

Reclaiming Indigenous Health:

Embracing traditional values, culture, and
history in cancer efforts

Wyatt Pickner, *Hunkpati Dakota*, MPH, Research Manager

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American Indian
Cancer Foundation.

Hi.



American Indian Cancer Foundation (AICAF)

A national non-profit established to address tremendous cancer inequities faced by American Indian and Alaska Natives.

Mission:

To eliminate cancer burdens on American Indian families through education and improved access to prevention, early detection, treatment and survivor support.



Our Vision

Our vision is a world where cancer is no longer a leading cause of death for American Indian and Alaska Natives.

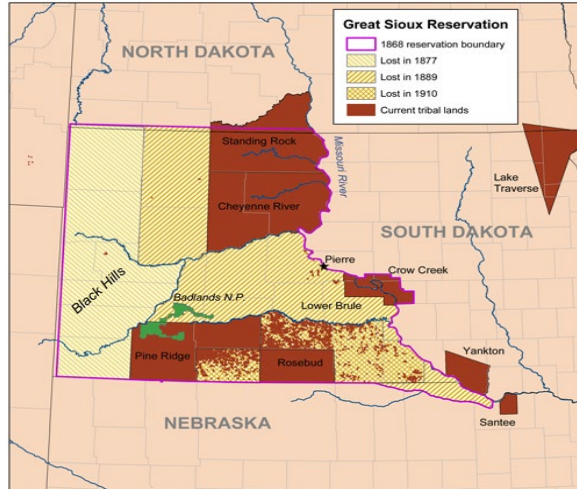
Our Approach

We believe...

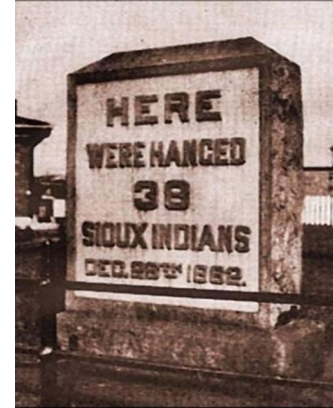
Native communities have the wisdom to find the solutions to health inequities, but are often seeking the organizational capacity, expert input and resources to do so.



Historical Events



- 1862 - Dakota 38+2 mass execution
- 1868 - Laramie Treaty/Sioux Treaty of 1868
- 1869 - Transcontinental Railroad completed
- 1874 - Gold was discovered in the Black Hills
- 1879 - Boarding school era begun
- 1886 - Statue of Liberty was dedicated
- 1887 - Allotment Act/Dawes Act
- 1890 - Wounded Knee Massacre

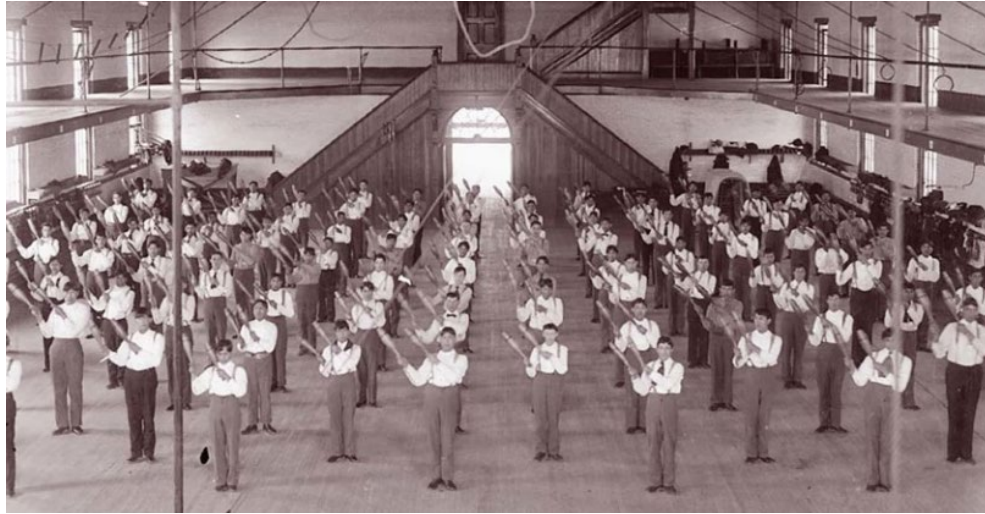


Government Policies, Systems & Environments

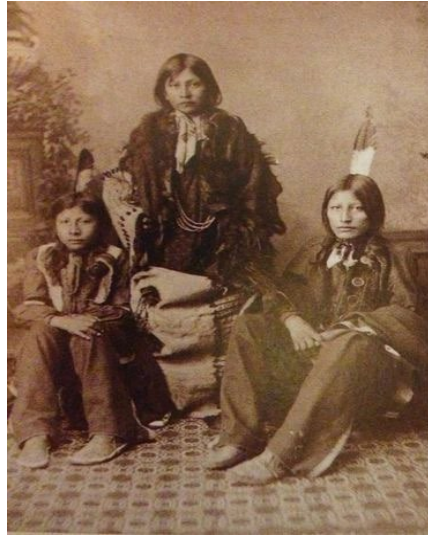
- Indian Removal Act
- Allotment Act (Dawes Act)
- Indian Reorganization Act (Indian New Deal)
- Indian Relocation Act
- Indian Religious Freedom Act
- Government food system
- Forced Sterilization
- Flood Control Act
- Boarding school era



Intergenerational Impact of Boarding Schools



Historical Trauma is **CURRENT** Trauma



We must keep unhealthy behaviors in the context of:

- **Trauma:** Both historical and current
- **Stesses:** Racism, poverty, other systemic inequities, cultural separation
- **Historical genocide and colonization:** The extermination and repression of AI/AN culture
- **Living with the oppressor:** AI/ANs still remain on this land base and are regulated / influenced in many ways by the federal government (for the past 500 years)

Root Causes of Chronic Disease



Adverse Social Determinants of Health

- **Historical & Intergenerational Trauma:** colonization, genocide, stress, disruption of childhood development
- **Poor Access To:** healthy foods, health & human services, employment, education, transportation



Adverse Childhood Experiences

- **Household Dysfunction:** divorce/separation, alcohol abuse, drug use, incarceration, mental illness, domestic violence
- **Abuse:** physical, sexual, verbal, emotional
- **Neglect:** physical, emotional



Behavioral Risk Factors

- **Behavior:** lack of physical activity, unhealthy eating & commercial tobacco use
- **Addiction:** commercial tobacco, alcoholism, drug use, unsafe sex



Poor Health Outcomes

- **Mental Health:** depression, post traumatic stress disorder, suicide
- **Physical Health:** cancer, obesity, diabetes, heart disease, sexually transmitted diseases, chronic obstructive pulmonary disease, HIV, Hep C, cirrhosis



Early Death

“Healthy equity is crucial for the well-being and vibrancy of communities”

- We know that health is a product of social determinants and health disparities
- Health inequities stem from structural racism, discrimination and poverty
- Solutions need to be tribally-led, community-based and rooted in culture

Tribal Sovereignty

Federally recognized tribes are recognized as possessing certain inherent rights of self-government and are entitled to receive certain federal benefits, services, and protections because of their special relationship with the United States. - US Department of Interior Indian Affairs

***It's time to utilize tribal sovereignty to
advance health equity in tribal communities.***

Importance of Building Partnerships

Authentically partner with AI/AN communities to:

- Trust the community has the wisdom and solutions to address health disparities which afflict their community
- Actualize positive change strategies that are conceived through community member engagement and conversation
- Change organizational practices to meet the community where they are at
- Cultivate community-driven coalition to influence policy & practice



Health Equity

Achieving full health potential



Balanced Health

- **Physical:** exercise, eat nutritious meals, get adequate sleep, avoid alcohol and processed foods
- **Mental:** practice mindfulness, seek help when needed, learn how to manage stress, maintain a healthy work and life balance
- **Emotional:** build healthy relationships, value yourself, stay connected with your community, express gratitude
- **Spiritual:** participate in ceremonies, offer prayers, learn your language, connect with elders



Breaking the Cycle of Trauma

- **Protective Factors:** cultural connection, belonging, resilience, safety, healthy coping skills
- **Preventing Adverse Childhood Experiences:** nurturing stable relationships, culturally tailored family education, breastfeeding, connecting families to community system resources



Social Determinants of Health

- **Social and Economical:** supportive government, financial institutions, safe transportation routes, cultural activities
- **Increased Access to:** healthy foods, safe physical activity spaces, sacred medicines, health care, education, housing, modes of transportation, internet



Indigenous Worldview

*an understanding of
the world*



Cancer Prevention from an Indigenous Lens

- **Mainstream:** Often only focuses on individual behavior
- **Indigenous lens:** Interconnectedness and guiding principles for ways of living
 - Respect for elders
 - Listening to understand
 - Show compassion, have empathy



Programs Overview



Cancer Programs



- Clinic System Improvement
 - National Comprehensive Cancer Control Program
 - National Breast and Cervical Early Detection Program
 - Sage and Sage Scopes
- Cancer Screening & Early Detection
 - Campaign Awareness Months

Women's Screenings and Vaccinations by Age

Women 40-49



BREAST

It is recommended that women begin screenings every other year, starting at age 40. Women who have a family history of breast cancer are at a higher risk and could benefit from screening in their 40s. If you are 40 or older, you can choose to begin yearly mammograms at age 40, depending on their insurance coverage. This is an individual choice and should be discussed with your health care provider. Women should be familiar with how their breasts normally look and feel and should report any changes to a health care provider right away.

CERVICAL

For women ages 30 to 65, it is recommended they receive a Pap test every 3 years, every 5 years for HPV testing, or every 5 years with HPV testing in combination with a Pap test.

LUNG

No screening is recommended, but if you are having symptoms, discuss these with your health care provider.

COLORECTAL

Colorectal cancer screening is recommended for adults aged 45 to 49.

HPV

The HPV vaccine is recommended for some adults ages 27 to 45 who are not adequately vaccinated. The HPV vaccine should be given before exposure to HPV through sexual contact.

HEP-B

The Hepatitis B vaccine protects infants, children, and adults from Hepatitis B. Talk to your health care provider.

If there is a family history of any of these cancers, you could be at a higher risk for cancer. Talk to your health care provider about the best screening options for you.



The recommendations come from the Advisory Committee on Immunization Practices, the United States Preventative Task Force, and the American Cancer Society.



Visit ACAIF.org or use our QR code.

Prevention & Policy

Policy, systems &
environmental
change strategies



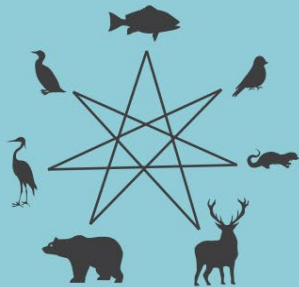
POLICY

Changes in rules that encourage or discourage a certain behavior

INDIGENOUS LENS:

The guiding principles for ways of living.

Example: Respecting our elders, never taking more than needed, and showing appreciation and respect for all living things



SYSTEMS

Changes in processes or procedures within an organization

INDIGENOUS LENS:

The building blocks of a community that allow it to function as a whole.

Example: Family, clan, band; food & medicine systems; tribal government systems



ENVIRONMENTAL

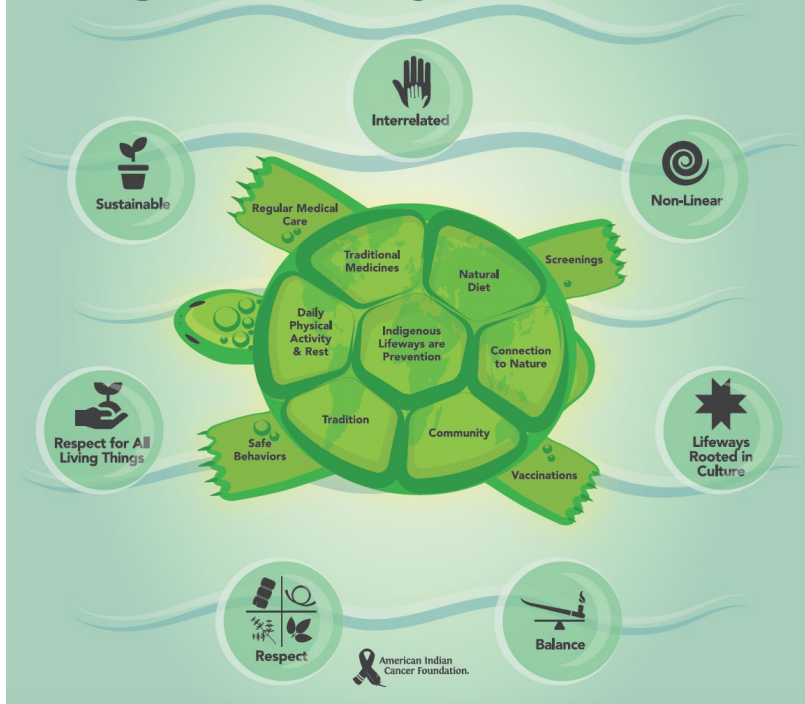
Changes in the places you live, work, play, shop and go to school

INDIGENOUS LENS:

The natural and built world around us and how we interact with it.

Example: Planting gardens, fertilizing the land, harvesting food, seasonal practices; and changing infrastructure, such as sidewalks and playgrounds

Indigenous Lifeways Are Prevention



Our ancestors recognized that our lives are *wakan** (*sacred*) and how we take care of *un̄kíthan̄čhan̄pi** (*our bodies*) is important.

Indigenous lifeways focus on the spirit, mind, body, heart, earth, and community. Each aspect is a thread in a web that is related to our past, living and future ancestors:



We can enhance our resilience and protection against chronic illness by embracing contemporary activities to achieve health equity. The combination of our traditional ways and these modern practices is essential to advance the health of our communities:




Research & Evaluation

- Honoring traditional tobacco
- Culturally tailoring commercial tobacco cessation strategies and resources
- Identify and assess facilitators and barriers to cancer screening
- Health systems improvement & training



Article

Tribal Tobacco Use Project II: Planning, Implementation, and Dissemination Using Culturally Relevant Data Collection among American Indian Communities

Kendra M. Roland ¹, Madison D. Anderson ^{1,2}, Dana M. Carroll ³ , Anna G. Webber ¹, Kristine L. Rhodes ⁴, John Poupart ⁵, Jean L. Forster ², Melanie Peterson-Hickey ⁶ and Wyatt J. Pickner ^{1,*}

¹ American Indian Cancer Foundation, Minneapolis, MN 55113, USA; kendraroland21@gmail.com (K.M.R.); manderson@americanindiancancer.org (M.D.A.); agwebber@gmail.com (A.G.W.)

² Division of Epidemiology and Community Health, School of Public Health, University of Minnesota, Minneapolis, MN 55454, USA; forst001@umn.edu

³ Division of Environmental Health Services, School of Public Health, University of Minnesota, Minneapolis, MN 55455, USA; dcarroll@umn.edu

⁴ Asemaake, St. Paul, MN 55104, USA; kris@asemaake.com

⁵ American Indian Policy Center, President (Ret.), Phoenix, AZ 85004, USA; ogamma2001@yahoo.com

⁶ Minnesota Department of Health, St. Paul, MN 55164, USA; melanie.peterson-hickey@state.mn.us

* Correspondence: wpickner@americanindiancancer.org; Tel.: +1-612-314-4845



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Abstract: American Indians have substantially higher commercial tobacco-related cancer rates when compared to the general population. To effectively combat commercial tobacco-related cancer, it is important that tribal nations obtain current and accurate community-specific data on commercial tobacco use and exposure-related attitudes and behaviors. With the goal to collect, synthesize, and disseminate data on tobacco use, including the role traditional tobacco plays among American Indian people, the American Indian Cancer Foundation (AICAF) and various stakeholders developed and implemented the Tribal Tobacco Use Project II (TTUP II) during 2018–2021. Building upon its predecessor, the Tribal Tobacco Use Project I (TTUP I), TTUP II used principles of community-based participatory research and culturally appropriate methods, such as Reality-Based Research, in partnership with tribal nations. We describe the TTUP II rationale, methods for participant recruitment and data collection, emphasizing the importance of using culturally relevant survey items to disentangle commercial tobacco use from traditional tobacco use. American Indian traditional tobacco is viewed as medicine in these communities with a unique socio-cultural context that must be addressed when engaging in commercial tobacco control efforts in American Indian communities. This approach may be useful to other tribal nations who are interested in conducting culturally relevant tobacco surveillance efforts.

The Stories Behind the Data



SmokefreeNATIVE

smokefree.gov

Explore the
Smokefree Family

MENU



[Tools & Tips](#) / [Smokefree Text Messaging Programs](#) / [Quit for Good Programs](#) / SmokefreeNATIVE

SmokefreeNATIVE

Who is this program for?

American Indian and Alaska Native adults and teens in the United States who are ready to quit smoking commercial tobacco. This program is offered through a collaboration between the National Cancer Institute's Smokefree.gov Initiative (SFGI) and the Indian Health Service (IHS). SFGI and IHS worked with experts from the School of Public Health, University of Minnesota and the American Indian Cancer Foundation to develop a program that is aligned with the culture and needs of American Indian and Alaska Native communities and honors the significance of traditional tobacco.

How does it work?

Sign up with the form below or text **NATIVE** to **47848**.

After you confirm your enrollment, you will receive daily text messages to support you in quitting smoking commercial tobacco from the short code **47848** (message and data rates may apply). The program lasts for 6-8 weeks.

You can opt out at any time by texting **STOP**. Text **HELP** at any time for information on the program. Learn more about the program, its unique, on-demand keywords for support, and find answers to Frequently Asked Questions [here](#). Read our [privacy policy](#) and [terms and conditions](#).

Tailored Primary Library Text Message Examples

SFTXT: Try this: Take 10 deep breaths when you feel stressed or emotional this week. Check in with your craving level when you're done.
STOP to end



SFNATIVE: Your breath is sacred. Take 10 deep breaths when you feel stressed or emotional this week. Check in with your craving level when you're done. **STOP2end**

Keywords

Original

- CRAVE – can be texted when a user is having a strong craving and needs a reminder to stay strong
- MOOD – can be text when a user is having a bad day and needs encouragement
- SLIP – can be texted when a user slipped up and smoked commercial tobacco and can either continue on or restart the program

New additions

- MIND – user can text to help find balance in their day
- HONOR – user can text to learn about Native culture including traditional tobacco
- CONNECT – user can text when they need a reminder of ways to engage with family and community

Tailored Keyword Examples

Mind

SFNATIVE: Mindfulness is an Indigenous practice. Try activities like beading and weaving and listening to traditional stories. Reply MIND for more.

SFNATIVE: Reflect on this: your true self keeps tobacco sacred. Your true self doesn't use commercial tobacco products. You're a nonsmoker. Reply MIND for more.

SFNATIVE: Your breath is sacred. Practice taking a few deep breaths and let go of any negative thoughts that are trying to control you. Reply MIND for more.

Honor

SFNATIVE: "Mni Wiconi - Water is life." Keep water close to stay hydrated and help with cravings. Take a sip! Want another tip? Reply HONOR for more.

SFNATIVE: Word of the day for sacred tobacco in Ojibwe is Asemaa. Reply HONOR for more.

SFNATIVE: Land, water, animals, and people are all connected. We are all related. Your life is sacred. You belong here. Reply HONOR for more.

Connect

SFNATIVE: Find out whose ancestral homelands you reside on! <http://lil.ms/moz7> Text TERMS for linking policy. Reply CONNECT for more.

SFNATIVE: Work on building relationships with elders or knowledge holders and learn from their wisdom. Reply CONNECT for more.

SFNATIVE: Traditional tobacco supports a good life and a healthy community today and for future generations to come. Reply CONNECT for more.

Indigenous Evaluation



Activities Logic Model

Planning

Implementing

Resources

Objectives

Outcomes

S.T. Outcomes

L.T. Outcomes

1. Indigenous Cancer Survivor Leaders to guide program
 - A. Survivors have the lived experience, and they are who we are creating resources and programs for.
2. Survivor Circles
3. AICAF: leadership, staff, Mission Statement, Urban Indigenous Cancer Plan
4. Funded by San Manuel Band of Mission Indians

1. Survivor-led Advisory Council convenes 6 times.
2. Grow relationships between AICAF and cancer survivor leaders in Indian Country
 - A. including current [relationships]
 - B. and develop new
3. Intentionality,
 - A. inviting survivors who have worked with AICAF to honor the service they have done already as advisors sharing their wisdoms.
 - B. inviting survivors who have not worked with AICAF to bring new perspective, grow relationships,
 - C. seed, planting, nurturing, harvesting framework
 - D. invitations through AICAF and partnerships first then through social media, self directed approach to AICAF: who was telling us they wanted to be a leader?
 - i. Stopped recruiting at 10 - 11 people.

1. Survivor-led Advisory Council convened 6 times.
2. Social Media Reach
3. Intentionality: Belonging, 1:1s, guiding principles, inviting AICAF across teams over time; Generosity, gifts for their knowledge, gifts for their stories; Ceremony, prayer before meetings begin, framework around Culture and Kinship.
4. Acknowledging their [survivors] creation story.
 - A. CIL campaign
 - B. Resources
 - C. Informational hub
 - C. Ribbon Work
 - i. Artists recruitment reach

1. Connection: Kinship is reciprocal.
2. Conversations to Action: Resources, Programs, Webinars, the work that AICAF does is built upon, revised, innovated, in response to Advisory Council guidance and story sharing
3. Sharing and discussing with all of AICAF
4. Advocacy grew among Advisory Council Leaders
5. New AICAF collaborators through sharing about this Advisory Council
 - i.e. Wisconsin Cancer Collaborative

1. Continue Advisory Council.
2. Continue relationships with our relatives and connecting with Indigenous Cancer Survivors.
3. Survivorship is in each [AICAF] program.

Seeds

Nurture

Gather

Harvest

Fruits and Seeds



American Indian
Cancer Foundation.

★ LUNGS ARE IMPORTANT. ★ NIYÁ IS SACRED.

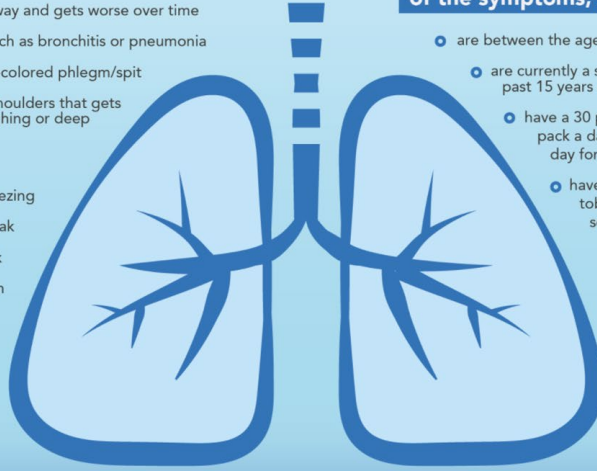
Know the signs and symptoms of lung cancer.

Signs & Symptoms:

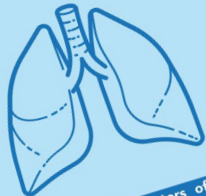
- A cough that doesn't go away and gets worse over time
- Frequent lung infections such as bronchitis or pneumonia
- Coughing up blood or rust-colored phlegm/spit
- Pain in the chest, back or shoulders that gets worse when coughing, laughing or deep breathing
- Hoarseness
- Shortness of breath or wheezing
- Fatigue, feeling tired or weak
- Swelling of the face or neck
- Difficulty swallowing or pain while swallowing
- Other symptoms include: weight loss, loss of appetite, headaches, bone pain or fractures, blood clots, jaundice, lumps on collarbone or neck region, changes in the appearance of fingers, called finger clubbing

Get screened yearly if you have any of the symptoms, but especially if you:

- are between the ages of 55-80 years old and
- are currently a smoker or quit smoking in the past 15 years and
- have a 30 pack-year smoking history (a pack a day for 30 years or two packs a day for 15 years) and
- have discussed quitting commercial tobacco and/or lung cancer screening with your doctor



*The full translation in Dakota of "breathing is sacred" is oniya wakháa, which means the "sacred breath of life."



What are the risk factors of lung cancer?

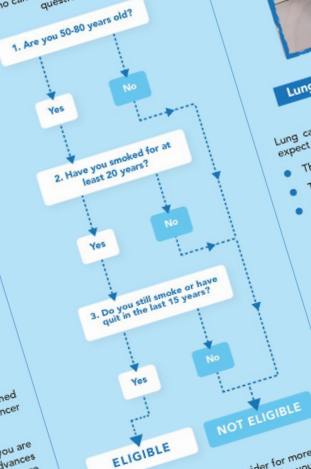
- Using commercial tobacco is the #1 cause of lung cancer. This includes cigarette smoking and other tobacco products such as cigars or pipes
- Other risk factors include exposure to second-hand smoke, radon, asbestos and other carcinogens, and a family history of lung cancer

Why get screened?

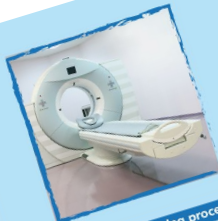
- Cancer screening saves lives. Getting screened early allows your health care team to find cancer early, when it is most treatable
- The best time to get screened is when you are feeling well. There have been many advances in detecting and treating lung cancer. Be aware of your risk factors and seek preventive health care to ensure your long term health
- Every Native life is sacred. Getting screened is a great way to honor yourself, your ancestors, and future generations

Who should consider getting screened?

Anyone who can say "yes" to all three of these questions



Talk with your health care provider for more information and if screening is right for you.



Lung cancer screening procedure What to expect

Lung cancer screening is easier than you expect.

- There is no preparation needed
- The screening is fast and easy
- The process involves little discomfort

Where can you get a screening?

- Talk to your health care provider for more information

American Indians and lung cancer

American Indian and Alaska Natives are at a high risk for lung cancer. Lung cancer is the leading cause of cancer death.

In some regions, like Alaska, the Northern Plains, and the Southern Plains, American Indians have higher rates of lung cancer and lung cancer death than other groups.

Using commercial tobacco is the primary cause of lung cancer. Commercial tobacco contains addictive and toxic additives that traditional tobacco does not. It is safe to use traditional tobacco for ceremonial purposes.

Lung cancer treatments have advanced a lot in the last 20 years, and early detection through screening improves health outcomes. Screening saves lives by catching lung cancer early, when it's easier to treat. Honor your health by talking to your health care provider about your risk factors today.



How to get screened

- Talk with your health care provider about eligibility and if it is right for you
- Most insurance plans cover lung cancer screening if you are eligible. Contact your insurance plan to find out if you are covered
- If you're don't have insurance talk with your clinic about other options and resources to get screened



The best time to catch lung cancer is when you're feeling well

Lung cancer treatments have advanced a lot in the last 20 years, and early detection through screening improves health outcomes.



www.AmericanIndianCancer.org




Lung Cancer Screening

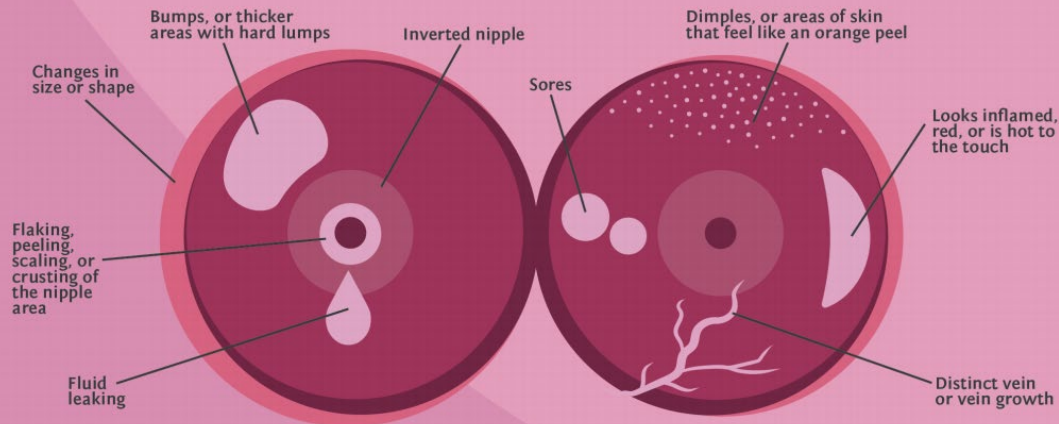
Be Aware.
Take Action.



Screening saves lives. We know it works for breast, prostate, cervical, and colon cancers. Now we know it works for lung cancer, too.

CHECK YOUR *DOODOOSHIMAN*

Know the signs & symptoms of breast cancer



See your doctor right away
if you notice any change or abnormality

Cancer & COVID-19

COVID-19 Has Not Stopped Colorectal Cancer:

GET SCREENED



Colorectal cancer is the second leading cause of cancer death for American Indians and Alaska Natives.

Due to the COVID-19 pandemic, CRC screening rates have drastically declined. According to the American Cancer Society, there was an estimated 90% drop in colonoscopies and biopsies last spring compared to the same time period in 2019.

CANCER SCREENING SAVES LIVES

OUR LIVES ARE *XUBÁÁ

BR&VE

Make a plan. Screening decisions will likely vary by community while the pandemic continues.

45 YRS

Colorectal cancer screening should begin at age 45. Our relatives with increased risk factors for developing CRC may need to begin screening earlier or more often.



Continue to practice COVID-19 safety measures. Follow updated COVID-19 prevention recommendations.

American Cancer Society (2020, October). Promoting Colorectal Cancer Screening During the COVID-19 Pandemic.

Learn more about colorectal cancer and screening options at AmericanCancer.org

Photos are intended to represent diversity for the American Indian Cancer Foundation through the Cancer for Diverse Communities Partnership.

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American Indian Cancer Foundation.

BE A GOOD RELATIVE



TAKE CARE OF YOURSELF AND OTHERS

CANCER and COVID-19



SHOULD I STILL GET MY CANCER SCREENING?

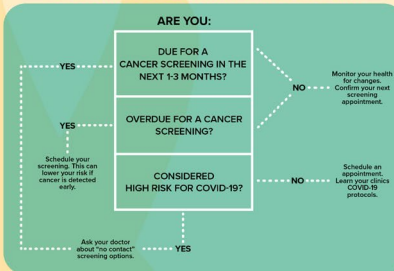
Early detection can save lives. Use this chart to help guide your decision on if cancer screening during the COVID-19 pandemic is right for you.

CANCER SCREENING FLOWCHART

SCREENING GUIDELINES

BREAST CANCER <small>Age 40-74 every 1-2 years</small> 	LUNG CANCER <small>Age 55-80, 20 pack-year history, quit within the last 15 years</small>
CERVICAL CANCER <small>Age 21-65 every 3 years, Pap test, or every 5 years, Pap test and HPV test, or every 10 years, HPV test</small> 	COLORRECTAL CANCER <small>Starting at 45, sigmoidoscopy or colonoscopy</small>

*Guidelines as defined by the United States Preventive Services Task Force (USPSTF)



WHAT TO EXPECT:

- Pre-screening for COVID-19 prior to your appointment.
- Appointment times may vary.
- Limited or no option to bring family or friends for support.
- Wear facial covering, wash hands, and sanitize when appropriate.

Talk with your provider. Know your family history. Watch for changes with your body. Screening saves lives.

FOR MORE INFORMATION, VISIT: WWW.AICAF.ORG



BLUE BEADS DAY

MARCH 21, 2024

Our ancestral traditions keep us healthy.

-  Use traditional medicines
-  Consume natural nonprocessed foods
-  Maintain daily physical activity & rest
-  Engage with the community in traditional activities
-  Connect with nature
-  Maintain regular medical care
-  Schedule screenings
-  Stay up to date on vaccinations
-  Practice safe behavior

*Support and celebrate the strength and resilience
of Indigenous cancer survivors everywhere!*

[#CelebrateIndigenousLife](#)

Celebrate Indigenous Life!



Cancer survivorship begins at diagnosis
and lasts throughout one's lifespan.



*Honor and celebrate
Indigenous life.*

Powwow for Hope: Dancing for Life, Love & Hope

1. Strengthening our Survivorship efforts to offer support to loved ones facing cancer
 - a. During the Covid-19 Pandemic we received funding and provided gift cards so anyone with a cancer diagnosis did not have to worry about any financial burden
2. Build larger cancer awareness campaigns to address the inequities faced by our communities
 - a. Culturally tailored resources and education materials were sent to various tribal and urban clinics to host education/screening events
3. Overall proceeds benefit AICAF's mission to eliminate the cancer burdens on Native people through improved access to prevention, early detection, treatment and survivor support

<https://powwowforhope.org/>

Reclaiming Indigenous Health

- Solutions need to be tribally-led, community-based and rooted in culture
- Recognize, respect and honor tribal sovereignty
- Establish long term relationships/partnerships
- Center the needs and priorities of the communities
- Invest in the communities
- Strength based approach
- Continual support and resources
- Seek historical context information and resources

Reclaiming Indigenous Health

It's a way of life

Raising Awareness. Building Capacity. Identifying Solutions.

www.aicaf.org

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Pidamaya

(Thank You)

Wyatt Pickner, Hunkpati Dakota, MPH, Research Manager - wpickner@aicaf.org



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