Cancer Prevention and Early Detection in American Indian and Alaska Native Populations

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Demographics of American Indians and Alaska Natives

Approximately one million Native Peoples were on the continent at the time of Columbus; at the turn of the 20th century, there were only 200,000 (Russell, 1992). Today, the “American Indian” (which includes all tribes and clans of people who are indigenous to the continental United States) has the smallest number of people among identified racial groups in the United States. Approximately 2.3 million, or 0.9% of the U.S. population, self-identify as American Indians and Alaska Natives (AIANs). This “smallest racial group” should be considered in perspective—although more than 700 tribes of American Indians originally inhabited this land, at least 200 have become extinct. In 1988, the Bureau of Indian Affairs Federal Register listed and recognized approximately 500 tribes of Native Peoples in the United States. Each of the surviving federally recognized tribes has its own unique and diverse culture, and many are acknowledged by the U.S. Congress as “Sovereign Nations.” In addition, hundreds of additional tribes are recognized only by individual states, not the federal government. Many tribes no longer possess reservation or trust lands, and several tribes share a single reservation.

Cultural Aspects of Cancer Prevention and Control

Similarities Among American Indian Cultures

Although each surviving American Indian tribe, clan, or band (terms used to describe native American groups) has its own unique culture, some generalizations are valid for most tribal communities. Locust (1995) describes some of the commonalities among Native Nations: “It is Indian people who are ultimately responsible for their own communities, and it is Indian people who will determine what level of health Indian people will achieve and maintain” (Stanford Center for Research in Disease Prevention, 1992, p. xiii). Since 1985, Locust has prepared and disseminated summaries of tribal-specific health beliefs. Tribes often have uniquely varying belief systems. However, according to Locust (1985), most tribes have the following common beliefs that influence health promotion programs: (a) Native Americans believe in a supreme creator, (b) a person is a threefold being made up of the body, mind, and spirit, (c) the spirit existed before it came into a physical body and will exist after the body dies, (d) plants and animals, like humans, are part of the spirit world, and the spirit world exists side-by-side and intermingles with the physical world, (e) wellness is harmony in body, mind, and spirit, (f) unwellness is caused by disharmony among the body, mind, and spirit, (g) natural unwellness is caused by the violation of a sacred or tribal taboo, (h) unnatural unwellness is caused by witchcraft (or “one who is on the bad side”), and (i) each of us is responsible for our own wellness. These beliefs must be integrated within the community’s wellness programs.

Indian culture also must be somewhat understood prior to fully appreciating the American Indian. According to Bennett (1994), “being Indian is more than checking the box for ethnic origin. It is a way of life, a way of being. The love for family, respect for your elders, spirituality, self-determination, integrity, pride, understanding, protecting the environment, humor, and socializing are all the essence of being Indian” (p. 35).

American Indian Cultural Beliefs Related to Cancer Diagnosis

Although similarities exist among Native cultures, a multitude of unique belief systems also exists among Indian Nations, in particular their perceptions of cancer, treatment, and healing. Figure 1-1 includes selected examples of quotes from Native American cancer survivors concerning cancer diagnoses (Burhansstipanov, Lovato, & Krebs, 1999).

American Indian and Alaska Native Cancer Mortality

Most published reports and data indicate that American Indians have low cancer mortality rates compared with other racial groups (Burhansstipanov, 1998; Cobb & Paisano, 1997, 1998; Creagan & Fraumeni, 2001, Pittsburgh, PA: Oncology Nursing Society. Reprinted with permission.


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