

NEIGHBORHOOD HEALTHSOURCE



Breast and Cervical Cancer Screening and Follow-up Care Initiative



CONTEXT

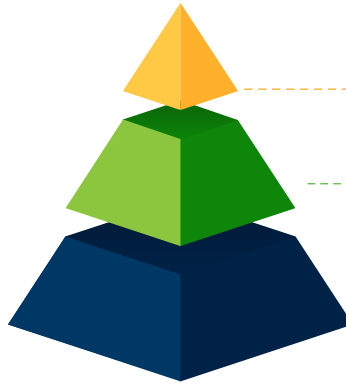
Goal: Neighborhood HealthSource contributes to closing the gap in breast and cervical cancer screenings for people of color and American Indian communities in north and northeast Minneapolis.

Causes: Racism and discrimination have caused long-standing disparities in education, employment, income/wealth, housing, neighborhood conditions, access to health care, transportation, and social connections and support that directly affect health.

Population: Approximately 165,000 people of color and American Indians live in Minneapolis.

Issue: Mortality rates are significantly higher among African American and African women diagnosed with breast cancer. American Indian and Alaska Native women in Minnesota experience the second-highest rates of breast cancer incidence and third-highest mortality rate. Incidence rates of cervical cancer are highest for American Indian/Alaska Native women, followed (in decreasing order) by Asian American/Pacific Islander, Hispanic, and African American/African-born women.

APPROACH



Improving medical care for women of color who have abnormal findings from breast or cervical cancer screening, and detecting breast and cervical cancer earlier by increasing breast and cervical cancer screening rates.

Advancing higher quality protocols and systems using health information technology to improve screening rates.

ROOT CAUSES/ CONDITIONS FOR HEALTH

Addresses the social and economic conditions for health (also known as the social determinants of health). This often happens by changing local, regional or state policy, changing the way systems work or changing the environment.

ORGANIZATIONAL/ INSTITUTIONAL CHANGE

Addresses a health area by changing policies or systems in a school, clinic, hospital, etc. to support healthy behaviors and individual risk/protective factors.

HEALTH PROMOTION/ DIRECT SERVICE

Addresses individual or family-level risk/protective factors through health education, programming, case management, etc.

IMPACT

- 44% of women received breast cancer screening
- 38% of women received cervical cancer screening
- More effectively reached diverse patients by using motivational interviewing during outreach calls to women overdue for cervical cancer screenings

1,367 women received educational materials about breast and cervical cancer and were provided support in getting screened



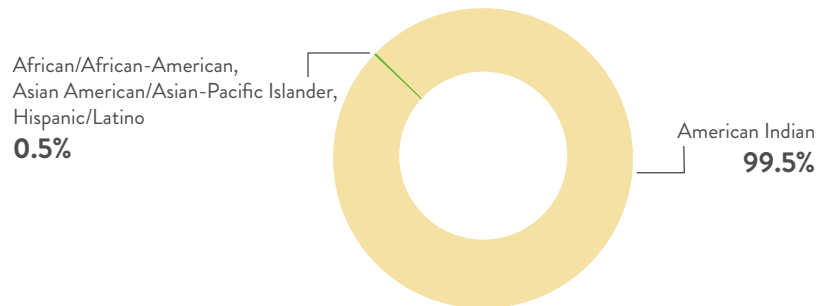


Neighborhood HealthSource focuses on reducing health disparities in late-stage breast and cervical cancer detection and mortality rates among high-risk populations in North and Northeast Minneapolis.

PRIORITY HEALTH AREA SPOTLIGHT

Breast cancer is the second leading cause of cancer-related deaths for women in Minnesota. Breast cancer mortality rates among African American women are 24% higher than white women with a greater proportion being diagnosed at a later, less treatable stage. Annually in Minnesota, close to 140 women develop invasive cervical cancer and nearly 50 die from it. Cervical cancer incidence and death rates are higher among African American, American Indian, and Asian American women than among non-Hispanic white women.

Collective Impact: 161,300 individuals were reached through the work of four grantees addressing this priority health area in 2017-18. The proportions of individuals reached by race/ethnicity are shown in the figure below.



EHDI grantees addressing breast and cervical cancer screening identified common measures to track and report. Collective results include:

- ★ 761 breast cancer screenings
- ★ 298 cervical cancer screenings

MDH ELIMINATING HEALTH DISPARITIES INITIATIVE

The Eliminating Health Disparities Initiative (EHDI) grant program was created to address health inequities for populations of color and American Indians across eight different priority health areas. Since 2001, the EHDI approach has been to support organizations and projects run by and for communities of color and American Indians to develop and implement strategies that are effective in reaching their communities. Every few years, the program reallocates the competitive grants to organizations and tribes across the state of Minnesota. The current grant cycle is from 2016-2019.