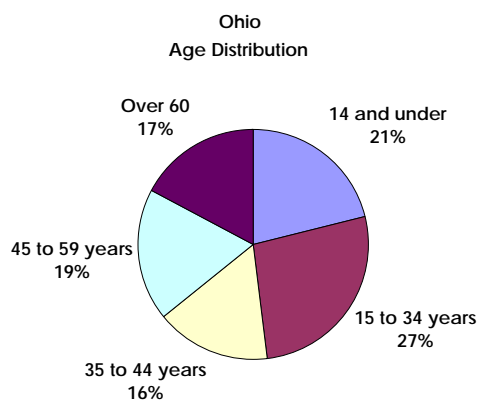


Demographics¹

	Ohio	United States
Population	11,353,140	281,421,906
Sex		
Male	48.6%	49.1%
Female	51.4%	50.9%
Race		
White	85.0%	75.0%
Black or African Am	11.5%	12.3%
AI and AN	0.2%	0.9%
API	0.0%	3.7%
Other	0.8%	5.5%
Hispanic or Latino	0.8%	12.5%
Not Hispanic or Latino	84.0%	87.5%
Geography		
Urban	79.0%	79.0%
Rural	21.0%	21.0%

Ohio has a population of 11,353,140 which represents 4.0% of the total United States population.



Cancer Facts

Ohio has the 36th highest overall cancer incidence rate among the 50 states and the District of Columbia².

	Ohio	United States
<u>Annual Incidence Rate</u> Cases per 100,000 ²	446.2	459.9
Estimated New Cancer Cases, 2007 ⁴	59,220	1,444,920
<u>Annual Cancer Deaths</u> per 100,000, 2004 ⁵	201.3	185.7
Cancer Death Rate, 2004		
White	197.1	184.1
Black	255.4	228.1
AI/AN	**	127.90
Asian or Pacific Islander	82.6	110.9
Hispanic	99.8	122.9
	Ohio	United States
Adults (50+) who have had a blood stool test within the past 2 years ⁷	23.4	24.1
Adults (50+) who have ever had a sigmoidoscopy or colonoscopy ⁷	57.1	57.1
Women (40+) who have had a mammogram in the past 2 years ⁷	76.7	76.5
Women (50+) who have had a mammogram in the past 2 years ⁷	81.2	79.9
Women (18+) who have had a pap test in the past 3 years ⁷	83.4	4.0

LIVESTRONG Survey

In 2006, the LAF conducted the LIVESTRONG Survey for Post-Treatment Cancer Survivors. The results of this survey suggest that since completing treatment for cancer, the participants in this survey experienced both positive life changing events as well

as a need for additional services and support. The survey was intended for individuals (over 18) who were diagnosed with cancer and were currently finished with treatment or managing cancer as a chronic condition. Survey respondents answered questions on their post-treatment medical issues, financial and other day-to-day concerns and LAF resources. Approximately 2561 surveys were fully completed. The top 3 medical issues reported were difficulties with sleeping and getting adequate rest, concentrating and remembering things, and with sexual function or dissatisfaction with one's sex life. The top 3 issues of personal importance reported were worries about the cancer coming back or dying from cancer, grief and loss, and sadness and depression. You can also [view](#) your state level data.

National Cancer Facts⁴

- More than 10 million people in the U.S. are currently living with cancer.
- More than 1.39 million people in the U.S. will be diagnosed with cancer this year.
- 65% of adults diagnosed with cancer today will be alive 5 years from now.
- 78% of children diagnosed today will be alive 5 years from now.
- 1 in 3 people will be diagnosed with cancer during their lifetime.
- 3 in 4 families will care for a family member with cancer.

LAF Mission

The Lance Armstrong Foundation (LAF) inspires and empowers people affected by cancer. We help people with cancer focus on living; we believe unity is strength, knowledge is power and attitude is everything. From the moment of diagnosis, the LAF provides the practical information and tools people with cancer need to live life on their own terms.

Programs & Partnerships

Community Program

The LAF Community Program provides financial support and capacity-building to community-centered initiatives that address the physical, emotional and practical challenges of cancer survivorship. Through its Community Program, the LAF awards grants to community, nonprofit organizations to serve the needs of people living with cancer. The LAF also offers its Community Program partners regular training, technical assistance and the opportunity to discuss challenges and exchange best practices at an annual Community Program conference.

Since its inception in 2001, the LAF Community Program has awarded more than \$4 million to nonprofit organizations across the country. Visit [Community Program](#) at www.livestrong.org to learn more.

The Gathering Place, Cleveland (2004) - \$15,667

This pilot program is a collaborative effort between The Gathering Place and Case School of Medicine in Cleveland, Ohio, to educate the next generation of physicians about the unique struggles of cancer survivorship and the role of integrative therapies in cancer care. This 12-week program, in which students learn through didactic teaching, group sessions, interviews with cancer survivors and observation of and/or participation in integrative therapies—enables medical students to address these issues with patients in an informed manner, and enables them to help cancer survivors integrate these therapies into daily living. A teaching manual for the medical students provides an in-depth analysis of specific integrative therapies and the role of these therapies in cancer survivorship.

The Toledo Hospital, Toledo (2005) - \$40,000

The mission of Toledo Children's Hospital (TCH) is to nurture, advance and protect the health and well-being of children. The Children's Palliative Care program serves cancer patients under the age of 21 and their families, friends, healthcare providers and caregivers. Families drive the design of children's palliative care services as they work with hospital staff and community representatives to develop a plan for pediatric palliative care and an option for in-hospital hospice. The goal of "A Good Day" is to ensure children live with cancer as normally as possible by participating in community-supported recreational, educational and spiritual activities with family and friends. Funding from the LAF will increase access to palliative care and pediatric hospice by establishing a program that integrates community involvement to support a child's sense of belonging and works with families to explore survivorship issues and community options.

Research Program

The LAF Research Program funds research, not readily fundable from traditional sources, that builds on the body of knowledge and services focused on improving the quality of life for cancer survivors across physical, emotional and practical challenges. The LAF encourages and supports the efforts of both young and established investigators.

Visit [Research Program](#) at www.livestrong.org to learn more about the innovative projects funded by the LAF—and the dedicated researchers, doctors and scientists leading them.

University of Dayton Research Institute (2002) - \$49,860

Gene Expression Profile of Experimental Seminoma Compared to its Normal Cellular Counterpart

University Hospitals of Cleveland (2004) - \$110,000

Lifestyle Change and Quality of Life in Obese Endometrial Cancer Survivors

The Ohio State University Research Foundation (2005) - \$247,500

A Randomized Study to Prevent Lymphedema in Women Treated for Breast Cancer

The Ohio State University Research Foundation (2006) – \$109,904
Cancer Survivors' Intentions for Work Following Diagnosis and Treatment

Northeast Ohio Neighborhood Health Services, Inc. (2007) - \$27,500
Collaborative Needs Assessment of Low-Income, Minority Cancer Survivors

Survivorship Center

Rainbow Babies & Children's Hospital (2004-2005) - \$299,200
Center for Survivors of Childhood Cancer

The long-term, follow-up clinic is designed to evaluate late effects of childhood and adolescent cancer treatment. Late effects include delayed growth, emotional difficulties and learning disabilities, heart problems and infertility. Patients are evaluated for the presence of late effects and provided with intervention including appropriate testing and/or treatment, advocacy through information and referrals, and counseling and education on ways to minimize future complications and to enhance physical and emotional functioning.

SCHOOL LIAISON PROGRAM

The School Liaison Program offers individual consultations with patients, families and school representatives for students who may be experiencing academic issues related to their cancer treatment. Educational programs regarding the challenges that some students face and the successful approaches that the educator can take are available for teachers and school administrators.

PHYSICAL PREPAREDNESS PROGRAM

The Physical Preparedness Program, in cooperation with Rainbow's Departments of Sports Medicine and Physical Therapy, provides activities that prepare survivors of childhood cancer for re-entry into normal childhood activities. Programs encourage physical activity, good nutrition and fun.

National Partnerships

The LAF National Partnerships Program offers a coordinated, comprehensive approach to cancer survivorship. Through the program, the LAF identifies, evaluates and forms long-term cooperative agreements with national nonprofit organizations, which leverage the strengths and resources of both organizations. Since its inception in 2004, the LAF National Partnerships Program has awarded more than \$6 million to national non-profit organizations. Visit our [National Partnerships](#) page to learn more about the partnerships and the positive impact they are having on cancer survivorship across the country.

Northwestern University (2007) - \$250,000
In partnership with the American Society of Clinical Oncology (ASCO) and the National Cancer Institute (NCI), the LAF will

sponsor the Education in Palliative and End-of-life Care for Oncology (EPEC-O) *Train-the-Trainer* workshop. The workshop will offer a comprehensive curriculum to optimize care for patients with cancer throughout the course of their illness. Produced through the EPEC Project at the Buehler Center on Aging at Northwestern University's Feinberg School of Medicine, the *Train-the-Trainer* workshop is a unique educational event that gives cancer care professionals the necessary knowledge and skills to train others about the best practices in supportive oncology and end-of-life care. The workshop addresses the important aspects of comprehensive cancer care, including combining antineoplastic therapy and palliative care, managing pain and symptoms, discussing clinical trials and preventing professional burnout.

The LAF and EPEC-O are partnering to improve communication between healthcare professionals and cancer survivors by educating survivors and caregivers about cancer survivorship issues from the point of diagnosis through long-term treatment effects and end-of-life care. Through the partnership, EPEC-O will develop a program that includes educational materials to help facilitate a positive, proactive role and relationship between patients and healthcare teams. The program was launched at the American Society of Clinical Oncology's annual meeting in November 2007. The LAF and EPEC are working together to distribute the program to healthcare providers.

LIVESTRONG Young Adult Alliance

The Lance Armstrong Foundation formed the LIVESTRONG Young Adult Alliance with the knowledge that unity is strength – working together we can raise awareness and effect positive change for young adults with cancer. The Alliance has brought together key voices in the cancer community to improve the survival rates and quality of life for young adults with cancer.

Guided by the research and advocacy recommendations of the Adolescent and Young Adult Oncology Progress Review Group, the Alliance is leading a coordinated national effort to address those factors that contribute to the unequal burden of cancer experienced by young adults. The Alliance is committed to promoting research and the investigation of the problem, serving as a voice for the issue and promoting effective solutions. Visit www.livestrong.org/yaa for more information.

Cancer Support

LIVESTRONG *Survivor Care* offers assistance to all cancer survivors, including the person diagnosed, caregiver, family and friends through education, treatment options/new treatments in development, counseling services and financial, employment or insurance issues. To speak to someone about receiving services, please call LIVESTRONG *Survivor Care* toll-free at 1-866-235-7205 or visit <http://www.livestrong.org/survivorcare> to send them an email. A case manager is available M-F from 9:00 a.m. to 5:00 p.m. EST. LIVESTRONG *Survivor Care* has partnered with

several organizations to provide these services; our partners include CancerCare, Patient Advocate Foundation and EmergingMed.

LIVESTRONG SurvivorCare provided services for survivors in all 50 states plus the District of Columbia and in 4 US Territories.

LIVESTRONG at School

The Lance Armstrong Foundation believes that unity is strength, knowledge is power and attitude is everything. One in three people in the US will be diagnosed with cancer in their lifetime. Children in classrooms across the country are likely dealing with cancer right now, whether with a grandparent, parent, or teacher. **LIVESTRONG at SCHOOL** <http://www.livestrong.org/school>, free online lessons, teach about cancer in a way that is age-appropriate, hopeful, inspiring and empowering. Lessons include national standards, clear learning objectives, engaging videos, extension activities, a check for understanding and ways that students can get involved in the fight against cancer.

Get Involved

Join the Advocacy Team and Support Change in Ohio and Nationwide

The LAF is working on Capitol Hill and in local communities to shed light on issues that are important to cancer survivors. By joining together in our communities and nationwide, we can help improve our healthcare system to better support the needs of people affected by cancer.

As an Advocacy Team member, you can choose your level of involvement. Activities include contacting your elected officials and spreading the word, volunteering at a local cancer support group and organizing your own community event to raise awareness about the need for cancer to be a national priority. Throughout the year, the LAF will conduct trainings, conference calls, online meetings, skill-building sessions, and will join together for an annual **LIVESTRONG Day** in Washington, D.C., and in communities across the nation.

[Get involved today!](#)

Cancer Policy Platform

The Lance Armstrong Foundation has released its [Cancer Policy Platform](#) to clarify the strategies we feel are needed to accelerate our progress towards reducing and eliminating the suffering and death from cancer. While the policy platform addresses many of the concerns faced on a national stage, the strategies resonate equally on state and local levels, as well. The coordination of nationwide and statewide efforts and the dissemination of best-practices for cancer prevention, detection,

treatment, and care will be required to successfully impact cancer survivorship. The LAF has developed four strategies that we believe are integral to dramatically reduce the burden of cancer in the United States.

- We must provide access to quality cancer care for everyone
- We must improve the quality of life for people affected by cancer
- We must manage cancer through prevention, early detection, planning and data collection, with an emphasis on survivorship
- And, we must invest in and align research with health outcomes.

The LAF believes in action and results, and both your national and state representatives will have a role to play. We intend to raise awareness of these issues and hold our representatives accountable in their decisions on cancer issues. In the upcoming months the LAF will be developing a legislative scorecard which will list the cancer policy issues that are introduced on a national level and keep a record of how your representatives voted on the issues. It is important for you to contact your representatives to express your views and concerns in cancer policy issues. In addition, states have roles to play and the State Cancer Legislative Database Program (<http://www.sclcd-nci.net/index.cfm>) maintained by the National Cancer Institute allows you to identify legislation in your own state that will impact cancer research and survivorship.

LIVESTRONG Summit

More than 600 cancer survivors from across the United States took part in the inaugural **LIVESTRONG Summit** on October 27 – 29, 2006, in Austin, Texas. Throughout the weekend survivors, caregivers and health professionals were inspired by many esteemed conference speakers. The delegates worked together to identify the needs of cancer survivors and to brainstorm possible solutions to those challenges. Delegates individually developed goals and personal action plans to effect change in their own communities around the identified needs. They then left Austin prepared to energize their state's survivorship population and help change the face of cancer survivorship. Visit www.livestrong.org/summit for more information.

LIVESTRONG • CHALLENGE

The **LIVESTRONG Challenge** is the LAF's signature fundraising event where people can walk, run or ride to support the LAF's mission to inspire and empower people affected by cancer. Visit www.livestrongchallenge.org to learn more.

Survivorship Initiatives in State Comprehensive Cancer Control Plan

In order to coordinate and maximize cancer control efforts, each state has worked to build a coalition dedicated to assessing the local cancer burden, determining the priorities for cancer prevention and control, and developing and implementing a plan for comprehensive cancer control.

Visit http://cancercontrolplanet.cancer.gov/state_plans.jsp to view your state's complete plan.

Contact your state's Comprehensive Cancer Control Coalition to see how you can get involved in the survivorship activities in your state.

Program Contact

Comprehensive Cancer Control Program
Ohio Department of Health
246 North High Street, 8th Floor
Columbus, OH 43215
(614) 752-2464
Fax (614) 564-2409
[Ohio Cancer Program](#)
[The Ohio Cancer Plan: 2010](#)

State Pain Policies ⁶

Chronic pain is a part of daily life for more than 50% of all cancer patients and survivors. The LAF is helping to support the Pain & Policy Studies Group (PPSG) at the University of Wisconsin Comprehensive Cancer Center to examine policies that govern pain management practices for cancer patients in all 50 states and the District of Columbia.

PPSG's Progress Report Card is a tool that can be used to achieve more positive and consistent state policy on the use of controlled substances for pain management of acute cancer pain, palliative care, and end-of-life care.

Ohio's state pain grade remained constant at a B from 2000 to 2007.

Visit the University of Wisconsin's Pain and Policy Studies Group's Web site www.medsch.wisc.edu/painpolicy to learn more about what you can do to make a difference in your state's pain policies.

State Pain Initiatives

Following the model of the Wisconsin Cancer Pain Initiative, the first State Pain Initiatives were formed to improve the management of cancer-related pain. State Pain Initiatives participate in numerous outreach and educational programs to improve health care professionals' ability to assess and manage pain. They are also active in addressing institutional and regulatory barriers to the treatment of cancer pain. State Pain

Initiatives have become widely recognized as an effective force in improving the management of pain, and many expanded their educational, outreach and advocacy efforts to address the under treatment of all types of pain; acute, chronic non-cancer, as well as cancer pain.

Visit www.aspi.wisc.edu for more information State Pain Initiatives and to find out how you can get involved in the cancer-related pain management activities in your state.

* Data not available.

** Data has been suppressed to ensure confidentiality and stability of rate estimates.

*** Data does not include cases diagnosed in other states because data exchange agreements prohibit the release of data to third parties.

**** Data not provided because it did not meet USCS data quality standards for one or more years during the rate period of data collection. While 93% of the US population resided in geographic areas with population-based cancer registries meeting the registry eligibility criteria for 2002, 7% of the US population was not yet represented in the [United States Cancer Statistics](#). American Cancer Society's Facts & Figures provides estimates of numbers of new cancer cases and deaths.

¹ Source: US Census Bureau, 2000

² Incidence rates (cases per 100,000 population per year) are age-adjusted to the 2000 US standard population by five-year age groups.

³ Source: State Cancer Registry and the National Program of Cancer Registries Cancer Surveillance System (NPCR-CSS), CDC, January 2005 data submission, as published in [United States Cancer Statistics](#), November 2005.

⁴ Source: American Cancer Society Facts and Figures, 2007. Rounded to nearest ten. Estimate excludes basal and squamous cell skin cancers and in situ carcinomas except urinary bladder.

⁵ Source: Death data provided by the [National Vital Statistics System](#) public use data file. Death rates calculated by the National Cancer Institute using [SEER*Stat](#). Death rates are age-adjusted to the 2000 US standard population by five-year age groups. Population counts for denominators are based on Census 2000 as [modified](#) by NCI.

⁶ Source: Pain and Policy Study Group. *Achieving Balance in State Pain Policy: A Progress Report Card*. University of Wisconsin Comprehensive Cancer Center. Madison, Wisconsin, July 2007.

⁷Centers for Disease Control and Prevention (CDC). *Behavioral Risk Factor Surveillance System Survey Data*. Atlanta, Georgia: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, 2006.