Importance of Reporting Patient Race and Ethnicity to WCRS

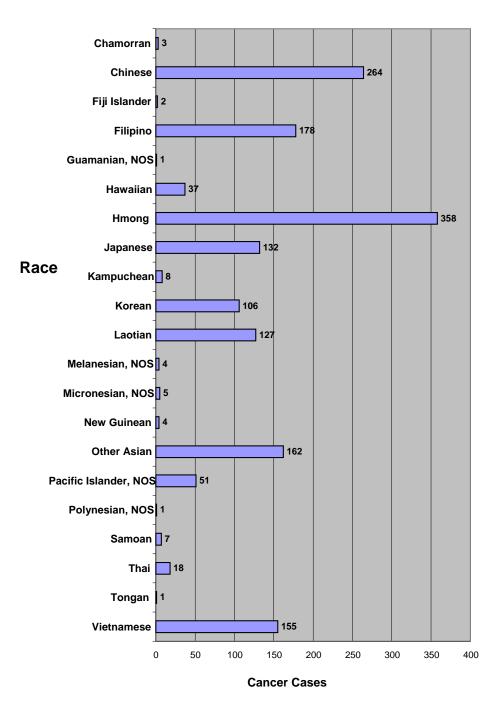
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WCRS and all state cancer registries in the National Program of Cancer Registries ask health care providers to report race and ethnicity information. The Wisconsin Cancer Council works with community partners to support targeted educational programs. In general, cancer prevention and early detection programs that acknowledge and are tailored to differences in racial subgroups have a higher likelihood of success. Further, for purposes of improving individual clinical care, there is good reason to obtain detailed race and ethnic information. Wisconsin health educational organizations strongly support the collection and reporting of detailed race and ethnicity data and urge medical providers to adhere to this standard clinical practice. This detailed information greatly assists the targeting of health promotion messages.

Reporting the specific race and ethnicity of patients help promote optimal health outcomes. For example, categorizing a patient as "Korean" rather than "Asian" allows calculation of cancer rates of Asian subgroups. The term "Asian" actually is composed of more than a dozen race categories recognized by the Surveillance, Epidemiology, and End Results (SEER) Program of the National Cancer Institute. Race classification is important for determining whether cancer trends seen in Asian countries also are seen among Asian American residents in Wisconsin. It also permits accurate race-specific counts that can assist in prioritizing resources. And knowing the specific race and place of birth may be helpful in assessing individual risk because some cancers occur at high rates in specific Asian countries (e.g., stomach cancer in Japan and China; cervical cancer in Korea and China). The Hmong communities in Wisconsin have low rates of lung, breast and prostate cancers, but relatively high rates of nasopharyngeal, stomach and liver cancers.

Data contained in the graph below highlights the range of Asian and Pacific Islander categories that hospitals and physicians have reported to the Wisconsin Cancer Reporting System since 1995. Not shown in the graph, the largest category for all racial groups is "Unknown." Use of this "Unknown" category has increased from 163 cases in 1995 to 527 cases in 2007, and for all years combined over 4,800 cases were not identified by race. Also of concern is the category of "Other Asian." While this broad classification may be useful in distinguishing patients from the white, African American and American Indian race categories, it would be more precise for

hospitals and providers to name the Asian group, such as Chinese or Hmong. Similarly, for persons from the Pacific Islands it would more helpful for health professionals to provide greater racial specificity (e.g., Tongan or Hawaiian).



Specific Race of Asians and Pacific Islanders Reported to Wisconsin Cancer Reporting System, 1995 - 2009

The best way for health care professionals including physicians to obtain this medically important information is to **directly ask the patient**, regardless of race, about his or her racial and ethnic heritage. If the medical staff frame the question as clinically important, the patient is less likely to perceive it as intrusive. For purposes of cancer registration at hospitals and at the state cancer registry, listing of the patient's race, ethnicity, tribal affiliation, and place of birth (whether in the admission form, physician's or nurse's clinical notes) will greatly facilitate the accurate classification of a person's race, including those of Asian and Pacific Islander heritage.

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1. Link to North American Association of Central Cancer Registries (NAACCR) codes that hospital cancer registrars use in classifying patient's race. Version 12.2: http://www.naaccr.org/LinkClick.aspx?fileticket=wUaZhv9kZSM%3d&tabid=133&mid=473 Race codes: see page 297; Spanish/Hispanic ethnicity codes: see page 396; Birth place countries: see page 457.

2. Resources for forms are available at: Health Research and Educational Trust: http://www.hretdisparities.org/