

Promoting a Culture of Prevention

Partnering *WITH* Tribal communities and people



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Learning Objectives

 Develop effective communication skills to address common barriers in discussing colorectal cancer

 Apply strategies to alleviate fear and discomfort, promoting a positive and culturally-informed approach to the colorectal cancer screening process

 Identify strategies to promote a culture of prevention in the community





Healthcare system in Tribal Communities

- 23 Federally Recognized Tribes in New Mexico
 - 19 Pueblos, 3 Apache tribes, Navajo Nation
 - Each Tribe is a sovereign nation with its own government, lifeways, traditions, and culture.
- Healthcare system types
 - Indian Health Service clinics, 638 Tribally-run clinics, Urban clinics
 - IHS is NOT health insurance
 - No colonoscopies are offered in any IHS or tribal clinics in NM
 - Not every tribal community has a clinic
- Colorectal cancer (CRC) is one of the most common cancer among Native American men and women in New Mexico.
- CRC is often diagnosed at later stages of diseases.
- · CRC screening is low.
 - About 2 in 10 Native American men and women in the IHS Albuquerque Area are up to date with CRC screening.

^{*} Source: Indian Health Service, GPRA April 2024 data.

Barriers to CRC screening

"lck" factor, embarrassment

Long wait times

Appointments often 3-6 months out

Communication issues

- Unable to reach patient
- Information is hard to understand

Fear of cancer results

No Transportation

 Community members often have to travel 30 minutes to 2 hours for colonoscopies

No Provider Recommendation

Missed Opportunities

Taboo topic

• Talking about cancer

Caregiver issues

- Patients are often caregivers.
- Who will take care of loved one? Who will go with the patient to the colonoscopy?

Mistrust in healthcare system

- Historical Trauma
- Often no primary care provider and patients see a different provider each visit

Bowel Prep

- Instructions say "use as directed"
- Diabetic patients (don't know about sugar/glucose tablets)







Working with Tribal community members

- Recognize patients are from tribal communities
- Have connections to land, culture, family, spirit
- Have ceremonies connecting people to place, and to healing
 - Traditional ceremonies and prayers are used in addition to Western medicine
- Intergenerational family structures
 - Group education
 - Appeal to family values in messaging
- Trauma informed care
 - Trauma-informed care acknowledges the need to understand a patient's life experiences in order to deliver effective care and has the potential to improve patient engagement, treatment adherence, health outcomes, and provider and staff wellness (SAMHSA definition)
 - Understand why patients are not keeping their appointments

Working with Tribal communities

Relationship building is very important

Partner with communities

- Include tribal leadership and clinic leadership in projects/programs
- Leadership can change annually, bi-annually, every 4 years, etc.
- Include tribal clinic/organizations in process
- Community Health Representatives (CHRs) and Public Health Nurses (PHN)

Honor the connection to land, family, culture

- Acknowledge treatment may include Traditional/spiritual healing and Western medicine
- Prayer, ceremonies, herbs may be used

Traditional languages are alive and well

- Provide interpreters or work with tribes CHR/PHN programs to ensure patients understand screening procedure
- No words for some illnesses and medical procedures use plain language

Each community is different









Working with Tribal communities and people

Establish and maintain relationship with tribal clinic/programs

- Help with communicating with patients
- Help with bowel prep adherence
- Help with patient reminders
- Help with sharing information in the community through newsletters, local radio station, flyers, brochures, community meetings
- Help with transportation

Community suggestions

- Include gloves in FIT kit
- Include stories/quotes from community members in educational material
- Include contact information for CHR/PHN who can help with completing the FIT kit and/or pick up FIT kit





Resources

- American Indian Cancer Foundation (AICAF)
 - https://americanindiancancer.org/
 - National non-profit organization that was established to address the tremendous cancer inequities faced by Native communities. AICAF is Native-governed; its board members and employees have an array of experience serving the health needs of our people.
- Albuquerque Area Southwest Tribal Epidemiology Center (AASTEC)
 - https://www.aastec.net/services-programs/tchp/
 - AASTEC serves all 27 American Indian communities in the Indian Health Service Albuquerque Area, which spans across New Mexico, Southern Colorado, West Texas, and Southeastern Utah.

Thank you!

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