UNIQUE STUDY COMPARES CANCER INCIDENCE AND SURVIVAL BETWEEN FIRST NATIONS AND NON-FIRST NATIONS PEOPLE IN BC

COAST SALISH TERRITORY/VANCOUVER — The first study ever to compare the development and survival from cancer between First Nations people and non-First Nations people in British Columbia shows an overall lower incidence of the disease for First Nations people but also indicates lower survival rates for most cancers.

The study affirms the need for a system-wide response to improve cancer diagnosis and care for First Nations people in BC, which is why the First Nations Health Authority, BC Cancer Agency, the BC Association of Aboriginal Friendship Centres and Métis Nation are working in partnership to complete an Indigenous cancer strategy to be released later this fall. The strategy is informed by the findings in this study as well as other data sources and extensive engagement with communities, survivors and their families.

The study was conducted jointly by the BC Cancer Agency and First Nations Health Authority, and published in the journal Cancer Causes & Control. The 1993 to 2010 data set includes “Status Indian” peoples only and is not inclusive of all First Nations, Métis or Inuit peoples in BC.

The study shows both First Nations men and women experience a higher incidence of colorectal cancer, with a 22 per cent higher age-standardized incidence rate for women and 39 per cent for men. There also appears to be a trend towards increasing incidence for both sexes. More research is needed to understand the specific reasons for this elevated and increasing rate of colorectal cancer among BC First Nations.

A 92 per cent higher incidence rate of cervical cancer was observed among First Nations women. This may indicate that access to geographically available and/or culturally safe cervical cancer screening services may be a continuing barrier for First Nation women.

Incidence rates of almost all other cancers were generally similar or lower in First Nations populations compared to non-First Nation populations. Trends in incidence rates over time were also similar, with the exception of lung cancer, which is rising at a rate among First Nations that may soon overtake declining rates in non-First Nations.

First Nations people are also less likely to survive a cancer diagnosis compared to non-First Nations people. Overall, poorer survival was seen in the First Nation population in 10 of the 15 cancer types examined in women and 10 of the 12 cancer sites examined in men.

Lower survival rates could be influenced by a number of factors including challenges in access to high quality, timely, appropriate and effective cancer treatment, especially in rural and remote areas. Lower diagnosis may be impacted by limited access to screening programs. For many First Nations peoples, their cancer journey is negatively impacted through the experience of racism in health and social support settings.
Culturally safe health and social services reduce barriers to accessing care and detecting cancer early. First Nations people are more likely to access care that is appropriate to their wellness beliefs, goals and needs.

The findings in this study suggest a complex basis for these disparities in cancer incidence and survival, and further studies along the entire spectrum of cancer care—from wellness and prevention, to screening, diagnosis and treatment—are required.

Quotes:

Dr. Nadine Caron, Associate Professor, UBC Northern Medical Program and Co-Director, UBC Centre for Excellence in Indigenous Health
“This first of its kind study is a vital step in addressing health disparities for First Nations peoples in BC. While the end focus of this study is on cancer incidence and survival, the answers to explain these differences lie in the impact of our history in Canada and its residential schools, the current inequities in a broad range of the social determinants of health and the access and utilization of BC's health care system by First Nations people.”

Dr. John Spinelli, Vice President of Population Oncology, BC Cancer Agency
“This project is an important first step in an ongoing collaboration between the BC Cancer Agency and the First Nations Health Authority. Given that research can be used to address disparities in health outcomes, it is vital that First Nation cancer data is collected, analyzed and becomes part of how we approach cancer control for First Nations people in BC.”

Joe Gallagher, Chief Executive Officer, First Nations Health Authority
“Our systems-wide response to improve the First Nations cancer journey must include working with communities to help prevent cancer before it starts; increasing access to colon, cervical and breast cancer screening; promoting cultural safety and humility in cancer care services; supporting First Nations cancer survivorship and end-of-life journeys; improving knowledge on the First Nations cancer journey; and nurturing partnerships between First Nations communities, the FNHA, and health system partners.”

Preston Guno, Director of Indigenous Cancer Care, BC Cancer Agency
“Within First Nations in BC, cancer is a very difficult issue to speak about, acknowledge or respond to due to the continued impacts of Residential Schools. This report is a crucial step in beginning to better understand the current landscape of cancer within First Nations in BC but equally important, a pathway to effectively addressing cancer.”

Learn More:

The complete paper is available from Cancer Causes & Control, here: https://link.springer.com/article/10.1007/s10552-017-0950-7

The First Nations Health Authority is responsible for 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, the FNHA works to reform the way health care is delivered to BC First Nations through direct services, provincial partnership collaboration, and health systems innovation.

The BC Cancer Agency, an agency of the Provincial Health Services Authority, 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. For more information, visit www.bccancer.ca or follow us on Twitter @BCCancer_Agency.

The Provincial Health Services Authority (PHSA) plans, manages and evaluates selected specialty and province-wide health care services across BC, working with the five geographic health authorities to deliver province-wide solutions that improve the health of British Columbians. For more information, visit www.phsa.ca or follow us on Twitter @PHSAofBC.

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