



*Stay in
the circle...*

Spotlight: Northern Plains American Indian Cancer Summit



Above, presenters and community members attend the Northern Plains American Indian Cancer Summit.

The Northern Plains Comprehensive Cancer Control Program (NPCCCP), a program of the Aberdeen Area Tribal Chairmen's Health Board (AATCHB), hosted the 3rd Northern Plains American Indian Cancer Summit on October 20-22, 2008 in Mandan, ND. The purpose of the Summit was to create awareness and address the cancer issues American Indians face in the Northern Plains area, including Iowa, Nebraska, North Dakota, and South Dakota.

In August of 2007, NPCCCP completed and started to implement a regional cancer plan put together by the Northern Plains Cancer Coalition. Over 70 of those coalition members, including tribal health leaders, university researchers, and cancer survivors, came together at the Summit to discuss the past year's progress, decide actions to take for the next year, and learn and network with others about cancer issues facing Northern Plains tribal communities.

The Summit included cancer survivor stories, a keynote presentation by Dr. Judith Kaur, and presentations of several community-based cancer initiatives that were implemented in the past year. A highlight of the Summit was the presentation of the Innovative Tools for Health Communication by Native People for Cancer Control Director, Brenda Manuelito and Research Coordinator, Steve Charles. Brenda and Steve did a training with three Northern Plains Cancer Coalition members before the Summit, and their compelling digital stories were presented as part of the conference. (see photo)

The Cancer Summit was a major success, and the Northern Plains Cancer Coalition looks forward to continuing its work, finding new and innovative ways to improve cancer prevention and control in Native communities.

NPCC WELCOMES NEW STAFF, STUDENTS, AND VOLUNTEERS

We look forward to working closely with these individuals on several continuing and new initiatives aimed at reducing the burden of cancer health disparities in American Indian and Alaska Native communities.



Pati Irish

I am a nurse practitioner graduate student with plans to work with adults and older adults in Indian health. My husband and I have four grown children and our first grandchild. We are hikers, sailors, skiers and snowboarders. I visited the Makah, Lower Elwha, and Quinault tribes as part of the Mobile Mammography program, which NPCC helps support through Family Planning of Clallam County. I was also involved in outreach to Skokomish and La Push health fairs, helping to disseminate brochures and posters on cancer control. I am now involved in the Telehealth Network project. I feel honored to work at NPCC in this time of great change in America. My passion is healthcare for all.

Jenn Beers

Jenn Beers is a post-baccalaureate student who worked for several years as a software engineer and manager. She is currently preparing to apply to medical school. At NPCC, she is assisting with a project to provide Cancer Clinical Trials Education online.



Jon Tomhave

Hello, my name is Jonathan S. Tomhave (Hidatsa Ho-Chunk, Prairie Band Potawatomie), and I grew up in Riverside, CA. I have a Master's degree from the Native Voices Program from the University of Washington, and I am a doctoral candidate in Communication with a focus on Media Studies, International Communication, and the Ethnography of Communication, which fits within my love of storytelling (and listening) that I feel will help bring understanding between health professionals and institutions and their patients and communities. Since my time at UW I have been honored to serve as a member of the "House of Knowledge" Project Advisory Committee, a Communication Department Graduate Senator and Judicial Member for the Graduate and Professional Student Senate, and a re-founding member of Native American Students in Advanced Academia, which hosts an annual symposium focusing on international Indigenous graduate research and professional workshops addressing concerns regarding research with Native peoples and communities. I am excited to be a part of the projects that NPCC is currently engaged in, i.e. digital storytelling and the new Native Comic Book Project Initiative that launches this November. I have taught video production at the University of Washington, Bellevue Community College, Longhouse Media, and when time permits, I enjoy teaching Native youth the art and science of filmmaking. I am honored to be a part of the NPCC team and look forward to serving the community.



Francine Swift

My name is Francine Swift. My father is G. Jake Jones of the Port Gamble S'Klallam Tribe, and my mother is June Jones of the Chehalis Tribe. I'm currently a graduate student of the Native Voices program, Masters in Communication/American Indian Studies. I am in my second year as NPCC's Research Assistant. It is my privilege to serve as support staff in gathering photo images, short video and audio clips for the Center for Native Digital Storytelling, and I also support the Comic Book Project.



Research is challenging, but meeting Native people and working in their communities is what I've done for the past many years. I've worked with youth programs and social service programs, which has allowed me to learn my own culture as we have been re-claiming. It is an important mechanism to healing and fulfilling our purposes on this earth. I am a mother of five children, with one left in the nest. I recently received a S'Klallam name Wah-wash-e-lee, (a S'Klallam lullaby) and a Makah name shared with me by John Goodwin, Hot-noq(w)-eh-see-sim, to remind my family that we are related in a good way to the Johnson family at Makah. Thank you.

Laura Revels

Laura Revels, the Alaska NPCC Program Manager, is a Tlingit originally from Southeast Alaska, who loves woodcarving, beading, and taking photos and turning them into inspirational posters. She is passionate about creating culturally relevant ways to deal with cancer, and believes in the healing power of storytelling.



Native People *for* Cancer Control

WORKING TO CONTROL CANCER THROUGH EDUCATION,
PREVENTION, ACCESS TO CARE, AND RESEARCH



Medicine Wheel, 2004, 41 x 30 inches, acrylic on paper, NEA Museum Illustrative Program (MILIP).
Courtesy of the Smithsonian American Art Museum

WHAT YOU NEED TO KNOW ABOUT LUNG CANCER

- Lung cancer kills more American Indians and Alaska Natives than any other cancer.
- Even if you don't smoke, just being around other people's smoke increases your risk of lung cancer.
- Parents who smoke around their children increase the chances their children will smoke.

WHAT YOU CAN DO TO PREVENT LUNG CANCER

- If you smoke, the best thing you can do is quit.
- Encourage all people, especially youth and parents, not to smoke.
- Ask your health care provider about ways to quit smoking.



Stay in the circle of life...

November is Lung Cancer Awareness Month

Lung cancer is the leading cause of cancer deaths in the United States. Every year the disease claims the lives of about 200,000 people – more than colon, lymphoid, prostate, and breast cancers combined. Nearly 90% of lung cancers can be attributed to smoking.

Risk of the disease increases with the amount of time and the number of cigarettes a person smokes. Quitting, even after many years of smoking, can significantly decrease the chances of developing lung cancer.

“MY WORK REFLECTS both the inner and outer beauty of Native American people and the importance of practicing good health in transcending this universal beauty. In ancient days, toxins were few and tobacco was used for special occasions during rituals... and it only seems fitting that the magic of tobacco not be abused.”

Neil Parsons
(Southern Pikunni/Blackfeet)
Medicine Shield, 2004



NPCC Research Project Update HPV in Northern Plains Women: Epidemiology and Risk Factors

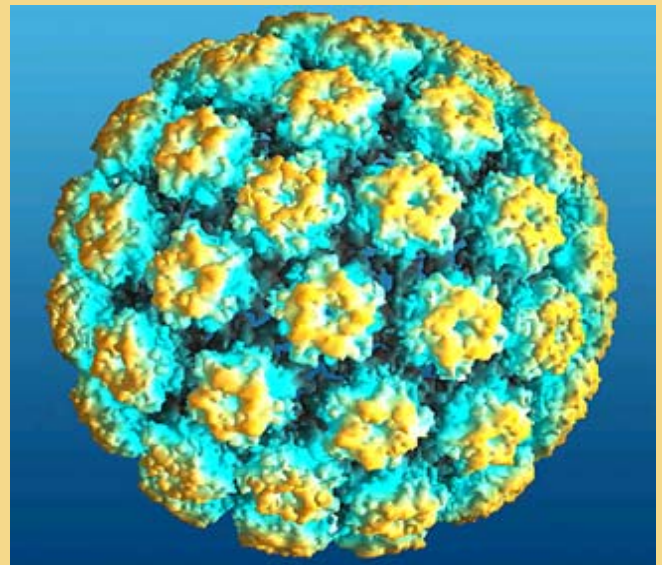
Maria Bell, MD, and Delf Schmidt-Grimminger, MD, Sanford School of Medicine University of South Dakota researchers, have completed data collection and are carrying out data analysis for their NPCC research project. This project was begun because the cervical cancer mortality rate in American Indian women is nearly four times higher than in the White population. Infection with high-risk strains of human papilloma virus (HPV) is the most important risk factor for cervical cancer.

Several years ago, NPCC investigators began assessing risk factors for cervical cancer in American Indian women in South Dakota. In preliminary work conducted with the American Cancer Society, they found that HPV infection is high (20%) among Native women in this area, and more importantly, that the types of HPV infection differ from those in other high-risk populations. The aims of this project are to 1) compare the prevalence of HPV infection in women in two Native communities and a group of White women in the same geographical area, 2) determine the frequencies of different HPV types in the three communities, and 3) investigate the known risk factors for cervical cancer, such as smoking, STDs, and nutrition, and estimate their association with HPV infection in each of these communities.

This effort is the first to rigorously examine the prevalence of HPV, as well as the risk factors for HPV and the types conferring high risk for cervical cancer among American Indian women of the Northern Plains. Information on behavioral, infectious, dietary, and other factors that increase the risk of HPV infection will aid development of specially targeted interventions in these populations, and help protect Native women from developing cervical cancer.

To date 511 patient samples have been collected, and HPV DNA analysis is completed. Data analysis is underway.

This project has the potential to have great impact. First, if it confirms the increased prevalence of high risk-conferring HPV subtypes in American Indian women, this finding could lead to a recommendation of more frequent screening for some American Indian and Alaska Native women. Second, learning more about the attitudes of American Indians toward HPV will help us work with the Centers for Disease Control to ensure inclusion in clinical trials.



Above, a view of the human papilloma virus close up.



Native People for Cancer Control Telehealth Network for Health Care Providers

Stay in the circle of life . . .

Continuing Education
Opportunities
for
Health Care Providers
Grand Rounds:

Fred Hutchinson
Cancer Research
center
Tues 8:00am-9:00am

UW Medicine
Thurs 8:00am-9:00am

UW Lab Medicine
Weds 3:30pm- 4:30pm

UW Cardiology
3rd Fri each Month
7:30am-8:30am

UW Psychiatry
Every other Thurs
Noon-1:30pm

Children's Hospital
Pediatric Medicine
Thurs 8:00am-9:00am

Children's Pediatric
Nursing
1st Thurs each Month
Noon-1:00pm

Harborview EMS
1st Thurs each Month
9:00am-Noon

Thursday Noon-1:00 p.m. PST (11—Noon AK time)
Video TeleConference: Case Conferences

November 20
Dermatology
Roy Colven, MD
University of Washington School Of Medicine

December 4
John Scott, MD
Hepatitis C
Harborview Medical Center

December 11
Rita Blumenstein
Traditional Healer

December 18
Pain Management
Anjana Kundu, MD
Children's Hospital & Regional Medical Center

Cara Towle
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www.uwccer.org

We encourage you to submit cases for review 48 hours in advance.

Recommended details to submit include:

**diagnosis, relevant medical history, current medications/medical issues and
specific questions you would like to address**

*This project was made possible by Grant # H2ATH07752 from the Office for the
Advancement of Telehealth, Health Resources and Services Administration, DHHS*