

Indian Health Service

Health Promotion Disease Prevention

Cooperative Agreements Newsletter Date of Issue: March 2011 <http://www.ihs.gov/>

Health Promotion/Disease Prevention Program 2009 Awardees: Progress and Commitment

In Fiscal Year 2009, the Indian Health Service Health Promotion/Disease Prevention (IHS HP/DP) Program awarded eleven new Cooperative Agreements to tribal and urban Indian organizations for the 2009 to 2011 funding cycle. The purpose of the Cooperative Agreements are to enhance and expand health promotion and chronic disease prevention to reduce health disparities among American Indian/Alaska Native (AI/AN) populations through innovative and effective community, school, clinic, and work-site health promotion and chronic disease prevention programs. Focused efforts include enhancing and maintaining personal and behavioral factors that support healthy lifestyles, such as making healthier food choices; avoiding the use of tobacco, alcohol, and other harmful substances; being physically active; and demonstrating other positive behaviors to achieve and maintain good health. Since September of 2010, IHS HP/DP grantees have been busy working hard to make changes in their communities. In this newsletter are updates of programming for fiscal year 2011, where some great outcomes already are being achieved.

Beginning in the new Year, the new training and technical assistance providers, Martha Waller and Liz Lilliott of the Pacific Institute for Research and Evaluation (PIRE), and Alberta Becenti of IHS, held conference calls with each of the grantees to introduce themselves and familiarize themselves with the work each grantee was doing and the community characteristics in which grantees were working. These calls lasted

approximately 2 hours and were intended to not only orient Martha and Liz, but also allow grantees to address any immediate questions or concerns they might have had. These discussions with grantees were very informative and enlightening not to mention enjoyable.

2011 Cooperative Agreement Grantees' Learning Community

On January 14 and 15, 2011, the IHS HP/DP Program held a 2-day online Learning Community for its 2009 awardees. Martha Waller and Liz Lilliott of PIRE led the workshop. Grantees learned how to create and use a logic model, how to use data to plan strategically and implement the best strategies for change; how to write realistic and measurable objectives and why this is important; how to identify the difference between process and outcome data, how to report on process and outcome measures, and finally how to use graphs effectively to view progress and share data with stakeholders.

During the Cooperative Agreement Grantees' Training, Ms. Alberta Becenti, Project Officer for the Cooperative Agreement Grants and IHS HP/DP Consultant, welcomed participants to the online training, and emphasized the importance of the training information in order to help grantees' report program progress and outcomes. Drs. Waller and Lilliott on the first day described different kinds of logic models, their usual components, and provided a simple format that is useful for prevention planning. As a group, a logic



model was developed and then each program developed one on their own that could be reviewed by the TA providers before the next day's online workshop. On the second day, participants heard about ways to identify what constitutes a good goal and a good objective and about how to use a logic model to write strong goals and objectives. They also became familiar with some different ways to display process and outcome data in ways that resonate with different audiences. At the end of day 2, grantees were led through a refresher course on the HHS HP/DP web portal by Pedro Catacora.

Overall, participants found the workshop useful, in particular the group activities. Although we were unable to all meet in person, there were opportunities for grantees to ask questions and share thoughts and concerns with other grantees. As grantees would like to continue with group discussions and sharing of ideas, workshops in the future will be sure to incorporate group participation as much as possible. In addition, grantees will be given the opportunity to share information and learn from one another's experiences.

Since the Learning Community, grantees have worked to update their logic models and goals and objectives. These revisions and progress were seen in the Year 2 Tracking Forms submitted by each grantee. Martha, Liz, and Alberta reviewed the tracking forms and provided each site with detailed feedback on where grantees could continue to improve their goals and objectives, reporting, and evaluation plans. By the end of FY 11, the goal is for all grantees to have well written, measurable objectives and plans for how to evaluate changes in their objectives.

Remember that your technical assistance providers are always eager to hear about your TA

needs, feedback on site visits and trainings, and recommendations for future meetings and trainings. We are only a phone call or email away. Martha Waller can be reached at (919) 265-2631, or mwaller@pire.org (EST). Liz Lilliott can be reached at 505-765-2330 (MST), and lilliott@pire.org. Program questions, as always, should be addressed with Ms. Becenti. She can be reached at alberta.becenti@ihs.gov or (505) 248-4238 (MST).

Thank you all for participating and for the wonderful work that you do!

Alberta Becenti
Indian Health Service

Martha Waller, PhD
Liz Lilliott, PhD
Pacific Institute for Research and Evaluation



Forest County Potawatomi Community, Crandon, WI. Project: Forest County Potawatomi Youth on the Move

FCPC: The Forest County Potawatomi Community (FCPC) is a small band of the Potawatomi Indians located primarily on designated tribal lands in Northern Wisconsin (Forest County). The United States Census Bureau (Census 2000) reports 1,024 residents of Forest County. Among this population, 11.9% are Native Americans. This percentage represents individuals from a number of tribes, including FCPC members and the Sokaogon Chippewa Community of Mole Lake (primary reservation also located in Forest County, WI).

The FCP reservation was originally designated in a checkerboard pattern creating pockets of tribal lands across Forest County. Over time, three distinct tribal sub-communities emerged within a 20-mile radius: Stone Lake, Carter, and Blackwell. Of these sub-communities, the highest on-reservation population density (347) is in the Blackwell area.

Forest County Potawatomi is actively engaged in a multi-dimensional intervention to promote healthy practices and to reduce preventable disease by improving nutrition and increasing physical activity. The four phase project includes the Walking Program (winter/spring), Day Camp (summer), Summer Feeding Education (summer) and Fall Hike (fall). With this model there are multiple points of entry for increased participation and progressive programming to maximize effectiveness. This was demonstrated through the fourth intervention of year 1 HPDP: the Fall Hike.

A group of 84 participants (with 35 adults over 18 years old; 43 youth ages 5 to 18 years old and 6 children 5 years old or younger) set out from the FCP Health and Wellness Center Friday, Oc-

tober 8th for a weekend adventure. Prior to the trip, each participant picked up an HPDP FCP "Youth on the Move" duffle bag to be used on the trip. At that pre-trip meeting, questions were answered, and paperwork was completed. We spent 2 nights and 1.5 days at a hotel in Silver City, MI, hiking the nearby state park. Healthy choices were provided for each meal. Water was the beverage of the weekend: not a can of soda in sight. Buses transported hikers to each of three locations for three separate hikes. Participants were given a pedometer to wear throughout the day and prior to returning to the hotel, miles and/or steps hiked were recorded. Participants were encouraged to hike as much as they were able.

The following summarizes the physical activity for the trip. One trip was planned for participants at varying levels of physical fitness, with three hikes offered in one day. Data gathered on this trip will serve as a baseline to compare activity levels in subsequent trips.

82 of 84 participants walked the first hike, roughly 1 mile for 20-50 minutes.

77 of 84 participants walked the second hike, of 1-2 miles for 30-60 minutes.

38 of 84 participants walked the third hike of 2.5 – 3 miles, taking 45minutes to 2 hours.

Baseline:

- 92% completed the first two hikes for a total of 50-110 minutes.
- 45% of the group (38 participants) did all three hikes and completed at least 90 minutes of hiking.

Participants were given a pedometer. Prior to returning to the hotel, miles or steps hiked were recorded.

- Range: 1.5 miles- 12.04 miles

The following survey results will also help us track our progress:

	SURVEY QUESTIONS:	YES	NO
	41 surveys completed 21 completed all three hikes 20 completed the first two hikes.		
1	Prior to attending did you exercise regularly? TOTAL Group that completed all three hikes. Group that did not complete the 3 rd hike	20 / 41 12 / 21 8/20	21 / 41 9 / 21 12 / 20
2	If YES, did you exercise 3x per week or more? Those who answered yes to #1 TOTAL Of group that completed all three hikes and answered YES to #1 Of group that did not complete the 3 rd hike and answered YES to #1.	16/20 10/12 6/8	4 / 20 2 / 12 2 / 8
3	Is this your first time hiking in a state park? TOTAL Group that completed all three hikes Group that did not complete the 3 rd hike.	26/41 9/21 17/20	15/41 12/21 3 / 20
7	Would you participate again?	100%!	



Participants were also asked to provide their own comments. One captured the goal of the HPDP FCP Youth on the Move multi-dimensional intervention: "Next year I will be more physically fit." With 100% of participants stating that they would like to participate again, this leads right into program 1 (Walking Program) of year 2, which will begin February, 2011 as we continue to promote healthy practices and reduce preventable disease by improving nutrition and increasing physical activity.



Fort Belknap H-12 Fit Program: using culture, technology, diet and fitness to reduce youth obesity

Fort Belknap Reservation, located in 675,147 acres in rural northeastern Montana, is home to the Gros Ventre and the Assiniboine Tribes. Youth on the Fort Belknap reservation suffer from diabetes, obesity and hypertension due to myriad factors; and we are addressing those of the communities' lack of physical fitness equipment and facilities, as well as youth's lack of access to fresh fruits and vegetables. Through this cooperative agreement, the youth of Fort Belknap benefit from experiencing and maintaining personal growth and increasing their engagement in positive behaviors supportive of healthier lifestyles.

Ft. Belknap uses the H-12 Fit Program, a multi-faceted approach that includes culture, technology, diet and fitness into a broad-based intervention for youth to reduce obesity, diabetes, and cardiovascular disease among tribal members. H-12 Fit helps us address these problems both at school and in the community through traditional activities, food instruction, and modern technology (e.g., Wii Nintendo interactive games).

Currently, we are working with 800 youth on four principal goals. The first goal is to reduce obesity among youth by 10% in three years. In the 2008-09 school year, we gathered obesity-related measures with youth and we are currently collecting these data again so we can track our progress by May. The second goal is to improve diet by increasing healthy food consumption. All school menu plans have been reviewed by our nutritionist. Meals have been modified to increase fresh fruits and vegetables. The third goal is to utilize culture to improve health: Native Games are being played in physical fitness classes during school and we are instructing all teachers on how to implement them in classrooms. Weekend classes have been held to increase community involvement in Native Games, with a reservation-wide tournament planned for June 2011. Our last goal is to explore the use of Wii technology to improve fitness. We currently have two Wii games systems at each school and are working with teachers on how to use them to increase physical activity among youth.



Youth Diabetes Prevention Program Indian Health Board of Minneapolis

Through our Youth Diabetes Prevention Program (YDPP) we seek to prevent diabetes and substance abuse by providing education and group activities that support and develop youth healthy eating habits and enhancing resilience. The Indian Health Board (IHB) of Minneapolis serves the diverse American Indian community of Minneapolis, serving Annishinabe (Ojibwae), Dakota, Lakota, and other tribal members who reside in the Twin Cities. The YDPP has been in the progress of implementing and evaluating the effectiveness of the following activities as they pertain to our program:

YDPP curriculum is disseminated in three settings:

- 1) Beacons After School Program; held at the Anishinabe Academy & Anne Sullivan elementary school of Minneapolis
- 2) YDPP Classes: held at the Indian Health Board of Minneapolis
- 3) Ginew Golden Eagles: held at the American Indian Center of Minneapolis

The YDPP courses held at the IHB consist of the following four activities:

- 1) YDPP Youth Council: beadwork and dance are incorporated to promote cultural practices and foster resiliency
- 2) YDPP 5K Marathons: annually, seven 2K or 5K run/walk marathons are attended to promote physical fitness
- 3) YDPP Elder's Dinners: monthly dinners are hosted by YDPP participants where they prepare and serve community elders dinner
- 4) YDPP Task Force: Leadership Life Skills classes and community involvement are the core of the Task Force, as a way to build community service and resiliency

Recently, the YDPP just finished our first 15-week curriculum and it was a success! The families really enjoy the overall education information about nutrition and the importance of maintaining a healthy lifestyle. YDPP is currently in the process of recruiting for the second class and hopefully we can have a larger group than the last.

Previous challenges we faced consisted of transportation, involvement, and competing after-school programs. Within many urban areas,

there are a plethora of programs for youth and it makes it difficult to compete with when we all have programming throughout the week.

To meet the challenges of competing with other after-school programs, The YDPP is infusing our curriculum into two current after school programs in attempt to reach more American Indian youth. Beacons After-School Program and Ginew Golden Eagles are two current after-school programs where our curriculum is applied. The curriculum uses a nutrition base, and incorporates physical activity games that reinforce both healthy eating and lifestyle choices.

YDPP would like to reach out to the community for more participation, attend more 5K Marathons during the spring and summer, conduct field trips with physical activity, and enhance the effectiveness of all activities for the youth. YDPP is determined and motivated to increase participation and resiliency in 2011!



Indian Health Care Resource Center of Tulsa, Tulsa OK

Project: American Indian Pre-Diabetes and Obesity HP/DP Program

The goals of our American Indian Pre-Diabetes and Obesity Program are to promote health and reduce chronic disease associated with diet and weight, and to improve health, fitness, and quality of life through daily physical activity.

In order to achieve these goals, in the last six months we held group educational programs and activities designed to prevent disease and improve health and quality-of-life. While our Health Care Resource Center of Tulsa serves clients representing 157 different tribes, our program principally works with members of the nearby Cherokee, Muscogee Creek and Osage tribes of northeastern Oklahoma.

“Families in Motion” is offered as an after-school program for kids and their parents or guardians. Each week of the 12-week course, kids enjoy fun physical activities and also learn why physical activity is good for them. Parents learn ways to help their families make healthier choices. Parents also share ideas with each other to help their children eat healthier foods and be more active. At home, kids and parents teach each other what they learned in class. The take-home activities help families share new ideas with each other. Prizes are given at each session and special awards are given to families who work together to make healthy choices.

The brand new IHCRC Health & Wellness Department demonstration kitchen was the site of “One Dish Wonders” cooking class. IHCRC dietitians demonstrated several fast and easy one-dish recipes, which were then taste tested. Recipes with healthy cooking tips and drawings for door prizes were provided as well.

Monthly employee “Lunch and Learns” began in December with “Getting Ready for the Holidays”, followed by January’s “Spotting Fad Diets”. Additional employee events included a “Lean Team Challenge” that started before Thanksgiving and concluded after New Year’s Day, which helped employees survive the holiday weight gain. Physical activity opportunities and weekly health tips were provided. As part of the weight maintenance challenge, two special events: “Thanksgiving Turkey Trot” and “Walkin’ to a Winter Wonderland” helped keep motivation high.

In order to disseminate HP/DP program contact information and assist providers with teachable moment opportunities, we developed four educational brochures titled “Your Choice for Change: Honoring the Gift of Heart Health for American Indians”. These brochures that provide information on preventing or controlling diabetes, maintaining a healthy weight, controlling high blood pressure, and lowering blood cholesterol are kept supplied in all medical exam rooms. Bulletin boards and pediatric exam rooms also are maintained with current information of all IHCRC H&W Department activities and programs. In addition, all patients newly-diagnosed with conditions that put them at high risk for heart disease are sent a “Your Choice for Change” postcard to introduce HP/DP program resources.

The physical separation of the H&W department from the IHCRC main clinic requires creativity for recruiting participants. Communication with medical providers that is essential for referrals is challenged by separate office locations. To address this challenge, we meet periodically with the medical providers. Providers and scheduling clerks have also been given “pocket” laminated cards to assist them with referrals to all H&W Department providers. The educational brochures and bulletin board postings also provide recruitment opportunities.

Successes achieved may be best described in the words of parents who attended the past “Families in Motion” class. They were asked, “What did you like most about the Families in Motion class?” One parent said, “I liked how children and parents learn good eating habits together.” Another commented, “I liked the way parents were able to get together and learn new and healthy ways of eating and share ideas with each other.” And also, “I have learned so much in this class. I learned many tips to help me with cooking and preparing our meals. This is a great class.”

The collaboration with all H&W department providers is essential to the success of this program. The team of registered dietitians, case managers, and activity and youth specialists provide the synergy to accomplish our goals.

Plans for the next six months include the following:

- A Go Red for Women® special luncheon has been planned in February to celebrate the many accomplishments of our clients who have chosen to make healthy lifestyle changes and reduce their risks of heart disease.
- A new “Families in Motion” class is scheduled to begin in February and will continue through May.
- Several cooking classes are scheduled in February, March and April, and feature a fun new “Cooking 101” class for kids. Each child will have the opportunity to cook while being introduced to cooking vocabulary and techniques, the basics of etiquette, kitchen safety, and new foods!
- A heart healthy cooking series will provide adults with a hands-on opportunity to learn how simple and easy it can be to make meals healthier while still keeping them tasting good.

- Monthly employee “Lunch and Learns” will continue with: “The Heart Truth Discussion”, “Eat Right with Color”, and “Gardening 101” in February, March and April respectively.
- Individuals from all of the IHCRC departments have been recruited to serve on the IHCRC Employee Wellness Committee. The goal is to build a results-oriented worksite wellness program that revolves around senior management leadership. Developing and implementing worksite wellness policies are high priority issues.
- The IHCRC H&W Department will host the Oklahoma Area IHS/Tribal/Urban Systems Registered Dietitians and Nutrition Professionals meeting in March. This will provide an opportunity to share our many programs with nutrition professionals across the state.
- The IHCRC H&W Department will also host a health fair for clients and employees in March. This will provide an opportunity to both recruit participants and provide HP/DP educational materials. IHCRC programs will be represented and many community health care vendors will be present. IHCRC and CommunityCare are partnering to offer employees with complimentary heart health screenings.



Rebecca Wilkins (left) and Rebekah Cunningham (right) are happy with their certificates and other awards they received for attending “Families in Motion” classes with their parents.



Oneida Health Promotion/Disease Prevention Cooperative Agreement

Oneida Health Promotion and Disease Prevention (OHPDP) strives to empower its community to honor their personal roles and responsibilities in making positive lifestyle choices that will improve health, quality of life, and prevent chronic disease. The program is evaluating the effects that wellness coaching and group health education have on risk factors for diseases such as diabetes, obesity, cardiovascular disease, and cancer as well as upon lifestyle change sustainability.

The Oneida Tribe of Indians of Wisconsin is a federally recognized Indian Tribe with approximately 16,154 enrolled members of which 41% of the membership lives on or near the Oneida Reservation. Oneida Reservation is located in northeastern Wisconsin near the city of Green Bay and lies diagonally in Outagamie and Brown Counties, along a northeast-southwest axis, in territory along the Duck Creek and west of the great Fox River.

OHPDP educates Oneida Community Health Center provider-referred clients and encourages a change in unhealthy behaviors through wellness coaching using Motivational Interviewing and Appreciative Inquiry. We are only into the first quarter of year two and have recruited and enrolled almost the total number of patients as in year one! Since August 1, 2010, we have recruited and enrolled more than 80 people. 82% of those recruited and enrolled have at least one positive behavior change.

This year we partnered with Oneida Family Fitness to coordinate Just Move It-Oneida. Thanks to this collaboration, we are seeing more and more people join in physical activity. We had a total of 203 community members register to participate in at least 1 event.

We continue to work with UW-Madison to implement the Healthy Children, Strong Families program for children ages 2-10 years. With a completed logic model, we look forward to presenting the program, referral process, and data collection to Oneida Community Health Center physicians some time in February.



Pawnee Nation's Wellness and Health Promotion Program (WHPP) Advisory board: Tawi Tiwadi "A Walk to Nebraska" and Tiny tot Basketball League

WHPP Advisory Board strives to enhance the work life of Pawnee Nation's employees by developing, implementing, and assessing a program to support healthy lifestyle practices. We shall enhance the work life of employees by fostering support for healthy nutrition, physical activity, substance abuse and tobacco free education towards health promotion.

This year, Pawnee Nation's Wellness and Health Promotion Program (WHPP) Advisory board presents "A Walk to Nebraska". The goal is for participants or teams to walk 400 miles, which symbolizes the distance from the contemporary Pawnee tribal lands in rural northern Oklahoma to Grand Island, Nebraska--Pawnee's original homeland. The Pawnee Tribe consists of four bands. The Skidi band resided north of the Platte River; the Kitkehahkis settled right below the Nebraska border leading up to the Platte River; and the Chaui and Pitahawirata bands were located in-between the two other bands.

Participants in *Tawi Tiwadi* (the Walking Club) can participate as a team of up to 4 members, or as a one-person team, "*Chaticks Si Chaticks*". Everyone records their own steps on a log sheet. The Kickoff started on January 3, 2011 and the program will end on June 30, 2011 at the Pawnee Nation's Health Fair and Prevention Day activities. The Health Promotion/Disease Prevention (HPDP) program must record the first and last month's BMI. Monthly walks will also be held during National Health Observances. On these walks, staff are available to share information, answer any questions, and operate a scale and weight ratio machine to record BMI.

Pawnee Nation's Tiny Tot Basketball League has come to a close. This league consisted of 2nd through 4th graders, males and females. This year, Pawnee had nine teams compared to last year's with four. Parent volunteers coached teams. HPDP provided the Wellness Center to hold practices; however, with this many teams, coaches also had to rely on the high school and grade school gymnasiums. HPDP Coordinator, Suzy Snell said,

I saw vast improvements with children understanding rules and knowledge of the game of basketball. While playing in Pawnee; referees had to call the players on walks, double dribbles, lane violations, boundary violations, etc. The referees were not trying to discourage but rather to teach young players errors that are easily corrected. I feel these basic rules in the game were understood more now when their minds were eager to learn.

Instill fundamentals now, so that more time can be focused on physical development. We would like to thank the parents who volunteered their free time to teach the kids fundamentals and the positive aspect of the game. We also would like to thank all parents for a positive atmosphere at the little league games. We all get wrapped up in the heat of the game and understandably disappointed at some calls and missed calls, but we are all here for the kids. As a whole, it was a great basketball season. Thanks to everyone!



Penobscot Nation Health Department Indian Island, ME

Project: Penobscot Nation Health Department Health Promotion/Disease Prevention

Penobscot Nation is committed to helping community members prevent chronic diseases by providing regular opportunities for members to get active, to eat nutritiously, and to engage in activities to help foster a healthy lifestyle.

Penobscot Nation is a federally recognized tribe with a reservation that is home to more than 440 tribal members (with another 800 living within the state). Located in rural central Maine, Penobscot Nation experiences cold weather for at least 6 months out of the year, which makes it necessary to offer both indoor and outdoor exercises. With limited indoor space that is shared between multiple departments, it is essential to offer an array of programs that appeal to a variety of ages and fitness levels.

Penobscot Nation Health Department presented a new fitness program this January 2011, Bodypump. Bodypump is a high repetition, resistance training class that works every major muscle group in the body. In addition to strengthening muscles, this class fortifies the core, improves posture, and challenges every level of fitness. Several tribal members completed the Bodypump training. Andrea Sockabasin and Gabe Paul are now instructing classes and coaching participants through each move to ensure that they are using the proper technique to minimize the risk of injury while maximizing fitness results. The goals for this program are as follows:

- to help teens and adults meet the recommendations for achieving 150 minutes (or more) of physical activity per week,

- to decrease chronic diseases like diabetes and heart disease,
- to decrease overweight and obesity, and
- to increase muscular strength and fitness level

Before exercising, each participant completed a pre test to get a baseline estimate for current fitness levels. A post test will be administered after three months to determine if fitness levels have improved.



Bodypump participants gear up for squats.

Second through fifth graders are strapping on their snowshoes two times per week for some winter fun mixed with mini lessons in native culture and healthy nutrition. The children learn to navigate, to identify animal tracks, and to respect the land and one another with lessons from Dale Lolar. The kids are also provided with nutrition education and nutritious snacks that help enable them to stay healthy, strong, and active.



Pre teens (5th through 8th graders) are hitting the fitness room under the instruction and supervision of our Fitness Room Coordinator. The focus of this program is to increase participants' comfort level with the facility and equipment and to provide them with the proper technique for a variety of exercises. Fit Kids encourages youth to develop active and positive lifestyles, while raising their self-esteem in the process.

A new program, called "Teen Night" has recently commenced. Teen night is a weekly intertribal and interdepartmental program where youth are provided with activities and education in a fun, social atmosphere. Activities include physical activity outings like snowshoeing, bowling, and sledding, and other activities such as cooking activities, movies, and board games. The goal of this program is to aid in substance abuse prevention, to increase social consciousness, to increase exposure to different physical activities, to increase healthy eating behaviors, and to build relationships with tribal role models and leaders within the community.

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Pueblo of Santa Ana Youth Health and Fitness Project

Youth Making Healthy Lifestyle Choices

The purpose of the *Pueblo of Santa Ana Youth Health and Fitness Project* is to address the problem of youth obesity through innovative, evidence-based strategies that promote physical activity and healthy eating. Santa Ana Pueblo is located in north-central New Mexico, in a rural and arid region along the Rio Grande between urban Albuquerque and Santa Fe.

Karate classes for youth ages 8-14 years old were held twice a week for 6 weeks. In addition to physical skills, karate develops mental disci-

pline, helping to build attributes such as respect, etiquette, sincerity, effort, and self control. In the Japanese language, *kata* is a frequently-used word meaning "way of doing things," with emphasis on the form and order of the process. *Kata* also has application in many aspects of life. A *kata* can refer to any basic form, routine, or pattern of behavior that is practiced to various levels of mastery. Of the 21 youth registered, 15 received their 1st belt, and 12 are being sponsored by the Santa Ana Tribe (class fees, uniforms and equipment) to continue classes with the instructors. The 15 youth who earned their 1st belt had to successfully demonstrate 1 *kata* consisting of 20 movements, and 15 self-defense movements. Students are ready to test out for their second belt this February 2011.

The Wellness program lacks adequate space for physical activity classes, and so has developed a partnership and MOU with the Childcare Center to use their cafeteria space for the first karate session. The continuing classes are off-site, and parents have to travel 13 miles one-way to get to class. We are impressed with the number of parents who are willing to travel so that their children can continue to benefit. Parents also volunteered to provide nutritional snacks, and set up a rotation of each parent taking a turn to bring snacks for the class. 12 students continue, now sponsored by the Santa Ana Tribal Recreation Department. Santa Ana Youth Program staff person provides communications between Tribal Recreational Dept., parents, and karate instructors.

TRAIL (Together Raising Awareness for Indian Life) is a national diabetes prevention program developed for Native American youth. The 12-session curriculum is geared towards mid-school students and addresses lifestyle choices such as nutrition, physical activity, tobacco use, and other risk-taking behaviors. Six participants started the class, and three finished. Recruitment and retention for a program that is 12

sessions long is difficult. With any interruption to the class schedule (Tribal and school activities, and holidays), it was difficult to get the class back together, but we were able to hold make-up classes.

Awareness of the pilot TRAIL session led to a new partnership with the Tribal Language and Culture Program. We are currently modifying the curriculum with that program and with the elderly to define the vocabulary words in the Keres language of our Pueblo. We will be starting the TRAIL curriculum in the Bernalillo Public School system, within the Language & Cultural class that exists there. The class consists of Tamayame (Santa Ana Pueblo) students only.

In the next 6 months we will be working on several goals.

Adopting CATCH Program

CATCH is an evidence-based, coordinated health program designed to promote physical activity, healthy food choices and the prevention of tobacco use in children. By teaching children that eating healthy and being physically active every day can be **FUN**, the CATCH Program has proven that establishing healthy habits in childhood can promote behavior changes that can last a lifetime.

We are planning to have a training on the Comprehensive Approach to Children's Health (CATCH) program, for all staff who provide programming to Santa Ana youth. Our staff will implement a 6-week session of CATCH; additionally, other programs' staff will have familiarity with the concepts of an environmental approach to youth health.

Implementation of TRAIL Program Into Culture Class

We are working with the Santa Ana Language and Culture program to implement the TRAIL

curriculum in the Language and Culture program, which operates within the local school system. Their program staff, in conjunction with Tribal Elders, have translated the vocabulary words in the curriculum into the Keres language, and our youth coordinator teaches the curriculum and the vocabulary words. Language, culture and health are all reinforced through this partnership.

Continue Development Of Physical Activity Programs

Current plans are to offer jump-rope sessions, which was one activity the youth were exposed to during *Youth Health and Fitness Day*. It was a favorite, and they asked for more! We're additionally exploring soccer sessions, and looking into joint-use facility agreements with the local schools.

7-5-2-1-0 Toolkit

We are currently working on incorporating the 7-5-2-1-0 campaign (Breakfast 7 days a week; 5 fruits and vegetable servings; 2 or less hours of screen time; 1 hour of physical activity; 0 sugary beverages) into our programming. This includes developing a toolkit as a resource for all Tribal programs who deal with youth, and for clinic providers. In addition, the messaging will be reinforced in all of our programming and through community awareness campaigns.



Southeast Alaska Regional Health Consortium: The Healthy Wrangell Project

A project that keeps on growing

Healthy Wrangell's goal is to increase access to nutrition, physical activity and tobacco education in the Southeast Alaska tribal community, Wrangell, a rural community of 2,112 people. This project seeks to support and enhance the work of the Healthy Wrangell Coalition by facilitating evidence-based public health practices and programming in the schools and community of Wrangell.

COMMUNITY GARDEN

The Community Garden had a successful season. We grew over the summertime from 7 beds to 30 beds, wrapping up our growing season on October 30th with a big end of season work party. It was a lot of work. We cleaned up our raised beds, amended soil, and took care of our unruly compost. There was a good turnout of community members who shoveled dirt, manure, grass clippings, seaweed, and unfinished compost. We are looking forward to another successful growing season this summer.

SEARHC is partnering with the Community Garden, the Wrangell Medical Center, and the City and Borough of Wrangell to help the garden grow. The Wrangell Medical Center has written two large grants for the garden that will be run by the City. One grant is for \$100,000 to build commercial greenhouses. The other grant is for \$77,000 to build a wind turbine and establish a farmer's market. SEARHC is assisting in the development of the greenhouse, wind turbine, and farmers' market. We are also working closely with a recently established Local Food Committee. It is exciting to be a part of this developing project.

ORGANIC FOODS

We have one local vendor who has an organic food van that he sets up downtown every other Tuesday. He has begun partnering with another individual to bring organic foods on the alternating Tuesdays. As a result of this partnership, now we have access to organic foods every single Tuesday. After we talked to these vendors about their accepting WIC vouchers, both have agreed and have initiated the required paperwork so they can help provide even greater access to fresh foods to our community.

FRUIT TREE PLANTING PROJECT

The Fruit Tree Planting Project has been changing forms since the idea was first planted as a little seed in the minds of the Healthy Wrangell Coalition members. So far the School District and the Wrangell Medical Center have submitted applications to the Fruit Tree Planting Foundation and are having discussions with that non-profit. We are also currently discussing how the organizations that participate in the Healthy Wrangell Coalition can plant fruit trees on their own. We are discussing how organizations and businesses can adopt policies of planting 2-4 trees a year. There have been a lot of positive responses from organizations so far. As we work out the details over time we will see fruit trees being planted in multiple locations across our island.

MEDIA

Our anti-tobacco ads have been running continuously in the *Wrangell Daily Sentinel*. In this oldest continuously published newspaper in all of Alaska, we have printed 24 newspaper PSAs during the last 6 months. We also have been running anti-tobacco radio PSAs: in the last 6 months, 288 radio PSAs have played on KSTK.

Our Facebook page, "Wrangell – the Good Life", has been set up and is growing. We have grown

from 22 friends in our first week to 63 friends, and anyone in the general public can access our page. Our announcement about the Community Garden and the End of the Year Clean-up was viewed 284 times. While we didn't have as many people show up to the clean up, we did have a large turnout. An online meal planning resource was viewed 121 times. So far, our Facebook page has become a very useful tool that helps us communicate what is happening in our community. We will be looking into other ways we can utilize it for our projects.

PARTNERS

We have been partnering with Alaska Island Community Services' K-12 tobacco education grant by brainstorming as to how we can support each other's goals. While they initially had a high turnover of employees, AICS now has dedicated staff in the tobacco department. Beginning February 15th, we will be making local radio PSA's with children in the community.

We are successfully partnering with the Wrangell Medical Center, which currently has an ACHIEVE grant with goals very similar to ours. We are working together on a number of nutrition and physical activity projects, which include the Wrangell Community Garden, the Fruit Tree Planting Project, the Traditional Foods Project, and the Local Food Committee.

We are also partnering with the Healthy Wrangell Coalition whose goals are very similar to the Healthy Wrangell Project. We have successfully assisted the coalition with a restructuring of their mission and vision. This will allow the coalition to create more focused goals and objectives so that everyone can be a part of an action plan that will affect our entire community. The new Vision: Wrangell has the highest quality of life in Alaska. The new Mission: HWC works to encourage and support the highest quality of life for Wrangell by promoting sustainable healthy activities, education and policies. Many mem-

bers of the Healthy Wrangell coalition also partner with Wrangell Medical centers ACHIEVE grant. So our focus will be leaning towards increasing access to good nutrition, increasing access to physical activity, and substance abuse education.

CHALLENGES & SOLUTIONS

It has been challenging partnering with so many organizations in the community, but those difficulties are also strengths for us. Coming together can be hard when so many of us wear different hats in Wrangell and have different goals. Since reorganizing the Healthy Wrangell Coalition we have been able to see where our goals overlap and how we can support each other. While may not always see eye to eye, we all have the health and wellness of the community of Wrangell in mind. Our coalition is constantly changing in response to the community. In spite of the difficulties these changes may offer, our ability to respond to our community is also one of our biggest strengths. It is nice to be a part of a community that is willing to learn how to work together to get things done for the betterment of all.



Washoe Tribal Health Center - HPDP

Living Yesterday for Tomorrow

The Washoe Tribe of Nevada and California (WTNC) has launched a youth lifestyles improvement program called "LYFT" (Living Yesterday for Tomorrow). Our (WTNC) Tribal Health Clinic has chosen to focus on the areas of youth obesity and the need for more physical activity. WTNC health professionals believe that it is easier to build a healthy child than it is to fix an adult. The people whose lives will be changed by the model project are all Washoe

tribal youth (ages birth to 18), approximately 300 who live in the tribe's four rural reservation communities, or colonies.

With a 10% diabetes rate for our tribe, the ultimate goal of our project is the prevention of this disease in our youth. The alarming fact is that now the age of onset of diabetes in our tribe is in the teens and 20s, as opposed to the 30's and 40's. By providing a change in diet and exercise activities that move the youth outdoors, and away from the refrigerator and couch, we have lowered the average Body Mass Index (BMI) of our participating 8-18 year olds from 29 to 21. While this change may not look like much, it is the difference between obese and normal. That change alone can make the difference between early onset diabetes and no diabetes. We noted that the increase in BMI goes hand-in-hand with puberty. It is at this time that we see a jump from small or underweight to obese in a short 3 year spread on any one child.

To gain this remarkable achievement we have been providing activities for the youth of all four colonies. Approximately 115, or one third of all our youth have participated in our activities and health screenings since June of last year. We started with camping trips and quick outdoor activities last summer, moving into the fall with basketball sponsorships for teams of 10 kids at a time. So far we have sponsored 11 teams for tournament play, and have provided equipment such as balls, air pumps, coach boards, gear bags, and even awards for players. Approximately 60 of our 6-10 year olds have engaged in our sponsored structured sport.

In each colony, we have provided a youth symposium in order to find out what they would like to see done. At the same time, we educate youth about nutrition and mental health-related issues such as drug abuse, depression, and our current gang problem. With one recent suicide, we feel that the leadership portion of our grant is par-

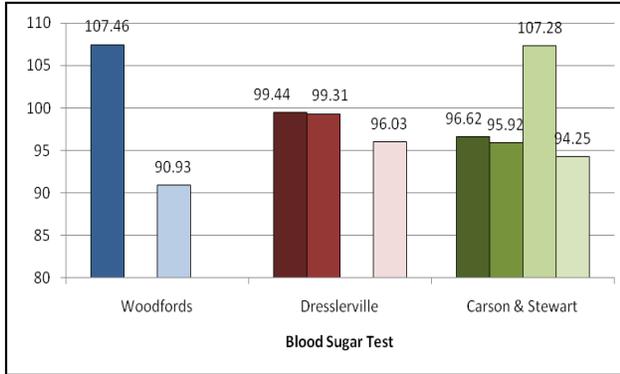
ticularly needed in order to combat these issues in our youth.



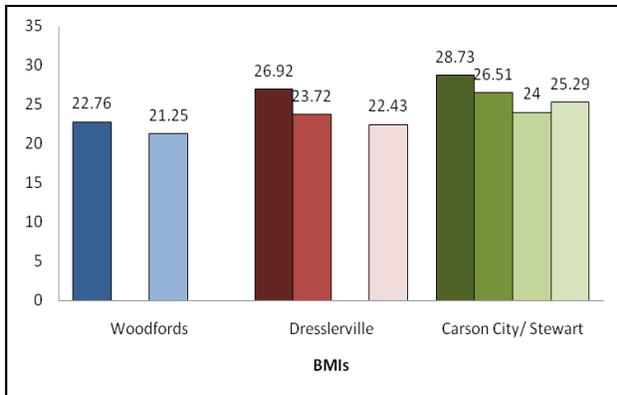
Wanda Batchelor, our Tribal Chairperson facilitates youth events so youth know that they and their concerns are being taken seriously by the tribe.

We finally received approval to hire a new HPDP Representative, who joined our team late last November. William Smokey has been a great asset in getting our program up and running this past winter/spring season. He is on the tribe's Fish and Game committee and has considerable experience in getting the kids outdoors. He has brought many fresh ideas to help our program overcome some of our challenges.

We are very happy with our success in the prevention of diabetes in our youth. We have lowered the average finger-stick blood sugar as well as the BMI. The findings from data collected have been both encouraging and enlightening. It was not hard to believe that the community in the middle of Carson City had the highest BMI's; but it was interesting to see that the most rural, Woodfords has the highest average finger-stick blood sugars. We feel this could be the life of the commodities shelf catching up with us.



Average finger stick blood sugars by community. Carson is the only community to complete all four required screenings. Noting the 107.28 for Carson was just after school started and NO recreational activities. Woodfords drop was just after a 10 day camping trip.



The 24 average BMI in the third quarter was taken after a 10 day camping trip to the Grand Canyon by 10 youth from Carson City and Woodfords. Activity does pay off- so does camping food.

We are in the planning stages of “Indigenous games”, which consist of a tournament of events that include activities such as rowing, archery and target shooting with paintball guns instead of the usual weapons. We have plans for a long-distance run, a confidence course, and a javelin hoop toss. We are looking forward to our partnership with the communities’ Recreation Departments as well as the Summer Foods Program and TANF. This program has been a win: win situation for the youth as well as the tribe.



Yukon-Kuskokwim Health Corporation, Bethel, AK Project

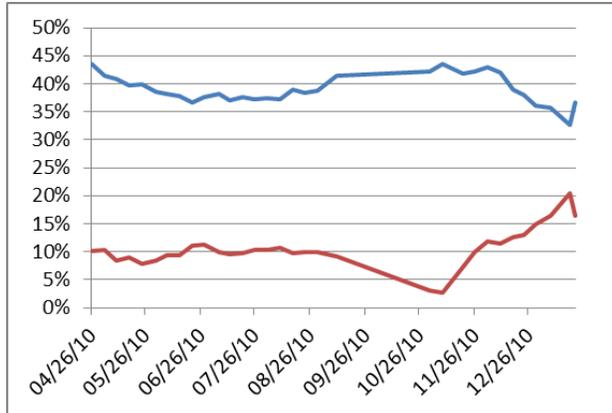
Reducing Tobacco Use in Pregnancy in YK Delta Women

The Nicotine Control and Research Department at the Yukon Kuskokwim Health Corporation (YKHC) is committed to reducing the prevalence of any tobacco use among Alaska Native women in the last 3 months of pregnancy to less than 40%.

There have been a few changes in the Nicotine Department at YKHC. Three months ago we added a new member to the team whose role has been to implement program activities designed to meet our goal. It is exciting to have this vacancy filled! It is clear that having a staff member who is actively recruiting pregnant women into the cessation program makes a difference. Since late October, when the team member was hired, we have seen an increase in the total number of women taking part in our cessation program.

Recruiting pregnant women has been a challenge because our communication with them has taken place largely over the phone. Because of the very rural nature of our area, each expectant mother must come into Bethel, the main city, for a first prenatal visit, and we have taken that opportunity to recruit more heavily for our program. Providing face-to-face tobacco education with the mothers at their first prenatal visit will hopefully allow us to increase enrollment numbers of pregnant tobacco users.

Tobacco prevalence among pregnant women in Y-K Delta



Blue line: Percent of all pregnant women who use tobacco

Red line: Percent of all pregnant women who use tobacco who entered in the cessation program.

We saw an encouraging increase in the percentage of cessation participants at the end of 2010, and at the same time we saw a dip in pregnant tobacco users overall. These changes coincided with our hiring of a staff member who consistently recruited and also was able to keep in contact with women even if they did not participate in the program.

A main priority has been to get our media campaigns up and running. We continue to record PSAs at the local radio station. The content in these PSAs specifically targets pregnant tobacco users. For the month of February we are excited to be broadcasting our first PSA totally in Yupik, the language that many of the women within our target population speak. The geographical area that our program serves is huge and radio is a great way to get our message out across the tundra.

We also see the need to raise awareness about the dangers of second-hand smoke, especially for pregnant women. While YKHC is a tobacco-free facility, it has come to our attention that many smokers light up right outside our main entrances. Using "Ciggy Butts," (our giant cigarette costume), we have reinforced the Bethel City Ordinance that requires smokers to be at least 25ft. away from any entrance or ventilation system.



Staff have been very active at Bethel Regional High School (BRHS). In weekly classes, we have been able to educate each home room on the dangers of tobacco. As we reach out to BRHS students, we are indirectly targeting women of childbearing age with tobacco education and prevention efforts.

In addition to visiting the local high school, we continue with our tobacco cessation classes at the pre-maternal home in Bethel. This housing unit for expectant mothers is a temporary home for women from across the Delta. Many of the women who attend these classes have used tobacco throughout the course of several pregnancies. This is widespread social acceptance of tobacco use while pregnant, and through our efforts we aim to slowly change that social norm.

While tobacco adversely affects every community in our state, a large disparity can be seen when looking specifically at pregnant Alaskan Native women. Tobacco counseling and education, in conjunction with targeted media efforts, are vital to overall prevention and cessation. We continue to combat tobacco use while striving to maintain a message that is also culturally relevant.

