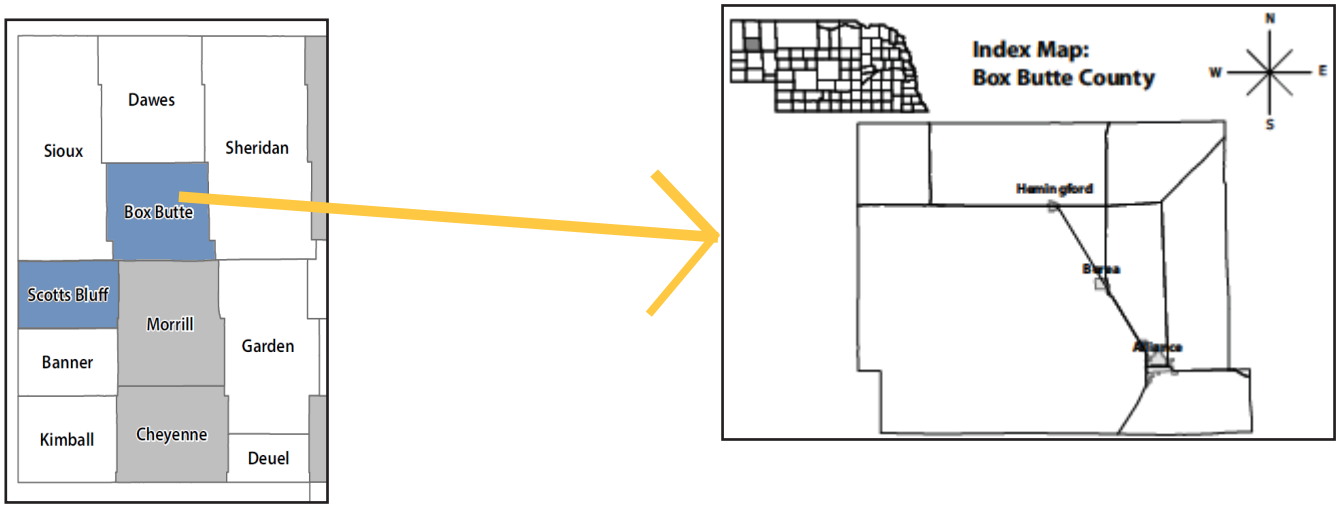
Breast & Cervical Cancer Engagement

Quick Facts Snapshot for BOX BUTTE COUNTY

BOX BUTTE COUNTY: Key Points

Box Butte County breast and cervical cancer screening rate is lower than state and national rates.

- Structural Barrier Reduction efforts around transportation
- Understanding importance of preventive screening, having a primary care provider and insurance coverage
- Gap in population not utilizing benefits as they have a high deductible insurance plans due to being self-employed/farmers/ranchers
- Better understanding of program coverage or the processes
- Structural barriers around timely access for appointments and screening services, mobile mammography options, etc. (non-traditional pathways)



BOX BUTTE COUNTY: Screening

BOX BUTTE County	State Rate	National Rate	Goal
Mammography Screening Rates:			
59.6%	67.6%	70.2%	76%
Breast Cancer Mortality Rates:			
39.5%	19.5%	19.3%	15.3%
Cervical Cancer Screening Rates:			
64.4%	77.7%	77.7%	84%

Number of Participating EWM Clinics: 2

Box Butte County Program-Eligible Female Population Distribution for Breast Cancer Screening: 104

Box Butte County Program-Eligible Female Population Distribution for Cervical Cancer Screening: 234

Source: https://statecancerprofiles.cancer.gov and Nebraska State Cancer Plan

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Promising Strategies

As a part of the internal synthesis process, the NDHHS team reviewed partner-generated input, county-level data insights and the recommendations from the brainstorming session on 10/22/25. Through this review, the team identified priority focus areas.

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 Box Butte County.

We invite local partners to share additional ideas, activities, or resources to expand these strategies in a meaningful way.

1. Elevating positive outcomes through trusted community storytelling

- Messaging about screening and catching concerns early, using trusted messengers in targeted communities (Hispanic, Native American, Agriculture)
- Awareness campaigns in various months
- Share real patient stores
- Birthday emails/messaging to clients
- Utilize trusted doctors, who may not specialize in breast and cervical cancer care, but have the ear of the community

2. Reducing structural barriers to care delivery

- Transportation / portable van that goes to you for free
- using trusted local messengers in community that are population specific, personal stories
- Clear messaging about screening recommendations

3. Reengage provider and assessing opportunities for local screening

- Build trust with providers and facilities
- Provider site visits; offer training, drop off materials
- Offer annual training summit about preventive care and include real time data on provider progress
- Work with providers to promote screenings and other prevention during sick visits
- Ongoing communication
- Review recall reminders with providers
- Review data on screening rates and mortality
- Send materials to provider to engage
- Educate providers on screening guidelines
- Assist with developing client reminders that providers can send to clients
- Provider incentives for enrolling/recruiting
- Provider surveys around engagement

4. Increasing awareness of personal risk and best options for screening

- Media and social media campaign on importance of regular screening (include google ads)
- Panhandle Women's Health Initiatives (conference, webinars)
- Nebraska Extension Women in Ag Program (conference, email, newsletter, webinar)
- Educate on EWM program guidelines, coverage, services
- Social media, television ads, billboards

5. Empowering communities to make informed health choices

- Transparency about co-pays/coverage/high deductibles
- Awareness information about EWM screening and other resources available
- Education on hereditary risks
- Education on self-exams

6. Family-focused, community-based events; other non-traditional partnerships

- Information placed at food and clothing distribution sites
- Partner with Indian Health Services
- Partner with faith based community centers / ministerial alliance

7. Improve workplace culture to promote wellness

- Worksite strategies to promote screening and access
- Worksite wellness communications and strategies
- Paid time off to get screening - ability to use sick time for screening
- Job incentives for getting screened
- Educational messaging through employers and worksites

Data Limitations & Next Steps

This summary may not reflect all local efforts or needs. NDHHS is committed to working with community partners to improve strategies. Next key steps identified include:

- Continued partner and provider engagement and collaboration efforts.
- Assess where existing providers are - are there missing sites and locations where access is an issue
- Research potential for mobile mammography opportunities in order to create access to resources
- Education around utilization of self-collected HPV screening options (billing, processes, workflow, etc.)
- Assess Box Butte and Scotts Bluff County transportation resources and availability.

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Women's & Men's Health Programs
BREAST. CERVICAL. COLON. HEART. SCREENING
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