

## Part 3: Challenges and Opportunities for Cancer Prevention and Screening in Indian Country Speaker Responses to Additional Questions

Original webcast on July 1, 2020

The questions below were asked in the Q&A text feature during the live webcast session but not answered, due to time constraints. Our speakers have provided us with their answers, and we share this valuable information with you.

Question:	Answer:
What suggestions would you have for non-Indigenous folks who would like to expand their cancer prevention work to include tribal nations?	Tinka Duran: My suggestion is to reach out to the Tribal leaders to hold an initial discussion on expanding your cancer prevention work to include tribal nations to see if there is an interest. This will open dialog on current initiatives the tribe is doing and some of their unique challenges, barriers and successes. I would also suggest that if there is an opportunity to work with the tribe that you include Community based Participation Research (CBPR) and understand tribal data ownership.  Kris Rhodes: To begin work with tribal nations you will begin with meeting partners from that tribal nation/community to learn about their priorities, needs and concerns. It begins with a relationship. There are likely meetings, volunteer opportunities or community events where you can get to know the right people. Obviously, this looks different today. You will want to make sure your definition of cancer prevention aligns with the tribal community's definition.
There are many individuals in Maryland that are part Cherokee. How do we help them hook up to tribal services?	Tinka Duran: I would suggest reaching out to the respective Tribe for discussion on resources available. They may already have a resource list and tribal enrollment requirements that may be needed for the individual.  Kris Rhodes: Individuals can visit any IHS facility in the area and determine if they meet eligibility guidelines (usually it goes back to proof of a grandparent enrolled

	in any US tribe). Otherwise, individuals can connect with the tribal office with which their family is enrolled or affiliated to determine potential services.
Would the Cervical home test Kit (when available) the multi-blood ca test and the [FIT] greatly benefit the Native Americans in rural areas? Also, would it be possible for the multi-blood ca tests (when available) to be given in a drive by situation?	Tinka Duran: The FIT kit distribution can be very beneficial for rural AI's. We developed a Flu/FIT toolbox that we have seen success with, see our website: <a href="https://health.gptchb.org/gpccsi/gpccsi-flufit-toolkit/">https://health.gptchb.org/gpccsi/gpccsi-flufit-toolkit/</a>
Are there any known podcasts around Native health topics and population health in Indian Country? I love absorbing information via podcasts.	Kris Rhodes: There are some on Native issues, not sure about health focused. AICAF has been dabbling in this area. You can find our podcast at <a href="https://aicaf.podbean.com/">https://aicaf.podbean.com/</a>