

# Urban Indians and Colorectal Cancer

“Don't let things just happen to you in life — take control of your own fate and prevent diseases from occurring in your body. Get screened for colorectal cancer when you turn 50!”

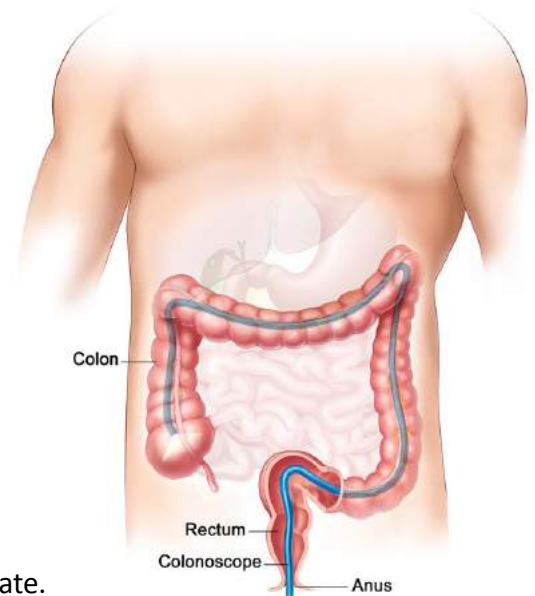
- Dr. May Wang,  
Native American Rehabilitation Association  
Medical Director

## Why Urban Indians?

- 67% of American Indians/Alaska Natives (AI/AN) live in urban areas - 2000 US Census
- Many Urban AI/AN depend on Urban Indian Health Organizations (UIHOs) for their health care.
- Colon cancer is the second most common cancer for AI/AN women and the third for AI/AN men.
- AI/AN are more likely to be diagnosed at later stages, when cancer is most difficult to cure.
- Only 46% of AI/AN in UIHO service areas have been screened for colon cancer, compared with 60% of Caucasians - Behavioral Risk Factor Surveillance System 2003-2007

## What Can I Do?

- **Ensure recommended screening guidelines are in place for men and women over 50.**
  - FOBT: yearly
  - Flexible sigmoidoscopy: every 5 yrs
  - Double-contrast barium enema: every 5 yrs
  - Colonoscopy: every 10 yrs
- **Display colorectal cancer prevention materials that are culturally appropriate.**
- Advocate for increased funding for screening.
- **Save money and lives.** The treatment cost of late stage colorectal cancer is estimated at \$120,000 compared to \$30-\$60/year for CRC screening by Fecal Occult Blood Test (FOBT) tests cost.
- **Lead by example.** Make sure your screening tests are up to date.

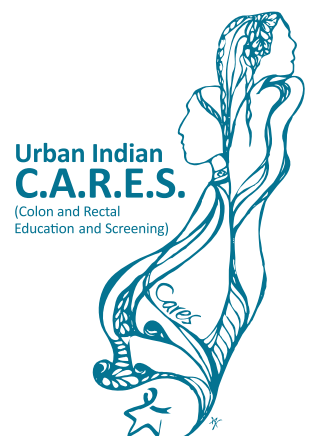


## Resources For Screening

- Talk to your Department of Health to learn more about your state's comprehensive cancer control plan and its focus on colorectal cancer screening and funding.
- Learn more about the Centers for Disease Control (CDC) pilot screening programs throughout the country and grants made to states.
- Contact local policymakers to inquire about additional funding for colorectal cancer screening in your area.
- Read the Preventing Colorectal Cancer Toolkit, which includes background information for policymakers and cost-effective prevention strategies for states:  
[www.healthystates.csg.org/Public+Health+Issues/Cancer](http://www.healthystates.csg.org/Public+Health+Issues/Cancer)

# BE CANCER FREE, YOU AND ME

Urban Indian C.A.R.E.S.: (Colon and Rectal Education and Screening)



“Health workers are often scared, uncomfortable or embarrassed going to Indian people to talk to them about prevention of this type of cancer.

## ***Why do we have to be ashamed***

and embarrassed when it means we can save a life or prevent an illness?”

—Laura, who lost her mother to colorectal cancer

### **For More Information**

- Cancer Control P.L.A.N.E.T – data and resources for the design, implementation and evaluation of evidence-based cancer control programs: <http://cancercontrolplanet.cancer.gov>
- Native American Cancer Research (NACR) – AI/AN-focused resources for health educators, providers, cancer survivors and caregivers: [www.natamcancer.org](http://www.natamcancer.org). 800-537-8295
- Native C.I.R.C.L.E. – culturally appropriate cancer educational materials for AI/AN educators, providers and students: <http://www.nativeamericanprograms.org/index-circle.html>. 877-372-1617
- Screen for Life – CDC’s National Colorectal Cancer Action Campaign health education materials, including materials targeted at AI/AN communities: [www.cdc.gov/cancer/screenforlife](http://www.cdc.gov/cancer/screenforlife). 800-CDC-INFO

### **About Us**

Urban Indian C.A.R.E.S. (Colon and Rectal Education and Screening) promotes education, testing and treatment of colorectal cancer for urban AI/AN through the Urban Indian Health Organizations nationwide. This work is supported through a grant from Prevent Cancer Foundation. Contact us at (206) 812-3030 or [info@uihi.org](mailto:info@uihi.org) for more information.

“***People heal*** from other people who have experienced cancer, from their knowledge, strength and hope.”

—Karen, colorectal cancer survivor

### **About Our Logo**

Az Carmen, Ph.D., (Chickasaw) developed the C.A.R.E.S. logo after her husband’s cancer was prevented with colorectal screening. Her drawing shares her personal experience and shows how colorectal cancers are experienced not just by the patient, but by the entire family. The experience of colorectal cancer is tied to life, health and family.

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