



Indigenous Relationship and Cultural Awareness (IRCA) Courses: Interactivity Guide Answers

Module 13: Pediatric Oncology

Note that the answers provided below are not exhaustive and merely provide relevant information/points to consider for each question.

Chapter 1 - The Pediatric Oncology Group of Ontario (POGO)

1. POGO is an incorporated, not-for-profit entity with charitable status, which developed from an unprecedented alliance of visionary leaders, experts, healthcare professionals, the Ontario government, parents and childhood cancer survivors. What is their unifying goal and how does this relate to caring for First Nation, Inuit, Métis and urban Indigenous patients?

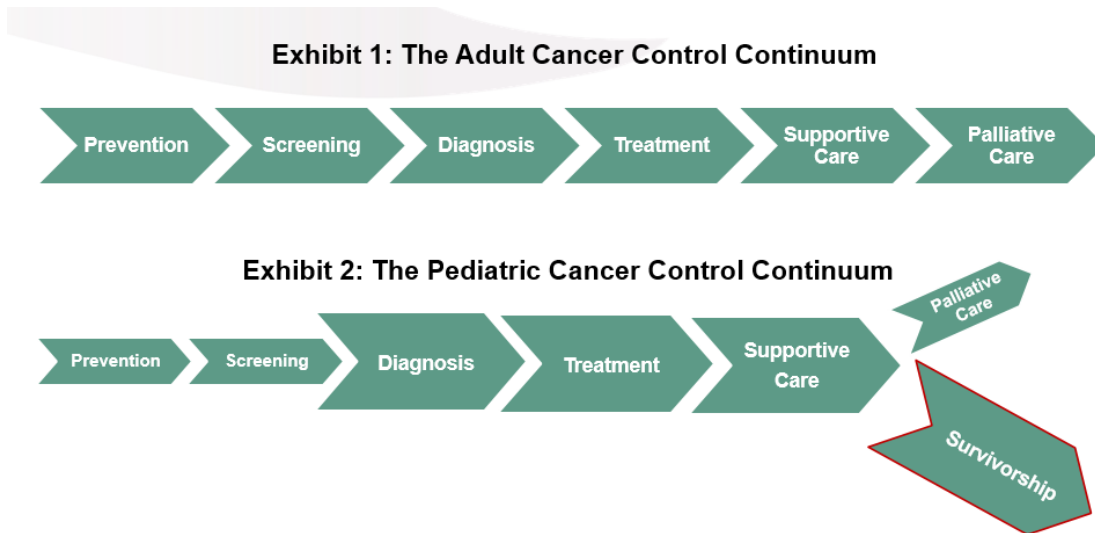
Answer:

POGO's unifying goal is to deliver the right care, in the right place, at the right time to children in the province whose lives are touched by childhood cancer.

Indigenous children need access to the right care, regardless of where they are located.

Chapter 2 - The Difference between Childhood and Adult Cancer

1. What are some of the main differences between childhood and adult cancer when looking at the cancer continuum below?



Answer:

In respect to childhood cancer, prevention and screening do not play a significant role like they do in adult cancer. As well, since about 80% of children will be cured of their cancer, a larger portion of the continuum will focus on survivorship as opposed to palliative care.

Pediatric Oncology Group of Ontario. (2015). Childhood Cancer in Ontario: A Remarkable Journey (1983 – 2015). PowerPoint Presentation.

2. Why is childhood cancer unique?

Answer: Childhood cancer is unique for the following reasons:

- Unique host
- Unique tumor biology
- Different range of cancers
- Unique Family Context

Chapter 3 - Childhood Cancer – A Unique Landscape

1. Reflection: After reviewing the chapter, are there any aspects of childhood cancer that you were not aware of? If so, please explain.

Answer: Self-reflection question.

Chapter 4 - Stages of the Journey

1. After reflecting on the case studies in this chapter, what are some of the difficulties encountered by the First Nations family that are unique to First Nation patients?

Answer: Points to consider:

- Lack of resources in the Nursing Station to adequately diagnose and treat the patient
- Having to coordinate travel through the NIHB Program
- Only allowing one family member to travel with the patient
- Communication/language barriers

2. Reflection: After reflecting on the case studies in this chapter, what are some of the activities carried out by the POGO Interlink Nurse that are unique to First Nation, Inuit and Métis children.

Answer: Self-reflection question. Points to consider:

- The use of an interpreter to explain the cancer diagnosis to the family.
- The family opted for a combination of Western medicine and traditional healing. As a result, the POGO Interlink Nurse arranged for a Traditional Healer to be involved in the treatment plan while also connecting the patient to the Cancer Care Ontario Aboriginal Navigator.

Chapter 5 - Childhood Cancer in First Nations, Inuit and Métis

1. Reflecting on this chapter, what are some of the differences between the cancer journey for First Nation, Inuit and Métis children and non-First Nation, Inuit and Métis children?

Answer:

- The main contact within the children's schools (i.e. contacting school board versus First Nations band office)
- Travel to and from medical services (Many First Nation, Inuit and Métis children live in isolated geographic areas)
- Financial barriers
- Language barriers (many patients may speak limited English)
- The role of the family (extended family may be heavily involved)