

Colorectal Cancer Screening Pathway

2021



anfca

alberta native friendship
centres association



Acknowledgements

A special thank you to our *Circle of Life* partner Friendship Centres and those Centres with their own cancer prevention projects:

- Sagitawa Friendship Society (Peace River)
- Hinton Friendship Centre
- Âsokêwin Friendship Centre (Rocky Mountain House)
- Aboriginal Friendship Centre of Calgary

Your dedication and passion for promoting health equity for Indigenous peoples in your communities as well as supporting community members and their families journeying through cancer is inspiring. Your contribution was essential to this publication.

Thank you to the Population, Public & Indigenous Health SCN™, Alberta Health Services for providing funding for our *Circle of Life* project and the publication of our three *Cancer Screening Pathways*.

We would like to acknowledge the Alberta Colorectal Cancer Screening Program, Alberta Health Services for their contribution and support in the development of the ANFCA's *Colorectal Cancer Screening Pathway* to promote urban Indigenous peoples' access to cancer screening.

Tansi / Kinanâskomitin Oki / Nitsíniyi'taki:

- To our Elders who shared their teachings and wisdom about supporting Friendship Centre communities on their cancer screening journey. We hear your voices throughout this Pathway and are grateful for your guidance.
- To the 21 member Friendship Centres who work to better health outcomes in their communities with kindness, culture and dedication every day.

To all the community members and families journeying through cancer who were involved with the *Circle of Life* project, we honour your stories. We hope that together, we can share knowledge about cancer prevention and screening to help our Friendship Centre communities be well.



anfca
alberta native friendship
centres association



**Alberta Colorectal Cancer
Screening Program**

Indigenous Self-Determination and Empowerment

To be strong and healthy means to take care of your whole self and create balance mentally, emotionally, spiritually, and physically, which is rooted in culture and the tradition of wellness. A path to wellness starts with individuals taking responsibility for our own health and wellness.

Due to historical and past interpersonal traumas as well as culturally unsafe healthcare experiences many Indigenous peoples avoid important preventative health screenings. Self-determination for our individual health is essential to improve the quality of life for all Indigenous peoples. Being committed to taking care of our health is a pathway to self-determination which includes seeking knowledge, becoming educated, and sharing that knowledge with family and community members.

The goal of this pathway is to provide Friendship Centre communities information on the process of colorectal cancer screening so that community members understand and feel safe and empowered in taking preventative action in their journey of wellness.



“Keep connected with the Creator to keep your moccasins on the ground and on the right path.”

– Elder Marlene Gervais

My colorectal cancer screening journey...

Support
pg. 23

2

Keeping Well On Your
Cancer Screening Journey
pg. 11

5

Getting A Colonoscopy
pg. 21

4

Getting A FIT Test (Poop Test)
And Getting Your Results
pg. 17

1

Learning About Colorectal
Health
pg. 5

3

Learning About Colorectal Cancer Screening
pg. 14



LEARNING ABOUT COLORECTAL HEALTH

What Is Colorectal Cancer?

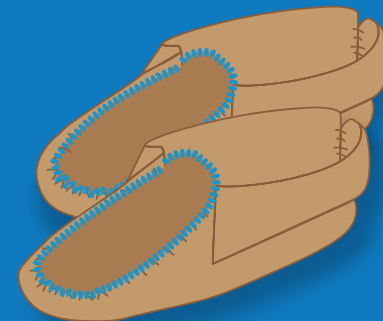
About 45% of colorectal cancer cases can be prevented through things you can change in your everyday life.¹ Regular colorectal cancer screening is the best way to find cancer early before symptoms appear.

90% of cases that are found early can be successfully treated. Screening can even prevent cancer from developing in the first place.²



“If I have something that can be cured, I am all for it! I want to be around for a long time.”

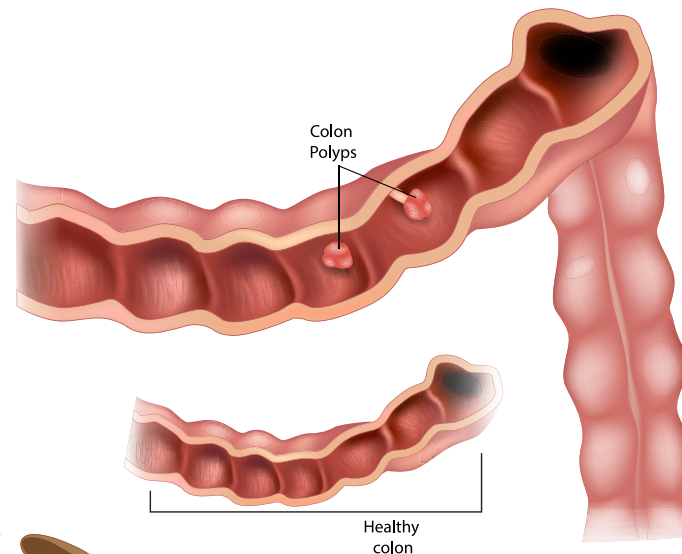
– Elder Ralph Chalifoux

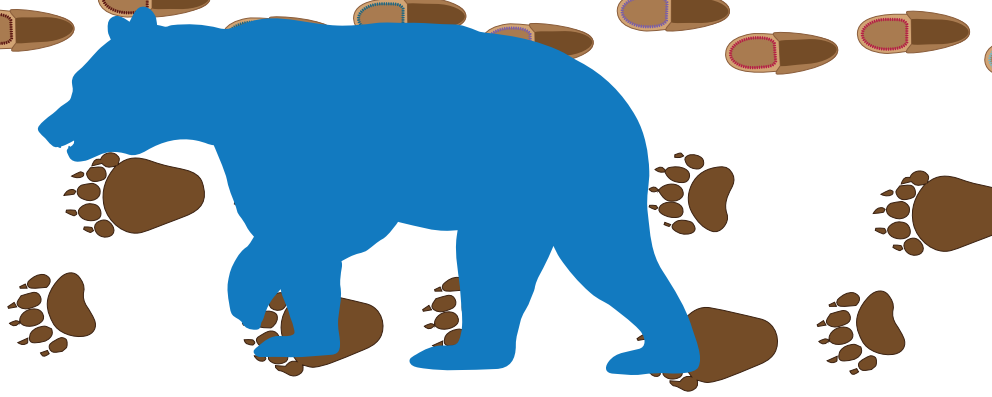


Most colorectal cancers begin as small growths on the inner wall of the colon or rectum. These growths are called polyps. Not all polyps turn into cancer, but some types of polyps can turn into cancer if they are not removed early. Polyps can develop and exist for a long time without any symptoms. For this reason, **regular screening is recommended to find and remove polyps before they turn into cancer.**

What Type of Polyp Can Turn to Cancer?

- **Adenoma** – A kind of polyp that might look like the normal lining of the colon, but can sometimes change into cancer if it is not removed.
- **Advanced (high risk) adenoma** – An adenoma that is more likely to change into cancer because of its size, features and tissue type.





How Common is Colorectal Cancer Among Indigenous Peoples?

In Alberta, colorectal cancer is the second most common cancer among First Nations and Métis peoples. It is often diagnosed at later stages³ due to inadequate access to culturally safe colorectal cancer screening and follow-up care.⁴ Colorectal cancer makes up approximately:

- 13.5% of new cancer cases diagnosed among First Nations peoples.⁵
- 12% of new cancer cases diagnosed among Métis peoples.^{6,7}

“If I do my poop test (FIT test), it will put my mind at ease.”

– Elder Ralph Chalifoux

You Can Prevent Colorectal Cancer

Things that you **can change** to decrease your risk are:

- **Screening** – Get screened regularly. If you are 50-74, that means getting a FIT Test (poop test) yearly. **Screening can prevent colorectal cancer from developing in the first place.**
- **Weight** – Reach or stay at a healthy body weight.
- **Physical Activity** – Be active every day (ideally for 30 minutes or more).
- **Alcohol** – Limit the amount of alcohol you drink.
- **Tobacco Use** – Limit your smoking or use of chewing tobacco/chew/snuff. Smoking and chewing tobacco is different from the cultural use of tobacco for prayer, ceremony, and offerings.
- **Diet** – Food security is a challenge for many people. If it is available to you, combine traditional foods to your community and territory with healthy store bought options. For example, fruits, vegetables, fiber-rich foods (beans, whole grains) and foods low in saturated fats.

“The first step in colorectal cancer screening is the FIT test! Don’t be afraid to get a poop test (FIT test). Be proactive about your wellness!”

– Grande Prairie Elder

If you do not have a healthcare provider, these resources can help you find one:

- <https://albertafindadoctor.ca/>
- <https://search.cpsa.ca/PhysicianSearch>
- Call Health Link at 8-1-1

You can also call the Alberta Indigenous Virtual Care Clinic at 1-888-342-4822 to speak to a doctor about colorectal cancer screening.

There are things that you **can't change** to decrease your risk. But, regular screening can help find colorectal cancer early and remove polyps before they turn into cancer. **You can still prevent the disease.** Speak to your healthcare provider about how these risk factors apply to you. It may help them decide what screening test is best for you.

Things that you **can't change** are:

- **Age** – Although people of any age can get colorectal cancer, your risk of getting it increases as you get older. About 90% of colorectal cancer cases are in people aged 50 and older.
- **Personal History** – If you have had colorectal cancer, polyps, or adenomas before you may be at higher risk.
- **Ulcerative Colitis or Crohn's disease** – If you have been told you have inflammatory bowel disease affecting the colon, you may be at a higher risk because of inflammation in the lining of the colon.
- **Biological Family History** – Biological family history is the second most common risk factor for colorectal cancer. If one of your parents, siblings or children have had colorectal cancer,

“Make sure to let your kids know what is going on with your health so they can support you and so that they know what can impact them genetically.”

– Elder Marlene Gervais

especially if that person was younger than 60 years old when they were diagnosed, you are at higher risk. You may also be at a higher risk if one of your parents, siblings or children have had advanced (high risk) adenomas.

- Not everyone will know their biological family history and that is okay. If you feel comfortable, let your healthcare provider know.

If you want to learn more about what your personal risk is, visit <https://screeningforlife.ca/risk-assessment-calculator/>

What Are Signs & Symptoms Of Colorectal Cancer?

Someone might have colorectal cancer and not know it. Colorectal cancer can develop over a long period of time without showing any symptoms. This is why regular screening is so important.

If you have any of the below symptoms, make an appointment with a healthcare provider. These symptoms may not be caused by cancer, but speaking with a healthcare provider can help you know for sure.

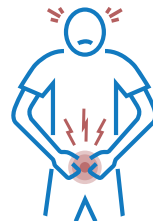
Symptoms may include:



- Rectal bleeding



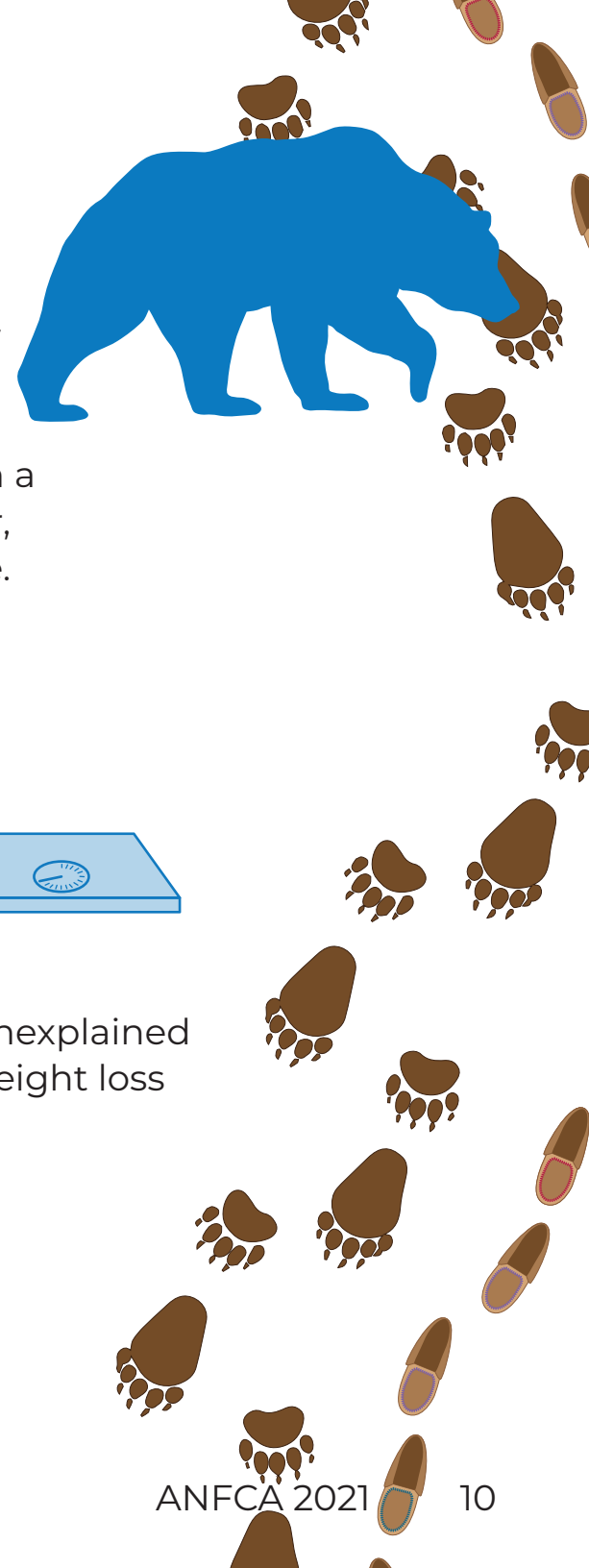
- A change in bowel habits, such as narrow or ribbon-like stools or frequent diarrhea or constipation



- Pain in your abdomen (belly)

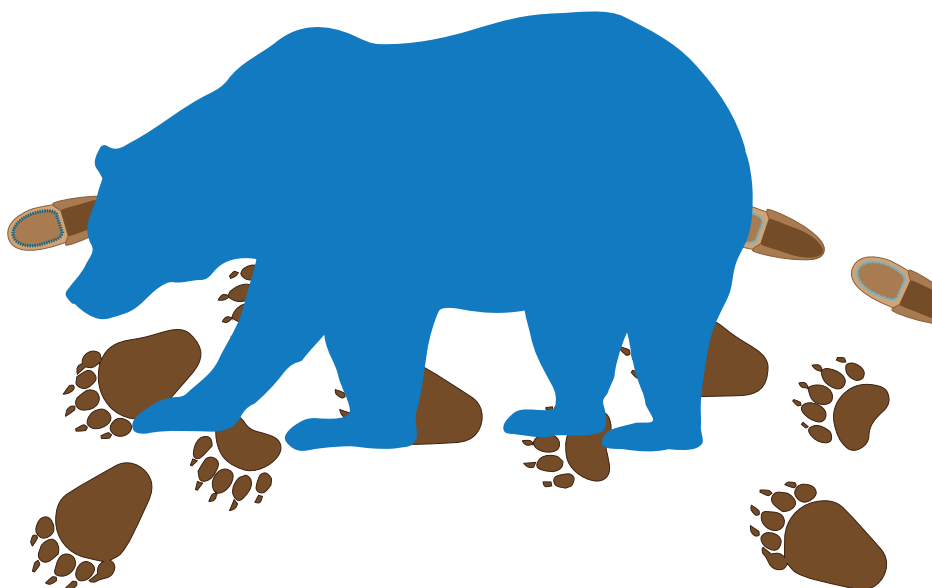


- Unexplained weight loss



When meeting with a healthcare provider make sure to:

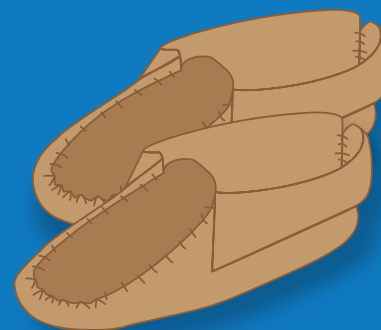
- ☐ Have your symptoms written down so you remember everything you want to say.
- ☐ Bring someone you trust with you for support.
- ☐ Be very clear and specific about your symptoms.
- ☐ Do not downplay your symptoms.



If you feel like the healthcare provider did not take your concerns seriously, you can go see another healthcare provider in your community or call the Alberta Indigenous Virtual Care Clinic to speak to a doctor – 1-888-342-4822

“As I am rocking my moccs, I always have to remember to have an awareness of my personal health concerns and get regular cancer screening!”

– Elders Linda Boudreau-Semaganis and Marlene Gervais





KEEPING WELL ON YOUR CANCER SCREENING JOURNEY

Cultural Safety Along the Cancer Journey

Indigenous peoples have the right to culturally safe healthcare.

Cultural safety means receiving healthcare, including cancer screening, that is free of racism and discrimination where all interactions are based in respect. When healthcare is culturally safe, Indigenous peoples are treated as equal partners in their healthcare and interactions are physically, mentally, emotionally and spiritually safe. You get to decide if the healthcare you receive is culturally safe.

If an experience or interaction is not culturally safe, submitting a complaint to Alberta Health Services is one way of acting on your right to culturally safe healthcare. To help you with this process or even just to talk it through, reach out to someone you trust.

For more information on how to submit a complaint with Alberta Health Services, visit <https://www.albertahealthservices.ca/about/patientfeedback.aspx>



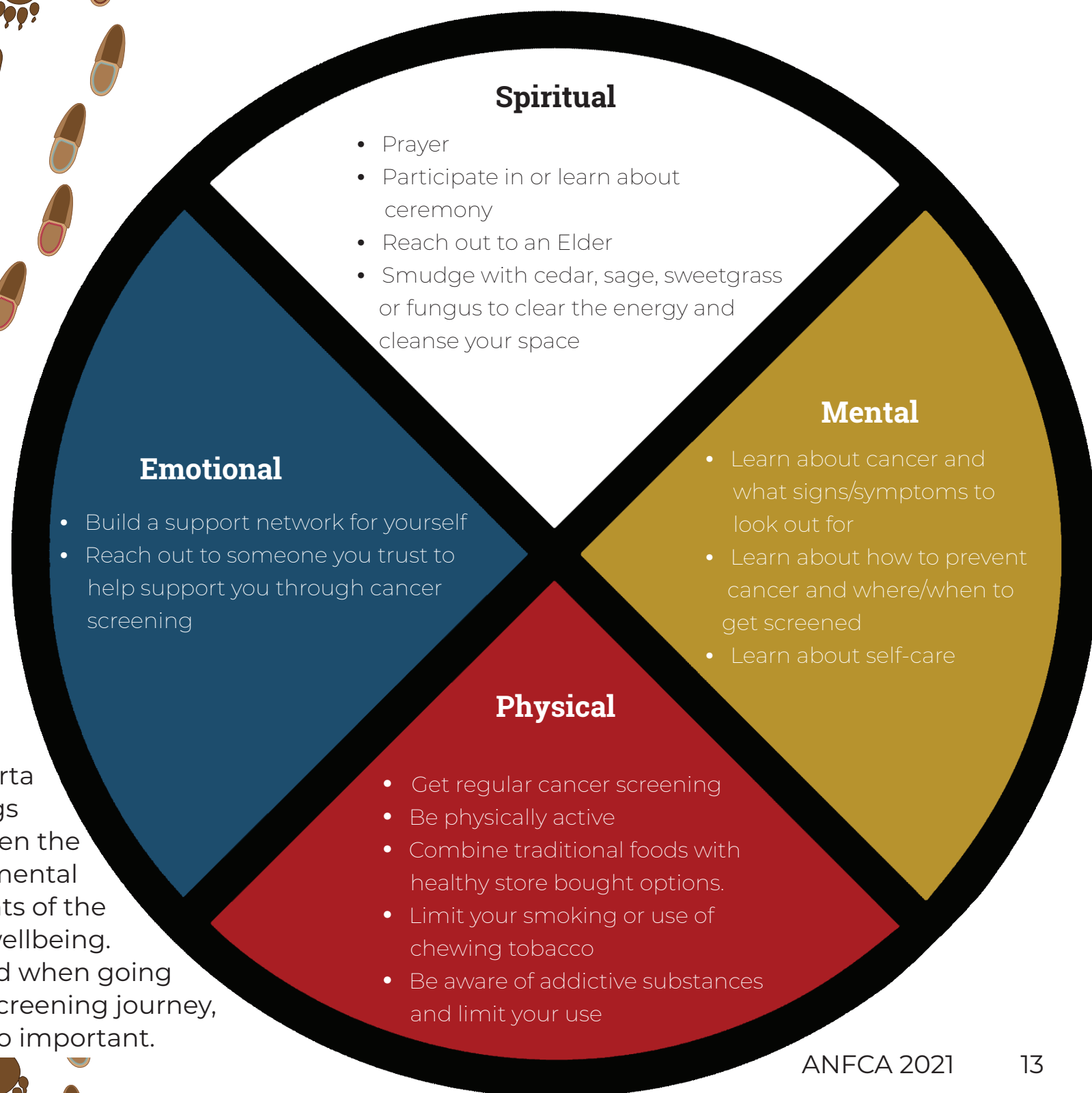
“Smudge, pray and then head over to get cancer screening. Early results are important to your wellness.”

- Elder Linda Boudreau-Semaganis

WELFARE

Cancer Prevention, Screening and Wellness

Many Nations in Alberta have unique teachings about balance between the physical, emotional, mental and spiritual quadrants of the medicine wheel for wellbeing. To prevent cancer and when going through the cancer screening journey, finding balance is also important.





LEARNING ABOUT COLORECTAL CANCER SCREENING

What Is Colorectal Cancer Screening?

For most people, colorectal cancer screening starts at **50 until you are 74**. However, if you have any personal or family history that puts you at higher risk for colorectal cancer, you may have to start screening at age 40 or younger.

‘Screening’ means looking for cancer in people who do not have any symptoms of the disease. It looks for anything that could be or become cancer.

“Don’t be afraid to go see a doctor to talk about getting a poop test (FIT test).”

– Elder Ralph Chalifoux

If nothing is found, you will have peace of mind. If something is found, and it is cancerous, or pre-cancerous, it can be removed and treated early if needed. **Getting screened is the single most important thing you can do to protect yourself against colorectal cancer.**

Indigenous peoples experience many barriers to colorectal cancer screening. These barriers mean that colorectal cancer is not prevented when it could be or that it is not caught early when it is easiest to treat. Each person will experience unique barriers determined by their own life experience. For example, past experiences of racism in healthcare, fear of waiting for the results, what they will be and what comes after. It is still very important to get regular colorectal cancer screening for prevention and early detection.

Colorectal Cancer Screening Tests

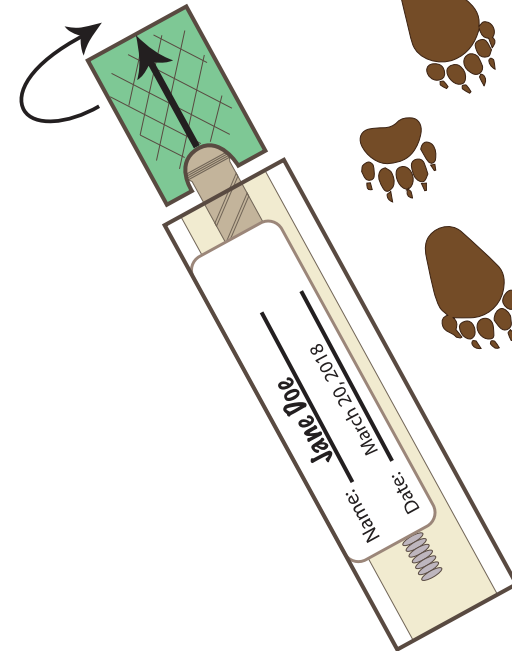
There are two main screening tests available. Some cancer screening tests involve intimate parts of our bodies. Remember, only you holds self-determination over your own body. You can always say no.

The type of screening test you need to have will depend on your risk of developing colorectal cancer. Your risk is based on your biological family and personal history.

FIT Test (poop test)– This is a home poop test that is recommended for anyone aged 50-74 who has no personal or biological family history with colorectal cancer. It is safe, easy to do and can be done right at home. **It should be done every year to make sure nothing new has developed.** The FIT test (poop test) looks for traces of blood in your poop that you cannot see that may be from polyps or cancer.

“Educate yourself and know the difference between the poop test (FIT test) and a colonoscopy. FIT tests are not invasive.”

– Grande Prairie Elder



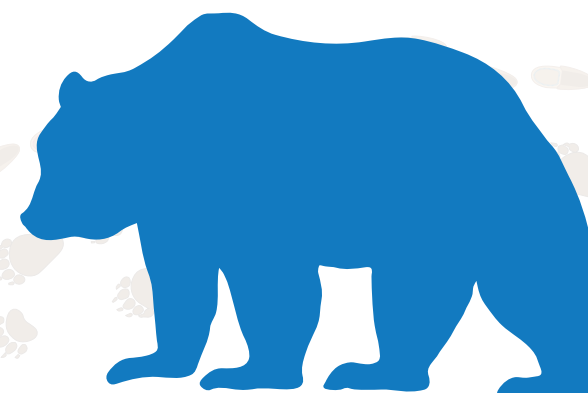
Colonoscopy – If your FIT test finds blood in your poop, it does not mean that you have cancer. It means that a colonoscopy is needed to find out where the blood is coming from. The test lets the doctor see the inside lining of the colon and rectum. A long scope about the width of a finger with a camera on the end is put through the anus (rectum) into the colon to look for polyps or abnormal growths. If found, they will be removed and sent to the lab for testing.

Increased Risk: A healthcare provider may recommend a colonoscopy as your screening test instead of a FIT if you have any personal or biological family history that puts you at an increased risk. You may have to start screening at age 40 or younger.

“Step on over to get your cancer screening tests done, the sooner the better!”

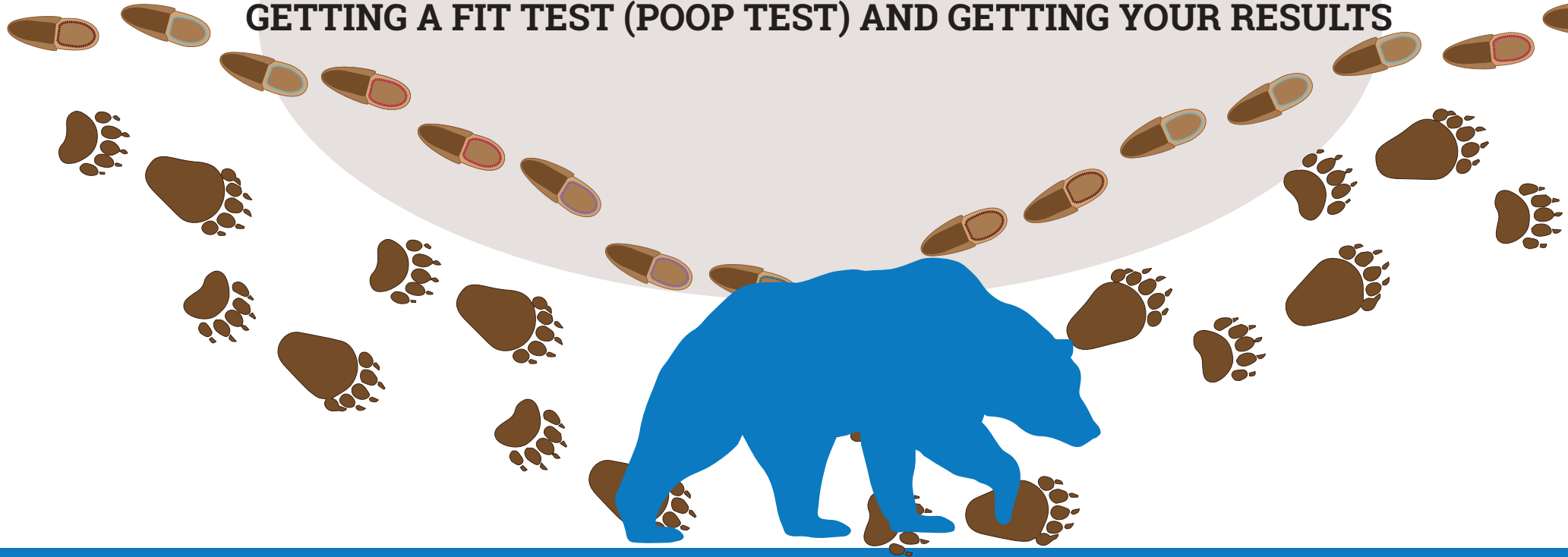
– Elder Linda Boudreau-Semaganis

If you are concerned about your risk and do not have a healthcare provider, you can call the Alberta Indigenous Virtual Care Clinic at 1-888-342-4822 to schedule an appointment with a doctor to talk about what is best for you.



4

GETTING A FIT TEST (POOP TEST) AND GETTING YOUR RESULTS



“The bear will walk with you to provide you with courage and will protect the medicines to support you along your cancer screening journey.”

– Elder Linda Boudreau-Semaganis

TEST TIME



To get a FIT test, you need a lab requisition from a doctor or nurse practitioner.

With your lab requisition, you can pick up a FIT kit from any lab to take home.

- To find a lab near you visit, <https://screeningforlife.ca/where-to-get-screened/>
- Read the instructions completely and carefully. If you need help reading the instructions, ask someone you trust.
- Collect a small poop sample and return it to the lab within 7 days of collection.

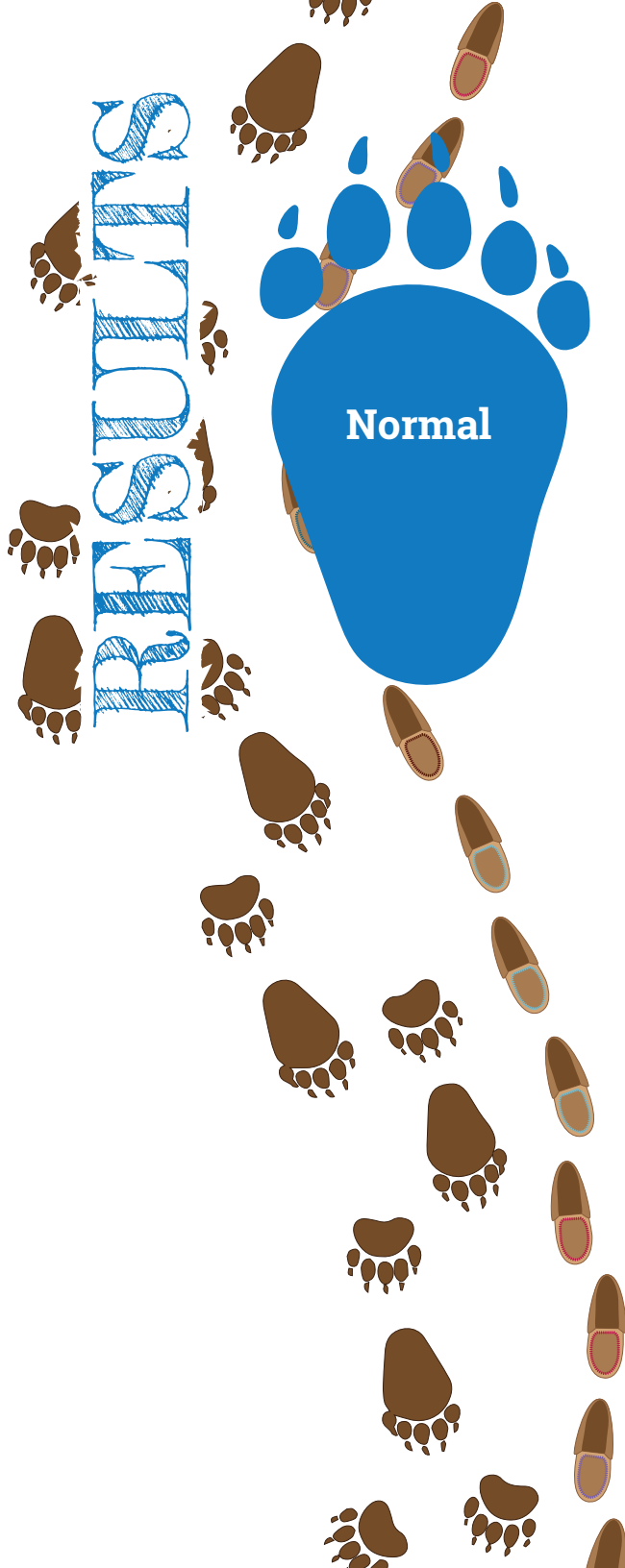
Your results will be sent to both you and your healthcare provider. If you do not hear back, call your healthcare provider to follow-up about your results. There are two possible results:

- Normal
- Abnormal

If you do not have a healthcare provider, you can also call the Alberta Indigenous Virtual Care Clinic at 1-888-342-4822 to schedule an appointment with a doctor who can give you a lab requisition for a FIT Test and follow-up about your results.

“Don’t be afraid to share with other men how easy it was to get a FIT test.”

– Grande Prairie Elder



What

A **normal** result means that no blood was found in your poop and that you should continue to get a yearly FIT Test.

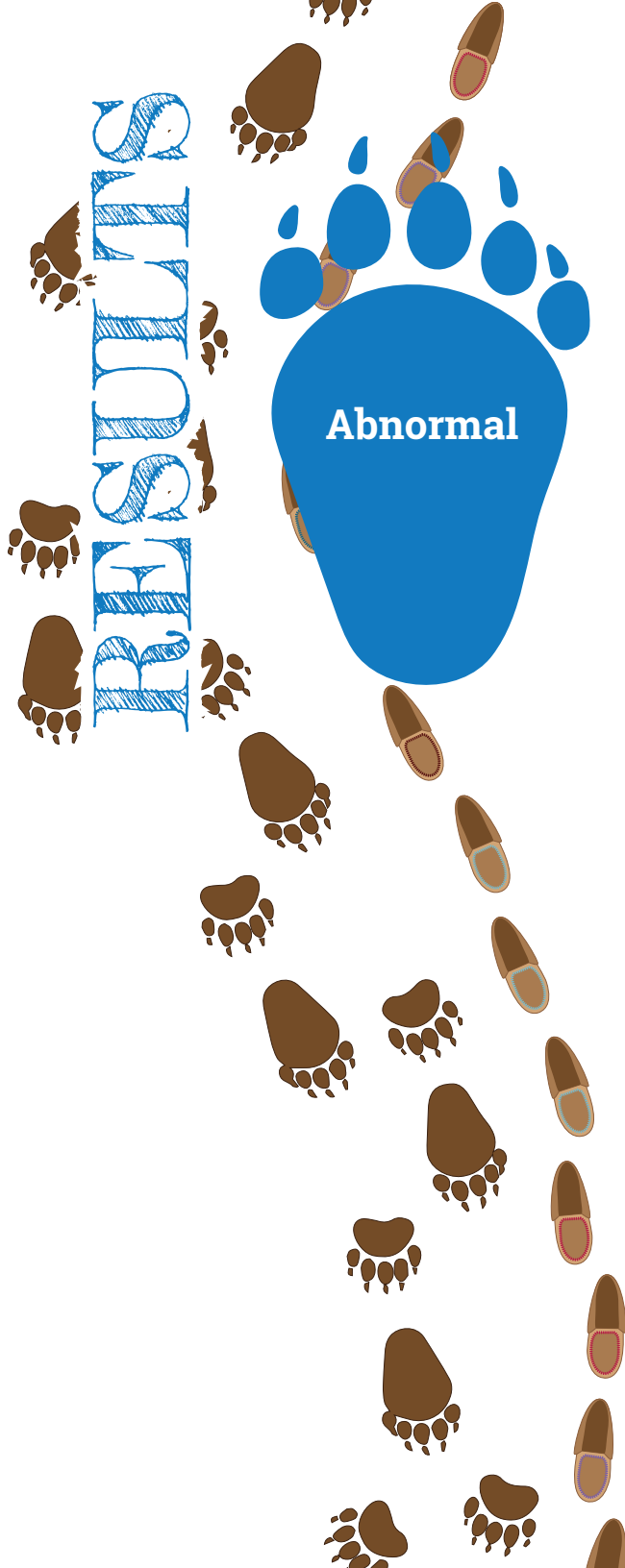
How

You will receive a letter in the mail within 1-2 weeks from the Alberta Colorectal Cancer Screening Program. Your healthcare provider will also receive your results.

Next Steps

It is possible for the FIT test to miss blood in your poop because a polyp or cancer may not be bleeding at the time you take the test. **This is why getting a FIT test every year is so important.** Make an appointment with your healthcare provider right away if you have any symptoms.

If you have questions about the letter, talk to a healthcare provider or call Alberta Health Services Screening Programs at 1-866-727-3926.



What

An **abnormal** result means that blood was found in your poop and that a colonoscopy is needed to find the cause. An abnormal result does not mean that you have cancer. Sometimes blood in your poop can be caused by something else, like hemorrhoids.

How

Your healthcare provider will receive the result immediately and they will contact you. You will also receive an abnormal result letter in the mail from the Alberta Colorectal Cancer Screening Program.

Next Steps

It is important that you make an appointment with your healthcare provider to discuss the abnormal result. You will need a referral from your healthcare provider for a colonoscopy.

Receiving an abnormal result is stressful. Keep in mind that 90% of cases that are found early can be successfully treated. Screening can even prevent cancer from developing in the first place.



GETTING A COLONOSCOPY

To get a colonoscopy, you need a referral from a doctor who identified that you are at higher risk for developing colorectal cancer or if your FIT (poop test) results are abnormal.

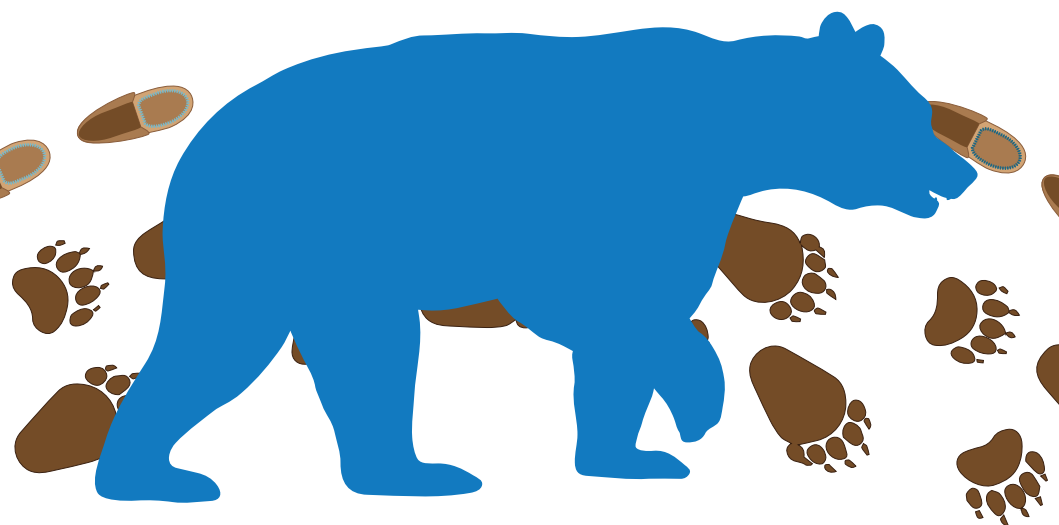
A colonoscopy looks for polyps or abnormal growths. If small polyps are found, they can usually be removed during the procedure. If a polyp or abnormal growth is too large to be removed, a small piece of tissue will be taken (biopsy). All polyps and tissue samples that are taken are sent to the lab to see if it is cancerous, pre-cancerous or something else.

The number of people saved by having a colonoscopy is much greater than those who have had serious medical problems because of the test.

“Share your fears about cancer screening with other people and don’t be afraid to talk about it.”

– Elder Marlene Gervais

For more information about the colonoscopy test, visit <https://screeningforlife.ca/colorectal/>



Talk To Your Doctor

Whether to get a colonoscopy is completely up to you to self-determine. Talk to your doctor about any questions or concerns you may have so you can make an informed decision about what is best for you. You can also talk to them about ways to make a colonoscopy a safer experience. For example:

- ☐ Ask about what to expect
- ☐ Ask for a doctor of your preferred gender to do your colonoscopy
- ☐ Ask about your options for sedation during the colonoscopy
- ☐ Ask about having a support person with you at your appointment

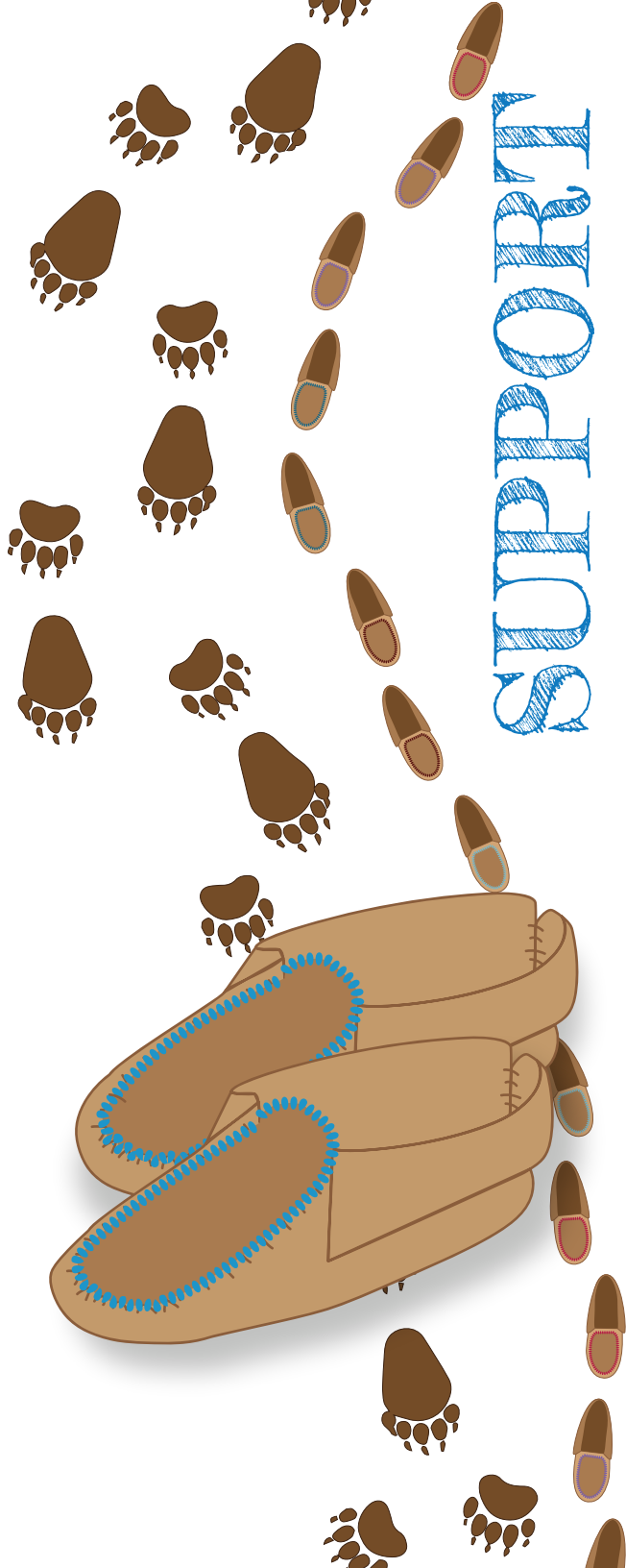
Make sure to ask at your appointment how and when you will receive your results and who will talk to you about your next steps.

If you are diagnosed with an adenoma or colorectal cancer, it is important to let any of your biological parents, siblings or children know. Having a biological family history is a risk factor for colorectal cancer. Suggest that they speak to their healthcare provider about their risk and screening options.



“For older First Nations and Métis people, we have always been taught to privately respect our bodies. So it can be hard to talk about cancer screening and other tests. But, be brave to talk about it with your doctor. It is private and you are worth it.”

– Elder Theresa ‘Corky’ Larsen-Jonasson



Supports & Resources For People Who Are Newly Diagnosed

If you are diagnosed with colorectal cancer, remember that only you have the power to self-determine your wellness. You decide what treatment options work best for you. For example:

- Combining traditional healing and medicines with western medicine
- Only western medicine
- Only traditional healing and medicines
- No treatment at all

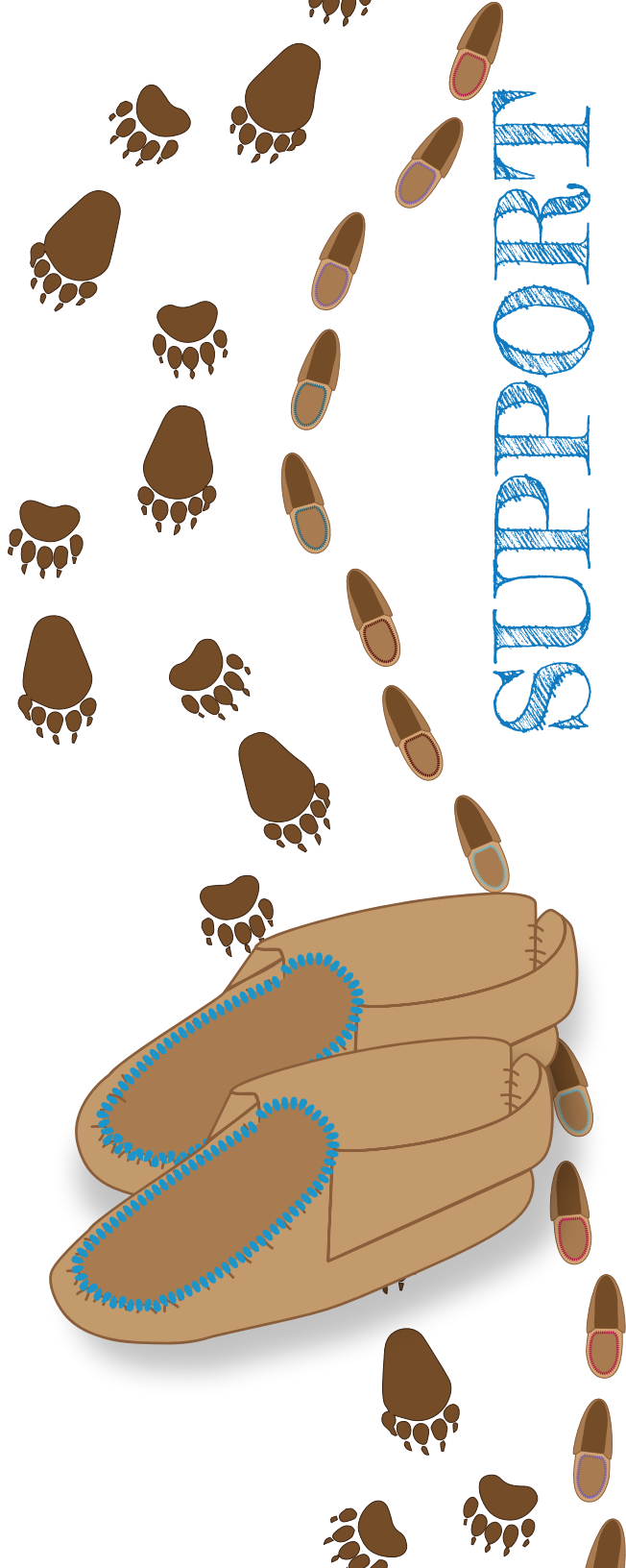
Here are some ideas for supports and resources to help you and your family along the cancer journey:

Local Elders and Knowledge Keepers

- Elders and Knowledge Keepers in your community may be able to support you and your family with teachings and knowledge about medicines.

Guide to Cancer Care in Alberta For Newly Diagnosed Indigenous Peoples

- <https://www.albertahealthservices.ca/assets/info/cca/if-cca-guide-to-cancer-for-indigenous-people.pdf>



Indigenous Cancer Patient Navigators

- You can contact them at any point along your cancer journey. They can help you navigate the healthcare system with cultural safety.
 - If you are located south of Red Deer, call 403-476-2763
 - If you are located in and/or north of Red Deer, call 780-432-8747
- <https://www.albertahealthservices.ca/cancer/Page16319.aspx>

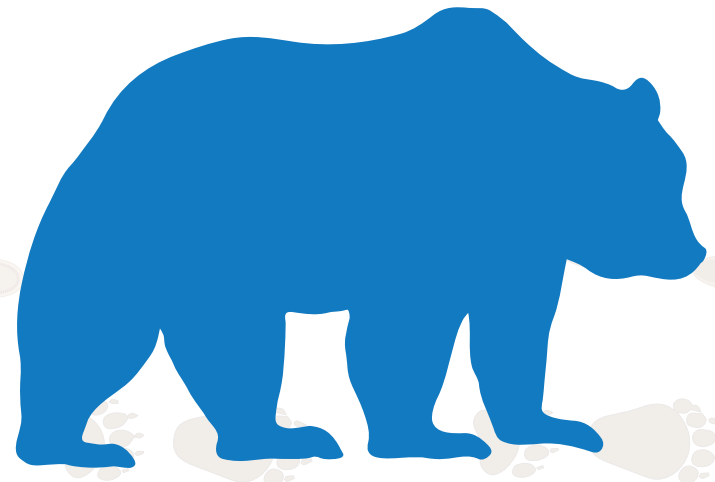
The Canadian Cancer Society (CCS)

- There is a lot of information on the Canadian Cancer Society's website including about colorectal cancer.
- The CCS also offers virtual support including:
 - A toll-free helpline available to cancer patients, caregivers, families and friends, and the general public.
 - An online community to help people living with cancer and their loved ones share their experiences and build relationships.
- <https://cancerconnection.ca/home>
- <https://www.cancer.ca/>



Disclaimer

The ANFCA worked to ensure the accuracy of the information in this document. However, the information is subject to change and we encourage community members to always connect with their healthcare provider and refer to the 'Screening For Life' website for the most current information. <https://screeningforlife.ca/>



Endnotes

- 1 Alberta Health Services. Healthier Together: Colorectal Cancer. <https://www.healthiertogether.ca/health-conditions/cancer/colorectal-cancer/>
- 2 All information about colorectal cancer and the cancer screening process was provided by the Alberta Colorectal Cancer Screening Program, Alberta Health Services. Information was adapted and/or added to by the ANFCA where needed to better reflect Friendship Centre communities.
- 3 Voyageur, C., Letendre, A., & Healy, B. Alberta Baseline Assessment Report. The Alberta First Nations Information Governance Centre. <http://www.afnigc.ca/main/includes/media/pdf/digital%20reports/Alberta%20Baseline%20Assessment%20Report.pdf>
- 4 D'onise, K., Iacobini, E. T., & Canuto, K. J. (2020). Colorectal cancer screening using faecal occult blood tests for Indigenous adults: A systematic literature review of barriers, enablers and implemented strategies. Preventive medicine, 134, 106018.
- 5 The Alberta First Nations Information Governance Centre. (2017). Top Types of Cancer among First Nations in Alberta. <http://www.afnigc.ca/main/includes/media/pdf/fnhta/HTAFN-2017-10-31-TopCancerSites.pdf>
- 6 Métis Nation of Alberta. Cancer Incidence and Mortality Among the Métis Population of Alberta, Canada. <http://albertametis.com/wp->
- 7 These numbers are limited because they do not include Non-Status First Nations peoples or members of the Métis Settlements. There is no information on Inuit in Alberta.



anfca
alberta native friendship
centres association