

National Cancer Institute's State Cancer Legislative Database (SCLD): A Resource for Health Disparities Researchers

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SCLD Program and Database Overview

Purpose: The SCLD Program provides information for: (1) evaluating the effect of state legislation on public health and on the application of cancer control science; (2) facilitating the application of cancer control science; and (3) monitoring legislative trends that may reflect changing public attitudes and practices toward cancer prevention and control.

Description: The SCLD Program maintains information about state laws and resolutions addressing selected cancer-related topics, including access to state-of-the-art treatment, breast cancer, cervical cancer, colorectal cancer, genetics, health disparities, health-related treatment (bone marrow and lymphedema), ovarian cancer, prostate cancer, skin cancer, surveillance (cancer registries), testicular cancer, tobacco use, and uterine cancer. Obesity prevention topics were added this year. The SCLD also maintains limited information about other aspects of cancer-related laws.

Approach: The SCLD Program utilizes: (1) a standard approach to identifying and abstracting relevant state legislation and adopted resolutions; (2) data dictionary and hierarchical keyword system; (3) quality control procedures; and (4) multiple data output formats.

Limitations: The SCLD does not contain state-level regulations; executive orders; measures implemented by counties, cities, or other localities; opinions of Attorneys General; or data addressing the implementation of state laws. Although coverage of Medicaid and Medicare law is not comprehensive, some SCLD records include these data.

Background

Eliminating health disparities is a primary goal of Healthy People 2010 and Healthy People 2020, which are statements of national health objectives designed to identify the most significant preventable health threats and to establish national goals for reducing them. Minority and other underserved populations experience disproportionately high rates of incidence, morbidity, and mortality for certain forms of cancer as compared with those of the general population. In addition to being at greater risk for cancer, these populations also face disparities in access to cancer screening and treatment.

Most researchers agree that many determinants of health are rooted in society-level policies and norms. Therefore, state laws serve as an essential tool for addressing inequities in cancer outcomes and their causes by promoting cancer awareness, ensuring access to screening and treatment, and reducing environmental and behavioral risk factors.

The SCLD Program provides a valuable resource for health disparities researchers who seek to learn the extent to which states are passing health disparities-related legislation, as well as the type and scope of these policies.

Methods and Keyword Terminology

Methods

- Qualitative content analysis of SCLD summaries of state cancer disparities laws enacted as of June 30, 2010.

Keyword Terminology for Specified Disparities Populations

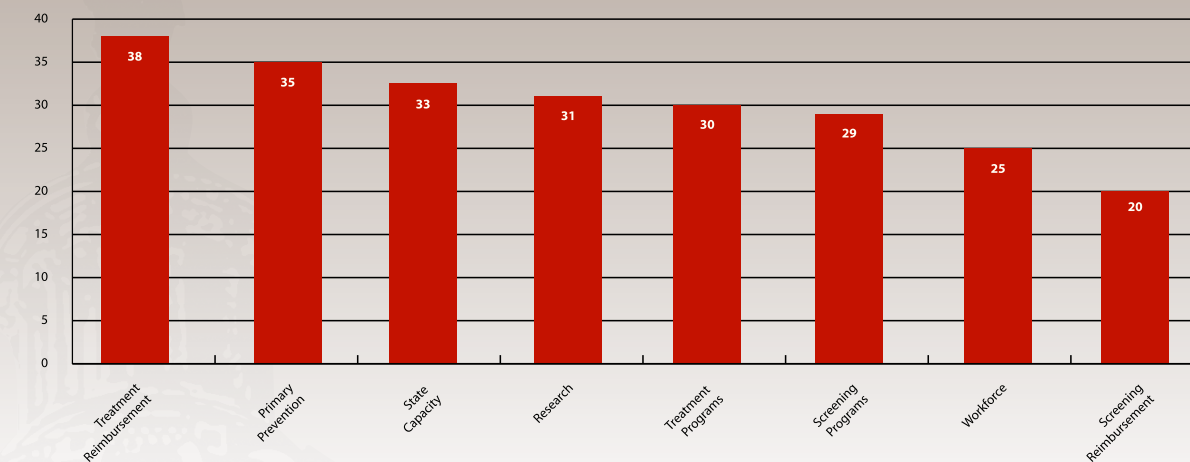
- **Race/Ethnicity*:** American Indian/Alaskan Native, Asian/Pacific Islander, Black, Hispanic/Latino, Minorities, Race/Ethnicity (General)
- **Socioeconomic:** Low-Income, Uninsured/Underinsured, Underserved
- **Other:** Age-Based (e.g., children, elderly), Immigrants, Limited English Proficient, Rural, Urban, Gender

* Racial/ethnic terms are consistent with Standards for the Classification of Federal Data on Race and Ethnicity (OMB 15). The keywords *Minorities* and *Underserved* are applied to laws that contain those specific terms, whereas *Race/Ethnicity (General)* is applied to laws using other general racial/ethnic terms (e.g., *racial diversity*).

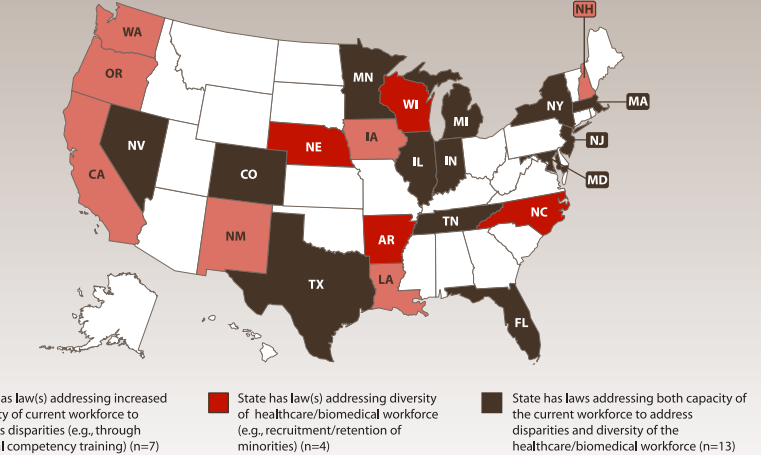
Disparities Topic Areas Include:

Awareness/Acknowledgment	Screening Programs	Treatment Reimbursement
Primary Prevention	Screening Reimbursement	State Capacity
Research	Treatment Information	Workforce
Screening Information	Treatment Programs	

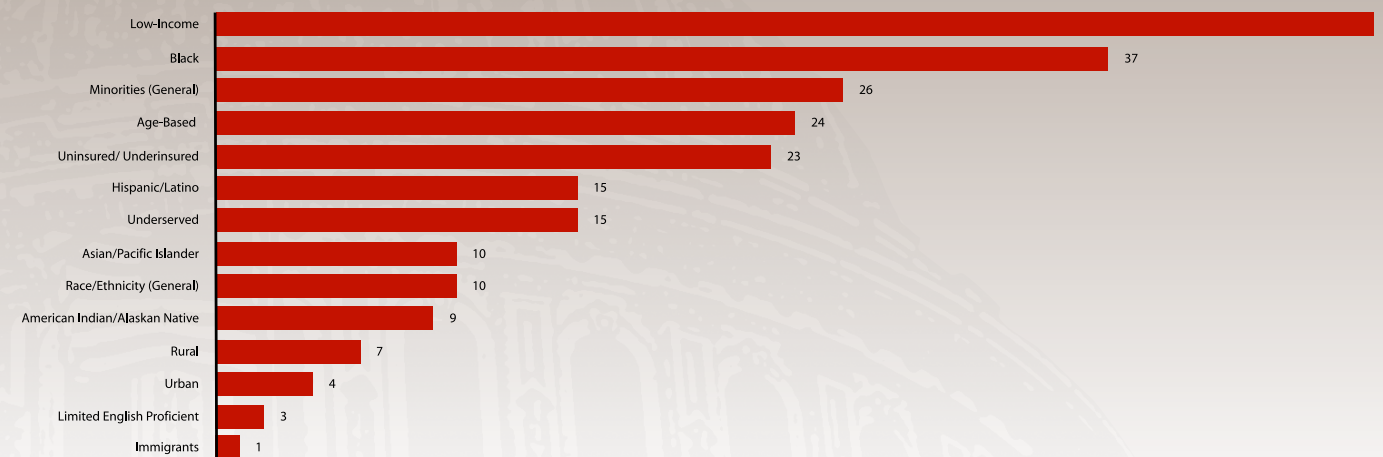
Number of States with Health Disparities Laws by Topic Area
(enacted as of June 30, 2010)



States with Laws Addressing Capacity and Diversity of the Healthcare and Biomedical Research Workforce
(enacted as of June 30, 2010)



Number of State Bills and Resolutions Addressing Specified Disparities Populations
(enacted between 1/1/2009 and 6/30/2010)



Highlights of Primary Prevention Legislation

Primary Prevention

Laws that address programs aimed at primary cancer prevention (as opposed to secondary prevention or early detection) that include provisions to reduce health disparities (e.g., behavioral and environmental risk prevention).

Findings

- As of June 30, 2010, 35 states have enacted laws addressing primary cancer prevention with at least one provision aimed at reducing health disparities. Examples include cancer prevention education or tobacco cessation programs for disparities populations.
- While some of these laws are specific to certain cancers (especially breast, cervical, colorectal, and prostate cancers), the majority of these laws are not specific to a certain type of cancer but encourage primary cancer prevention.

Highlights of Health Disparity Workforce Laws

Workforce

Laws that address state efforts to:

- Increase the number of minorities and other underrepresented populations in biomedical research, health care, or public health careers, or
- The ability of the current biomedical and health workforce to adequately address the health needs of minorities and other medically underserved populations (e.g., training or education in a health disparities-related competency, minority recruitment or retention, incentives to medical providers to practice in underserved areas or populations and school-based outreach and scholarships for underrepresented populations).

Findings

- 25 states have laws with workforce-related provisions.
- Most laws also emphasize the need to build capacity of the state's health workforce to address disparities.
- Most of these laws deal with health disparities generally, rather than specific cancers.

The Database

Since 1989, the NCI SCLD Program has monitored laws and resolutions covering numerous cancer-related topics. As of June 30, 2010, the database contained almost 8,000 records divided between general legislation and year-end status. General legislation records are abstracts of individual legislative measures (bills, resolutions, and ballot measures); year-end status records incorporate a stream of codified legislation related to a particular topic.

- The general legislation database contains abstracts of 3,857 individual laws, 978 resolutions, and 24 ballot measures.

The SCLD Program added health disparities as a topic area in September 2007, with a baseline of state laws enacted as of December 31, 2006.

- Disparities-related measures now account for more than eight percent of the records in the SCLD, an increase of two percent from 2009.

SCLD Program Resources

Standard Resources

- SCLD Program Web site
- *SCLD Update* quarterly newsletter and Legislative Data Byte
- Topical fact sheets
- Data tables

Inquiry Response

Analysis of SCLD data to procure requested information, followed by development of custom reports and tables

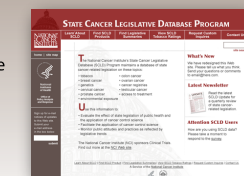
Conference Presentations

Analysis of SCLD data and development of oral and poster presentations for scientific and professional organization meetings

Access to SCLD Program Data

The SCLD Program Web site contains a searchable database of legislative summaries, an interactive map, SCLD Program publications and presentations, newsletters, and an online inquiry submission form.

The Web site is located at www.sclcd-nci.net.



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