortium Chronicle

## Did You Like Us?

**NYSCC has taken to social media. We can now be found on Facebook at: [www.facebook.com/nyscancerconsortium](http://www.facebook.com/nyscancerconsortium).**

**Check us out for developments in cancer control, links to newly published cancer data and reports and let us know what you think about important topics.**

**Like us on Facebook and have important NYSCC information posted right to your page. Email [nyscccp@cancer.org](mailto:nyscccp@cancer.org) with any questions.**

## Does The NYSCCC Plan Reflect You?

After a year of intense NYS Comprehensive Cancer Control Plan 2012-2016 (NYSCCCP) writing and revision, the NYSCC is reaching the finish line. In November, all NYSCC membership was given their second opportunity to review the Draft NYSCCCP. Forty-four members requested the Plan to review and their comments/suggestions are being considered.

The first version of the NYS Comprehensive

Cancer Control Plan (the Plan) covered the period from 2003 to 2010, providing a strategic plan for cancer control across NYS. In those eight years, NYS and the nation saw tremendous changes in health care through innovations in technology and medicine, health care reform and regulatory impact, economy-driven reductions in program funding, and ever-changing state demographics. The

updated Plan for 2012-2016 was created by the NYS Cancer Consortium throughout 2011 and is meant as a guide for New Yorkers to identify and address the cancer burden among New Yorkers. The Plan will serve as a framework for the Consortium, individuals and professionals in the upcoming years, as they engage in actions and initiatives to ease the burden of cancer in local communities and across

*(Continued on page 5)*

## Special Thank You

Inside this issue:

Breastfeeding and Cancer Prevention 2

How Do We Measure Up?: Member Survey Results 3

New York's Grade Improves! 4

NYSCC Member Success Story: Survivorship 4

2011 has been a year of many changes in the NYSCC Steering Committee. We have welcomed the arrival of six new members: Karen DeMairo, Debra Feinberg, Corinne Meli, Gary Mervis, Leslie Moran and Sabina Steiner. Their participation and expertise have been integral in the Plan revision and subsequent development of Steering Committee priorities.

This past year, we have

also said goodbye to seven of our Steering Committee members. Due to retirement, relocation, job or life changes, Diane Franzman, Leslie Larsen, Karen Lower, Corinne Meli, Reid Perkins, Dr. Ramanathan Raju and Patricia Spencer-Cisek resigned their seats. The passion and commitment of these devoted members will be sorely missed. The NYSCC thanks you for your guidance and insight.

Best of luck in all future endeavors.

An AdHoc Nominating Committee has been created to fill all Steering Committee vacancies. The recommended candidates will be brought to the Steering Committee for a vote at the December meeting. New members will begin their Steering Committee terms in January, 2012.

## Breastfeeding and Cancer Prevention: Some Questions Answered

Although the public may not be aware of breastfeeding as a strategy for cancer prevention, breastfeeding provides protection from cancer for both mother and child in several ways. Research has demonstrated that each year a woman breastfeeds reduces her risk of developing breast cancer by 4.3%. Additionally, breastfeeding causes anovulation (suspension or cessation of ovulation), which is thought to help prevent ovarian cancer. Breastfeeding may also offer protection from endometrial cancer. A child who is breastfed receives the benefit of a decreased risk for childhood obesity, which may prevent cancer later in life. Some studies show that breastfeeding may offer some small protection from certain childhood cancers as well.<sup>1,2</sup>

Since some of the cancer prevention benefits of breastfeeding are tied to the length of time one breastfeeds, the draft Policy Agenda (see Policy Updates Section on page 3 for more information) includes an objective to increase the exclusivity and duration of breastfeeding among New

Yorkers. A survey of NYS health plans was conducted to assess insurance coverage for benefits that promote breastfeeding, such as, visits with lactation consultants and reimbursement for the costs of breast pumps. Information collected from this survey will be analyzed to identify possible areas of policy intervention.

Currently, there is a high rate of initiation of breastfeeding. However the rates drop dramatically after six months, often when mothers have to go back to work or school. Recent data shows that while 78.2% of NYS mothers start out breastfeeding, after six months the rate decreases to 47.7% with only 13.7% breastfeeding exclusively.<sup>3</sup>

The benefits of breastfeeding in relation to breast cancer prevention are particularly well documented in research. Given that female breast cancer is one of the highest cancer burdens in NYS, the policy work to promote breastfeeding longevity is crucial for the prevention of new cancer cases in NYS.

Sources:

1. Collaborative Group of Hormonal Factors in Breast Cancer, Breast cancer and breastfeeding: Collaborative reanalysis of individual data from 47 epidemiological studies in 30 countries, including 50,302 women with breast cancer and 96,973 women without the disease. *The Lancet*. 2002; 360:187-195.
2. Godfrey JR, Lawrence RA. Toward optimal health: The maternal benefits of breastfeeding. *Journal of Women's Health*. 2010; 19(9): 1597-1602.
3. Centers for Disease Control and Prevention, Breastfeeding Report Card— United States, 2011.

### Cancer and the Flu

The NYS Department of Health has created a number of chronic disease-related fact sheets to raise awareness about the importance of getting an annual flu vaccine. Certain individuals, including those with certain chronic medical conditions like cancer, are at higher risk of serious complications from the flu. The specific fact sheet that speaks to the importance of the flu shot for people who have or who have been diagnosed with cancer is located on the Department's website at:

<http://www.health.ny.gov/publications/2463.pdf>

## How Do We Measure Up? Your NYSCC Member Survey Results

In May 2011, the NYS Cancer Consortium Evaluation Committee sent an email to all members with a link to an online member survey. The purpose of this survey is to understand and address the strengths and weaknesses in NYSCC processes and identify steps that NYSCC leadership can take to respond to those areas needing improvement. This year's survey also included several questions about the use of the current NYS Comprehensive Cancer Control Plan to help inform the Plan revision process. About 37% of you responded, representing 79 members.

### Key Findings:

- A majority of respondents indicate that participation in the NYSCC is helpful (75.7%). This is slightly higher than the percent of respondents who rated their general satisfaction with membership as either 'satisfied' or 'very satisfied' in 2008 and 2009.
- Major benefits of participation in the NYSCC include the opportunities for networking and collaboration and access to important information and resources.
- Out of the almost 25% of members that think participation is not helpful,

the majority selected the same reason for the classification: lack of clarity about their role as a member of the NYSCC.

- While the majority of respondents provided positive feedback about their involvement in the NYSCC, there are potential areas for improvement, including: **defining the NYSCC's role and purpose, increasing communication efforts, and engaging members that do not belong to a committee.**

You have been heard! Results of

*(Continued on page 5)*

## Updates on NYSCC Policy Work

The NYSCC Policy Committee met routinely throughout 2011 to research and develop a policy agenda to address New York State's high burden cancers. The following milestones have been achieved:

### Committee Members

A number of new members joined the committee, adding to the already existing expertise among committee members and further representing diverse group of interests in cancer-related policy. Members are experts in palliative care, health care coverage, advocacy and education, local coalition building to support policy changes, and cancer prevention and control initiatives.

Kathy McMahon, President and CEO of Hospice and Palliative Care Association of New York State, has stepped down as co-chair, but continues to bring her knowledge, skills and passion to committee work and enabled the committee to begin development of a policy agenda. New committee co-chair, Blair Horner, is now assisting with the development of a policy agenda. Blair recently joined the American Cancer Society- Eastern Division as the Vice President for Advocacy. He is an experienced, skilled public health advocate and developer of policy, advocacy and education initiatives and materials.

### Policy Agenda Under Development

Committee members conducted research and developed recommendations for a policy agenda for presentation to the Steering Committee. The recommendations are consistent with the goals identified in the draft Cancer Control Plan, and are primarily focused on those that address high burden cancers, lung, breast and colorectal. Once approved by the Steering Committee, information and resources about the policy initiatives will be shared with NYSCC membership and members will be encouraged to promote the initiatives.

## New York's Grade Improves! Report Card on Hospital Access to Palliative Care

In early October, the Center to Advance Palliative Care (CAPC) and National Palliative Care Research Center (NPCRC) released the 2011 State by State Report Card on Access to Palliative Care in Hospitals. The report examines prevalence and geographic variations in access to palliative care in U.S. hospitals by assessing patient access to palliative care services in hospitals and patient access to

board-certified palliative care professionals (e.g. physicians and nurses).

New York State received a 'B' grade, up from a 'C' in 2008 when the report was first released. The national grade was also a 'B' and although both grades represent an improvement from 2008, variations in access to hospital palliative care services still exist. In order to offer optimal care to

cancer patients, it is important that palliative care services are widely available throughout the state.

The full report card can be viewed and downloaded at <http://www.capc.org/reportcard>.

### Share your stories

**The NYS Cancer Consortium is interested in what you and your organization are doing to decrease the cancer burden in NYS. The next NYSCC Chronicle will feature a success story on Early Detection or Screening. A form can be found on our website at the bottom of the following page: [http://nyscancerconsortium.org/cancer/cancer\\_participate.aspx](http://nyscancerconsortium.org/cancer/cancer_participate.aspx). The deadline for submission is Monday, December 19.**

**Stories not chosen for inclusion in the Chronicle will be included on the website with the submission form.**

## NYSCC Member Success Stories: Survivorship

Chai Lifeline offers Orthodox Jewish women living with breast cancer a unique Women's Healing Respite, partially funded by a grant from Greater NYC Affiliate of Susan G. Komen for the Cure.

Women participated in a weekend-long retreat to garner support, occupational therapy and stress reduction. They participated in professionally led support groups, activities led by an occupational therapist, swimming and stress-reduction activities. This was an

opportunity for women whose cultural differences and needs, including requiring kosher food, programming that does not conflict with the Sabbath, or engaging in prohibited activities, might make it difficult to participate in many the mainstream agency programs.

The program partnered with management of the Holiday Inn, Plainfield New Jersey who donated conference space and rooms for each of the twenty participants.

All women that participated lived in the Greater New York City area. They were all mothers with the majority under the age of 50 and some as young as 22 years old.

Ninety-two percent of the participants evaluated the program as being very valuable and very effective in offering them support. Based on the success of the program, Chai Lifeline would like to offer the program again in the future.

## How Do We Measure Up? Your NYSCC Member Survey Results (Continued)

(Continued from page 3)

the survey were presented to the NYSCC Steering Committee at their in-person October meeting .

What have we done?/Next Steps

- To increase communications efforts, the NYSCC is now on Facebook! “Like” us ([www.facebook.com/nyscancerconsortium](http://www.facebook.com/nyscancerconsortium)) and get up to date information on Consortium happenings,
  - Plan Progress, data announcements and more!
  - The NYSCC Steering Committee will be working to clearly define the purpose/role of the NYSCC and its committees based on committee feedback.
  - The December NYSCC Steering Committee agenda will include a lengthy discussion on ways to engage the NYSCC membership in a meaningful way.
- Stay tuned.

## Policy Training for NYSCC Members

Members of the NYSCC’s Policy and Steering Committees participated in a day-long training entitled “Why Policy”. The training provided participants with a foundation for identifying, developing and promoting population-based policy and other change interventions to address cancer burden. The training will be part of discussions at future Policy and Steering Committee meetings to determine how best to utilize the skills and information to develop policy initiatives consistent with the new Plan and promote the goals of the NYSCC.

## Does The NYSCC Plan Reflect You? (Continued)

NYS.

Effective responses to cancer prevention and control require a concerted effort among a diverse set of participants, perspectives and disciplines. While the Plan is developed by the NYS Cancer Consortium, and the Consortium membership works together to implement the Plan to the best of its abilities, any individual or organization interested in reducing the burden of cancer in NYS is invited to use this document as a guide for their work. It must be recognized that no one organization or individual can be responsible for all of the work contained within this document.

The Plan provides background that individuals can use to better understand the burden of cancer in NYS. The Plan

also includes specific information for ways that individuals and groups (both professional and volunteer) can involve themselves in cancer prevention and control efforts. The Consortium will use the Plan to develop annual action plans that prioritize the efforts and activities of its membership throughout the course of the next four years. Consortium members will also track and provide progress on an annual basis so that members are able to adjust or reprioritize activities to best meet the cancer-related prevention and control needs of New Yorkers.

Whether you are a member of the NYS Cancer Consortium, a health care professional, an employee at a cancer-related community-based organization, a researcher, a cancer survivor, a friend, family member or caregiver of someone diagnosed with cancer, or, an individual

interested in becoming involved, using this Plan as a guide, you can play a role to address cancer burden.

In the upcoming months, the Draft Plan 2012-2016 will be made available for public comment on the NYSCC website. Details will be posted on [www.nyscancerconsortium.org](http://www.nyscancerconsortium.org) and on the NYSCC Facebook page. Please encourage others to comment.



"Working together, reducing cancer, saving lives"

VISIT US AT:  
[WWW.NYSCANCERCONSORTIUM.ORG](http://WWW.NYSCANCERCONSORTIUM.ORG)