Strengthening Partnerships for Community Impact
Komen Puget Sound Community Profile Report
2015
Komen Puget Sound: Supporting Our Community

Disclaimer: This is an unofficial presentation of Komen Puget Sound used for discussing the results of the 2015 Community Profile Report with partners.
Komen Puget Sound supports innovative, evidence-based, culturally competent programs that improve access across the breast health continuum of care.

Partnerships help us take action to improve health equity, reducing barriers that limit access to quality breast health care and services. Our partnerships focus on:

- scientific research
- education, outreach
- early detection
- patient navigation
- financial assistance
- treatment support
- survivorship support
Our partners work in communities across Puget Sound, helping organize, empower and educate.

Over the past 22 years, Komen Puget Sound has invested more than $29 million in local nonprofit, tribal and government agencies that provide breast health and breast cancer services to communities.

In our 2014 fiscal year, we granted $870,000 to seven organizations and reached more than 13,000 low-income and uninsured women with vital breast health services.

THANKS TO OUR GENEROUS SUPPORTERS

$2,952,627 Dollars raised
9,228 Donors
623 Volunteers worked
5,100 Hours

WE ARE ABLE TO PROVIDE COMMUNITY SERVICES

5,707 Mammograms provided
14,353 Educated about breast health
422 Received financial assistance
30,681 Served

An additional $390,000 was donated for scientific research.
Assessing Our Needs: The 2015 Community Profile Report
The Community Profile Report is a comprehensive assessment designed to help us prioritize the needs in our community.

Methodology:
Quantitative and qualitative assessment of breast health resources and breast cancer needs in our service area

Frequency:
Every four years

Purpose:
Guides our Affiliate in aligning community outreach, grantmaking and public policy activities

- **Identifies communities** of greatest need
- **Identifies partners** to assist in addressing barriers to care and gaps in services
- **Communicates state of breast health** in the community.
- ** Enables data-driven decision making** about how to best use resources
We analyzed the information to understand what prevents women from seeking help to screen for, diagnose and treat breast cancer.

- **Quantitative analysis** of breast cancer incidence and mortality
- **Identification** of communities with highest levels of burden and/or disparity
- Health systems and **public policy assessment**
- **Qualitative assessment** of barriers and potential solutions
- **Mission Action Plan** to guide future decision making
By the Numbers: Evaluating and Identifying High-Burden Communities
The rate of new cases of invasive breast cancer varies by race, ethnicity, and geography.

Incidence rates of newly-diagnosed invasive breast cancer by race and region

Within the Komen Puget Sound service area, rates are higher in the Greater Metro Area, especially King County.

Rates of invasive breast cancer are highest among AI/AN and non-Hispanic white women.

The majority of cases among black, A/PI, Hispanic and AI/AN are in the Greater Metro Area.

SEER – National Cancer Institutes’ Surveillance, Epidemiology and End Results Program
Grays Harbor County has the highest proportion of new cases of advanced stage breast cancer.

<table>
<thead>
<tr>
<th>Counties</th>
<th>Percentage of Advanced Stage at Diagnosis</th>
</tr>
</thead>
<tbody>
<tr>
<td>KPS Service Area</td>
<td>33.00%</td>
</tr>
<tr>
<td>Clallam County</td>
<td>33.60%</td>
</tr>
<tr>
<td>Grays Harbor County</td>
<td>39.10%</td>
</tr>
<tr>
<td>Island County</td>
<td>30.60%</td>
</tr>
<tr>
<td>Jefferson County</td>
<td>31.80%</td>
</tr>
<tr>
<td>King County</td>
<td>33.80%</td>
</tr>
<tr>
<td>Kitsap County</td>
<td>32.10%</td>
</tr>
<tr>
<td>Lewis County</td>
<td>32.00%</td>
</tr>
<tr>
<td>Mason County</td>
<td>32.10%</td>
</tr>
<tr>
<td>Pacific County</td>
<td>31.80%</td>
</tr>
<tr>
<td>Pierce County</td>
<td>35.30%</td>
</tr>
<tr>
<td>San Juan County</td>
<td>35.60%</td>
</tr>
<tr>
<td>Skagit County</td>
<td>Data Not Available</td>
</tr>
<tr>
<td>Snohomish County</td>
<td>29.50%</td>
</tr>
<tr>
<td>Thurston County</td>
<td>35.50%</td>
</tr>
<tr>
<td>Whatcom County</td>
<td>36.00%</td>
</tr>
</tbody>
</table>

The Greater Metropolitan Area carries a heavy burden due to the large number of people living in each country.
African American, Hispanic White and American Indian/Alaskan Native individuals have the highest proportions of breast cancers diagnosed at an advanced stage.

Proportion of breast cancer cases diagnosed at advanced stage, by race and ethnicity (# advanced stage cases)

Note: The Asia/Pacific Islander category combines the sub-groups: Chinese, Japanese, Filipino, Korean, Asian Indian/Pakistani, Vietnamese, and Pacific Islander. In addition, while Korean, Asian Indian, Pakistani, and Pacific Islander had high proportions, the number of new cases was comparatively small. Additional information, including 5 year total number of advance stage cases, is available on request.
Patients from Kitsap, Grays Harbor, Clallam and San Juan counties are less likely to survive within five years of being diagnosed with invasive breast cancer.

### Five-year survival rate after invasive breast cancer, by county (# deaths)

<table>
<thead>
<tr>
<th>County</th>
<th>Survival Rate</th>
<th># Deaths</th>
</tr>
</thead>
<tbody>
<tr>
<td>Whatcom County</td>
<td>93.4% (37)</td>
<td></td>
</tr>
<tr>
<td>Skagit County</td>
<td>92.9% (24)</td>
<td></td>
</tr>
<tr>
<td>Snohomish County</td>
<td>92.6% (124)</td>
<td></td>
</tr>
<tr>
<td>King County</td>
<td>92.0% (370)</td>
<td></td>
</tr>
<tr>
<td>Mason County</td>
<td>91.5% (17)</td>
<td></td>
</tr>
<tr>
<td>Island County</td>
<td>91.1% (20)</td>
<td></td>
</tr>
<tr>
<td>Jefferson County</td>
<td>91.1% (10)</td>
<td></td>
</tr>
<tr>
<td>Pierce County</td>
<td>90.6% (170)</td>
<td></td>
</tr>
<tr>
<td>Thurston County</td>
<td>90.4% (62)</td>
<td></td>
</tr>
<tr>
<td>Kitsap County</td>
<td>89.3% (57)</td>
<td></td>
</tr>
<tr>
<td>Grays Harbor County</td>
<td>89.1% (20)</td>
<td></td>
</tr>
<tr>
<td>Clallam County</td>
<td>88.4% (32)</td>
<td></td>
</tr>
<tr>
<td>San Juan County</td>
<td>87.2% (6)</td>
<td></td>
</tr>
</tbody>
</table>

- **Survival 90% or Greater**
- **Survival Less Than 90%**
African American, American Indian/Alaska Native and Pacific Islander patients are less likely to survive after being diagnosed with invasive breast cancer.

**Five-year survival rate after invasive breast cancer, by race and ethnicity**

- **Chinese**: 94.00%
- **Asian Indian/Pakistani**: 93.30%
- **Hispanic White**: 93.10%
- **Japanese**: 92.60%
- **Non-Hispanic White**: 91.70%
- **Korean**: 90.50%
- **Black**: 88.60%
- **Vietnamese**: 88.10%
- **Filipino**: 86.80%
- **American Indian/Alaska Native**: 86.10%
- **Pacific Islander**: 82.00%
Given high levels of disparity, we will target the Seattle Greater Metropolitan Area and Grays Harbor County.

<table>
<thead>
<tr>
<th>Criteria</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Annual # of cases &gt; 500</td>
<td>✓</td>
</tr>
<tr>
<td>Proportion of advanced stage BC &gt; 36%</td>
<td>✓</td>
</tr>
<tr>
<td>Total 5 year # of advanced stage &gt; 500</td>
<td>✓</td>
</tr>
<tr>
<td>Five-Year survival &lt; 90%</td>
<td>✓</td>
</tr>
<tr>
<td>Won’t meet HP2020 mortality goal</td>
<td>✓</td>
</tr>
<tr>
<td>Won’t meet HP2020 late stage goal</td>
<td>✓</td>
</tr>
</tbody>
</table>

**Priority**
- High
- Medium
- Low
- Data Not Available
In the Greater Seattle Metro Area and Grays Harbor County, we will prioritize the AI/AN, African American, Pacific Islander, Hispanic and non-Hispanic White communities.

<table>
<thead>
<tr>
<th>American Indian/Alaskan Native</th>
<th>Black</th>
<th>Pacific Islander</th>
<th>Hispanic</th>
<th>Non-Hispanic Whites</th>
<th>Asian Indian/Pakistani</th>
<th>Filipino</th>
<th>Korean</th>
<th>Vietnamese</th>
<th>Chinese</th>
<th>Japanese</th>
</tr>
</thead>
</table>

### Priority
- **High**
- **Medium**
- **Low**
- **Data Not Available**

### Criteria
- Annual # of cases > 500
- Proportion of advanced stage BC > 36%
- Total 5 year # of advanced stage > 500
- Five-Year survival < 80%
- Won’t meet HP2020 mortality goal
- Won’t meet HP2020 late stage goal
In Their Own Words: Understanding Barriers and Finding Solutions
Our diverse community needs innovative programs capable of responding to patients and eliminating barriers to care.

In the Seattle Greater Metropolitan Area (GMA), women encounter barriers to access within the health system and community:

- **Limited health facilities and public transportation** for low-income residents of rural and remote areas
- **Limited or inaccurate information** among low-income, medically underserved communities
- **Providers and partners lack sensitivity** in regard to cultural taboos, political factions and tensions within and among racial and ethnic communities
- **Low levels of awareness regarding** services offered by existing clinics, hospitals and social service providers
Grays Harbor County requires special attention.

Women in Grays Harbor County encounter these problems:

- **Lack of medical providers** and accessibility to services, combined with lengthy internal processes
- **High provider turnover** rates pose challenges to staff recruitment and retention – and patient trust of the health system
- **Lack of understanding of** the new health care system under **ACA**
- **Refusal of some providers to accept Apple Health** or health plans with low reimbursement rates
- **Lack of transportation resources** and gaps in the public transit service
- **Discrimination** at medical facilities, particularly toward American Indian/Alaska Native community members
- **Not enough language and translation services** for non-native speakers
The qualitative data suggest we should consider a range of approaches.

**King**
- Outreach to eastern and southern parts of the county
- Outreach to African immigrant, Russian, Ukrainian, LGBTQ and homeless populations
- Learn more about non-Hispanic whites to better understand their particular challenges
- Improve understanding of cultural tensions and political dynamics

**Pierce**
- Outreach to rural and eastern parts of the county
- Leverage interest in collaboration
- Expand patient navigation models
- Engage with Russian speaking women
- “There is too much division in the community. We are not taking care of our neighbors anymore.”

**Snohomish**
- Outreach to rural and eastern parts of the county
- Education and awareness of services
- Work with African immigrants in community settings
- Encourage AI/AN use of covered services
- Address women’s fears concerning use of services
Strategies must be tailored to meet the needs of each community.

- Increase resources for outreach and educational efforts for each community
- Engage in peer-to-peer, word-of-mouth awareness efforts at churches, high school athletic events and annual town festivals
- Improve access to educational materials at the health department, medical facilities and libraries
- Forge new partnerships among community organizations
- Improve transportation resources
- Provide interpreters, especially for Mexican dialects
The research points to specific ways we can help women in our targeted counties.

- **Prioritize self-care** and preventative health practices
- **Forge new** and creative partnerships
- **Increase culturally specific and competent education**, outreach and patient navigation
- **Increase transportation options** so that rural women can access services
- **Assist communities in using new insurance** for low-income populations
- **Conduct more research to obtain insights about non-Hispanic white women**, especially those who are foreign-born or speak limited English
Partners know their communities and can lead the way in developing new ideas.
All communities, regardless of color, gender or ethnicity, have the right to quality health care, including breast cancer services.
Amplifying Impact: Strengthening Health Systems
The Breast Cancer Continuum of Care helps guide women’s experience with the health system.

Education plays key role in both providing information to empower and encourage women to get screened, while reinforcing the need for continued follow-up.
The Affordable Care Act improves access to insurance, but women who are hard to reach or not eligible still need our help.

### Greater Metro Area
- **Service fragmentation and lack of transportation** impact access to breast health services in rural areas
- **Cultural barriers**, limited access to undocumented populations, **low cultural competence** of providers, and **lack of awareness regarding the ACA** in key communities

### Grays Harbor
- **Limited provider capacity** in high need, rural areas
- Complex, **rural economic context** impact on health provision
- **Need more** comprehensive partnerships

### Common Needs
- **Need for stronger** breast health partnerships
- **Need for innovative solutions** for improving healthcare access

"Women may have access to insurance, but they need help navigating the system."
Health system challenges require strategic advocacy to address barriers to care.

The newly insured need:
- Help understanding how to access breast health services
- Help understanding co-pays/deductibles
- Help understanding eligibility for BCCHP, given ACA
- Decreased wait times
- Assistance finding care providers willing to accept their insurance
Advocates should push for state and federal policies that will ensure health care access for all.

- Continue to track ACA implementation and assess gaps in breast health services
- **Support insurance enrollment** through Apple Health and the WA Healthcare Exchange
- **Increase the number** of Apple Health providers
- **Streamline eligibility processes** to hasten BCCHP enrollment
- **Reach out and educate** on the importance of preventative health practices and screenings
- **Affirm our commitment to health equity** and the elimination of breast health disparities
- Encourage **coordinated, comprehensive service delivery**
Mission Action Plan: Paving the Way for Strategic Impact
The Mission Action Plan is the strategic plan for the Affiliate’s mission activities for the next four years.

Together with partners, Komen Puget Sound will focus on the communities of greatest need.

The Mission Action Plan will guide our education, outreach, community organizing, partnerships, grantmaking, and advocacy strategies.
GREATER SEATTLE METRO AREA

Improve access to breast health care for native born and immigrant women in need, and for low-income women in rural areas. Also in the metro area, further assessing the breast health needs of specific low income subgroups.

GRAYS HARBOR COUNTY

Improve access to culturally competent breast health services for rural, American Indian/Alaskan Native and Hispanic women

Increase health care system capacity to provide quality breast health care.

Assess how our resources and grant making priorities may need to adjust to the Affordable Care Act.

Our mission for the next four years:
The Challenge:
King, Pierce and Snohomish Counties carry a disproportionate burden of advanced stage breast cancer diagnoses and deaths, especially among African Americans/Blacks, Hispanic/Latino, Pacific Islander and American Indian/Alaska Natives, both native born and immigrants.
## Mission Action Plan

### Solution: Greater Metropolitan Area

<table>
<thead>
<tr>
<th>Response</th>
<th>Strategies</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Improve access across the breast health continuum of care for women in the target populations.</td>
<td>- Strengthen existing partnerships and develop new ones that focus on target communities.</td>
</tr>
<tr>
<td>- Increase access across the breast health continuum of care for low-income women in rural areas.</td>
<td>- Promote evidenced-based, culturally competent programs to improve access.</td>
</tr>
<tr>
<td>- Assess breast health needs of low-income subgroup(s) of non-Hispanic white women and lesbian, gay, bisexual, transgendered and queer/questioning (LGBTQ) community members</td>
<td>- Include evidenced-based programs focused on low-income rural women.</td>
</tr>
<tr>
<td></td>
<td>- Assess needs to determine focus service areas for LGBTQ.</td>
</tr>
<tr>
<td></td>
<td>- Prioritize funding for LGBTQ evidence-based programs.</td>
</tr>
<tr>
<td></td>
<td>- Identify service area focus for low income subgroup(s) of non-Hispanic White women.</td>
</tr>
<tr>
<td></td>
<td>- Ensure evidenced-based programs for low income subgroups of white women.</td>
</tr>
</tbody>
</table>
The Challenge:
Grays Harbor County has the highest proportion of new cases of advanced stage breast cancer cases – and one of the lowest five-year survival rates for invasive breast cancer.
### Mission Action Plan

**Solution: Grays Harbor County**

<table>
<thead>
<tr>
<th>Response</th>
<th>Strategies</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Improve access to culturally-competent breast health services for rural, Asian Islander/Alaska Native and Hispanic women.</td>
<td>- <strong>Coordinate</strong> at least one health fair and screening event targeting key communities.</td>
</tr>
<tr>
<td></td>
<td>- <strong>Include evidence-based, culturally competent programs</strong> targeting low-income, rural AI/AN and Hispanic/Latina women</td>
</tr>
<tr>
<td></td>
<td>- <strong>Collaborate</strong> with provider stakeholders to address known service barriers</td>
</tr>
<tr>
<td></td>
<td>- <strong>Meet with</strong> Washington State legislators to influence public funding and policy for breast health/general health in Grays Harbor County.</td>
</tr>
</tbody>
</table>
The Challenge:
The impact of the Affordable Care Act on the provision of breast health services across Washington State remains unknown.
Response

- Assess how priorities should be adjusted in response to the Affordable Care Act to best leverage resources and decrease breast health disparities.

Strategies

- Monitor impact of the ACA on breast health services and develop strategies to respond to changes.
- Adjust priorities to align with changes in the BCCHP, ACA and local breast health needs.
- Enhance advocacy partnerships with the American Cancer Society, Cancer Action Network and national Susan G. Komen.
Every day, Komen Puget Sound and its partners are working to combat inequality while supporting women and men to access lifesaving breast health care. Together we can make change happen.