



World Café Discussion: Data Review & Cancer Plan 2026-2030

Laura Gudgeon, Shannon Park & Megan Myers

World Café Discussion

A conversational approach to brainstorming and strategic planning

- Conversations as a catalyst
 - Cross-pollination of ideas
 - Collective intelligence
 - Host vs. expert dynamic
-





World Café Discussion: Data Review

Laura Gudgeon, MS





South Dakota Cancer Plan

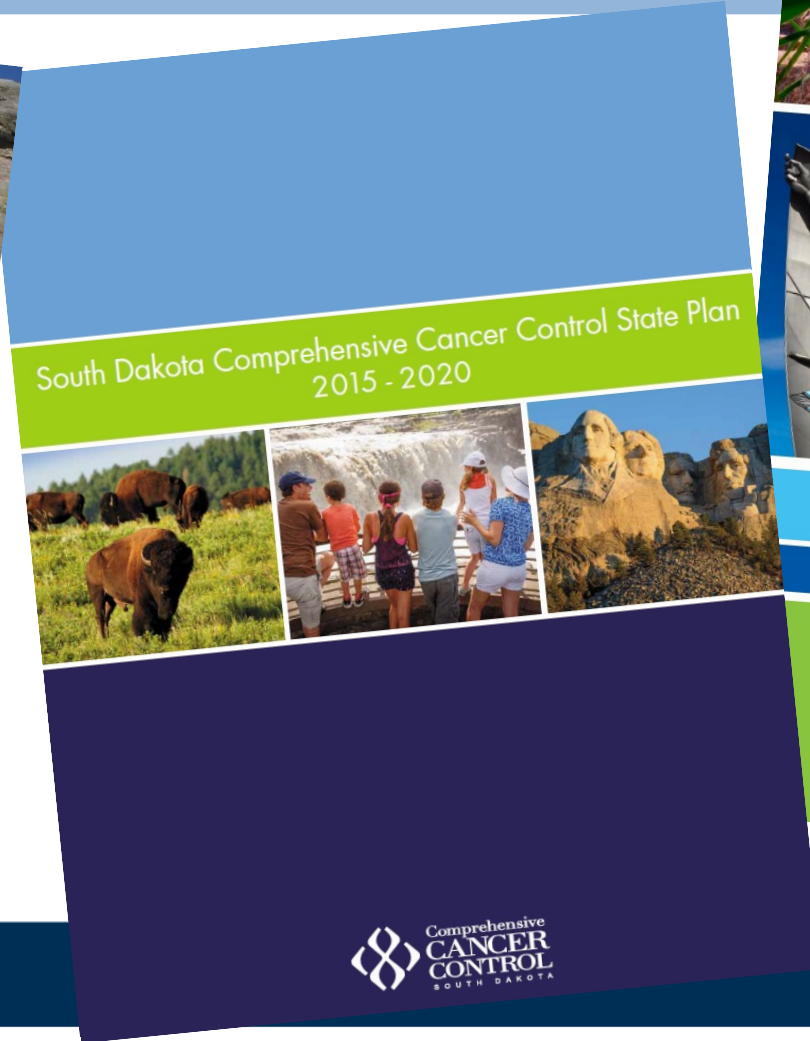
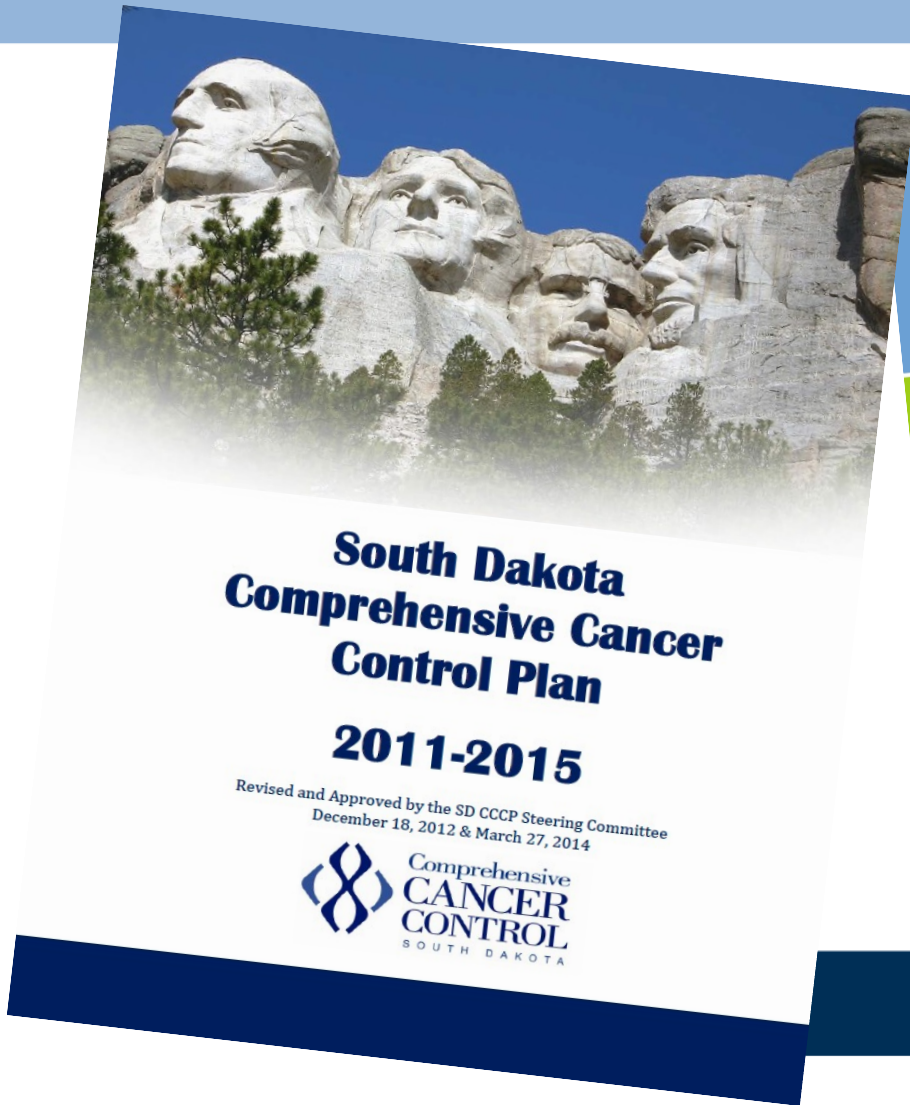
Looking Back on Key Data Progress

Fall Meeting

October 30, 2025



SD Cancer Plan: 2011 – 2025



SD Cancer Plan: 2026 – 2030



SOUTH DAKOTA CANCER PLAN

2026–2030

VISION

Every South Dakotan free from the burden of cancer.

MISSION

Working together to reduce cancer incidence and mortality while improving quality of life for cancer survivors.

01

Prevent cancer among South Dakotans

02

Detect cancer in the earliest stages for all South Dakotans

03

Promote fair access to healthcare as it relates to cancer control in South Dakota

04

Optimize quality of life for South Dakota cancer patients, survivors, and caregivers

05

Ensure timely and appropriate access and treatment for all cancer patients in South Dakota

06

Support collaboration among stakeholders in South Dakota to reduce duplication and maximize impact

PRIORITY POPULATIONS

- American Indians
- Low Socioeconomic Status Populations
- Rural and Frontier Populations
- Uninsured/Underinsured Populations



Cancer Early Detection & Survival



Priority 6

- Prostate Cancer Screening and Rates

Priority 7

- Cervical Cancer Screening and Rates

Priority 8

- Breast Cancer Screening and Rates

Priority 9

- Colorectal Cancer Screening and Rates

Priority 10

- Lung Cancer Screening and Rates



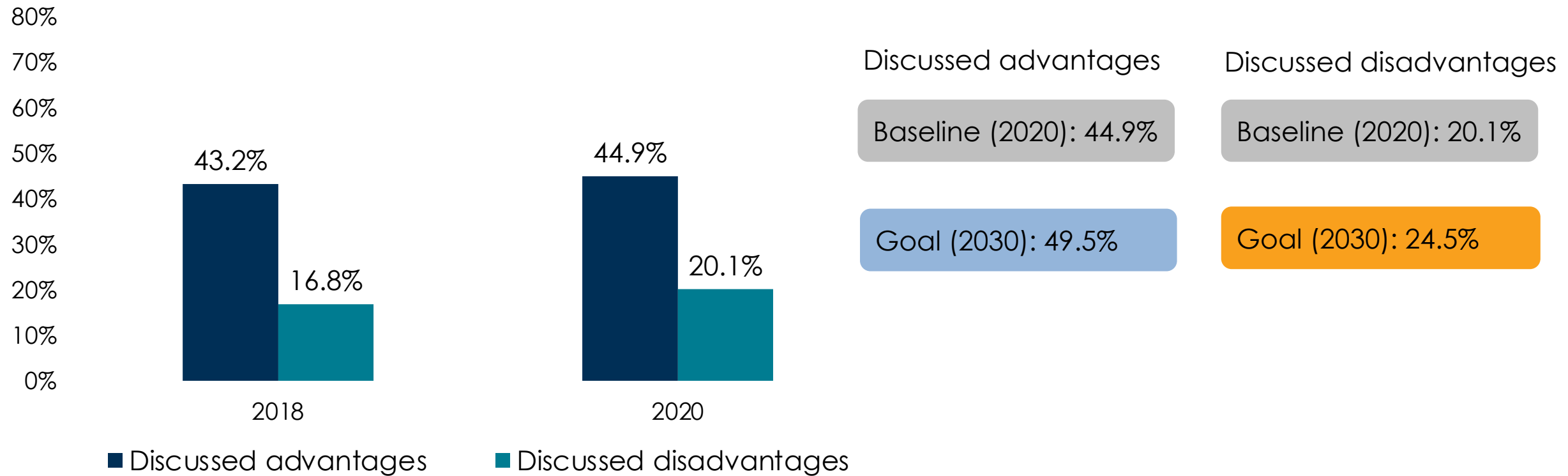
Data Sources

BRFSS Survey
SD Cancer Registry

Prostate Cancer Screening



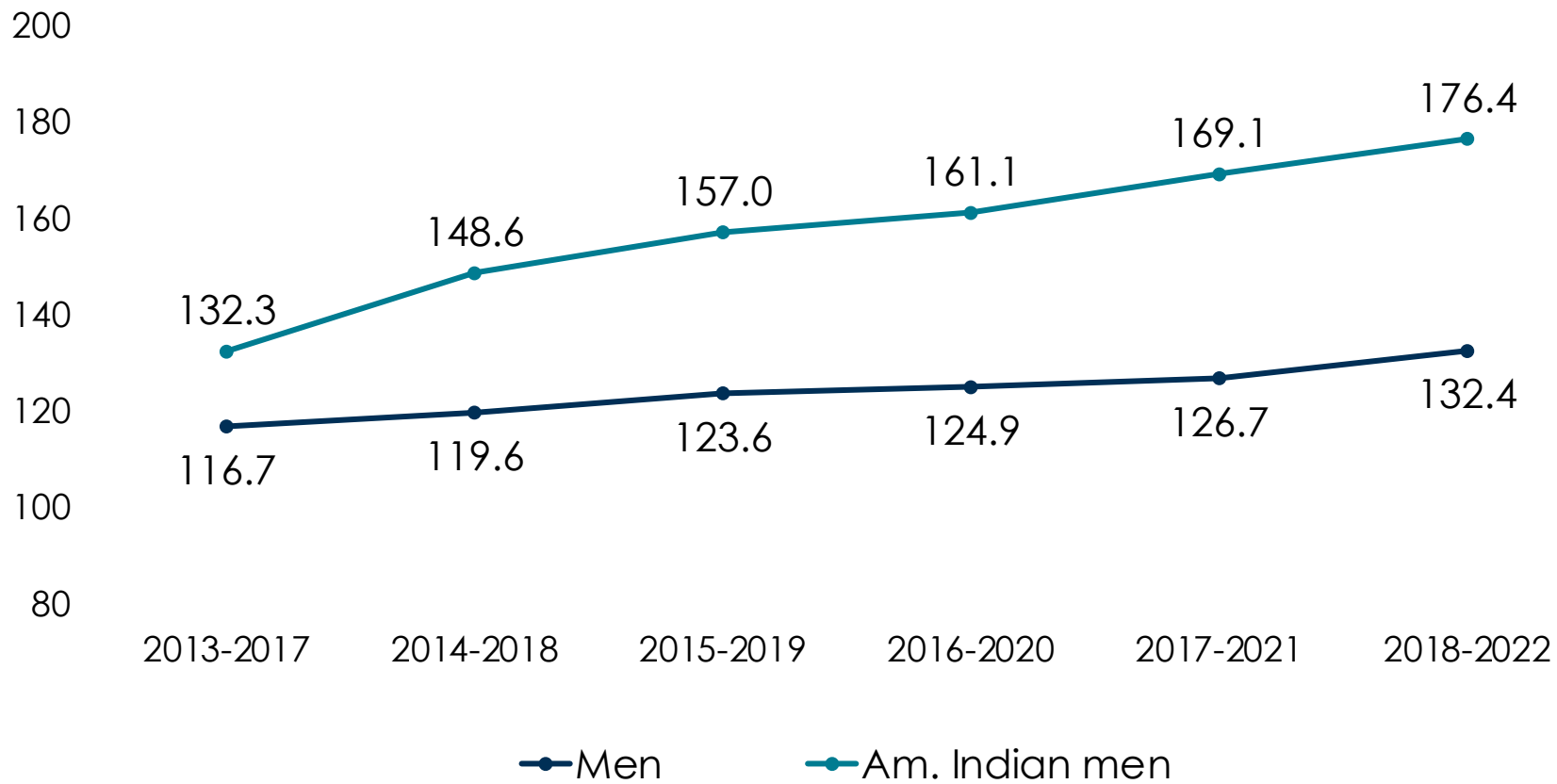
Men 40 years and older who have had a discussion with their healthcare provider about the advantages and disadvantages of PSA testing



Prostate Cancer Incidence



Age-adjusted incidence rate per 100,000 of prostate cancer



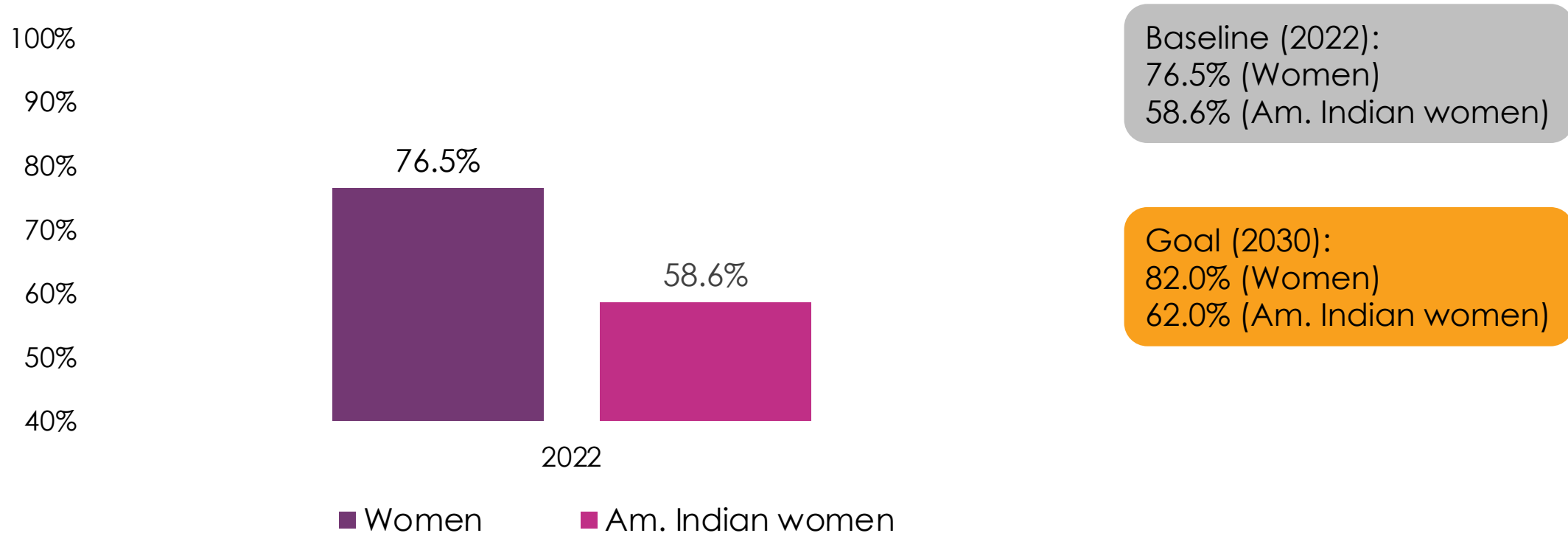
Baseline (2018-2022):
132.4 (Men)
176.4 (Am. Indian men)

Goal (2030):
125.0 (Men)
165.0 (Am. Indian men)

Cervical Cancer Screening



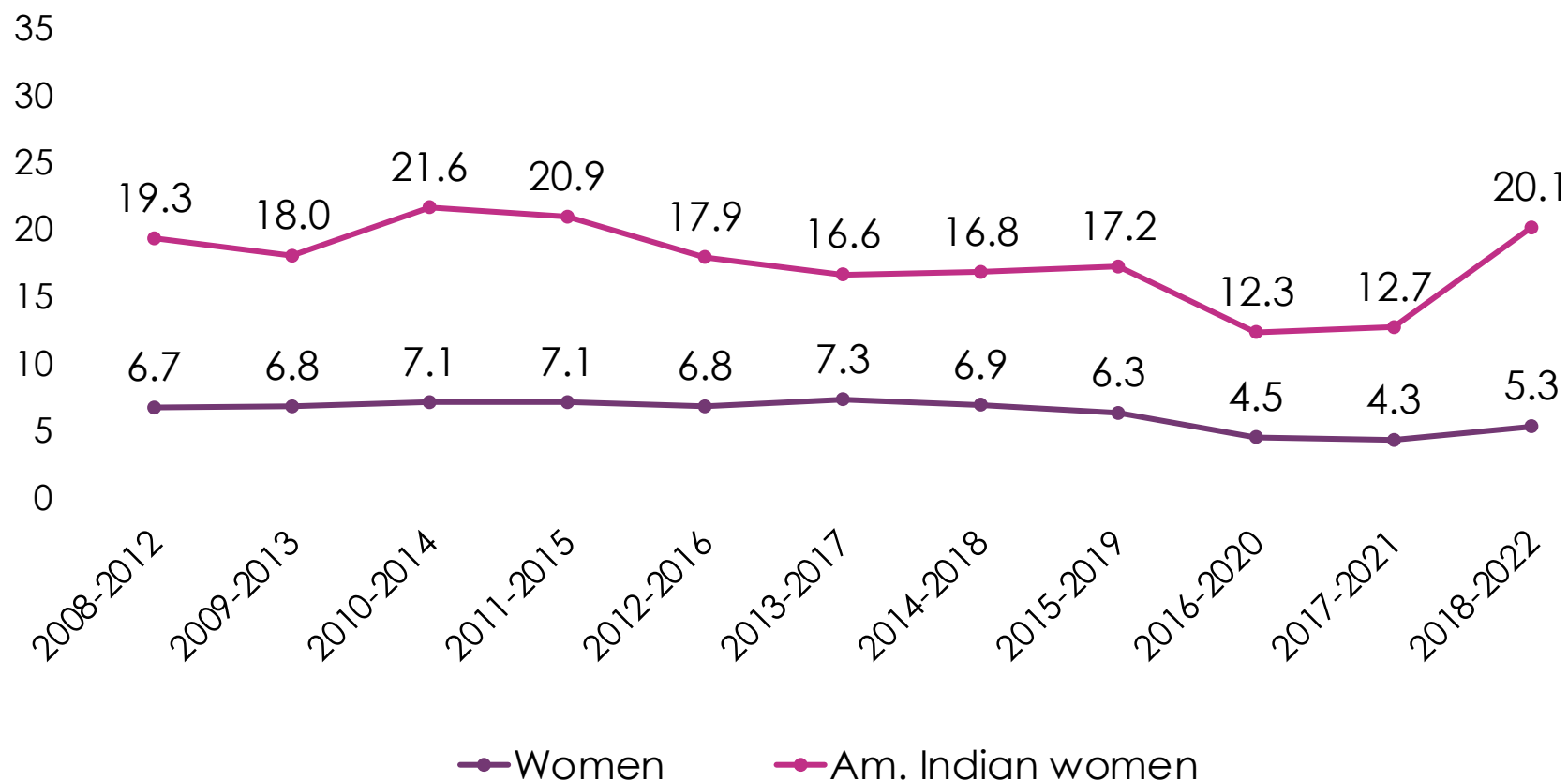
Women 21-65 years who have had a cervical cancer screening test within the last 1-5 years



Cervical Cancer Incidence



Age-adjusted incidence rate per 100,000 of invasive cervical cancer



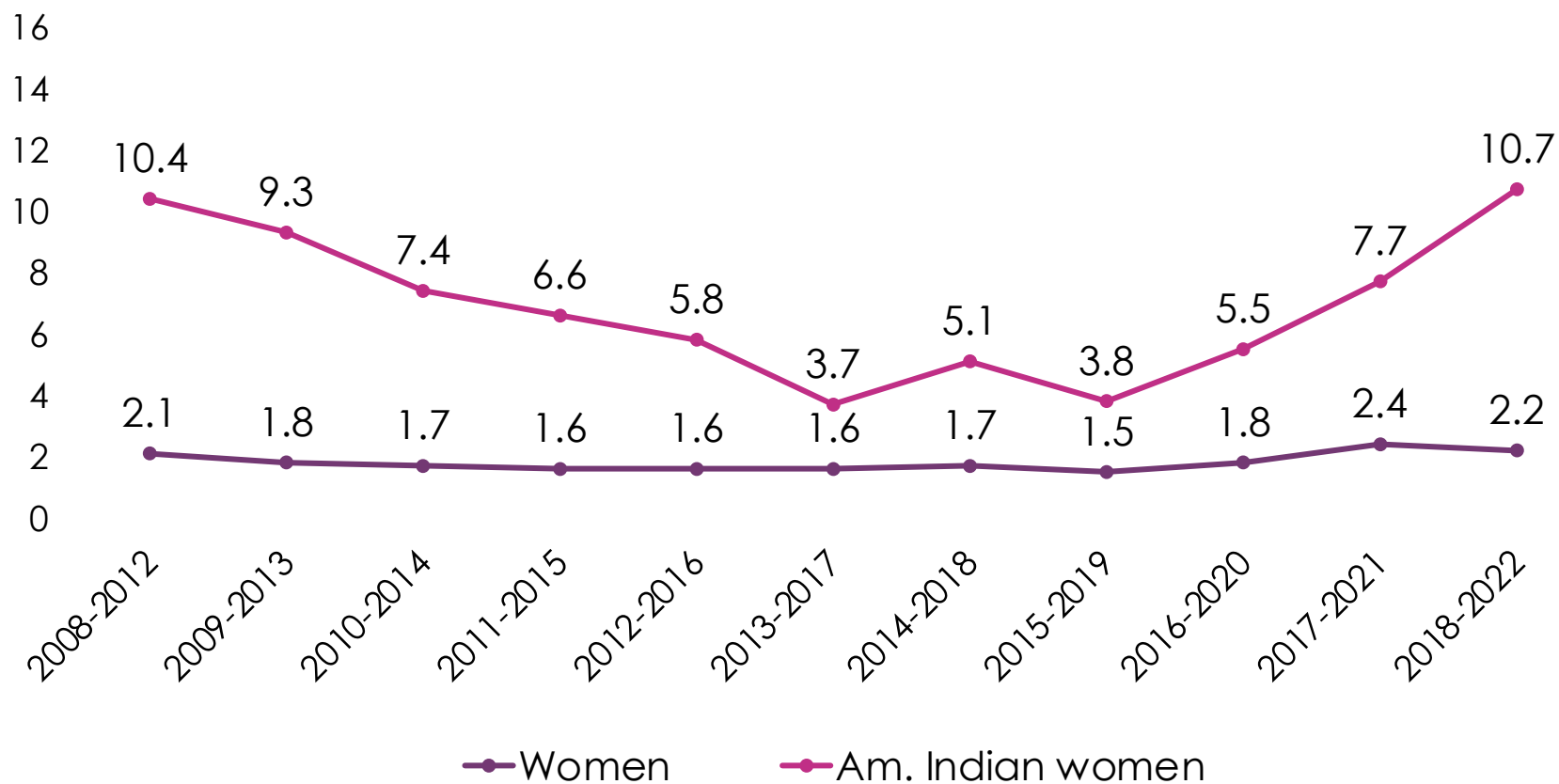
Baseline (2018-2022):
5.3 (Women)
20.1 (Am. Indian women)

Goal (2030):
3.0 (Women)
14.0 (Am. Indian women)

Cervical Cancer Mortality



Age-adjusted mortality rate per 100,000 of invasive cervical cancer



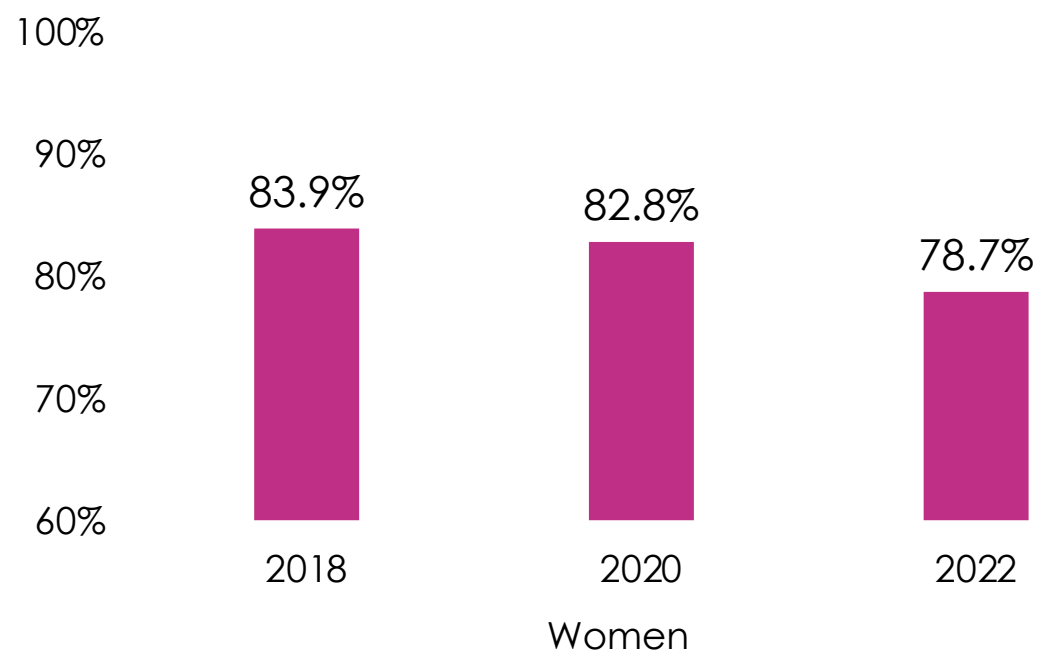
Baseline (2018-2022):
2.2 (Women)
10.7 (Am. Indian women)

Goal (2025):
1.4 (Women)
3.5 (Am. Indian women)

Breast Cancer Screening

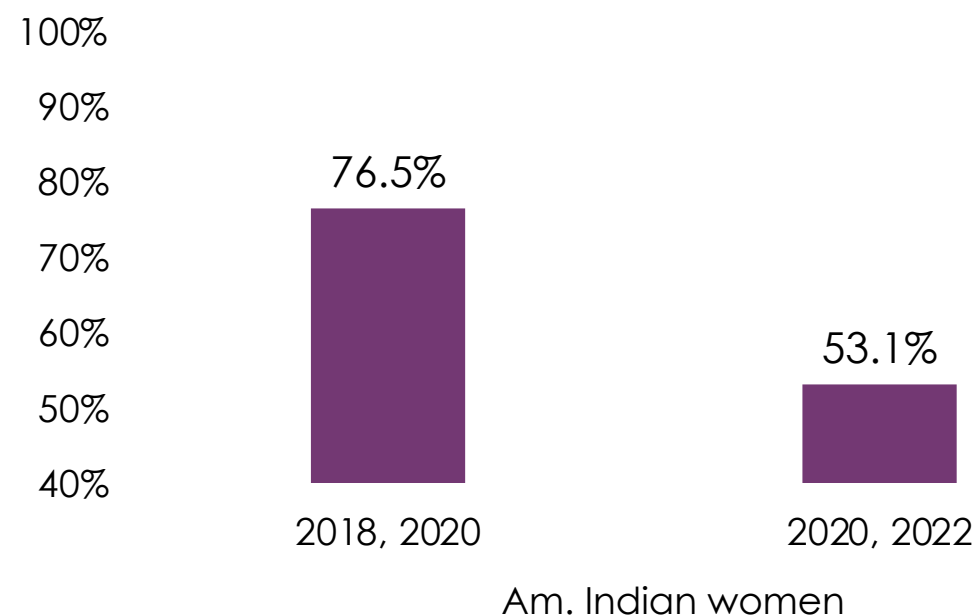


Women 40-74 years who are up to date with recommended breast cancer screening by the USPSTF



Baseline (2022): 78.7%

Goal (2030): 84%



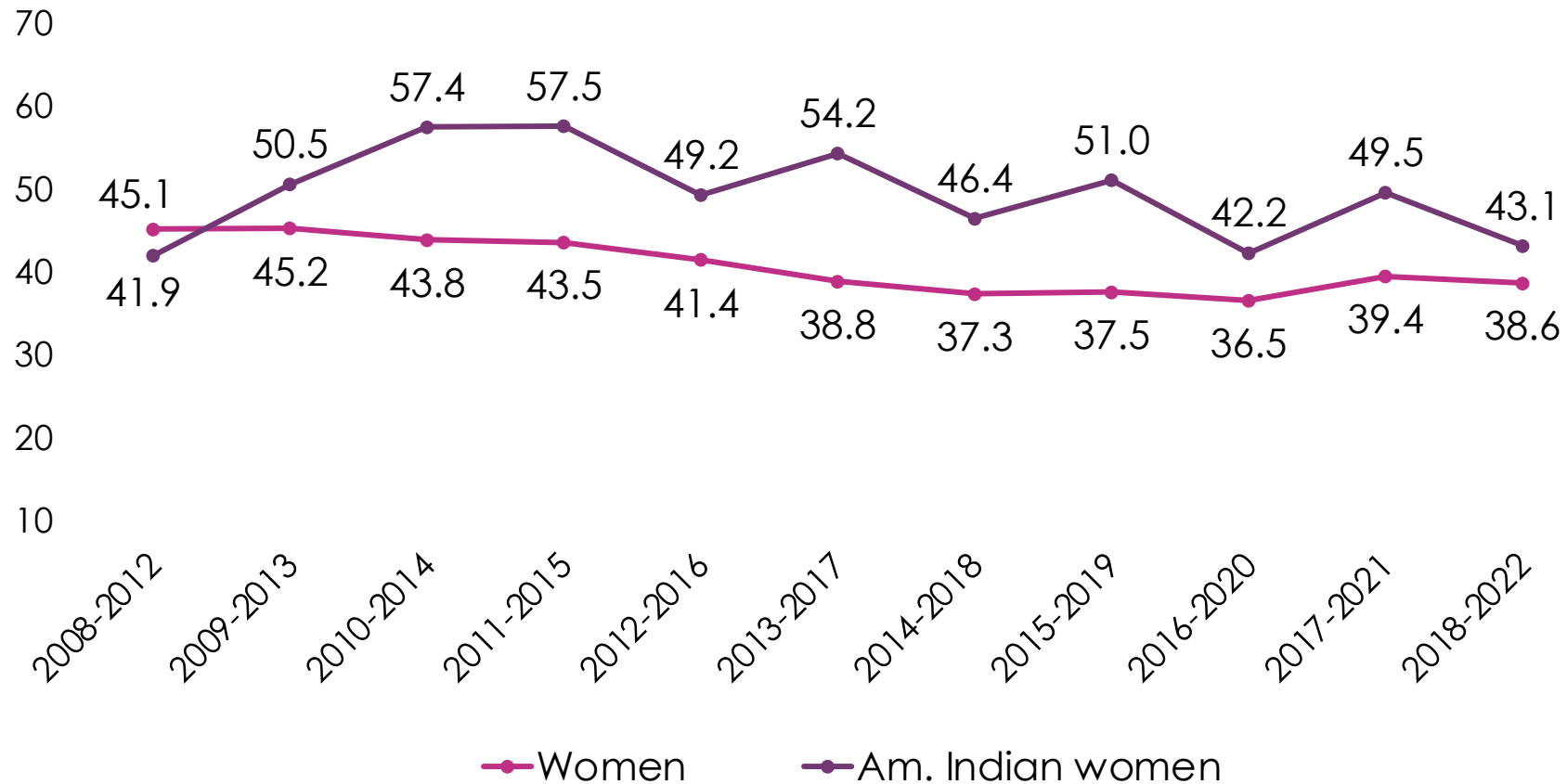
Baseline (2020, 2022): 53.1%

Goal (2030): 79.0%

Breast Cancer Incidence



Age-adjusted incidence rate per 100,000 of late-stage female breast cancer



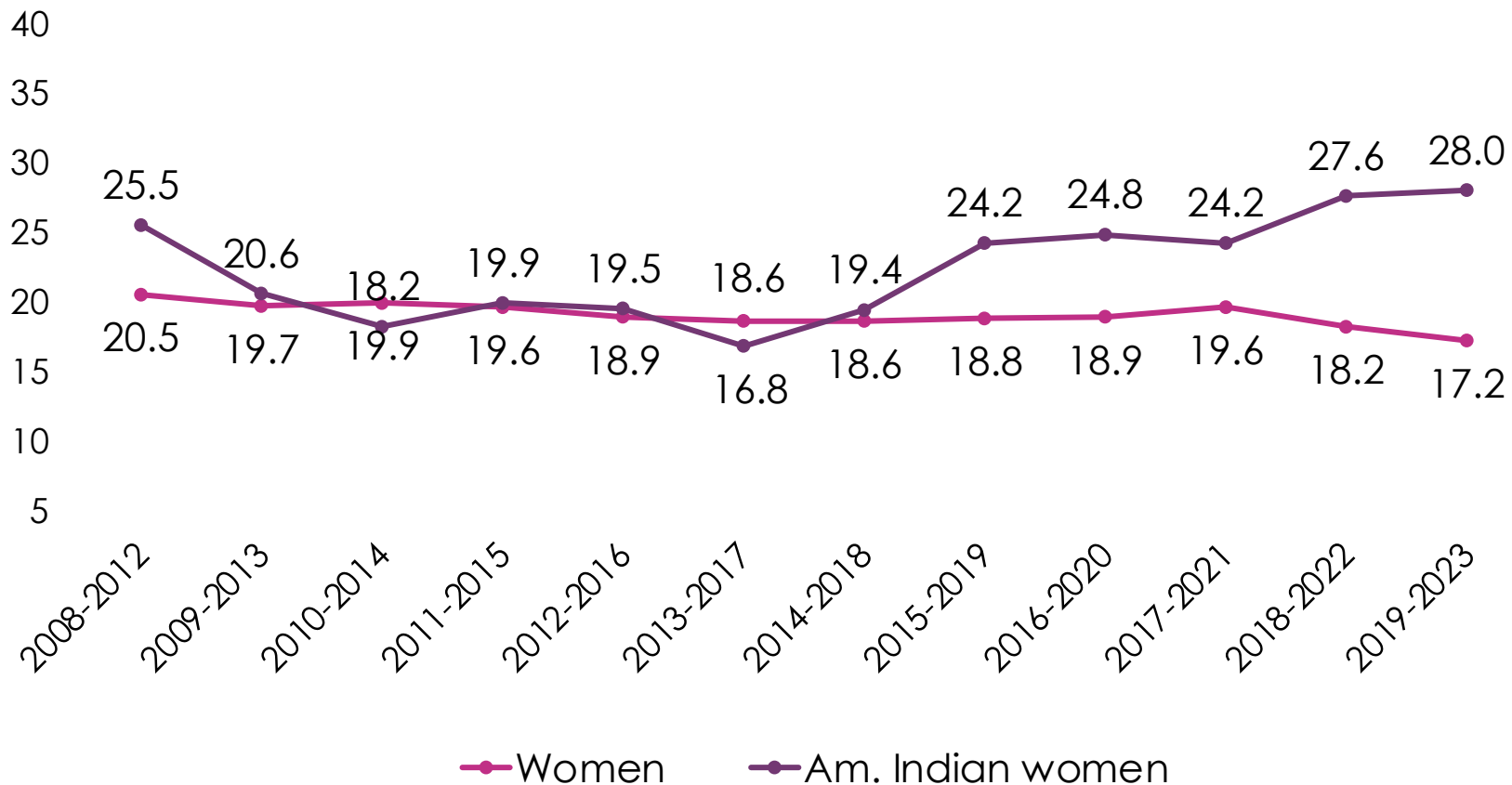
Baseline (2018-2022):
38.6 (Women)
43.1 (Am. Indian women)

Goal (2030):
34.0 (Women)
40.0 (Am. Indian women)

Breast Cancer Mortality



Age-adjusted mortality rate per 100,000 of late-stage female breast cancer



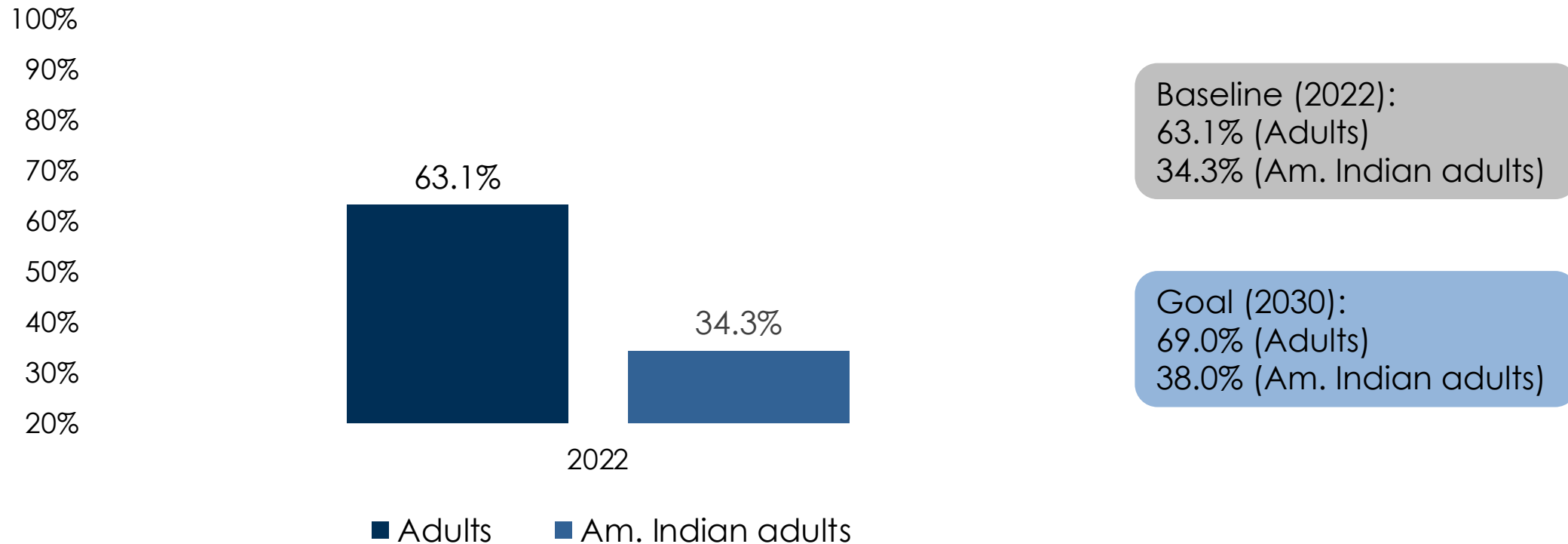
Baseline (2019-2023):
17.2 (Women)
28.0 (Am. Indian women)

Goal (2030):
16.5 (Women)
19.0 (Am. Indian women)

Colorectal Cancer Screening



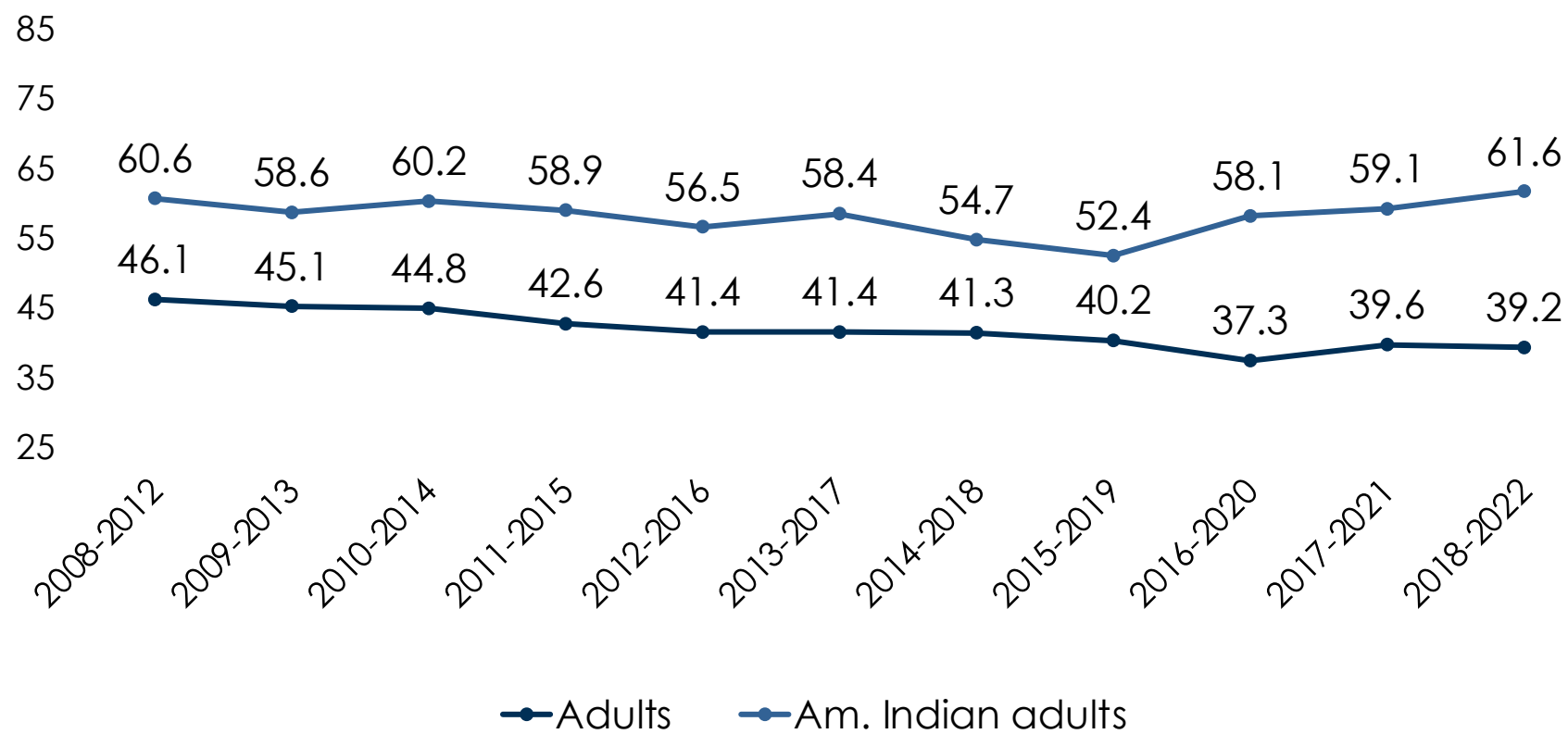
Adults 45-75 years who are up to date with recommended colorectal cancer screening by the USPSTF



Colorectal Cancer Incidence



Age-adjusted incidence rate per 100,000 of invasive colorectal cancer



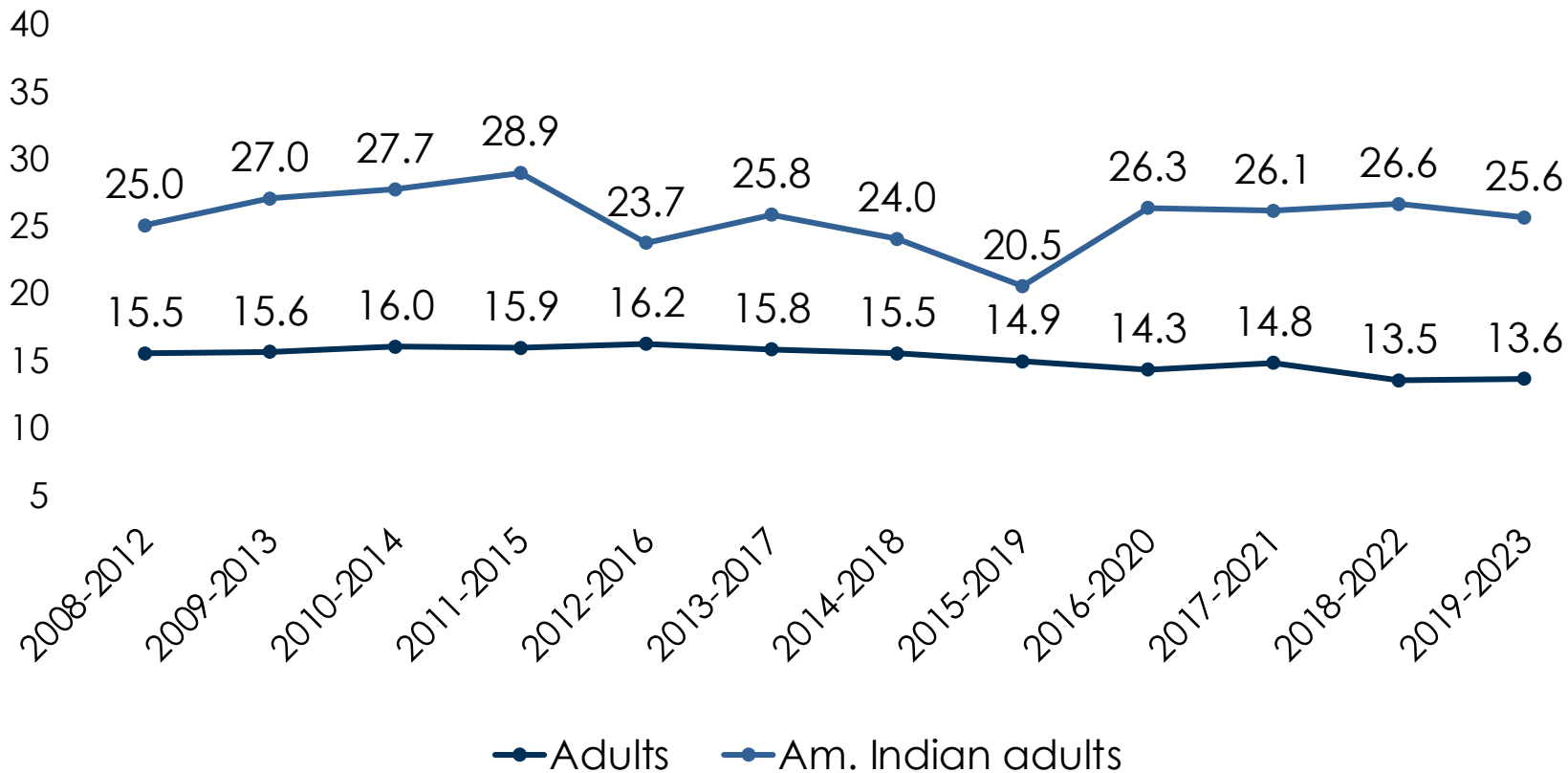
Baseline (2018-2022):
39.2 (Adults)
61.6 (Am. Indian adults)

Goal (2030):
35.0 (Adults)
50.0 (Am. Indian adults)

Colorectal Cancer Mortality



Age-adjusted mortality rate per 100,000 of invasive colorectal cancer



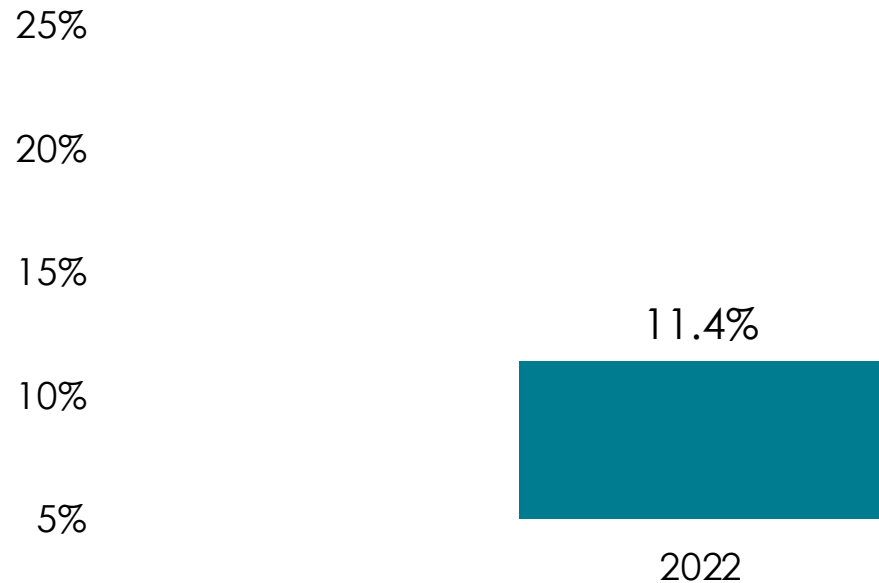
Baseline (2019-2023):
13.6 (Adults)
25.6 (Am. Indian adults)

Goal (2030):
11.0 (Adults)
18.5 (Am. Indian adults)

Lung Cancer Screening



Adults 50-80 years that are at a high risk for lung cancer who are up to date with recommended lung cancer screening by the USPSTF



Baseline (2022): 11.4%

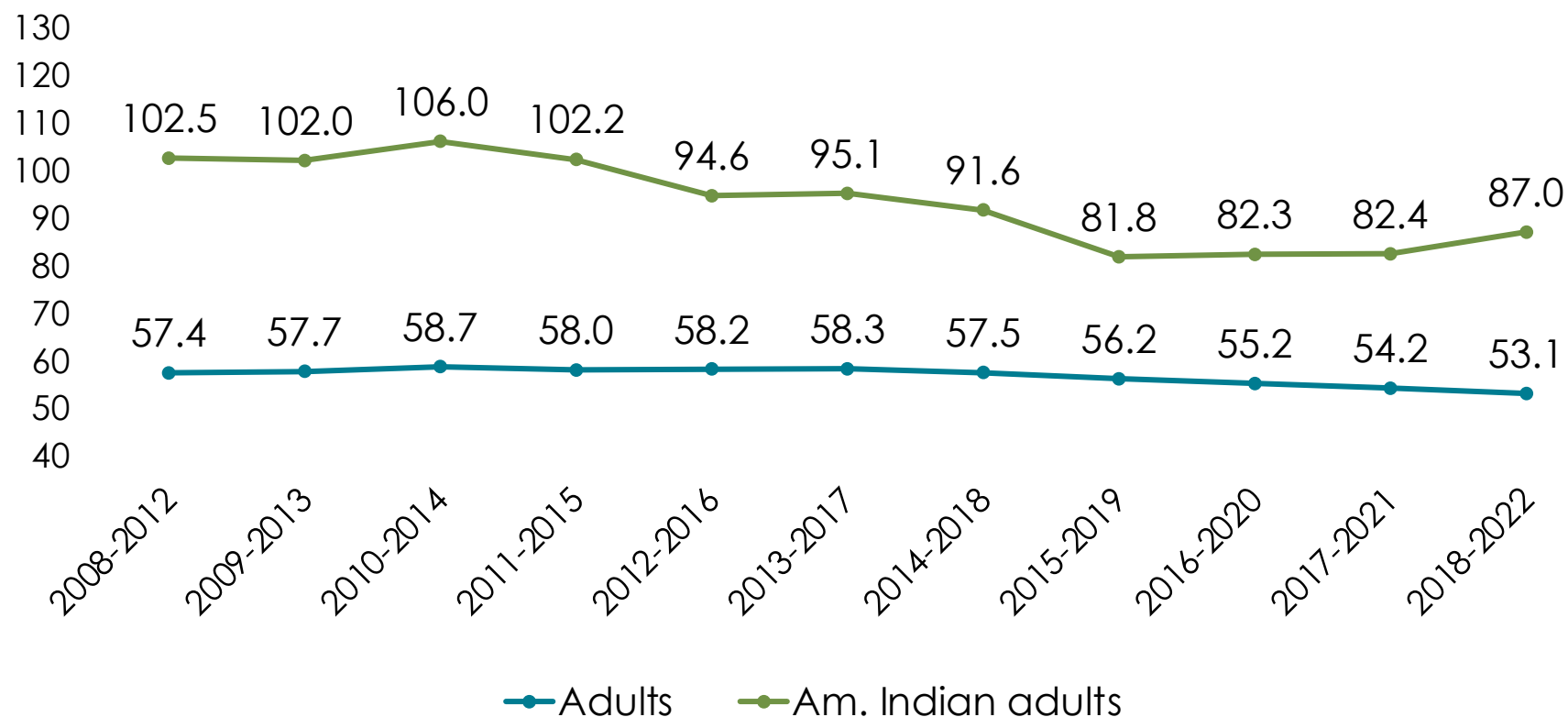
Goal (2030): 15.0%



Lung Cancer Incidence



Age-adjusted incidence rate per 100,000 of lung cancer



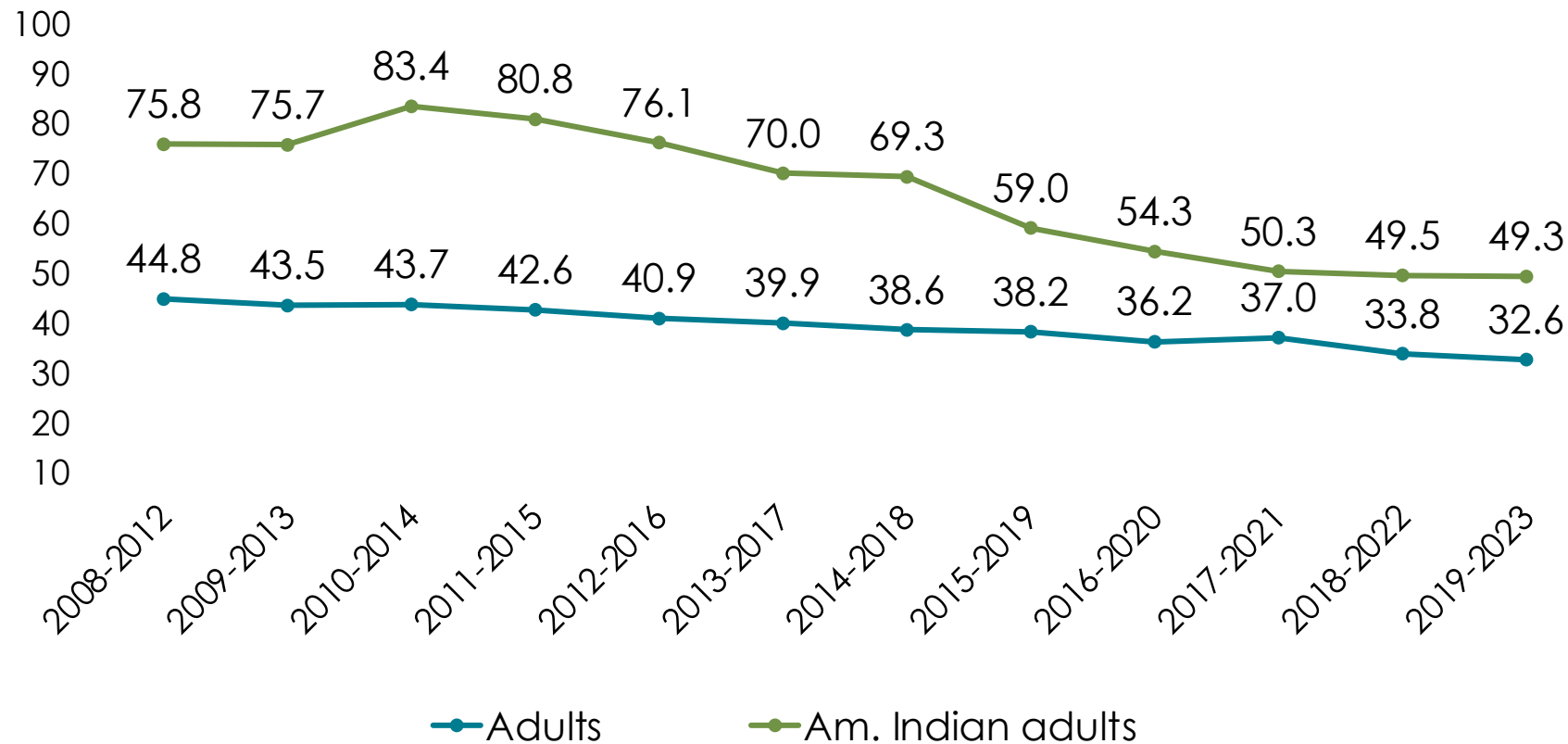
Baseline (2018-2022):
53.1 (Adults)
87.0 (Am. Indian adults)

Goal (2030):
49.0 (Adults)
79.5 (Am. Indian adults)

Lung Cancer Mortality



Age-adjusted mortality rate per 100,000 of lung cancer



Baseline (2019-2023):
32.6 (Adults)
49.3 (Am. Indian adults)

Goal (2030):
27.5 (Adults)
44.5 (Am. Indian adults)

Cancer Prevention & Healthy Lifestyles

Priority 1

- Healthy weight
- Physical activity
- Fruit / vegetable consumption
- Alcohol consumption

Priority 2

- Tobacco use

Priority 4

- HPV vaccination



Data Sources

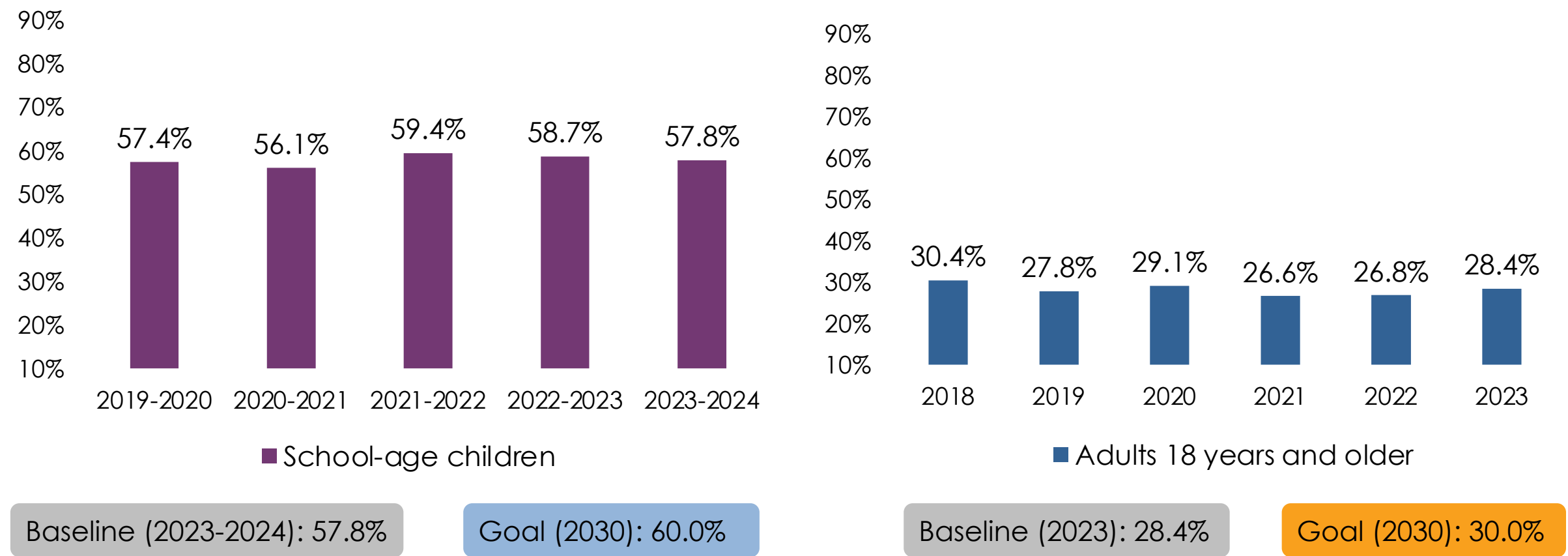
BRFSS Survey

National Immunization Survey

Healthy Lifestyles



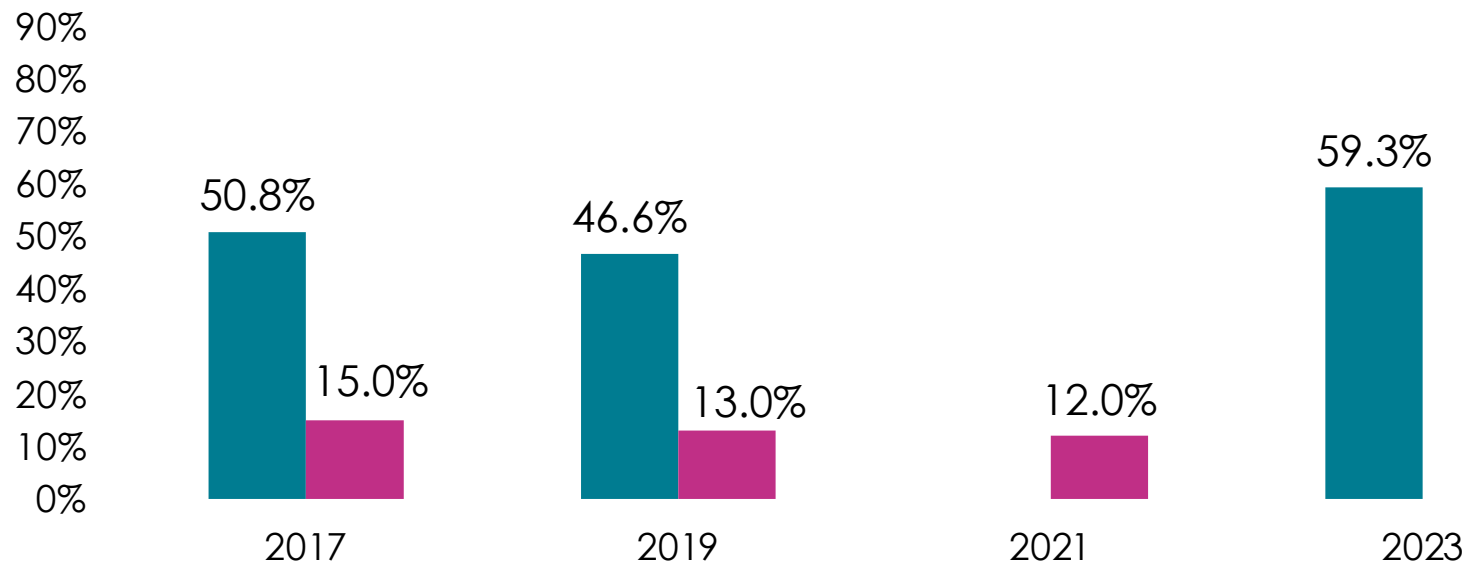
South Dakotans who are at a healthy weight



Healthy Lifestyles (continued)



Adults that participate in physical activity and consume fruits and vegetables



■ Adults that meet recommended physical activity levels

■ Adults that consume at least 5 servings of fruits and vegetables per day

Physical activity levels

Baseline (2023): 59.3%

Goal (2030): 60.5%

Fruit / veg. consumption

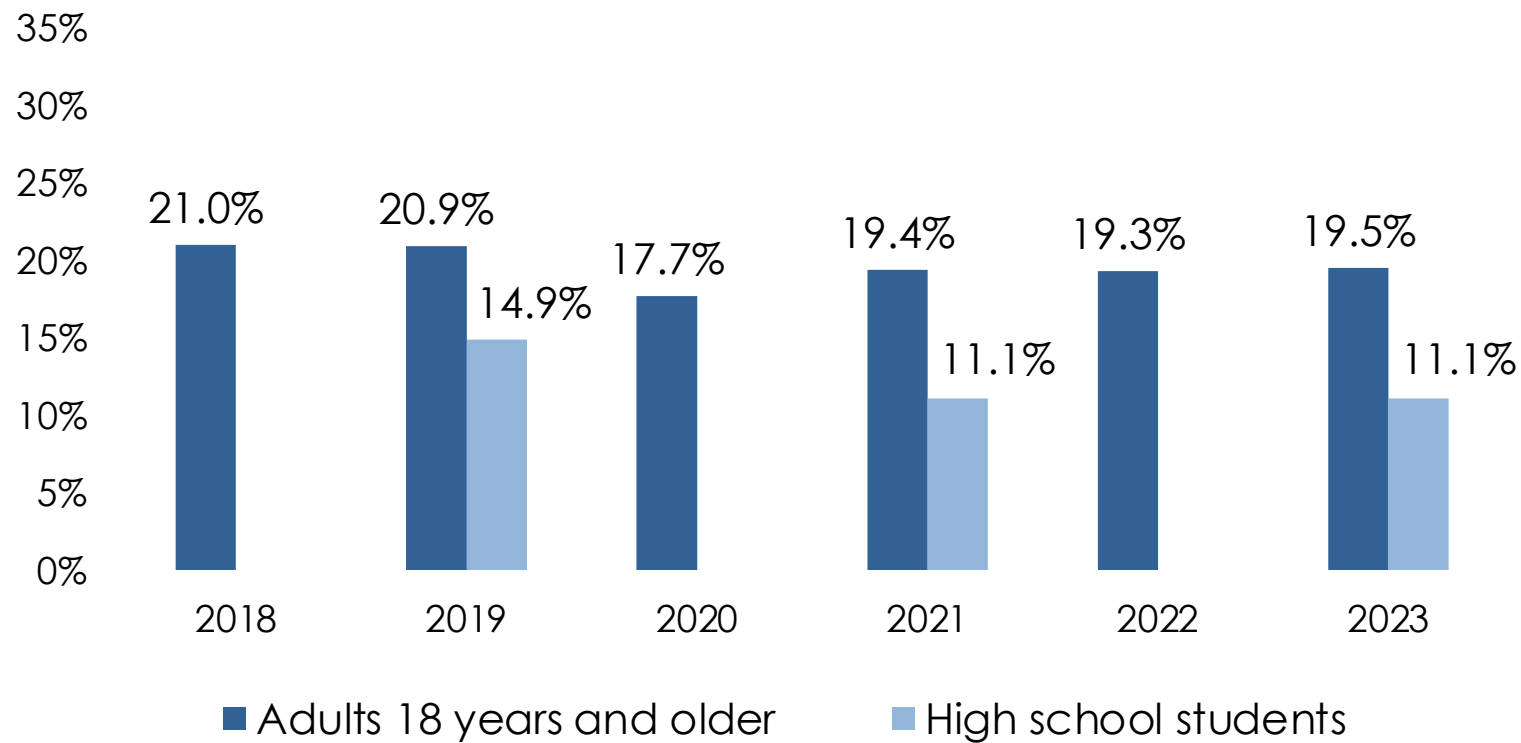
Baseline (2021): 12.0%

Goal (2030): 16.0%

Alcohol Consumption



South Dakotans who engage in binge drinking



Adults 18 years and older

Baseline (2023): 19.5%

Goal (2030): 16.0%

High school students

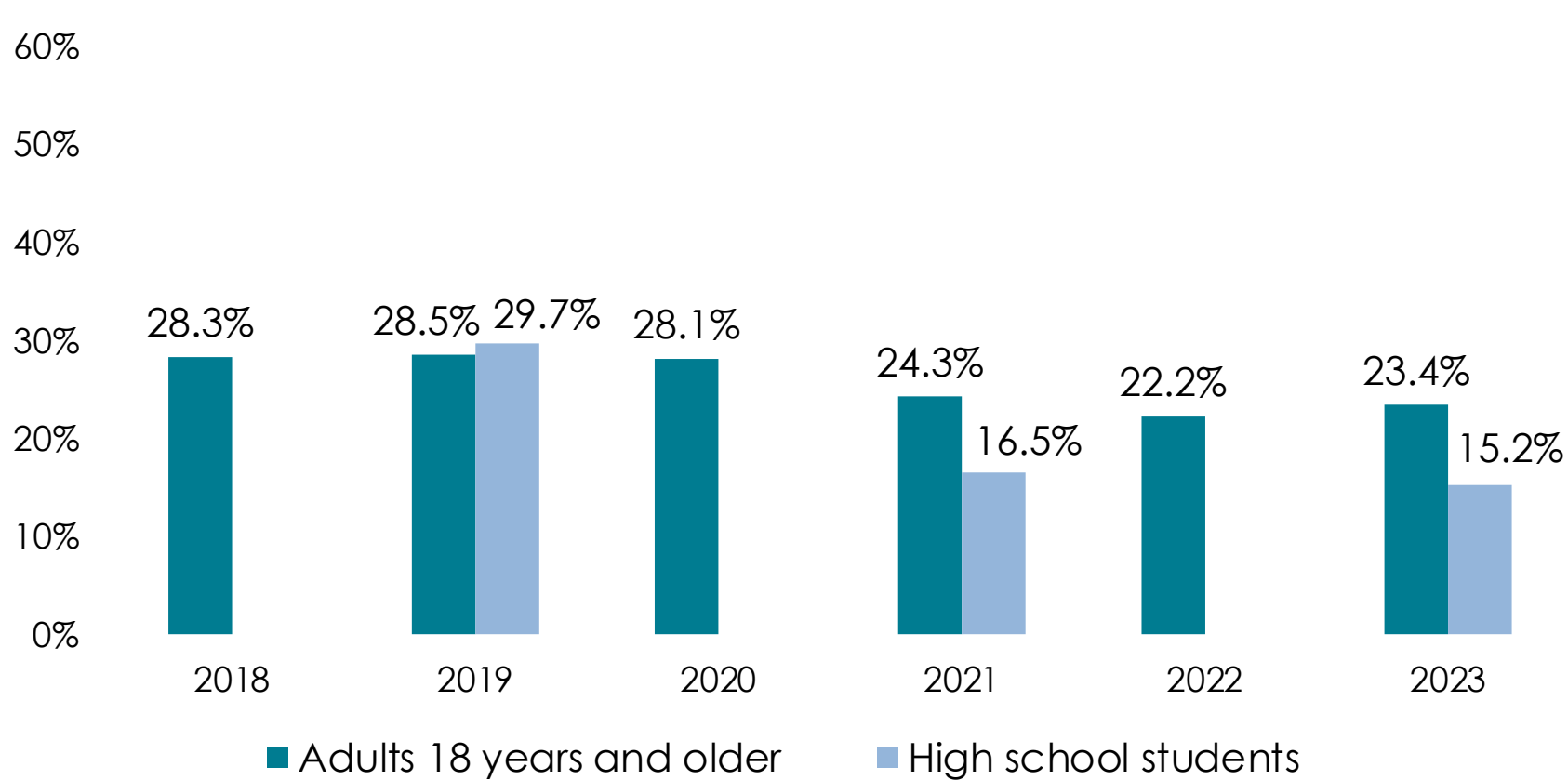
Baseline (2023): 11.1%

Goal (2030): 9.0%

Tobacco Use



South Dakotans who currently use commercial tobacco



Adults 18 years and older

Baseline (2023): 23.4%

Goal (2030): 20.0%

High school students

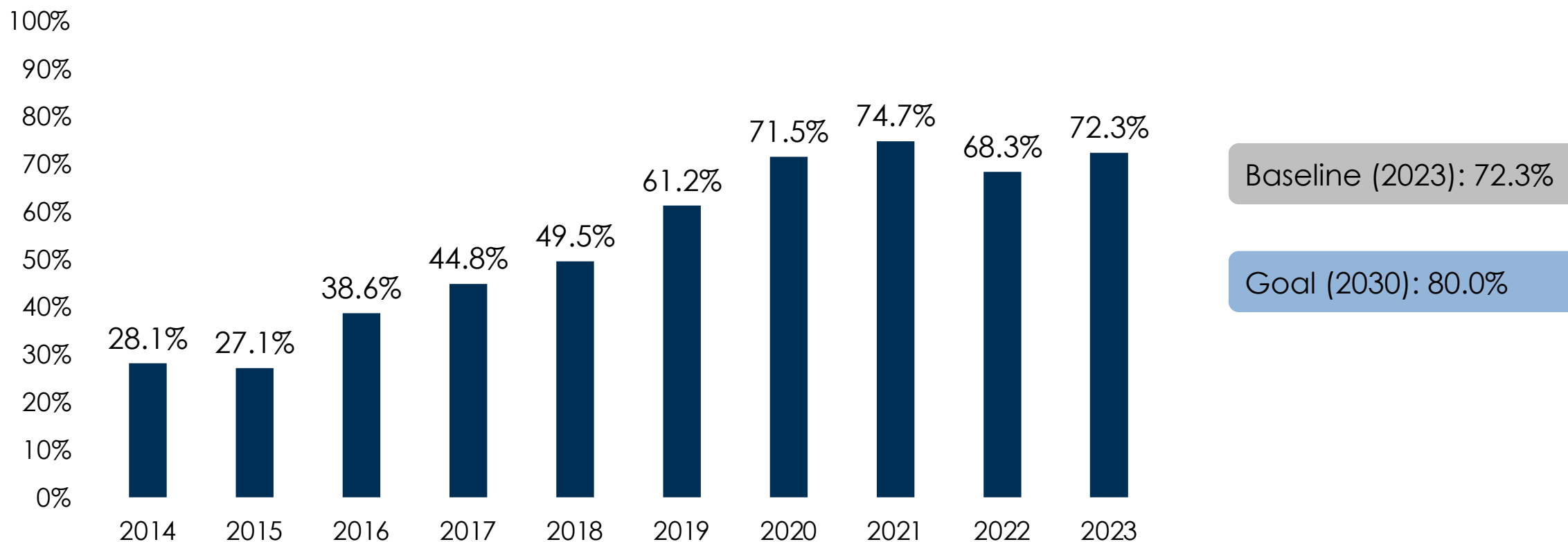
Baseline (2023): 15.2%

Goal (2030): 12.0%

HPV Vaccination



Adolescents 13-17 years who are up to date on the HPV vaccine series



Cancer Services & Continuity of Care

Priority 11

- Adults who have a health care provider
- Adults who visit their health care provider for a routine checkup once a year
- South Dakotans who have health insurance

Priority 12

- Adults who have an advance directive

Priority 13

- Cancer survivors who have good to excellent health
- Cancer survivors who have fair to poor mental health

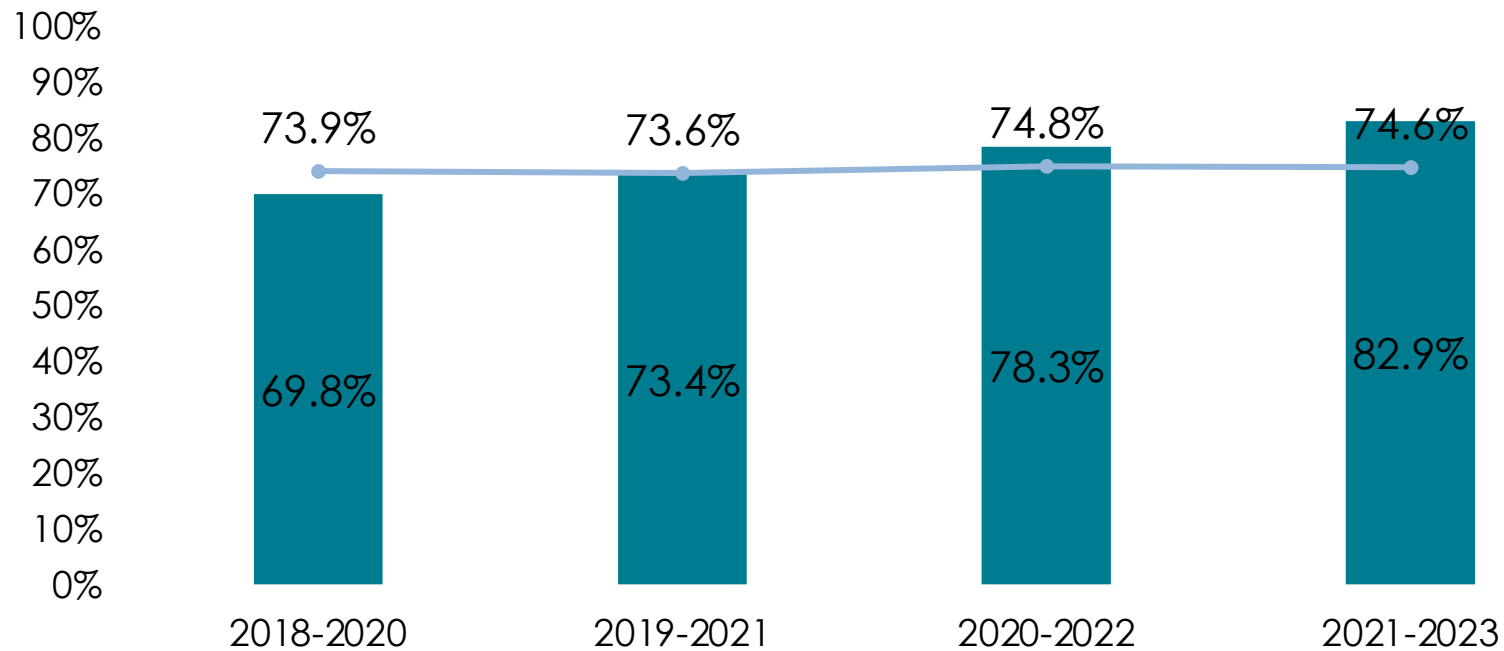
Data Sources

BRFSS Survey
US Census, SAHIE

Healthcare Provider



Adults with an income less than \$35,000



■ Adults who have a health care provider

—● Adults who visit their health care provider for a routine checkup once a year

Adults who have a health care provider

Baseline (2021-2023): 82.9%

Goal (2030): 85.0%

Adults who visit their health care provider for a routine checkup 1x a year

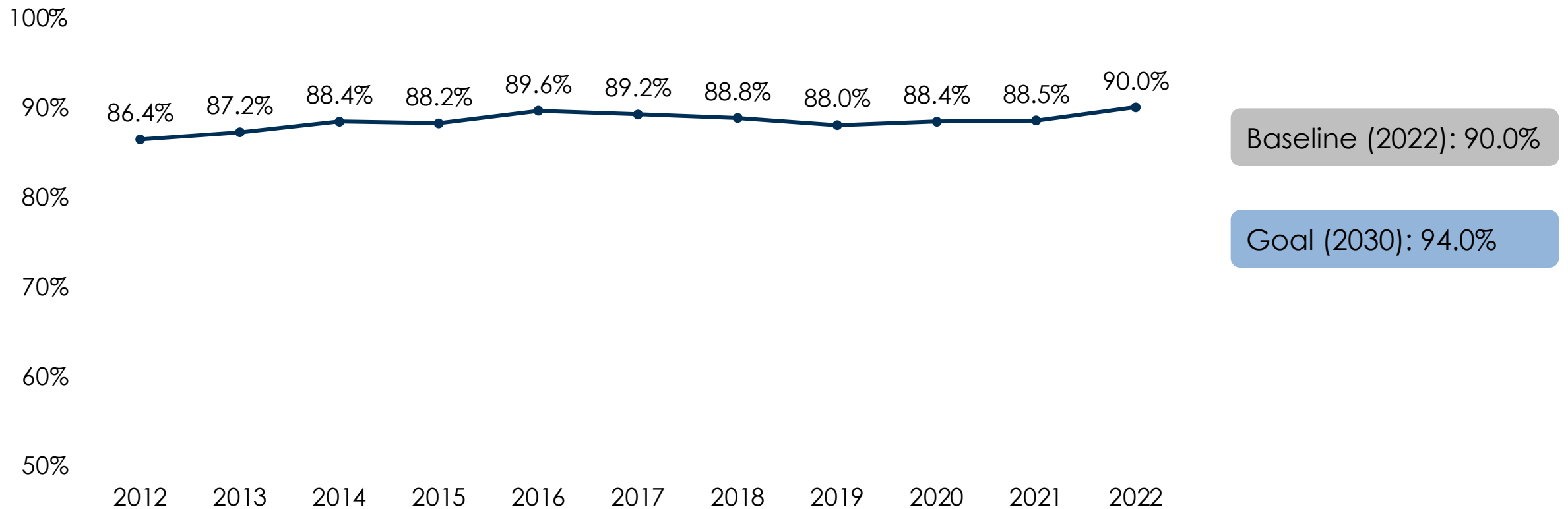
Baseline (2021-2023): 74.6%

Goal (2030): 77.0%

Health Insurance



South Dakotans under 65 years with health insurance



Advance Directive



Adults who have an advance directive

2015 31.4%

Baseline (2023): 27.8%

2017 32.0%

Goal (2030): 33.5%

2019 28.4%

2021 27.9%

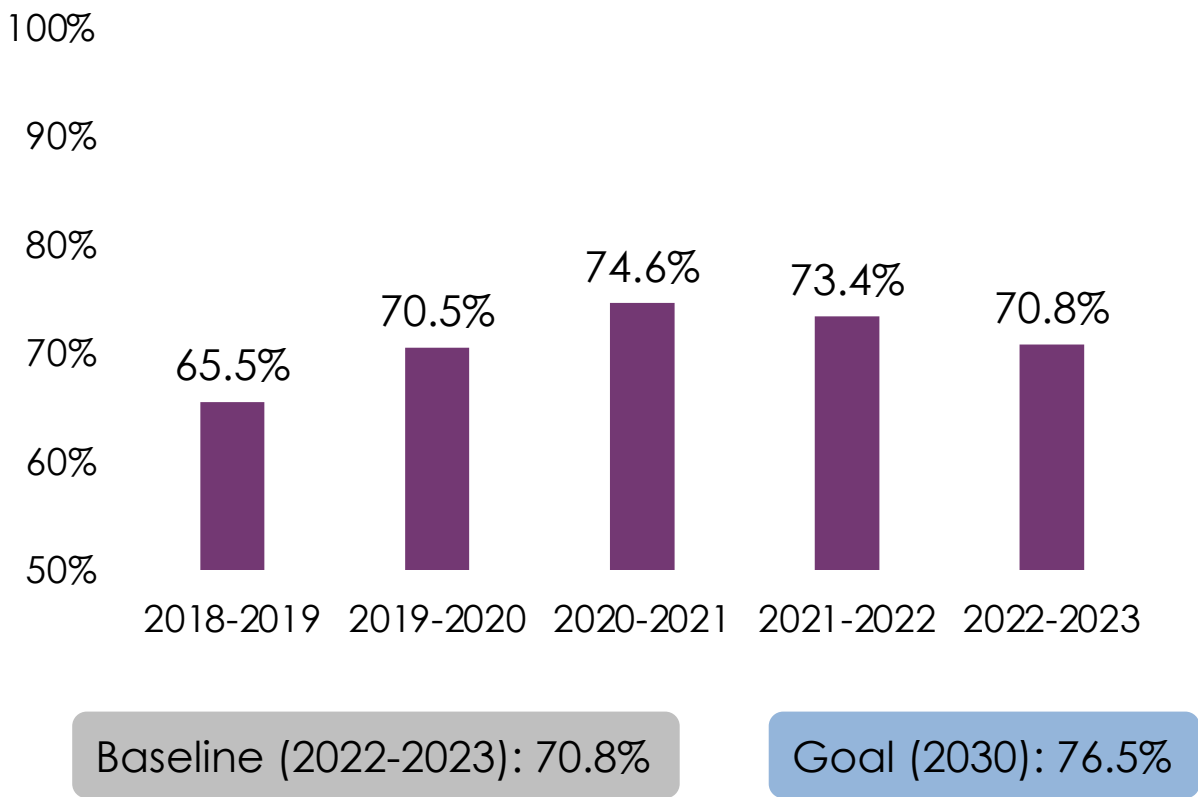
2023 27.8%

0% 10% 20% 30% 40% 50% 60%

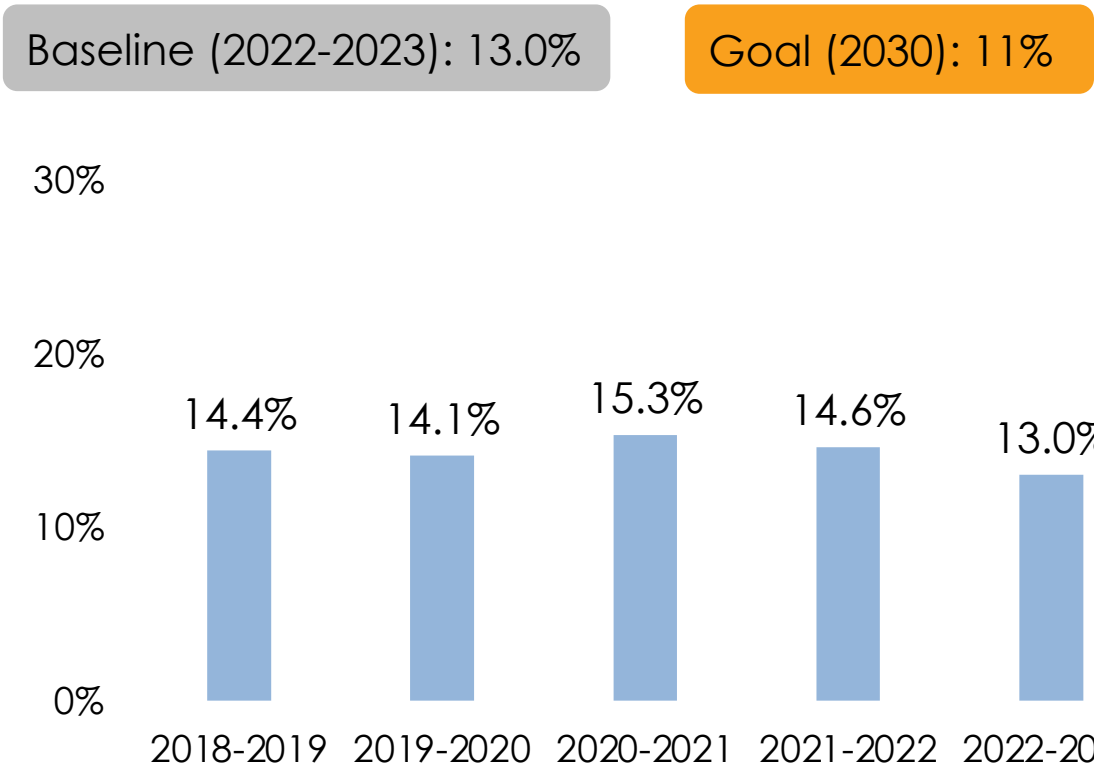
Cancer Survivorship



Cancer survivors who have good to excellent health



Cancer survivors who have had fair to poor mental health for 7 or more days within the last 30 days



SD Cancer Plan Dashboard



South Dakota Cancer Plan



Welcome to the SD Cancer Plan

Priority 1

Priority 2

Priority 3

Priority 4

Priority 5



South Dakota Cancer Plan 2021 - 2025



VISION

Every South Dakotan free from the burden of cancer.

MISSION

Working together to reduce cancer incidence and mortality while improving quality of life for cancer survivors.

GOALS

1. Prevent cancer among South Dakotans
2. Detect cancer in the earliest stages for all South Dakotans
3. Ensure timely and appropriate access and treatment for all cancer patients in South Dakota
4. Optimize quality of life for South Dakota cancer patients, survivors, and caregivers
5. Promote health equity as it relates to cancer control in South Dakota
6. Support collaboration among stakeholders in South Dakota to reduce duplication and maximize impact

PRIORITY POPULATIONS

- American Indians
- Low Socioeconomic Status Populations
- Rural and Frontier Populations
- Uninsured/Underinsured Populations

Priority 1: Reduce Tobacco Use and Exposure



Select an objective:

1.1.A: Decrease the percentage of high school students who use tobacco from 29.7% to 20%



Goals

Goal 1: Prevent cancer among South Dakotans

Goal 5: Promote health equity as it relates to cancer control in South Dakota

Goal 6: Support collaboration among stakeholders in South Dakota to reduce duplication and maximize impact

Strategies

- A. Increase referrals to equitable and culturally appropriate evidence-based tobacco cessation services, such as the South Dakota QuitLine.
- B. Advocate for tobacco-free environments.
- C. Promote equitable and culturally appropriate evidence-based policy, system, and environmental changes that reduce tobacco use.
- D. Support efforts by the SD Tobacco Prevention and Control Program to implement the SD Tobacco Control State Plan to reduce the impact of tobacco use and exposure on cancer risk. <https://quittobaccosd.com/about/sd-state-plan>

Thank You

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SOUTH DAKOTA
**CANCER
COALITION**

World Café Discussion: Cancer Plan 2026-2030

Shannon Park



SOUTH DAKOTA CANCER PLAN

2026-2030



South Dakota Cancer Plan 2026-2030

- **Priority 4:** Decrease HPV Related Cancers
- **Priority 6:** Increase Risk Appropriate Screening for Prostate Cancer
- **Priority 11:** Increase Affordability & Accessibility of Quality Cancer Care & other Services
- **Priority 14:** Improve Pediatric Cancer Survivorship Resources & Supportive Care

SD Comprehensive Cancer Control State Plan: 2024-2025 Activities

Priority	Activities	Partners
PRIORITY 1: Reduce tobacco use and exposure.	– The Great Plains Tobacco Prevention Project provided education and tobacco awareness. – Training was provided to medical professionals on cessation assessment and making referrals to the SD Quitline. – In 2024, the Tobacco Control Program funded 15 youth/community engagement grantees and 7 Disparities grantees to work on prevention tobacco use, reducing exposure to secondhand smoke, and promoting cessation. – Cancer survivors identified as tobacco users were referred to tobacco cessation resources. – Delta Dental of South Dakota Foundation provided secondhand smoke and tobacco cessation education in SD. – Tobacco Youth and Community Engagement awardees helped strengthen 3 tobacco-free policies over the 2024-2025 year to promote tobacco-free environments. The Tobacco Control Program assisted secondary-schools on updating and strengthening their tobacco-free policies, which should be updated in 2025/2026. – The Sioux Empire SET-FREE Coalition received Disparity Grant funds to host a virtual vape/smoke-free multi-unit housing summit. The summit had 51 participants from a variety of communities across South Dakota. There are a total of 5,963 noted smoke-/vape-free rental units in Sioux Falls and another 5,502 such rental units throughout South Dakota. – In 2024, The SD Tobacco Control Program released the SD K-12 & Youth Toolkit. With this toolkit staff offered trainings across the state to educate youth on the dangers of tobacco use including vaping. – The SD Quitline provided targeted information to more than 332 clients in the first six months of 2025 on recommended lung cancer screening for current and former tobacco users.	American Cancer Society Cancer Action Network (ACS CAN) Delta Dental of SD Great Plains Tribal Leaders' Health Board SD Cancer Programs SD Tobacco Control Program SD QuitLine Sioux Empire Tobacco Free Coalition SD Cancer Programs
PRIORITY 2: Increase healthy, active lifestyles.	– Fifteen worksites across the state were funded through the WorkWell Grant to implement policy and environmental changes to improve nutrition and increase physical activity in the workplace. – The SD Park Prescription project had 615 healthcare providers who received Park Rx Kits through May 31, 2025. – The Breastfeeding Friendly Business Initiative has 664 businesses that have taken the pledge to show support for their breastfeeding employees and customers.	Monument Health SD Cancer Programs SD Nutrition and Physical Activity Program
PRIORITY 3: Reduce ultraviolet radiation exposure.	– Dakota Dermatology provided sunscreen to patrons at Levitt Sioux Falls concerts. – Lewis Drug, Sanford Health, Avera Health, and Dakota Dermatology held free skin cancer screenings and distributed information on UV exposure on Melanoma Monday in May 2025. – Sanford Health installed new shade structures at the Sanford Sports Complex in Sioux Falls.	Dakota Dermatology SD Cancer Programs Sanford Health Avera Health Lewis Drug
PRIORITY 4: Reduce exposure to environmental carcinogens.	– ACS continues to support national research on limiting exposure to carcinogens. – The Department of Agriculture and Natural Resources supplied 541 radon kits for free in SD in 2024-2025.	American Cancer (ACS) SD Department of Agriculture and Natural Resources

Cancer Plan Activity Reporting



<https://bit.ly/cancersdactivity>



KEY TERMS



GOALS:

are general, “big picture” statements of outcomes a program intends to accomplish to fulfill its mission. In this plan, goals reflect overarching desirable outcomes related to cancer prevention, early detection, treatment, quality of life, fair access to healthcare, and collaboration.



OBJECTIVES:

are the “big steps” that a program will take to attain its goals and achieve its priorities. Objectives indicate what will be done, not how to make it happen. Objectives are Specific, Measurable, Achievable, Relevant, and Time-bound (SMART).



PRIORITIES:

reflect the necessary changes that must be made in order for a program to meet its goals. In this plan, priorities reflect the changes that must be made to reduce the burden of cancer in South Dakota.



GOALS



01

Prevent cancer among South Dakotans

02

Detect cancer in the earliest stages for all South Dakotans

03

Promote fair access to healthcare as it relates to cancer control in South Dakota

04

Optimize quality of life for South Dakota cancer patients, survivors, and caregivers

05

Ensure timely and appropriate access and treatment for all cancer patients in South Dakota

06

Support collaboration among stakeholders in South Dakota to reduce duplication and maximize impact



World Café Discussion

1. **Discuss** questions on each table for 10 minutes
 - Jot or doodle ideas on tablecloths!
 2. **Move** to a new table after each round – table host stays put
 3. **Come back together** after 2 rounds
 4. **Harvest** themes, insights and patterns to shape strategy and next steps
-



Task Force Selection



Prevention

Screening

Survivorship



Partnership Commitment

Working together to reduce the burden of cancer in South Dakota.

The Cancer Coalition unites people and organizations committed to preventing and controlling cancer across our state. You're helping advance the goals of the South Dakota Cancer Plan 2026-2030 through our collaboration, education, and action.

As a Coalition partner, I (and/or my organization) commit to:

- Support the Coalition's mission.
- Participate in meetings, task forces, and/or activities as I'm able.
- Share relevant coalition information and opportunities.
- Contribute expertise, perspective, and/or resources that strengthen coalition efforts.

I would also like to (check all that apply):

- ☐ Join a 2025-2026 task force:

Prevention Screening Survivorship

- ☐ Serve on an ad-hoc cross-cutting committee
- ☐ Apply to serve on the Steering Committee
- ☐ Contribute educational materials or public outreach support
- ☐ Provide in-kind goods, services, or facilities for coalition events
- ☐ Help make connections to key partners or organizations
- ☐ Provide financial sponsorship of coalition activities or events

Name: _____ Date: _____

Title: _____

Organization: _____

Email Address: _____

Phone: _____ Signature: _____

South Dakota Cancer Coalition

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info@cancersd.com