



MÉTIS NATION



**Métis National Council (MNC)
Request for Proposal
Cancer Research Services**

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A. GENERAL INSTRUCTIONS

A.1 Invitation:

The Métis National Council (MNC) is soliciting proposals from researchers to carry out research activities over a four-year period (2025–2029).

Research activities within this project include:

- (1) co-developing a national Métis cancer research survey;
- (2) developing a national health assessment report on Métis cancer prevalence and screening rates for relevant cancer types; and
- (3) producing a barrier analysis report related to the cancer care experiences of Métis people.

Given the limited availability of Métis-specific health data and research at the national level, there is an urgent need for a comprehensive, Métis Homeland-wide study. This includes a health assessment report examining the burden of cancer and the barriers to care experienced by Métis citizens.

The goal of this initiative is to uncover evidence to address cancer burden, risk factors, prevention methods including screening and HPV vaccination rates, lived experiences and health disparities. Findings will be compiled into a national health status report focused on cancer prevalence, prevention, and screening data, which will serve as a resource for Governing Members, decision-makers, and researchers.

Cancer experiences among Métis citizens, caregivers, and families may differ across regions within the Métis Homeland. To explore these variations comprehensively, MNC intends to develop a national Métis survey to inform the health assessment report. This will help identify challenges, including the need for Métis-specific extended health benefits related to cancer care.

Through this initiative, MNC will produce a total of two health reports addressing Métis-specific health inequities. These reports will include both qualitative and quantitative data with one report addressing barriers to accessing cancer care, such as geographical remoteness, lack of culturally safe services and healthcare provider training, limited health information, and inadequate access to medical transportation and accommodations for Métis citizens.

This initiative supports the revitalized research and policy development function of the Métis National Council by addressing a critical gap in Métis-specific cancer data and the documentation of lived experiences at the national level.

To complement the cancer-related programs and research already undertaken by MNC's Governing Members, this project builds on MNC's renewed role as a national policy,



research, and coordination body. It will synthesize Governing Member priorities, conduct Métis-led national research, and produce knowledge products that are public-facing, distinctions-based, and policy-informing.

A.2 Key dates and submission information:

Timing and key dates:

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|---|---------------------|
| Opening of RFP process | November 21, 2025 |
| Due date for inquiries from vendors | November 28, 2025 |
| Date inquiry responses will be provided from MNC team | December 1, 2025 |
| Submission deadline for proposals..... | December 5, 2025 |
| Proposal Review..... | December 8-12, 2025 |
| Selection Notification to Proponents..... | December 12, 2025 |

Proposal Submission Date:

Proposals to be sent by email no later than December 5, at 4:00 pm (EST) with subject line **“Proposal – Métis Cancer Research Services”** containing examples of previous health, cancer or distinctions-based Indigenous research work to be received by the MNC Health Team. Proposals received after the date and time specified for closing will not be considered.

Proposal Delivery:

Proponents are requested to submit electronic version of the Proposal to:
mnhealthteam@metisnation.ca

A.3 Proposal Document:

The name and address of the Proponent must be clearly indicated on the proposal. The total content of the Proposal, including sample work, must be outlined in the Technical Proposal.

A.4 Inquiries:

All inquiries regarding this Request for Proposal shall be directed by e-mail to the MNC Health Team: mnhealthteam@metisnation.ca. Inquiries must be received by noon **November 28, 2025**. All inquiries received, and the answers, shall be provided to all Proponents by way of written addendum, no later than the end of day **December 1, 2025**. Inquiries will not be identified as the Proponent name, but both the inquiry and the response



will be issued to all.

A.5 Costs

MNC shall not be liable for any costs and/or expenses incurred by any Proponent in the preparation or evaluation of this Request for Proposal.

A.6 Term of Engagement

It is expected that the successful Proponent will be the MNC Health Team's Cancer Researcher for the entire duration of the research period (**December 2025 - March 2029**). The Métis National Council Health Team reserves the right to terminate the contract if dissatisfied in any way with performance or fees charged for any other elements of the service provided.

B. BACKGROUND

B.1 Overview

The Métis emerged as a distinct Indigenous people and Nation in the historic Northwest during the late 18th century. The historic Métis Nation Homeland encompasses the Prairie Provinces of Manitoba, Saskatchewan and Alberta and extends into contiguous parts of Ontario, British Columbia, the Northwest Territories and the northern United States. The Métis National Council receives its mandate and direction from its Governing Members, the democratically elected governments of the Otipemisiwak Métis Government of the Métis Nation within Alberta (MNA) and Métis Nation of Ontario (MNO). The Métis National Council represents the Métis of Ontario and Alberta at national and international levels.

Since 2015, the federal government has committed to renewing the Métis Nation-Crown relationship on a nation-to-nation, government-to-government basis. Canada and MNC Governing Members have and are negotiating self-government agreements and, under the Canada-Métis Nation Accord of 2017, are co-developing policies and programs to advance socio-economic development and self-determination for the citizens of the Métis Nation through the Permanent Bilateral Mechanism.



B.2 Métis Governments

The Métis National Council Organizational Structure shall consist of a Métis General Assembly, the Board of Governors and the Office of the President.

The Métis Nation is represented through democratically elected governments – Otipemisiwak Métis Government for the Métis Nation within Alberta and Métis Nation of Ontario. These Métis governments are the contemporary expression of the centuries-old struggle of the Métis Nation to be self-determining within the Canadian federation and are the Governing Members of the Métis National Council, the national and international representative of the Métis Nation.

Métis citizens mandate their governments through province-wide ballot box elections held at regular intervals for regional and provincial leadership. They participate in these Métis governance structures by way of elected Locals or Community Councils and provincial assemblies.

Under this distinct system of democratic accountability, MNC Governing Members and the MNC itself have served the Métis Nation well by providing an effective means of representation at the community, regional, provincial, national and international level. As well, the Governing Members have a proven record of accomplishment in addressing the socio-economic needs of Métis Nation citizens by delivering government programs and services in a fair, transparent, cost-efficient and accountable manner.

B.3. Métis National Council – Métis Health Initiatives Management

The MNC advocates for the advancement of Métis interests at the national level, at the behest of the provincial Governing Members.

The MNC Health team works closely with Governing Members to manage all health file projects related to long-term continuing care, palliative care, trauma informed care, anti-Indigenous racism, health legislation for Métis People, commercial tobacco cessation, mental wellness, health data, cancer reduction and building capacity and relationships with pan-Canadian health organizations working on similar priorities. The MNC Health Team works to advance health policy priorities as identified by the GMs with Canada on a nation-to-nation, government-to-government basis.

As of 2025, the MNC has shifted its focus and mandate to represent its Governing Members in undertaking its work through three pillars:

- **Researching, developing, and coordinating** national policy positions;
- **Convening** Métis perspectives to develop strategies that advance shared priorities; and
- **Advocating** for better laws, policies and programs at the national and international levels.



This modified approach includes Métis experts from across the Homeland in the MNC's research and policy development. Additionally, a greater focus on publicly accessible research and data will allow the MNC to continue to be a strong partner in policy research and development on Métis rights and interests.

As the national voice of the Métis Nation and the Métis-specific National Indigenous Organization, the MNC will be advancing the interests of Métis Governments by shaping national legislation, policies, and programs while respecting their pursuits of self-government and treaty.

C. SCOPE OF WORK

C.1 Project Goals

The overarching goals of this project are to:

- Gaining better understanding of the cancer landscape across the Métis Nation (e.g., prevalence of cancer among Métis citizens, current cancer care and prevention initiatives, priority of cancer types) through the development of a Métis health assessment report; and
- Understanding care gaps and barriers, successes and challenges by initiating national dialogues on cancer care models and developing a barrier analysis report to inform policy and programs.

The project aims to equip the MNC with much needed data on the current health landscape of Métis citizens. Ultimately, success means the Métis Nation has greater understanding of its narrative moving forward. This will enable strategic advocacy backed by both qualitative and quantitative insights across multiple fronts to support the self-determined aspirations of Governing Members and Métis citizens.

C.2 Project Overview

The Métis National Council (MNC) is seeking proposals for a project funded by the Canadian Partnership Against Cancer to establish a national landscape of cancer data specific to the Métis Nation and identify calls to action related to the barriers and gaps in the health system for Métis people.

Each component of the project is interconnected and will require working with the Métis Nation - Technical Health Committee, Federal and Provincial partners and data institutes including Canadian Institute for Health Information, Canadian Institutes of Health Research, Cancer Care Ontario, Alberta Health Services and others, as well as the Director of Health and staff from the MNC Health team.



Although the scope of work is defined as below, Proponents are encouraged to utilize their research experience to identify suggested approaches for data collection, engagement, and report development. It is recommended that proposals exhibit the Proponent's plan to ensure that this project is grounded within Métis culture, history and values and how their plan utilizes a strengths-based approach. Please see scope of work for areas in which MNC is looking for a Proponent to deliver.

C.3 Scope of Work and Project Timeline

This scope is presented chronologically and is intended to guide Proponents in the types of activities, outputs, and timelines expected to achieve the project objectives. MNC welcomes the addition to or modification of the proposed activities, outputs, and timelines from Proponents, provided those additions or modifications clearly better achieve the stated project goals. This project will commence upon contract award and end March 31, 2029.

Table 1: Project Components, Description, and Timeline

| Project Component | Description | Timeline |
|---|--|--|
| <p>Phase 0: Environmental Scan and Literature Review</p> | <ol style="list-style-type: none"> 1. Conduct a landscape review of available academic, government, and grey literature related to Métis and Indigenous cancer experiences and prevalence of cancer types. 2. Analyze existing data sources (e.g., StatsCan, CIHI, GMs reports, CPAC-funded reports) to establish baseline knowledge. 3. Meet with data institutes and collate available data. <p>★ Deliverables: Literature review report and briefing note summarizing key findings – by March 2026.</p> | <p><i>December 2025 – March 2026</i></p> |
| <p>Phase 1: Co-Development of Survey Engagement Plan</p> | <ol style="list-style-type: none"> 1. Meet with the MN-THC to co-design the engagement framework and survey direction for data collection for the health assessment report. | <p><i>By June/July 2026</i></p> |



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| | <ol style="list-style-type: none"> 2. Review findings from MN-THC and Literature Review to build survey questions. 3. Establish ethical guidelines and consent forms by utilizing the Métis Nation Data Strategy and Métis data sovereignty principles. <p>★ Deliverables: Draft engagement roadmap including key survey themes, survey and community engagement questions for data collection, and ethical guidelines.</p> | |
| <p>Phase 2: Stage 1 Community Engagement</p> | <ol style="list-style-type: none"> 1. Conduct sharing circles and interviews with identified Métis citizens across regions. 2. Explore barriers, supports, and lived experiences throughout the cancer care continuum. 3. Seek citizen input to inform national survey questions. <p>★ Deliverables: Thematic summaries validated engagement findings for survey development and initial draft of the health assessment and barrier analysis report.</p> | <p><i>July 2026 - September 2026</i></p> |
| <p>Phase 2: Stage 2 Survey Pilot Roll Out</p> | <ol style="list-style-type: none"> 1. Pilot survey with select regions and in collaboration with the GMs. Revise based on feedback. <p>★ Deliverables: Final survey tool.</p> | <p><i>September - November 2026</i></p> |
| <p>Phase 3: National Survey Rollout</p> | <ol style="list-style-type: none"> 1. Launch survey both online and in paper format to ensure accessibility. 2. Distribute through GM networks, health providers, federal partners, pan Canadian health organizations, National Health Forum, AGAs and cultural events. | <p><i>Roll out survey Winter 2026 – February 2027</i></p> |



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| | <ol style="list-style-type: none"> 3. Provide honoraria to participants and track response rates by region. <p>★ Deliverables: Finalized survey</p> | |
| <p>Phase 4: Data Analysis and Community Validation</p> | <ol style="list-style-type: none"> 1. Clean, disaggregate, and analyze survey data by region and theme. 2. Return findings to GMs and citizens for validation. 3. Continue drafting barrier analysis and health assessment reports using data from literature review, engagement and survey. <p>★ Deliverables: Validated national dataset, final data summary to be shared with the MN-THC, and draft barrier analysis and health assessment reports.</p> | <p><i>March 2027 – March 2028</i></p> |
| <p>Phase 5: Knowledge Mobilization & Strategic Planning</p> | <ol style="list-style-type: none"> 1. Finalize barrier analysis and health assessment reports. Validate with MN-THC and engagement participants. 2. Develop accompanying knowledge mobilization products including infographics, with support from MNC graphic designer, and briefs to release on docuseries website, MNC website, CPAC website etc. for public and policy use. 3. Host session at the 2029 National Métis Health Policy Forum to share findings back to community. 4. Establish strategic action plan following the Forum. <p>★ Deliverables: Final health assessment report and barrier analysis report, public-facing knowledge mobilization products, presentation at the 2029 National Métis Health Policy Forum, and</p> | <ol style="list-style-type: none"> 1. <i>December 2028</i> 2. <i>December 2028</i> 3. <i>February 2029</i> 4. <i>March 2029</i> |



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| | strategic action plan (call to action/next steps regarding findings). | |
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D. PROPONENT REQUIREMENTS

MNC is seeking a Proponent with extensive health research experience and understanding of Métis culture and values. Preference will be given to proposals from Métis or other Indigenous Proponents that can demonstrate:

Technical Capabilities

- Graduate degree (Masters or post-doctoral) in Indigenous studies, health, social science, and epidemiology is preferred.
- 3-5 years of research experience particularly in distinctions-based Indigenous health, community health or cancer.
- Knowledge of research methods and best practices including experience with conducting qualitative research methods (i.e. focus groups, sharing circles, interviews, survey design, and community engagement) and quantitative research methods.
- Experience analyzing data and conducting thematic analyses.
- Strong writing and organizational abilities.
- Effective teamwork skills.
- Ability to work independently with minimal supervision.
- Previous published research work is an asset.

Engagement Experience and Practices

- Experience working with Métis citizens.
- Valuing and having a strong understanding of Métis culture, history and values.
- Valuing holistic frameworks of Indigenous knowledge, customs, and worldviews.
- Valuing and practicing cultural safety and humility.
- Strong interpersonal and communication skills to effectively communicate with community members, research participants, and federal and provincial partners.

Knowledge Translation Competencies

- Ability to disseminate research findings and generate awareness of the health status of Métis citizens through various culturally relevant and accessible knowledge mobilization products (i.e. infographics, presentations)



- Effective writing abilities to ensure final reports are suitable for various technical and public audiences.

Operations & Administration

- Ability to establish a project management framework supporting responsiveness to emerging needs.
- Consistency in applying detailed project management rigor and administrative best practices.

Staff Experience

Proponents should demonstrate staff availability and continuity in key roles:

- Experienced Senior Researcher - 3+ years of experience leading and advancing research projects, developing research methodologies and experimental design, community facilitation and engagement, experience with Indigenous ways of research and grounding cultural practices, value and protocols in research, and utilizing trauma-informed care and anti-Indigenous racism approaches. Experience in epidemiology is an asset.

Data Privacy and Security

- Proponents must ensure any data collected through community engagement, focus groups, sharing circles, interviews and surveys are kept encrypted, confidential, private and discrete, respecting Métis data sovereignty at all stages of the project, as those participating in this project can withdraw their consent for the usability of their data until reports are published.

D.1 Submission Requirements

MNC invites submissions from all Proponents and, particularly, submissions by Métis or other Indigenous Proponents. Proponents shall bear all costs associated with or incurred in the preparation, presentation, and submission of proposals in response to this RFP.

Proponents should submit a brief (2-page max) outline of relevant information about the Proponent (project team, relevant experience and qualifications, etc.); the Proponent's proposed approach and methodology to the development of the aforementioned research reports and survey design; and an estimated budget (non-binding). The Proponent must also include links to other similar published work or work for previous clients.



As the Métis Nation representative at the national and international levels, MNC is looking for Proponents who have knowledge and commitment to Métis culture, values and history. MNC encourages Proponents to provide information in this respect and (if applicable) to indicate whether they are Indigenous owned.

The deadline for proposals is **December 5, 2025, at 4:00 pm (EST)**. Please send proposals or any questions to mnhealthteam@metisnation.ca with the title “Proposal – Cancer Research Services”. If the Proponent is in doubt as to the meaning, intent or interpretation of any part of this RFP, finds any discrepancies or omissions in this RFP, it is their responsibility to inquire about and clarify any requirement of this RFP. Questions regarding the project and this RFP can be submitted on or before **November 28, 2025**, to mnhealthteam@metisnation.ca

D.2 Evaluation of Proposals

In addition to the Proponent Requirements and subject to the rights of MNC as outlined in this RFP, MNC will preferentially select the Proponent which, in MNC’s sole discretion, best serves the overall needs of MNC and aligns with its mandate. Should Proponents choose to collaborate, they must indicate this to the MNC Health Team prior to the RFP submission deadline (December 5, 2025).

Factors that MNC may consider include:

- The expertise, qualifications, certifications of the Proponent, including the relevance of the Proponent’s training and experience;
- Experience working with Métis and other Indigenous governments and institutions or organizations;
- Proposed approach and methodology;
- Estimated budget and price associated with the Proposal;
- Overall impressions of the Proposal;
- The Proponent is expected to support fair value and acceptable levels of service for the fees and expenses as proposed.

D.3 Rights of the MNC

The MNC may reject any or all Proposals, re-issue a new RFP or cancel this RFP process at any time, at its sole discretion – with or without notice.

MNC also reserves the right to:

- Reject any or all proposals received in response to this RFP;



- Enter negotiation with one or more Proponents on any or all aspects of their respective proposals;
- Accept any proposal in whole, or in part;
- Cancel and/or re-issue the modified version of a given RFP requirement at any time;
- Award one or more contracts;
- Obtain further clarification or information from a Proponent;
- Waive any irregularities in a Proposal submitted by a Proponent;
- Award contracts without competition for follow-up work, if any, to the selected Consultant for a given project requirement;
- To accept a proposal, which in the sole opinion of the MNC is the most equipped with the requirements and experience needed for the success of the project.

E. PROJECT COST AND BUDGET

Proponents must provide a comprehensive quote for this project, itemizing all components of the project in a detailed budget. All travel expenses must be included in the Proposal Fee Schedule, and the cost of this proposal will not exceed \$194,000 (inclusive of taxes).