

Breast & Cervical Cancer Engagement

Quick Facts Snapshot for COLFAX COUNTY

COLFAX COUNTY: Key Points

Very young population; median age 36

- Develop early prevention and maternal health, including OB/GYN access and CHW support.
- Younger populations often prioritize urgent need over preventive care; early screening education is needed.

High birth rate

- Integrate screening education into prenatal and postpartum care settings.
- Pregnancy and postpartum periods are trusted moments to deliver preventive health messages

Racially diverse population

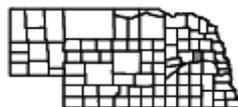
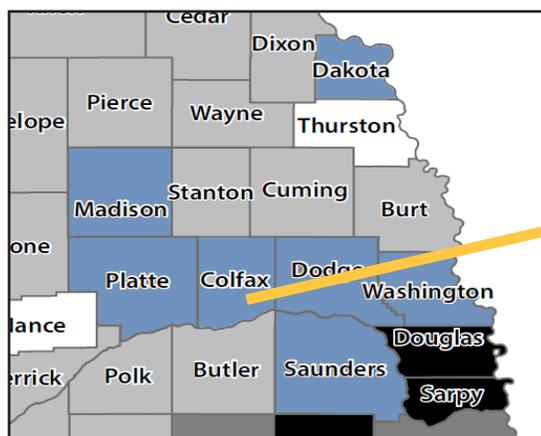
- Develop bilingual and culturally relevant materials and leverage trusted community voices.
- Language and cultural barriers may reduce program awareness or trust.

Low broadband access

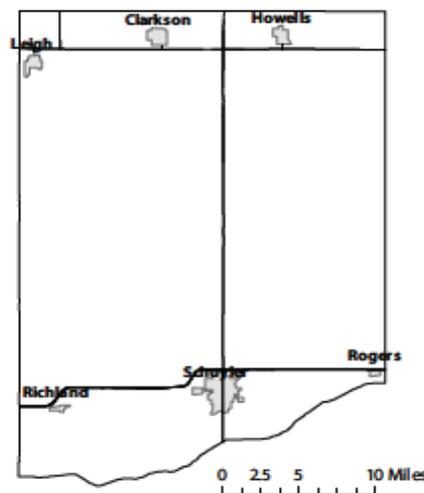
- Use radio, print, and in-person outreach instead of relying solely on digital platforms.
- Many residents may miss digital messages or lack access to patient portals or telehealth.

32% physical inactivity

- Bundle health education with screening outreach.
- Addressing lifestyle risk factors supports long-term wellness and program alignment.



Index Map:
Colfax County



COLFAX COUNTY: Screening Data



COLFAX County	State Rate	National Rate	Goal
Mammography Screening Rates:			
68.2%	67.6%	70.2%	76%
Breast Cancer Mortality Rates:			
<3; suppressed data	19.5%	19.3%	15.3%
Cervical Cancer Screening Rates:			
71.5%	77.7%	77.7%	84%

Number of Participating EWM Clinics: 4



Colfax County Program-Eligible Female Population Distribution for Breast Cancer Screening: 135

Colfax County Program-Eligible Female Population Distribution for Cervical Cancer Screening: 298

Source: <https://statecancerprofiles.cancer.gov> and [Nebraska State Cancer Plan](#)

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Promising Approaches

As part of the internal synthesis process, the NDHHS team reviewed partner-generated input, county-level data insights, and the solutions from the Reverse Brainstorming session on 6/12/25. Through this review, the team identified priority focus areas as being most ready for implementation.

These priority areas were selected based on their alignment with NDHHS's organizational role, capacity, and established/emerging relationships with community-based partners. They also represent strategic opportunities to advance equitable access to breast and cervical cancer screening across the Northeast Region.

Fewer locally specific strategies were identified for Colfax County during this phase of engagement. However, several strategies and opportunities emerged in neighboring counties that may be relevant for this community. Several regional strategies may be adaptable for Colfax County with the right partners and support. We invite local partners to share additional ideas, activities, or resources to expand those strategies in a meaningful way.

Patterns & Opportunities

The above promising approaches were identified as most ready for implementation based on their alignment with DHHS's role, capacity and existing partnerships. In addition to these, additional strategies were identified that reflect meaningful opportunities but were not prioritized at this time.

These strategies may require additional research, broader collaboration or future investment to move forward. They represent important insights from partners and have potential for shared, cross-county solutions in the future.

NDHHS acknowledges them as valuable areas to revisit and will consider opportunities for further exploration as resources and partnerships evolve. Below are the high-level additional strategies:

1. Improve workplace culture to promote wellness

Data Limitations & Next Steps

Due to limited available data, this summary may not reflect all local efforts or needs. NDHHS is committed to working with community partners to improve data collection for developing strategies.