

Highlights from the 2020 Evaluation of the Ohio Comprehensive Cancer Control Program

Reducing the cancer burden in Ohio is a **strategic** and **collaborative** statewide effort

There is a decades long history of collaboration to reduce Ohio's cancer burden among dedicated professionals and individuals across Ohio.

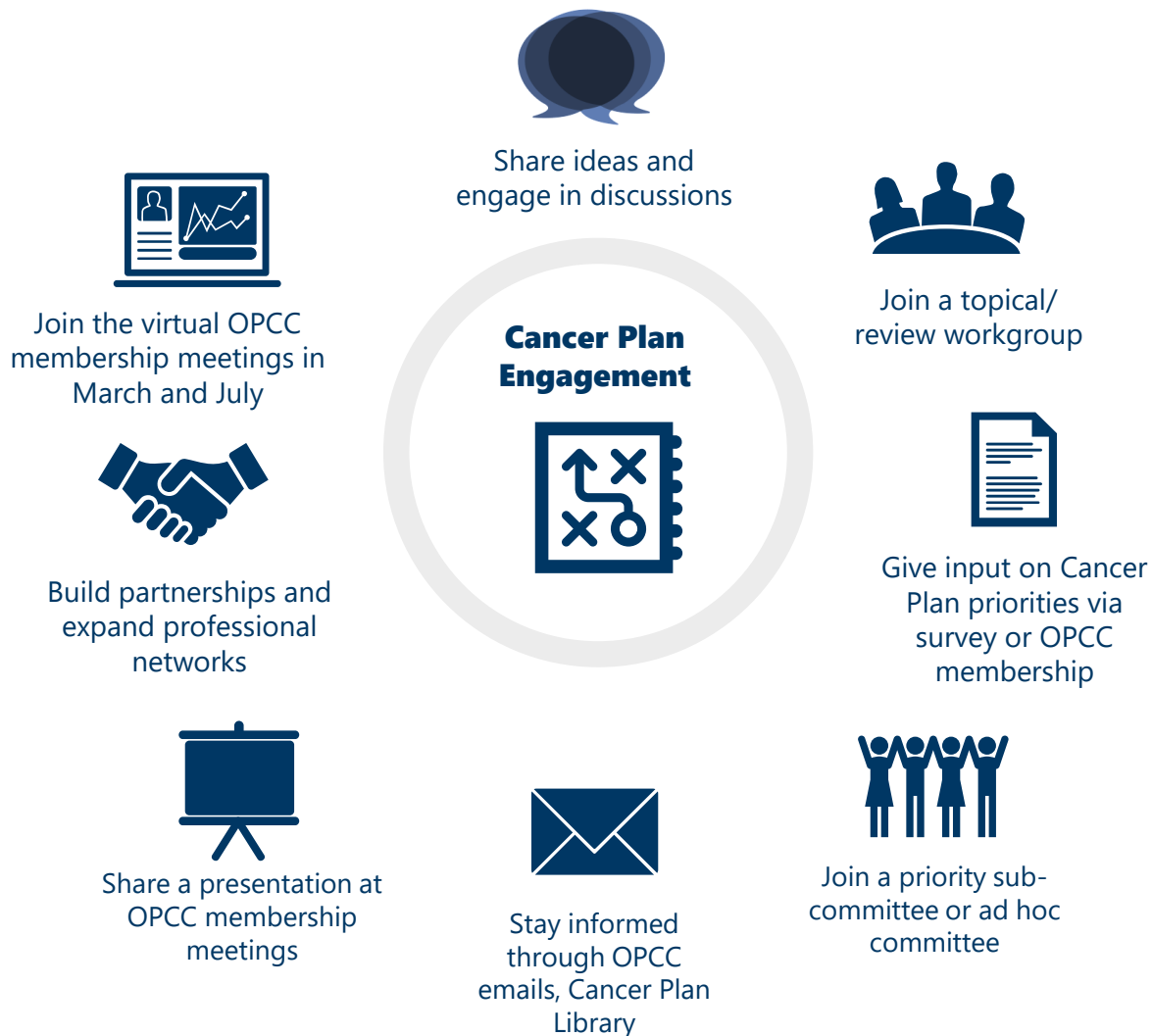
20+

years of funding from the Centers for Disease Control and Prevention to coordinate statewide, collaborative efforts to reduce Ohioans' cancer burden.

160+

volunteers contributed to Ohio's next Cancer Plan, including those directly impacted by cancer, researchers, local and state public health professionals, physicians and health care workers, nonprofit staff, epidemiologists, and other individual volunteers.

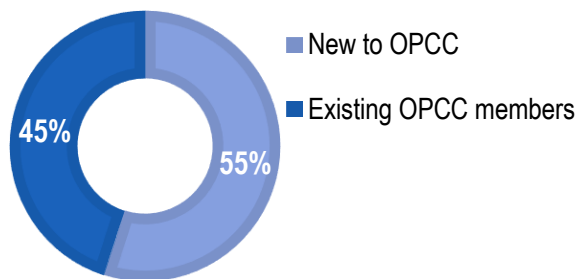
Engagement opportunities **expanded** in 2019-2020 through the Cancer Plan Revision Process



The Cancer Plan revision process successfully brought in **new voices** and **generated momentum** in new and current topic areas

Over half of the individuals involved in the Cancer Plan revision are **new voices** in the OPCC, and not currently members

The revision of the Cancer Plan provided multiple opportunities for individuals outside of the current OPCC membership to become involved. For example, individuals could join a topical workgroup to develop objectives and strategies or submit cancer survivor stories or pictures. In all, as many as 89 individuals became actively engaged with OPCC through the revision process.



New types of partners include:

- More diverse geographies across Ohio
- Physicians, including many oncologists, surgeons, and a urologist
- Parent advocates/parents of pediatric cancer patients
- Medical students, students in public health programs

17 Topical Workgroups developed **Cancer Plan objectives and strategies**

Workgroups were open to Ohioans who had interest and time to commit to meeting regularly. The workgroups developed **49 objectives and 150+ strategies** for the next Cancer Plan.

- Breast cancer detection
- Cancer genetics
- Cervical cancer detection
- Colorectal cancer detection
- Delivery of patient centered services/Access to survivorship programs
- Environmental carcinogens
- Financial burden and barriers
- Cancer and Aging
- Hep B and C screening/detection/ management
- Lung cancer detection
- Palliative care/Hospice
- Pediatric cancer
- Physical activity, nutrition, obesity
- Prostate cancer/screening
- Tobacco use/Vaping
- UV exposure/Early detection of skin cancer
- Vaccines for cancer prevention/HPV associated cancers

A Focus on Health Equity continued to **evolve and expand** in 2020



Health equity was elevated and deepened this year through the continued development and expansion of the health equity committee, the integration of equity in the Cancer Plan 2021 – 2030 development, and presentations focused on equity during the March and July OPCC general membership meetings. In January, health equity was established by the OPCC Executive Committee as one of the eight guiding principles for the Cancer Plan revision process. In June 2019, the health equity committee was formed after the previous year's work and conversations on how to advance equity in CCCP activities. This group expanded during the Cancer Plan revision process to ensure each topical workgroup had a representative from the Health Equity Committee.