An estimated 14.5 million cancer survivors live in the United States. In Georgia, there are currently 305,870 survivors. It is predicted that the number of survivors 5 years post diagnosis will increase to 37% within the decade. Georgia has a long-standing history of collaboration to assess and enhance the quality of survivorship care in the state with leaders from the Georgia Department of Public Health (DPH), Georgia Center for Oncology Research and Education (GCORE), Andrew Young School of Policy Studies at Georgia State University, Regional Cancer Coalition of Georgia, American Cancer Society, Georgia Society of Clinical Oncology (NASCO), and the Emory University Rollins School of Public Health, among others. Respondents serve as members of the Georgia Cancer Control Consortium (GC3), which leads the Cancer Control Plan.

One of the eight priorities of the plan is focused on Survivorship. In 2013, the GC3 Survivorship Workgroup (SWG) began working with a state-wide survivors’ needs assessment to understand the physical, psychosocial, practical and spiritual needs of adult cancer survivors. While needs of cancer survivors have been assessed, there is less knowledge about unmet needs.

METHODS

The GC3 SWG and the Rollins School of Public Health developed a cross-sectional survey using National Comprehensive Cancer Network (NCCN) and Commission on Cancer (CoC) guidelines. The survey was approved by the Institutional Review Board (IRB) of Emory University in 2014.

Survey Methodology

• 76 items
• Recruitment & Dissemination
• Adult cancer survivors who had completed treatment and live in the state of Georgia
• 56 (20.5) Got all
• 54 (7.5) Got some
• 42 (23.5) Got none
• 45 (6.8) Didn’t get any
• 111 (15.7) Caring for family members
• 49 (7.5) Talking about cancer with family
• 69 (10.6) Changing relations with spouse

ANALYSIS

Levels of distress were measured using the Brief Symptom Inventory-18 (BSI-18), comparing moderate and severe distress to those levels that are considered normal. The BSI-18 is a self-report instrument used to screen for psychological distress.

RESULTS

Respondents were primarily female (78%), married (65%), college-educated (55%) and White (97%). 83% were White, 16% were African American and 3% were Hispanic. 36% of respondents were between 1 year of treatment, 45% were 1 - 5 years post treatment.

Histology:

• Skin
• Blood
• Breast

CoC: The GC3 SWG is planning a second phase of survey collection among vulnerable populations throughout the state. Some of the populations identified are residents that: have limited English proficiency, are socioeconomically disadvantaged, are racial and ethnic minorities and the socioeconomically disadvantaged, can not access care due to language and cultural barriers, have mental health issues, have a health condition that complicates their care, have other medical conditions, or are underrepresented in this study. Further research is needed to expand the study sample by working with community organizations and CoC hospitals to develop a more targeted approach to reaching individuals with limited English proficiency, limited access to technology and other minority populations.

Knowledge of areas of distress and unmet needs for survivors, including racial and ethnic minorities and the socioeconomically disadvantaged, can inform providers’ practices to guide survivors towards evidence-based approaches such as SCPs and utilize community resources to implement culturally and linguistically competent services that address their needs.

One important resource launched in 2014, Georgia's Cancer Survivorship Connection (CSC) is the first statewide comprehensive online portal that provides evidence-based survivorship information and resources for Georgia survivors, caregivers and healthcare professionals.

The state will be enhanced to ensure survivorship resources are available and highlight the unmet needs.

REFERENCES

2. See the full references list on the website at www.ghpc.gsu.edu.