- Getting into more, you know, counties in the state. And so clearly we have room to grow and we're doing that. You know, we add folks all of the time that, you know, I mean, it just blows my mind some of the folks that are in this work, you know? So, like I said, TC2 is also one of those things of, you know, we do a little bit of everything, you know, the campaigns and everything. So I definitely have plenty of work.

- Sounds like it. Sounds like it.

- Yes, definitely. It is never a dull day. There's always something to do.

- Never a dull moment.

- You know?

- [Host] You're listening to "Further Together" the ORAU podcast. Join Michael Holtz and his guests for conversations about all things ORAU. They'll talk about ORAU storied history, our impact on an ever-changing world, our innovative, scientific, and technical solutions for our customers, and our commitment to the communities where we do business. Welcome to "Further Together" the ORAU podcast.

- Welcome to "Further Together", the ORAU podcast. As ever, it is me, your host, Michael Holtz from the communications and marketing department at ORAU. And my co-host, as always of recent note, is my colleague Matthew Underwood, also from communications and marketing. Matthew, how are you?

- I'm doing good, Michael. How are you doing today?

- I'm good. It's not raining for the first time in a couple of days, so I feel like it's a good thing.

- That's true.

- There's no flooding in my neighborhood, you know?

- Yeah, that's always good. It has been very rainy the past few days with some local flooding, so I'm glad some of that's kind of stopped for a little bit. That's good.

- I'm good with the little bit cooler temperatures too, so...

- That's true as well. Starting to get that. It makes you eager for fall though, you know, once you start to get that first kind of, like, cool temperature feeling, you're like, "All right, I'm ready for fall." And then, of course, summer always comes back, but it's okay.

- Absolutely. And we all know pumpkin spice latte season won't be too far behind.

- It is close by.

- Well, today we are having another of our continuing series of conversations about life in the cancer space, particularly cancer prevention. Today we have, from the Tennessee Health Department, we have Rachel Matlock, who is the director of all things cancer control and prevention. Rachel, welcome to "Further Together".

- Hi. Thank you for having me.

- We are so glad to have you. And as I said, we've been having a series of conversations with leaders throughout the cancer space, and you and I have worked together a little bit, and I thought it would be a great opportunity to talk about what is happening at the state level and why the work that you do is so important. So thank you for taking the time to chat with us about what's going on.

- Awesome. Thank you.

- So, Rachel, to start with, tell us who you are and what you do for the health department.

- Okay, yeah. So I do work for the Tennessee Department of Health, like you said. I am a program manager in the Tennessee Comprehensive Cancer Control program, say that three times fast. And so part of that entails I am the manager for the Tennessee Cancer Coalition as well.

- Okay. So what kind of work does the Comprehensive Cancer Control program do?

- What kind of work do we not do? It would be the shorter answer...

- Okay.

- For this... Fair enough.

- This conversation, just a quick background on the Comp Cancer program. It's part of the National Comprehensive Cancer Control program, which is CDC funded program. And they support comprehensive cancer control programs in all 50 states of the US, District of Columbia, seven US Pacific Island jurisdictions, Puerto Rico, and seven tribes and tribal organizations. You get all that?

- Yeah, absolutely.

- Yeah.

- Did you get all that? Do you need me to repeat it back? No.

- That's a lot though.

- Yeah. So, you know, the great thing about the National Comprehensive Cancer Control Program is that it provides funding and technical assistance to us and all of the recipients, and it really helps us to design and implement really impactful and strategic and sustainable plans to prevent and control cancer. And so we want to eliminate those preventable cancers. We want to ensure all people receive the correct screening on time and you know, that they really have the best outcome. And, you know, really also a focus on cancer survivors and their families and just really everyone lead a healthier life. And so through the National Comprehensive Cancer Control Program, that's where Tennessee's comes in. And like I said, what do we not do? So our work involves state and local health departments, state, local, and community organizations, researchers, healthcare providers, decision makers. I mean, you know, just the whole gamut. And we really want to come together to find ways to address those cancer concerns because we know how big a concern cancer is and you know, how many deaths it causes in Tennessee and across the US. And so, like you said, we're tasked with all things cancer prevention, treatment, and control and survivorship. But much of this work involves coordinating with partners across the state on various programs they're doing and initiatives and things that we can help them with because we definitely know that that collective impact is how we're gonna make, you know, the best of this work. We cover all cancer, all ages. We have a significant focus on, you know, cancers that they're screenings for, like breast, lung, cervical, colorectal, skin, you know, 'cause you know, we can really make a big difference there when we can identify those cancers early. And, you know, treatment's most effective when you catch it early. And you know, like I said, we don't work in a silo. We work with other programs like the Tennessee Breast and Cervical Screening program, and of course, the Tennessee Cancer Coalition and all of our friends across the state. And we focus on different outreach and things across the state for education for Tennesseans constantly trying to, you know, improve those efforts. Just, you know, a quick couple of examples is our second annual UV and Me sun safety campaign that we did this year, which really focused on families and children and, you know, helping them understand the importance of sunscreen, shade, and, you know, really knowing how to identify skin cancer and knowing changes in their body because, you know, we know our bodies best. And also in June, we were fortunate enough to co-sponsor along with the Tennessee Cancer Coalition, Rural Health Association, and the Southeastern Colorectal Cancer Consortium for their annual conference that we held in Nashville. And so, you know, that was really great. We had participants from 14 southeastern states, representatives from Barbados. So, you know, we covered all things colorectal in that, because, you know, that's really picking up speed. And, you know, we're planning our Tennessee Pink and Pearl for this year, which merges that breast and that lung cancer awareness and doing those dual screenings. And so, like I said, you name it, you know, we're constantly, you know, trying to work on that and really building momentum and doing everything we can to improve those outcomes.

- Absolutely. I had the opportunity to speak at the Southeast Colorectal Cancer Consortium meeting, and it was a really great turnout, really great experts that I got to hear from who were really well versed in colorectal cancer, the burden, the impact. And you know, as you said, it's a cancer on the increase, especially among younger people. And so how do we deal with that? And I know those were some of the questions that the coalition tackled in the meeting, or the consortium tackled in the meeting, but that is work that will continue going forward.

- Right. And just educating folks that it's preventable and, you know, understanding.

- Absolutely. And that lead time messaging to make sure that, you know, when that 45 screening age comes, like, you're not just like, "Oh, what's this?" You know? So they actually know more about it and, you know, you're kind of poking the bear and you're saying, "Hey, in a couple years, it's your turn." You know, and really making sure they understand that.

- Absolutely.

- So Rachel, part of your work includes the State Comprehensive Cancer Coalition. Can you kind of explain what that coalition is and the work that it does?

- Yeah, of course. So our coalition, which, of course, falls under Comp Cancer, is the Tennessee Cancer Coalition. We also refer to it as TC2. So if you hear me call it TC2 as just kind of a habit. But our mission for TC2 is to reduce the burden of cancer for Tennesseans through prevention, early detection, treatment, and survivorship. So those are really, you know, our key goals in our mission. We're a statewide coalition. We're made up of progressive leaders that deal with cancer and support and, you know, they work in that sphere and they are the experts that we can partner with there. We provide everything from networking, education, best practice sharing, and, you know, making those connections between those partners so we can work collectively. We are divided into the three grand regions in the state. So East Middle West, of course. And, you know, those regional work groups represent organizations and individuals all across the state. And, you know, just for example, you know, those could include anywhere from state government agencies, hospital and healthcare organizations, colleges, universities, faith-based, insurance companies, and, you know, survivors. Survivors are really near and dear to my heart. So, you know, we are constantly trying to grow our impact for the survivor community and really get them involved. So, you know, that's something, like I said, near and dear to my heart. So I'm always looking to incorporate that, you know? We have the same outline as other coalitions. Of course, we've got our, you know, your vice chair and you know, all that good stuff. But one really unique component of TC2 is we have a role as survivor advocate within each of our regions. And those folks are instrumental in connecting us to that community and really understanding what they and their families need based on, you know, when they're going through treatment. You know, we wanna make sure that the programs and services we're offering are doing the most good for the most people and they have wonderful feedback on, you know, ways we can improve and ways we can expand. And, you know, it not only helps us that provide services, but it really makes that connection for physicians and healthcare professionals to know, you know, how they can engage with those patients better and make better connections. And, you know, we all know that's tied into treatment adherence and, you know, things like that. So they have been a great addition and, you know, we have more that we're bringing on every day and we could not be thankful enough for them. TC2 is always doing outreach, helping with different programs and things. We started social media finally. I feel like, you know, we're late to the game a little. It took a little bit of time, but, you know, we started that. And of course, it's still growing, but, you know, we wanna reach the most Tennesseans as possible and whether we want to admit it or not, we're all glued to our phones, most of us, most of us, maybe not all of us, you know, we have that phone in our hand a lot. And so we're always looking for ways to do outreach there. And, you know, our coalition's completely free to join. Anybody can join it. Simple form process. Currently, we have over 80 organizations across the state that participate with us. Nearly 200 individuals within, you know, all of those sectors. And so, you know, we meet quarterly and we have work groups that we work together on. And you know, there's just a lot happening. You know, Tennessee has 95 counties currently. We're in, I think, about 27 of those. And of course, we know that Tennessee is, by and large, rural. And so, it's really finding those folks that we can make connections with in those rural communities and getting into more, you know, counties in the state. And so clearly we have room to grow and we're doing that. You know, we add folks all of the time that, you know, I mean, it just blows my mind some of the folks that are in this work, you know? So like I said, TC2 is also one of those things of, you know, we do a little bit of everything, you know, the campaigns and everything. So I definitely have plenty of work.

- Sounds like it. Sounds like it.

- Yes, definitely. It's never a dull day. There's always something to do.

- Never a dull moment.

- You know?

- Right. Well, and speaking of something to do, one of the things that you do in conjunction with the coalition is the cancer control plan for the state, right?

- Yeah.

- So what is that process like? I'm assuming members of the coalition provide input in addition to probably some form just, I was in public health for a little while, so I'm assuming there's some template from, like, the CDC, but, you know, it gets filled in with state-specific data based on who those participants are. So what does that process look like?

- Right. So the process for that really, you know, we've been doing the state cancer plan for years and years and years. So the Tennessee Cancer Coalition, yes, does, by and large, compile that State of Tennessee Cancer Plan. You know, they kind of work to develop that and work groups and really see where we needed to put our focus when we developed it last. And, you know, we collaborate with the Tennessee Comp Cancer program on that and really work to provide direction and support for those who are, you know, working collectively in this space. And so getting those different, you know, those different feedback and, you know, opinions on that and data. So I mean, the plan encompasses the entire cancer continuum. It includes action to reduce the risk of developing cancer, of course, finding it early through treatment, like I said, and screening. It's a robust plan for sure. And so we definitely needed all of the input that we could possibly get. But, you know, we have all those objectives within the plan. And so, you know, they cover the whole gamut. And those focuses are broke down into focus work groups, you know, within the state cancer coalition. So we have those, you know, we have our regional work groups, so we have focus work groups where those, you know, we're actually making the state cancer plan, you know, it's a dynamic document, we're working on that, that's what we want to do in this state. So we're really pulling those experts together in those focus work groups to work through that plan and make sure, you know, we're meeting some milestones and, you know, really making a difference. And, you know, the plan is available to anybody. And so the process with that is that CDC puts it on their national comp cancer website, and then of course, TDH can then put it on their website. But CDC has had some website instruction and things like that, so it's a little delayed. But like I said, the plan's open to anybody, and if anybody wants it, they can, of course, reach out to me or anybody in Comp Cancer and we are more than happy to provide that to them.

- Awesome. Are there specific highlights of the plan that I know just from being around the coalition that, you know, palliative care and survivorship are big aspects of the plan currently being worked, so...

- Yes.

- You know, what are some of those highlights that are part of the plan?

- Right. So each section has, you know, the different priorities and strategies and action steps on how we're going to impact that specific topic. And, you know, it covers the variety of topics like primary prevention, health equity and disparities, screening and early detection, treatment. Like you said, palliative care. I said treatment already. There's so many, and so that...

- That's okay.

- Yeah.

- That's right.

- You know, I just really wanted to just really get that treatment part in, I guess. But, you know, within those topics, there's multiple components within there and ways that we can engage the community and ways that we can better understand some of these things like palliative care and, you know, helping folks understand the difference between palliative care and hospice. You know?

- So important.

- You know, a lot of misconceptions and you know, just not really understanding some of those. So we're really passionate about making sure that folks understand what's available. They understand what these things are. And that's, you know, a big component of health literacy, making sure that, you know, the most people get the most good from it. And, you know, for instance, another component, you know, with our HPV awareness and immunization is striving to work with dental clinics, you know, which is kind of a little bit out of the box, but really train some of those staff to be able to communicate to their patients the dangers of HPV-related throat and oral cancers and things like that. So, you know, kind of taking maybe a non-traditional approach, but there's so many ways to tie folks in because everybody's impacted by cancer in some way. So they all have a way that they can work in there. Like I said, we have multiple subparts in certain parts of it. Primary prevention is really the most robust portion of it because prevention is just so much. So within that, we cover the topics of sun safety, HPV immunization, hepatitis C awareness, prevention and treatment, tobacco prevention and cessation, radon education and testing, which is another one that we really work to get education about. And of course, healthy weight and how those all impact cancer. And I know there's some things that folks have heard a lot about, like tobacco, you know, we have heard so much about, you know, there's commercials and, you know, some people think we, you know, we're beating a dead horse, but Tennesseans are still smoking, so, you know, we can't stop talking about it. We have to keep bothering people and reminding them that that is the main cause of lung cancer.

- Right.

- And, you know, with radon, a lot of folks don't even know what radon is, you know, that odorless gas that can be in our homes and contribute to lung cancer. And so by educating them on those things, we can connect them to resources that a lot of folks don't even know exist. Like the Tennessee Department of Environment and Conservation has a free radon testing program for Tennesseans. Anybody can request a free radon test kit to be sent to them. You know, so, you know, it's just really getting that information out there and I mean, it's so great. It's so great to really, I'm one of those people that I like to have, you know, like a baby, my animals laid out, I like to have things laid out, you know, tell me what can I do, you know, it's not in the list. You know, you know exactly the things you can do to work on it. And so that's why I really love the state cancer plan because it takes the guesswork out of how you can make a difference.

- Sure, sure. And you can push to different aspects of the plan depending on which organization you're part of and...

- Right, right.

- And you can lend your skills to making the plan work.

- Right, exactly.

- And there's so much planning, first of all, involved in putting the plan together and then the execution part's a whole separate thing. So how often is that plan updated to kind of add things and kind of readjust your plan?

- Right. So the state cancer plan is good for a span of five years.

- Okay.

- So we update it completely at the end of that five years. So our current plan is actually in place until 2027. But you know, like I said, it's not a static document. It's very dynamic and, you know, we are able to go in as needed and make updates based on, you know, new data, new developments, you know, within the cancer sphere, you know, feedback from, you know, people working in this. So we are able to go back in and make those updates and really fine tune it as we need to. But yeah, so every five years, and we are good until 2027, and we will do it all again.

- Well, it's good that you can go in and update it 'cause you know, as you know, in the research something changes, seems like every day, you know, some type of new research has come out, so it's good that it is kind of a living document that you can go in and update as needed.

- Exactly, yeah. And you know, like with any plan, there's data and that's a nightmare for people, but I like it.

- Right.

- So I guess I missed my call as an epidemiologist, I don't know, but, you know, it's really great because you can update that data in case, we have those primary data targets within there, you know, that really outline this is, you know, measurable, how much you want to, you know, decrease or improve certain things. And so based on that, that's very helpful to be able to update it for sure.

- Awesome. You talked about non-traditional partners, like dentists, a minute ago, and I had a checkup yesterday and Rachel, the technician did an oral cancer screening. She was like, "While I'm in there."

- That's wonderful.

- Yeah. She's like, "While I'm in there, we're just gonna go ahead and let me take a look and, you know, see how things are going from a cancer perspective." And I was like, "Thank you. I appreciate that."

- Yeah. That's like a freebie. It was like, you know?

- Right, exactly. Like, it was great.

- Yeah, that was wonderful.

- You know, so I appreciate that. And I think, you know, again, it's that prevention aspect of like, "Let's take a look, you know, I've gotta go in there anyway and clean your teeth, so let me look under your tongue and you know, at your tongue and all that stuff."

- Right. And that's kind of like, you know, our Pink and Pearl campaign. It was based on research by Dr. Kim Sandler at Vanderbilt, and she did a study on women who were getting their mammograms but refused lung cancer screening, doing those simultaneously. And, you know, without going too far into it, you know, those who refused that lung cancer screening at the time of their mammogram, there were folks who were diagnosed with lung cancer at later stages.

- Oh wow.

- And that passed away during that study. And you know, the women who opted to have the lung cancer screenings, they found their lung cancer early, those who were diagnosed and there were no deaths within there, so, you know, it's like you said, it's almost like, you know, getting more bang for your buck while you're doing it. Hey, you know, do this other thing. You know, there's a benefit to some of the simultaneous stuff. And so yeah, that's great.

- Yep, absolutely. Rachel, is there anything we haven't talked about that you wanna make sure we cover?

- Oh, goodness gracious. I feel like I have just belabored you with information, you know, and just really put a lot out there. I can't off the top of my, I lied to you. I did just think of something. I lied to you, that ADHD is kicking in. So I do just wanna also mention about, I'm bringing up Pink and Pearl because I'm just knee deep in that planning right now for, you know, October and November. It runs that whole timeframe. But it's a heavy topic. Cancer is a heavy topic, you know, but Pink and Pearl is such a great time to really have some, you know, some fun outreach and, you know, getting folks together and we're growing it every year. Last year, we actually added lighting up landmarks across the state, pink or pink and white. So, you know, from across the state, the capitol, the Adventure Science Center pyramid in Nashville, and you know, things like that, Tennessee Aquarium, we're working on growing that this year. The governor actually every year proclaims the first Friday in November as Tennessee Pink and Pearl Day. And so, you know, that's wonderful. It helps get the word out, you know, and we're actually planning a learning series this year, which is different than what we normally do. We usually do a one time, you know, one time event, you know, webinar, what have you. And it's called Pearls of Knowledge. And so this year, we decided to really expand that and do a learning series, which will be virtual. And we've got some really great speakers lined up from navigators to, of course, survivors and physicians and things like that across various topics. And so we are so excited about where that's going and I'll be glad when it's all planned out and like, you know, we were glad when the colorectal cancer conference was over. It was like, "Woo."

- Sure, sure.

- You know? You just see it and it's done and you can sleep again at night if you're me.

- For sure.

- Yeah, definitely.

- Rachel, where can people, sorry, where can people learn more about Pink and Pearls and of course, then the Cancer Coalition as well.

- Of course, yeah. I'm more than happy to provide direct links or anything that you might need, you know, for outreach. But they can find all of that, they can do a simple Google search for TDH Pink and Pearl.

- Awesome.

- You know, or Tennessee Comp Cancer, you know, and it'll pull that up and bring things about the state cancer coalition, things like that. But I will say what's on the website right now for Pink and Pearl is from last year.

- Okay.

- We are revamping the whole thing. And so that's why I'm awake at night. I'm just thinking about these things. We're revamping the whole thing. And so it's gonna be a lot more robust toolkit for that...

- Great,

- You know, social media, every, you know, sample proclamations for these local municipalities and, you know, just really partnering with the quit line and the tobacco program more and, you know, it's gonna be a lot of resources for folks and I think it's gonna be really helpful in their planning. And, yeah, we're working on it.

- Well, we'll put links to all of that in the description for the episode.

- Yeah, definitely.

- So that when it's updated, people will be able to access that.

- Yes, of course. Yeah.

- Awesome. Last question for you, Rachel. What brings you joy?

- What brings me joy? Like in general, or with my work?

- In general. You can take that in any direction you want.

- It's so fluid and the things that bring me joy on a daily basis. I have a little girl, she's seven and so she's as eccentric as I am. She says the craziest things and you know, I step back and I'm like, "I know why you're this way and it's because of me." But you know, she's brings me joy. She'll be in second grade and you know, it's just spending time with her. Other than that, I don't really have much of a life, you know, it's like when they do the icebreakers, tell me something interesting about yourself. And I'm like, "Is there something interesting about me 'cause I don't know." You immediately forget, like, if you're interesting or not. But yeah, my life pretty much centers around her and so she definitely brings me joy.

- That's great. Well, Rachel, thank you so much for spending this time with us and talking about comprehensive cancer planning and prevention and all of the great work that you're doing with the coalition and for the state of Tennessee. I really appreciate this.

- Awesome. Thank you so much for having me. I appreciate it. It was great chatting.

- Absolutely. Great chatting with you too.

- I feel like I did most of the chatting, but it is the point of...

- No, that's okay. You're the guest. You're supposed to do most of the chatting.

- That's right. We wanna know everything that you're doing.

- That's right. So thank you again.

- [Host] Thank you for listening to "Further Together", the ORAU podcast. To learn more about any of the topics discussed by our experts, visit www.orau.org. You can also find us on Facebook, Twitter, and LinkedIn at ORAU and on Instagram at ORAUTogether. If you like "Further Together", the ORAU podcast, we would appreciate you giving us a review on your favorite podcast platform. Your reviews will help more people find the podcast.