

AMERICAN INDIAN CANCER FOUNDATION



Indian Cervical Cancer Screening Program



CONTEXT

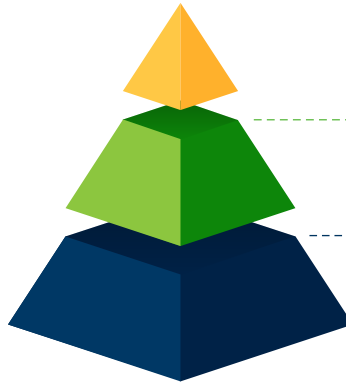
Goal: American Indian Cancer Foundation (AICAF) contributes to closing the gap in cervical cancer screenings by building the capacity of organizations that provide resources and support around cervical cancer screening to American Indian (AI) communities in Minnesota.

Causes: Racism and discrimination caused long-standing disparities in education, employment, income/wealth, housing, neighborhood conditions, access to health care, transportation, and social connections and support that directly affect health.

Population: Approximately 75,000 American Indians live in Minnesota.

Issue: Close to 140 women develop invasive cervical cancer and nearly 50 women die from it every year in MN. The disease disproportionately affects communities of color. The overall statewide incidence rate for American Indian and Alaska Native women is still 3 to 4 times higher than the rate for white women.

APPROACH



Increasing trainings and partnerships with clinics and health systems to support them in offering cervical cancer screening where this was not previously a focus.

Improving medical care systems to better support and reach the American Indian communities in MN.

ROOT CAUSES/ CONDITIONS FOR HEALTH

Addresses the social and economic conditions for health (also known as the social determinants of health). This often happens by changing local, regional or state policy, changing the way systems work or changing the environment.

ORGANIZATIONAL/ INSTITUTIONAL CHANGE

Addresses a health area by changing policies or systems in a school, clinic, hospital, etc. to support healthy behaviors and individual risk/protective factors.

HEALTH PROMOTION/ DIRECT SERVICE

Addresses individual or family-level risk/protective factors through health education, programming, case management, etc.

IMPACT

- 163 clinic staff received cervical cancer training
- Hosted Indigenous Women's Health Forum (25 participants) and Train-the-Trainer (15 participants)
- Offered two new trainings on current screening guidelines, risk factors, and prevention, as well as the link between commercial tobacco use and cervical cancer

20% INCREASE
in the number
of staff trained



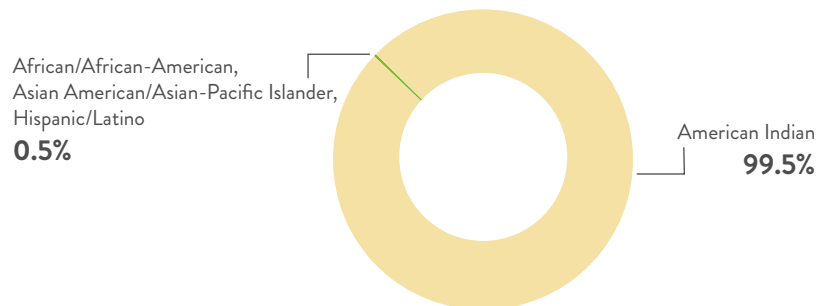


Through hard work, culturally appropriate community-based programs, and policy change that affords Native people access to the best prevention and treatment strategies, we see a day where American Indian communities are free of the burdens of cancer.

PRIORITY HEALTH AREA SPOTLIGHT

Breast cancer is the second leading cause of cancer-related deaths for women in Minnesota. Breast cancer mortality rates among African American women are 24% higher than white women with a greater proportion being diagnosed at a later, less treatable stage. Annually in Minnesota, close to 140 women develop invasive cervical cancer and nearly 50 die from it. Cervical cancer incidence and death rates are higher among African American, American Indian, and Asian American women than among non-Hispanic white women.

Collective Impact: 161,300 individuals were reached through the work of four grantees addressing this priority health area in 2017-18. The proportions of individuals reached by race/ethnicity are shown in the figure below.



EHDI grantees addressing breast and cervical cancer screening identified common measures to track and report. Collective results include:

- 761 breast cancer screenings
- 298 cervical cancer screenings

MDH ELIMINATING HEALTH DISPARITIES INITIATIVE

The Eliminating Health Disparities Initiative (EHDI) grant program was created to address health inequities for populations of color and American Indians across eight different priority health areas. Since 2001, the EHDI approach has been to support organizations and projects run by and for communities of color and American Indians to develop and implement strategies that are effective in reaching their communities. Every few years, the program reallocates the competitive grants to organizations and tribes across the state of Minnesota. The current grant cycle is from 2016-2019.