“Nobody Told Me I Needed to Be Screened”
Effective Communication from Community
and Clinical Perspectives to Increase
Colorectal Cancer Screening

April 16, 2024 | 1-2 PM

Webinar Recording

Brought to you by the
Consortium’s Colorectal
Cancer Action Team
Please mute your line.

If you have a question, please type it in the Chat Box.

Questions will be answered after the panel discussion.

This meeting is being recorded.

A link to the recording will be e-mailed to everyone who registered.
About The NYS Cancer Consortium

Working Together, Reducing Cancer, Saving Lives

www.nyscancerconsortium.org

Seven Action Teams

- Colorectal Cancer
- HPV Coalition
- Skin Cancer
- Environmental Carcinogens
- Lung Cancer
- Healthy Eating & Active Living
- Survivorship

We are New Yorkers from all walks of life who work together to reduce the burden of cancer.
Pascale M. White, MD, MBA, MS, FACG

• Gastroenterologist and an Associate Professor of Medicine at the Icahn School of Medicine at Mount Sinai
• Director of the Gastroenterology Clinic at Mount Sinai Hospital
• A steering committee member of the National Colorectal Cancer Roundtable.
• Co-Founder of the Association of Black Gastroenterologists and Hepatologists (ABGH)
Objectives

1. Highlight the most common reason that adults continue to report not being screened for colorectal cancer.

2. Showcase community and clinically based partners sharing their experience with effective messaging strategies.

3. Promote use of tested messaging guidebooks and other communication resources to increase screening rates.
Colorectal Cancer Screening Rates, NYS 2022

Figure 1. Colorectal Cancer Screening Estimates* and Various Screening Goals for Adults 45-75 Years of Age, Behavioral Risk Factor Surveillance System, 2022

Current Screening Estimates

- NYS BRFSS 2022: 69.0%
- National Average BRFSS 2022: 66.6%
- Healthy People 2030: 68.3%

Goals

- NYS Cancer Consortium: 80.0%
- National Colorectal Cancer Roundtable: 80.0%

Note: the 80% goals were set prior to the lowering of age eligibility from 50 to 45 years.

Figure 2. Significant Differences in Colorectal Cancer Screening* by Demographics, Adults 45-75 Years of Age, Behavioral Risk Factor Surveillance System, 2022

In NYS, over 6 out of 10 patients due for colorectal screening did not recall receiving a recommendation to get screened.

Data Source: 2019 Behavioral Risk Factor Surveillance System.
Among NYS adults aged 50-75 years old that were not up-to-date with colorectal screening who had visited a doctor for a routine checkup within the past year, 64% responded no to the question “In the past 12 months, did a doctor or other health professional recommend that you be tested to look for cancer in your colon or rectum?”
Barriers Driving Racial Disparities in CRC Screening

- Lack of Knowledge
- Lack of Recommendation
- Lack of Healthcare access
- Time commitment
- Lack of support

- Lack of Knowledge
- Fear/Embarrassment
- Mistrust
- Fatalism
- Lack of Healthcare Access/Insurance
- Socioeconomic factors
- Lack of social support/tir commitment

- Inconsistent access to primary care
- Lack of coverage for colonoscopy
- Health Insurance premiums

White, PM, 2017
Panelists

David Dubin
Founder
AliveAndKickn

Maureen Burns
Health Educator
Cancer Services Program of Queens

Cynthia Jones, MD, MPH
Chief Medical Officer
Mosaic Health

La Shawanna Goodman-Munroe
Family Care Manager
Community Healthcare Network
Mount Sinai/Institute for Family Health/CRC Action Team – May 2021 Grand Rounds

Colorectal Cancer Screening: Applying Motivational Interviewing Skills in Support of Clinical Preventative Services

Jonathan Fader, PhD
Mount Sinai Grand Rounds

https://www.youtube.com/watch?v=EyRegUHF_xw
Join the Consortium and Attend Upcoming Meetings

Upcoming Meetings

Healthy Eating and Active Living

June 20, 2024 11:00 AM – 12:30 PM

Thank you for Attending

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