

EQUITY

FAIR AND JUST ACCESS TO CANCER PREVENTION AND CARE

CENTER FOR NATIVE AMERICAN CANCER HEALTH EQUITY

ISSUE 03 | OCT/NOV 2023

Welcome to the C-NACHE Newsletter



RECAP OF THE SEPTEMBER 26TH FORUM

C-NACHE held its inaugural Arizona Inter-Tribal Cancer Health Equity Forum (AICHEF) on Sept. 26, at the Doubletree by Hilton Hotel in Flagstaff, Arizona. The forum had 41 attendees, who represented various Tribal Nations and Tribal organizations in Arizona, state health agencies, and universities.

Forum activities centered on the following:

- An overview of national and state-level cancer health data trends among Native populations.
- A summary of current activities in Arizona that impact care along the cancer continuum for Native communities.
- Roundtable discussions to identify policy-related opportunities to advance the cancer care continuum for Native people in Arizona and accompanying action steps to build momentum.
- Opportunities for forum attendees to build and strengthen their networks in cancer health.

Outcomes from these activities included:

- New and renewed networking relationships among health advocates were fostered through roundtable discussions and forum activities and generated enthusiasm for working together.
- Forum attendees were informed of cancer data trends among NAs in AZ and Nationally and were able to take part in grand round discussions regarding potential data opportunities
- A World Café discussion activity regarding potential policy opportunities and how we as a collective can start making progress on these opportunities.



IN THIS ISSUE

We are pleased to provide you with updates from the Center for Native American Cancer Health Equity project.

CONTENT:

- Recap of AZ Inter-Tribal Cancer Health Equity Forum.
- Recap of 3rd Quarterly C-NACHE CAB Meeting.
- Data summary of breast cancer incidence and mortality in AZ.
- Tribal health program highlight.
- Upcoming events and announcements.

NAU

Center for Health
Equity Research

PHOTOS FROM THE SEPTEMBER 26TH FORUM

The C-NACHE team hopes that everyone who attended feels like they can take their newly fostered connections and the collective discussions from that day and use it toward advancing cancer health equity for NA communities in Arizona.

An Executive Summary of activities and discussions that took place during the AICHEF will be forthcoming in late November.



Eric Hardy presenting on Indigenous cultural frameworks.



Joyce Tovar asking a question after Eric Hardy's presentation.



Kellen Polingyumtewa presenting during grand round discussions.



Marc Emerson presenting on NA cancer data at the National level.



Gwenda Gorman presenting during grand round discussions.



Rosemary Sullivan discussing with her group during the World Café activity.

RECAP OF THE SEPTEMBER 25TH CAB MEETING

C-NACHE held its 3rd Quarterly Community Advisory Board (CAB) meeting on Sept. 25, at the Doubletree by Hilton Hotel in Flagstaff, Arizona.

The main activities that took place were:

- A continued discussion and review of the concepts of CAB leadership and governance operations.
- Shared an overview of C-NACHE evaluation plans with the CAB members.
- An update on C-NACHE activities: Community Assessments and Media efforts.

CAB member outcomes included the following:

- Deliberated on the leadership and governance of the C-NACHE CAB and they were encouraged to be a part of the decision-making process.
- Reflected on their Year 1 experience with C-NACHE through a CAB reflection survey.
- The Community Assessment Year 1 Communities were announced; **Hualapai and Fort Mojave**. CAB members also provided feedback on new and upcoming Media efforts.

Summary paragraph

The C-NACHE team greatly appreciates our CAB members' continued interest, support, and energy to improve cancer health equity for tribal communities, and we look forward to meeting again on Monday, Nov. 6, for our 4th Quarterly CAB meeting via Zoom.

A group photo of the CAB Members and C-NACHE Staff



(From left to right): Carol Goldtooth, Joyce Tovar, Nicky Teufel-Shone, Monica Yellowhair, Ann Garcia, T.J. Riggs, Dana Doyle, Dana Russell, Rosemary Sullivan, Jennifer Hudson, Marissa Tutt, Carmenlita Chief, Curtis Briscoe, and Nic Beckett.

(Not pictured): Manley Begay, Tanya Lewis, Cellina Reyes, Taylor Lewis-Moore, Alyssa Begay, and Beck Thomas.

“Understanding Native American Cancer Data in Arizona”

2nd Series Topic: Female Breast Cancer

You may have been seeing a considerable amount of information about breast cancer, here is why:

Top 5 Arizona Cancer Mortality Sites for Native American Females, 2016-2020		
Rank	Cancer Site	Avg Annual # of Deaths
1	Female Breast	15
2	Liver and Intrahepatic Bile Duct	13
3	Colorectal	12
4	Pancreas	12
5	Ovarian	11

*Data sourced from the Arizona Cancer Registry's mortality data trends in Arizona's Native American population from 2016-2020.

Female breast cancer is the first leading cause of cancer-related death in Arizona Native American females and is the second leading cause of cancer-related death in Native American females nationwide. Between 2016-2020, Arizona Native American females had the highest percentage (31.7%) of new cases of female breast cancer that were diagnosed in the late stage. Breast cancer usually has no symptoms when the tumor is small and most treatable, making it difficult to detect early. Breast cancer can be caught earlier if screening efforts were to increase. **A mammogram may save your life.**

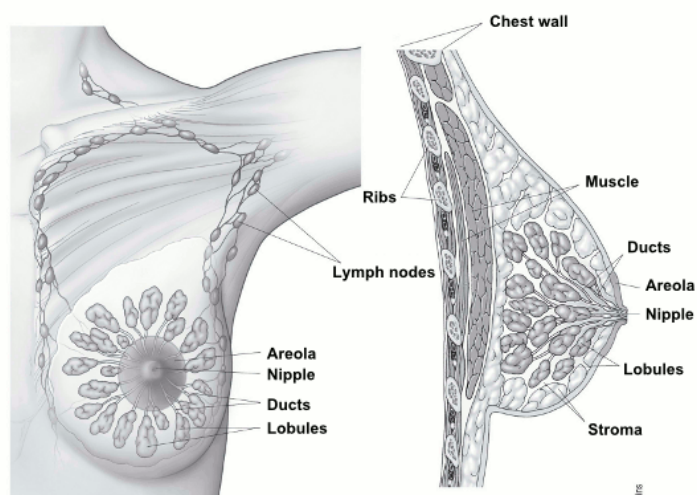
What exactly is breast cancer?

What is breast cancer?

- A type of cancer that starts in the breast and it can start in one or both breasts.
- Breast cancer occurs almost entirely in women, but **men can get breast cancer, too.**

Where does breast cancer start?

- Breast cancers can start from different parts of the breast.
- The breast is an organ that sits on top of the upper ribs and chest muscles.
- There is a left and right breast and each one has mainly glands, ducts, and fatty tissue (see the illustration to the right).
- Breast cancer can spread when the cancer cells get into the blood or lymph system and then are carried to other parts of the body.



Normal breast tissue

For a detailed breakdown of how breast cancer develops, click on the video link below:

[Watch video](#)

What can you do to reduce your risk?

- Limit alcohol consumption
- Maintain a healthy weight
- Maintain physical activity
- Breastfeed (if possible)
- Consult your physician if taking hormonal therapy

If you have a genetic proneness, personal history, and/or family history of breast cancer, consult with your doctor about when you should begin screening.

Screening Recommendations?

- **Women between 40 and 44** have the option to start screening with a mammogram every year.
- **Women 45 to 54** should get mammograms every year.
- **Women 55 and older** can switch to a mammogram every other year, or they can choose to continue yearly mammograms.
- **Women who are at high risk** for breast cancer based on certain factors should get a breast MRI and a mammogram every year, typically **starting at age 30**.

All that in mind...

Regular screenings are important because most individuals with early-stage breast cancer do not experience any signs or symptoms and screening can help rule out cancer or other issues or simply prevent the cancer from spreading.

It is natural to feel scared or anxious about cancer screenings, but it is also beneficial to learn more about it and to be proactive about your health.

Breast self-examinations are *not* a replacement for mammograms or clinical exams by your doctor, but they can be a useful and important screening tool you can do on your own.

Please see the link below with a step-by-step guide on how to perform a breast self-exam, provided by the Cleveland Clinic:

[How to conduct a self-breast exam](#)

Tribal Health Program Highlight: The Hopi Women's Health Program (HWHP)

The Hopi Women's Health Program Partners with National Breast and Cervical Cancer Early Detection Program to Promote Health Equity in Cancer Screening

The Hopi Women's Health Program (HWHP), a tribally-based program dedicated to improving the health and well-being of Hopi women, is proud to announce the continued collaboration with the CDC's National Breast and Cervical Cancer Early Detection Program (NBCCEDP). This partnership aims to improve the health equity gap by increasing access to crucial breast and cervical cancer screenings and care services for underserved populations.

For over 25 years, the Hopi Women's Health Program and the NBCCEDP have been dedicated to supporting low-income, uninsured, and underinsured individuals within tribal communities.



*Pink ribbon artist:
Renferd Koruh*

Strategies that will be implemented consist of:

- Outreach and Education Programs
- Mobile Screening Units
- Financial Assistance
- Training and Capacity Building

It is crucial that **women over the age of 40** have a mammogram once a year until they are 74, and **women over the age of 21** maintain pap test screenings according to the provider's recommendation until age 65.

**Contact Kellen Polingyumtewa,
Program Coordinator
for more info:
(928) 734-1150
kpolingyumtewa@hopi.nsn.us**

Radiation Exposure Screening offered in Tuba City, Arizona

Provided by the: Tuba City Regional Health Care Corporation (TCRHCC) Specialty Care Center

- Patients will be screened for cancer and other diseases.
- Treatment or referral to medical treatment will be offered as necessary.

Those who live in the Western Navajo Agency, Hopi tribe, San Juan Southern Paiutes, or who grew up near abandoned uranium mines or mills, are recommended for screening.

The Radiation Exposure Compensation Act (RECA) of 2000 was extended by two years under the RECA Extension Act of 2022. Those affected by testing nuclear weapons or uranium production for our nation's defense are allowed to apply before June 10, 2024.

Radiation Exposure Screening and Education Program (RESEP) at TCRHCC encourages anyone who meets the requirements to contact our office at (928) 283-1802 for more information.

DON'T MISS OUT
Scan to check our website for more information.



Indigenous Pink Day on Oct. 19 is a national breast cancer awareness campaign for Native people



Join us by wearing pink and sharing photos on social media using the hashtags:

#IndigenousPink

#AllBodiesHaveBreasts

Follow the Center for Native American Cancer Health Equity on social media!



C-NACHE is excited to announce our newly created Facebook and LinkedIn accounts.

Give us a like and follow to stay connected to all things C-NACHE!

For more information, contact us at:
CNACHE@nau.edu



Center for Health Equity Research