

UC San Diego  
Moore's Cancer Center

# Comprehensive Cancer Centers and American Indian Health

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UC San Diego Moore's Cancer Center

# AGENDA

- Comprehensive Cancer Centers
- Mapping Potential Reach Between Cancer Centers & California's Native Communities
- Spotlight on COE at Moores Cancer Center at UC San Diego Health



# Comprehensive Cancer Centers


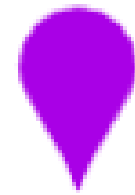
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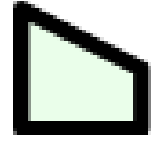
- **Comprehensive Cancer Centers** are effective in serving their catchment area, as well as the broader population, through the cancer research they support and the cancer control activities they undertake.
- **Cancer centers** are expected to perform research of relevance to their catchment area and engage the populations within their catchment area in the research they conduct
- **Community Outreach and Engagement (COE)** is expected to communicate community needs to Center members and catalyze research in the basic, clinical, translational, and population sciences

# SERVING CALIFORNIA

**Cancer Center Locations**

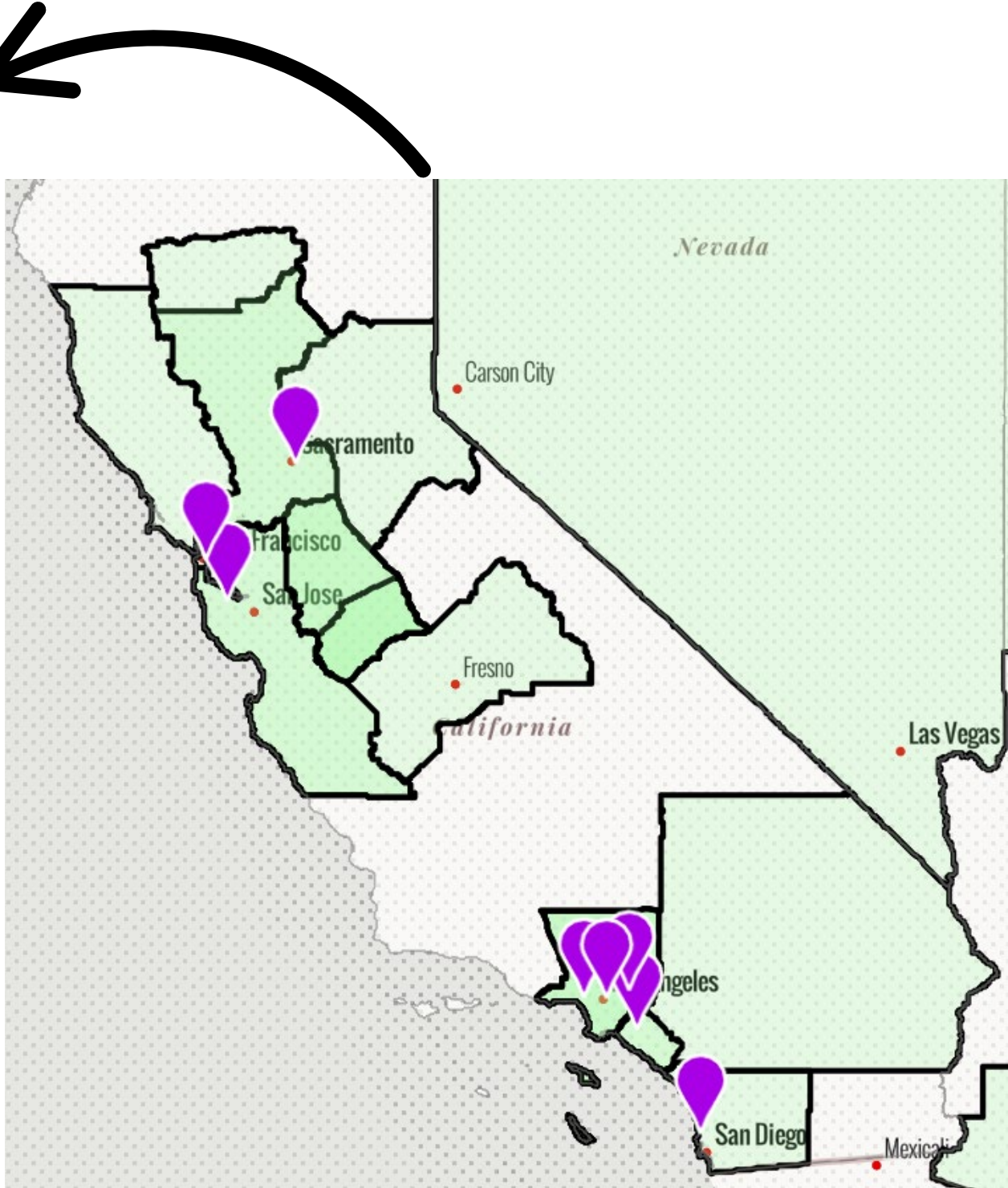
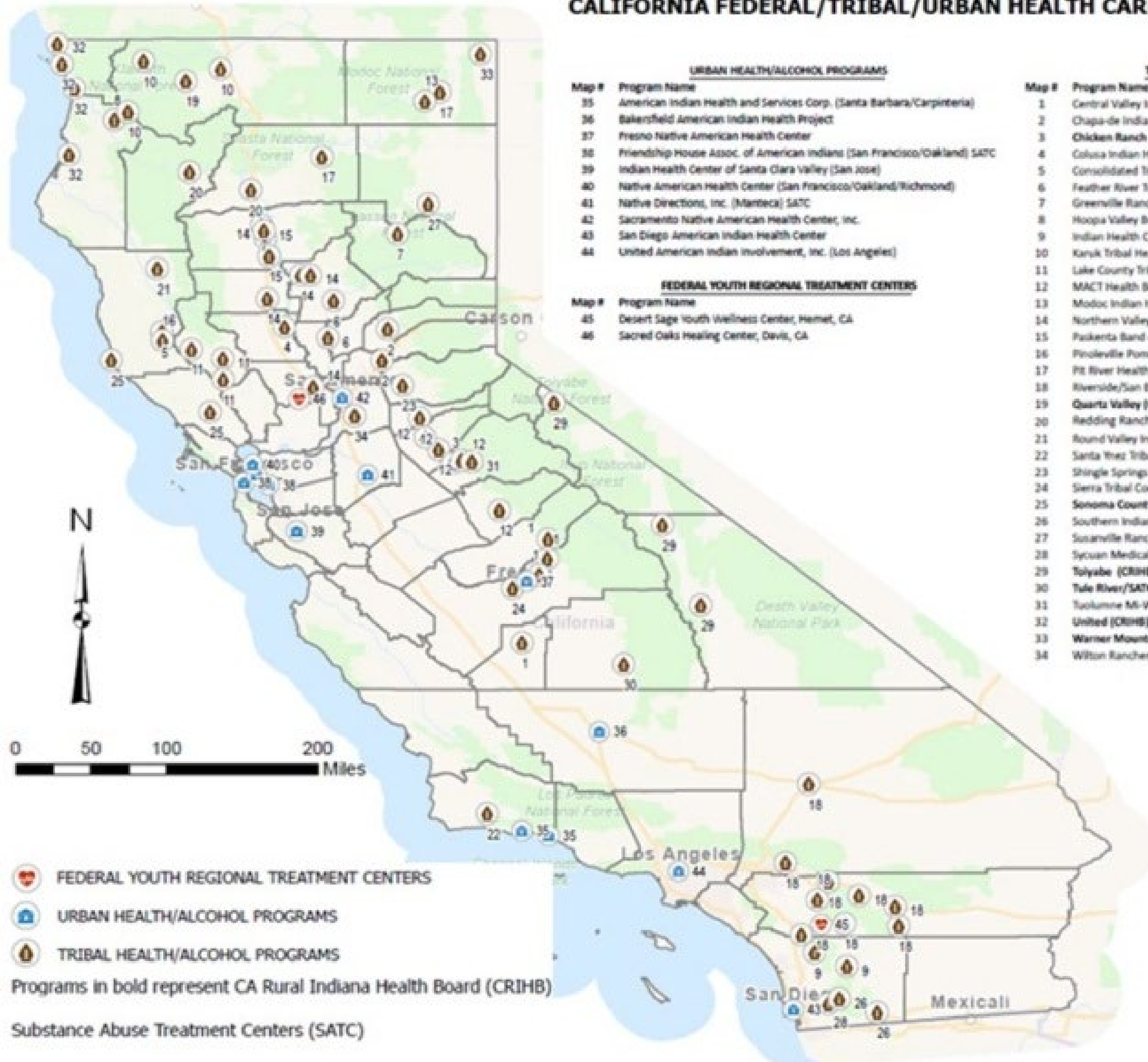
-  Cancer Center
-  Comprehensive Cancer Center

**Catchment Area Boundary**



# NEED: IMPROVE REACH TO NATIVE CO

## CALIFORNIA FEDERAL/TRIBAL/URBAN HEALTH CARE FACILITIES

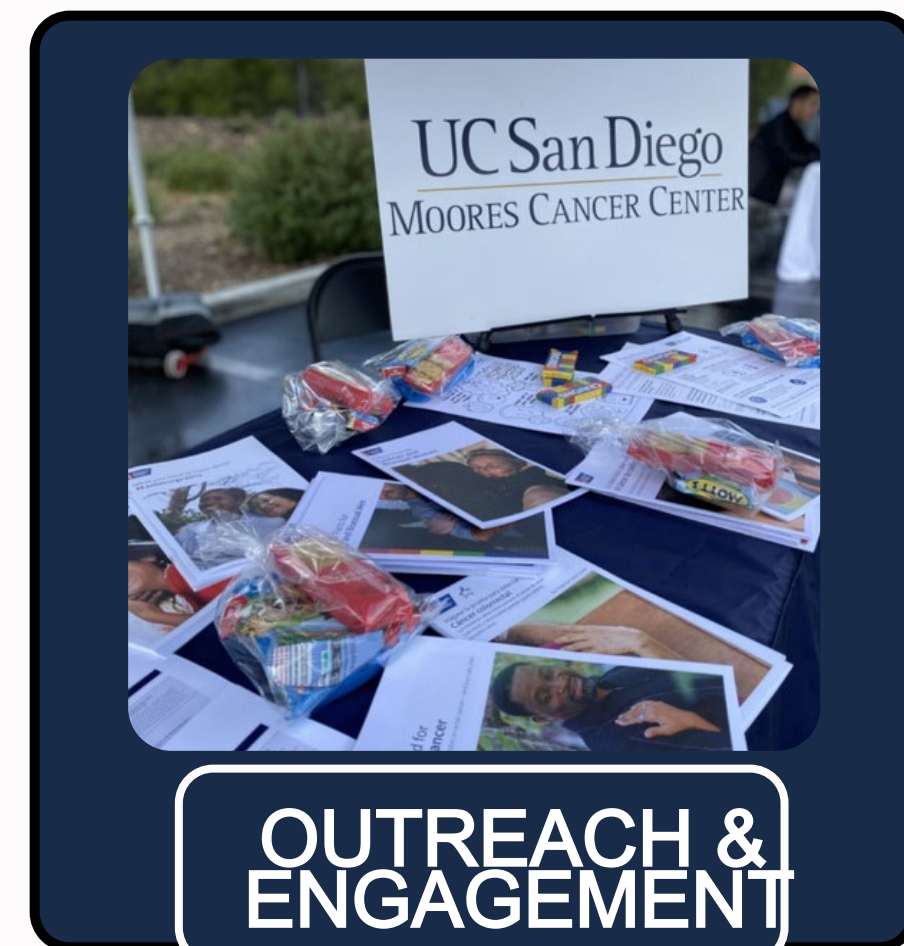


Updated May 2022

# MOORES CANCER CENTER

One of the 57 National Cancer Institute (NCI) Designated Comprehensive Cancer Centers in the United States, and the only one in the San Diego region.

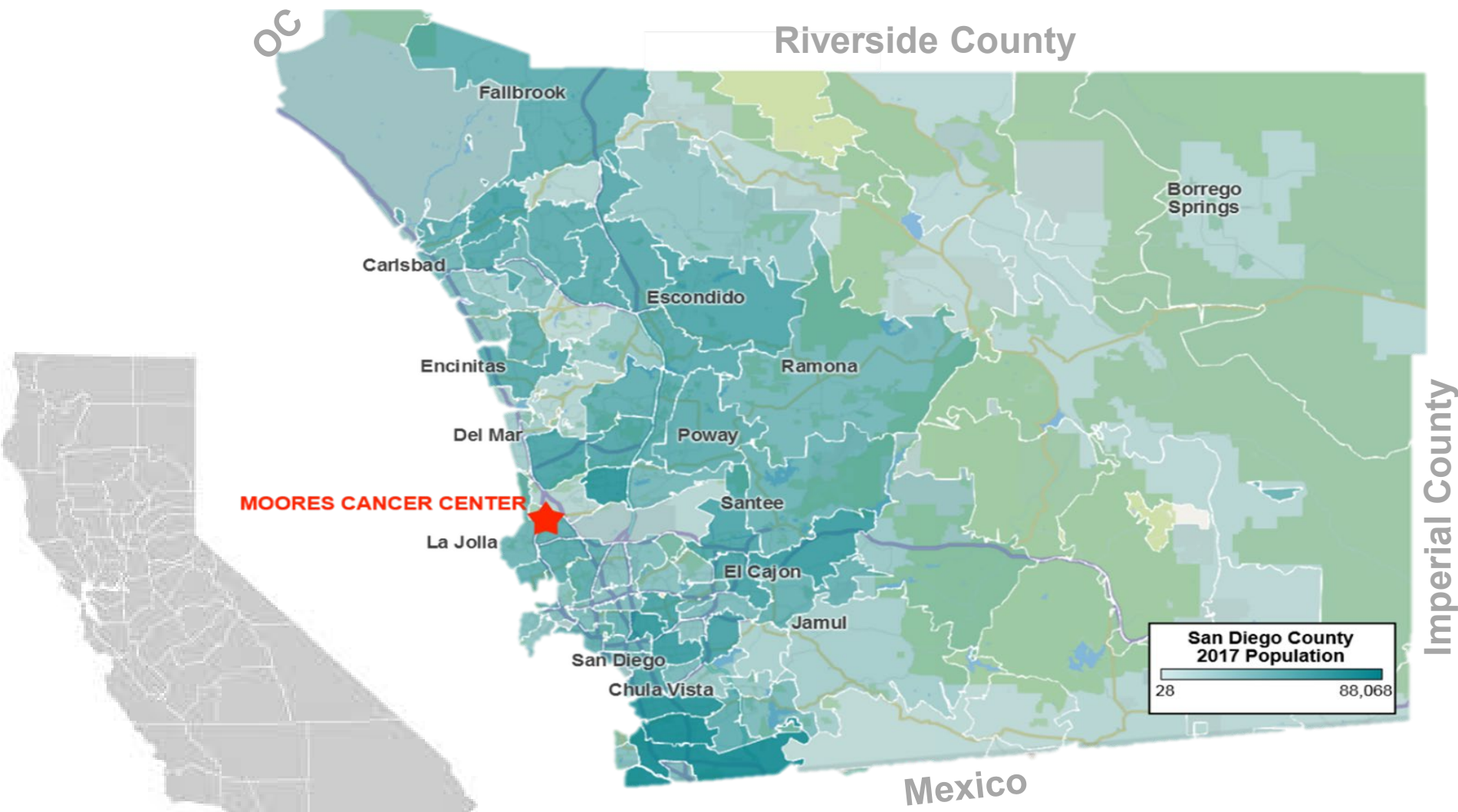
*Our mission is to save lives by transforming cancer prevention, detection, and care.*



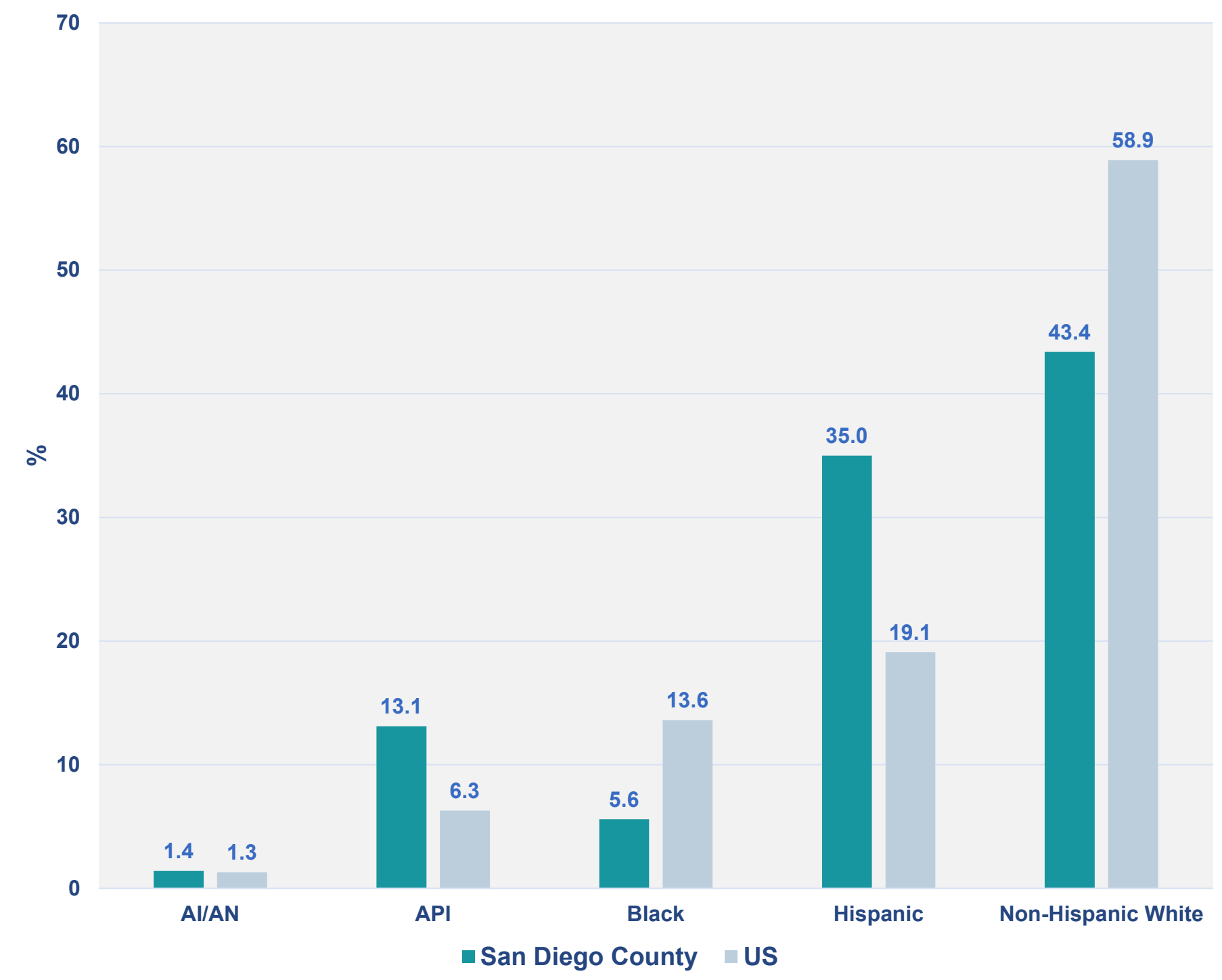
# San Diego County Catchment Area

**San Diego County**  
80% of MCC Patients are from Catchment Area

**Race/Ethnicity of County and US Residents**  
SD County is Majority-Minority Region



- 4,206 Square Miles
- 3.3 Million Residents
- 5<sup>th</sup> Most Populous US County





# COE MISSION

To address cancer disparities and inequities in San Diego County by establishing sustained community partnerships to identify and disseminate evidence-based, cancer-related information and resources across the cancer continuum.

# COE AIMS



- 1 Assess and monitor the cancer burden in San Diego County
- 2 Address cancer disparities along the cancer continuum through research and community engagement
- 3 Disseminate evidence-based practices and resources among communities and providers
- 4 Engage with regional, national, and global partners to impact policies

# Community Guided Action



# Bidirectional Engagement: CAB and MCC Leadership

## MOORES CANCER CENTER COMMUNITY ADVISORY BOARD



Cynthia Knapp, MPH  
CHEC Community Co-Chair  
SAY San Diego



Ivette Lorona  
Office of Binational Border  
Health



Patrick Casebolt, MPH  
American Cancer Society



Dhalia Balmir, MPA  
Survivor Advocate



Leticia Cazares, MPH  
Survivor Advocate



Nicole Howard, MPH  
Health Quality Partners



Daniel 'Stony' Anderson, MD  
CA CRC Coalition (C4)



Angelle Maua  
Gender Phluid Collective



Karla Tickes, MPH  
Every Woman Counts



Joslyn Paguio  
Patient Advocate,  
Cervivor



Kevin LaChapelle,  
EdD, MPA  
San Diego American  
Indian Health Center



David Hunt  
San Diego Fire  
Department



Wendy Shurelds  
Many Shades of  
Pink

## CAB Engagement

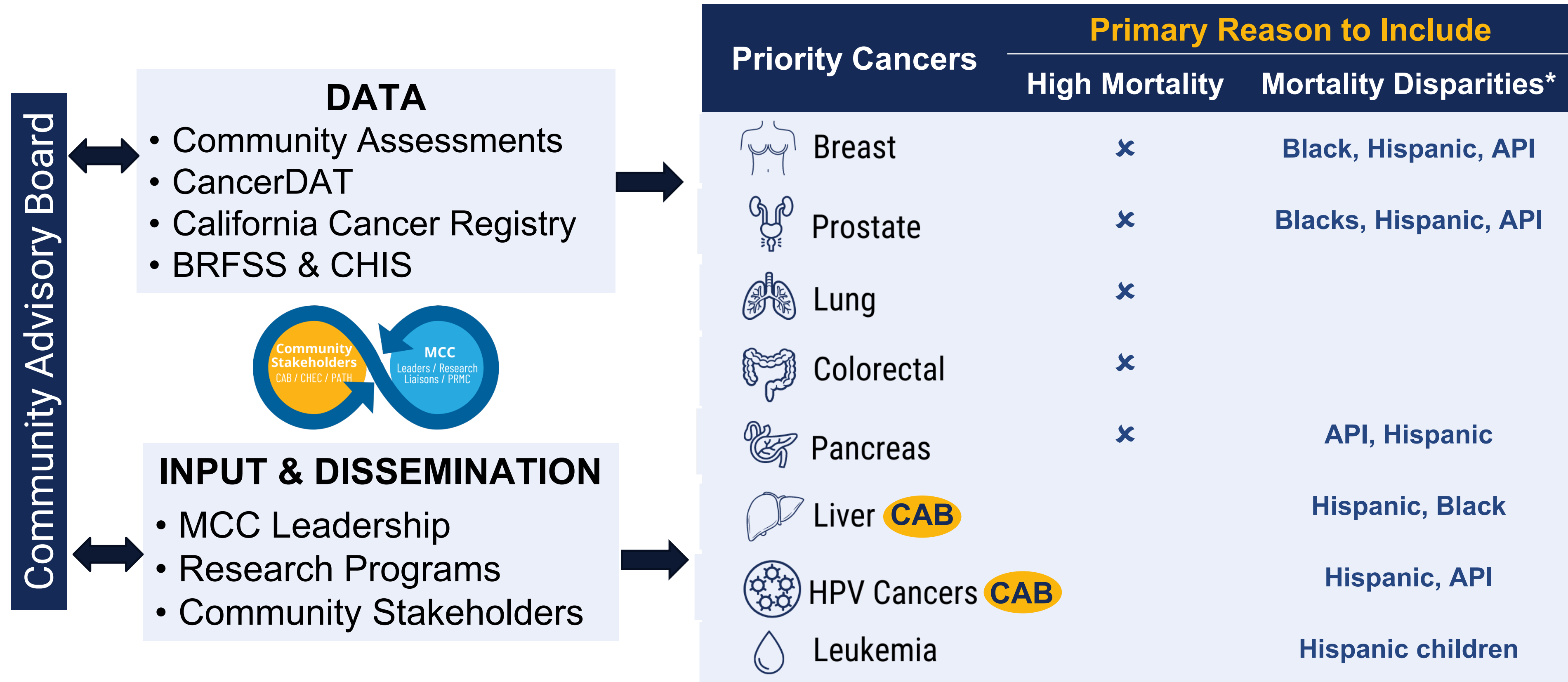
- Quarterly meetings
- Advise on MCC research priorities
- Review pilot project proposals
- Serve on Protocol Review and Monitoring Committee



## Impact

- Championed priority cancers: HPV-associated, Liver
- Advised and facilitated LGBTQIA+ partnerships, NA
- COE founding partner in Western Regional Colorectal Cancer Consortium Conference

# Determining Catchment Area Priority Cancers



\*Higher mortality rates in SD County vs. U.S.

# CANCER DISPARITIES IN AI/AN COMMUNITIES



**AMERICAN INDIANS AND ALASKA NATIVES IN SAN DIEGO COUNTY**  
**COMMUNITY SNAPSHOT**  
COMMUNITY OUTREACH & ENGAGEMENT  
MOORES CANCER CENTER AT UC SAN DIEGO HEALTH

**POPULATION**

In 2022, San Diego County had a total population of nearly 3.3 million, with Non-Hispanic (NH) American Indian and Alaska Native (AIAN) individuals making up 0.3% of the county's total population. The north inland region has the largest NH AIAN presence at 0.6% (Anza-Borrego Springs, Escondido, Fallbrook, North San Diego, Palomar-Julian, Pauma, Poway, Ramona, San Marcos, and Valley Center) [1].

**POVERTY & UNEMPLOYMENT**

Out of the total AIAN population in San Diego County, 13.5% have incomes that fall below the federal poverty threshold [4]. The unemployment rate for the AIAN population aged 16 years and over in San Diego County was 3.3% [5].

**OCCUPATION**

Employed AIAN individuals show a higher percentage of workers in younger age groups compared to the total United States (US) population. According to the averages for the years 2019-2021, AIANs have a higher percentage of workers employed in service occupations (22.6% vs. 16.5% for the total US population) and in natural resources, construction, and maintenance occupations (13.3% vs. 8.9%). In contrast, the total US population has a greater representation in management, professional, and related occupations (42.1% vs 30.5% for AIANs) [8].

**INCOME**

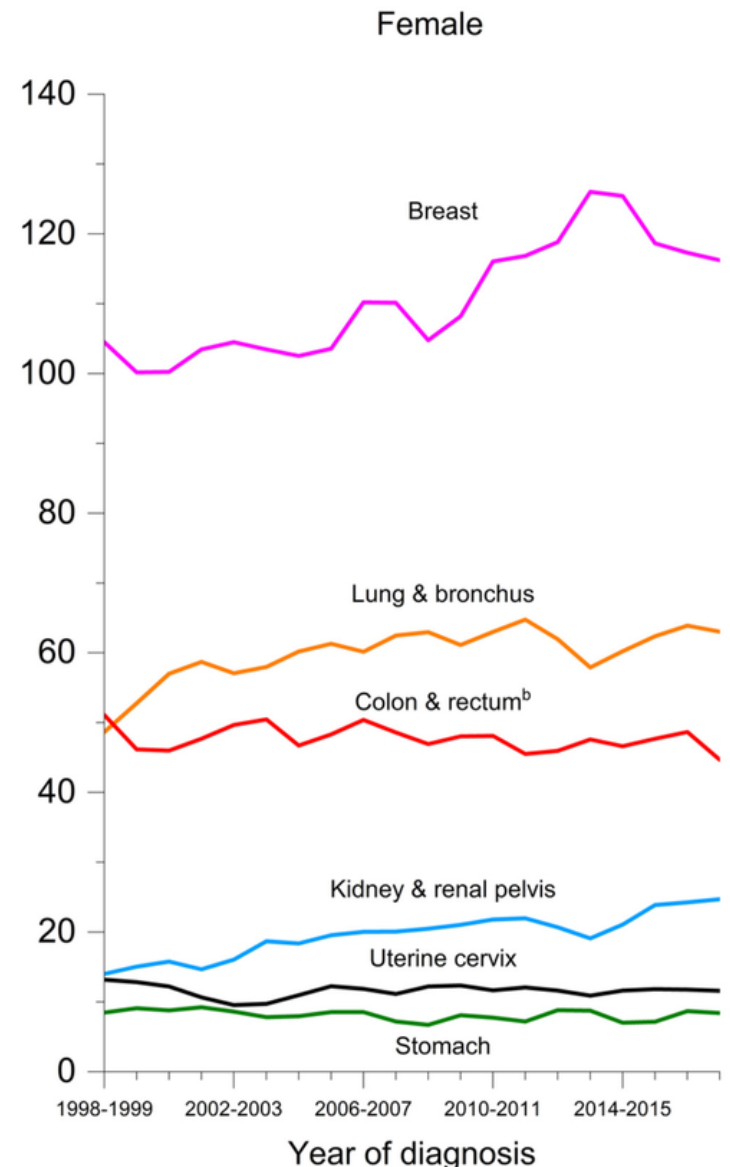
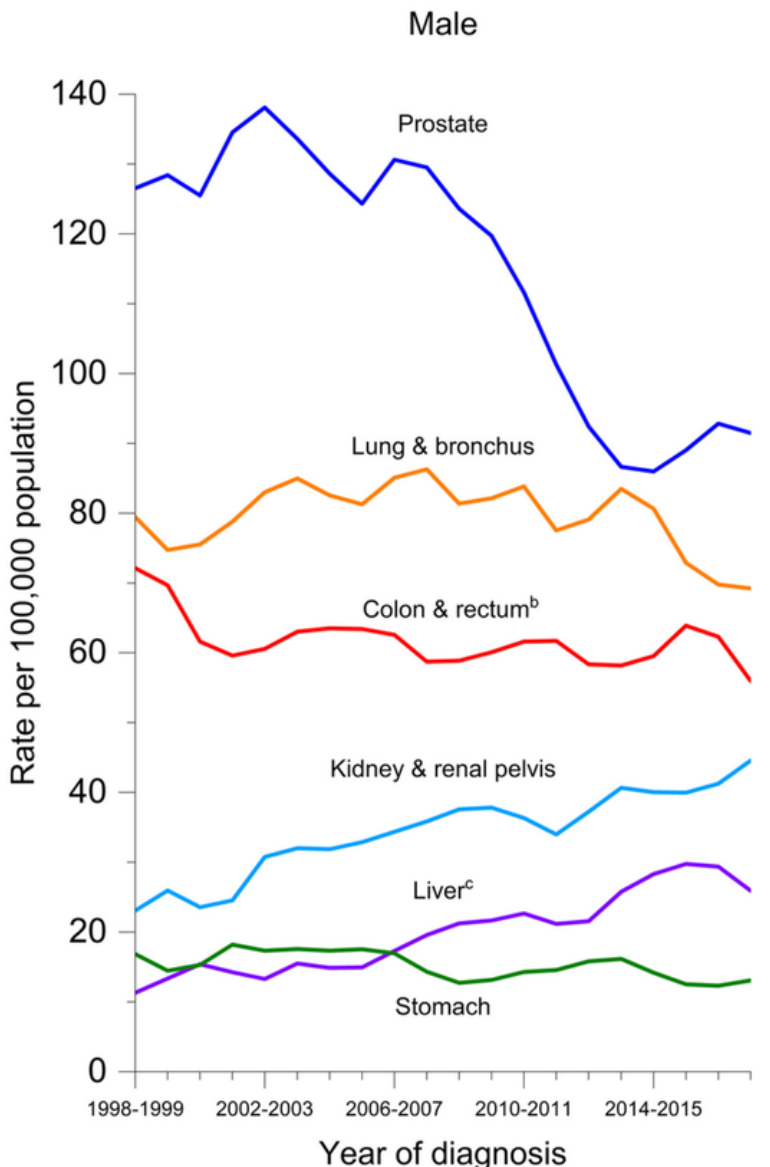
Per capita income among AIAN individuals was \$31,528, which is lower than the county's average of \$48,258 [2]. Between 2015 and 2019 the median household income for AIAN individuals living in San Diego County was \$56,682, also much lower than the median household income for all of San Diego County \$78,980 [3].

**HEALTH INSURANCE**

In 2023, 87.1% of AIAN individuals in San Diego County were insured, while 12.9% remained uninsured. This demographic has the highest uninsured rates in the county [6]. Comparatively, the national uninsured rate for AIAN individuals stood at 18.3% [7].

**EDUCATION**

In 2022, AIAN individuals in San Diego County showed higher educational attainment compared to national averages. In the county, 80.8% of AIAN individuals had at least a high school diploma, while 21.2% held a bachelor's degree or higher. In the US, 78% of the AIAN population had a high school diploma or higher and 16.8% held a bachelor's degree [9].



- Cancer incidence among AIANs is higher than among Whites for lung, colorectal, and kidney cancers, as well as cancers associated with infectious agents (liver, stomach and cervix)
- Cancer is generally diagnosed at a later stage in AIANs than in Whites
- 5-year relative survival rates are lower among AIANs than Whites for most cancer types

*We use national, state and local data to produce tools/resources and guide partnership outreach.*

Trends in age-adjusted cancer incidence rates by sex and site, American Indian and Alaska Native individuals, PRCDA counties, 98-2018. \*Age-adjusted to the 2000 US standard population, adjusted for misclassification on medical records and delays in case reporting, and excluding persons of Hispanic ethnicity. Rates are 2-year moving averages because of sparse data. Excludes appendix. Includes intrahepatic bile duct. PRCDA indicates Purchased/Referred Care Delivery Area counties. Source: North American Association of Central Cancer Registries, 2021. CA: A Cancer Journal for Clinicians, First published: 08 November 2022. DOI: <https://doi.org/10.3322/caac.21757>

American Cancer Society. Cancer Facts & Figures 2022, Special Section: Cancer in the American Indian and Alaska Native Population. [American Cancer Society](https://www.aacr.org/).

*“Many of these disparities could be reduced by increasing access to high-quality cancer prevention, early detection, and treatment.”*

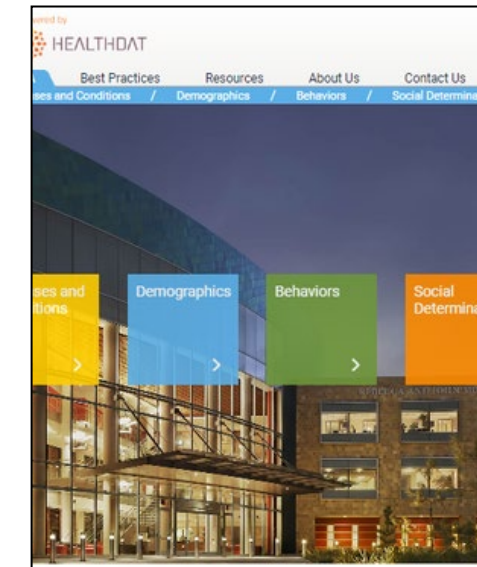
# COE INITIATIVES



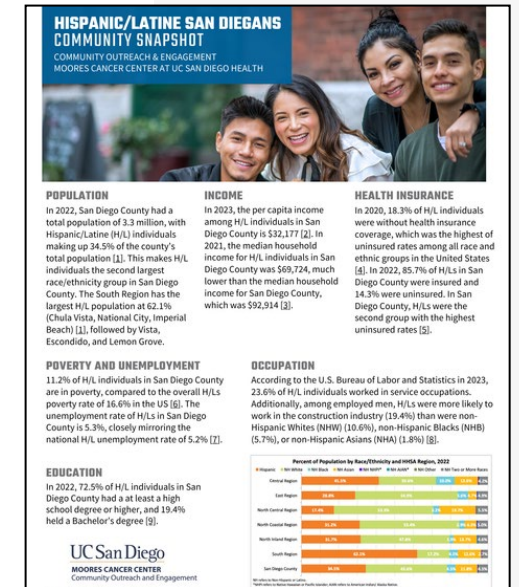
CHEC (Cancer Health Equity Collaborative)



SD PATH (HPV Workgroup)



Population Health Needs Assessments and Data Tools



Quality Improvement/Learning Roundtables, Summits & Webinars  
Colorectal, Cervical, Liver, Prostate, Lung | Population



Internal Collaboration at MCC  
Researcher and Clinician-Focused



Health Events/Cancer 101s  
Health Promotion Tabling, Outreach and Tailored Education

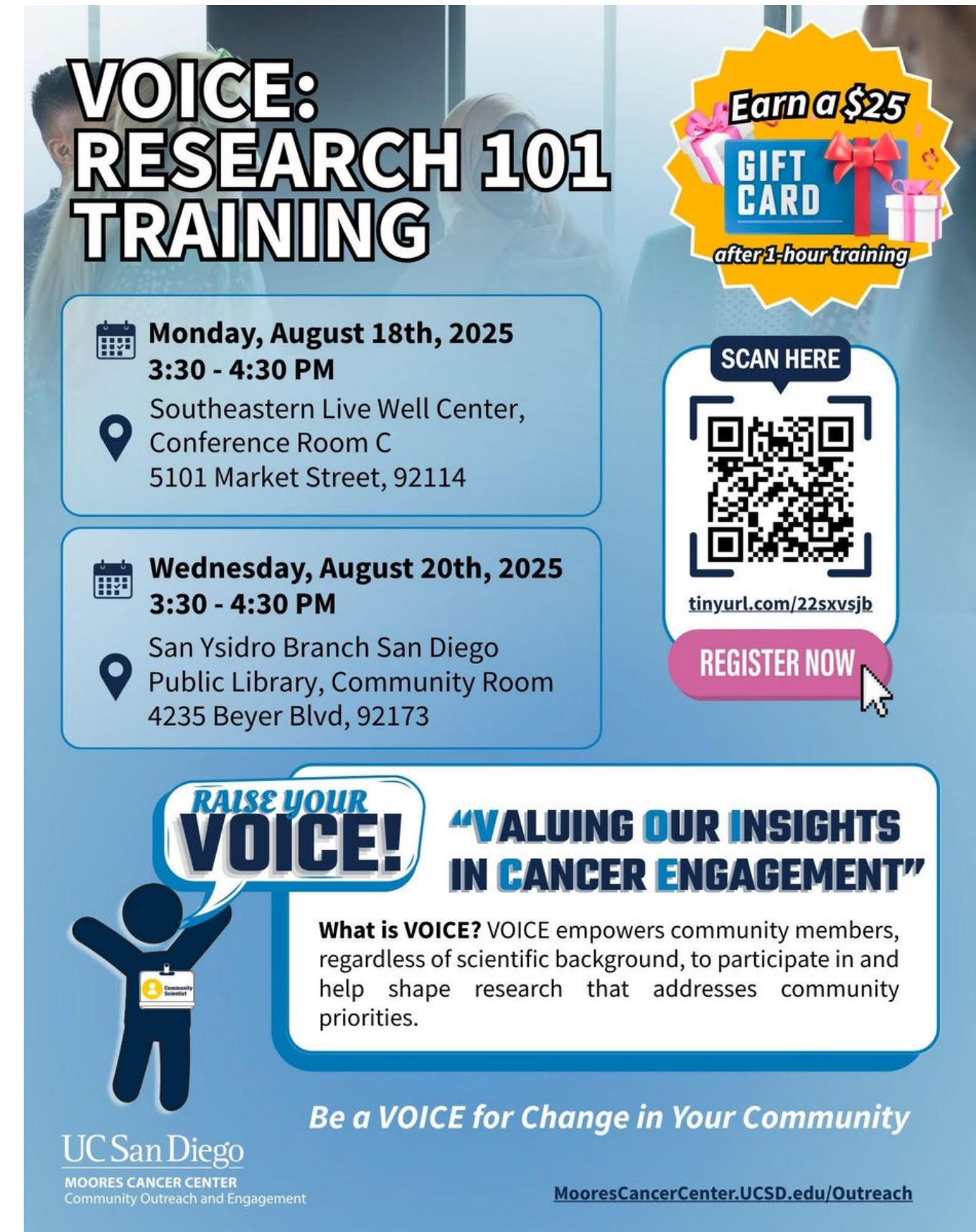
# VALUING OUR INSIGHTS IN CANCER ENGAGEMENT (VOICE)

A new Community Scientist Program that empowers community members and researchers to engage with each other through capacity building. This program creates a platform for lived experiences to guide cancer research efforts.

- Research helps us improve health by understanding how diseases impact people, and what approaches (from treatment to policy) are needed for everyone's well-being.
- Historically, non-white communities have not only been underrepresented in research, but in some cases have been harmed by unethical research.
- As a comprehensive cancer center, we advocate for including diverse community voices to advance cancer care for all

## Your Voice, Your Impact

*Representation in Research Matters*



**VOICE:  
RESEARCH 101  
TRAINING**

**Earn a \$25  
GIFT CARD  
after 1-hour training**

**Monday, August 18th, 2025  
3:30 - 4:30 PM**  
Southeastern Live Well Center,  
Conference Room C  
5101 Market Street, 92114

**Wednesday, August 20th, 2025  
3:30 - 4:30 PM**  
San Ysidro Branch San Diego  
Public Library, Community Room  
4235 Beyer Blvd, 92173

**SCAN HERE**

[tinyurl.com/22sxvsjib](https://tinyurl.com/22sxvsjib)

**REGISTER NOW**

**RAISE YOUR  
VOICE!**

**“VALUING OUR INSIGHTS  
IN CANCER ENGAGEMENT”**

**What is VOICE?** VOICE empowers community members, regardless of scientific background, to participate in and help shape research that addresses community priorities.

*Be a VOICE for Change in Your Community*

UC San Diego  
MOORES CANCER CENTER  
Community Outreach and Engagement

[MooresCancerCenter.UCSD.edu/Outreach](https://MooresCancerCenter.UCSD.edu/Outreach)

# LET'S DISCUSS!



HOW DO WE LEVERAGE COE TEAMS AND  
IMPROVE CANCER OUTCOMES IN NATIVE

UC San Diego

**MOORES CANCER CENTER**

Community Outreach and Engagement