



**WYOMING
CANCER COALITION**

**2026 - 2030
Wyoming Cancer Plan**

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Turning Hope into Action

“You have cancer.”

Three words no one ever wants to hear. Yet one out of every two men and one out of every three women in the U.S. will be diagnosed with cancer at some point in their lifetimes.¹ In Wyoming, cancer is the second leading cause of death, taking over 1,000 lives each year.² Survivors often face long-term physical, mental, and financial consequences that follow them for years after their treatments are over.

However, among the stories of tragedy, there are also many reasons for hope. **Today, 70% of people diagnosed with cancer live five or more years past their diagnosis.**¹ This progress did not happen by accident; it results from decades of advances in cancer prevention, early detection, and treatment. We know what works; now we need to carry out the strategies that have been proven to reduce the burden of cancer in our communities.

The Wyoming Cancer Plan challenges stakeholders from across the state to come together and take action to continue reducing the burden of cancer. It consists of goals and strategies carefully chosen for their combination of feasibility and promise in Wyoming, particularly in rural communities. Healthcare providers, survivors, non-profits, community organizations, worksites, universities, and public health professionals can leverage one another's resources and expertise to carry out the strategies through the Wyoming Cancer Coalition (WYCC).

Everyone with an interest in decreasing the burden of cancer in Wyoming can play a role in continuing the effort to make cancer a problem of the past. Please join us.

Thank you!

The WYCC relies on individual coalition members to develop each five-year cancer plan and to work together to reduce the burden of cancer in Wyoming. We want to extend our sincerest thanks to the survivors and caregivers, non-profit and volunteer organizations, healthcare providers, public health professionals, and many others, who came together to develop this iteration of the Wyoming Cancer Plan and who will spend future years driving forward the WYCC's mission.



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Stefan Johansson
Director

Mark Gordon
Governor

March 1, 2026

Ref.: J-2026-164

Dear Wyoming Resident:

This year, we arrive at a momentous occasion: the 20th anniversary of the Wyoming Cancer Plan. This milestone is a testament to two decades of strong commitment and impact in the fight against cancer. As we reflect on the journey since the plan's inception, we are filled with pride and gratitude for the progress we have collectively achieved.

Over the past 20 years, our efforts have transformed the landscape of cancer prevention, diagnosis, and treatment. What were once considered distant aspirations have, through diligent work and innovative thinking, become tangible realities and significant improvements in the lives of individuals and their families. The Cancer Plan has been a catalyst for change, from innovative approaches to earlier cancer screening and detection to expanding support for survivors and their families.

As we reflect on the achievements of the past 20 years, we are more motivated than ever to continue this critical work. The progress we have made provides a strong foundation, not just for continued effort, but for renewed inspiration to push the boundaries of what is possible.

We are committed to building upon our successes and tackling ever-increasing challenges with renewed vigor. We are confident that we can achieve our ultimate goal of reducing the burden of cancer for Wyoming residents with the continued support and collaboration of coalition members and organizations.

Thank you, coalition members, partner organizations, and stakeholders, for being an integral part of this extraordinary journey. Together, we are making a difference, one breakthrough, one life, and one step at a time.

Sincerely,

A handwritten signature in blue ink, appearing to read "Stefan Johansson".

Stefan Johansson, Director
Wyoming Department of Health

SJ/sj

c: Star Jones, CPH, CPM, Cancer and Chronic Disease Prevention Unit Manager, Public Health Division
Stephanie Sandoval, MHSA, MBA, Senior Administrator, Public Health Division

20 Years of Progress

In October 2005, the Wyoming Department of Health unveiled the state's first comprehensive cancer control plan. The plan emphasized early detection, improved access to care, cancer prevention, and education. These priorities remain central to cancer control today.

This moment marked the beginning of a coordinated statewide effort to reduce the burden of cancer across Wyoming's rural communities. State leaders, healthcare providers, cancer survivors, and community members came together with a shared vision: that fewer Wyoming residents would develop cancer, cancer diagnoses would be detected early, and those diagnosed would receive the care and support they need from diagnosis, through treatment, and beyond.

While progress has been made, cancer remains one of the leading causes of death in Wyoming. The 2026-2030 Wyoming Cancer Plan builds upon the foundation established in 2005 and reflects the evolving needs of Wyoming communities. By strengthening partnerships, expanding access to screening and treatment, and addressing rural health challenges, Wyoming continues its commitment to reducing the impact of cancer for all residents.



The image above is a newspaper clipping from the Casper Star-Tribune announcing the creation of Wyoming's first statewide comprehensive cancer control plan.

Cancer Burden in Wyoming

2,963

New cancers diagnosed each year, on average²

70%

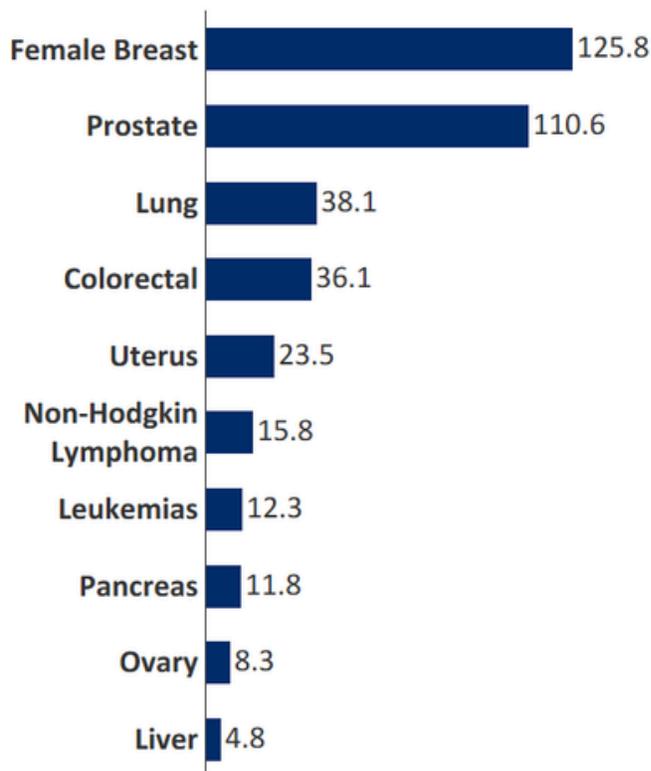
Of Wyoming residents diagnosed with cancer live 5+ years after their diagnosis³

1,070

Deaths from cancer in Wyoming each year, on average²

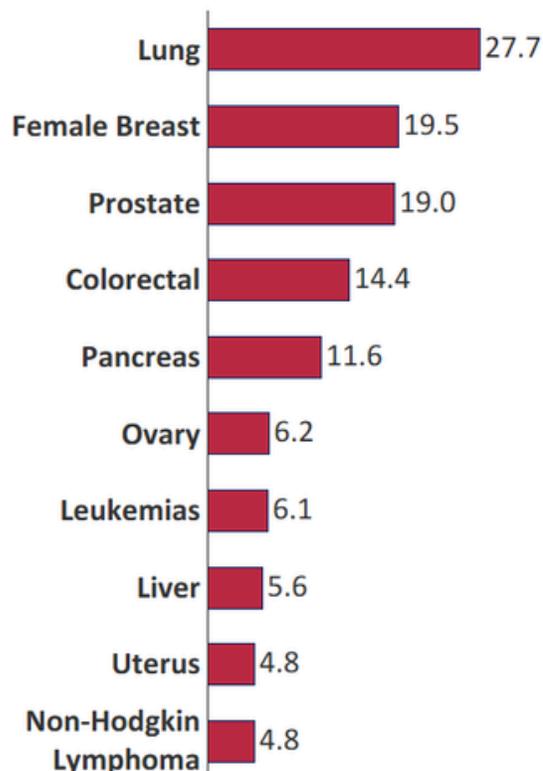
Top 10 New Cancers Diagnosed in Wyoming²

Age-Adjusted Rates per 100k People



Top 10 Causes of Cancer Death in Wyoming²

Age-Adjusted Rates per 100k People



Overall, the rate of new cancers being diagnosed (incidence) in Wyoming is lower than the national average. However, the death rate is similar to the U.S. average. Furthermore, incidence rates for four of the five most commonly diagnosed cancers (breast, prostate, colorectal, and melanoma) are rising, despite the fact that we have ways to prevent many of those cases from occurring.⁴ The charts above highlight the most commonly diagnosed cancers in Wyoming, as well as the most common causes of death.

Cancer Burden in Wyoming

Cancer Screening in Wyoming

Importantly, Wyoming's cancer screening rates are among the worst in the country. As of 2022, only 60% of people eligible for colorectal cancer (CRC) screening reported being up-to-date with the latest screening guidelines.⁵ This is especially alarming because CRC can almost always be prevented if people are screened with a colonoscopy, which allows doctors to find and remove pre-cancerous lesions before they become cancer. Screening rates are also low for breast and cervical cancers, with just 60% and 72% meeting screening guidelines, respectively.⁵

Lung Cancer in Wyoming

It is also important to note the changing trends in lung cancer. Due largely to the progress made on tobacco control over the past several decades, lung cancer incidence and mortality rates are both decreasing. However, **lung cancer continues to be the deadliest type of cancer in Wyoming**, killing more people than breast and prostate cancers combined. Lung cancer screening options are becoming more readily available throughout the state, and concerted efforts in this area could have a large impact on lung cancer mortality in the coming years.



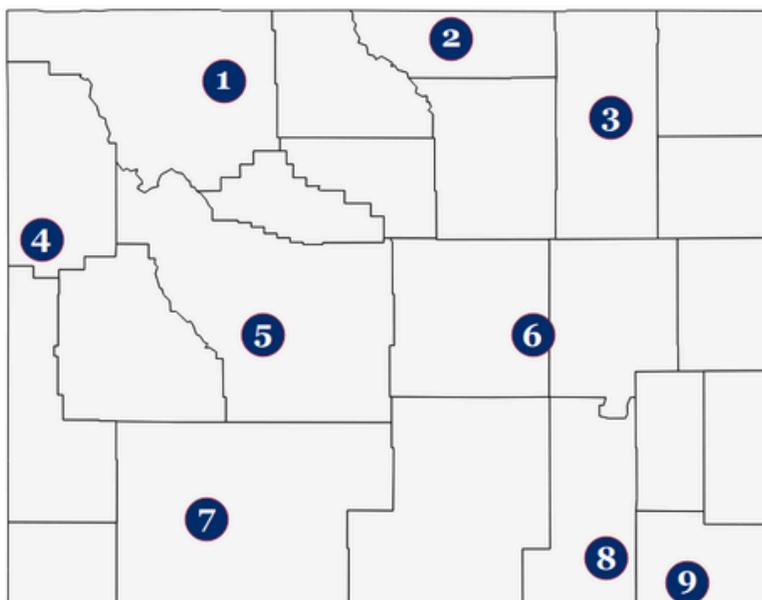
Healthcare Access in Wyoming

Though healthcare access can be a challenge in a variety of ways, Wyoming’s primary distinction is its rurality. Wyoming is the second least densely populated state, behind only Alaska. Due to the mountainous geography and low population density of the state, many residents face barriers associated with travel. For people living in remote communities, travel can be especially burdensome due to winter road closures and dangerous weather conditions.

Rurality can also impact healthcare access through shortages of primary care clinicians and specialists. Twenty of Wyoming’s 23 counties are considered primary care Healthcare Professional Shortage Areas (HPSA), and all counties are considered mental health HPSAs.⁶ Travel and workforce shortages, along with insurance coverage, internet access, health literacy, and concerns about privacy, lead many rural residents to postpone essential care or forgo care altogether.

Wyoming Cancer Centers

Currently, there are nine cancer centers in Wyoming, but patients with complex cancer diagnoses may still need to travel outside of the state to access treatments. There are also no designated pediatric cancer care centers in Wyoming, requiring all children diagnosed with cancer to leave the state in order to access treatments and follow-up care.



1. Big Horn Basin Cancer Center, Cody, WY
2. Welch Cancer Center, Sheridan, WY
3. Heptner Cancer Center, Gillette, WY
4. St. John’s Cancer Center, Jackson, WY
5. Rocky Mountain Oncology, Lander, WY
6. Rocky Mountain Oncology, Casper, WY
7. Sweetwater Regional Cancer Center, Rock Springs, WY
8. Meredith and Jeannie Ray Cancer Center, Laramie, WY
9. Cheyenne Regional Medical Center, Cheyenne, WY

About the Wyoming Cancer Coalition

The Wyoming Cancer Coalition (WYCC) is a group of nearly 200 Wyoming residents and cancer professionals working collaboratively to guide and implement the data-driven strategies in this plan. Throughout the state, the WYCC addresses cancer prevention, early detection, access to healthcare, diagnosis and treatment, and quality of life services to lessen the impact of cancer.

The WYCC works to:

1. Increase awareness of the cancer burden in the state
2. Improve outcomes for those diagnosed with cancer
3. Establish and grow partnerships between individuals and organizations
4. Enhance partners' abilities to help reduce the burden of cancer in Wyoming
5. Provide a neutral setting for competing healthcare agencies to work together to advance common cancer control issues

Sponsored by the Wyoming Cancer Program within the Wyoming Department of Health, the WYCC also provides funding to programs and projects that advance priorities of the Wyoming Cancer Plan and gives technical assistance, free or reduced-cost materials, and training to partners to increase cancer control work in their communities.

Our Partners

The WYCC relies on many partners. These partnerships support the Coalition in connecting local, state, and federal comprehensive cancer control initiatives and efforts, providing data to inform the WYCC's efforts, and providing leadership support in implementing the strategies outlined in this plan.

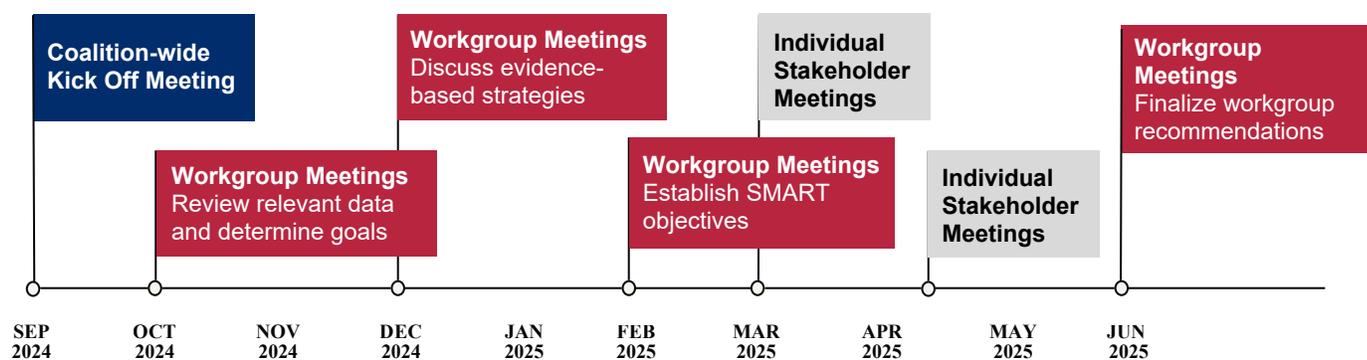
Our Members

The WYCC is made up of stakeholders from various sectors. Among others, members include cancer survivors and caregivers, non-profit and volunteer organizations, healthcare providers, and public health professionals. The WYCC's work is driven and directed by a Steering Committee, while action occurs through the strategic and focused efforts of four workgroups: Prevention, Screening and Early Detection, Survivorship, and Childhood Cancer.

Developing the 2026-2030 Wyoming Cancer Plan

The 2026-2030 Wyoming Cancer Plan was developed based on the unique needs and assets of Wyoming. To prioritize goals and strategies, the WYCC began by gathering the most recent data on demographics, cancer incidence, mortality, screening, and lifestyle behaviors (e.g., smoking). These data were presented during a WYCC kick-off meeting as well as during workgroup sessions to identify gaps and opportunities. During this meeting, WYCC members participated in polls and group discussions where they shared successful efforts implemented to date, as well as barriers experienced in their work. Topic areas and evidence-based strategies were identified based on relevance and effectiveness at addressing needs identified in the data.

After these discussions, priority goals and strategies were drafted for the Wyoming Cancer Plan. These were shared at workgroup meetings and individually with key stakeholders to gather feedback, ensuring the goals and strategies were feasible based on current efforts and aligned with existing statewide initiatives. Strategies were also identified to address different levels of change (i.e., individual, organizational, community-wide) and settings where change can occur (e.g., health systems, community organizations, state and local government, schools, worksites, etc.). Strategy implementation will occur during regular workgroup meetings over the next five years. During these meetings, specific action plans for strategy implementation and follow-up will be developed and workgroups will continue to collaborate to meet objectives outlined in the Plan.



Monitoring and Evaluation

Specific, measurable, and actionable goals with corresponding metrics are a key component of this Plan. Measuring progress of the goals within the Plan will allow the WYCC to regularly evaluate the effectiveness of its strategies, identify areas of opportunity, and continue to improve implementation of activities. Annual WYCC meetings provide an ideal place to share progress updates and disseminate findings. They also serve as a venue to recognize the work being accomplished, celebrate successes, and build on positive momentum.

Additional Opportunities for Reducing Cancer Risk

The Wyoming Cancer Coalition considered a variety of factors, including feasibility, available resources, stakeholder capacity, and alignment with existing initiatives and partner organizations, when selecting the strategies included in the Wyoming Cancer Plan. That being said, there are many other opportunities to make an impact on cancer prevention and control in Wyoming. Included below are additional opportunities for implementing policy, system or environmental changes to create and sustain long-term change that may help guide WYCC efforts beyond what were identified by coalition members as areas of focus for this five-year plan.

Environmental and Occupation Health

- Address environmental health risks by examining the impact of occupational exposures
- Expand smoke-free policies in communities, public places, and workplaces
- Promote radon testing during the sale of residential properties and day-care facilities

Healthy Communities

- Improve access to healthy foods to reduce food deserts
- Improve access to safe outdoor and indoor recreational spaces

Access to Cancer Prevention, Screening, and Support Services

- Partner with employers to incentivize on-site cancer screenings or time-off policies
- Support efforts to increase reimbursement for navigation services
- Improve access to low-cost genetic testing

Goals at a Glance



Prevention

Goal 1: Prevent and reduce alcohol use

Goal 2: Prevent and reduce tobacco use

Goal 3: Increase HPV vaccination

Goal 4: Increase protective behaviors from UV radiation exposure

Goal 5: Increase awareness of the relationship between radon and cancer risk

Screening and Early Detection

Goal 6: Increase breast cancer screening

Goal 7: Increase cervical cancer screening

Goal 8: Increase colorectal cancer screening

Goal 9: Increase lung cancer screening

Survivorship

Goal 10: Expand access to resources for cancer survivors

Goal 11: Expand cancer care provider awareness of survivor needs and available resources

Childhood Cancer

Goal 12: Increase access to quality treatment for children and adolescent/young adults (AYA) with cancer and their caregivers

Goal 13: Increase access to long-term follow-up care for survivors of childhood and AYA cancer in their communities

Goal 14: Expand resources for childhood and AYA cancer patients and caregivers

Prevention

There is no guaranteed way to prevent cancer, but many things, including our genes, our health behaviors, and the environment around us, may increase or decrease our risk of getting cancer. In fact, about 40% of all cancer cases may be preventable.¹ Though participating in healthy behaviors can help to reduce cancer risk, some individuals, like those living in food deserts or without access to a safe and affordable place to be physically active, may face additional challenges that make healthy behaviors extremely challenging. With that in mind, cancer prevention isn't just about individuals making healthy choices, it's about providing communities with the conditions needed to allow people to live active and healthy lives in safe environments.

To reduce the risk of developing cancer, individuals can take steps to improve their health:

- Choosing not to smoke or to quit smoking, and reducing exposure to secondhand smoke
- Eating a balanced, nutritious diet
- Staying physically active
- Maintaining a healthy body weight
- Limiting alcohol consumption
- Protecting skin from excess UV exposure
- Reducing exposure to environmental carcinogens by testing for radon
- Preventing infections linked to cancer through vaccination, safe practices, and screening (i.e., HPV, HIV, Hepatitis B)

The WYCC Prevention Workgroup chose to focus their efforts in five specific topic areas of cancer prevention, selected based on the unique needs of Wyomingites and the potential impact and feasibility of efforts.



Alcohol Use

Goal 1: Prevent and reduce alcohol use

Strategies

- Improve community awareness of the relationship between alcohol and cancer/other health outcomes
- Promote alcohol prevention and cancer risk materials (i.e., Let's Talk Wyoming) at worksites
- Support health educators to incorporate messaging of the relationship between alcohol and cancer risk into education materials
- Work with healthcare partners to promote best practices for discussing alcohol use with patients

Objectives



Increase the % of high schoolers who report a perceived risk of harm from 5+ drinks of alcohol from **62%** to **66%** by 2030.

Baseline: Wyoming Prevention Needs Assessment, 2024



Decrease the % of adults who drink 7+ drinks per week from **25%** to **22%** (among those who drink alcohol) by 2030.

Baseline: Wyoming Behavioral Risk Factor Surveillance System, 2023

Seven

different types of cancer are associated with alcohol use (mouth, throat, voice box, esophagus, liver, colorectal, & female breast)⁷

5%

of all cancer cases may be attributable to alcohol use¹

6.5%

of Wyoming residents are heavy drinkers, compared to 6.1% nationally⁵

Tobacco Use

Goal 2: Prevent and reduce tobacco use

Strategies

- Promote tobacco prevention and cancer risk materials (e.g., Let’s Talk Wyoming) at worksites
- Educate specialty care providers (i.e. cancer centers and mental health professionals) on the availability and benefits of the Quitline
- Support implementation of comprehensive nicotine-free policies in high schools

Objectives



By 2030, decrease the number of adults who reported experiencing secondhand smoke at their workplace from **17%** to **13%**.

Baseline: Wyoming Adult Tobacco Survey, 2023



By 2030, increase the number of adults who use Commercial Tobacco or Nicotine who were advised to quit and were offered assistance by a health professional to help them quit from **26%** to **30%**.

Baseline: Wyoming Adult Tobacco Survey, 2023



By 2030, increase the number of high schoolers who report great risk of harming themselves if they smoke one or more packs of cigarettes per day from **50%** to **60%**.

Baseline: Wyoming Prevention Needs Assessment, 2024

12

different types of cancers are caused by tobacco use, including the deadliest type of cancer- lung cancer¹

Wyoming ranks

13th

in the U.S. for current cigarette use (where 1 is the highest)⁵

86%

of all lung cancer cases are estimated to be attributable to smoking¹

HPV Vaccination

Goal 3: Increase HPV Vaccination

Strategies

- Improve community awareness in 18-45 year-olds of what the HPV vaccine is, why vaccination is important, and the relationship between HPV and cancer risk
- Work with healthcare partners to implement best practices for encouraging vaccine uptake, including beginning vaccination at age 9
- Partner with higher education institutions (i.e., universities, trade schools, etc.) and PHN offices to increase vaccine uptake in adults aged 18-26

Objectives



By 2030, increase the percentage of adolescents aged 13-15 up-to-date on HPV vaccination coverage from **48%** to **57%**.

Baseline: TeenVaxView, 2023



By 2030, increase the percentage of adults aged 18-26 with 2 doses of HPV vaccine from **46%** to **50%**.

Baseline: Wyoming Immunization Registry, 2024

HPV, or Human Papillomavirus, is a common virus that can cause

six

types of cancer¹

At least

91%

of cervical carcinomas are caused by HPV infections⁸

Sun Safety

Goal 4: Increase protective behaviors from UV radiation exposure

Strategies

- Promote consistent messaging on the importance of sun protection and encourage sun safe behaviors
- Partner with public health nursing offices to improve access to sunscreen
- Partner with city and county parks and recreation departments to improve sun protective behaviors in outdoor public spaces
- Incorporate sun safety into prevention policies in schools, workplaces, and public spaces

Objectives

10

By 2030, support the adoption of sun safe policies in at least **10 additional public institutions**, including schools and worksites.

25

By 2030, partner with public health nursing offices, schools, worksites, and parks to improve community access to sunscreen by creating or enhancing at least **25 new sun-safe environments** (e.g., access to sunscreen dispensers, shade structures, etc.).

30k

By 2030, develop coordinated and consistent messaging on sun safe behaviors that reaches at least **30,000 residents** through local and statewide campaigns.

92%

of melanoma cases are attributable to UV radiation¹

Melanoma is the

5th

most commonly diagnosed cancer in Wyoming⁹

Radon

Goal 5: Increase awareness of the connection between radon and cancer risk

Strategies

- Utilize cancer centers and public libraries to educate people on the relationship between radon and cancer risk and the importance of radon testing and mitigation
- Partner with the Wyoming Medical Society to promote radon training for primary care providers
- Work with public libraries to distribute radon monitors and test kits
- Educate radon-related professionals (e.g., contractors, real estate agents, healthcare providers) on the relationship between radon and cancer risk and the importance of testing and mitigating homes for radon
- Work with radon testing laboratories to better understand existing data on radon testing

Objectives

1

By 2027, work with radon testing laboratories to establish **one baseline data metric for residential testing uptake** in Wyoming.

1k

By 2030, work with public libraries to loan radon monitors to **1,000 residents** across the state.

31

By 2030, distribute educational materials through **cancer centers and at least one local library in each county**.

50

By 2030, train at least **50 radon-related professionals** on the relationship between radon and cancer and the importance of testing and mitigating homes for radon.

All 23

of Wyoming counties have home and buildings with elevated radon levels¹⁰

Among non-smokers, radon is the

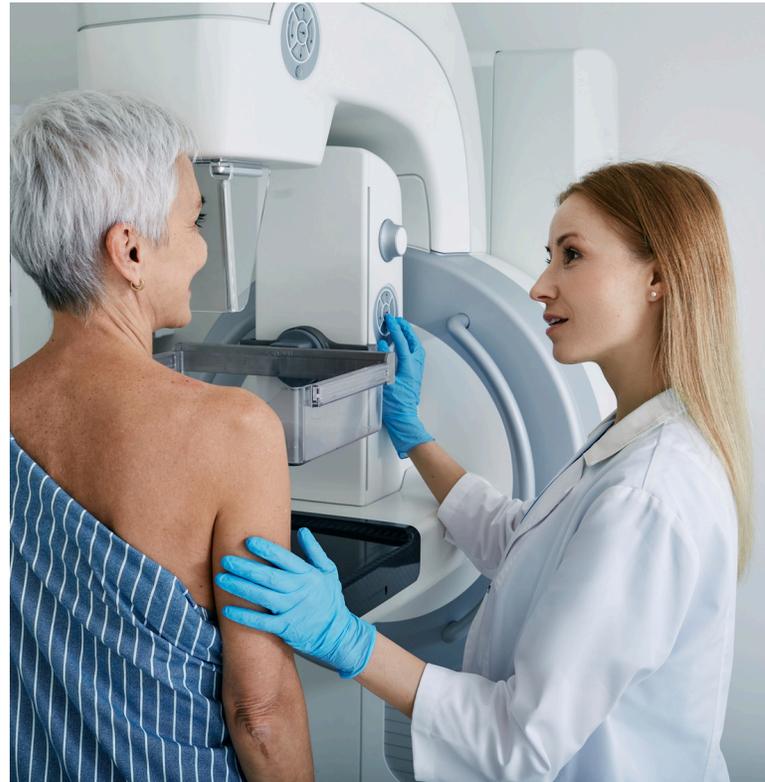
#1

cause of lung cancer¹¹

Screening & Early Detection

Cancer screening helps catch cancer early, often before symptoms are even present. In some cases, cancer screenings can even prevent cancer by identifying and removing abnormal cells before they become something more serious. The earlier cancer is found, the better the chances of successful treatment. The United States Preventive Services Task Force (USPSTF) provides recommendations for breast, cervical, colorectal, and lung cancer screening that include guidelines for who should be screened and how often based on characteristics like age, sex, and other risk factors.

The WYCC Screening & Early Detection Workgroup chose to focus their efforts on four topic areas based on relevant screening data, the availability of screening tests, and the potential impact and feasibility of the workgroup's efforts.



Breast Cancer

Goal 6: Increase breast cancer screening rates

Strategies

- Improve community awareness of breast cancer screening guidelines and the differences between diagnostic, screening, and supplemental exams
- Support patient navigators to improve enrollment in the WCP Screening Program and follow-up to screening
- Educate healthcare partners, including clinicians and patient navigators, on the financial resources available to support breast cancer screening (e.g., develop an onboarding process to inform new hires at healthcare organizations about financial resources available to support screening and follow-up)
- Promote training for healthcare partners on the best practices for implementing interventions to increase breast cancer screening

Objectives



By 2030, increase the percentage of women aged 40+ who have had a mammogram in the past 2 years from **60%** to **65%**.

Baseline: Behavioral Risk Factor Surveillance System, 2022

51st

of U.S. states and the District of Columbia for breast cancer screening⁵

Cervical Cancer

Goal 7: Increase cervical cancer screening rates

Strategies

- Improve community awareness of screening guidelines and the relationship between HPV and cervical cancer
- Promote cost assistance programs like the WCP Screening Program for cervical cancer screening
- Promote training for healthcare partners on the best practices for implementing interventions to increase cervical cancer screening
- Support patient navigators to improve enrollment in the WCP Screening Program and follow-up to screening

Objectives



By 2030, increase the percentage of women who have been screened for cervical cancer from **62%** to **68%**.

Baseline: Behavioral Risk Factor Surveillance System, 2022



By 2030, decrease the percentage of women overdue for their cervical cancer screening (5+ years since their last exam) from **30%** to **20%**.

Baseline: Behavioral Risk Factor Surveillance System, 2022

51st

of U.S. states and the District of Columbia for cervical cancer screening⁵

Colorectal Cancer

Goal 8: Increase cervical cancer screening rates

Strategies

- Improve public awareness on screening guidelines and type options, including targeted outreach to 45-55 year-olds
- Work with healthcare organizations to:
 - promote resources to improve screening and follow-up workflows
 - establish 80% screening rate goals
 - promote flexible screening options including FIT, stool DNA testing, and colonoscopy

Objectives



By 2030, increase the percentage of adults aged 45-75 who meet the USPSTF colorectal cancer screening guidelines from **60%** to **65%**.

Baseline: Behavioral Risk Factor Surveillance System, 2022

49th

of U.S. states and the District of Columbia for colorectal cancer screening⁵

Nearly

1 in 3

of Wyoming residents aged 45-75 years-old have never been screened for colorectal cancer⁵

Lung Cancer

Goal 9: Increase lung cancer screening rates

Strategies

- Improve community awareness of screening guidelines and the availability of lung cancer screening
- Improve access to low-dose CT testing for lung cancer screening
- Work with healthcare organizations to:
 - incorporate lung cancer screening into clinic workflows
 - identify clinic champions to advance lung cancer screening efforts
 - promote the use of shared decision-making tools and risk calculators
 - promote provider training (e.g., shared decision making and screening eligibility)

Objectives



By 2030, increase the percentage of eligible adults aged 50-80 who are current and former smokers who had CAT/CT scan in last year from **7%** to **10%**.

Baseline: Behavioral Risk Factor Surveillance System, 2022



By 2030, collaborate with at least **five healthcare organizations** to identify clinic champions, implement clinical workflows, and promote provider training on lung cancer screening.

51st

of U.S. states and the District of Columbia for lung cancer screening¹²

236

deaths from lung cancer in Wyoming in 2023—more than breast and prostate cancer combined. Lung cancer kills more people than any other type of cancer¹³

Lung cancer screening

decreases

lung cancer mortality¹²

Survivorship

A person is considered a cancer survivor from the day of diagnosis through the rest of their lives, regardless of whether they are in treatment, disease-free, or at the end of life. In Wyoming, there are over 33,000 people who fit this definition. That means that roughly 5.5% of Wyoming's population - or one in every 18 individuals in the state- has been diagnosed with cancer.

Cancer survivors face many unique physical, emotional, and practical challenges. The Wyoming Cancer Survivors Needs Assessment, conducted in 2022, found that over half of cancer survivors in Wyoming reported concerns in the following areas:

- Fatigue
- Pain
- Cognitive impairment
- Neuropathy
- Anxiety
- Depression
- Poor body image
- Trouble paying for medical bills
- Trouble paying for non-medical costs

The strategies identified by the Survivorship Workgroup aim to expand access to resources for cancer survivors and improve cancer care provider awareness of survivor needs and the resources available to support survivors.



Resources

Goal 10: Expand access to resources for cancer survivors

Strategies

- Work with healthcare partners and community organizations to improve access to:
 - Resources that meet the practical needs of survivors, including financial and transportation assistance
 - Supportive care resources that support management of long-term needs, side effects, and symptoms of cancer treatment
 - Resources to address the mental, behavioral, and sexual health needs of survivors
- Work with healthcare partners to improve access to patient navigation services for survivors

Objectives

5

By 2030, develop or distribute at least **five videos or other resources** related to supportive care, including hospice and palliative care, for cancer survivors.

5

By 2030, develop or distribute at least **five videos or other resources** related to sexual health and body image for cancer survivors.

10

By 2030, train at least **10 volunteers or care providers** to conduct support group sessions for cancer survivors and caregivers.

10

By 2030, train **10 patient navigators or social workers** at cancer centers on financial resources for cancer survivors.

All

Wyoming counties are mental health professional shortage areas⁶

62%

of Wyoming cancer survivors who sought help for their financial needs felt that resources were hard to find¹⁴

Training

Goal 11: Expand cancer care provider awareness of survivor needs and available resources

Strategies

- Promote trainings for patient navigators on how to identify survivor needs and refer to supportive care resources
- Promote trainings for primary care clinicians on survivor needs and resources
- Promote trainings for mental health professionals on the best ways to support survivors

Objectives

10

By 2030, add at least **10 training resources** for patient navigators, primary care clinicians, and mental health professionals focused on survivorship care to the WYCC website to increase awareness of survivorship needs and available resources.

20%

of cancer survivors report poor physical health, compared to 11% of those without a cancer diagnosis⁵

87%

of Wyoming cancer survivors reported experiencing anxiety, while only 36% sought help for their anxiety¹⁴

Childhood Cancer

On average, 21 children in Wyoming are diagnosed with cancer every year. Though cases are rare, the lack of childhood cancer treatment facilities in the state poses an additional barrier to accessing essential medical care. The strategies identified by the Childhood Cancer Workgroup focus on increasing access to quality treatment and long-term follow-up care for children, adolescents, and young adults diagnosed with cancer and expanding the availability of supportive resources for childhood cancer survivors and caregivers.



Treatment

Goal 12: Increase access to quality treatment for children and adolescent/young adults (AYA) with cancer and their caregivers

Strategies

- Educate treating institutions in Salt Lake City and Denver on how Wyoming cancer centers can support treatment
- Work with Wyoming cancer centers to identify a list of activities that health professionals are permitted to perform for pediatric cancer patients

Objectives

8

By 2030, identify **the pediatric cancer care support services that can be offered by all eight adult cancer centers** in Wyoming.

95%

of families of childhood cancer patients said treatment was a financial burden¹⁵

1 in 4

families report losing more than 40% of their annual household income is a result of treatment-related work disruption¹⁵

Long-term & Follow-up Care

Goal 13: Increase access to long-term follow-up care for survivors of childhood and AYA cancer in their communities

Strategies

- Promote clinician training focused on transitioning children and AYA patients into survivorship
- Educate caregivers and patients on participating in shared decision-making for children and AYA with cancer
- Promote existing organizations that work to empower those affected by childhood and AYA cancer (e.g., Stupid Cancer)

Objectives

20

By 2030, facilitate delivery of a CME-accredited pediatric cancer transition training for at least **20 clinicians**.

Wyoming has

zero

designated
pediatric cancer
centers

**Two-
thirds**

of childhood
cancer survivors
face at least one
chronic health
condition¹⁶

Resources

Goal 14: Expand resources for childhood and AYA cancer patients and caregivers

Strategies

- Collaborate with [Jason's Friends](#) to create a parental support network and promote sibling support groups
- Promote palliative care training for clinicians
- Work with Wyoming hospice providers to establish guidelines for childhood and AYA cancer patient care

Objectives

1

By 2030, establish **one parental support network** for families of pediatric cancer patients.

5

By 2030, establish guidelines for childhood and AYA patient care with at least **five hospice providers**.

1 in 3

families face work disruptions like having to quit or change jobs¹⁵

Siblings of a child with cancer experience challenges with **academic performance, self esteem, and interpersonal relationships**¹⁷

Sources

1. American Cancer Society, [Cancer Prevention and Early Detection Facts and Figures](#), 2025-2026
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