

susan g. komen.  | **COMMUNITY**
PROFILE REPORT 2015



SUSAN G. KOMEN[®]
NEW ORLEANS
EXECUTIVE SUMMARY

Acknowledgments

The Community Profile Report could not have been accomplished without the exceptional work, effort, time and commitment from many people involved in the process.

Susan G. Komen® New Orleans would like to extend its deepest gratitude to the Board of Directors and the following individuals who participated on the 2015 Community Profile Team:

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- St. Thomas Community Health Center
- CAGNO
- LSUHSC School of Public Health Breast Center

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Executive Summary

Introduction to the Community Profile Report

Susan G. Komen® New Orleans was founded in 1992 by Patricia C. Denechaud and the late Dr. Merv Trail. Komen New Orleans shares the common mission of other Affiliates to eradicate breast cancer as a life threatening disease by advancing research, education, screening, and treatment.

Komen New Orleans works to ensure that all people, regardless of race, income, geographic location, sexual orientation or insurance status, have access to screening, accurate breast health information, and if diagnosed, to quality, effective treatment and treatment support services.

Komen New Orleans Grants program is designed to make systemic, lasting change in the community. The current funding cycle, April 1, 2015 – March 31, 2016, includes nine projects totaling \$500,000 that will provide breast health and breast cancer services to thousands of low-income and uninsured women in the community. More than \$5.3 million has been raised and invested by Komen New Orleans since 1992.

The Community Profile (CP) is a community needs assessment specifically looking at breast cancer in the eight parishes served by the Komen New Orleans. The CP will help the Affiliate to:

- Establish granting priorities by helping the Affiliate better understand which breast needs have been unmet in each parish and seek out and partner with organizations and providers that can help meet these needs.
- Establish focused education activities within the communities that have limited or no access to breast health awareness information and/or Susan G. Komen.
- Drive public policy efforts for federal and state funding for patient navigation, low or no cost screening and transportation to and from treatments.

Strengthen/increase partnerships and sponsorships and establish direction for marketing and outreach activities to increase community awareness of Susan G. Komen and breast health awareness in the eight parishes served by Komen New Orleans.

Quantitative Data: Measuring Breast Cancer Impact in Local Communities

When measuring the breast cancer impact on the eight parishes served, Komen New Orleans used data from the Quantitative Data Report. This data report provides data at the Affiliate level as well as data comparisons to Louisiana and the United States. Some of the data provided are as follows:

- Female breast cancer incidence (new cases)
- Female breast cancer deaths
- Late-stage diagnosis
- Screening mammography
- Population demographics
- Socioeconomic indicators

The data provided in the report is used to identify priorities within the Affiliate's service area based on estimates of how long it would take an area to achieve Healthy People 2020 objectives for breast cancer late-stage diagnosis and death rates (HP 2020). The Healthy People 2020 is a major federal government initiative that provides specific health objectives for communities and the country as a whole.

To determine priority areas, each parish's estimated time to reach the HP2020 target for late-stage diagnosis and deaths were compared and then each parish was categorized into seven potential priority levels. Four parishes in the Affiliate service area are in the highest priority category: Jefferson Parish, Orleans Parish, St. Bernard Parish, and St. John the Baptist Parish.

Two parishes in the Komen New Orleans service area are in the medium high priority category: St. Tammany Parish, and Washington Parish.

In an effort to be the most efficient stewards of available resources, Susan G. Komen New Orleans has chosen the four parishes at the highest priority as targets within the service area. The Affiliate will focus strategic efforts on these four target parishes over the course of the next four years. These four target parishes are those parishes identified as having cumulative key indicators showing an increased chance of vulnerable populations likely at risk for experiencing gaps in breast health services and/or enhanced barriers in access of care.

When selecting the target parishes, the Affiliate reviewed the Healthy People 2020. Specific to Komen New Orleans, goals around reducing women's death rate from breast cancer and reducing the number of breast cancers found at a late-stage were analyzed. Through this review, areas of priority were identified based on the time needed to meet Healthy People 2020 targets for breast cancer. Additional key indicators the Affiliate reviewed when selecting target parishes included:

- Incidence rates and trends
- Death rates and trends
- Late-stage rates and trends
- Residents living below the poverty level
- Residents living without health insurance
- Unemployment percentages

The selected priority target parishes are:

- Jefferson Parish
- Orleans Parish
- St. Bernard Parish
- St. John the Baptist Parish

Jefferson Parish

Jefferson Parish is the highest populated parish in the Affiliate service area. The total population is 66.8 percent White, 28.4 percent Black/African-American and 11.4 percent Hispanic/Latina. The income below 100 percent poverty is estimated to be 15.1 percent of the total population with 6.7 percent unemployed. It is estimated that 13.5 percent of the Jefferson Parish population are currently in medically underserved areas and that 21.9 percent have no health insurance.

The age adjusted incidence rates, death rates, and late-stage rates for breast cancer in Jefferson Parish are slightly higher than the US. However, the Healthy People 2020 needs/priority classification predicts that Jefferson Parish is likely to miss the HP2020 breast cancer death and late –stage rate targets. It is estimated that it will take 13 years or more to meet both targets. This prediction classifies Jefferson parish as a highest intervention risk priority area.

Orleans Parish

Orleans Parish is the second highest populated parish in the Affiliate service area. The total population is estimated to be 151, 951. The total population is 33.2 percent White, 63.3 percent Black/African-American, and 4.4 percent Hispanic/Latina. The income below 100 percent below poverty is estimated to be 25.7 percent with 11.4 percent unemployed. There is an estimated 36.1 percent of the population that are in medically underserved areas and approximately 23.4 percent have no health insurance.

For the Affiliate area as a whole, the death rate was higher among Black/African-American than Whites. There were also a higher percentage of late-stage rates among Blacks/African-Americans than Whites. Orleans Parish incidence, death and late-stage rates are all higher than the US average. The death rate and late-stage rate of Orleans Parish are both higher than the Affiliate service area average.

The Healthy People 2020 needs/priority classification predicts that Orleans Parish is likely to miss the HP2020 breast cancer death and late-stage targets. It is estimated that it will take 13 years or more to meet both targets. This prediction based on increasing death and late-stage rates make Orleans Parish a highest priority intervention target for the Affiliate. It is important to take into consideration the substantially higher percentage of Black/African-American females that reside in this parish and the increasing late-stage rates in this population within the Affiliate as a whole.

St. Bernard Parish

St. Bernard Parish has an estimated female population of 13,705. The parish has a population consisting of 75.6 White, 20.9 Black/African-American, and 5.2 percent Hispanic/Latina. An estimated 14.6 percent have an income below 100 percent poverty level and approximately 11.9 percent are unemployed.

The data collected did not include a high enough pool of data to support a percentage rate for breast cancer death rates in St. Bernard Parish; however, the incidence rates and late-stage rates are both higher than the Affiliate and US averages.

The Healthy People 2020 needs/priority classification predicts that St. Bernard Parish is likely to miss the HP2020 breast cancer late-stage rate target. It is estimated that it will take 13 years or more to meet the target. This prediction puts St. Bernard Parish in the highest priority area.

St. John the Baptist Parish

The female population of St. John the Baptist Parish is estimated to be 23,976. The total population consists of 43.2 White, 55.3 Black/African-American, and 4.6 Hispanic/Latina. It is estimated that 15.2 percent have an income below 100 percent poverty. Ten percent are

unemployed, with 100 percent in medically underserved areas and 19.5 percent having no health insurance.

St. John the Baptist Parish has incidence rates that are equivalent to the US and Affiliate averages, however, the death rates are high at 33.2 per 100,000 and the late-stage rates are high at 58.7 per 100,000.

The Healthy People 2020 needs/priority classification predicts that St. John the Baptist Parish is likely to miss the HP2020 breast cancer death and late-stage rates target. It is estimated that it will take 13 years or more to meet both targets. This prediction based on the increasing death and late-stage rates makes St. John the Baptist Parish a highest priority target area for Komen New Orleans.

Health System and Public Policy Analysis

The Affiliate used the internet and an interview with the local LBCCHP (Louisiana Breast Cancer and Cervical Health Plan) as resources to facilitate the search for a comprehensive Health Systems Analysis inventory.

When assessing the breast health needs of the Affiliate service area, it is important to look at the entire continuum of care (CoC). A patient needs to have access to proper screening, and a woman must be given correct information about the outcome of the screening. The patient must be educated about breast health. If there is an abnormality found during screening, the patient must get guidance and further testing. Once the additional testing is done, a patient may be given a breast cancer diagnosis. This patient must be able to navigate the system to get the proper treatment options. A patient should be made aware of any clinical trials that she may be eligible to participate in. During and after treatment it is imperative that the patient seek follow-up care. There are many reasons why a patient may not stay in the CoC, and these reasons must be considered to create solutions to keep them in the CoC.

The Health Systems and Public Policy Analysis revealed that women may enter the CoC at any point, but ideally entrance would be through screening. However, screening may be affected by a lack of education on screening practices. Barriers that hinder the CoC, such as lack of transportation, lack of services within the specific target community, lack of time, and lack of information, exist in the target communities of Jefferson Parish, Orleans Parish, St. Bernard Parish, and St. John the Baptist Parish.

Two programs having to do with breast health in Louisiana include the Louisiana Breast and Cervical Health Program (LBCHP) and the Louisiana Cancer Control Partnership (LCCP). The Affiliate works with both of these programs to maintain a strong relationship and to ensure collaboration and synergy on efforts. Goal 15 of the Louisiana Comprehensive Cancer Control Plan addresses breast cancer, and the Affiliate works closely with the Director of the Louisiana Cancer Prevention and Control Programs concerning Goal 15. Louisiana has opted out of the Affordable Care Act, and consequently Medicaid has not been extended, leaving a coverage gap.

Louisiana as a state has opted out of the Medicaid Extension of the Affordable Care Act, resulting in a coverage gap for individuals whose income is above current Medicaid eligibility but

below the lower limit for Marketplace premium tax credits. This creates barriers for people needing to access health services. This has an effect on breast health when considering access and the CoC in Louisiana. Additionally, although the ACA may have allowed for increased access to mammography coverage, the decision to opt out of the Medicaid Expansion strains the places that provide screenings, treatment, and assistance.

Qualitative Data: Ensuring Community Input

Exploratory data of the community was provided by conducting key informant interviews with patients and questionnaires for providers and patients using the Susan G. Komen grants. Patient surveys were given to women who have received a mammogram in the selected greater New Orleans target area. These included women who received mammograms at a grantee clinic in Jefferson Parish, Orleans Parish, St. Bernard Parish, and St. John the Baptist Parish. The provider surveys were completed by providers associated with the Jefferson Parish, Orleans Parish, St. Bernard Parish, and St. John the Baptist clinics.

The survey questionnaires were emailed to providers, filled out and mailed or emailed back to the team. Providers also printed the patient surveys to distribute to patients in their clinics. The patient surveys were then scanned and emailed or mailed back to the office.

For the patient surveys and key informant interviews, key assessment questions, focused on awareness of education and outreach, and screening, diagnostic and treatment programs, were asked about community identified health concerns. The questions addressed general knowledge of breast health and included questions on breast cancer screening and genetic testing. A second set of questions for the patient surveys and key informant interviews was added for breast cancer survivors only. These questions addressed barriers and problems that the survivors faced when getting their mammograms, diagnosis, and treatment, in addition to resources that were utilized by the participants that contributed to their knowledge of breast cancer and breast health. Provider surveys questioned the availability of breast health education materials and procedures taken by providers in regards to clinical breast exams, screening mammography and referrals. In addition, a section of the survey was dedicated to the practice perspective on factors that prevent women from breast health care.

A total of nine provider surveys, 77 patient surveys, and 45 key informant interviews were completed. The common themes that arose from the surveys were: Lack of money or insurance, fear, lack of education/community outreach, and misconceptions about knowledge of breast cancer. The common variables that were identified as barriers from not getting screened from these surveys were access, outreach, and fear.

The information gathered through these surveys helps to explain some of the disparities in access to breast health care in the target communities. From the data, Black/African-American women are a large percentage of the target population. Additionally, Black/African-American women in Southeast Louisiana as well as the target parishes have higher than average annual death rates. Many are uninsured and economically disadvantaged. The surveys tell the Affiliate that these women skip regular screenings due to lack of money, fear of the unknown, and lack of education. With increased education and advertising about the importance of early screening and breast health, there will be an increase in community members affected.

Mission Action Plan

Based on demographic, statistical and qualitative information collected for this report, Komen New Orleans has chosen three priorities. These priorities take into account the common themes seen in the surveys. These themes are the common barriers to proper breast health awareness and the critical success of the continuum of care. These barriers are lack of money and insurance, lack of education and fear of the unknown. Other barriers are cultural barriers and misconceptions. The timeline for these priorities will be FY16-FY19. While the three priorities will apply to all eight parishes in Komen New Orleans service area, special emphasis will be given to the four parishes identified as the highest priority: Jefferson Parish, Orleans Parish, St. Bernard Parish, and St. John the Baptist Parish.

Needs Statement

The demographic and statistical information collected revealed that women in the target communities of Jefferson Parish, Orleans Parish, St. Bernard Parish, and St. John the Baptist Parish are at the greatest risk for falling out of the continuum of care. In particular, Black/African-American women are being diagnosed at later stages than the national average. This may be due to a lack of knowledge concerning breast cancer and early detection. In the four target communities of Jefferson Parish, Orleans Parish, St. Bernard Parish, and St. John the Baptist Parish, there is a large percentage of uninsured and economically disadvantaged people that are not educated about breast health awareness and are unaware of available services. The Affiliate has chosen three priorities based on the demographic, statistical, and qualitative information collected for the report.

<p>Priority Provide educational outreach programs specifically for Black/African-American women that will help remove cultural misconceptions, eliminate fear and increase breast health awareness in the target communities of Orleans Parish, Jefferson Parish, St. John the Baptist Parish, and St. Bernard Parish.</p>	<p>Objectives</p> <ol style="list-style-type: none"> 1. Maintain partnership with Xavier University, Southern University, University of New Orleans, Tulane University and Dillard University to provide culturally appropriate breast health messages to the students and faculty of the Universities. Education and information are the keys to breaking the cultural cycle of not getting screened for fear of diagnosis. Emphasis should be on early detection. At least 8,000 educational flyers, pamphlets, and materials on breast cancer will be distributed to target communities on an annual basis from FY16-FY19. 2. The Affiliate will participate in University health fairs and partner with school health clinics, sororities and fraternities as well as community General/Family Practice offices, community health clinics, and OBGYNs. The Affiliate will participate in 120 health events on an annual basis from FY16-FY19 that involve the target communities of Jefferson Parish, Orleans Parish, St. Bernard Parish, and St. John the Baptist Parish. 3. Maintain partnership with The New Orleans Saints, Pelicans and Zephyr organizations to provide culturally appropriate breast health messages at three charity events, pre-game events and half-time events on an annual basis from FY16-FY19. 4. Coordinate at least 50 “Pink” events with community salons and gyms to promote culturally appropriate breast health messages on an annual basis from FY16-FY19.
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<p>Priority Increase breast health awareness, educational outreach, and access to screening services for the uninsured and underserved.</p>	<p>Objectives</p> <ol style="list-style-type: none"> 1. Susan G. Komen New Orleans will continue to partner with the Louisiana Breast and Cervical Health Program (LBCHP) and advocate for additional state funding for uninsured women in Southeast Louisiana by working with the statewide Susan G. Komen Affiliates, participating in Susan G. Komen day at the State Capital, contacting each legislator to engage and inform three times annually from FY16-FY19. 2. The Affiliate will continue to partner with and establish a presence in the local health clinics, such as St. Thomas Community Health Center, LSUHSC clinic, West Jefferson Women’s imaging and Breast Center and the St. Charles Community Health Center, to promote access for screening services to over 30,000 people on the Affiliate’s database from FY16-FY19. 3. FY17 and FY18, the Affiliate will make contact with at least one new breast cancer related organization in each priority parish to inform them about the local Community Health Request for Application. That can provide patient navigation, allow for additional screening and transportation to and from screening and treatment.
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	<ol style="list-style-type: none"> 4. From FY16-FY19, annually Komen New Orleans will participate in one statewide Lobby Day and National Lobby Day for Komen target specific legislators for support for Susan G. Komen’s advocacy priorities. 5. If Louisiana has accepted Medicaid expansion by the FY17 Community Grant Request for Application, the patient navigation services and transportation assistance for residents of the target communities will be listed as a funding priority of Komen New Orleans. If Louisiana has not accepted Medicaid expansion, the focus will remain on screenings and treatment assistance.
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<p style="text-align: center;">Priority</p> <p>Increase Awareness of Susan G. Komen New Orleans and the services that are provided by the Affiliate.</p>	<p style="text-align: center;">Objectives</p> <ol style="list-style-type: none"> 1. Susan G. Komen New Orleans will work with 200 community and civic organizations along with leaders in each community in the Affiliate service area with special emphasis on the highest priority communities of Jefferson Parish, Orleans Parish, St. Charles Parish, and St. Bernard Parish to conduct and partner with existing health fairs and community events annually from FY16-FY19. 2. The Affiliate will expand partnerships with television, radio and online community partners by 10 from FY16-FY19. Ideally, awareness within the target communities would increase by having corporate partners or sponsors to focus on public awareness of both Susan G. Komen New Orleans and breast health awareness. 3. Continue to partner with health and breast health clinics, physician’s offices, hospitals and schools to attend health fairs and events providing accurate breast health awareness literature through the distribution of 10,000 educational materials annually from FY16-FY19. 4. Continue nine partnerships with Mary Bird Perkins Cancer Center, The Center for Restorative Breast Surgery, MD Anderson at East Jefferson General Hospital, the Ochsner Breast Center, the St. Charles Community Health Center, the St. Thomas Clinic, the Louisiana Cancer Registry and the LBCHP, Cancer Association of New Orleans, and the Central City Health Clinic, which serve the target communities, from FY16-FY19.
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Disclaimer: Comprehensive data for the Executive Summary can be found in the 2015 Komen New Orleans Community Profile Report.