



# Enhancing Community-Clinical Linkages to Improve Cancer Health Outcomes Among Low-Income Populations, Including Veterans, Active-Duty Service Members, Reservists, and Military Families

Addressing cancer at three essential levels of prevention (primary, secondary, and tertiary) across the lifespan will help improve the overall health of the nation. When addressing cancer and other chronic diseases among our nation's workforce, it is crucial to include Veterans, active-duty military service members, and their families.

Each year, more than a million people devote their skills, time, education, hard work, and lives to voluntarily enter the U.S. military service. Their honorable sacrifices enable the safety, security, and preservation of the United States' freedoms and, often, the safety of people around the world. Therefore, it is imperative that we care for and invest in the health of active-duty service members (Army, Marines, Navy, Air Force, Coast Guard, Space Force), Veterans, National Guard members, Reservists, and their military families by understanding their health risks and working to address them. This includes understanding and addressing risks of chronic conditions, such as colorectal, breast, prostate, bladder, and lung cancers.

Currently, there are approximately 18.3 million U.S. military Veterans, many of whom have chronic conditions.<sup>1</sup> The U.S. Department of Veterans Affairs treats 400,000 Veterans with cancer each year, 43,000 of whom are newly diagnosed.<sup>2</sup> Additionally, Veterans have higher levels of some chronic diseases than the general population, including cancer, type 2 diabetes, cardiovascular disease (CVD), stroke, and chronic obstructive pulmonary disease (COPD).<sup>3</sup>

**“Drawing inspiration from a legacy of valor, American Indian/Alaska Native Veterans have an exemplary tradition of military service and sacrifice. Today, there are approximately 160,000 American Indian/Alaska Native Veterans.”**

— Linda Torres, Former Health Advisor to the Veterans Administration Under Secretary for Health



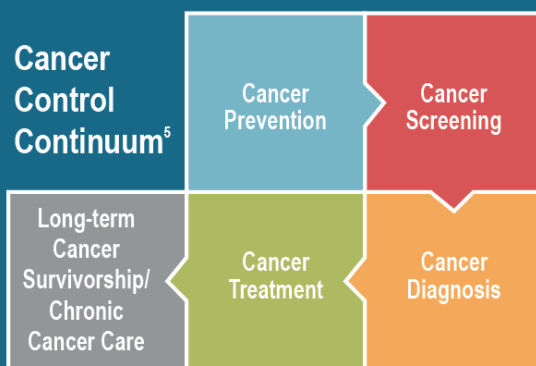
## Special Acknowledgement

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The National Cancer Institute (NCI) notes that cancer health disparity outcomes may exist in several forms:

**“People with low incomes, low health literacy, or long travel distances to screening or treatment sites, or who lack health insurance, transportation to a medical facility, or paid medical leave are less likely to have recommended cancer screening tests and to be treated according to guidelines than those who don't encounter these obstacles.”**





## What are MUAs and HPSAs?

MUAs and HPSAs designate areas that have a minimal or low number of medical professionals or other healthcare services.<sup>11</sup> MUAs or HPSAs can be in rural or metropolitan areas and are often places with high numbers of people with low incomes. In many rural and low-income areas with healthcare shortages, people must travel long distances to access routine cancer screening and follow-up care.<sup>12</sup>

- **MUAs** are geographic areas, such as counties or census tracts, that have a shortage of primary care services.
- **HPSAs** are geographic areas that do not have enough healthcare professionals in specialty areas, such as primary care, dental care, or mental health care.



## MUAs, HPSAs, and Veterans

Many populations with low incomes, including Veterans, active-duty service members, and their military families, reside within MUAs and HPSAs. Veterans and military families include representation from Native American communities. SDOH barriers, such as transportation barriers for medical appointments, treatments, and follow-up cancer care (especially in MUAs and HPSAs located in rural and metropolitan communities), affect Veterans diagnosed with cancer.<sup>10</sup>

Financial insecurity is a barrier to optimal health, as cancer disproportionately affects populations with low incomes.<sup>6</sup> These cancer health disparities (significant and persistent differences in cancer outcomes) especially affect populations residing in medically underserved areas (MUAs) and health professional shortage areas (HPSAs). MUAs consist of rural communities, including rural Native American communities, and metropolitan communities throughout the nation. The presence of additional medical conditions in cancer survivors that require specialty medical care and routine follow-up (e.g., CVD, type 2 diabetes) can further amplify disparities.

Organizations, public health professionals, and healthcare professionals can collaborate to address cancer disparities and improve health for all, including Veterans, active-duty service members, and their families, through community-clinical linkages (CCLs). CCLs are connections established along the cancer care continuum between healthcare systems or practices, public health (including state or county government), and multi-sector organizations (including community-based and nonprofit organizations).<sup>7</sup> CCLs improve overall health in environments where people live, work, play, and learn.<sup>7</sup>

Establishing, enhancing, and expanding CCLs can help:

- Address social determinants of health (SDOH), non-medical drivers of health, or social drivers of health (e.g., low income, food insecurity, low levels of health literacy, transportation challenges, housing instability) associated with cancer and other chronic diseases,
- Improve early screening and treatment in MUAs and HPSAs, and
- Improve follow-up and treatment after abnormal and positive screens, including breast, colorectal, prostate, and lung cancer screenings.

All state and county government programs, sectors, healthcare settings, public and private organizations, and communities have a role in improving cancer outcomes at every level. Identifying, minimizing, and resolving SDOH barriers and CCLs are important at every level of prevention in order to achieve and sustain favorable cancer outcomes:<sup>8,9</sup>

Stage of Cancer Prevention	Examples
<b>Primary Prevention</b> Preventing cancer and reducing modifiable risks and exposures associated with the onset of cancer	<ul style="list-style-type: none"><li>• Vaccinations and immunizations</li><li>• Other prevention strategies adopted in environments where populations live, work, and play to reduce exposure to carcinogens and other risk factors</li></ul>
<b>Secondary Prevention</b> Screening and other interventions implemented to detect cancer during the earlier and more treatable stages to block its progression and prevent it from spreading, metastasizing, or recurring	<ul style="list-style-type: none"><li>• Routine screening measures such as:<ul style="list-style-type: none"><li>- mammograms (breast cancer),</li><li>- fecal immunochemical tests (colorectal cancer),</li><li>- colonoscopies (colorectal cancer),</li><li>- prostate-specific antigen tests (prostate cancer), and</li><li>- lung cancer screening (low-dose computed tomography)</li></ul></li><li>• Participation in genetic testing</li><li>• Risk-reduction surgery (e.g., the removal of precancerous lesions)</li><li>• Commercial tobacco cessation</li><li>• Risk reduction and ongoing management of comorbidities (e.g., CVD and type 2 diabetes) among populations diagnosed with cancer</li></ul>
<b>Tertiary Prevention</b> Interventions implemented in people diagnosed with cancer to reduce disease severity (e.g., morbidity or death), minimize negative effects of treatment, and manage the long-term effects associated with a cancer diagnosis and treatment	<ul style="list-style-type: none"><li>• Delivery of patient-centered services and care, including pain management and palliative care</li></ul>



# Recommendations for Establishing, Enhancing, and Expanding CCLs Along the Cancer Continuum (Prostate, Colorectal, Breast, Lung, and Pancreatic Cancers)

Category	Proposed Partner	Proposed Recommendations or Suggestions
National public health programs (e.g., National Comprehensive Cancer Control Programs (NCCCPs)) and state-level public health programs that support Veterans and/or military families (including families with low-income)	CDC's <a href="#">Million Hearts Campaign</a>	<ul style="list-style-type: none"> <li>Promote, enhance, or expand CCLs that address SDOH barriers among               <ul style="list-style-type: none"> <li>low-income cancer survivors, especially those considered at moderate to high risk of developing CVD, in MUAs and HPSAs, including in Native American communities, and</li> <li>low-income cancer survivors diagnosed with CVD in MUAs and HPSAs, including Native American communities.</li> </ul> </li> </ul>
	<a href="#">United Way 211</a>	<ul style="list-style-type: none"> <li>Establish partnerships or collaborations to create programs or services that address the unique health-related needs and non-medical or SDOH barriers faced by:               <ul style="list-style-type: none"> <li>Veterans diagnosed with cancer and their families,</li> <li>Active-duty military service members diagnosed with cancer and their families,</li> <li>National Guard members and Reservists diagnosed with cancer and their families,</li> <li>Low-income populations following a cancer diagnosis or cancer recurrence,</li> <li>Low-income populations residing in MUAs or HPSAs, including Native American communities, and</li> <li>Low-income women of child-bearing age, including those with a family history of cancer, residing in maternity care deserts.</li> </ul> </li> </ul>
	Emergency preparedness agencies, programs, or organizations and multi-sector organizations that focus on emergency preparedness, response, and recovery efforts	<ul style="list-style-type: none"> <li>Develop or revise state emergency preparedness, response, and recovery plans to account for low-income cancer survivors, and</li> <li>Include strategies for addressing SDOH challenges or barriers experienced during natural disasters in existing state government cancer plans, NCCCPs, health equity plans, or similar plans.</li> </ul>
	State Office of Rural Health or <a href="#">State Rural Health Associations</a>	<ul style="list-style-type: none"> <li>Develop or revise emergency preparedness, response, and recovery plans to incorporate low-income cancer survivors (including social SDOH challenges or barriers experienced during natural disasters), and</li> <li>Create plans that especially address barriers experienced by those residing in MUAs and HPSAs, including those in Native American communities.</li> </ul>
Local county/parish government programs	Nonprofit health systems or hospitals	<ul style="list-style-type: none"> <li>Develop or revise community health improvement plans (CHIPs), and community health needs assessments (CHNAs) that address emergency preparedness, response, and recovery plans among low-income cancer survivors,</li> <li>Include strategies to minimize and resolve SDOH challenges or barriers experienced during natural disasters,</li> <li>Promote telehealth appointments as a way to bridge gaps in care for people in MUAs and HPSAs, and<sup>13</sup></li> <li>Implement trainings on the basics of SDOH for healthcare professionals.<sup>13</sup></li> </ul>
	<a href="#">United Way 211</a>	<ul style="list-style-type: none"> <li>Consider establishing local partnerships or collaborations to create programs or services that address the unique health-related needs and non-medical or SDOH barriers faced by:               <ul style="list-style-type: none"> <li>Veterans diagnosed with cancer and their families,</li> <li>Active-duty military service members diagnosed with cancer and their families,</li> <li>National Guard members and Reservists diagnosed with cancer and their families,</li> <li>Low-income populations following a cancer diagnosis or cancer recurrence,</li> <li>Low-income populations residing in MUAs or HPSAs, including in Native American communities, and</li> <li>Low-income women of child-bearing age, including those with a family history of cancer, residing in maternity care deserts.</li> </ul> </li> </ul>
	Emergency preparedness organizations	<ul style="list-style-type: none"> <li>Develop or revise local county, city/parish, and rural town emergency preparedness, response, and recovery plans to account for low-income cancer survivors, including SDOH challenges or barriers experienced during natural disasters, and</li> <li>Disseminate plans to multi-sector partners and grantees (e.g., health systems, nonprofit organizations, community-based organizations, faith-based organizations).</li> </ul>
	Diabetes Self-Management Education and Support (DSMES) Programs	<ul style="list-style-type: none"> <li>Consider establishing partnerships or collaborations that:               <ul style="list-style-type: none"> <li>Expand DSMES programs to MUAs and HPSAs, including in Native American communities, to increase access among low-income cancer survivors diagnosed with type 2 diabetes, and</li> <li>Enhance DSMES programs by incorporating CCLs that identify and resolve SDOH barriers among low-income cancer survivors diagnosed with type 2 diabetes.</li> </ul> </li> </ul>
Multisector organizations (e.g., nonprofit organizations, community-based organizations, faith-based organizations) that provide support to veterans and/or military families (including low-income families)	CDC's <a href="#">National Diabetes Prevention Program</a> (DPP)	<ul style="list-style-type: none"> <li>Consider establishing partnerships or collaborations that:               <ul style="list-style-type: none"> <li>Expand DPPs to MUAs and HPSAs, including in Native American communities, to increase access among low-income cancer survivors diagnosed with prediabetes or gestational diabetes, and</li> <li>Enhance existing DPPs by incorporating CCLs that identify and resolve SDOH barriers among low-income cancer survivors diagnosed with prediabetes or gestational diabetes.</li> </ul> </li> </ul>
	<a href="#">Live to the Beat Campaign</a>	<ul style="list-style-type: none"> <li>Become a member of the Community Ambassador Network to help develop tailored messages to meet the needs, perspectives, values, and literacy levels of communities to reduce CVD risks among low-income cancer survivors, and</li> <li>Expand the Community Ambassador Network to MUAs and HPSAs, including Native American communities, to increase awareness of CVD risks among low-income populations at high risk for cancer.</li> </ul>
Patient Navigators (PNs) and Community Health Workers (CHWs)	Nonprofit health systems or hospitals	<ul style="list-style-type: none"> <li>Develop or revise CHIPs and CHNAs that incorporate PN and CHW recommendations or suggestions as part of emergency preparedness plans for low-income cancer survivors,</li> <li>Include SDOH challenges or barriers experienced during natural disasters in CHIPs and CHNAs, and</li> <li>Identify and address SDOH experienced by clients who are navigating a cancer diagnosis.<sup>13</sup></li> </ul>



## Resources

Organization	Resource	Purpose
CDC	<a href="#">National Breast and Cervical Cancer Early Detection Program</a>	Cancer screening for underinsured and uninsured women with low incomes
	Tips From Former Smokers Campaign Resources: <a href="#">Military Service Members and Veterans</a>	Tobacco cessation resources with real stories from Veterans and free services for military families
Department of Defense	<a href="#">YouCanQuit2 Campaign</a>	Free tobacco cessation resources for service members
Department of Health and Human Services	<a href="#">Preventive Health Services</a>	List of preventive health services that are covered by most health plans
Indian Health Service	<a href="#">Healthcare locations</a>	Map of Indian Health Service, Tribal, and Urban Indian Health Program facilities
NCI	<a href="#">Cancer Support Services</a>	Free support services for people with cancer
Smokefree.gov	<a href="#">SmokefreeNATIVE</a>	Free commercial tobacco cessation resources for American Indian and Alaska Native adults and teens
	<a href="#">SmokefreeVET</a>	Free commercial tobacco cessation resources for Veterans
Veterans Administration (VA)	<a href="#">National Oncology Program</a>	VA cancer care program for Veterans
	<a href="#">Cancer Screening Services for Veterans</a>	Breast, cervical, colorectal, and lung cancer screening information for Veterans
	<a href="#">Expanding Access: Bringing Cancer Care Closer to Veterans</a>	Video discussing VA's Close to Me Program, which brings cancer care closer to Veterans' homes
	<a href="#">Communications and Educational Resources</a>	Information and resources for all stages of the cancer continuum (colorectal, breast, lung, prostate, bladder, and cervical) for Veterans
	<a href="#">Lung Cancer Screening Patient Education Fact Sheet</a>	Lung cancer screening access and eligibility fact sheet
CancerCare	<a href="#">Building Connections as a Veteran: Resources and Support</a>	Resources and support for Veterans with cancer, including those who are uninsured
American Cancer Society (ACS)	<a href="#">United States Military Veterans and Cancer</a>	Resources for Veterans with cancer, including transportation, housing, and financial support
	<a href="#">Road to Recovery</a>	Free transportation assistance for people with cancer
Extended Stay America and ACS	<a href="#">Extended Stay America</a>	Partnership to provide temporary housing for people receiving cancer treatments
Mercy Medical Angels	<a href="#">Free Non-Emergency Medical Transportation Service</a>	Free non-emergency medical transportation services for people undergoing on-going treatment
National Association of Community Health Centers	<a href="#">State Level Health Center Data &amp; Maps</a>	State data and maps, including Federally Qualified Health Centers (FQHCs) and Community Health Centers providing services to Veterans and military families in rural and metropolitan communities
National Breast Cancer Foundation	<a href="#">Military Women's Patient Relief Fund</a>	Financial support fund for military women with breast cancer
National Colorectal Cancer Roundtable and ACS	<a href="#">Colorectal Cancer Data Dashboard</a>	Dashboard of colorectal cancer data, including colorectal cancer screening rates, healthcare settings (Commission of Cancer hospitals, FQHCs, NCI Designated Cancer Centers), and SES factors, such as educational attainment levels
Radiological Society of North America and the American College of Radiology	<a href="#">RadiologyInfo.org</a>	Website with patient resources on radiology
SMHN	<a href="#">SelfMade Health Network Compendium of Resources: Bridging Sectors to Improve Health Equity Outcomes Among Low-Income Populations</a>	Collection of SMHN resources, including descriptions, topics, focus populations, and audiences for each resource
	<a href="#">Pathways to Health Equity: Expanding Community-Clinical Linkages to Improve Health Outcomes Among Low-Income Populations</a>	Free 5-part webinar series with experts in the field discussing ways to improve health outcomes by building or expanding CCLs
	<a href="#">Enhancing Community-Clinical Linkages to Expand Lung Cancer Screening Nationwide</a>	Free webinar with experts in the field discussing barriers to lung cancer screening and ways to address them



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