Improving Indigenous Cancer Journeys in BC: A ROAD MAP
This strategy is intended to support all First Nations (status and non-status, living at home and away from home), Métis (citizens and self-identified) and Inuit people living in BC. The word Indigenous has been used as much as possible when referring to all First Nations, Métis and Inuit people.
## CONTENTS

**Perspectives on Health and Wellness** .......................................................... 2

**What Is Cancer?** ......................................................................................... 3

**The Strategy and Partners** ........................................................................ 4

- Integrating Cultural Safety into the Cancer Journey .................................. 6
- What We Heard and Where We Are Going ................................................. 8

**Indigenous Cancer Strategy Goals, Objectives, and Actions** ................. 9

- Partnerships ............................................................................................... 11
- Prevention ................................................................................................. 13
- Screening .................................................................................................. 15
- Cultural Safety .......................................................................................... 17
- Survivorship ............................................................................................... 19
- End-of-Life ................................................................................................. 21
- Knowledge Development ......................................................................... 23

**References** ................................................................................................ 24
PERSPECTIVES ON HEALTH AND WELLNESS

FIRST NATIONS PERSPECTIVE ON HEALTH AND WELLNESS (FNHA, 2017)
The First Nations Perspective on Health and Wellness (above) is a shared understanding of the holistic vision of wellness shared by BC First Nations. The basis of this perspective is to achieve health and wellness by taking a look at and nurturing the internal and external factors that affect wellbeing. Many of these concepts are based on traditional knowledge.

Although the First Nations Perspective on Health and Wellness appears in layers, it is important to acknowledge that all the words in each circle are interconnected with each other, and with the components of other circles. In addition, all the circles themselves are connected and responsible for each other. Ultimately, all of these factors are important and need balance to achieve wellness.

MÉTIS NATION PERSPECTIVE ON HEALTH AND WELLNESS
The Métis are a distinct group of Aboriginal people as identified in Canada’s Constitution. Métis people’s overall health and well-being is impacted when this is not properly acknowledged in Aboriginal programs and services.

Wellness for Métis people includes the holistic connectedness of; physical, mental, emotional, spiritual and cultural aspects of life. Health and well-being for Métis is focused on Métis Community, family and individuals (according to the Métis Nation British Columbia Relationship Accord II).

Métis people in BC today are as resilient as ever. The Nation is well connected to the land, and its offerings. Métis culture and heritage includes distinct music, dance, language, art, traditional foods and medicines.

Métis Nation works to preserve and share traditional teachings, gifts received from their Elders, Cultural Protocols, the Michif language and way of living. Communities struggle to revitalize and promote their distinct Métis Identity and diverse cultural practices which impacts Community health and wellness.

Métis Nation British Columbia advocates for appropriate engagement and resources from all levels of government. Métis people are the “Otipemisiwak” which is a Cree term that refers Métis as the “People who own themselves” or the “people who govern themselves.”
WHAT IS CANCER?

Cancer is a disease that can start anywhere in the human body, which is made up of trillions of cells. Normally, human cells grow and divide to form new cells and keep our bodies healthy and whole. However, occasionally things go wrong for a variety of reasons; cells start to grow and reproduce into an unorganized mass or tumour and may start to invade surrounding healthy tissues. Tumours – or lumps - are classified as either benign (not cancer) or malignant (cancer). A benign tumour is one that does not spread or invade nearby tissues, and does not usually cause life-threatening health issues. A malignant tumour is one that can grow quickly and affect nearby tissues, and can also spread to other parts of the body, interfering with the proper functioning of an organ or body system.

DID YOU KNOW?

FIRST NATIONS PEOPLE IN BC ARE MORE LIKELY TO DEVELOP COLON AND CERVICAL CANCER THAN NON-FIRST NATIONS PEOPLE¹

The booklet titled ‘Living with Cancer: Everyone Deserve Support’ was developed by the partner organizations and includes information on client rights, gathering support, and navigating treatment. The booklet presents tips, questions to ask yourself and your healthcare provider, and stories from Indigenous cancer survivors and their families. It also has a glossary of terms, calendar for recording appointments, and space to take notes.
This strategy provides a road map to improve the Indigenous cancer journey, and is part of an ongoing commitment by BC Cancer, First Nations Health Authority, Métis Nation British Columbia, and BC Association of Aboriginal Friendship Centres to work in collaboration. It reflects the voices of Indigenous people with cancer, survivors and their families, and presents a united and clear path forward to improve Indigenous cancer journeys and experiences in the province.
BC CANCER is an agency of the Provincial Health Services Authority, and is committed to reducing the incidence of cancer, reducing the mortality from cancer and improving the quality of life of those living with cancer. It provides a comprehensive cancer control program for the people of British Columbia by working with community partners to deliver a range of oncology services, including prevention, early detection, diagnosis and treatment, research, education, supportive care, rehabilitation and palliative care.

FIRST NATIONS HEALTH AUTHORITY (FNHA) is the first province-wide health authority of its kind in Canada, and is responsible for the planning, management, service delivery and funding of health programs, in partnership with First Nations communities in BC. Guided by the vision of embedding cultural safety and humility into health service delivery, FNHA works to reform the way health care is delivered to BC First Nations through direct services, provincial partnership collaboration, and health systems innovation.

MÉTIS NATION BRITISH COLUMBIA (MNBC) is the representative of 37 Métis Chartered Communities in British Columbia, and represents more than 16,500 provincially registered Métis Citizens and over 89,000 self-identified Métis people in the province. MNBC’s mandate is to implement culturally relevant social and economic programs and services to create opportunities for Métis communities, and its vision is to build a proud, self-governing, sustainable Nation in recognition of Inherent Rights for Métis Citizens.

BC ASSOCIATION OF ABORIGINAL FRIENDSHIP CENTRES (BCAAFC) is a registered Society under the BC Societies Act, and is the umbrella association for 25 Aboriginal Friendship Centres across the province. BCAAFC’s mission is to improve the quality of life for Indigenous people in BC by supporting the activities of member Friendship Centres. This includes acting as a unifying body for Friendship Centres to engage all levels of government in addition to coordinating special projects and initiatives, events and programs, and providing information on resources and news.
INTEGRATING CULTURAL SAFETY INTO THE CANCER JOURNEY

Creating a culturally safe and humble healthcare system means taking action to support cultural humility approaches at multiple levels in the system. Recognizing that colonization and oppression continues today throughout our health system, it is important to review and revise structures and policies that support cultural safety.

System-wide change begins with every individual that works in health. Health leaders in BC have committed to hardwire cultural safety and humility in the health system by signing the Declaration of Commitment to advance cultural safety and humility in health services delivery for First Nations and Aboriginal people in BC.

Many Indigenous people with cancer and their families highlighted that there is a need to improve cultural safety and humility in the health care system along the entire cancer care pathway – from prevention to survivorship, and end of life. It was highlighted that the process leading up to a cancer diagnosis and transitions in care during treatment can result in culturally safe cancer care gaps.

DID YOU KNOW?

Health authorities, health regulators, and other partners in BC have signed a Declaration of Commitment on Cultural Safety and Humility in Health Services. Health staff can pledge their commitment at www.fnha.ca/culturalhumility

6 IMPROVING INDIGENOUS CANCER JOURNEYS IN BC
CULTURAL SAFETY is an outcome based on respectful engagement that recognizes and strives to address imbalances inherent in the health care system. It results in an environment free of racism and discrimination, where people feel safe when receiving health care.

CULTURAL HUMILITY is a process of self-reflection to understand personal and systemic biases, and to develop and maintain respectful processes and relationships based on mutual trust. Cultural humility involves humbly acknowledging oneself as a learner when it comes to understanding another’s experience.

SHARED DECISION-MAKING means people are able to voice their perspectives, ask questions and be respected by the health care professional on their beliefs, behaviours and values. As partners in their own care, Indigenous people are entitled to be part of their health care experience.

TRADITIONAL WELLNESS is an important part of the cancer care journey for many Indigenous people with cancer. In feedback shared through engagements on the following page, many Indigenous peoples have stated that they did not feel safe to discuss traditional wellness with their health care provider when receiving cancer care.

SAN'YAS TRAINING
The San’yas Indigenous Cultural Safety Training Course is a unique, facilitated on-line training program designed by the Provincial Health Service Authority to increase knowledge, enhance self-awareness, and to strengthen the skills of those who work both directly and indirectly with Indigenous people.

• 20% of BC Cancer staff have completed the San’yas Indigenous Cultural Safety Training Course.
The partner organizations have been working collaboratively to engage communities to learn more about the Indigenous cancer journey in BC. The aim of engagement has been to hear the stories of Indigenous people with cancer, survivors, and their families, and to identify ways to enhance cultural safety and continuity of cancer care for Indigenous people and communities. Engagement has occurred over the past three years and consisted of in person forums, round-table community discussions, and online and in-person questionnaires.
INDIGENOUS CANCER STRATEGY
GOALS, OBJECTIVES, AND ACTIONS
“ON BEHALF OF BCAAFC I HOLD MY HANDS HIGH IN APPRECIATION OF THOSE THAT HELPED US TO DEVELOP AN INDIGENOUS CANCER STRATEGY. WE HEARD MANY STORIES OF OUR BROTHERS AND SISTERS WHO HAVE BEEN THROUGH THE CANCER JOURNEY, AND WE WANTED TO MAKE SURE THE WISDOM OF INDIGENOUS CANCER PATIENTS, SURVIVORS AND THEIR CARETAKERS ARE REFLECTED IN THIS STRATEGY.

AS FRIENDSHIP CENTRES, WE OFTEN SUPPORT FAMILIES STRUGGLING WITH CANCER. EACH OF US HAS BEEN IMPACTED BY CANCER. AS AN INDIGENOUS PERSON I FEEL BETTER KNOWING THAT OUR INDIGENOUS AGENCIES HAVE WORKED TOGETHER WITH BC CANCER AGENCY TO MAP OUT, IDENTIFY AND ADDRESS SOME OF THE ISSUES AND CONCERNS I OR MY FAMILY MIGHT HAVE.

WE SINCERELY HOPE THIS STRATEGY IS USEFUL TO THOSE ON THEIR OWN PERSONAL CANCER JOURNEY, AND EQUALLY AS USEFUL TO THE SERVICE PROVIDERS WHO WE KNOW ARE COMMITTED TO CULTURALLY APPROPRIATE AND SAFE SERVICES TO INDIGENOUS PEOPLE.”

Leslie Varley - Executive Director, British Columbia Association of Aboriginal Friendship Centres
PARTNERSHIPS

STRONG PARTNERSHIPS AND COLLABORATIONS BETWEEN INDIGENOUS AND NON-INDIGENOUS COMMUNITIES, HEALTHCARE ORGANIZATIONS AND GOVERNMENTS ARE NEEDED TO SEE THE GOALS AND OBJECTIVES OUTLINED WITHIN THE INDIGENOUS CANCER STRATEGY ACHIEVED.

GOAL
Indigenous communities guide cancer care services that align with Indigenous priorities through internal and external partnerships and collaboration

OBJECTIVES
» Meaningfully engage health organizations in the implementation of this strategy

ACTIONS
» Enhance and maintain partnerships between BC Cancer, First Nations Health Authority, Métis Nation British Columbia, and BC Association of Aboriginal Friendship Centres
» Leverage and align knowledge and resources with organizations providing supportive cancer care services
» Engage with primary care providers and the primary care sector in the implementation of this strategy and in understanding Indigenous perspectives on health and wellness
» Encourage and support integration of this strategy as a priority for the Regional Health Authorities

DID YOU KNOW?
FIRST NATIONS PEOPLE EXPERIENCE POORER OVERALL CANCER SURVIVAL RATES COMPARED TO NON-FIRST NATIONS PEOPLE1
“AS AN ANISHNAWBE SURGEON, I GET THE OPPORTUNITY TO MEET INDIGENOUS CANCER PATIENTS AND FAMILIES EVERY DAY IN MY PRACTICE. EVERY DAY I OBSERVE FIRST-HAND THE CHALLENGES THAT WE EXPERIENCE AS INDIGENOUS PEOPLE AND COMMUNITIES WHEN IT COMES TO THE HEALTHCARE AND CANCER SUPPORT SYSTEM.

I ALSO GET THE OPPORTUNITY TO WITNESS AMAZING INDIVIDUALS, GROUPS AND COMMUNITIES WHO ARE WORKING IN PARTNERSHIP TO ADDRESS THE VERY CHALLENGES THAT I SEE MY PATIENTS FACING, INCLUDING WORK TO HELP PREVENT CANCER.

IT’S ENCOURAGING TO SEE THE IMPACT THAT THESE PARTNERSHIPS ARE HAVING ON OUR COMMUNITIES’ HEALTH AND I LOOK FORWARD TO GROWING THESE RELATIONSHIPS AS WE MOVE FORWARD TOGETHER.”

Dr. Nadine Caron - Associate Professor, UBC Department of Surgery, Affiliate University of Northern British Columbia, Faculty Member with the Northern Medical Program
THERE ARE MANY THINGS WE CAN DO TO HELP PREVENT CANCER. FOR EXAMPLE, WE CAN HELP PREVENT CANCER BY BEING ACTIVE, EATING HEALTHY AND RESPECTING TOBACCO. IN FACT, ABOUT ONE THIRD OF ALL CANCERS CAN BE PREVENTED BY BEING ACTIVE, EATING HEALTHY AND MAINTAINING A HEALTHY BODY WEIGHT.

GOAL

Indigenous people experience fewer new cases of cancer through healthy living, wellness and supportive environments

OBJECTIVES

» Support healthy spaces by reducing cancer-causing substances in environments where people live, work and play
» Promote the reduction of commercial tobacco use while respecting traditional tobacco use in ceremonies and medicines
» Increase opportunities for individuals and communities to participate in physical activity and healthy eating
» Increase Human Papillomavirus (HPV) vaccination rates among Indigenous individuals

ACTIONS

» Create cancer prevention materials relating to priority prevention areas to reflect Indigenous needs and cultural values
» Develop initiatives, programs and campaigns on wellness and cancer prevention that reflects Indigenous models of wellness
» Leverage the BC Cancer Prevention Program to develop a shared approach with partner organizations to increase culturally safe prevention initiatives, including research and prevention outreach, within Indigenous communities

DID YOU KNOW?

INDIGENOUS PEOPLE IN BC ARE MORE LIKELY TO REPORT SMOKING DAILY COMPARED TO NON INDIGENOUS PEOPLE\textsuperscript{2,3}
“MÉTIS NATION BRITISH COLUMBIA’S (MNBC) HEALTH MINISTRY IS COMMITTED TO THE GOALS, OBJECTIVES AND ACTIONS, OUTLINED IN THE INDIGENOUS CANCER STRATEGY THAT WAS DEVELOPED WITH OUR PARTNERS. MNBC RECOGNIZES THE SIGNIFICANCE OF WORKING IN A MÉTIS-SPECIFIC WAY TO ACHIEVE IMPROVED HEALTH OUTCOMES FOR MÉTIS PEOPLE THROUGHOUT THE CANCER JOURNEY. THROUGH ENHANCED PREVENTION, SCREENING, HEALTH EDUCATION, AND KNOWLEDGE DEVELOPMENT IN OUR MÉTIS COMMUNITIES, WE ANTICIPATE EARLIER DETECTION AND IMPROVED ACCESS TO TREATMENT.

COLLECTIVELY WITH OUR PARTNERS AT BC CANCER, FIRST NATIONS HEALTH AUTHORITY AND THE BC ASSOCIATION OF ABORIGINAL FRIENDSHIP CENTRES; WE WANT ACCESS AND TREATMENT TO BE EQUITABLE AND CULTURALLY SAFE, WHICH WILL LEAD TO EXCELLENCE IN OVERALL HEALTH AND WELL-BEING FOR INDIGENOUS COMMUNITIES. WE CONTINUE TO CONSULT WITH OUR NETWORK OF MÉTIS CANCER SURVIVORS, THEIR FAMILIES, AND SUPPORTS; TO BETTER UNDERSTAND THE UNIQUE NEEDS OF MÉTIS CANCER PATIENTS FOR ONGOING SUPPORT THROUGH SURVIVORSHIP AND END-OF-LIFE CARE.”

Susie Hooper - Minister of Health, Métis Nation British Columbia
SCREENING

WHEN WE SCREEN FOR CANCER, IT MEANS WE ARE TRYING TO DETECT CANCER BEFORE WE HAVE ANY SYMPTOMS. SCREENING MEANS THAT WE ARE BEING PROACTIVE AT DETECTING CANCER EARLY AND IT CAN EVEN MEAN THAT WE ARE PREVENTING CANCER BEFORE IT STARTS. BRITISH COLUMBIA HAS THREE POPULATION BASED CANCER SCREENING PROGRAMS – FOR COLON, BREAST AND CERVICAL CANCER.

GOAL

Indigenous communities prevent and detect cancer earlier by participating in culturally safe colon, cervical and breast cancer screening programs

OBJECTIVES

» Increase awareness of colon, cervical and breast cancer screening programs
» Increase accessibility to culturally safe colon, cervical and breast cancer screening
» Increase the number of Indigenous people participating in colon, cervical and breast cancer screening

ACTIONS

» Create accredited education opportunities for healthcare providers to support trauma informed culturally safe colon, cervical, and breast cancer screening opportunities for Indigenous people
» Develop culturally-appropriate campaigns to highlight recommended cancer screening guidelines to increase participation in colon, breast, and cervical cancer screening programs
» Organize screening opportunities with Indigenous communities in locations that allow individuals to get screened together in a relaxed and culturally safe environment
» Expand access to colon, breast, and cervical cancer screening opportunities by improving enabling policies

DID YOU KNOW?

BC HAS SCREENING PROGRAMS TO DETECT COLON, CERVICAL AND BREAST CANCERS EARLY
DETECTING CANCER EARLY IMPROVES TREATMENT OPTIONS AND CHANCES OF SURVIVAL
“AS AN INDIGENOUS CANCER SURVIVOR MYSELF, I’M HOPEFUL WE CAN MOVE TO A PLACE WHERE FAMILY CONVERSATIONS AROUND CANCER ARE FOCUSED ON WELLNESS, AND THAT THE EXPERIENCE IS NOT THOUGHT OF AS A LIFE SENTENCE. SO MANY CANCERS ARE PREVENTABLE AND WE WANT OUR INDIGENOUS PEOPLE TO GET IN FRONT OF THAT AS PART OF THEIR WELLNESS. THIS STRATEGY HELPS US TO RETHINK CANCER AND TAKE GREATER OWNERSHIP OF OUR CANCER CARE JOURNEYS.

THIS STRATEGY IS AN OPPORTUNITY FOR US TO MAKE THE CANCER JOURNEY SAFER FOR INDIGENOUS PEOPLE. INCREASING CULTURAL SAFETY AND HUMILITY WILL RESULT IN INCREASING ACCESS AND USE OF PROVINCIAL PREVENTION AND CANCER PROGRAMS AND SERVICES. SOMETHING AS SEEMINGLY BENIGN AS CANCER SCREENING MUST BE TRAUMA-INFORMED IF WE ARE TO TRULY SUPPORT INDIGENOUS PEOPLES’ JOURNEY TO BETTER HEALTH.”

Joe Gallagher - Chief Executive Officer, First Nations Health Authority
CULTURAL SAFETY

CREATING A CULTURALLY SAFE AND HUMBLE HEALTHCARE SYSTEM MEANS TAKING ACTION TO SUPPORT CULTURAL HUMILITY APPROACHES AT MULTIPLE LEVELS IN THE SYSTEM. RECOGNIZING THAT COLONIZATION AND OPPRESSION CONTINUES TODAY THROUGHOUT OUR HEALTH SYSTEM, IT IS IMPORTANT TO REVIEW AND REVISE STRUCTURES AND POLICIES THAT SUPPORT CULTURAL SAFETY.

GOAL

Indigenous people, families and communities receive high quality and culturally safe cancer care and support

OBJECTIVES

» Increase opportunities for healthcare providers to reflect on power imbalances inherent in health services and health care relationships to increase culturally safety in cancer care

» Increase the integration of traditional healing and wellness practices into the cancer care services

» Increase supports to navigate the cancer care system in partnership with healthcare providers

ACTIONS

» Implement the Declaration of Commitment, Cultural Safety and Humility in Health Services Delivery for First Nations and Aboriginal People in BC signed by the Provincial Health Services Authority and the First Nations Health Authority

» Support the promotion of Métis perspectives on cultural wellness in cancer care

» Promote increased uptake of the Provincial Health Service Authority’s San’yas Indigenous Cultural Safety training by BC Cancer employees, and deliver regionally-based educational opportunities at each of the BC Cancer centres

» Support the creation of culturally reflective spaces at cancer centers across the province to support environments that are welcoming and provide for the use of traditional ceremonies and medicines

» Establish policies to support the integration of traditional wellness and cultural practice when receiving cancer care

» Expand Indigenous recruitment and retention at all cancer centres

» Develop and prioritize the creation of Liaison positions at the BC Cancer to assist Indigenous people in navigating the cancer care system and to support unique Indigenous cancer care needs
“MY CANCER IS IN REMISSION. IT’S BEEN FIVE YEARS AND NOTHING HAS COME BACK. AT FIRST IT FELT LIKE WHEN THEY TOLD ME TO LEAVE, THAT I WAS FINE. IT LEFT ME IN A TURMOIL BECAUSE I WAS GETTING SUCH GOOD CARE AND ALL OF A SUDDEN, I HAD TO TAKE CARE OF MYSELF.

ALL MY MEDICAL SUPPORT GROUP WAS GONE AND I HAD TO TAKE CARE OF MYSELF. IT WAS SOMETHING I HAD TO WORK THROUGH, WHICH I DID WITH THE SUPPORT OF MY FAMILY. CANCER HAS DEFINITELY MADE ME MORE AWARE OF THE PRECIOUSNESS OF LIFE.”

Adeline Sarver, Metis Cancer Survivor
SURVIVORSHIP

BEING A CANCER SURVIVOR CAN HAVE DIFFERENT MEANINGS TO THOSE WHO HAVE EXPERIENCED A CANCER DIAGNOSIS. FOR MANY PEOPLE AND THEIR FAMILIES, BEING A CANCER SURVIVOR MEANS BEING FINISHED ACTIVE CANCER TREATMENT, BEING IN REMISSION OR ON MAINTENANCE THERAPY. FOR THIS STRATEGY, A CANCER SURVIVOR IS DEFINED AS SOMEONE FROM THE MOMENT THEY ARE DIAGNOSED WITH CANCER UNTIL END-OF-LIFE, WHenever THAT MAY BE.

GOAL
The wellness of Indigenous cancer survivors is supported throughout their survivorship journey

OBJECTIVES
» Enable supportive networks for Indigenous cancer survivors and their families

ACTIONS
» Document and share the experiences of Indigenous peoples and families affected by cancer
» Develop culturally appropriate education materials for providers to support the transition to cancer survivorship
» Develop culturally safe tools and resources and practices for both Indigenous cancer survivors and families
“MY FATHER’S DEATH LAID DOWN THE GROUND WORK THAT I’M EXPECTED TO SEE FOR MYSELF. I LEARNED TO FACE MY OWN DEATH WITH COURAGE, THE WAY MY FATHER DISPLAYED IT WITH ME. I KEEP A POSITIVE ATTITUDE. I MOVE TOWARDS CHANGE.

I LIVE FOR TODAY AND I WORK AROUND THOSE THINGS AND I HELP MYSELF ALONG, AND SHOW THEM THAT HEY, “DON’T QUIT HERE, JUST KEEP RIGHT ON GOING” AND MAKE A CHANGE HERE AND THERE TO HELP MYSELF ALONG.

CANCER IS AN EDUCATOR...LET IT TEACH YOU WHAT YOU DON’T KNOW ABOUT YOURSELF. FIND YOUR STRENGTH, FIND YOUR WEAKNESS, FIND YOUR SOUL, FIND YOUR SPIRITUALITY. FIND OUT WHAT THOSE WORDS LIKE HOPE REALLY MEAN.”

Randall Stevens, Indigenous Cancer Survivor
SOME INDIVIDUALS MAY FACE A STAGE ON THEIR JOURNEYS WHEN THEIR CANCER CAN NO LONGER BE CONTROLLED. THIS IS A POWERFUL TIME FOR THAT INDIVIDUAL, THEIR FAMILY AND THEIR COMMUNITIES.

GOAL
The end-of-life journeys, perspectives and wishes of Indigenous peoples are supported, as is the wellness of their families and communities

OBJECTIVES
» Increase culturally safe supports for Indigenous people with cancer, their families and their communities while facing end-of-life journeys

ACTIONS
» Develop culturally appropriate education materials for Home Health Aids, healthcare providers and community service providers to support the transition to end-of-life care
» Enable Indigenous peoples and communities to exercise their end-of-life perspectives and practices
» Develop culturally safe tools, resources and practices for both Indigenous cancer survivors and families, as well as health care providers to support advance care planning and end-of-life conversations

DID YOU KNOW?
THE MOST COMMONLY DIAGNOSED CANCERS FOR FIRST NATIONS PEOPLE IN BC ARE PROSTATE, BREAST, LUNG AND COLON CANCERS¹
“BC CANCER’S MISSION IS TO REDUCE THE INCIDENCE AND MORTALITY OF CANCER AND TO IMPROVE THE QUALITY OF LIFE OF THOSE LIVING WITH CANCER, FOR ALL BRITISH COLUMBIANS. WE RECOGNIZE THE UNIQUE CANCER CHALLENGES AND TREATMENT OUTCOME DISPARITIES FACED BY INDIGENOUS PEOPLE AND WE ARE WORKING WITH OUR PARTNERS TO ENSURE THE DELIVERY OF CULTURALLY SAFE CANCER CARE THROUGHOUT THE PROVINCE.

THIS STRATEGY IS A DEMONSTRATION OF OUR COMMITMENT TO ACTIONS THAT DIRECTLY IMPROVE THE CANCER EXPERIENCE FOR ALL INDIGENOUS PEOPLE; FROM PREVENTION THROUGH TREATMENT AND SURVIVORSHIP, WE ARE COMMITTED TO CONTINUING COLLABORATION THAT IMPROVES THE CANCER JOURNEY FOR INDIGENOUS CANCER PATIENTS, FOR THEIR FAMILIES AND THEIR COMMUNITIES.”

Dr. Malcolm Moore - President, BC Cancer
KNOWLEDGE DEVELOPMENT

WHEN WE TALK ABOUT THE INDIGENOUS CANCER JOURNEY, WE TALK ABOUT COLLECTIVE SIMILARITIES AND DIFFERENCES THAT INDIGENOUS PEOPLE EXPERIENCE WHEN IT COMES TO CANCER. EVERYONE EXPERIENCES CANCER IN THEIR OWN UNIQUE WAY. FROM OUR UNDERSTANDING OF CANCER PREVENTION TO OUR EXPERIENCE WITH THE HEALTHCARE SYSTEM, BEING ABLE TO EXPRESS OUR UNIQUE INDIGENOUS CANCER JOURNEYS WILL SUPPORT IMPROVED SERVICES.

GOAL
Indigenous cancer journeys are well documented and understood

OBJECTIVES
» Increase research and surveillance opportunities to better understand Indigenous cancer journeys
» Increase storytelling and community-based knowledge exchange activities on Indigenous cancer issues

ACTIONS
» Provide venues and opportunities for Indigenous cancer survivors and their families to share their cancer journey stories, and identify research priorities
» Develop data on the Indigenous cancer journey in BC, including through relevant data linkages using the First Nations Client File
» Undertake joint knowledge exchange and translation efforts
» Improve the self-identification process for Indigenous peoples receiving service at the six regional cancer centres and ensure the collection of this information is accessible
» Support the voice of the Métis community through the Métis Public Health Surveillance Program to better understand the incidence of cancer within the Métis population in BC as identified through Métis Nation BC’s citizenship registry
» Establish a FNHA Chair in Cancer and Wellness at UBC to conduct research, surveillance and storytelling activities
» Ensure Indigenous perspective are reflected and considered in genomic research and activities within BC
» Develop a collaborative process to investigate Indigenous community concerns regarding cancer incidence in communities
REFERENCES


