



The Anishinaabek Cervical Cancer Screening Study – A Community Update Gathering

Looking Back and Moving Forward: Findings from Reflective Sharing Circles

Brenda Magajna, Ingeborg Zehbe, Thunder Bay Regional Research Institute, Department of Biology at Lakehead University,
 Pamela Wakewich, Sociology/Women's Studies & CRaNHRR at Lakehead University, Thunder Bay, ON
www.accsfn.com, accss@tbh.net



EVALUATING PAST PRACTICES AND DEFINING AND PLANNING FOR FUTURE SUCCESS

THE ANISHINAABEK CERVICAL CANCER SCREENING STUDY (ACSS)

Cervical screening can prevent cancer, so why are First Nations women still 2 – 20 times more likely to develop cervical cancer? ¹⁻³

- Less access to screening? Less awareness? Other barriers? Would more women participate if they could use self-sampling?
- Long term infection with Human Papillomavirus (HPV) is the primary cause of cervical cancer ^{4,5}
- Self-sampling for HPV can provide early indication of risk

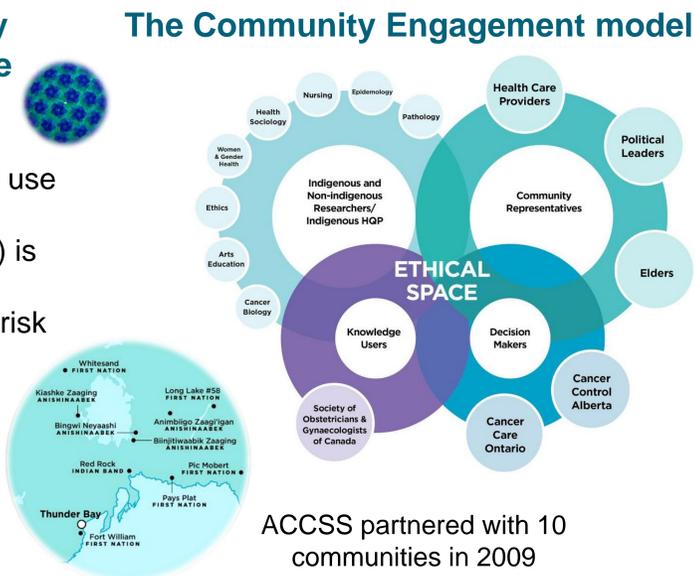
ACSSS conducted interviews and sharing circles:

- Main barriers to screening: education, transportation, shortage of health care providers, colonial legacy ^{6,7}

ACSSS screening trial: self-sampling vs Pap test?

- Twice as many women opted for self-sampling⁸
- 20 % of women tested positive for high risk HPV⁸

Study goal: to increase cervical screening and reduce cervical cancer rates in First Nations women



Research Questions

1. What worked and what could have been done better?
2. What are the best approaches to deliver cancer prevention education?
3. How will we know when the project has been successful?

1. Evaluating ACCSS

Strengths

- Created Awareness
- Use of Ethical Space concept –not privileging one knowledge base over another
- Persistence of the research team
- Provided self-sampling alternative

Areas for Improvement

- Communication
- Information
- Study Design

2. Best Approaches for Cancer Prevention Education

- Simple, short messages with visuals
 - 'Hands on' arts, crafts, land-based activities to encourage conversation
 - Start young to encourage self-esteem, self-care
 - Be respectful
 - Remove stigma of HPV
 - Change taboo attitudes about "cancer"
- "Your fight will be strong if you go early and do the follow up!"***
- Incorporate community uniqueness
 - Tell where to find more information

3. Defining Success

- Increased rates of screening and reduced rates of cervical cancer in First Nations women in Canada
- Increased awareness of HPV and cervical cancer prevention
- Informed about healthcare
- Increased comfort accessing health services
- Empowerment and increased self worth
- Removing HPV and cancer stigma
- Reducing the fear – cancer prevention by early detection
- Sustainable routine screening
- Policy and funding changes



The Community Update Gathering – October 2015

Goals:

- To share the study findings
- To invite community feedback
- To decide next steps



Moving Forward

- Develop community-derived educational resources that can be used to increase awareness of HPV and cervical cancer and the benefits of screening
- Promote awareness of HPV self-sampling as an alternative to Pap testing
- Have policy workshops with decision makers to adapt screening guidelines

References

1. Marrett & Chaudhry 2003 Cancer incidence and mortality in Ontario First Nations, 1968-1991 (Canada). *Cancer Causes Control*, 14, 259-68.
2. Decker et al 2015 Pap test use and cervical cancer incidence in First Nations women living in Manitoba. *Cancer Prevention Research*, 8, 49-55.
3. Colquhoun et al 2010 An investigation of cancer incidence in a First Nations community in Alberta, Canada, 1995-2006. *Chronic Diseases in Canada*, 30 (4), 135-40.
4. American Cancer Society. *Global Cancer Facts & Figures 3rd Edition*. Atlanta: American Cancer Society; 2015.
5. zur Hausen 2000 Papillomaviruses causing cancer: Evasion from host cell control in early events in carcinogenesis. *Journal of the National Cancer Institute*, 92, 690-698.
6. Maar et al 2013 A qualitative study of provider perspectives of structural barriers to cervical cancer screening among First Nations women. *Women's Health Issues*, 23(5):e319-25.
7. Wakewich et al 2015 Colonial legacy and the experience of First Nations women in cervical cancer screening: A Canadian multi-community study. *Critical Public Health*
8. Zehbe et al 2015 A community-randomized controlled trial embedded in the Anishinaabek Cervical Cancer Screening Study: human papillomavirus self-sampling versus Papanicolaou cytology. *BMJ Open* (in review).

Acknowledgements



More information: www.accsfn.com