Together, with provincial and federal partners, our Mi'kmaw communities in Nova Scotia created

Nova Scotia First Nations Client Linkage Registry*

This is an update to the communities about our health information, produced by the **Strength in Numbers Project (2016).**

* At this time, our Registry does not include Acadia and Sipekne'katik First Nations' population numbers.

: Nations' population numbers.

Here is the good news:

The number of people in our communities who are diagnosed with cancer is pretty small. And, our overall rate of cancer is about the same as you'd expect to see in the general Nova Scotia population.

The cancers that are hitting us the hardest are ones that we can either **prevent** or **beat** with **screening** and **early treatment**.

Cancer

Population-level health information gives us quality data to support community education and planning.

There 260
new cases of cancer diagnosed in our communities between 2004-2013 (that's an average of about 26 cases per year).

Even so, a cancer diagnosis is challenging news for anyone. And chances are, if you live in a First Nation community, you have been touched by cancer in some way.

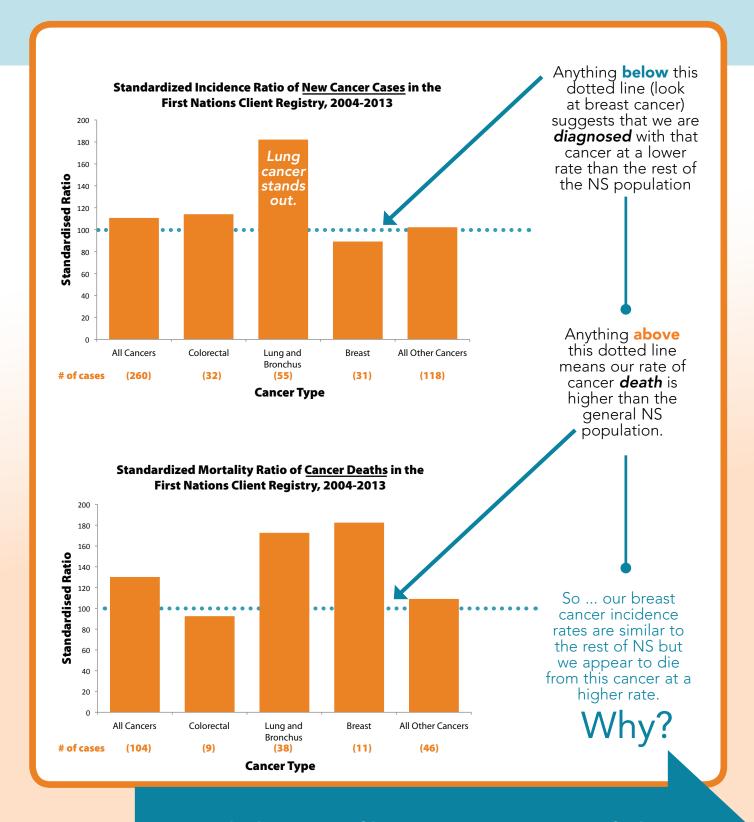
We know what to do.

We have the information to back it up.

Data for this bulletin were obtained from:

- Cancer Care Nova Scotia
- NS Breast Screening Program
- NS Colon Cancer Prevention Program
- NS Cervical Cancer Prevention Program

Let's draw the line on cancer:



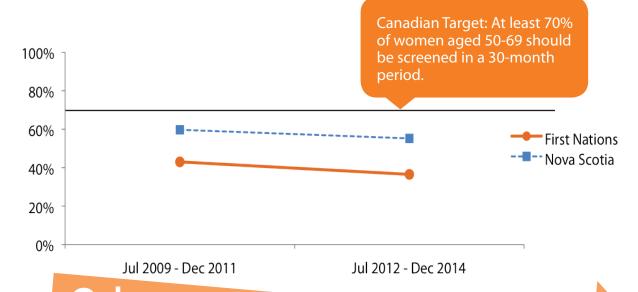
Let's look at rates of breast cancer screening to find out.

The numbers are telling us screening can Just look at b

save your life.

Just look at breast and cervical cancers.





36.5%

of the women in our communities who should be going for breast screening actually do. This number has been going down in recent years.

Cervical Screening

and **25%**

keep up with their screening.
This number has been going down as well.



We're doing well with cervical cancer screening among First Nations women in their child-bearing years.



But after age 40, there is a steep drop in the number of women from our communities who are going for the Pap tests they need.



70% of all invasive cervical cancer cases occur after reproductive years.



Cervical cancer is almost entirely preventable through regular screening, which is why we need to get our numbers back up!



So ... a reason we are diagnosed with breast cancer at a lower rate but we die from breast cancer at a higher rate could be because we aren't finding the disease early enough, when it is most likely to be curable.

There are 3 things to take away from our cancer data about reducing the effect cancer has on our people.

Many cancers can be prevented.
Live healthy.

Eat right. Stay fit. Keep a good body weight. And don't smoke or chew tobacco.

Lung cancer is something we can work to prevent.
Try to quit, or even to smoke less.

If you can't quit smoking (or even if you just live with a smoker), ask your Health Centre about symptoms to look for.

Tell the ones you love to get screened for cancer.

Men and women need to find out about what cancer screening tests are right for them at their stage of life.



Pap Test

You should be screened for cervical cancer within 3 years of becoming sexually active or at the age of 21, whichever comes later, and then every 3 years after that.



FIT Test If you're between

If you're between the ages of 50-74, every 2 years you will get a FIT test kit (fecal immunochemical test) in the mail to screen for colorectal cancer.



Mammogram Breast screening is recommended every two years for women aged 50-69. Women ages 40-49 are accepted into the program as well. Talk to your health care provider

to see if screening is right for you.

Talk to your Community Health Nurse.