

Presented by Métis Nation British Columbia, Ministry of Health and Wellness



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MNBC CervixCheck Engagement, July 2023, Held with River of the Peace Métis Society, Hudson's Hope, British Columbia, Canada

Photo credit: Jodie Dixon, MNBC Regional Health Coordinator



MNBC Northeast Health Promotion Gathering, May 2024, Held in Fort St. John, British Columbia, Canada Photo credit: M Cutler Photography





MNBC Northwest Health Promotion Gathering, September 2024, Held in Smithers, British Columbia, Canada Photo credit: Alpha Artistries Photography

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MNBC CervixCheck Engagement, July 2023, Held with River of the Peace Métis Society, Hudson's Hope, British Columbia, Canada

Photo credit: Lennette Desjarlais, MNBC HPV Project Coordinator

#### TRADITIONAL TERRITORIES

Métis Nation BC respectfully acknowledges that this work was done on the unceded, ancestral, and traditional territories of several First Nation communities, including the Tsimshian Nations (Kitselas, Kitsumkalum, Gitxaała, Gitga'at at Hartley Bay, Kitasoo Xai'xais at Klemtu), Metlakatla, and Lax Kw'alaams; the Wet'suwet'en Nation, including Hagwilget Village, Witset First Nation, Ts'il Kaz Koh (Burns Lake Band), Skin Tyee Nation, and Nee Tahi Buhn; and the Treaty 8 First Nations, including Blueberry River, Doig River, Fort Nelson, Halfway River, McLeod Lake, Prophet River, Saulteau, and West Moberly First Nations. We respect their inherent and treaty rights and are committed to fostering positive and respectful relations. We honour and recognize their stewardship of this land since time immemorial.

#### **MÉTIS CHARTERED COMMUNITIES**

We also acknowledge the strong support and participation of eight Métis Chartered Communities in the North who participated in our research engagement events: These include Fort St. John Métis Society (Fort St. John), Moccasin Flats Métis Association (Chetwynd), Métis Community Society of Kelly Lake (Tumbler Ridge/ Kelly Lake), North East Métis Association (Dawson Creek), Northwest BC Métis Association (Terrace), Prince Rupert & District Métis Society (Prince Rupert), River of the Peace Métis Society (Hudson's Hope) and Tri-River Métis Association (Smithers).





MNBC Northwest Health Promotion Gathering, September 2024, Held in Smithers, British Columbia, Canada Photo credit: Alpha Artistries Photography

#### **ACKNOWLEDGMENTS**

The CervixCheck program was a collaborative effort between the University of British Columbia, the University of Northern British Columbia, and communities throughout Northern British Columbia. CervixCheck was funded through the Canadian Institutes of Health Research and borne out of partnership between Dr. Dirk van Niekerk, BC Cancer; Dr. Gina Ogilvie, and Dr. Sheona Mitchell-Foster, University of British Columbia; and Katina Pollard, Métis Nation British Columbia. This program involved key stakeholders in the community, including Métis Citizens, Aboriginal Women's Resource Centre and Friendship Centres, Métis Chartered Community Presidents, and community champions, who provided a space supported by culture to discuss sexual and reproductive health. To the participants who participated in this program, we thank you for your trust, vulnerability and openness to participate and share.

#### **FUNDING ACKNOWLEDGMENT**

We want to thank the Canadian Institutes for Health Research (CIHR) for funding this project and enabling Métis Communities to participate and guide this important work.



#### **TEAM MEMBERS**



Dr. Gina Oligivie, Co-Principal Investigator
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Canada Research Chair | Global control of HPV related cancer
Assistant Director | Women's Health Research Institute
Senior Public Health Scientist | BC Centre for Disease Control



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Katina Pollard, Provincial Health and Wellness Senior Manager Project Collaborator & Knowledge User Métis Nation British Columbia



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MNBC CervixCheck Engagement, January 2023, Held with Tansi Friendship Centre, Chetwynd, British Columbia, Canada

Photo credit: Lennette Desjarlais, MNBC HPV Project Coordinator

# INTRODUCTION

Métis Nation British Columbia (MNBC), in partnership with BC Cancer and the University of British Columbia, launched a pilot HPV self-collection program called 'CervixCheck' in 2017 in Northern British Columbia. The following report highlights the successes, barriers, and impacts of the CervixCheck program for Northern Métis women and individuals with a cervix from 2017 to 2023.







MNBC Northeast Health Promotion Gathering, May 2024, Held in Fort St. John, British Columbia, Canada. Photo credit: M Cutler Photography

## **OVERVIEW OF THE PROGRAM**

The CervixCheck program focused on increasing the health literacy of the community, access to at-home HPV self-collection kits for eligible participants, and reducing the stigma of cervical cancer diagnosis within Métis Chartered Communities. Community engagement sessions ran throughout the program, open to all, regardless of eligibility criteria, and were a chance for women and individuals with a cervix to learn about the program and discuss the participation process with a study representative, with no pressure to register as a participant. Over twenty engagement sessions were held throughout the program to provide the community with low-barrier and non-judgmental health information. Métis women and individuals with a cervix were able to request health information online and in person about cervical cancer. Participants were able to connect with MNBC's HPV Coordinator to obtain at-home HPV self-collection kits and information on what the next steps might look like. Resources and materials provided an overview for participants about the differences between at-home HPV self-collection kits and a regular pap test, as well as explaining what the different results mean. Participants were also provided with and an overview of different treatment options.







Photo credit: Alpha Artistries Photography



### **BACKGROUND INFORMATION**

In British Columbia, 200 people will get cervical cancer each year, with 50 dying from the disease<sup>5</sup>. Cervical cancer is caused by a long-term infection (many years) with a cancer causing "high-risk" type of the Human Papillomavirus (HPV) that goes undetected or untreated<sup>3</sup>. Cervical cancer is one of the only cancers that is preventable as screening, treatment, and vaccination exist<sup>2</sup>. **The HPV Vaccine has the potential to reduce cervical cancer-incidence by 90%<sup>4</sup>.** Since 1965, PAP tests (cytology) have been the leading screening program for women and individuals with a cervix to decrease the morbidity and mortality associated with cervical cancer<sup>1</sup>. Cervical cancer arises mostly in individuals with a cervix who are not regularly screened and its incidence is disproportionately high among Indigenous women in Canada<sup>6</sup>.

The participation rate in cervical screening has plateaued in British Columbia, with only 70% of the eligible population testing. In 2014-2016, BC Cancer reported a participation rate (in eligible women) of 66% for the Northern Health Authority¹. Métis women in the North were found to be underserved in terms of access to cervix screening without having to leave their community. Testing was significantly lower within the North due to a lack of access to consistent medical professionals¹. PAP tests, the historical approach to screening for cervical cancer and intimate screening test, requiring women to undress and place themselves in the most vulnerable positions¹. They require high trust with healthcare professionals and routine access to healthcare spaces to administer the screening test. The lack of consistent physicians and health services in the North and rural communities of British Columbia has resulted in little trust in the healthcare system. This lack of trust is compounded by the historic and ongoing experiences of colonial trauma through residential schools, Indian Hospitals, and harmful medical practices perpetrated against Métis and has led to increased reluctance and vulnerability to leave the community and attend the invasive procedure.







MNBC Northeast Health Promotion Gathering, May 2024, Held in Fort St. John, British Columbia, Canada Photo credit: M Cutler Photography

## PURPOSE OF THE PROGRAM

Given significant disparities in rates of invasive cervical cancer among Indigenous women and individuals with a cervix in British Columbia, there was a critical need to engage Métis communities in cervical cancer screening through community-centred strategies that led with equity, and are designed to overcome challenges created by disparate geographies, health care provider shortages, and a dark legacy of colonialism. Using innovative technology and culturally appropriate engagement strategies, the program reduced and supported community members in engaging in their health journey to reduce cervical cancer rates. The CervixCheck program provided a convenient, easy and safe way for women and individuals with a cervix to have their screening done less invasively. The purpose of the CervixCheck program was to reach Métis women and individuals with a cervix who do not regularly attend cervix screening; we know that this specific population is at higher risk for cervical cancer.



#### **REMARKS ON THE PROGRAM**

"Métis Nation BC has taken an evidence-based tool and transformed it to fit their community's needs. Giving Métis women the choice of where and when they screen for cervical cancer turns conventional colonial approaches to medicine on their head and puts wellness into their own hands. The lessons learned have an ongoing impact in informing how we are currently rolling out provincial screening."

Dr. Sheona Mitchell-Foster MD MPH FRCSC (she/her/ella)
Principal Investigator, MNBC CervixCheck
Clinical Associate Professor | Obstetrician Gynecologist
Northern Medical Program
University of British Columbia
Department of Obstetrics & Gynecology
Nizdeh Nekeyoh Hohudel'eh Baiyoh/UNBC

"I can't stress enough how important our lessons learned from this program was as we shaped the provincial program and how to have indigenous led programming be our standard bearer is outstanding too!"

Gina Ogilvie, MD MSc FCFP DrPH

Professor | School of Population and Public Health | Faculty of Medicine | UBC

Canada Research Chair | Global Control of HPV related diseases and cancer

Associate Director | Women's Health Research Institute

Senior Public Health Scientist | BC Centre for Disease Control

"It's vital to provide Métis specific services and supports to our Northern Métis Chartered Communities. The HPV self-collection project provides an opportunity for those Métis individuals who are overdue for cervical cancer screening the option to self-collect at home. This project has a dedicated team, who will ensure that every participant is followed up with and supported throughout the entire process"

Paulette Flamond Region 7 Director Métis Nation BC "I am proud to have been part of the MNBC's CervixCheck HPV pilot project in Region 6. Our staff faced significant challenges, especially during the COVID-19 pandemic, but their hard work and perseverance were remarkable. This project provided an opportunity for our team to innovate, be creative, and think outside the box. It also strengthened the dedication of all staff members as they engaged with our communities. Kudos to the MNBC Health team for a job well done!"

Susie Hooper, Region 6 Director Métis Nation BC



"Métis Nation British Columbia's
Ministry of Health & Wellness is excited
to have partnered with UBC, UNBC, BC
Cancer, and the Women's Health and
Research Institute on such a unique
and innovative project. We know
the importance of Cervical Cancer
Screening, and we're so honored
to have been able to provide this
opportunity to our Northwest Métis
Chartered Communities"

Tanya Davoren, Executive Director of Health and Wellness Métis Nation BC "It has been an absolute privilege to walk alongside community to better understand barriers that exist in accessing cervical cancer screening for Métis women and individuals with a cervix in the North. Guided by the wisdom within our Métis Chartered Communities, Métis Nation BC CervixCheck was created by collective knowledge, creativity, and shared experiences. I look forward to continuing this work together with community, Métis Nation BC, and our many partners with the collective goal of eliminating cervical cancer"

Katina Pollard,

Provincial Health and Wellness Senior Manager Métis Nation BC

"It's been an amazing journey learning about CervixCheck and being out in our Métis Chartered Communities promoting, educating and bringing awareness to cervical cancer screening through culture. One of the long-term successes of the project was to see the implementation of HPV self-screening as a standard of care across BC. This kit is going to make a difference for many and reduce many barriers within our Métis Chartered Communities. I'm so happy to say I was apart of this work increasing awareness of HPV across the North, Maarsii"

Lennette Desjarlais, HPV Project Coordinator Métis Nation BC



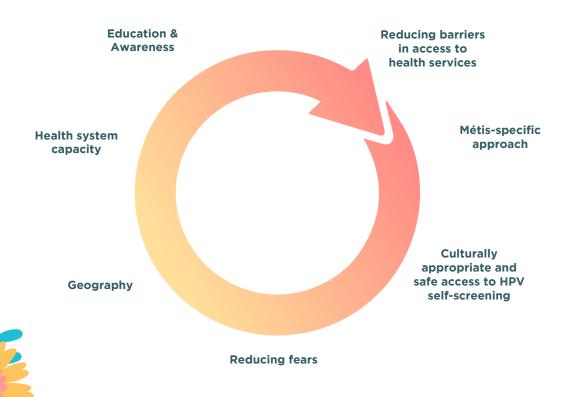




The goal of the CervixCheck Program was to improve culturally safe cervical cancer screening for Métis women and individuals with a cervix in Northern British Columbia (MNBC Regions 6 and 7) by creating an HPV self-collection process for under-screened community members.

Secondary goals included:

- Recruit Métis identifying women and individuals with a cervix to be part of this program.
- Measure participation rates of self-sampling for cervix screening.
- Determine the prevalence of high-risk HPV genotypes and pre-cancerous lesions (CIN2/3) within the cohort of participants who returned samples.
- Measure adherence to follow-up clinic care and completion of treatment for HPV-positive participants within the cohort.
- Measure website metrics & usage of the online platform CervixCheck.







MNBC Northeast Health Promotion Gathering, May 2024, Held in Fort St. John, British Columbia, Canada Photo credit: M Cutler Photography

# ELIGIBILITY CRITERIA FOR CERVIXCHECK PROGRAM PARTICIPANTS

The CervixCheck Program was available to the following individuals in Northern BC who met the following criteria:

- A Citizen of MNBC or individual who self-identified as Métis.
- Person with a cervix aged 25-69.
- More than three years since the last Pap test.
- Reside in Northwest or Northeast BC.
- Do not have a history of CIN2 (precancer) in the last five years, a history of cervical cancer, have not had a hysterectomy, have not had a solid organ transplant or have been diagnosed with HIV, not pregnant.
- If follow-up care after a positive HPV test is needed, the participant indicates openness to receiving care from the program physician.





# GEOGRAPHICAL OVERVIEW

The MNBC CervixCheck program was run in 8 of MNBC's northern communities, spanning more than 1200 kilometers of northern BC, to reach citizens and deliver the program.

#### **7 REGIONS**

- 1 Vancouver Island
- 2 Lower Mainland
- 3 Thompson/Okanagan
- 4 Kootenay

- 5 North Central
- 6 North East
- 7 North West





# **PROGRAM TIMELINE**

2017

PROGRAM SCOPE IDENTIFIED

2019

- ONBOARDING OF MNBC'S HPV SELF-COLLECTION PROGRAM ASSISTANT
- DEVELOPMENT OF MNBC'S CERVIXCHECK PROGRAM
- COMMUNITY ENGAGEMENT BEGAN

2020

• IDENTIFIED PROGRAM CHAMPIONS AND PROGRAM PHYSICIANS IN NORTHWEST, BC ONGOING COMMUNITY ENGAGEMENT

2021

- REGISTRATION BEGINS IN NORTHWEST, BC
- MNBC CERVIXCHECK RESOURCES DESIGNED
- ONGOING COMMUNITY ENGAGEMENT

2022

EXPANSION OF MNBC'S CERVIXCHECK PROGRAM INTO THE NORTHEAST

2023

ONGOING ENGAGEMENT AND RECRUITMENT WITHIN ALL PARTICIPATING MÉTIS CHARTERED COMMUNITIES

2024

- PROGRAM OFFICIALLY ENDED IN JANUARY 2024
- JANUARY 2024 BRITISH COLUMBIA PROVINCIAL ROLL-OUT OF SELF-SCREENING PROGRAM



# **COMMUNITY RESOURCES**











# **COMMUNITY RESOURCES**







Taking health into our own hands: leveraging community strengths and technology through self-screening to improve the health of Métis women living in Northern BC

Métis Nation British Columbia is partnering with the University of British Columbia and the BC Cancer Metis Nation British Columbia is partnering with the University of British Columbia and the BC Cancer Cervix Screening Program to invite Metis women living in select communities in Northeast and Northwest British Columbia to participate in an HPV-based cervix screening pilot project. The project allows you to do cervix cancer screening at home through a new website: CervixCheck.ca. This project will aim to recruit about 250 Metis identifying women, and is being conducted collaboratively by Dr. Sheona Mitchell-Foster at the University of British Columbia, Dr. Dirk van Neikerk at BC Cancer, Cervix Cancer Screening Program, Tanya Davoren, Metis Nation British Columbia and Dr. Gina Oglivie at the University of British Columbia. This project is funded by the Canadian Institutes for Health Research.

Currently, Métis women in the North are underserved in terms of access to cervix screening. This project aims to support Métis women in accessing screening without having to leave their community. Almost 10% of Indigenous women have never been screened for cervic cancer according to a 2008-2010 Canadian survey. In 2014-2016, BC Cancer reported a participation rate (in eligible women) of 66% for the Northern Health Authority. This project, which focuses on Métis women in the North, aims to increase cervix cancer screening rates by improving access to screening methods within the community.

CervixCheck involves easily collecting your own sample to screen for cervical cancer. The sample is tested for human papiliomavirus (HPV), which is the known cause of cervical cancer. HPV testing is an enhanced way to screen for cervical cancer that is safe and accurate. This screening test, like any screening test, does not prevent cervical cancer but can detect if you are at increased risk of cervical cancer (through exposure to HPV) and detect early changes that could lead to cancer. HPV-based cervix screening is used in other places around the world but is not yet standard of care in BC. In this study, we want to see if the CervixCheck website is an effective way to offer HPV-based cervix screening.

If you follow instructions, the procedure is painless, easy to do, and poses no risks. However, as with any screening results, it is possible that you might feel anxious waiting for results, and receiving a result that requires follow-up may be upsetting. It is important to know that a positive IPTV result does not necessarily mean you have or will get cervical cancer, and depending on the type of IPTV, it may clear up on its own. On the rare occasion that a positive IPTV result it skinked to cervical cancer, detecting it early ensures the best possible outcome.

If you need more information and support during this process you can contact the CervixCheck team, or the HPV Project Coordinator at Métis Nation British Columbia and we will connect you with supports. CervixCheck is similar to, but not the same as, seeing a health care provider in person. There may be times when it is best to visit a health care provider. You can also visit a health care provider for any health services that CervixCheck does not offer, at any time. If you would like to include family members at any point during your participation, please feel free to do so.

If you decide to participate, you will register online at CervixCheck ca and collect your sample at home, instead of going to a healthcare provider for a pelvic exam. Getting screened for cervical cancer keeps you and your healthcare provider informed about your risk of developing cervical cancer or pre-cancer. Cervix screening is recommended at specific intervals for all people eligible for screening in SC (every: years for average risk). As part of receiving your results, you will be informed of when you will be next of for screening.

When you register for CervixCheck, you are agreeing to have your personal information shared with the CervixCheck team to confirm your screening history in BC as part of your eligibility to participate. You will only be eligible for CervixCheck if you:

Are between 25-65 years of age;

















#### **GET IN TOUCH!**

MÉTIS NATION

#### WHY CAN'T INDIVIDUALS YOUNGER THAN 25 YEARS USE CERVIXCHECK? 8

# DOES THE NUMBER OF SEXUAL PARTNERS A PERSON HAS INCREASE THEIR RISK OF HAVING HPV?

# CERVIXCHECK

AT HOME HUMAN PAPILLOMAVIRUS (HPV) - BASED CERVIX SCREENING

Frequently

**Asked Questions** 

#### WHAT IS AT HOME HPV-BASED CERVIX















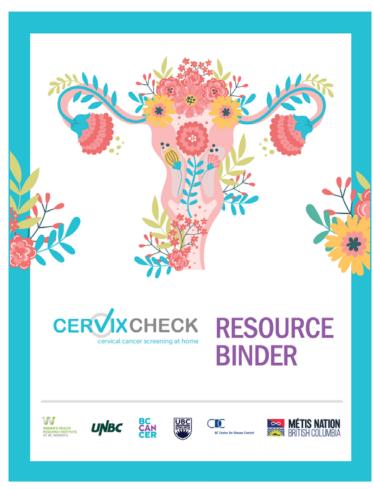






# PARTICIPATING PHYSICIAN CLINICAL TOOL











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## **CONFERENCE PRESENTATIONS**

- Canadian Centre for Applied Research in Cancer Control ARCC Conference 2024 - #ARCC2024, (cc-arcc.ca) May 2024, Ottawa Ontario Canada
- World Indigenous Cancer Conference 2024
   World Indigenous Cancer Conference 2024 | WICC 2024
   March 2024, Naarm (Melbourne) Victoria, Australia
- IPVC 2023 | 35th International Papillomavirus Conference (ipvconference .org)
   April 2023, Washington DC, USA
- 2023 Canadian Cancer Research Conference CCRC - CCRA (ccra-acrc .ca) November 2023, Halifax Nova Scotia, Canada
- 4th Annual Métis Women's Policy Forum.
   Les Femmes Michif Otipemisiwak / Women of the Métis Nation November 2022, Ottawa Ontario, Canada





# MNBC CERVIXCHECK PROGRAMS NUMBERS

The CervixCheck Project with MNBC resulted in reaching out and contacting over 500 Citizens in Northern British Columbia about at-home HPV-based screening. 104 participants took their health into their own hands by participating in HPV screening. Results indicated 11% had no screening history in BC, and 35.9% had not been screening in five or more years.

58.2% NEGATIVE O% COLPOSCOPY 100% NUMBER THAT ATTENDED A FOLLOW UP PAP SMEAR 4.9% **OTHER HIGH-RISK HPV POSITIVE** RECOMMENDED **INVALID SPECIMENS** 5.8% **HIGH RISK HPV POSITIVE** 0% PARTICIPANTS HAD NO SCREENING HISTORY 11% PARTICIPANTS HAD NOT BEEN SCREENED IN 5 OR MORE YEARS 35.9% 13%



# IMPACTS OF THE PROGRAM

The CervixCheck Program provided a platform that destigmatized and normalized HPV testing and provided a space where participants felt comfortable asking questions and learning more about their sexual and reproductive health.

Many participants highlighted that self-testing provided a space of comfort and was a painless, less invasive process. Ninety percent of survey respondents shared that they prefer at-home self-testing. Further, participants shared that at-home self-testing provided a comfortable space for a test that has historically been very harmful and triggering.

"I know so many women who put off cervix screening as long as possible just because it's so invasive. Doing self-screening in the privacy of my own home was the best screening I experienced, and I'm 60 years old, so I know what I'm talking about. Thank you for the opportunity to try this"

#### MNBC CervixCheck Participant.

"Something that some care providers don't take into consideration is the fact that some of us women have experiences with abuse, and they, therefore, don't take a trauma-informed care approach. They don't realize how triggering this test can be and that we have to take time afterward to debrief and deal with the triggers safely. This self-test eliminates this uncomfortable experience"

#### MNBC CervixCheck Participant.

Participants shared that the CervixCheck self-testing kits made it easier for them to take their health into their own hands and not delay testing because they could not access clinics or doctors' appointments.



"I have recently done an at-home cervix check. I find this to be such a great program. Living in Northern BC, we don't have walk-in clinics and minimal doctors. If you have a problem, you need to go to the ER just for basic care. Having this available has taken so much stress off me. Just the relief of finally getting this done after not having a pap in years has helped me immensely. I can't thank Lennette (MNBC's HPV Coordinator) enough for educating me. I had no idea how easy HPV was spread."



#### MNBC CervixCheck Participant.

"The self-testing kit was unbelievably better for me due to the location I live in and current access to health care providers"

#### MNBC CervixCheck Participant.

The CervixCheck program provided an environment for individuals with a cervix who would often have fallen through the healthcare system's cracks to connect with a fellow citizen, learn more about their sexual and reproductive health and obtain the support needed. 28% of respondents had never heard of HPV or HPV testing before being invited to participate.

"80% of the sexually active people in the world will have an HPV infection at some point in their life.. so listening to stories, acknowledging or sharing stories and normalizing 'I have HPV.' There are many emotions and questions individuals have when they test positive"

#### MNBC CervixCheck Participant.

Socio-economic barriers played a significant role in participants previously accessing services as appointments are challenging to schedule, there are no childcare coverage options, and there is limited free time. Participants shared about the benefits of having an outreach worker, connecting with the community in a caring way to explain processes informally and normalize HPV, reducing shame, and even having an outreach worker remind participants to take their tests.



"It's a snowball effect ... access is so important and can be so farreaching. When there is self-determination, it can expand into health in general"

#### MNBC CervixCheck Participant.

Culture is a strong protective factor for Métis, in particular having access to Elders and cultural activities outside of their immediate families is correlated with lower experiences of health inequities and higher self-reported mental health. By incorporating cultural teaching such as ribbon-making, beading, sewing, and creating medicine bags, we created a space for women and individuals with a cervix to connect with culture and a space of trust and build community to explore then more challenging topics around access to health and sexual and reproductive health more broadly.

"Sometimes all you need is to hear from someone who's been there, to reassure you that you're going to be okay, while you're going through it."

#### MNBC CervixCheck Participant.

"Taking health into our own hands: levering community strengths and technology through self-screening to improve the health of Métis women living in Northern BC"

#### MNBC CervixCheck Partner.



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Photo credit: Alpha Artistries Photography



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Photo credit: Alpha Artistries Photography



# IMPORTANT LESSONS FROM THE PROGRAM

The CervixCheck program allowed MNBC to work directly with the community, better understand the sexual and reproductive health needs of Métis in Northern BC and incorporate culture into a health testing program. This innovative program highlighted the need for community-facing knowledge translation and prioritizing Métis voices in programming rollout. Cervical cancer among Métis and other Indigenous communities is significant due to the fear of the healthcare system, the lack of access to routine healthcare and the resulting stigma of diagnosis. The CervixCheck program provided valuable lessons in how programming designed by Métis for Métis can positively impact the community:

#### **NEED FOR CONNECTION**

The program, which was operating before the onset of COVID-19 pandemic, had to adjust to changing restrictions. The team adjusted to what it means to provide connection for community and the importance of creating an environment of trust both in-person and virtually. Being part of a healthy community can provide a sense of belonging, especially for people who are feeling isolated or alone. Connecting with chartered communities, community members, and various champions throughout the CervixCheck program allowed for a more tailored approach to the program rollout that aligned with community needs.

#### **KNOWLEDGE TRANSLATION**

HPV and cervical cancer were found to be poorly understood within the community, and individuals who were diagnosed often felt significant stigma and fear of the healthcare system. Providing opportunities for engagement and digestible health information provided to Métis individuals with a cervix necessary information regarding their health is essential.







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#### THE ROLE OF OUTREACH

MNBC's HPV Project Coordinator, provided significant benefits for Métis participating in the program. The in-person engagements allowed Métis to ask questions, receive advice in a nonjudgmental space, and have a fellow Métis community member support them in navigating the screening and follow-up process. Outreach workers provide a bridge for community members and healthcare workers so they may understand their right to health.

#### **DECREASING BARRIERS TO ACCESS CARE**

The CervixCheck program provided a seamless way to access healthcare services through at-home self-screening test kits, reducing the barriers for participants to take their health into their own hands.

#### **ENSURING INCLUSIVITY AND INTERSECTIONALITY**

The CervixCheck program centered the voices of Métis individuals with cervixes and took an intersectional and inclusive approach as we understand our Métis community including Métis women, gender non-conforming, two-spirit individuals and all Métis with a cervix require the need for understanding, health literacy, and community support when accessing sexual and reproductive healthcare.





The CervixCheck program provided an opportunity for citizens who often are burdened by the time and inaccessibility of the healthcare system to have easy access to testing sexual and reproductive healthcare. COVID-19 exacerbated the inaccessibility of primary care providers and routine testing, making healthcare unattainable for many. Providing opportunities centered around the individual, rather than relying on healthcare services, allowed individuals to feel comfortable engaging in their healthcare and decreased the burden on health system capacity.

#### THE SNOWBALL EFFECT

The connection to community and frontline work not only provided positive impacts on sexual and reproductive health results through screening and testing but also provided a touchpoint for the community to gain other support, such as discussing citizenship renewals, medical funding, and additional programs MNBC offers.

#### RESOURCES DIGITALLY AND HARD COPY

Significant learning and iterations of prepared materials were created for participants of various ages based on community feedback and questions coming forward. The iterative process of explaining the difference between self-collection and cytology, the age range appropriate for self-screening and various questions on sexual and reproductive health.

#### ONGOING IMPACT

The CervixCheck program and its corresponding success and lessons learned were able to be incorporated into the provincial rollout





Métis Nation British Columbia <u>Health | MNBC</u>

British Columbia Medical Journal

Cervical screening in BC—Change inspired by First Nations and Métis communities |

British Columbia Medical Journal

BC Cancer

bccancer.bc.ca and http://www.bccancer.bc.ca/screening

Canadian Cancer Society | Canadian Cancer Society https://cancer.ca/en/

Cancer Care Ontario

https://www.cancercareontario.ca/en/get-checked-cancer

Cancer Care Ontario

Recommended Resources for First Nations, Inuit, Métis & Urban Indigenous Peoples

Métis Nation Ontario

Métis Cancer Survivor Story (youtube.com)

Northern Health

summer-2021-IH-newsletter-final1.pdf (indigenoushealthnh.ca)

University of British Columbia

https://learningcircle.ubc.ca/2021/04/19/pandemic-proof-cancer-screening/



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