

Health Disparities Task Force Meeting |MINUTES

September 17, 2020 / 1:00 P.M. – 2:00 P.M. | Location: Via WebEx/Teleconference

Meeting called by:	Office of Minority Health and Disparities Elimination	Approximately: 80 ppl
Type of meeting:	Weekly Health Disparities Task Force	
Facilitator:	Monique Anthony, Director	

TOPICS OF DISCUSSION

Focus: Cancer in TN: Colorectal & Prostate Cancer

Presenter: Rochelle Roberts, Program Director II, Tennessee Comprehensive Cancer Control Program

Summary: Every day in Tennessee the following statistics occur. 98 people are diagnosed with cancer; 39 people die from cancer; 16 people are diagnosed with lung cancer; 14 women are diagnosed with breast cancer; 12 men diagnosed with prostate cancer; and 8 people diagnosed with colorectal cancer.

Colorectal cancer (CRC) can occur at the colon or rectum or both locations. Polyps can form and start off noncancerous and then can eventually turn into cancer. The screening testing looks for the disease when the individual does not have any symptoms. Some colorectal cancer risk factors can include but are not limited to the following.

- Overweight/obese
- Not being physically active
- Certain types of diets (high in processed and red meat)
- Smoking
- Alcohol use
- Age
- Personal history of polyps or colorectal cancer
- Family history of polyps or colorectal cancer
- Personal history of IBD (ulcerative colitis and Crohn's disease)
- Inherited syndrome (Lynch syndrome and FAP)
- Race and ethnicity

For race and ethnicity, black women and men have higher incident and mortality rates than anyone else in Tennessee. Social economic barriers play a big role in early detection for cancer. Shelby, Tipton and Fayetteville counties have some of the highest mortality rates in Tennessee. We need to make sure efforts are made in these counties especially with focus on early screenings. Normalizing the conversation around well visits can help with prevention and early detection.

A stool-based test is mainly use for detecting cancer. A stool sample is collected and then examined for blood or any other irregular abnormalities. The stool-based test includes fecal immunochemical test (FIT), guaiac-based fecal occult blood test (gFOBT), and the Stool DNA tests (sDNA). All these tests check for hidden blood or other changes which could be signs of cancer.

There is NACDD Webinar on tomorrow, “Identifying and Addressing Barriers to Physical Activity in the Black Community. It is Friday, September 18, 2020, 12-2 P.M. CST.

If you have any questions you can reach us through the contact information below.

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Focus: Colorectal Cancer (CRC) & Strategies to Reduce Colorectal Cancer

Presenter: Dr. Samuel Evans Adunyah, Chair and Professor Biochemistry, Cancer Biology, Neuroscience and Pharmacology Meharry Medical College

Summary: In 2019, CRC accounted for over 73,030 cancer deaths in Blacks (males and females). Early screening, detection and diagnosis is critically important for enhancing 5-year survival of CRC which is about 90% in Whites and about 86% in Blacks. Late detection and diagnosis (as in metastatic CRC) are linked to very low 5-year survival (about 14% in Whites) and below 10% (in Blacks).

In Tennessee, Blacks (males and females) have the lowest 5-year CRC survival rate than Whites. While CRC incidence and death rates increase with age and CRC affects more people of 65+ years, in the last 10 to 15 years, CRC incidence and death rates have been increasing in younger people (under 50 years of age) as was unfortunately the case with Mr. Chadwick Boseman.

Some recommendations for Reducing and Controlling CRC in Black men include the following:

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| ▪ Prevention and Early Detection | cancer survival |
| ▪ Supporting Quitting Tobacco | ▪ Provide transportation for treatment |
| ▪ More CRC Information and education | ▪ Promote and funding more research on |
| ▪ Encourage and enhance Behavioral Modification | developing genetically- based predictive tool for |
| ▪ Eliminating Social Inequalities via addressing | detecting aggressive tumors in blacks |
| Socioeconomic imbalances | ▪ Enhance Advocacy via numerous groups |
| ▪ Help Navigating through the Healthcare System | ▪ African American Collaborative Obesity |
| ▪ Enhanced Programs and Services that promote | Research Network (AACORN) |

Resources mentioned during call:

Tennessee Comprehensive Cancer Control Resources

[State of TN Cancer Plan 2018-2022](#)

[CDC Colorectal \(Colon\) Cancer](#)

[US Preventative Task Force \(USPSTF\) - CRC](#)

[TN Cancer Registry](#)

[TN Breast and Cervical Screening Program](#)

[TN Tobacco QuitLine](#)

[TN Comprehensive Cancer Control Program](#)

Tennessee Charitable Care Network (TCCN) has opened registration for its free online conference.

Please join us and register at <https://www.tccn2020.com>

Next Meeting: Thursday, September 24, 2020 from 1pm-2pm via WebEx. WebEx details are as follows: Meeting number (access code): 610 214 092

Meeting password: Health

[Join meeting](#)

Join by phone

Tap to call in from a mobile device (attendees only)

[+1-415-655-0003](#) US TOLL

[Global call-in numbers](#)