

Providing Care to American Indians in Rural Minnesota

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Session Objectives

- Increased understanding of tribal sovereignty and how it relates to health care delivery.
- Increased understanding of major health issues for Minnesota American Indians
- Increased understanding of the cancer burden for Minnesota American Indians and the importance of culturally appropriate, evidence based interventions in addressing that cancer burden
- Describe model of successful collaboration between Tribal and non-Tribal entities in addressing the cancer burden in Minnesota American Indians



American Indians In Minnesota


Presence in Minnesota

- AI make up 1.3% of MN population
 - 2.5% of Duluth population
 - 20% of Bemidji population
- 7 Ojibwe tribes in No. MN
- 4 Dakota tribes in So. MN
- Each tribe is a sovereign nation

Lakota and Ojibwe Doctors



Tribal Sovereignty

- Elected ruling body with tribal constitution and all mechanisms of self-governance
 - Sovereign to sovereign relationship with state and federal governments and other tribes
 - Sovereignty acknowledged by US government in multiple treaties
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Health Care for American Indians


Health Service Providers

- Indian Health Service
- Tribal Clinics
- Urban Programs

Leech Lake Diabetes Clinic



Eligibility for Services

- Members of all federally recognized tribes eligible for services offered at I.H.S. facilities and tribal clinics
 - Contract Health Service Delivery Areas (CHSDA)
 - MDH Sage Program
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Community Health Representatives

Nutrition Education at FDL



The CHR Program

- Established in 1968
- Funded through I.H.S.-CHR appropriations
- Community members who act as lay health educators
- Guided by medical professionals
- Wide range of activities

Major Health Issues in American Indians Communities



Major Health Issues Affecting MN American Indians (AI)

- AI Health Disparities
- Interrelated Health Issues
 - Smoking
 - Obesity
 - Lifestyle: Diet and Exercise
 - Diabetes
 - Heart Disease
 - Cancer

Health Disparities

Differences in the
incidence,
prevalence,
mortality,
and burden of diseases
and other adverse health conditions
that exist among specific population groups in the
United States.

~ National Institutes of Health (NIH)

Smoking

- Smoking contributes to multiple health issues including diabetes, cardiovascular and respiratory issues, and cancer
- In 2011, 31.5% of American Indians/Alaskan Natives (AI/AN) smoked cigarettes compared to 19.0% of U.S. population as a whole
- Northern Plains and Alaskan Natives have highest smoking rates in US, above 40%

Obesity

- American Indians have high rates of obesity
- Obesity linked to multiple health problems including diabetes, heart disease and cancer

Life Style

- Significant changes since colonization
 - Lean game and fresh produce replaced by diet high in animal fats and low in fresh fruits and vegetables
 - Lack of regular physical/outdoor activity
- Obesity
- Cultural traditions include food
 - Feasts were rare but are now common
- Alcohol abuse

Diabetes

- AI/AN are 2.2 times more likely than NHWs to have diabetes
- In 2004, AI/AN were 3 times more likely to die of diabetes than the U.S. population as a whole

Heart Disease

- Heart disease is the leading cause of death for AI/AN nationwide
- AI/AN more likely than Black, Hispanic or Asians to be diagnosed
- AI/AN die from heart disease at a younger age than other racial groups

Cancer

- Cancer is the leading cause of death in MN AI
- MN AI have 2x the cancer rates of AI in other parts of the U.S.
- Smoking, obesity and diabetes contribute to these high cancer rates

MN American Indians and Cancer



CHSDA Data vs. State Data

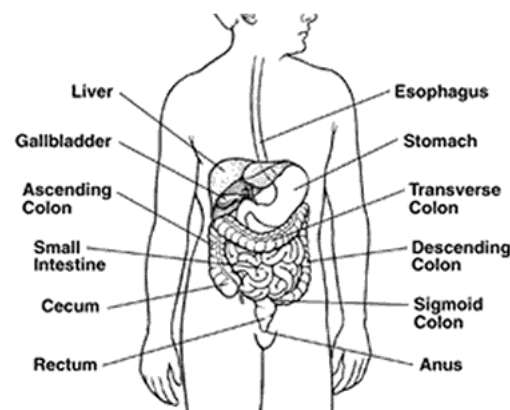
- In 2011 MN Cancer Facts & Figures began presenting AI cancer data in two ways
 - CHSDA—counties that are part of or contiguous to a reservation
 - Statewide
- CHSDA rates are higher

MN American Indian Cancer Burden

Geography

- AI/AN Cancer rates vary by region in U.S.
- MN is one of the Northern Plains tribes which has the highest overall cancer incidence and mortality in the U.S.

Physiology



Lung Cancer in MN American Indians

- 85 – 90% of lung cancers caused by cigarette smoking
- AI men and women in CSHDA counties have highest lung cancer rates in MN
- AI men and women statewide have second highest rates in MN
- Mortality rate is 2 to 3 times higher than NHW of same gender

Colon Cancer in MN American Indians

- MN AI living in CSHDA counties are 2.3 times more likely to be diagnosed with CRC as AI in U.S. as a whole
- AI men living in CHSDA counties are 85% more likely than NHW men to be diagnosed
- Late stage diagnosis is more common

Breast Cancer in MN American Indians

- AI women in CSHDA counties have the second highest incidence rate in MN
- AI women statewide have the fourth highest incidence rate
- CHSDA mortality is fourth in MN
- Statewide mortality is fifth

Cervical Cancer in MN American Indians

- Cervical cancer is caused by the HPV virus
- Cervical cancer risk is increased by smoking
- AI women in CHSDA counties have the highest incidence
- Statewide incidence rate is 4th

Prostate Cancer in MN American Indians

- African American men are most likely to be diagnosed with and die from prostate cancer
- NHW and AI men have very similar rates and rank 2nd and 3rd in incidence and mortality
- Additional studies are being conducted on prostate cancer and AI men

Other Cancers in MN American Indians

- Stomach
- Kidney
- Liver

Tribal Readiness to Address Cancer: A Continuum

Fond du Lac Wiidookaage Cancer Program



Special Thanks to Brandie Buckless of the American Indian Cancer Foundation for her contribution to this section of the presentation.



Why a Fond du Lac Cancer Program?

- Anecdotal knowledge of cancer burden
 - Diagnosis and treatment off site
 - People reluctant to speak of cancer
- **2002:** CDC expanding Comp Cancer Program
- **2002:** ACS Relay for Life catalyst for cancer discussion
- **2003:** CDC funding for FDL Cancer Program
 - Bringing together multiple stakeholders
 - Without funding, FDL could not have a cancer program

Fond du Lac Cancer Plan

- Data/Cancer Registry
- Prevention
- Early Detection
- Palliative Care and End of Life Care
- Survivorship
- Caregivers
- Evaluation

FDL Wiidookaage Cancer Team

- “They Help Each Other”
- Internal and external partners
 - FDL HHS departments
 - Local, state and federal agencies
 - Organizations from across Indian Country
- Education and networking
- Selecting plan priorities

FDL Cancer Program Evolution

- **2004:** Circle of Life implemented by CHR
- **2007:** Funding for new 5 year cycle
 - Cancer Program Grant Manager
 - Cancer Program Outreach Worker
 - Cancer Program Health Educator
- **2007:** Partners with ACS on CDC-funded redesign of Circle of Life
 - Cancer Types
 - Cancer Treatment
 - Health Habits
 - Caregiver Support

FDL Community Cancer Awareness

- Awareness increased on multiple levels
 - CHR provided cancer education during transport
 - CPOW provided one to one cancer education
 - Public events like Relay for Life
- **Result:** Community members became more comfortable talking with friends, family and healthcare providers about cancer

Individual Barriers for MN AI

- Low awareness of cancer risks
- Low awareness of screening options
- Distrust of medical systems and research
- Fear of screening tests or results
- Health beliefs that may conflict with prevention practices

System Barriers for MN AI

- Underfunded urban and tribal health systems
- Lack of accurate population-specific data
- High rates of poverty
- Poor access to health care due to low rates of health insurance
- Limited availability of prevention programs, cancer screening and specialist care

Cultural Barriers for MN AI

- Role of family elders in making health decisions
- Women sacrifice their own well-being for good of family
- Self-effacement
- Modesty
- Beliefs about the physical body
- Illness can be very secretive
- Speaking of cancer may cause it to enter the body

Evidence-Based Practices

- Grant funding dependent on use of evidence-based practices
- Two major sources
 - The Community Guide (CDC)
 - United States Preventative Services Task Force (governs I.H.S.)
- Evidence-based practices documented in multiple publications

Partnering with Minnesota Tribes

American Cancer Society
Health Equity Department



Why a Health Equity Department?

- Communities of color have unfair cancer burden
- United Way 2 year grant for outreach to underserved population in Twin Cities
- ACS continued and expanded program
- **2006:** Staff dedicated to work with tribes in No. MN
- Focus on prevention and early detection

Community Education

Education Programs

- Breast and cervical cancer education and screening promotion
- Colorectal cancer education for men and women
- Men's health events

Mille Lacs Men's Health Supper



Screening Promotion

Screening Activities

- Partnership with Shakopee Mobile Mammography Unit at No. MN Tribes
- Partnership with MDH, Sanford Bemidji and multiple tribes to promote Sage Scopes colorectal screening program
- Clinic-based education and screening incentive programs

Shakopee Mobile Unit



Education for CHRs

Ongoing Activities

- Partnership with MDH, FDL, Sanford Health, others to provide **Cancer in Your Community** Trainings in Duluth and Bemidji
- **Circle of Life** Regional Trainings in Duluth and Bemidji, and for individual tribes
- Bi-monthly professional development calls

Cancer Education in Bemidji



Supporting Circle of Life

Circle of Life Programs

- Fond du Lac
- White Earth
- Bad River
- Red Cliff
- Lac Courte Oreilles
- St. Croix

COL Training in Atlanta



FDL Comprehensive Cancer Program

Wiidookaage Cancer Team

- ACS was first non-FDL team member
- Participates in meetings
- Works with staff on multiple projects
- Learning assisted work with other tribes

Celebrating Cancer Prevention



Partnership with Clinics

- Promote the development of policies and practices that encourage timely and age appropriate screenings be offered to all patients
- Provide tool kits
- Provide staff trainings
- Provide screening incentives

Relay for Life

Participate in Relay for Life

- Support Relay for Life events at tribes
- Partnered with FDL on 2 Bark for Life events (team fundraisers prior to Relay)

Bark for Life







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