

North Dakota's Cancer Control Plan 2006-2010

2009-2010 Areas of Selected Priority Objectives

- Skin Cancer
- Lung Cancer
- Breast Cancer
- Cervical Cancer
- Colorectal Cancer
- Prostate Cancer
- Cancer Survivorship



"My name is Ashley Andrews and I am a cancer survivor. It was a shock when I found out I had cancer, a 21-year-old isn't supposed to have cancer."

Lung & Skin Cancer

Cancer Plan Objective 9

By 2007, strengthen North Dakota's smoke-free law to provide protection from second-hand smoke in all public places and places of employment.

North Dakota's smoke-free law was passed in 2005, restricting smoking in public places and places of employment, with some exceptions.

Cancer Plan Objective 10

By 2010, the number of North Dakotans who use ultraviolet (UV) protective measures will increase.

No Data Available.

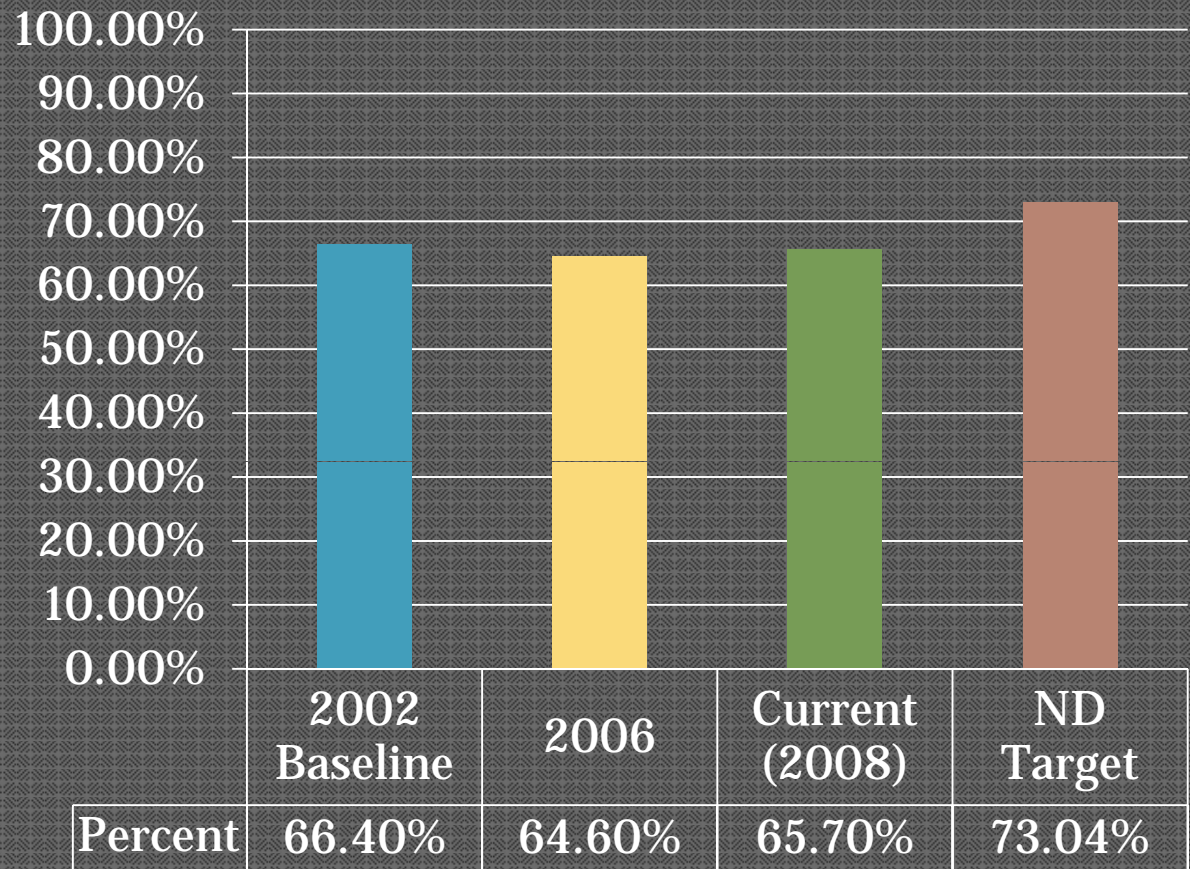
People who have been diagnosed with cancer, and the others in their lives, are challenged by many physical, spiritual and emotional issues affecting their quality of life.



Cancer Plan Objective 21



By 2010, the percentage of age-appropriate women who receive breast cancer screening will increase by 10 percent above 2002 rates.



Proportion of women aged 18 years and older who have had a clinical breast exam within the previous 12 months.

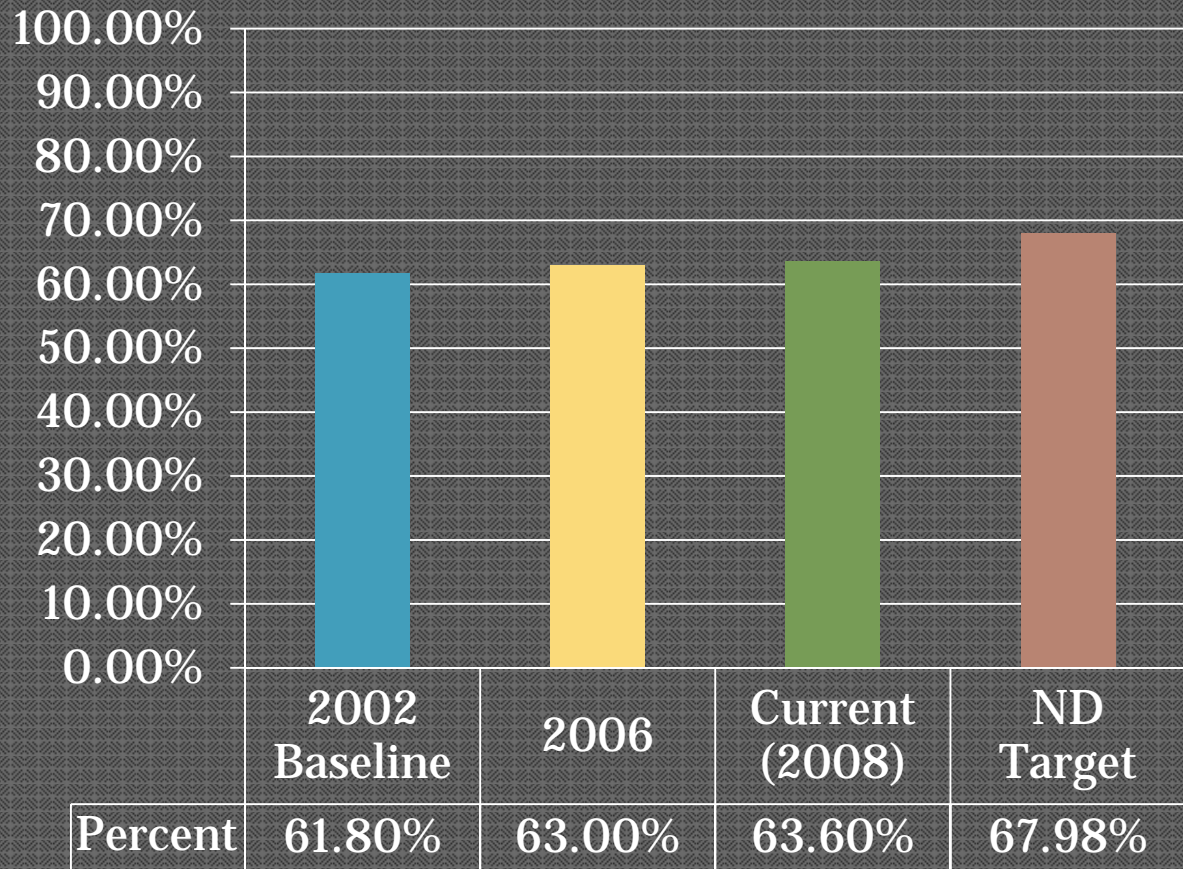


Cancer Plan Objective 21

“We want to make cancer a national priority again. We need federal and state funding to keep partnerships going and to address cancer control and prevention in North Dakota.”

-Margaret Leas, R.N., Two-time Breast Cancer Survivor, Rolla, ND

By 2010, the percentage of age-appropriate women who receive breast cancer screening will increase by 10 percent above 2002 rates.



Proportion of women aged 40 years and older who have had a mammogram within the previous 12 months.

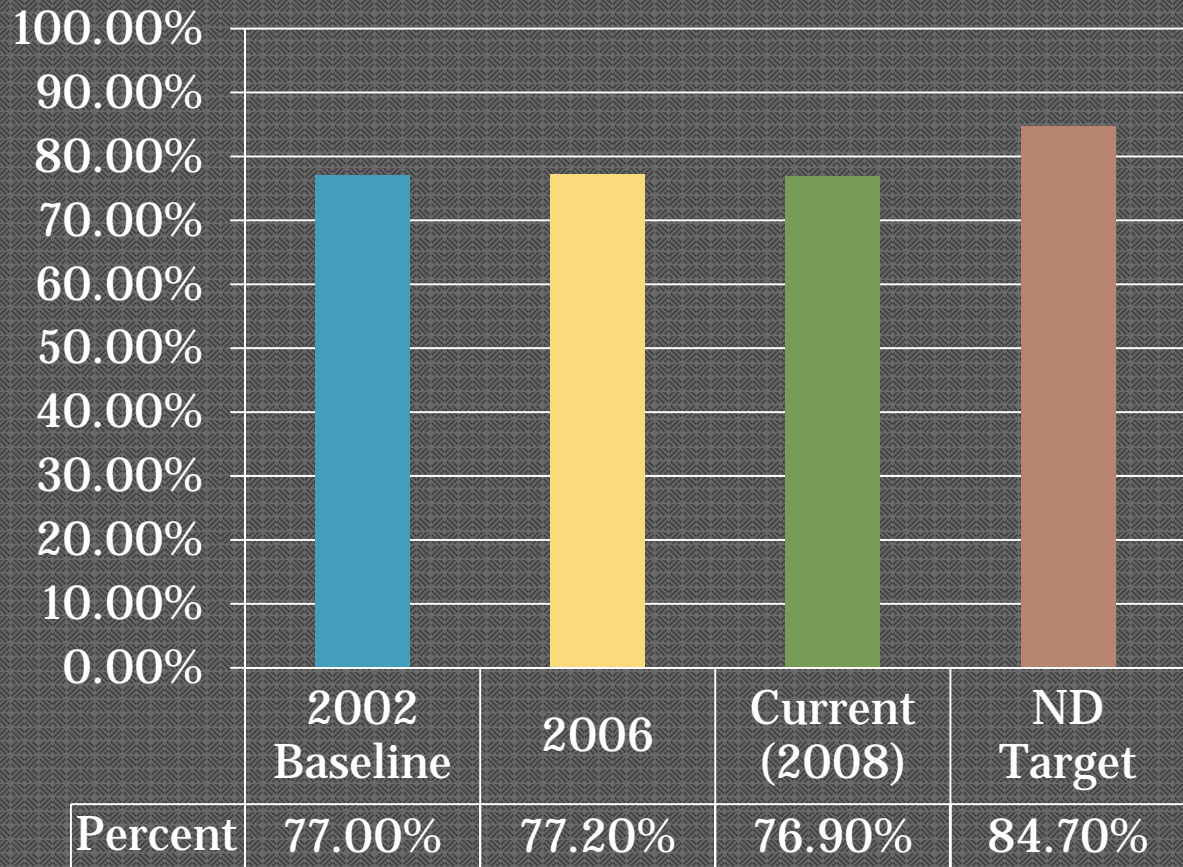


Cancer Plan Objective 21

“Every cancer patient has a story. Everyone wants to know they made a difference.”

-Jan Bierschbach, Hospice and St. Alexius Medical Center chaplain, Bismarck, ND

By 2010, the percentage of age-appropriate women who receive breast cancer screening will increase by 10 percent above 2002 rates.



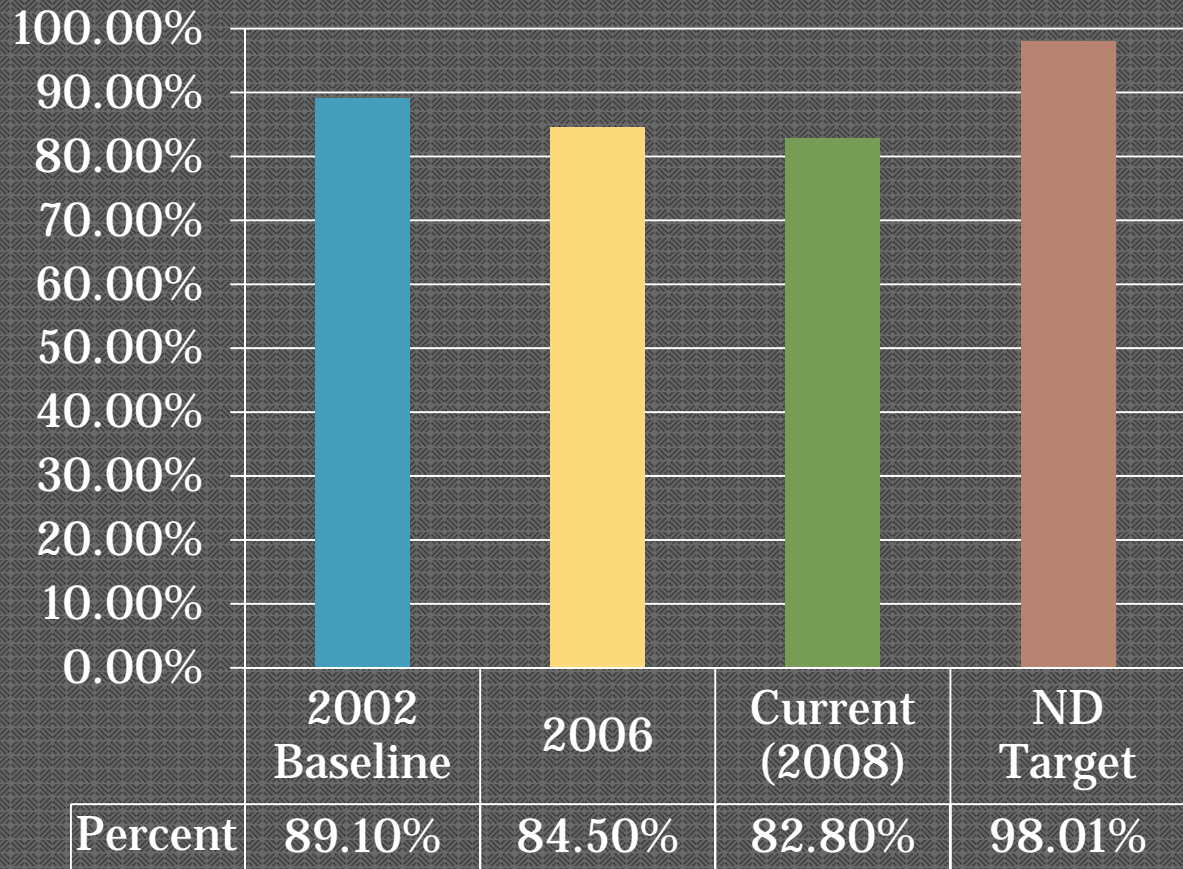
Proportion of women aged 40 years and older who have had a mammogram within the previous 2 years.



Cancer Plan Objective 22

“If your mind sees it, your body will believe it. See yourself healthy. Believe.”
-Gail Grove, Ovarian, Breast and Colon Cancer Survivor, Grand Forks, ND

By 2010, the percentage of women age 18 years and older who have had a Pap test within the last three years will increase by 7.5 percent above the 2002 rate.



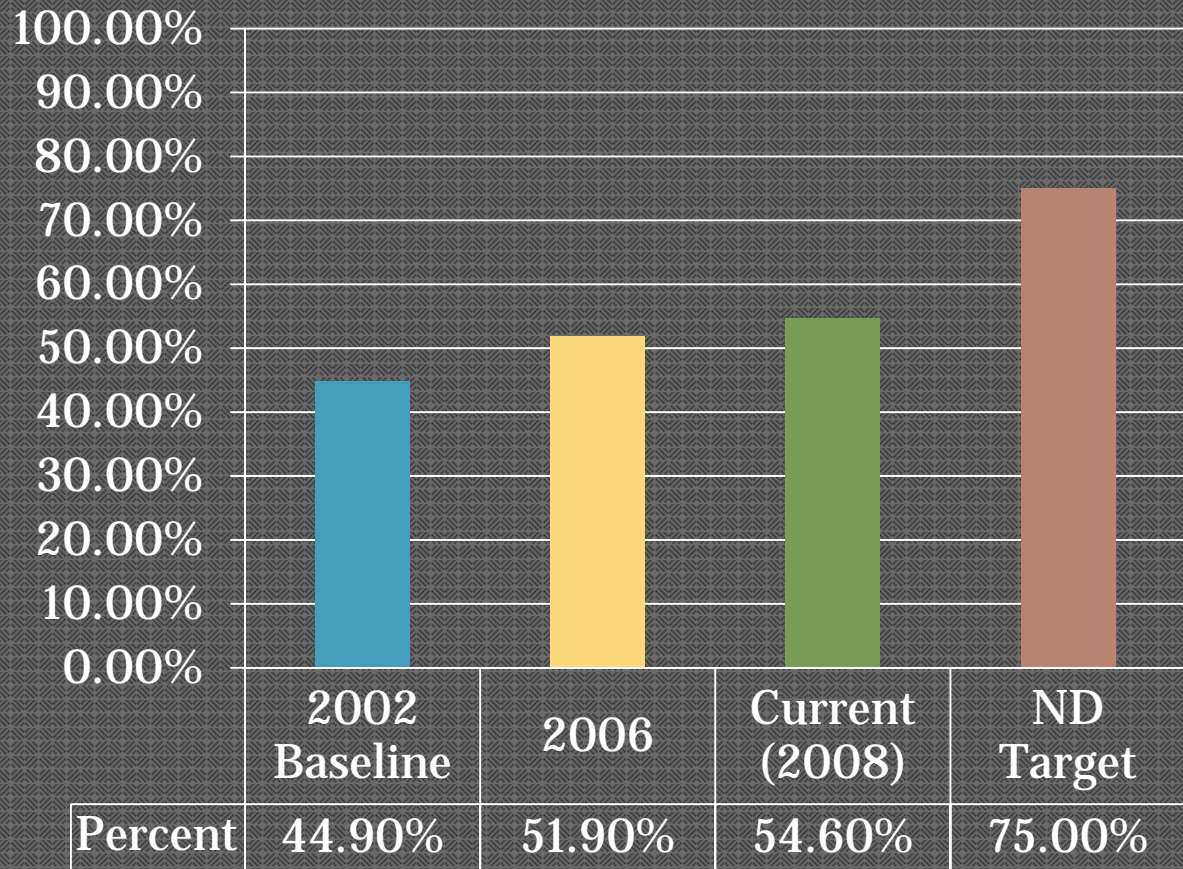
Proportion of women aged 18 years and older who have had a Pap smear within the previous three years.



Cancer Plan Objective 23



By 2010, the percentage of North Dakotans 50 and older who have been screened for colorectal cancer within the past 10 years will increase to 75 percent.



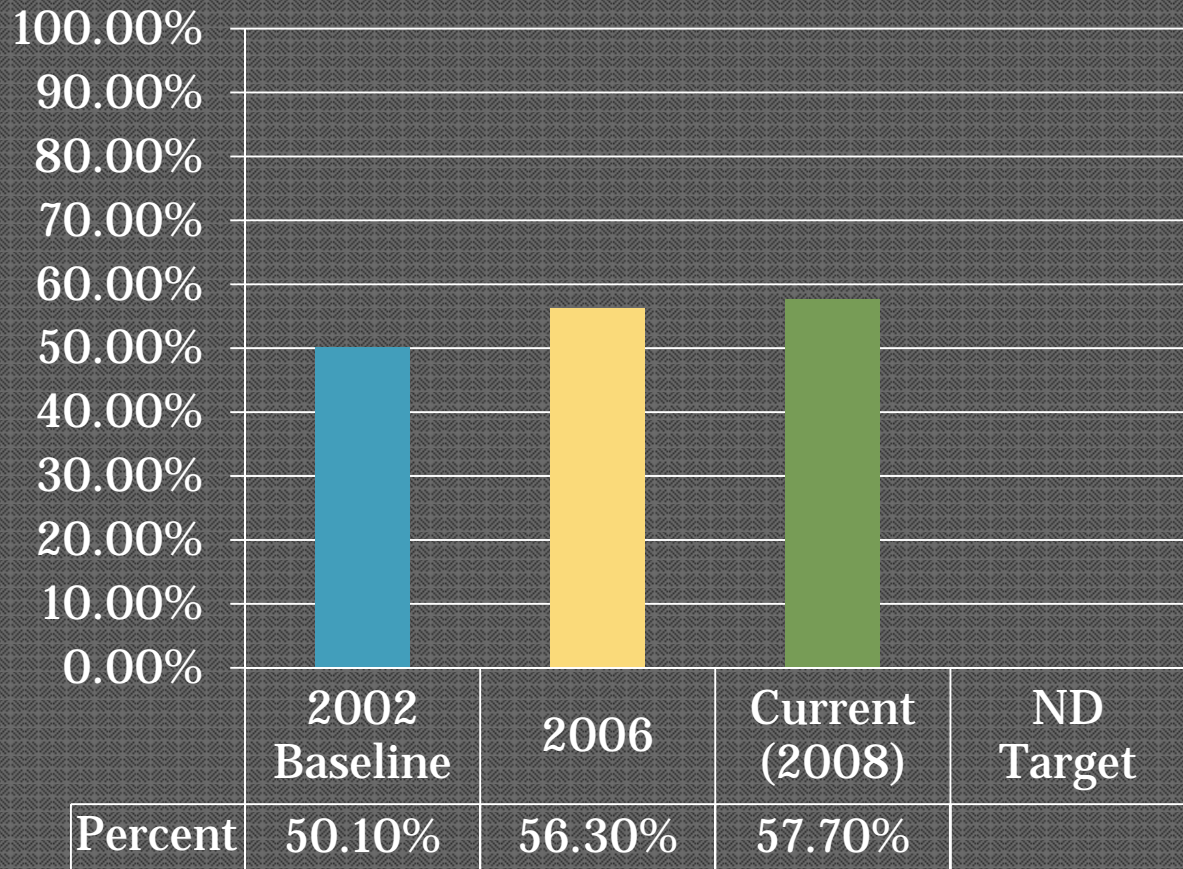
Proportion of adults aged 50 years and older who have had a colonoscopy or sigmoidoscopy within the previous 10 years.



Cancer Plan Objective 23

About 2,300 North Dakotans were colorectal cancer survivors in 2000. Each year, 400 new cases are diagnosed. Screening prevents colorectal cancer by finding and removing polyps.

By 2010, the percentage of North Dakotans 50 and older who have been screened for colorectal cancer within the past 10 years will increase to 75 percent.

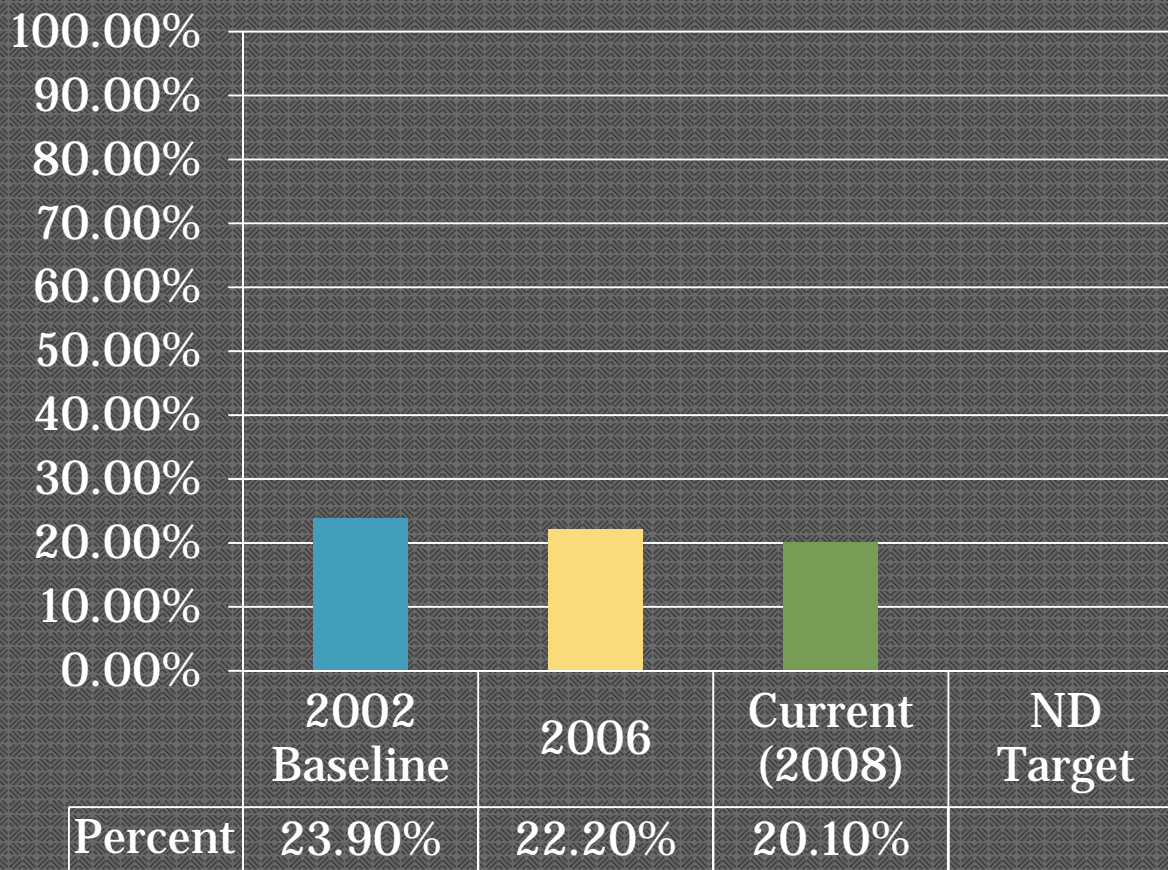


Proportion of adults aged 50 years and older who have ever had a colonoscopy or sigmoidoscopy.

Cancer Plan Objective 23



By 2010, the percentage of North Dakotans 50 and older who have been screened for colorectal cancer within the past 10 years will increase to 75 percent.



Proportion of adults aged 50 years and older who have had a fecal occult blood test within the previous 2 years.

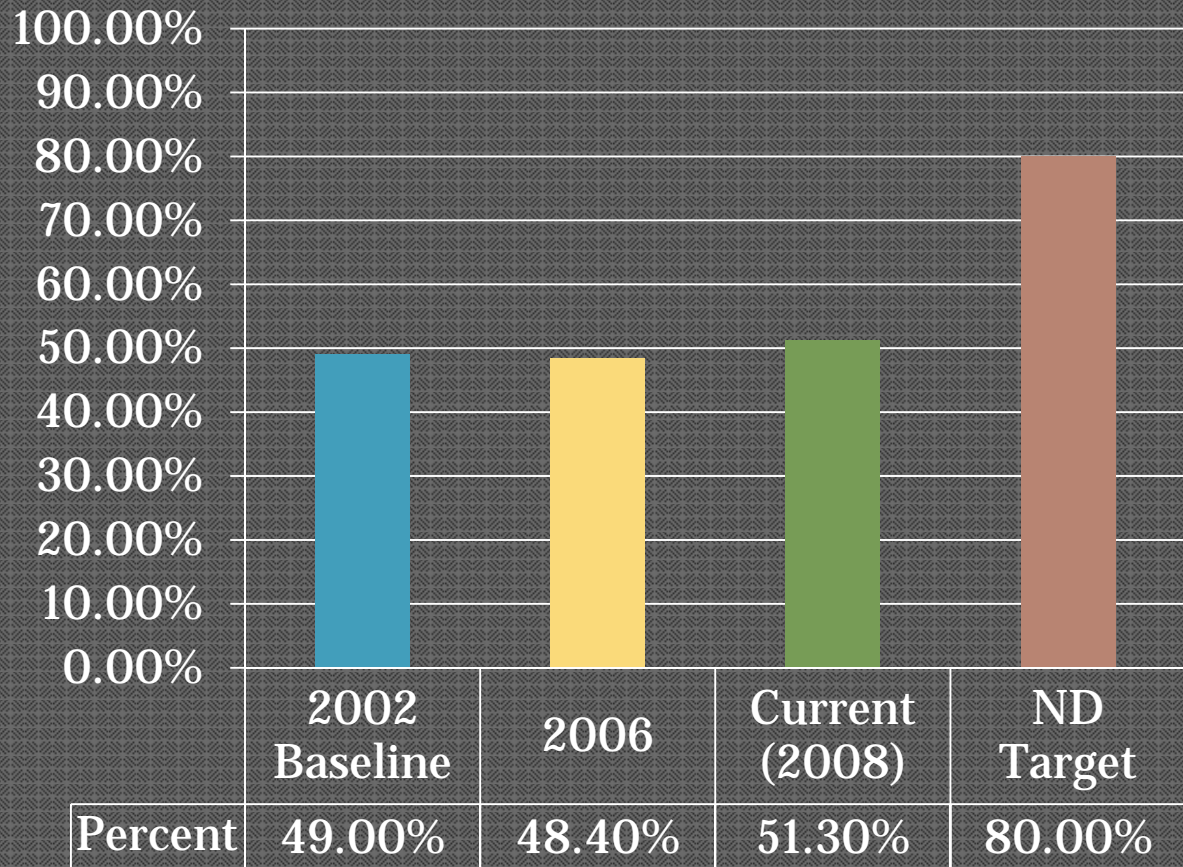


Cancer Plan Objective 29

“Not looking for cancer is like not checking oil pressure in a car. You might ignore it for a while, but it will catch up with you. There needs to be a push from the medical and public sectors to look for cancer, face it, and fix it.”

-Allen Lund, Prostate Cancer Patient, Stanley, ND

By 2010, the percentage of men 50 and older who have annual Prostate Specific Antigen tests (PSA) and Digital Rectal Examinations (DRE) will increase to 80 percent compared to the 2002 rate.



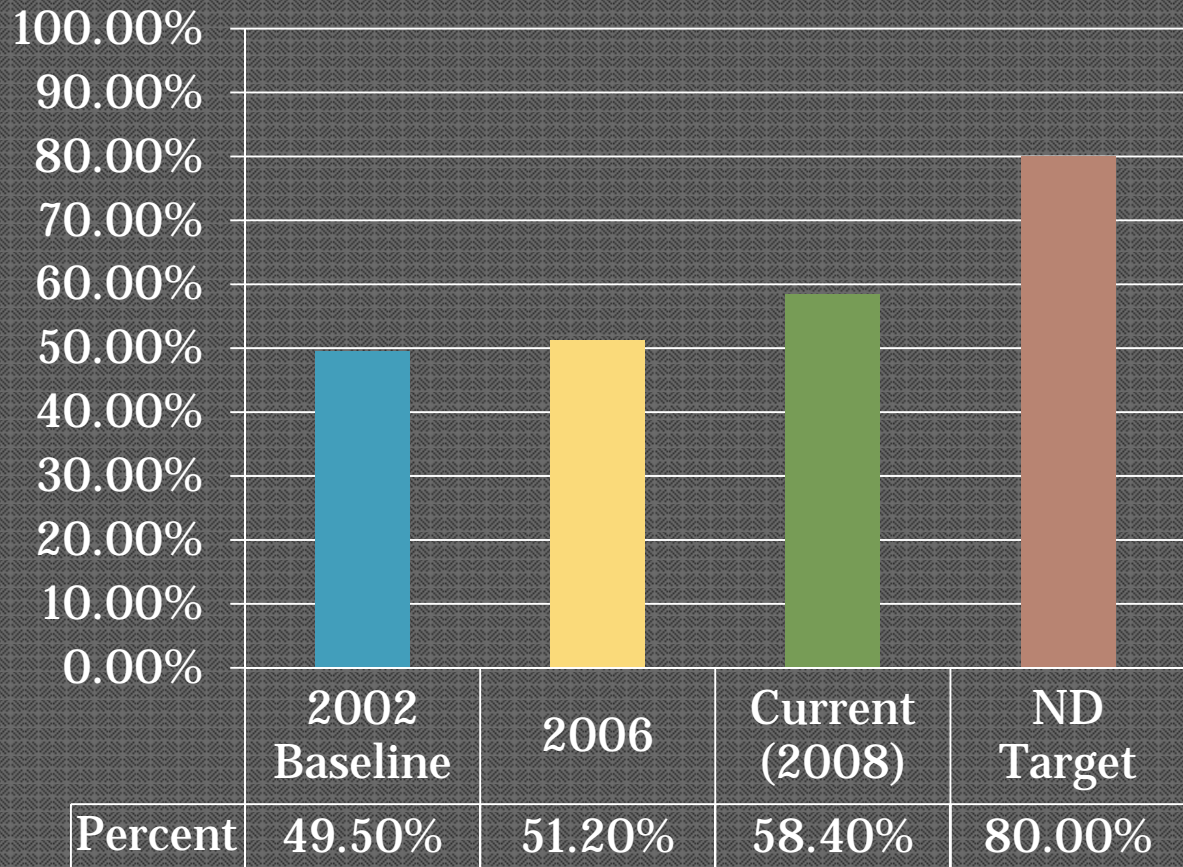
Proportion of men aged 50 years and older who have had a Digital Rectal Exam (DRE) within the previous 12 months.



Cancer Plan Objective 29



By 2010, the percentage of men 50 and older who have annual Prostate Specific Antigen tests (PSA) and Digital Rectal Examinations (DRE) will increase to 80 percent compared to the 2002 rate.



Proportion of men aged 50 years and older who have had a Prostate Specific Antigen (PSA) test within the previous 12 months.



Cancer Survivor

“The earlier you can detect cancer, the better you are. I have to remember where I was and where I am now. I’m a survivor and I always have to be thankful for that.”

–Keith Peltier with wife Cathy, Harvey, ND



Risk Factors & Race/Ethnicity



“Look at our data. We have the highest rates of cancer for all Indian people. We need access to specialty clinics. We need funding, access and leadership representation.”

–Penny Wilkie, M.D., New Town, ND

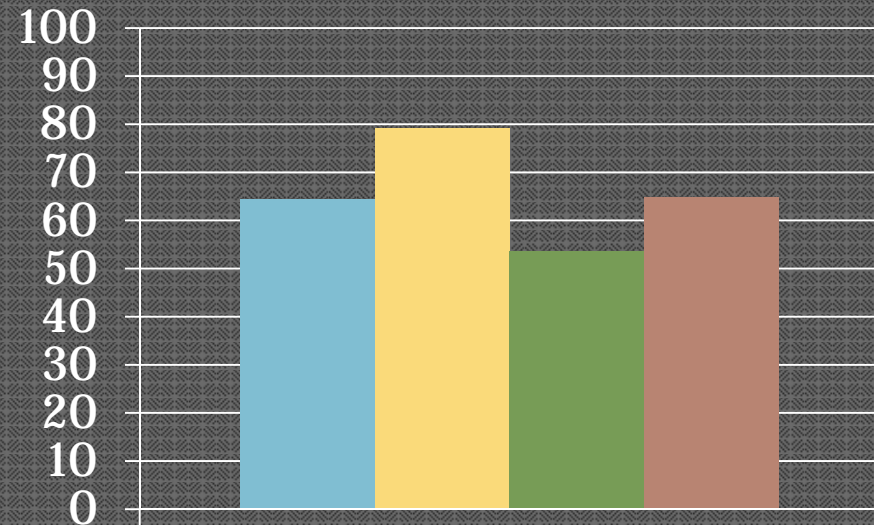


BRFSS 2004-2008



ND adults with body mass index (weight in kg/height in meters squared) ≥ 25.0 .

Overweight/Obese



Percent

■ White non-hispanic	64.3
■ American Indian	79.1
■ Other	53.7
■ 5 year total, all races	64.8

64.3

79.1

53.7

64.8

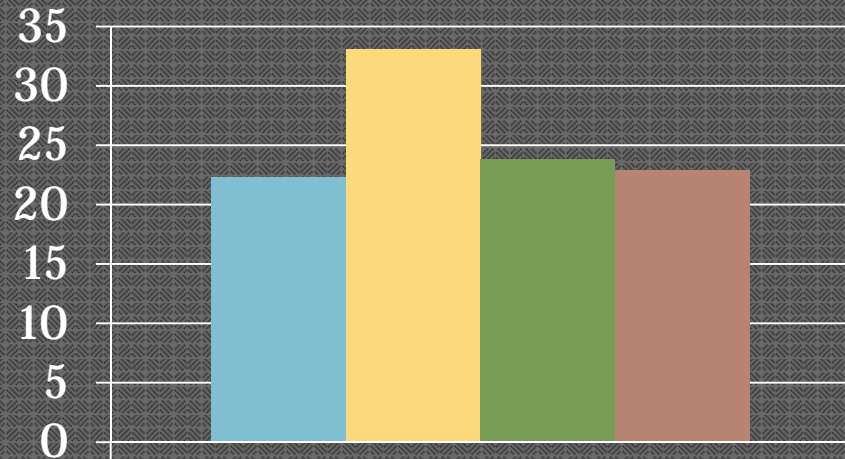


BRFSS 2004-2008



ND adults who reported not participating in any physical activities or exercises such as running, calisthenics, golf, gardening, or walking for exercise other than their regular job during the past month.

No Leisure Time Physical Activity



Percent

■ White non-hispanic	22.3
■ American Indian	33.1
■ Other	23.8
■ 5 year total, all races	22.9



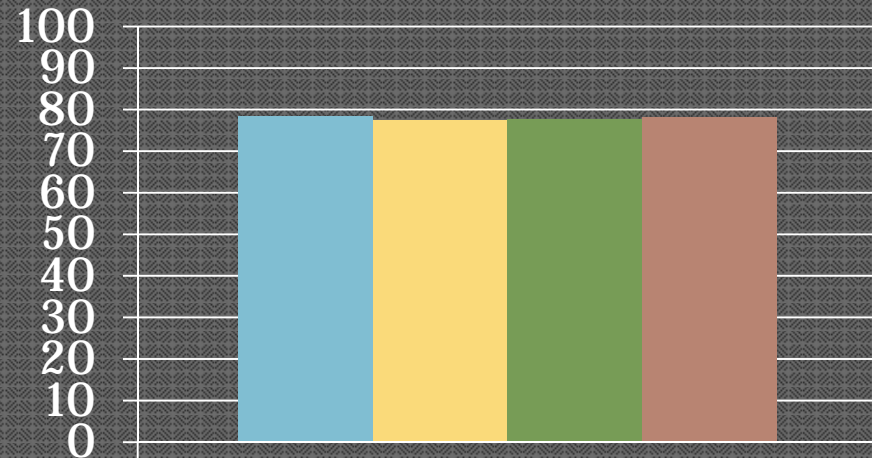
BRFSS 2000, 2002-2003 2005 & 2007



ND adults who reported not meeting the recommendation to consume five servings of fruits and vegetables per day.



Inadequate Fruit & Vegetable Consumption



Race/Ethnicity	Percent
White non-hispanic	78.3
American Indian	77.5
Other	77.6
5 year total, all races	78.2

Percent

78.3

77.5

77.6

78.2

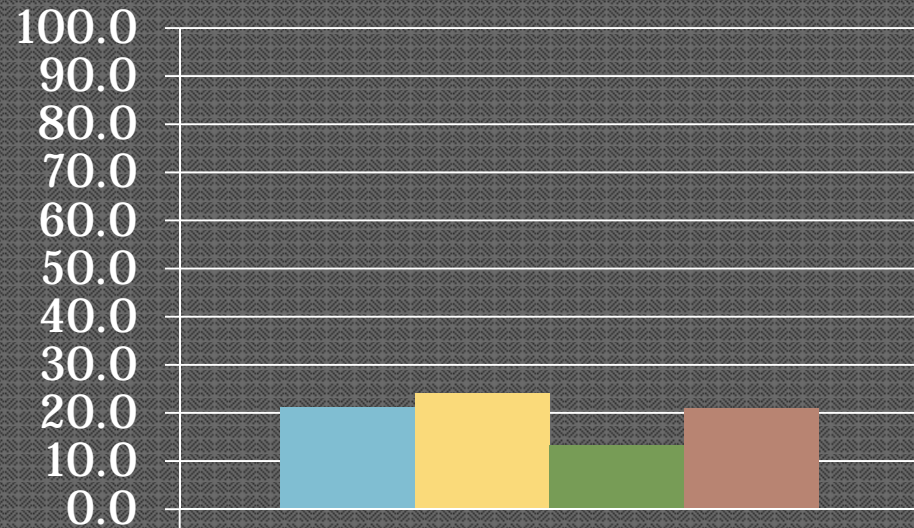


BRFSS 2004-2008



ND men who reported drinking 5 or more drinks of alcohol on one occasion in the past 30 days or women who reported drinking 4 or more drinks of alcohol on one occasion in the past 30 days.

Binge Drinking



	Percent
■ White non-hispanic	21.1
■ American Indian	24.1
■ Other	13.3
■ 5 year total, all races	21.0

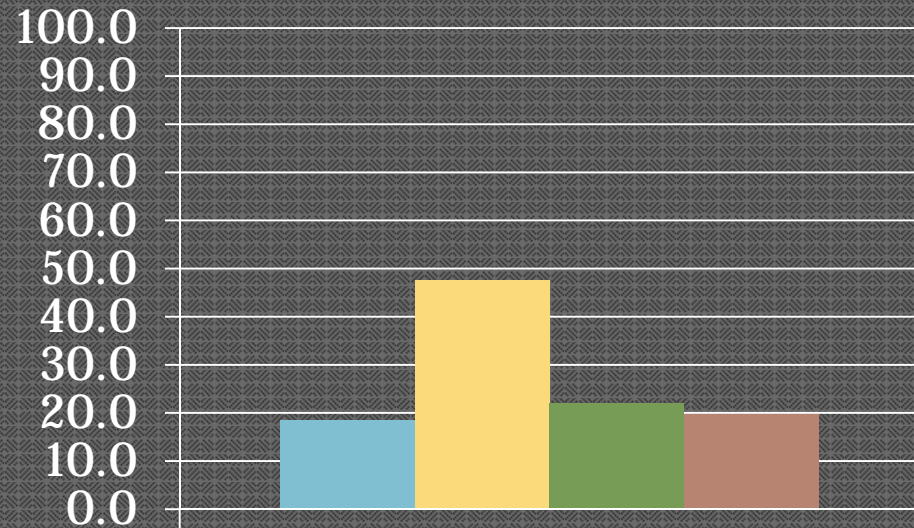


BRFSS 2004-2008



ND adults who reported having smoked at least 100 cigarettes in their lifetime and are currently smoking everyday or some days.

Current Cigarette Smoking



Percent

■ White non-hispanic	18.5
■ American Indian	47.6
■ Other	21.9
■ 5 year total, all races	19.7

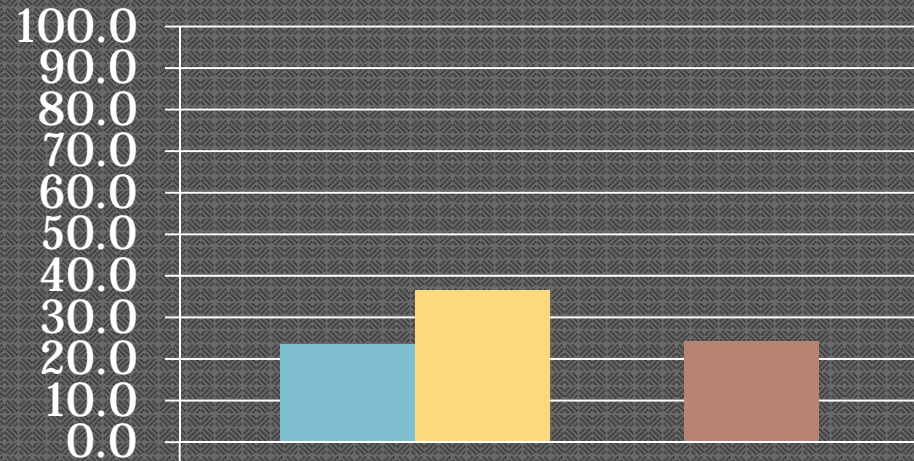


BRFSS 2000, 2002, 2004, 2006 & 2008



ND women aged 40 and older who reported not having a mammogram within the past 2 years.

No Mammogram Within The Past Two Years



■ White non-hispanic	23.6
■ American Indian	36.5
■ Other	^
■ 5 year total, all races	24.2

^=Not available if unweighted sample size for the denominator was < 50 OR the CI half width was >10 for any cell

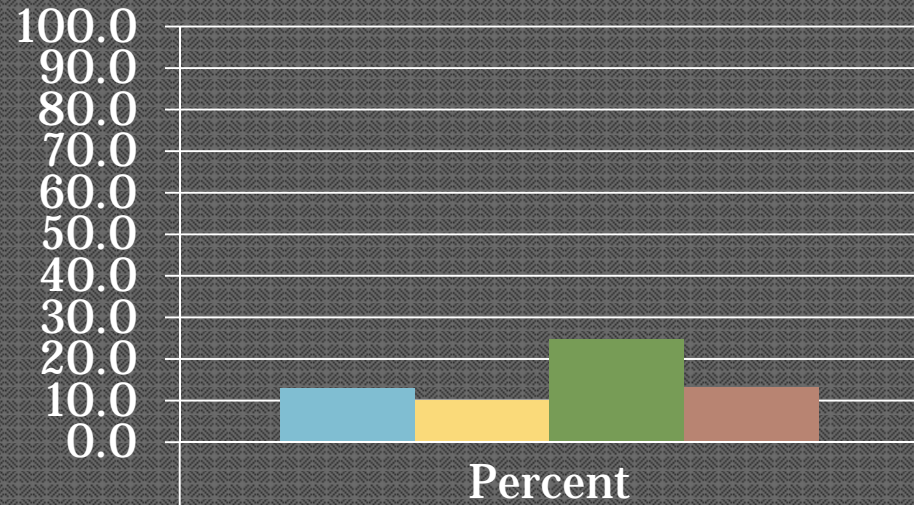


BRFSS 2000, 2002, 2004, 2006 & 2008



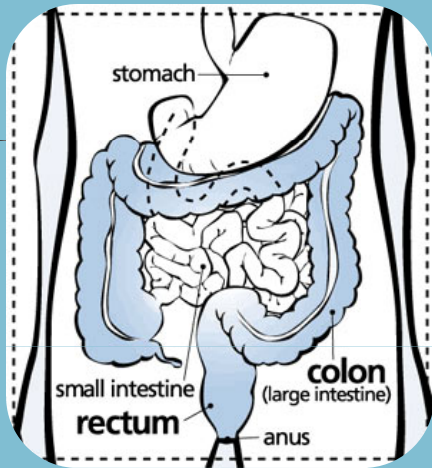
ND women aged 18 and older who reported not having a pap test within the past 3 years.

No Pap Test Within The Past Three Years



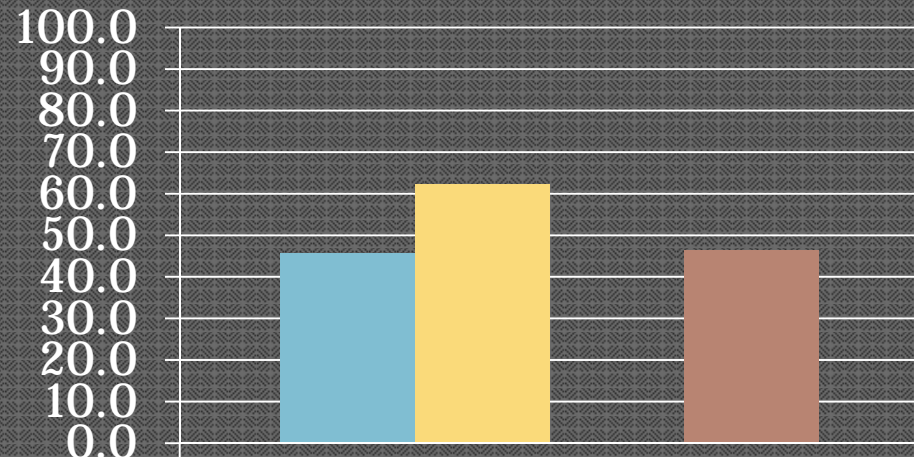
■ White non-hispanic	13.0
■ American Indian	10.0
■ Other	24.8
■ 5 year total, all races	13.1

**BRFSS 2001,
2002, 2004, 2006
& 2008**



ND adults who reported never having had a colonoscopy or sigmoidoscopy.

Never Had A Colonoscopy Or Sigmoidoscopy



	Percent
■ White non-hispanic	45.8
■ American Indian	62.3
■ Other	^
■ 5 year total, all races	46.3

^=Not available if unweighted sample size for the denominator was < 50 OR the CI half width was >10 for any cell

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Cancer Coalition.



North Dakota Cancer Coalition

Planning for a cancer-free future.