CALIFORNIA DIALOGUE ON CANCER
Preventing Cancer & Saving Lives through Collaboration

California's Comprehensive Cancer Control Plan, 2021-2025

Goals and Objectives

Cancer Burden in California	
Goal	To reduce the number of new cancer cases and deaths due to cancer.
Objective 1	By 2025, decrease the rate of all cause cancer incidence in California by 3.6%, from the current baseline of 390.6 to 376.5 cancer cases per 100,000 persons.
Objective 2	By 2025, decrease the rate of all cause cancer mortality in California by 6.5%, from the current baseline of 136.9 to 128.0 cancer cases per 100,000 persons.

Surveillance	
Goal	To ensure the collection, dissemination, and utilization of comprehensive and understandable cancer-related surveillance data for cancer control evaluation, planning, and monitoring in California.
Objective 1	By 2025, expand CCR data dictionary requirements of gender identity categories, establishing a statewide data standard, in alignment with national gender minority initiatives.
Objective 2	By 2025, enhance the capacity of cancer surveillance systems to produce and disseminate user-friendly cancer information and data reports that meet the needs of the general public, public health-based organizations, research-based institutions, and other stakeholders.
Objective 3	By 2025, enhance the value and use of CCR data to improve population health through the expansion of existing linkages with other population registries, repositories, and relevant data sets from the baseline of 6 to 9.

Equitable Access	
Goal	To assure that all Californians have access to resources that promote wellness, and to quality services that address preventive, diagnostic, treatment, survivorship, palliative, and end-of-life cancer care.
Objective 1	By 2025, increase equitable access to quality cancer-related preventive, diagnostic, treatment, palliative, and end of life care for the uninsured and underinsured.
Objective 2	By 2025, reduce financial and geographical barriers to equitable cancer care for all Californians (insured and uninsured).
Objective 3	By 2025, reduce systemic and cultural barriers to equitable cancer care for all Californians (insured and uninsured).

Cancer Centers	Recommendations for institutional collaboration
Prevention and education	Develop a statewide collaborative linking the work of community health educators, and using existing resources (e.g., NCI-NON).
Screening and early detection	Build a repository to hold cultural and linguistic adaptations of evidence-based materials for use with patients in clinical settings. Consider a centralized repository for county-level screening data.
Treatment and clinical trials	Leverage technology to increase efficient information sharing across centers and programs with inconsistent electronic health record and data reporting systems. Develop regional care teams and referral hubs including shared educators and navigators between centers/programs with overlapping catchment areas.
Survivorship	Expand and modify any developed statewide networks (e.g., for treatment and trials) to focus on survivorship, symptom management and support for families and caregivers. Centers and programs with successful interventions should share best practices and metrics for evaluation across the network. Working collectively across the continuum will position centers and programs to drive cancer care policy and advocacy, which is critical to ensure lasting and positive impact on the burden of cancer across the state.

Primary Prevention

Goal

To prevent cancer through risk-factor reduction by optimizing social and environmental support for recommended health behaviors. These behaviors include healthy eating, daily exercise, tobacco use avoidance, limiting alcohol consumption,* Ultraviolet (UV) light protection, and recommended vaccination adherence.

*Note. This risk factor, while important, was not included in the 2021-2025 California Comprehensive Cancer Plan

Human Papilloma Virus (HPV)

Objective 1: By 2025, increase initiation of HPV vaccine among 13-year olds from the baseline of 57% to 90%.

Objective 2: By 2025, increase series completion of the HPV vaccine among 13-year olds from the baseline of 35% to 80%.

Objective 3: By 2025, reduce the geographic disparity gap in HPV vaccination rates for 13 year old Californians:

	At least 1 dose HPV Vx by age 13		HPV series completion by age 13	
	Rural	**Urban**	**Rural**	**Urban**
Baseline	50%	59%	26%	37%
Target	90%	90%	80%	80%

Obesity Prevention

Objective 1: By 2025, increase the number of pregnant women and women of child-bearing age who limit sugary drink intake and consume the recommended servings of fruit and vegetables by 10%.*

*< 10% increase because of ceiling effect but still a statistically significant increase at $p < .05$

	Baseline CHIS, 2017	2025 Target
Consume the recommended 2 servings of fruit	20.1%	22.1%
Consume the recommended 3 servings of vegetables	17.6%	19.4%
Limit sugary beverage consumption to less than 3 times per week	90.0%	93.6%*
Meet all 3 nutritional recommendations	7.5%	8.2%

Objective 2

By 2025, increase the number of children and adolescents who report not drinking a sugary beverage and who consume the recommended daily servings of fresh or frozen fruit and vegetables, minimally processed by 10%.

	Baseline CHIS, 2017	Target
Daily fruit intake		
Children	59.7%	65.7%
Adolescent	61.3%	67.4%
Daily vegetable intake		
Children	13.4%	14.7%
Adolescent	15.0%	16.5%
Report drinking zero cans of sugar-sweetened soda yesterday		
Children	81.7%	87.0%
Adolescents	67.9%	74.3%
Meet all 3 nutritional recommendations		
Children	10.8%	11.9%
Adolescents	9.3%	10.2%

Objective 3

By 2025, increase the number of children and adolescents who engage in a minimum of 60 minutes of structured and unstructured physical activity daily each week by 10%.

Engagement of physical activity for a minimum of 60 minutes/day on at least 5 days/week	Baseline	Target
Children	51.1%	56.2%
Adolescents	38.0%	41.8%

Tobacco Use	
Objective 1	By 2025, reduce the prevalence of current tobacco product use among high school-aged youth from 12.7%* to 6.3% and young adults 18-25 from 24.6%** to 12.3%.
Objective 2	By 2025, reduce the prevalence of tobacco use among adults covered by Medi Cal from the baseline of 17.4% to 11%.
Objective 3	By 2025, increase tobacco assessment rates among patients in the California Cancer Registry from the baseline of 56% to 80%.
Ultraviolet (UV) Light Exposure	
Objective 1	By 2025, reduce UV exposure and the number of sunburns in outdoor occupational workers.
Objective 2	By 2025, reduce UV exposure and the number of sunburns in people participating in outdoor recreation.
Objective 3	By 2025, reduce indoor tanning use by sexual minority men (gay and bisexual men) in California.

Early Detection and Screening	
Goal	To increase recommended population-based screening among Californians, for the purpose of increasing early detection of cancers, thereby increasing survivorship.
Breast Cancer	
Objective 1	By 2025, increase the percentage of breast cancers diagnosed at Stage 0/1 by 20%, from the baseline of 60% to 80% of total breast cancers diagnosed.
Objective 2	By 2025, increase the percent of women who are referred for genetic assessment of a high risk for breast cancer due to hereditary/familial breast cancer syndromes from the baseline of 25% to 35%.
Objective 3	By 2025, reduce breast cancer related mortality rates for Non-Hispanic Black women from the baseline of 17 to 12 per 100,000.
Cervical Cancer	
Objective 1	By 2025, decrease the percentage of women from all racial/ethnic groups ages 21–65 without a hysterectomy, who have not received a Pap and/or HPV screening test in the past five years from the baseline of 16.4% to 12.5%.
Objective 2	By 2025, eliminate the disparity in cervical cancer incidence among non-Hispanic Black and Hispanic women in California with known rates higher than non-Hispanic white women and Asian/Pacific Islander, reducing cervical cancer incidence rates for all women to 6.5 per 100,000 women.

Women	Baseline	Target
Non-Hispanic Black	7.8*	6.5*
Hispanic	8.8*	6.5*
Asian/Pacific Islander	6.6*	6.5*
Non-Hispanic White	6.6*	6.5*

*per 100,000

<table>
<tr><td>Objective 3</td><td>By 2025, eliminate the disparity in cervical cancer mortality among non-Black Hispanic, Hispanic, and Asian/Pacific Islander women in California with known rates higher than non-Hispanic white women, reducing all cervical cancer mortality rates to 1.8 per 100,000 women.

<table><tr><th>Women</th><th>Baseline</th><th>Target</th></tr><tr><td>Non-Hispanic Black</td><td>3.0*</td><td>1.8*</td></tr><tr><td>Hispanic</td><td>2.8*</td><td>1.8*</td></tr><tr><td>Asian/Pacific Islander</td><td>2.1*</td><td>1.8*</td></tr><tr><td>Non-Hispanic White</td><td>1.9*</td><td>1.8*</td></tr></table>*per 100,000</td></tr>
<tr><td colspan="2">Colorectal Cancer</td></tr>
<tr><td>Objective 1</td><td>By 2025, decrease the rate of late stage diagnosis of colorectal cancer among those who are covered by Medi-Cal and the uninsured from the baseline of 71% to 64%.

<table><tr><th></th><th>Baseline</th><th>Target</th></tr><tr><td>Medi-Cal</td><td>71%</td><td>64%</td></tr><tr><td>Uninsured</td><td>71%</td><td>64%</td></tr></table></td></tr>
<tr><td>Objective 2</td><td>By 2025, increase the colorectal cancer screening rate among all Californians from the baseline of 70.8% to 80%</td></tr>
<tr><td>Objective 3</td><td>By 2025, decrease late stage diagnosis of colorectal cancer among all Californians between the ages of 40–49 years from the baseline of 69% to 57%.</td></tr>
<tr><td colspan="2">Lung Cancer</td></tr>
<tr><td>Objective 1</td><td>By 2025, increase the number of lung cancer screening scans using low-dose computed tomography (LDCT) as indicated by the USPSTF from the baseline of 2,377 to 2,977.</td></tr>
<tr><td>Objective 2</td><td>By 2025, increase the number of lung cancer screening scans in minority underserved communities using LDCT as indicated by the USPSTF.</td></tr>
<tr><td>Objective 3</td><td>By 2025, reach universal genetic, molecular testing, and comprehensive biomarker testing of all lung cancer tumors to help determine the best selection of therapies for patients.</td></tr>
<tr><td colspan="2">Melanoma</td></tr>
<tr><td>Objective 1</td><td>By 2025, decrease baseline melanoma incidence rate in 16 counties with rates exceeding the baseline rate of 7.9 by 1 to 31.3 per 100,000.</td></tr>
<tr><td>Objective 2</td><td>By 2025, decrease incidence of thicker cutaneous melanoma (T3-T4) in 15 California counties with rates exceeding the state thickness-specific incidence and melanoma-associated mortality rates exceeding the state average rate of 16.07 by one to nine.</td></tr>
<tr><td colspan="2">Prostate Cancer</td></tr>
<tr><td>Objective 1</td><td>By 2025, increase the proportion of average risk men ages 45 years and older who have had an informed discussion about both the advantages and disadvantages with their health care provider regarding prostate cancer testing by 5%.</td></tr>
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	Indicator	**Baseline BRFSS, 2018**	**2025 Target**
	Discussed Advantages	45.3%	50.3%
	Discussed Disadvantages	20.1%	25.1%
Objective 2	By 2025, increase the proportion of African American men 45 years and older who have had an informed discussion with their health care provider regarding both the advantages and disadvantages of prostate cancer testing from 56.6% to 61.6% and from 28.3% to 33.3%.		
	Indicator	**Baseline BRFSS, 2018**	**2025 Target**
	Discussed Advantages	56.6%	61.6%
	Discussed Disadvantages	28.3%	33.3%

Treatment & Survivorship	
Chapter goal	To improve California cancer survivors' quality of follow-up care and quality of life, and treatment outcomes through increased awareness, education, and access to survivorship and supportive treatment resources and services, including survivorship care plans that incorporate treatment objectives.
Treatment	
Objective 1	By 2025, increase enrollment of diverse populations in cancer clinical trials (therapeutic and non-therapeutic trials)
Objective 2	By 2025, increase the number of patients who receive supportive care during and after treatment addressing some of the most overlooked issues including sexual health, intimacy, and fear of recurrence.
Objective 3	By 2025, increase quality of care, improve standard of care in treatment, and increase clinical trial education with patients.
Survivorship	
Objective 1	By 2025, increase awareness and achievement of exercise guidelines for cancer survivors set by the American College of Sports Medicine (i.e. 150 min/week of moderate intensity aerobic exercise).
Objective 2	By 2025, decrease the number of patients with cancer who experience financial distress through health care costs during and after cancer treatment (including preventative screenings and post-treatment maintenance).

Research	
Chapter goal	To strengthen and support cancer research along the lifespan to reduce the cancer burden in California.
Objective 1	Encourage minority participation through community-based participatory research (CBPR) that involves community members and stakeholders from the beginning stages through all aspects of the research process, (i.e., study design, implementation, study completion and disseminating the research findings).
Objective 2	Establish the foundation for comprehensive, statewide cancer research efforts that will benefit all Californians through promoting collaboration, consolidating cancer research information, and making use of the latest technological developments (e.g., electronic medical record capability of community-based physicians).