DELAWARE CANCER CONSORTIUM RETREAT

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Annual U.S. health care costs

- **Cancer:** $240 billion by 2030
- **Diagnosed diabetes:** $327 billion in 2017
- **Heart disease and stroke:** $216 billion
- **Alzheimer’s disease:** $303 billion in 2020

Source: CDC, [https://www.cdc.gov/chronicdisease/about/costs/](https://www.cdc.gov/chronicdisease/about/costs/)
Behavioral Risk Factor Survey

Slight decreases in breast, cervical and prostate from 2018 to 2020

Screening For Life Program

Dramatic decreases in early 2020 for breast and cervical with increases in later months

Source: Delaware Health & Social Services, Division of Public Health, Behavioral Risk Factor Survey (BRFS), 2008-2020.
Source: Delaware Department of Health & Social Services, Division of Public Health, Screening For Life (SFL) program, 2020-2021
PROSTATE CANCER MORTALITY BY RACE

**Age-Adjusted Prostate Cancer Mortality Rates by Race/Ethnicity, U.S. and Delaware, 2013-2017**

[Bar chart showing age-adjusted prostate cancer mortality rates by race/ethnicity, comparing U.S. and Delaware data for the years 2013-2017.]

**Age-Adjusted Prostate Cancer Mortality Rates by Race/Ethnicity; Delaware, 2003-2007 to 2013-2017**

[Line chart showing age-adjusted prostate cancer mortality rates by race/ethnicity in Delaware from 2003 to 2017.]

Source: Cancer Incidence and Mortality in Delaware, 2013-2017
BREAST CANCER MORTALITY BY RACE

Age-Adjusted Female Breast Cancer Mortality Rates by Race/Ethnicity

Source: Cancer Incidence and Mortality in Delaware, 2013-2017
Males have a significantly higher rate compared to females.

Source: Cancer Incidence and Mortality in Delaware, 2013-2017
PROMOTING CHANGE; PREVENTING DISEASE

- Reaching priority populations
  - Mass media campaigns
  - Small media campaigns
  - Partner and worksite toolkits
  - Grassroots outreach
  - Social media promotion
  - Birthday card mailers
  - DMV Screens

- Partnerships for Success
  - Collaboration among chronic disease and health promotion programs
  - Delaware health care facilities
  - Non-traditional organizations
  - Professional organizations
  - Employers
  - Non-governmental organizations
  - Community advocates
health happens here
My Healthy Community portal

https://myhealthycommunity.dhss.delaware.gov/
Comprehensive client care with bi-directional program referrals

Screening for Life

Domestic Violence services

WIC

Maternal and Child Health services

Mental Health services

Transportation

Substance Use Disorder services

Health Care Connection

Lead Poisoning Prevention services
Equality doesn’t mean Equity
Menthol Tobacco Equity

- Menthol in cigarettes creates a cooling sensation; makes smoking feel less harsh.

- Likely a greater risk to public health than non-menthol cigarettes:
  - Leads young people to experiment with smoking
  - Adults who smoke menthol cigarettes have a harder time quitting than adults who smoke non-menthol cigarettes.

Source: CDC, [https://www.cdc.gov/tobacco/basic_information/tobacco_industry/menthol-cigarettes/#add-menthol](https://www.cdc.gov/tobacco/basic_information/tobacco_industry/menthol-cigarettes/#add-menthol)
Certain groups favor menthol cigarettes

- Young people
  - 54% of youth ages 12-17 years who smoke use menthol cigarettes.\(^6\)
- African Americans
  - Non-Hispanic black adults have the highest percentage of menthol cigarette use compared to other racial and ethnic groups.\(^6\)
- Women\(^3,6\)
- LGBT people, particularly LGBT women\(^10\)
- Low income\(^3\)
- Low education\(^3\)
- Adults with mental health conditions\(^11\)

The Center for Black Health and Equity Recommendations

• Eliminate predatory marketing practices
• Educate youth and adult civic leaders
• Reduce reliance on tobacco industry funding
• Align tobacco-related policies with legislative efforts to eliminate social inequalities.

Source: https://centerforblackhealth.org/menthol/
Vaping toolkit at HealthyDelaware.org

https://www.dhss.delaware.gov/dhss/dph/hsm/ohpfactsheetlist.html
Thank you

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