



Strategies for Communicating Health Research Findings to Members of an Arctic Aboriginal Community

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CAN*Help* Working Group

- Canadian North *Helicobacter pylori* Working Group
 - Est. 2006



CAN*Help* Working Group

- Canadian North *Helicobacter pylori* Working Group
 - Est. 2006
- A team of Alberta and Northwest Territories investigators, health officials, and community health leaders who have set out to study *Helicobacter pylori* infection and its consequences in Canada's Arctic communities
- Will be expanding beyond NWT



CAN*Help* Working Group

Aklavik Community Organizations

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Aklavik Health Committee

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Amy Morse, Richard Fedorak

Microbiology: Monika Keelan, Joanne-Simala Grant

Pathology: Safwat Girgis

Anthropology: Christopher Fletcher

Health Policy: Carl Phillips



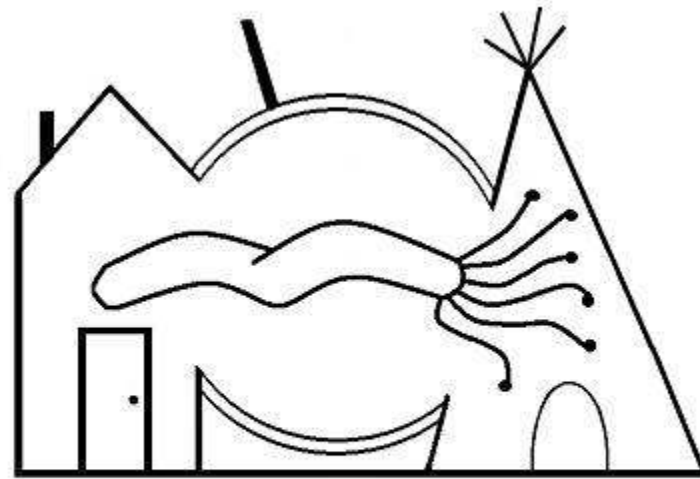
CAN*Help* Working Group

- Canadian North H*elicobacter pylori* Working Group
 - Est. 2006
- 3 goals
 - Address community concerns
 - Recommend clinical management strategies
 - Reduce health risks



CAN*Help* Working Group

- Pilot Community – Aklavik, Northwest Territories



Aklavik *H. pylori* Project





Aklavik *H. pylori* Project

- Phase 1
 - Community survey/*H. pylori* screening
- Phase 2
 - Scope Testing
- Phase 3
 - Treatment
- Phase 4
 - Policy Development, Sharing Knowledge with the Community



Methods

- Ethics
- Data collection April 2008
 - 3 group discussions
 - 4 individual interviews
- Thematic Analysis
- Validation July 2008



Strategy #1

- Know community expectations
 - **Motivations**, self-awareness, recommendations

This project hopefully will answer some questions and have the community ask other questions and part of it is why, we think, we have such a high rate of cancer here in a small community.



Strategy #1

- Know community expectations
 - Motivations, **self-awareness**, recommendations

What was I doing for that to act up, you know what I mean? Like what was I putting in my body, or was it the water, or was it the air I'm breathing in?



Strategy #1

- Know community expectations
 - Motivations, self-awareness, **recommendations**

*And maybe, um, make us aware of treatment, make us aware of how we can change . . . our lifestyle, or eating healthy, or whatever the cause (of *H. pylori*) may be*



Strategy #2

- Provide messages frequently
 - **Past experiences**, reassurance, improve understanding

A lot of times I know in the past, people from universities have done studies, they take all information from us, go, and never come back. And never talk to the people.



Strategy #2

- Provide messages frequently
 - Past experiences, **reassurance**, improve understanding

It's a slow process. Some people understand that, some people don't understand that, so you just need to let them know it's a slow process and that it's ongoing and that we haven't forgotten about the people that are infected



Strategy #3

- Use local resources
 - organizations, school, newsletters, **radio**

I thought that (worked well) when (the nurse-in-charge) was on the radio, she even did a little skit, like a question-answer



Strategy #4

- Promote use of traditional knowledge
 - **Loss of language**, traditional lifestyle, youth/elders

Definitely for the elders it would be good to have some translators around. But for the young, like our generation and that, I'm sad to say we don't know our language.



Strategy #4

- Promote use of traditional knowledge
 - Loss of language, traditional lifestyle, **youth/elders**

(The elders) do try, but for me it's an individual choice, you know if you want, because there's some elders that would if you asked them to speak, try and speak Gwich'in to you or Inuvialuit to you they would, but they would wait for the younger person to ask, you know, it's like more of an individual choice.



Strategy #5

- Demystify the research
 - Communicate results, enhance understanding

I think they'd like to see a mixture (in the video). Yeah, cause that's the best result I think, because if you get too one sided, if it's all research, it's sort of like, well you're minimizing the community's input, after all they, they're sort of the specimen group



Conclusions

- Consistent collaboration between outside researchers and community
- Frequent messages, regardless of availability of new information
- Emphasize individual and community level impacts of findings
- Incorporation of traditional lifestyle when it is possible
- Encourage communication between youth and elders



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