Science Advance #7. Desire for Cancer Education and Muscogee (Creek) Nation NCMHD Science Advance

Title: Desire for Cancer Education and Muscogee (Creek) Nation

Online Evaluation Program and Muscogee (Creek) Nation Preliminary Data

Background: NNACC is a community-based participatory research (CBPR) project among Native American Cancer Research Corporation (NACR) (Colorado), Intertribal Council of Michigan, Incorporated (ITCMI) (Michigan), Rapid City Regional Hospital (RCRH) (South Dakota), Great Plains Tribal Chairmen's Health Board (GPTCHB) (South Dakota), Comanche Nation [PI: Eschiti, R15 NR 012195] (Oklahoma) and Muscogee (Creek) Nation (Oklahoma). Twice each year, in partnership with a local Native organization, Native Navigators implement 24 hours of community education related to the full continuum of cancer care. The goal is to increase cancer knowledge among community participants and also to increase the visibility and accessibility of the local Navigator(s) who can help schedule screening appointments, carry out follow-up recommendations, and provide support and education for those diagnosed with cancer. The Navigators enter session summary data into an online evaluation system.

Advance: Tribal Nations practice careful project and study reviews prior to investing limited time and resources to new programs. Prior to submission of the supplement to add Muscogee (Creek) Nation to the NNACC study, the Nation provided both a tribal resolution and letter of support. In compliance with Muscogee (Creek) Nation program requirements, upon notice of the supplement grant award to include their community with this study, the Nation conducted a detailed and careful review to confirm the project was still of priority interest and respectful to their community. This review required 9 months following notice of grant award. For those unfamiliar with the care Native communities undertake to protect their communities from research abuse, this may be seen as unusual. However, these practices are necessary and do not need to interfere with the Nation attaining the project goals and aims. For example, once approval was obtained, community education was immediately started with excellent results. Muscogee (Creek) Nation's initial 24-hour workshop series was held twice a week from October 11 through November 17, 2011. The total number of participants (includes people who attended multiple workshops/ duplicate participants) was 731 (469 females and 204 males) of whom 625 were American Indian. The participants were as young as 18-21 year old (n=40) and several (n=18) were over 80 years of age. The workshops were in great demand (see below) and resulted in significant increases in cancer knowledge.

Public Impact Statement/Significance: MCN hired Native Patient Navigators in September and immediately confirmed its Memorandum of Agreement with a local well-respected partner, Pamela E. Iron & Associates. NACR and MCN-NNACC staff implemented a vigorous Navigator training schedule that included staff traveling back and forth between Pine, CO and Okmulgee, OK. The baseline Family Fun Event and the 24-hours of community education were initiated in early October and were completed November 17th. Most NNACC settings average 20 participants per workshop. However, the Okmulgee American Indian community is very eager to take part in this program and learn more about cancer prevention, early detection, control and survivorship. Their average attendance quickly grew to more than 60 community members. The baseline Family Fun Event had 21 participants and their average percent for correctly answering pre-workshop questions was 50.4%. The average number of participants to take part in workshops pre-session demographics and knowledge assessments was 54 individuals. The average percentage of participants who answer presession knowledge items correctly was 54.1%. The average increase in knowledge from pre-workshop knowledge to postworkshop knowledge is 25.8%. This illustrates the great desire communities have to learn more and do more to be healthy, productive members of their respective tribal nations. When asked if they felt the workshops provided useful information, 98.2% responded "I agree" or "I strongly agree". Almost all (93.2%) said they would recommend the session to others in their community.

Additionally, the underlying rationale for implementing these workshop series is to increase the visibility and availability of Navigator within the local American Indian community. The project team anticipates community members requesting the assistance of the Navigator to help schedule cancer screenings and to assist with abnormal cancer test findings and supportive follow-up care over the next year.

Specific Area of Opportunity: Health disparities

Grant Support (solicited vs. investigator-initiated): "Native Navigators and the Cancer Continuum (NNACC) [PI: Burhansstipanov, R24MD002811]

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