

Health Education and Chronic Disease Department FY 2012 Cancer Prevention and Control:



Evaluation and Surveillance: Partnering with the State Cancer Registry to improve accuracy of cancer statistics in both the individual tribe and within the Registry to better track prominent cancers, stage of diagnosis and develop improved education and screening services, protocols and policies.



During the 2012 fiscal year a total of 3 tribal linkages were completed. The average misclassification rate within the registry is about 80%. The most common cancers vary slightly from tribe to tribe and include: Breast, Prostate, Lung, Colorectal and Cervical.

Our U of M, School of Public Health – Cancer Epidemiology Intern Student, Emily Rohen, reviewed and analyzed Native American cases within the State Cancer Registry and found younger age cases of breast and colorectal cancers compared to other populations, suggesting a need for earlier and more aggressive screening guidelines.

Education and Outreach: The Breast and Cervical Cancer Control Program, the Colon Cancer Screening Program and the American Cancer Society all fund programs that focus on community education and the promotion of screening utilizing culturally adapted evidence based interventions and strategies. Activities include:

- Feather Link Teas, Health Fairs, Ride and Learn Education and community events.
- Use of Culturally Specific Community Curriculum: *Get on the Path toBreast Health, Colon Health and the American Cancer Society’s Circle of Life* Education Series. The audience



Module	Pre test	Post Test	Increase in Knowledge:
Breast Health	36.8%	76.9%	40.1%
Cervix Health	69.1%	84.0%	15%
Colon Health	54.7%	84.6%	40.1%

response system is used to assess pre and post knowledge of individual modules in the *Get on the Path to...* series. Samples of the results are in the table. Approximately 289 unduplicated individuals participated in an educational series during FY 2012.

- The role of Family Health History plays a significant role in assessing one's risk for cancer and other chronic diseases. An educational campaign was completed, sending information on health history and how to record and report it to. A total of 12,000 post cards were sent to all twelve tribes and to the Urban Indian Health Center in Detroit for distribution to families. Over 2,000 brochures and 200 posters were distributed to the clinics.

Provider Education: The Michigan Genetic Alliance provided several educational opportunities for tribal clinic staff and providers to learn more about how to assess and manage a patient's genetic risk for chronic disease. Evaluations show significant increases in pre and post knowledge and intent to utilize screening tools, genetic counselors and educational resources.



Screening: The Breast and Cervical Cancer Control Program and the State Colon Cancer Screening Programs focus on increasing screening rates utilizing evidence based practices which include:

- Patient reminder systems
- Provider reminder systems and
- Clinical screening guidelines
- Community education

Among the six tribes that provide on-site breast health screening and referral services, a total of 563 women have received screenings and a total of 2,625 have been reached via outreach and educational events.

Every participating colon cancer screening site (4) has exceeded their baseline measures - combined sites report: 909 screenings in 2010; 2,092 in 2011; and 2,104

in 2012. ***This equals a 131% increase in screening rates over the two year time range.***

*For additional information, contact Noel Pingatore,
 Manager, Department of Health Education and
 Chronic Disease
 Inter-Tribal Council of Michigan
noelp@itcmi.org
 906-632-6896 ext 107*
