Executive Summary: Findings from the 2018-19 Crawford County, PA Community Health Needs Assessment (CHNA)

Throughout 2018-19 the research team completed a community health needs assessment in Crawford County, Pennsylvania – the geographic area served by the Meadville Medical Center and Titusville Area Hospital. The research process included a review of public health surveillance data and a community-based knowledge, attitudes, and practices (KAP) survey focused on cancer screening and prevention.

The findings of this multi-year research project illustrate the public perceptions and attitudes regarding cancer prevalence and screening opportunities in Crawford Country as well as the incidence and mortality rates of cancer throughout Crawford County.

Cancer Incidence & Mortality

Using data from the Pennsylvania Department of Health, Centers for Disease Control & Prevention, and National Institutes of Health, we found that across all cancer types the incidence -- the number of newly diagnosed cases of cancer -- in Crawford County is statistically significantly higher compared to state and national rates. Crawford County is among the top 15 counties in Pennsylvania with the highest cancer incidence rate. Cancer mortality rates in Crawford County for all types of cancer are statistically significantly higher than mortality rates across Pennsylvania and the United States. Specifically, the mortality rates of colon cancer (among males and females), esophageal cancer (among males), lung cancer (among males and females), and prostate cancer are statistically significantly higher than both state and national mortality rates per 100,000 individuals. The mortality rates of breast, cervical, and oral cavity/pharynx in Crawford County are similar state and national rates.

Surveillance data as well as information gathered through the community survey show that the prevalence of Crawford County residents who are current or former smokers is statistically significantly higher than state and national prevalences. According to the American Cancer Society almost half of all deaths from liver, colorectal, lung, oral cavity/throat, esophagus, larynx, stomach, pancreas, bladder, kidney, cervix, and acute myeloid leukemia can be attributed to smoking.¹ Incidence rate of many of these cancers - including lung, esophageal, colorectal, and lung -- are statistically significantly higher in Crawford County compared to state and national rates.

¹ <u>https://www.cancer.org/latest-news/study-smoking-causes-almost-half-of-deaths-from-12-cancer-types.html</u>

The need for smoking cessation programs as well as access to screening tests for cancers associated with smoking need to be made widely available throughout Crawford County. Efforts to motivate and encourage smokers to work with a primary care physician/provider to screen for cancer also needs to be a community health priority.

Knowledge & Attitudes of Cancer Screenings

Through the 2018-19 community survey, it was determined that 78 percent of adults 18 years of age and older in Crawford County have a primary care physician/provider (PCP). While this is the majority of adults in the county, it is important to make note of the following two findings:

- 1. The patient to PCP ratio in Crawford County is 1,602:1. This means that there is only one PCP for every 1,602 patients across the county. This ratio has increased by approximately 5 percent between 2017 to 2018; meaning there are fewer PCPs in the county and the ratio of patients to PCPs is getting larger.²
- 2. During the previous (2015-16) community health needs assessment survey, we found that 92 percent of adults aged 18 years of age and older had a PCP. In the past three years, the percent of adults reporting that they have a PCP decreased by 14 percent.

The increasing ratio of patients to PCPs combined with the decreasing number of adults reporting having a PCP has the potential for a perfect storm related to cancer screening, incidence, and mortality in Crawford County. The 2018-19 Community Health Needs Assessment found that individuals with a PCP were more likely to talk about, understand the importance of, and get the appropriate cancer screening tests. Individuals who reported not having a PCP were less likely to have or understand a cancer screening test.

While in certain instances (discussed at length in the full report), education-level and having private healthcare insurance increased an adult's understanding and willingness to be screened for cancer, across the board for all cancer types and each screening test, we found that those who had a PCP were more likely to be screened than those who did not report having a PCP regardless of education-level or type of healthcare insurance.

With a 14 percent drop in the number of adults reporting a PCP between 2015-2019, it is possible that the proportion of adults in Crawford County getting the appropriate cancer screening tests

² <u>https://datausa.io/profile/geo/crawford-county-pa/#health</u>

could decrease in the coming years. Every effort to increase the number of PCPs across the county and to encourage all residents to find and utilize a PCP should be made.

We also found that the majority of Crawford County adults were getting the following appropriate (based on age and sex) cancer screening tests: colonoscopy, mammogram, Pap test, clinical breast exam, and digital prostate exam. However, few adults in Crawford County have reported completing a skin exam or lung CT test. The lung CT test, which screens for lung cancer among individuals 55 years of age and older who have smoked at least 35 pack-years, is of particular concern given that more than 35 percent of adults in Crawford County are either current or former smokers.³

We found that females were more likely to be screened for cancer and understand cancer screening tests compared to males. Males were less likely to get the appropriate (based on age) screening test and understand the connections between specific screening tests and the cancers they were screening for.

Efforts to improve access to and utilization of screening tests can be targeted toward males, especially those who do not have a PCP. Additionally, education and programming is needed among the current and former smokers throughout the county. We found overall that the smokers, especially those who are current smokers, were statistically significantly less likely to have a PCP and get the recommended screening tests for their sex and age.

³ <u>https://www.cdc.gov/cancer/lung/basic_info/screening.htm</u>