



MONDAYS WITH
DR MARK & DR MICHAEL

Monday, September 30, 2024 | 1:00 – 1:45PM

TOPIC #31
Health Equity and Breast Cancer



Guest speaker:



Christine Verini, RPh
Chief Executive Officer
CancerCare



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SUPPORTING EMPLOYEES IMPACTED BY CANCER

Health Equity and Breast Cancer

Christine Verini, RPh
Chief Executive Officer

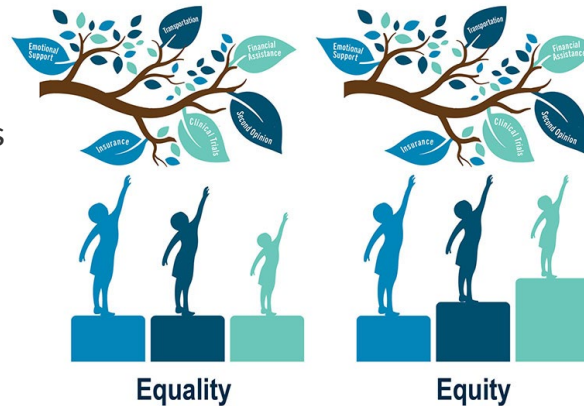
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275 7TH AVENUE, NEW YORK, NY 10001 | WWW.CANCERCARE.ORG | 800-813-HOPE (4673) | INFO@CANCERCARE.ORG

The Difference Between Equality and Equity

• **Equality** is when individuals or groups of people are given the same resources or opportunities.

• **Equity** is the absence of unfair, avoidable or remediable differences among groups of people, whether those groups are defined socially, economically, demographically, geographically, ethnically or by religion, disability or sexual orientation. Equity recognizes that each individual has different circumstances and allocates the exact resources and opportunities needed to reach an equal outcome.



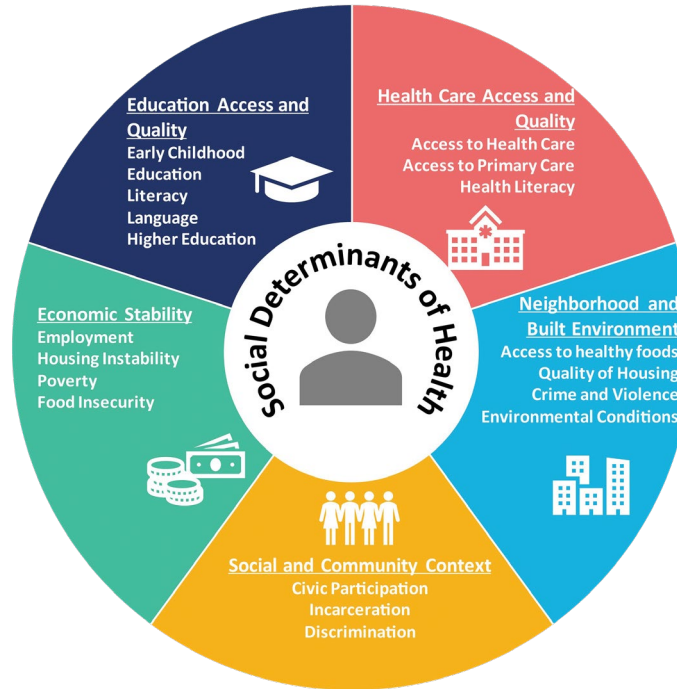
Breast Cancer Disparities



- Black women have the highest breast cancer death rate of any racial or ethnic group in the United States, even though the incidence of breast cancer is similar between Black and White women
- Black women have lower 5-year survival rates than White women, especially for regional and distant stage breast cancer
- Black women have a 41% higher death rate from breast cancer compared to white women
- For Black women under 50, the incidence of aggressive cancers such as triple-negative breast cancer (TNBC) is double that of young white women
- Despite significantly lower incidence rates, American Indians and Native Alaskans are 8% more likely to die from breast cancer than white women

Why Disparities Persist

- Underrepresentation in clinical trials
- Access to new technology
 - 3D Mammo, Markers
- Social determinants of health
- Limited access to affordable, high-quality healthcare
- Genetic and biological factors
- Medical Mistrust
- Inherent Racism



Understanding Cancer Screening and Prevention

Understanding Risk Factors

- Age
- Alcohol use
- Obesity
- Tobacco use
- Personal or family history of cancer
- Exposure to viral infections (HPV)
- Exposure to radiation



Understanding Cancer Screening and Prevention

Barriers to Screening

- Financial
- Practical
- Psychosocial
- Communication
- Cultural



Challenges at Work

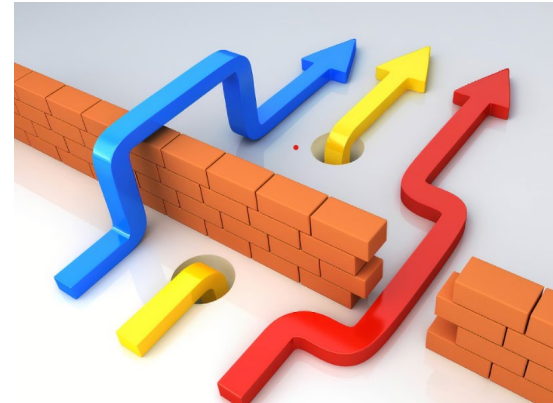
- Anxiety about how cancer treatment and side effects may affect ability to do one's job
- Fear of workplace discrimination
- Balancing personal life, work life, caregiving and cancer treatment
- Scheduling treatment around work hours



How You Can Help

Reduce Barriers

- Modify hours of service
 - Screening Day Off
- Create an alternative setting
 - Mobile Screening
- Address language barriers
 - Use interpreters
- Create educational opportunities and resources that are health literate
- Address Medical Co-Pay and Insurance
 - No co-pay
 - Decrease clinic visits
- Analyze your data



How You Can Help

One size does not fit all

- Each employee is unique – ask how you can be of support
- Respect their boundaries, they might not want to talk about screenings
- Respect cultural diversity – everyone's cultural background, beliefs, values and transitions can impact how they make decisions
- Universal approaches will not have universal results; be flexible
- Understand financial challenges





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Questions

Upcoming NEBGH events

- **October 28** – Mondays with Dr. Mark and Dr. Michael
- **November 7** - Advances in Lung Cancer: Progress, Promise, and Workplace Support
- **November 13** – Navajo Nation USA: A Private Documentary Screening
- **November 19** - 2024 Post-Election Analysis: What Employers Need to Know
- **November 21** – BenefitsBlueprint Series: Where do we go from here?
Statutory State “Feasibility” Analysis
- **December 12** – 30th Annual Tribute to Leadership