### Urban Indian Health Institute

The Urban Indian Health Institute (UIHI) is a division of the Seattle Indian Health Board, and one of 11 Indian Health Service-funded tribal epidemiology centers. The UIHI serves the network of 34 urban Indian health organizations nationwide. Its mission is to support the health and well-being of urban Indian communities through information, scientific inquiry, and technology. Learn more about the UIHI's projects and resources at <a href="https://www.uihi.org">www.uihi.org</a>.

### **About the WEAVING Project**

This fact sheet was produced by the WEAVING Project (WEAVING Resources for Urban Indian Women's Wellness), operated by the Seattle Indian Health Board's Urban Indian Health Institute. The project aims to increase breast and cervical cancer screening services for urban Indian and Alaska Native women by supporting partnerships and collaboration between urban Indian health organizations and state Breast and Cervical Cancer Early Detection Programs (BCCEDP). The WEAVING Project is funded by the Centers for Disease Control's National BCCEDP under cooperative agreement #U57/DP00111

Learn more at: www.uihi.org/projects/the-weaving-project



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# Cancer Screening Fact Sheet Data and Resources

## The WEAVING Project

WEAVING Resources for Urban Indian Women's Wellness





### Urban American Indians & Alaska Natives

According to the 2010 United States Census, there are 2.9 million people who identify as American Indian/Alaska Native (Al/AN) alone. Of these, 705,455 live in urban Indian health organization (UIHO) service areas, a 23% increase from 573,225 who identified as Al/AN alone in the 2000 U.S. Census.<sup>2</sup>

Lack of health insurance and poverty status are two important factors that can affect access to health care. The table below shows the percent of the urban Al/AN population living in poverty and with no health insurance, compared to the non-Al/AN population living in the same urban areas.

There are 705,455 Al/ANs living in UIHO service areas in the U.S. Of these:

- 32.5% are women ages 18-64 years
- 14.7% are women ages 40-64 years
- 7.7% are women ages 50-64 years
- 7.0% are men ages 50-64 years

### Access to health care among populations in UIHO service areas in the U.S.

Health care access characteristics	Women ages 18-64 years		Men ages 18-64 years	
	AI/AN	All Races	AI/AN	All Races
Living in poverty*	24.2%	13.7%	17.1%	10.6%
No health insurance in the past 12 months †	23.9%	16.2%	27.2%	19.2%

<sup>\*</sup>American Community Survey, 2005-2009.

### Cancer Screening

Cancer is a leading cause of death among Al/ANs living in UIHO service areas and nationwide.<sup>3</sup> While deaths from cancer among most races decreased significantly from 1997 to 2006, deaths from breast, cervical, and colorectal cancer remained level among Al/ANs.<sup>4-6</sup> Screening services are essential for cancer prevention and early detection and reducing the number of deaths from cancer. Data presented in the adjacent table indicate cancer screening needs in urban populations.

## Breast, cervical and colorectal cancer screening among adults living in UIHO service areas in the U.S.

Self-reported cancer screening <sup>‡</sup>	AI/AN	All Races
Never had a Pap smear test (women ages 18-64 years)	12.7%	7.6%
Never had a mammogram (women ages 40-64 years)	12.1%	8.4%
Never had a physical breast exam by a doctor (women ages 40-64 years)	10.1%	7.9%
Never had a sigmoidoscopy or colonoscopy (women and men ages 50-64 years)	53.5%	41.1%

<sup>&</sup>lt;sup>‡</sup>Behavioral Risk Factor Surveillance System, 2004-2008. NOTE: Screening questions were only asked in years 2004, 2006, and 2008.

#### References

<sup>1</sup>U.S. Census, 2010.

A Note About U.S. Census Data: Percent Al/AN includes women and men who identified as Al/AN as their only race, but does not include women and men who identified as Al/AN in combination with another race(s). Therefore, the percent reported is likely an under-representation of the true Al/AN population within the service counties identified. <sup>2</sup>U.S. Census, 2000.

<sup>3</sup>U.S. Center for Health Statistics, 2003-2007.

<sup>4</sup>Centers for Disease Control and Prevention, 2010. Breast Cancer Trends. Available: http://www.cdc.gov/cancer/breast/statistics/trends.htm.Accessed 2011 Aug 24.

<sup>5</sup>Centers for Disease Control and Prevention, 2010. Cervical Cancer Trends. Available: http://www.cdc.gov/cancer/cervical/statistics/trends.htm. Accessed 2011 Aug 24.

<sup>6</sup>Centers for Disease Control and Prevention, 2010. Colorectal Cancer Trends. Available: http://www.cdc.gov/cancer/colorectal/statistics/trends.htm.Accessed 2011 Aug 24.

September 2011

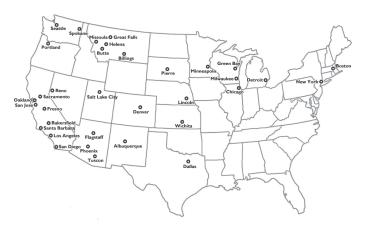
<sup>&</sup>lt;sup>†</sup>Behavioral Risk Factor Surveillance System, 2005-2009.



## Resources

### Urban Indian Health Organizations

Urban Indian health organizations (UIHO) are private, not-for-profit agencies established through Title V of the Indian Health Care Improvement Act. There are 34 UIHO nationwide, which provide either direct or referral services to AI/ANs living in 100 select urban counties in 19 states across the country. UIHO play a fundamental role in providing culturally appropriate clinical, outreach and referral services to urban AI/AN communities nationwide.



Learn more about UIHO at: www.uihi.org/urban-indian-health-organization-profiles

### National Comprehensive Cancer Control Program

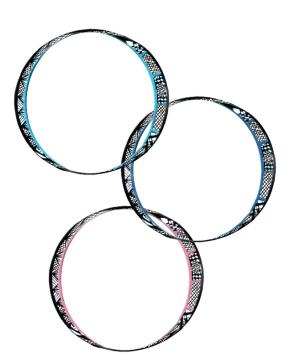
The Centers for Disease Control and Prevention's (CDC) National Comprehensive Cancer Control Program (NCCCP) is an on-going effort by the CDC to reduce the impact of cancer in the U.S. There are NCCCP-supported programs in 50 states, the District of Columbia, 7 tribal groups, and 7 U.S. Associated Pacific Islands/territories. The Comprehensive Cancer Control Program focuses on building networks of support to address cancer. Primary activities include developing and implementing cancer plans, determining priorities, promoting healthy lifestyles through education, quality care, and enhancing quality of life for cancer survivors.

Learn more about CDC's Comprehensive Cancer Control Program at: www.cdc.gov/cancer/ncccp



The CDC's National Breast and Cervical Cancer Early Detection Program (NBCCEDP) provides breast and cervical cancer screening and diagnostic services to eligible low-income, uninsured and under-insured women. There are NBCCEDP-funded programs in 50 states, 5 U.S. territories and 12 Al/AN tribes or tribal organizations. Services include clinical breast examinations, mammograms, Pap tests, pelvic examinations, diagnostic testing if results are abnormal, and referrals to treatment.

Learn more about CDC's National Breast and Cervical Cancer Early Detection Program at: <a href="https://www.cdc.gov/cancer/nbccedp">www.cdc.gov/cancer/nbccedp</a>



### Colorectal Cancer Control Program

The CDC's Colorectal Cancer Control Program (CRCCP) funds local programs in 25 states and 4 tribes. The goal is to increase colorectal (colon and rectal) cancer screening rates among men and women aged 50 years and older and reduce illness and death caused by colorectal cancer. Local CRCCP programs operate a screening promotion component, as well as a screening provision component, which provides colorectal cancer screening and follow-up care to men and women who meet eligibility requirements.

Learn more about the CDC's Colorectal Cancer Control Program at: <a href="https://www.cdc.gov/cancer/crccp">www.cdc.gov/cancer/crccp</a>

### Susan G. Komen for the Cure

For over thirty years Susan G. Komen for the Cure has supported programming and research in breast cancer around the U.S. The Komen Affiliate Network is a collection of 122 affiliate offices in major cities across the U.S. and internationally. The Komen Affiliate Network is now the largest private funder of community-based breast health education and breast cancer screening and treatment programs in the nation.

Learn more about Susan G. Komen for the Cure and Komen Affiliates at: <a href="https://www.komen.org">www.komen.org</a>