



DEPARTMENT
OF HEALTH

ALBERTA MÉTIS CANCER STRATEGY: A PLAN FOR ACTION

LI KAANSAYR AEN
ISHITOOTAMIHK:
AEN PLAAN
TOTAMOWIN



Vision

Métis Albertans have access to safe, equitable, and quality cancer care.

Mission

To advance the cancer journeys of Métis Albertans.
To provide culturally meaningful programming.
To advocate for culturally safe cancer care.
To reduce the burden of cancer among Métis Albertans.

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Acknowledgments

We acknowledge the Métis Albertans and their loved ones who shared their cancer stories and experiences during the Métis Nation of Alberta (MNA) regional engagement sessions and the Annual Health Forum in 2018 and 2019. We offer our gratitude for sharing your cancer journeys and highlighting gaps, needs, and recommendations the MNA can leverage to advance the priorities of Métis Albertans as they navigate their cancer journey.

The Alberta Métis Cancer Strategy was made possible through funding received from the Canadian Partnership Against Cancer (CPAC) and partnerships with:

- The *CANHelp* Working Group at the University of Alberta
- Cancer Care Alberta at Alberta Health Services
- Alberta Health Analytics and Performance Reporting Branch

A Message from the President

Cancer has negatively impacted the lives of our community, resulting in the loss of loved ones, and continues to affect the larger Métis community in many ways. As the President of the Métis Nation of Alberta, I am delighted to share our cancer Strategy, the *Alberta Métis Cancer Strategy*, to help guide our efforts in responding to the self-determined needs of Métis Albertans and their loved ones on a cancer journey.



This Strategy is grounded in evidence and reflective of the stories, experiences, and perspectives shared by Métis Albertans currently facing cancer. It highlights several actions and recommendations that will facilitate our next steps in addressing the cancer journey needs of our community. This Strategy provides a clear map for us to leverage efforts and develop interventions to alleviate the burden of cancer in our community.

I sincerely thank our partners, the *CANHelp* Working Group at the University of Alberta, Cancer Care Alberta at Alberta Health Services, and the Alberta Health Analytics and Performance Reporting Branch. I would also like to thank the Canadian Partnership Against Cancer (CPAC) for funding and supporting this Strategy. This project would not have been possible without the commitment and support from all our partners, and I am therefore hopeful we will continue to build and strengthen these partnerships during the implementation and delivery of this Strategy.

Sincerely,
Audrey Poitras
President, Métis Nation of Alberta



Otipemisiwak—Those Who Govern Themselves

Métis are one of the three constitutionally recognized distinct Indigenous peoples in Canada,¹ originating from the unions between European fur traders and First Nations women in the 18th century. The Métis have their own distinct culture, traditions, history, identity, and way of life.² In 2002, the Métis National Council adopted the national definition of “Métis” as follows:

“ Métis means a person who self-identifies as Métis, is distinct from other Aboriginal [Indigenous] peoples, is of historic Métis Nation Ancestry and who is accepted by the Métis Nation.”³

The Métis culture is characterized by a unique language, music, dance, art, traditional hunting and gathering activities, and healing practices. Despite the negative impacts of colonization, Métis people have remained strong and resilient with a strong sense of cultural identity and community connection. The Métis Nation of Alberta (MNA) is the governing body for Métis peoples in Alberta. With over 56,000 Citizens, the MNA advances the self-determined priorities of Métis Albertans through social, economic, cultural, educational, and health development.⁴

Métis Albertans perceive health as holistic and grounded in Métis concepts of health and well-being, including a focus on cultural practices and traditions; mind, body, and spirit; community connections; and relationship with the land and traditional teachings on the land. MNA Citizens actively participate in MNA-led engagements to identify priorities and inform the development of interventions that promote and support their health and well-being.

Introduction

The Alberta Métis Cancer Strategy provides a clear path for the Métis Nation of Alberta (MNA) to respond to the cancer journey needs of the Métis people in Alberta. It is intended to support all Métis people in Alberta (MNA Citizens and those who self-identify as Métis) on a cancer journey. This includes Métis people diagnosed with cancer, survivors, and their loved ones. The Strategy emphasizes a decolonial approach to cancer care by centering the self-determined priorities of Métis Albertans and describing gaps, needs, and opportunities in response to Métis Albertans' cancer experiences. The Strategy outlines priorities and actions for the MNA and provides recommendations for Cancer Care Alberta (CCA) to include in the Alberta Indigenous Cancer Action Plan.

The Strategy is grounded in the perspectives and voices of Métis Albertans who generously shared their experiences during the MNA-led regional engagements and the Annual Health Forum in 2018 and 2019. Through these engagements, Métis Albertans shared their cancer journey experiences, including barriers to accessing quality and safe cancer care. In addition to sharing the challenges they faced while accessing cancer care, Métis Albertans provided insights on potential solutions and opportunities to explore in order to address challenges in cancer care, thus improving the delivery of safe and quality cancer care to all Métis Albertans.

Additionally, the Strategy is informed by epidemiological data on cancer incidence and mortality among Métis Albertans from 2013 to 2019.⁵ The collection of this data was made possible through the existing Information Sharing Agreement (ISA) between Alberta Health and the MNA. The ISA allowed for data linkage between the MNA Identification Registry, and the population and cancer registries maintained by Alberta Health, generating Métis cancer incidence and mortality data. This data paves the way for understanding cancer incidence and mortality among the Métis population in Alberta, consequently informing interventions that the MNA can adopt to respond to the cancer journey needs of Métis Albertans.

The Strategy is also informed by the findings of an environmental scan conducted by the MNA to identify cancer supports available and accessible to Métis Albertans on a cancer journey. The environmental scan, which included key informant discussions with program leads and administrative staff of Indigenous programs in Alberta, revealed gaps and barriers that Métis Albertans face while seeking cancer care in Alberta. The findings of the environmental scan are consistent with a scoping review which reported that Indigenous peoples experience inequitable access to cancer care in Canada.⁶ The environmental scan also revealed a dearth of Métis-specific cancer supports, necessitating a need to collect Métis-specific data and develop culturally meaningful cancer resources and supports for Métis Albertans currently on a cancer journey.⁷

The Alberta Métis Cancer Strategy is an essential part of Canada's commitment to addressing inequities and barriers experienced by Métis people seeking cancer care. The Strategy lists priorities that align with the Canadian Partnership Against Cancer (CPAC)'s Métis-specific priorities and actions, as listed in the *Canadian Strategy for Cancer Control (2019–2029)*: Culturally appropriate care closer to home; Peoples-specific, self-determined cancer care; and Métis-governed research and data systems.⁸ This Strategy's priorities, actions, and recommendations have been validated by those who participated in the 2018 and 2019 engagement sessions, and the broader Métis community at the 94th Annual General Assembly in August 2022. The Strategy provides a road map for the MNA to respond to the needs of Métis Albertans on a cancer journey, thus promoting the health and well-being of all Métis Albertans.

The Strategy at a Glance

PRIORITY 1. ENGAGEMENT



1.1 Collect data specific to the experiences of Métis Albertans on a cancer journey

ACTIONS FOR THE MNA

- Collect Métis-specific data on cancer screening and end-of-life/palliative care
- Create indicators of quality cancer care that are meaningful to Métis Albertans and collect data on developed indicators
- Engage with Métis Albertans to continuously improve resources and programs
- Promote opportunities for participation in cancer research at the MNA and elsewhere

RECOMMENDATIONS FOR CCA

- Collaborate with the MNA to collect Métis-specific data
- Utilize Métis-specific data to inform evidence-based decisions
- Collaborate with the MNA to monitor indicators of quality care that are meaningful to Métis Albertans within the Alberta cancer care system



1.2 Invest in meaningful relationships and partnerships

- Strengthen partnerships with Alberta Health and Alberta Health Services
- Explore meaningful opportunities to highlight and advance Métis cancer journeys
- Engage appropriate partners in the implementation of this Strategy

- Facilitate the development of Data Governance Agreements to support Métis-specific data collection and sharing



1.3 Increase research capacity

- Pursue funding for Métis cancer research and community-based programs that move research into action
- Advocate for capacity funding at the federal and provincial level to support self-determined research and programming
- Strengthen partnerships with academic institutions and other research partners

- Advocate with Indigenous Wellness Core and other actors to promote opportunities that enhance the self-determination of Métis Albertans

PRIORITY 2. CULTURALLY SAFE CARE



2.1 Address racism and discrimination in the health care system

ACTIONS FOR THE MNA

- Develop new cultural safety training opportunities
- Promote and evaluate the uptake of MNA's Métis Cancer Care Course

RECOMMENDATIONS FOR CCA

- Promote the MNA's Métis Cancer Care Course
- Adopt strategies and pilot interventions to enhance culturally safe, trauma-informed, and person-centered practices



2.2 Promote a holistic system of care

- Provide opportunities that foster culture and community connection

- Provide and promote access to cultural spaces
- Integrate person-centered approaches to healing that recognize the diversity of Métis Albertans

The Strategy at a Glance

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PRIORITY 3. CULTURALLY MEANINGFUL SUPPORTS

	ACTIONS FOR THE MNA	RECOMMENDATIONS FOR CCA
3.1 Increase access to Métis-specific cancer supports	<ul style="list-style-type: none"> Develop and deliver Métis-specific resources and supports Provide Métis-specific peer support groups Support financial needs of Métis Albertans on a cancer journey Promote and evaluate the MNA Tobacco Reduction Program Develop programs to support cervical cancer screening and HPV immunization 	<ul style="list-style-type: none"> Address challenges related to obtaining referrals for services Improve coordination of services to facilitate access to cancer supports Advocate with Indigenous Wellness Core and other actors to increase access to Métis-specific cancer supports Engage with the MNA and Métis Albertans in meaningful ways to inform appropriate supports
3.2 Improve access to cancer care for Métis Albertans living in rural and remote areas	<ul style="list-style-type: none"> Advocate for the provision of medically necessary travel and other health benefits at the federal and provincial level Promote and evaluate the MNA Cancer Transportation Program 	<ul style="list-style-type: none"> Increase awareness of jurisdictional barriers to accessing cancer care Leverage virtual technology and build capacity for safe virtual cancer care
3.3 Recruit and retain Métis staff in the health care system	<ul style="list-style-type: none"> Advocate for equitable and safe training and/or mentorship of Métis students in health care Collaborate with academic and health care institutions to deliver training that recognizes the needs and experiences of Métis peoples 	<ul style="list-style-type: none"> Collaborate with the MNA and academic institutions to link Métis students to training and/or mentorship opportunities in health care



PRIORITY 4. SUPPORTING CANCER CARE

	ACTIONS FOR THE MNA	RECOMMENDATIONS FOR CCA
4.1 Improve access to health information among Métis Albertans	<ul style="list-style-type: none"> Develop resources and tools to facilitate understanding of health information Create video resources to share health information Increase the presence of the Michif language in developed resources Design a navigation platform to facilitate access to health information 	<ul style="list-style-type: none"> Provide and promote culturally appropriate resources and tools to access and understand health information
4.2 Improve patient navigation and advocacy	<ul style="list-style-type: none"> Develop community-based programming to provide targeted navigation and advocacy support 	<ul style="list-style-type: none"> Collaborate with the MNA to connect Métis Albertans accessing the Indigenous Patient Navigator program to relevant MNA supports Improve access to primary care services



Métis Albertans' Experiences with Cancer

Cancer is a disease characterized by the growth of abnormal cells in the body. Normally, when human cells grow old or become damaged, they die, and new cells grow. However, during abnormal cell growth, damaged cells do not die, they grow and multiply when they should not. These abnormal cells can spread to other parts of the body and cause disease, a process called “metastasis.”⁹

Cancer is the leading cause of death in Canada, with an estimated 40% of Canadians developing cancer in their lifetime.¹⁰ A recent analysis comparing incidence and mortality rates between Métis and non-Métis populations in Alberta revealed the incidence of bronchial and lung cancer remains higher among Métis people compared to non-Métis populations in Alberta.⁵ This finding is consistent with an earlier study (1992–2009) that reported higher cancer incidence in Métis populations relative to non-Métis populations in Canada.¹¹ Therefore, it is critical to consider the cancer journey experiences of Métis people when developing interventions to alleviate the impact of cancer among Métis Albertans.

Métis people in Canada experience unique barriers and health inequities that contribute to poor cancer and health outcomes.⁷ Some of these challenges result from the history of colonization that has continued to amplify the trauma, racism, and discrimination experienced by Métis people accessing cancer care. In addition, Métis people living in rural and remote areas face significant barriers while seeking cancer care, for example, travel-related costs and time needed for traveling.¹² This can be magnified by limited financial support available to pay for the high costs associated with cancer treatment which is usually not covered by the Provincial Health Care Insurance Plan. Despite available support for Indigenous peoples in Canada, many programs include strict eligibility criteria and may not be accessible to Métis Albertans, for example, the Non-Insured Health Benefits (NIHB) program offered by Health Canada's First Nations and Inuit Health Branch (FNIHB).¹³

Moreover, Métis people are not identified in the health care system, which serves as a hindrance to connecting Métis people to meaningful supports.¹² This is because the ethnocultural identity of cancer patients is not actively collected in the health

care system in Canada. However, if this was collected, it should be noted some Métis people may be hesitant to self-identify due to the fear of racialization and discrimination experienced by Métis people in cancer care.⁷ Additionally, there are very few culturally appropriate supports for Métis people diagnosed with cancer, further exacerbating inequities in accessing quality cancer care. The paucity of Métis-specific data has resulted in the dearth of Métis-specific interventions required to respond to the cancer journey needs of Métis people. Therefore, it is critical for researchers and organizations alike to invest in distinctions-based approaches to ensure the contextualization of experiences and perspectives of individuals in cancer research and programming. Thus, significant and intentional efforts are needed to address the existing gaps and barriers to ensure Métis people have equitable access to relevant, safe, and quality cancer care.

In 2018 and 2019, the MNA held focus group discussions across Alberta and at the Annual Health Forum with Métis cancer patients, survivors, and their loved ones. The goal of these engagement sessions was to hear and emphasize the cancer journey experiences of Métis Albertans and identify ways to respond to the unique needs of Métis cancer patients, survivors, and their loved ones in Alberta. During these engagements, Métis Albertans identified key themes which resonated with their cancer journeys, including:

- A need to advance cultural safety in services and programs available for Métis Albertans on a cancer journey.
- A need for culturally meaningful and relevant supports to respond to the cancer journey needs of Métis Albertans.
- A recognition of the existing barriers that inhibit equitable access to safe, quality, and timely cancer care for Métis Albertans.
- Strong support for programs and services to strengthen culture and community connection among Métis Albertans.

Grounded in the themes from engagements with Métis Albertans, the epidemiological data, and the environmental scan of cancer supports available to Métis Albertans, the Strategy highlights actions and recommendations that can facilitate a coordinated response to address the unique needs of Métis Albertans experiencing cancer.



Priorities and Actions

PRIORITY 1.

Engagement

The engagement of community members, partners, cancer agencies, health organizations, Indigenous organizations, and governments is warranted to respond to the cancer journey needs of Métis Albertans. Effective engagement will require collecting Métis-specific data, building meaningful partnerships, and investing in research that is responsive to the unique needs of Métis Albertans, as determined by the MNA and the Métis community.



ACTION 1.1

Collect data specific to the experiences of Métis Albertans on a cancer journey

There is a need for deeper understanding of Métis experiences related to cancer screening, diagnosis, treatment, and post-treatment. Studies report a significant gap in Métis-specific data related to cancer screening, incidence, mortality, and survival rates.⁷ The lack of adequate and accurate information specific to the health experiences of Métis people in Canada impedes the development of effective interventions needed to respond to the unique needs of Métis people.¹⁴ Consistent with findings from other studies, the environmental scan conducted by the MNA found very few Métis-specific screening and end-of-life/palliative care programs;^{7,15} for example, the resources developed by Cancer Care Ontario related to cancer screening,¹⁶ and those offered by the CPAC Virtual Hospice related to end-of-life/palliative care.¹⁷ This can be attributed to the lack of Métis-specific data available to support the need for developing relevant programs and supports. It is critical for Métis peoples' data and perspectives to be collected, understood, and used meaningfully to inform policy, programming, and resource development.

To that end, the Strategy calls on the MNA to provide and promote opportunities for Métis patients, survivors, and loved ones to participate in cancer research at the MNA and elsewhere. Conducting research with Métis Albertans provides an opportunity for community and cultural connection, which has been identified as critical support for the health and well-being of Métis Albertans. Additionally, the Strategy calls on the MNA to develop meaningful indicators of quality cancer care and collect data on developed indicators to measure and monitor the quality of care received by Métis Albertans on a cancer journey. While developing indicators, the MNA should utilize a strengths-based approach to ensure indicators are reflective of assets that support Métis health and well-being, such as connection to land, family, community, and culture.

The Strategy also calls on the MNA to actively engage with Métis Albertans to support validation and continuously improve resources and programs. Continuous engagement will ensure Métis perspectives are reflected and considered while developing interventions to respond to the needs of Métis Albertans on a cancer journey. Moreover, the Strategy calls on the MNA to collect Métis-specific data on end-of-life/palliative care. This will facilitate the understanding of end-of-life/palliative care supports needed to effectively respond to the cancer journey needs of Métis Albertans and inform meaningful programming. In addition to investigating end-of-life/palliative care for Métis Albertans, the Strategy calls on the MNA to collect Métis-specific data related to cancer screening. Cancer screening helps to identify cancer at its earliest stages when it can be easily treated and may help prevent certain types of cancers.¹⁸ Collecting Métis-specific data on cancer screening can enhance the understanding of Métis cancer screening behaviours, including facilitators and barriers to cancer screening, thus facilitating effective programming to prevent cancer, reduce cancer incidence and mortality, and improve cancer outcomes for Métis Albertans.

To support the understanding of Métis-specific cancer experiences, the Strategy recommends that CCA and other provincial health authorities and cancer agencies collaborate with the MNA to collect Métis-specific data on cancer screening and end-of-life/palliative care. The Strategy also recommends CCA and other cancer agencies utilize Métis-specific data to inform evidence-based decisions to develop policies and programming responding to the needs of Métis Albertans. Any research involving

Métis people should be grounded in the Principles of Ethical Métis Research.¹⁹ Additionally, the Strategy recommends CCA collaborate with the MNA to measure the quality of care received by Métis Albertans by monitoring indicators of quality care that are meaningful to Métis Albertans within the Alberta cancer care system.



ACTION 1.2

Invest in meaningful relationships and partnerships

The MNA should leverage existing relationships and invest in new collaborations and partnerships to support the cancer journeys of Métis Albertans. To this end, the Strategy calls on the MNA to build, strengthen, and maintain partnerships with Alberta Health and Alberta Health Services (AHS) to facilitate the development of meaningful Information Sharing Agreements. This will enable data linkages to support the understanding of Métis-specific experiences with cancer screening, incidence, mortality, and end-of-life/palliative care and inform effective programming to reduce the burden of cancer among Métis people.

Additionally, the Strategy calls on the MNA to explore meaningful collaborations and partnerships to support knowledge sharing, translation, and exchange opportunities to advance and highlight Métis cancer journeys. This includes research partnerships with academic institutions, funding partnerships, and other partnerships that can support program delivery; for example, through sharing program models with other Métis Nations and/or adapting existing models of care. Furthermore, the Strategy calls on the MNA to engage with appropriate and relevant partners both provincially and nationally to support the integration and implementation of this Strategy.

To support meaningful partnerships, the Strategy recommends CCA facilitates the development of Data Governance Agreements (DGAs) between the MNA and provincial health authorities, where appropriate, to support the collection and sharing of Métis-specific data. Studies demonstrate successes in linking data registries to generate Métis-specific data that can be used for disease surveillance and to inform health programming.⁷

**ACTION 1.3*****Increase research capacity***

The Strategy calls on the MNA to pursue funding opportunities for Métis cancer research and community-based programs. The MNA should invest in research that promotes the translation of knowledge into action to ensure research findings are relevant and applicable to meet the needs of Métis Albertans. The Strategy also calls on the MNA to advocate for capacity funding at the federal and provincial level to support research and programming for Métis Albertans. Funding opportunities should be responsive to the self-determined priorities of Métis Albertans and be flexible enough to allow the MNA to adapt to the changing needs of the community without compromising opportunities for Métis Albertans.

Additionally, the Strategy calls on the MNA to strengthen collaborations with academic institutions and other research organizations to enhance research capacity and support the completion of rigorous research for Métis Albertans. The Strategy recommends CCA advocates with the Indigenous Wellness Core (IWC) and other actors in the cancer system to promote opportunities that strengthen the self-determination of Métis Albertans. For example, advocating for flexible funding agreements, developing DGAs aligning with the Principles of Ethical Métis Research,¹⁹ and conducting research in close partnership with Métis Albertans. This may enhance the provision of sustainable opportunities and solutions to respond to the cancer journey needs of Métis Albertans, consequently supporting their health and well-being.

PRIORITY 2.

Culturally Safe Care

“ Cultural safety is an outcome based on respectful engagement that recognizes and strives to address power imbalances inherent in the health care system. It results in an environment free of racism and discrimination, where people feel safe when receiving health care.”²⁰ —First Nations Health Authority: Creating a Climate for Change

Métis peoples' history of colonization has created and maintained many traumas that continue to negatively impact the health and well-being of Métis people. This is exacerbated by existing health inequities and broad determinants of Métis health, which create barriers to accessing culturally safe and quality cancer care. Furthermore, intergenerational trauma resulting from experiences of colonization continues to negatively impact the health and well-being of Métis Albertans.²¹ This has created mistrust in the health care system and health care providers by association, contributing to the low uptake of health services and poor health outcomes among Métis people. Key informant discussions revealed that previous harmful experiences with the health care system hinder Métis people from accessing timely cancer care, resulting in poor cancer outcomes and adverse impacts on Métis health.

“ I went to see the doctor and she checked me. She was the same one who told me I didn't need a mammogram. Then she said, 'you have to go for some biopsies.' And I was like, okay ... [they said] 'you can't have any pain killers!' They laid me down, and they are like pulling this stuff out while I am hyperventilating, almost passing out with the pain! They don't freeze you! When they were done the doctor told me to go back a week later. So, I went back and saw her.” —Métis Albertan

Providing culturally safe care requires the implementation of structures that promote and support the understanding of Métis culture and identity and a commitment to address power imbalances experienced by Métis people. It also includes trauma-informed care which actively recognizes and understands the impact of trauma on Métis people and avoids re-traumatization. This Strategy focuses on priorities that can be coordinated and implemented to ensure Métis Albertans receive culturally safe

care: addressing racism and discrimination in the health care system and promoting holistic care that responds to the needs of Métis Albertans.



ACTION 2.1

Address racism and discrimination in the health care system

Racism is deeply rooted in historical events such as colonization and continues to be a reality for many Métis Albertans.²² Community engagements led by the MNA in 2018 and 2019 revealed Métis Albertans experience racism at all levels of the health care system. These sometimes manifest as stereotyping of Métis people by health care providers, consequently failing to deliver quality, safe, and person-centered care.

“ When you go to the hospital or the emergency, especially if you’re overweight, they just think, ‘oh, another fat Indian.’ You don’t get care that maybe a slim person would get. Or when [the health professionals] think you’re just there for medication. No, we aren’t here for medication, we are here to be treated for a condition that is affecting us.” —Métis Albertan

It is necessary for health care providers to understand and respect the diversity of Métis people, including their way of life and approaches to health and well-being. The lack of respect experienced by some Métis people in the health care system creates negative experiences contributing to fewer Métis people seeking cancer care and resulting in poor health outcomes among Métis Albertans.

“ There are restrictions around what kind of ceremony you can offer in hospital without the permission of the Elder who is actually on staff. So, medicines would be left in the room after prayers and it was frankly exhausting having to tell every single new staff person who comes on, ‘We are Aboriginal. We are Métis. This is what these are for. Please don’t disturb them.’ After the first night, I came back, and things had been thrown in the garbage. Those are sacred things! Having to say to every new staff person who comes on, ‘This is what this is. This is what it’s for. Please could you treat this with respect and honour?’ is exhausting.” —Métis Albertan

Fully addressing racism and discrimination will require combined efforts and commitment. In the meantime, its negative effects on the health care system can be mitigated by providing education and training opportunities for health care providers and staff.⁸ The Strategy calls on the MNA to develop new Métis-specific cultural safety training opportunities. Training opportunities should encourage a reflective practice that consider Métis realities and experiences, for example, the *Métis Cancer Care Course*. Additionally, the Strategy calls on the MNA to promote and evaluate the uptake of MNA's *Métis Cancer Care Course*, developed by the MNA in partnership with St. Elizabeth Health. This course shares the lived experiences of Métis Albertans and offers insights into providing personalized and culturally safe care throughout the continuum of cancer care.

To advance Métis-specific education and training for health care providers and staff, the Strategy recommends CCA increases health care providers' understanding of Métis history, culture, determinants of Métis health, and experiences by promoting the uptake of the MNA's *Métis Cancer Care Course*. Furthermore, the Strategy recommends CCA adopts strategies and pilot interventions to enhance culturally safe, trauma-informed, and person-centered practices. These practices emphasize building trust, encouraging compassionate care, and avoiding re-traumatization among Métis Albertans on a cancer journey.



ACTION 2.2

Promote a holistic system of care

Métis people perceive health as holistic, catering to the physical, mental, emotional, and spiritual aspects of a person. Many emphasize the importance of community and cultural connection as critical to their health and well-being, for example, community events that allow Métis Albertans to share food, language, prayer, smudging, music, and dance. Community and cultural connections promote balance between the mind, body, and spirit, thus supporting Métis health and well-being.²³ Métis Albertans have identified several gaps hindering their access to supports needed to advance through their cancer journeys.

“ I just needed the support and that was what was lacking for me ... [it] was the support. I had to really look for it and be in the right place and contact the right people to get that traditional stuff that is within our DNA. That’s what healed me.” —Métis Albertan

It is crucial for health care providers to understand and respect the role of traditional approaches to the healing and recovery of Métis people, thus providing opportunities within the health care system for Métis Albertans to incorporate these approaches into their cancer journeys. The health care system must promote a holistic approach to care that honours Métis’ perspectives on health and well-being.

“ I had my surgeries, but I also went into a sweat, and I used Indian medicine. It’s what you believe. I believe in God, but I also believe that I am here because of the Indian medicine that I used. That’s what I believe. I took my Indian medicine to my doctor. I said to him, ‘This is what I’m using, will that contradict what I’m doing with the surgery the white man made?’ He said, ‘your people were here first. If you believe in it, use it.’ I went [back] to my doctor and I was told ‘I don’t know what you did, but whatever it is, continue doing it because you are cancer-free.’ I believe it’s because of that medicine. It’s what you believe.” —Métis Albertan

To that end, the Strategy calls on the MNA to promote opportunities that foster culture and community connection among Métis Albertans. These include community events and gatherings that promote cultural practices, such as jigging, beading, and harvesting. Cultural and community connections play an essential role in supporting the health and well-being of Métis Albertans, including those diagnosed with cancer, survivors, and their loved ones.

“ The doctors will say that’s not the right way to do it. You’re doing it the Indigenous way. It’s going to go against our pills and our chemotherapy and all that.” —Métis Albertan

The Strategy recommends CCA provides and promote access to cultural spaces that support holistic care, for example, providing opportunities for Métis Albertans to practice smudging while in cancer care. The Strategy also recommends CCA integrates person-centered approaches to healing in cancer care. These are approaches that recognize, respect, and respond to the diversity of Métis Albertans, as well as promote treatment of the whole person (mind, body, and spirit).

PRIORITY 3.**Culturally Meaningful Supports**

Métis Albertans emphasize receiving a cancer diagnosis is often a difficult experience, triggering many emotions and feelings, such as worry, stress and anxiety. This is compounded by the lack of resources and services to support people through their cancer journey.

“ As soon as my husband was diagnosed, it was a death sentence for him. That’s how he felt ... I didn’t know what to do.” —Métis Albertan

It is vital to provide culturally meaningful supports that respond to the unique needs of Métis Albertans throughout the different stages of the cancer continuum. Additionally, the health care system should provide safe spaces for culture and community connection, where Métis Albertans can share their cancer journeys to enhance their healing and recovery. Métis Albertans emphasize culture and community connection as an asset to support their cancer journey.

“ From my experience staying at the Compassion House, it was a beautiful house, really nice. The whole time I was in there, as beautiful as it was, I kept thinking, if we had something like this but for Métis, like Métis-focused. A place where people could stay, and they could have Elders come in or healing circles, supports for the family. When you get diagnosed with cancer, it’s not only you that goes through it, but also your family.” —Métis Albertan

**ACTION 3.1****Increase access to Métis-specific cancer supports**

Equitable access to meaningful cancer programs and services is necessary to support people on their cancer journeys. The environmental scan conducted by the MNA found very few Métis-specific cancer supports available for Métis Albertans. Many of these supports are scattered on different websites, making it difficult to

navigate and identify meaningful supports at various stages of the cancer journey. There is also a gap in cultural competency and safety in programs and services available for Métis Albertans. Several gaps were highlighted by Métis Albertans in the health care system that hinder access to essential services needed to support their cancer journey; for example, barriers associated with obtaining a referral to access mental health services.

“ With the mental health piece, I know there’s a big gap. And like even if you’re lucky enough to get on a waitlist or, you know, get referrals or whatever, it’s still a crazy wait.” —Métis Albertan

“ I didn’t talk to a psychologist, and I didn’t know what all the resources were. I didn’t know they had a counsellor there and a nutritionist. I had no idea what cancer was.” —Métis Albertan

It is necessary to address barriers associated with accessing cancer supports and services. The Strategy recommends CCA address challenges related to obtaining referrals for services, such as mental health and access to dietitians. The Strategy also recommends CCA collaborate with other partners to improve coordination of services to facilitate improved access to supports, including additional wellness supports such as yoga, meditation, arts and crafts, and exercise programs for Métis Albertans in cancer care. Moreover, the Strategy recommends CCA advocate with IWC and other actors to improve access to Métis-specific supports. It is critical that supports for Métis Albertans respond to their unique needs and priorities. The Strategy, therefore, recommends CCA engage with the MNA and Métis Albertans in meaningful ways to inform appropriate supports that resonate with the self-determined priorities of Métis Albertans. Ensuring improved access to culturally meaningful and appropriate supports will enhance the quality of care for Métis Albertans on a cancer journey.

To that end, the Strategy calls on the MNA to develop and deliver Métis-specific resources and supports that respond to the unique needs of Métis Albertans throughout the continuum of cancer care. The Strategy also calls on the MNA to provide Métis-specific peer support groups for cancer patients, survivors, and loved ones. Peer supports that reflect Métis culture and identity can support Métis Albertans by creating a safe space where Métis Albertans on a cancer journey feel

free and safe to share their experiences with other community members on a similar journey. Peer support groups should be tailored to respond to the diversity in the Métis population (i.e., age, gender, geographical location, etc.).

***“ On Facebook, you could do a closed group that would give us a forum where we could actually talk to each other.”
—Métis Albertan***

Furthermore, the Strategy calls on the MNA to develop programs and services to address the financial burden that often accompanies a cancer diagnosis. Métis Albertans indicated the difficulties they experience while going through a cancer journey, for example, high costs associated with cancer care and lack of childcare support that often creates barriers to accessing timely cancer care. Developing programs and services to respond to these needs will go a long way in supporting the cancer journeys of Métis Albertans.

“ I think also having resources for people with children. The Cross Cancer Institute would say they have great programs at Wellspring, but they would never have childcare. I lost my childcare subsidies right when I was diagnosed as well, so I had my two little [ones] at home with me when I was going through chemo.” —Métis Albertan

“ My mom was in palliative care, and I was my mom’s executor. I got a bill because they were trying to charge us for extended services. She wasn’t extended, she was in palliative care. I have to talk to them, then I have to go to a lawyer and say, ‘no, you’re not charging her that much.’ How can you charge her for extended care when she’s dying? To this day, I make a joke with my family and say mum knew when to leave this world and knew that the fee for extended care was too high.” —Métis Albertan

A recent analysis comparing cancer incidence and mortality between Métis and non-Métis populations in Alberta reported a higher incidence of lung and bronchial cancer among Métis women relative to non-Métis populations.⁵ According to the Canadian Cancer Society, lung cancer is the leading cause of death in Canada, responsible for more deaths than colorectal, breast and prostate cancers combined.¹⁰ These findings

indicate a need for targeted interventions to reduce lung cancer incidence and mortality among Métis populations in Alberta. For example, connecting Métis women and Métis cancer patients with available tobacco reduction programs to reduce the risk of developing lung and other cancers, and reduce cancer mortality among Métis Albertans, respectively.

To that end, the Strategy calls on the MNA to increase efforts to promote and evaluate the MNA Tobacco Reduction Program for Métis Albertans who wish to reduce or quit the use of commercial tobacco. Quitting commercial tobacco prevents the development of many cancers, including lung cancer.²⁴ For those already diagnosed with cancer, quitting commercial tobacco can improve their chances of survival and enhance their quality of life.²⁵ Métis Albertans shared the importance of quitting smoking cigarettes after their cancer diagnosis to enhance their healing and recovery.

“ I remember reading if you quit smoking at your time at diagnosis, you have a 50% better chance of healing. I quit that day. With the patch, the Nicorette patch, and the inhaler. I quit. I quit with my daughter.” — Métis Albertan

Additionally, the Strategy calls on the MNA to develop programs to support cervical cancer screening and human papillomavirus (HPV) immunization efforts for Métis girls and women. Studies report higher incidence for cervical cancer among Métis populations compared to non-Indigenous populations,^{7,11} thus necessitating a need to develop interventions to alleviate the burden of cervical cancer among Métis Albertans. This action is consistent with the World Health Organization’s goal to eliminate cervical cancer worldwide,²⁶ as well as CPAC’s *Action Plan to Eliminate Cervical Cancer in Canada, 2020–2030*, to eliminate cervical cancer by 2040.²⁷



ACTION 3.2

Improve access to cancer care for Métis Albertans living in rural and remote areas

Métis Albertans living in rural and remote areas need to travel to urban centres to receive cancer care. This usually results in financial and emotional strain for individuals and families depending on the proximity to cancer centres, for example, travel expenses and time consumed during travel.¹² Such barriers contribute to low cancer

screening uptake, late diagnosis, and poor treatment outcomes, negatively impacting Métis peoples' health and well-being. Despite these devastating challenges, very few programs are available to respond to this need. The environmental scan conducted by the MNA found very few medically necessary travel supports (transportation and accommodation programs) accessible to Métis Albertans. It is, therefore, essential to invest in programs and services to support Métis Albertans who need to travel long distances to access cancer care.

***“It’s scary for people from the north to have to go to the city because they don’t know how to drive there. It’s a totally different setting and you think, ‘Oh my god, what am I going to do?’”
—Métis Albertan***

The Strategy calls on the MNA to advocate for medically necessary travel and other health benefits at the federal and provincial level. This includes funding for transportation and accommodation programs that provide more affordable options for Métis Albertans who need to travel long distances to access cancer care. Travel supports can facilitate improved equity and timely access to cancer care for Métis Albertans living in rural and remote areas.

“[T]he housing they have through the Métis Nation head office, it’s saved us a lot, it’s financially helped us lots.” —Métis Albertan

Additionally, the Strategy calls on the MNA to promote and evaluate their *Compassionate Care: Cancer Transportation Program*,²⁸ to enable increased uptake and improved access for Métis Albertans. This program provides financial assistance to MNA Citizens travelling more than 50 kilometres from their primary residence to attend cancer-related appointments.

Métis Albertans who need to travel to neighbouring provinces and territories to access cancer care face jurisdictional barriers that impede the effective and timely transition to cancer care.²⁹ To reduce these barriers, adopting and implementing flexible policies allowing the coordination of services between jurisdictions is essential.⁸ Provincial health authorities should build strategic partnerships to facilitate better communication and collaboration between jurisdictions and cancer agencies.

To that end, the Strategy recommends CCA increase the awareness of jurisdictional barriers to accessing cancer care for Métis Albertans among health care providers, and support advocacy efforts of the MNA to increase access to equitable cancer care. This will go a long way in helping health care providers make informed decisions while working with patients from different jurisdictions. Furthermore, the Strategy recommends CCA leverage learnings and advancements from the use of virtual technology during the COVID-19 pandemic to build capacity for culturally safe virtual cancer care. Among the many benefits of utilizing virtual care is the reduction of time and stress usually encountered by those travelling long distances to access cancer care.³⁰ Hence, the use of virtual technology in cancer care can improve access to timely, equitable and quality cancer care for Métis Albertans living in rural and remote areas.



ACTION 3.3

Recruit and retain Métis staff in the health care system

Métis Albertans want to feel safe and connected to their culture and community throughout their cancer journey. Many prefer to be assisted by health care providers who understand and respect Métis culture and identity and can offer guidance in an often complex system.

“It would be nice to have someone specific like, you know, for Métis people” —Métis Albertan

To that end, the Strategy calls on the MNA to advocate for equitable and safe training and/or mentorship of Métis students in health care, for example, through practicum and internship opportunities. These opportunities will help prepare students with the knowledge, skills, and experience needed to work with Métis Albertans on a cancer journey. Additionally, the Strategy calls on the MNA to collaborate with academic and health care institutions to deliver training that will facilitate the understanding of Métis culture, history, and cancer experiences contributing to culturally competent health care providers, academic staff, and graduates, thus advancing cultural safety within these institutions.

“If you had someone who was willing to bridge the gap between the patient care with the medical professionals. We have a lot of really educated Métis people. We have people with the skills that could meet that need. It could be across all the regions. If there was an intervention person through head office that we could call and say, “this is the experience we’re going through, maybe it’s a miscommunication, maybe it’s a misunderstanding, maybe it’s outright neglect, who knows.” That person could maybe intervene on the Métis family’s behalf. We need that advocacy. Maybe their families can’t advocate for them. Some people are better at advocating than others.” —Métis Albertan

To advance this action, the Strategy recommends CCA collaborate with the MNA and academic institutions to link Métis students with available training opportunities such as internships and/or practicums to facilitate skill development and recruitment of Métis staff in the health care system. These opportunities include, but are not limited to, patient navigators and cultural helpers to assist Métis Albertans in navigating the health care system and accessing relevant resources and programs to support their cancer journeys.



PRIORITY 4.**Supporting Cancer Care**

Métis Albertans experience difficulties finding the support they need at different stages of their cancer journey. This is amplified by existing health inequities and racism in the health care system, contributing to adverse impacts experienced by Métis people in cancer care.²² It is essential to implement actions that support Métis Albertans in accessing quality and safe cancer care.

**ACTION 4.1****Improve access to health information among Métis Albertans**

A cancer diagnosis can be challenging, especially when one does not understand the information related to their diagnosis and/or treatment. Métis Albertans have shared that it can often feel overwhelming when one is uncertain of what to expect and where to find resources to support their cancer journey.

“ It was like everything got put on hold. Like everything just came to a life-crashing halt. Like you heard that word and it’s like, ‘what?’ Like it’s just a really scary, scary situation.” —Métis Albertan

“ I just wore the internet out, I still do. I’ll wake up in the middle of the night and there’s a question, and I punch it in on Google Scholar.” —Métis Albertan

Métis Albertans experience different challenges at different stages of their cancer journeys. Many have indicated most of the information available is not tailored toward the needs of the younger populations, such as youths and women of reproductive age (15–49 years). This gap inhibits access to information needed to facilitate decision-making about the best care and planning for the future (post-treatment), for example, information related to fertility preservation. It is, therefore, necessary to develop resources and tools to facilitate access to a wide range of information that caters to the diverse needs of Métis Albertans. For example, information related to

oncofertility, and available supports for Lesbian, Gay, Bisexual, Transgender, Queer or Questioning, and Two-Spirit (LGBTQ2S+) cancer patients, survivors and loved ones.

To that end, the Strategy calls on the MNA to develop resources and tools to facilitate adequate and timely access and understanding of health information throughout the continuum of cancer care. Resources and tools should reflect the diverse needs of Métis Albertans and respond to different demographic factors such as age and gender. Providing health information tools and resources can equip Métis Albertans to understand information related to their cancer diagnosis and facilitate informed decision-making about their care.

Additionally, the Strategy calls for the MNA to create video resources to share health information with Métis Albertans. The use of the videos to share information can increase uptake and facilitate access to health information for diverse audiences. Moreover, the Strategy calls on the MNA to increase the presence of the Michif language in developed health information resources to ensure they are reflective of Métis culture and promotes, maintains, and strengthens the Michif language among Métis Albertans. This also aligns with MNA's mandate to revitalize the Michif language and preserve the Métis culture and heritage for future Métis generations.

The Strategy also calls on the MNA to design a navigation platform to facilitate access to health information and ensure that Métis Albertans can find the resources they need in a user-friendly manner to support their cancer journey needs. To improve health literacy, the Strategy recommends CCA in partnership with IWC and other actors, provides and promotes culturally appropriate resources and tools to facilitate access to and understanding of health information for Métis Albertans on a cancer journey.

“ So, we go in and I think there was about seven or eight people waiting to see the nurse that was explaining everything about the chemo. It was just nothing but a routine for her. They had no compassion whatsoever. They talked so fast. Everybody just sitting there, and when it was time to ask questions, nobody even asked questions because they didn't understand a word that she was saying.” — Métis Albertan

**ACTION 4.2****Improve patient navigation and advocacy**

Patient navigation provides person-centered support, advocacy, and information needed to help patients and families navigate the health care system and access the support they need for their cancer journey.³¹ Key informant discussions with Indigenous Cancer Patient Navigators indicated a great need for the patient navigation program available for Métis, First Nations, and Inuit peoples in Alberta. Métis Albertans stress the importance of having an advocate to champion their rights and voice their perspectives to ensure they receive quality and timely cancer care.

“ I think there also needs to be a person [or] advocate, a Métis person that you could talk to and say, ‘I don’t know what’s the matter with me and the doctor isn’t doing anything,’ so that that advocate could go and advocate for them and say, ‘Hey, I want these tests done. I want this for them.’” —Métis Albertan

“ [You need] somebody that will be there, that will stand up for you and say, ‘This is not right. How you’re treating him is not right. He’s not getting any better.’ You need somebody that’s going to be firm with the doctors and say, ‘This is—There’s something wrong, you need to check everything.’” —Métis Albertan

In addition to having an advocate, Métis Albertans also emphasized the need for self-advocacy to ensure they receive the best care possible. Self-advocacy in health care allows people to voice their opinions, consequently creating an opportunity for their needs to be addressed and maintain a level of control over their health.³² Despite the availability of the stipulated Patients’ Bill of Rights, some patients may not be aware of their rights and may fail to advocate for themselves should this opportunity arise. It is, therefore, paramount to ensure that Métis Albertans in cancer care understand their Bill of Rights, as listed under the *Alberta Patients’ Bill of Rights*,³³ and have the necessary tools and skills to advocate for themselves, whenever they need to.

To that end, the Strategy calls on the MNA to develop community-based programming to provide targeted navigation and advocacy support for Métis Albertans to access the resources they need to support their cancer journey needs. Community-based programming would also provide an opportunity for the MNA to address barriers experienced by Métis Albertans while accessing cancer care; for example, travel-related supports for Métis Albertans who live in rural and remote areas, and culturally appropriate resources and programming.

“ When you can’t advocate for yourself and when you need someone. As Métis people, the First Nations people have that, the First Nations have support. We’re building our Nation, I think it’s an area to consider to put some work in, getting something like that.” —Métis Albertan

The Strategy recommends CCA collaborate with the MNA to connect Métis Albertans accessing the Indigenous Patient Navigator program to relevant MNA supports. This will strengthen the continuity of care throughout the different stages of cancer and facilitate improved access to psychosocial and advocacy support, thus ensuring Métis Albertans have access to resources and programs they need to support their cancer journeys.

Additionally, the Strategy recommends CCA improve access to primary care services such as access to dietitians and therapists, as well as advocate for access to family doctors. Métis people in Canada are less likely to have a family doctor relative to the entire Canadian population.³⁴ This contributes to the barriers impeding equitable access to cancer care for Métis people. Studies report that access to a regular health care provider can facilitate higher cancer screening participation among Métis populations.⁷ Adequate access to primary care services is therefore essential to ensure continuity of care and facilitate timely cancer care throughout the continuum of cancer care.



The Path Ahead

The successful delivery of this Strategy requires intentional and continuous efforts to leverage existing resources and relationships and build new partnerships to provide sustainability in research and programming. The MNA will work with partners to support the implementation of this Strategy and steward any collaborations related to research, programming, and resource development for Métis Albertans. The MNA will also utilize a community-led approach in the delivery of this Strategy to ensure that the progress made is reflective of community experiences and realities.

The MNA is committed to all Métis Albertans and partners in assessing the progress of this Strategy. Effective assessment requires developing quality measurement targets and indicators, collecting data, and reporting findings. Monitoring the Strategy is essential in measuring the impact of the Strategy and bringing forth any necessary changes required to maximize its related efforts to support the cancer journeys of Métis Albertans. The MNA is accountable for monitoring the impact of this Strategy and reporting the progress towards the Strategy's actions and priorities.

Cancer care goes beyond treatment, recovery, and survival. It includes all the relevant interventions that support health and well-being on an ongoing basis. This Strategy provides a road map for the MNA to develop and promote interventions that support the cancer journeys of Métis Albertans in cancer screening, diagnosis, treatment, and post-treatment. Supporting Métis Albertans means responding to their self-determined needs in a culturally meaningful and safe manner while respecting the diversity in the Métis population. This Strategy incorporates these insights and reflections and facilitates a coordinated response to realizing the Strategy's long-term vision where all Métis Albertans have access to safe, equitable, and quality cancer care.

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Appendix I: Glossary

Cancer

A disease characterized by the growth of abnormal cells in the body.

Cancer Diagnosis

The process of identifying the cause of cancer using tests and procedures, as well as investigating present signs and symptoms. Cancer diagnosis can also include decisions made based on test results such as biopsies, blood tests, physical exams, and imaging tests.

Cancer Incidence

The number of new cancer cases diagnosed in a given population within a given period of time, typically expressed as the number of new cancer diagnoses per 100,000 per year.³⁵

Cancer Mortality

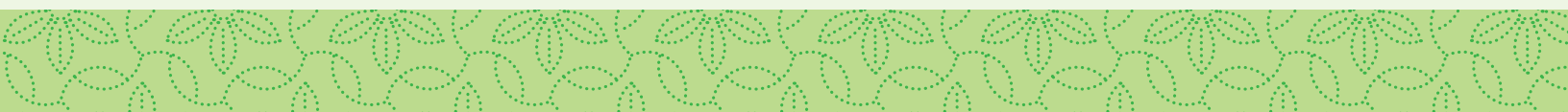
Also known as death rate, cancer mortality is the number of cancer deaths in a given population within a given period of time, typically expressed as the number of cancer deaths per 100,000 per year.³⁶

Cancer Screening

Testing or checking for cancer before symptoms start showing.³⁷ Some of the cancer screening tests include pap tests, stool tests and mammography. Screening programs are available in provinces and territories targeted towards specific groups of people.

Determinants of Health

A wide range of social, personal, economic, and environmental factors that influence population health, such as gender, culture, race, education, and income.³⁸



Epidemiological Data

Evidence relating to the occurrence, distribution, and clinical characteristics of a disease within a given population. In this Strategy, epidemiological data relates to the cancer incidence and mortality among Métis Albertans from 2013–2019.

Health Literacy

Defined both as personal and organizational health literacy:

- Personal health literacy refers to the degree to which people can find, understand, and utilize information and services to make informed decisions and actions regarding their health and that of others.³⁹
- Organizational health literacy refers to the degree to which organizations can empower individuals to find, understand and utilize information and services to make informed decisions and actions regarding their health and that of others.³⁹

Rural and Remote Areas

Towns or municipalities outside the commuting zone of larger urban centres.⁴⁰

Virtual Care

The use of technology either through video, audio, or text messaging to facilitate remote interaction between the patient and the care provider.³⁰

Appendix II: Resources

With the support from our partners, we have created several resources and programs to support Métis Albertans and their loved ones on a cancer journey, part of the Alberta Métis Cancer Strategy.



Miyooayaan (Wellness): Métis Guide for Wellness with Cancer

The Métis Guide for Wellness with Cancer incorporates qualitative data gathered during regional engagement sessions and the Annual Health Forum held in 2018 and 2019. Each chapter focuses on a different stage of the cancer journey and offers tips and recommendations shared by Métis Albertans. These tips and recommendations are intended to support Métis Albertans and their families as they navigate their cancer journey across all stages. <https://albertametis.com/programs-services/health/health-research-and-advocacy/cancer-research/miyooayaan-wellness-metis-guide-for-wellness-with-cancer/>



Cancer Journey Video Supports

This resource comprises four videos featuring Métis Albertans as they share their cancer journey experiences. Each story illustrates a different aspect of the cancer journey and features tips that may be helpful to other Métis Albertans on a cancer journey. This resource was informed by the 2018 and 2019 regional engagement sessions that were held to gather Métis Albertans' cancer experiences and stories. <https://albertametis.com/programs-services/health/health-research-and-advocacy/cancer-research/cancer-journey-video-supports/>



Compassionate Care: Cancer Transportation Program

Funded by the Canadian Partnership Against Cancer (CPAC), this program offers financial assistance to MNA Citizens traveling to cancer-related appointments in Alberta. The program was initially launched in 2018 as a pilot project and provided transportation support for MNA Citizens residing in the AHS North Zone (MNA Regions 1, 5, and 6). In 2020, the Cancer Transportation Program was scaled-up to offer financial assistance to MNA Citizens in all Regions, who require transportation support for cancer-related appointments.

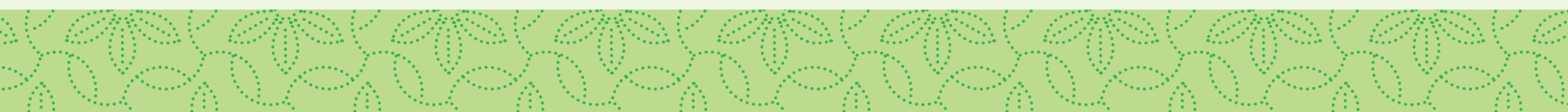
<https://albertametis.com/programs-services/health/community-wellness-2/compassionate-care-cancer-transportation/>



MNA Cancer Resources and Supports Webpage

This is a webpage with a list of trusted cancer supports, created to support Métis Albertans and their loved ones on a cancer journey. The listed supports are available to respond to Métis Albertans' cancer journey needs throughout the various stages of cancer care. The webpage is easily accessible through the MNA website.

<https://albertametis.com/programs-services/health/health-research-and-advocacy/cancer-research/cancer-resources-and-supports/>





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