"Reducing Cancer Disparities for American Indians in the Rural Intermountain West"

Native American Programs
Benefis Health System
Great Falls, Montana

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MISSION STATEMENT

Reduce Health Care Disparities & Poverty Among American Indians in Montana with the purpose of Improving Quality of Life and Saving Lives in a Culturally and Spiritually Sensitive Manner
VISION

• Identify barriers to health care starting with cancer then expanding to other chronic diseases
• In partnership with Native Americans, determine solutions to healthcare barriers
• Identify core roots of poverty
• Determine which areas are most appropriate for our joint involvement
• Seek external funding from governmental agencies and private foundations to support these efforts
• Implement plans to address these issues

Benefis Health System’s
Native American Programs
Benefis Native American Programs
Benefis Health System Overview

- Largest Hospital in Montana
- Service Area = 15 Northern Montana Counties
  - Including 4 Indian Reservations & the Great Falls Urban Indian Community
- Over 40,000 American Indians in this Service Area of 225,000 People
• Unemployment rates reach as high as 70% on Montana Reservations

• 20-26% of all American Indians employed on the Montana Reservation live 100% below the poverty level

• Most jobs offered on the Montana Reservations are the poorest paying jobs in the country.


The Partnerships

Blackfeet Tribe

Chippewa-Cree Tribes

Assiniboine & Gros Ventre Tribes

Assiniboine & Sioux Tribes

Little Shell Chippewa Tribe & Great Falls

Urban Indian Population - Great Falls, Montana

Benefis Health System Tribal Programs Great Falls, Montana
Benefis Native American Programs
Current Major Initiatives

• Benefis Native American Board
• Cancer Disparities Grant implementation & extension (over 1,000 Tribal elders enrolled in the study)
• Native American Nurse Internship
• Health Disparities Planning, Funding & Implementation
• Native American Patient Rounding
• American Welcoming Center

Benefis Native American Welcoming Center

Recognizing an unmet need among Native American patients at Benefis Health System, BHS Native American Relations & Communication Specialist Cissy Worth put forth the idea of creating a center for Native American patients and their families. Benefis Health System (BHS) Native American Welcoming Center (NAWC) opened its doors in the fall of 2006. The NAWC was well received in Indian Country - an estimated 11,000 visitors have visited the center during this two-year period. BHS Native American Patient Advocate Victoria Augar and NAWC volunteer Klane King have offered comfort to untold patients and families. They have cried, laughed and offered prayer. They have defused difficult moments, welcomed Indians and non-Indians, and made the center feel like home. You’ll likely find Victoria making a pot of soup before heading off to make patient rounds or give a bi-weekly Indian culture presentation during new employee orientation.
Benefis Native American Programs
Current Major Collaborations

• Billings Area IHS Collaboration
• Montana DPHHS Collaboration
• MT-WY Tribal Leaders Council
• National Department of Health and Human Services Relationship Building
• Regional and National Presentations (NIH Conferences; Rural Health Conference; Indian Health Summit, etc.)

CMS Demonstration Project: Reducing Cancer Disparities Among the Intermountain West American Indians

Huntsman Cancer Institute, University of Utah & Benefis Health System, Native American Programs
HYPOTHESIS

To determine if navigation of Tribal Elders increases the rate of cancer screening and decreases the time from abnormal findings on screening test to diagnosis and from diagnosis to treatment and from treatment to follow up compared to the control group.

STUDY PARTICIPANTS

Montana Indian Reservations & Tribes:
- Blackfeet (Blackfeet)
- Rocky Boy (Chippewa Cree)
- Fort Belknap (Assiniboine & Gros Ventre)
- Fort Peck (Sioux Assiniboine)
- Little Shell Chippewa Tribe (Chippewa)
- Great Falls Indian Community (Urban)

Utah Indian Reservation and Tribe:
- Navajo (Navajo)
Montana Cancer Disparities Participants
as of September 30, 2009
N = 1,187

Montana Cancer Disparities Participants

STUDY METHODS

• Medicare Part A and B recipients only (Tribal Elders).
• Two arms to the study: Navigation & Education.
• The reservations are divided up into geographic clusters and then randomized.
Study Methods

• Tribal Elders are invited to participate in the project
• They are interviewed and educated about the benefits of cancer screening and early diagnosis
• They are guided through the cancer screening process by trained navigators
• If the results are abnormal, they are navigated through diagnosis and treatment
• During this process, and working together, barriers are identified and potential solutions are discussed

BARRIERS TO SCREENING

• Prioritizing & Understanding Health
• Cancer Knowledge
• Pain and Mobility
• General Health Status
• Transportation
• Poverty
• Prophecy
• The navigator visits the participant several times to understand the problem.
• The real reason for the no shows are fear; the fear of “Prophecy”:  
  – If I talk about cancer I will get it  
  – If I get screened for cancer it will be found  
  – If I am treated for cancer, the treatment will fail  
  – Ultimately, I will die  
• When this is combined with living in a survival mode relative to poverty it can be the “Straw that breaks the camel’s back”  
• Hence the “No Show.”

• Each individual is unique just as each patient is unique and must be addressed with patience and compassion in a culturally sensitive manner.
• Each individual varies with respect to:  
  – The type of barriers  
  – The relationship between barriers  
  – Even within a given barrier
BARRIERS

• The navigators are critical because they:
  – are Native Americans living in the same community
  – develop personal and professional relationships with the individual
  – have a deeper understanding of the individual
  – are the ones who can best peel the “onion”

• The relationship which develops is one of trust based on:
  – compassion
  – concern
  – confidentiality
  – cultural understanding

THE ROLE OF THE NAVIGATOR

• The primary educator:
  – Basic cancer information
  – Importance of screening
  – Importance of early detection

• Arrange for screening:
  – Appointments
  – Transportation; etc.

• Identify barrier(s)
THE ROLE OF THE NAVIGATOR

- Develop a plan to solve barrier(s)
- Work through the barriers with the individual
- Modify the plan as needed
- Maintain appropriate record keeping

INITIAL SOLUTIONS

Access to Health Care for Cancer Screening

- Navigators provide transportation, arrange for child care and other logistical support to get Tribal Elders to cancer screening clinics and other appointments as needed
- Enlist additional providers to hold special screening clinics on the Reservations
- Transport Tribal Elders up to 2-3 hours away for screening procedures (mammography, colonoscopy, etc.)
CULTURAL SOLUTIONS
Demystifying Cancer

- Form reservation cancer support groups (i.e., Soaring Eagles and Angels of Hope).

- Honoring Round Dances and Give-Away Ceremonies: Gatherings and Ceremonies where individuals dance in honor of or in memory of a loved one who has or has had cancer.

- Cancer awareness booths at annual Reservation health fairs, pow-wows, rodeos & other community events.

Heart Butte Annual Celebration

Tribal Elder & Study Participant

Alice DeRoche from Blackfeet Tribe was part of the float celebrating cancer survivors and promoting the idea of tobacco being a sacred part of traditional culture.

Heart Butte Annual Society Celebration Heart Butte, MT August 2008
WINDS OF CHANGE
The Best Time to Start is Now

• Major barriers are obvious. Immediate needs are an increase in healthcare providers and other related staffing, and funding to provide primary and secondary prevention and acute and chronic care services to American Indians.

• Continue to develop and maintain functional and effective partnerships with the Tribes, including Community Based Participatory Program Development & Implementation.

WINDS OF CHANGE
The Best Time to Start is Now

To affect positive change in healthcare and eliminate disparities among Native Americans - it is necessary to:

- Empower Tribes to define their own healthcare problems & develop their own solutions to these problems

- Work with Tribes to obtain needed funding from the Federal Government and Private Agencies and Foundations
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