

# GUIDED BY DATA, GROUNDED IN CULTURE: Indigenous Cancer Solutions Texas Priorities



Data plays a central role in the Indigenous Cancer Solutions Texas (ICS TX) coalition, where a group of diverse stakeholders work together to reduce cancer burdens among American Indian and Alaska Native (AI/AN) people living in Texas. Accurate data guides action and policy, drives measurable impact, and ensures AI/AN communities are visible, counted, and served.

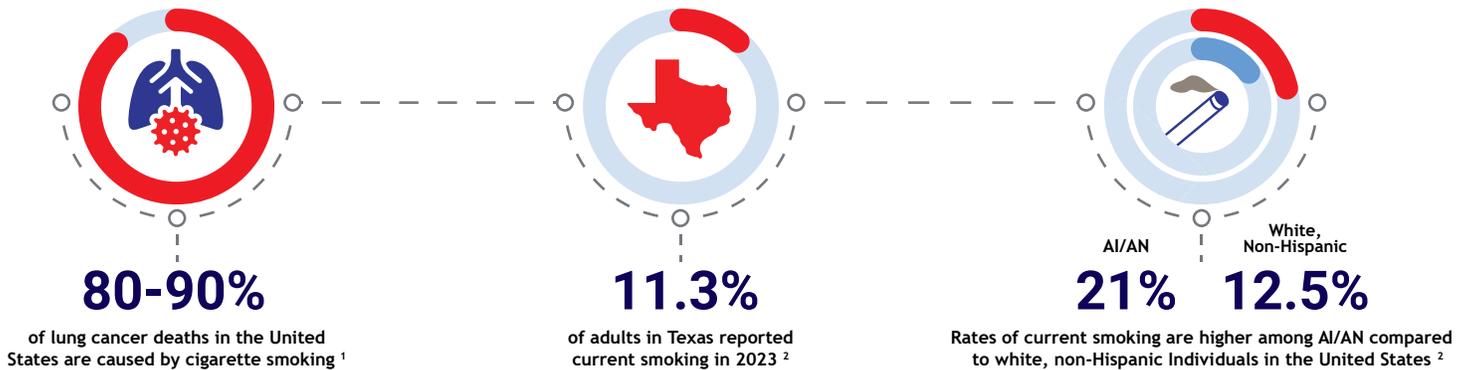
## What We are Working on Together:

ICS TX focuses on three priority areas identified by community, providers, and Native cancer survivors. Data is used to:

- Understand and educate the community about cancer burdens in Texas
- Advance the use of data within health systems
- Identify risk factors and disparities
- Track progress towards achieving coalition goals

## Commercial Tobacco Cessation

ICS TX is developing commercial tobacco cessation policies and creating culturally tailored mass media resources.



## Colorectal Cancer Screening (CRC)

ICS TX is expanding implementation of CRC reminder systems.

Regular screening is the most effective way to detect precancerous growths and early stages of CRC. Cancers found at earlier stages can be treated more easily and lead to greater survival. <sup>4</sup>

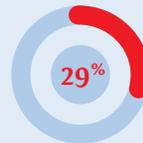
There are 2 main types of colorectal cancer screening tests:



Stool-Based Tests



Visual Exams



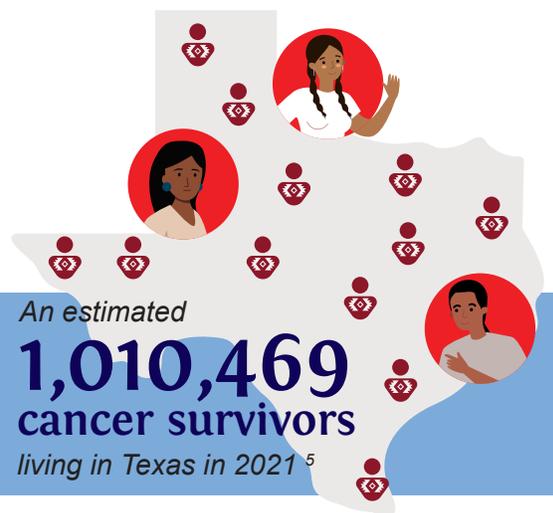
AI/AN adults ages 45-75 that are up-to-date with CRC screening in the Indian Health Service Nashville Area (2024) <sup>3</sup>

## Survivorship

ICS TX is providing a digital survivorship platform and developing a culturally relevant train-the-trainer model for facilitating support circles.

5-year relative survival rates for cancer are lower for AI/AN compared to non-Hispanic white individuals in the United States. <sup>2</sup>

We welcome Tribal Nations, clinics, community organizations, and advocates to join our coalition in this work and in strengthening cancer data surveillance



Sources:  
1. Centers for Disease Control and Prevention. (2024, May 15). People in some geographic regions experience a health burden from commercial tobacco. Tobacco- Health Equity. <https://www.cdc.gov/tobacco-health-equity/collection/regional-health-burden.html>  
2. U.S. Cancer Statistics Working Group. U.S. Cancer Statistics Data Visualizations Tool. U.S. Department of Health and Human Services, Centers for Disease Control and Prevention and National Cancer Institute; <https://www.cdc.gov/cancer/dataviz>, released in June 2025.  
3. FY 2024 GPRA GPRAMA IDCS National Results. (n.d.-b). [https://www.ihs.gov/sites/quality/themes/responsive2017/display\\_objects/documents/FY\\_2023\\_GPRA\\_GPRAMA\\_NationalandAreaResults.pdf](https://www.ihs.gov/sites/quality/themes/responsive2017/display_objects/documents/FY_2023_GPRA_GPRAMA_NationalandAreaResults.pdf)  
4. ACS CAN. (2020, January). Colorectal Cancer and the Importance of Screening. <https://www.fightcancer.org/sites/default/files/FINAL%20-%20CRC%20Screening%20General%20fs%2001.08.20.pdf>  
5. Texas Cancer Registry, Cancer Epidemiology and Surveillance Branch, Texas Department of State Health Services. (2024, July). Living with cancer in Texas. <https://www.dshs.texas.gov/sites/default/files/tcr/Statistics/Living-with-Cancer-DB.pdf>  
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