

# Breast & Cervical Cancer Engagement

## Quick Facts Snapshot for DAKOTA COUNTY

### DAKOTA COUNTY: Key Points

#### Only one participating clinic

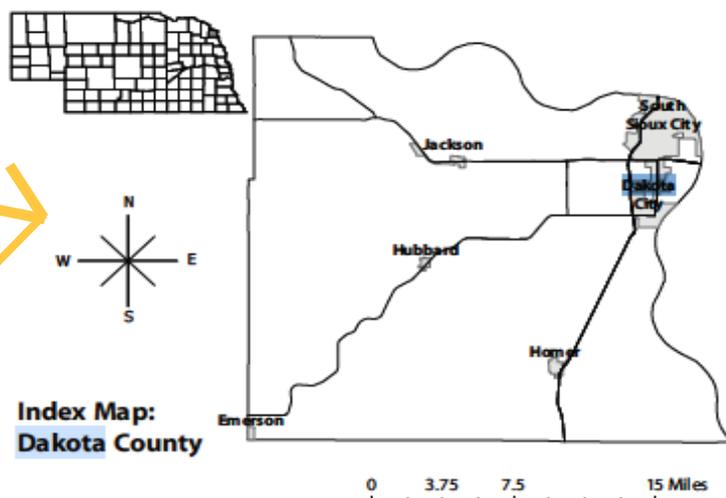
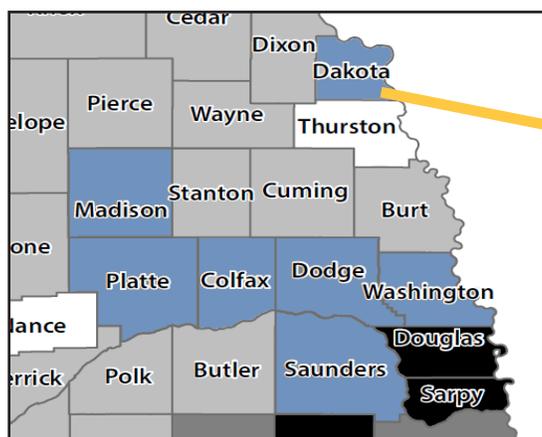
- Increase access by recruiting more clinics or deploying mobile screening units. Partner with nearby counties, especially along the border.
- Limited access points reduce screening rates and increase travel burdens, especially for rural or underserved women.

#### Half the population appears to be non-white

- Tailor education and outreach campaigns to reflect the county's racial and ethnic diversity.
- Culturally relevant messaging and trusted messengers improve engagement and trust. Use culturally relevant language, imagery, and values.

#### 56% mammography screening rate

- Strengthen outreach and navigation services to improve awareness and uptake.
- Low rates suggest barriers related to knowledge, transportation, or scheduling flexibility. Trust and awareness gaps can be mitigated by messengers from the community.



### DAKOTA COUNTY: Screening Data



DAKOTA County	State Rate	National Rate	Goal
<b>Mammography Screening Rates:</b>			
56.6%	67.6%	70.2%	76%
<b>Breast Cancer Mortality Rates:</b>			
34.1%	19.5%	19.3%	15.3%
<b>Cervical Cancer Screening Rates:</b>			
69%	77.7%	77.7%	84%

Number of Participating EWM Clinics: 1



Dakota County Program-Eligible Female Population Distribution for Breast Cancer Screening: 242

Dakota County Program-Eligible Female Population Distribution for Cervical Cancer Screening: 577

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.

Below are the identified strategies/approaches. Promising approaches to improve screening access and outcomes include:

1. Elevating positive outcomes through trusted community storytelling
2. Reducing structural barriers to care delivery
3. Reengaging providers and assessing opportunities for local screening
4. Increase awareness of personal risk and options for breast screening choices/options.

## 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.