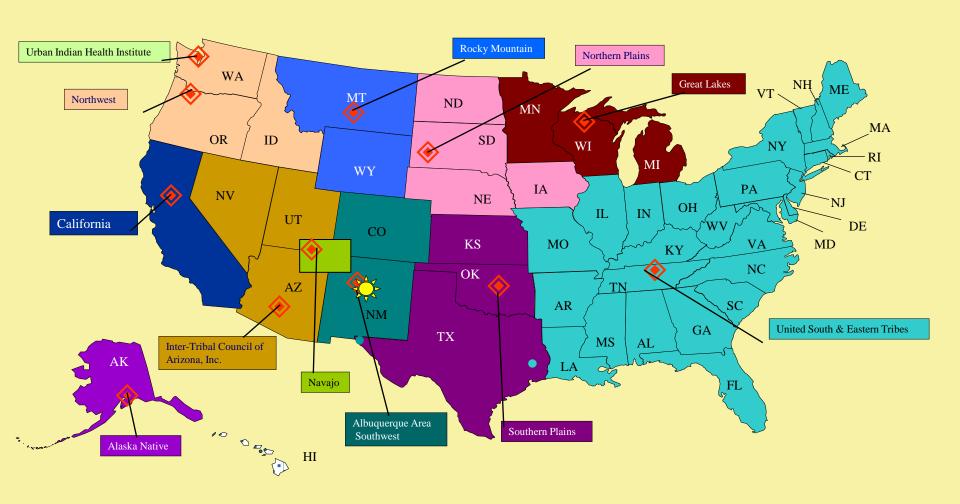


California Tribal Epidemiology Center: 2012-2013 Updates

Virginia Hedrick (Yurok/Karuk)
Outreach Coordinator



Tribal Epidemiology Centers (TECs)



Our Mission



To improve American Indian health in California to the highest level by engaging American Indian communities in collecting and interpreting health information to establish health priorities, monitor health status, and develop effective public health services that respect cultural values and traditions of the communities.

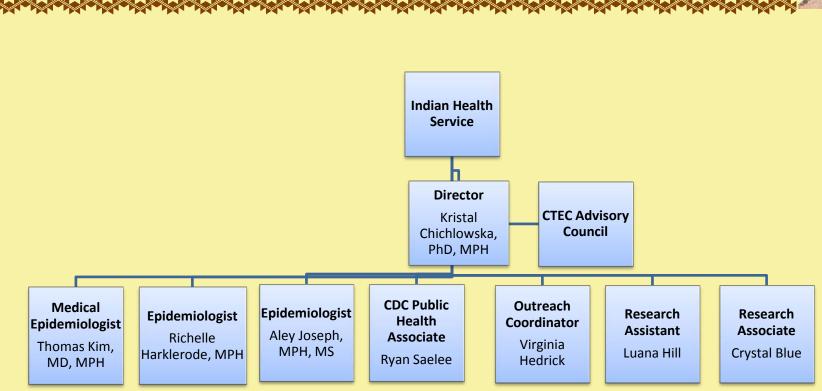
CTEC Staff



- Kristal Chichlowska, PhD, MPH, Director (Colville/Spokane)
- Thomas Kim, MD, MPH, Medical Epidemiologist
- Richelle Harklerode, MPH, Epidemiologist
- Aley Joseph, MPH, MS, Epidemiologist
- Virginia Hedrick, Outreach Coordinator (Yurok/Karuk)
- Luana Hill, Research Assistant(Dakota/Assiniboine/Paiute)
- Ryan Saelee, CDC Public Health Associate
- Crystal Blue, Research Associate (Miwok)

CTEC Model





CTEC Member IHP

- 1. Central Valley Indian Health, Inc. 13. Mathiesen Memorial

- 2. Chapa De Indian Health
- 3. Consolidated Tribal Health
- 4. Feather River Tribal Health, Inc.
- 5. Greenville Rancheria Tribal Health
- 6. Riverside San Bernardino County 17. Round Valley Indian Health Indian Health
- 7. Indian Health Center, Santa Clara
- 8. Indian Health Council, Inc.
- 9. Karuk Tribal Health Program
- 10.K'ima:w Medical Center
- 11.Lake County Tribal Health
- 12. MACT Health Board, Inc.

- 14. Northern Valley Indian Health, Inc.
- 15. Pit River Health Service, Inc.
- 16. Redding Rancheria Indian Health Service
- 18. Santa Ynez Tribal Health
 - Program
- 19. Sonoma County Indian Health
- 20. Toiyabe Indian Health Project, Inc.
- 21. Tule River Indian Health Center
- 22. United Indian Health Services
- 23. Warner Mountain Indian Health



CTEC Advisory Council



- 10 members
 - 3 Community Representatives
 - 3 Provider Representatives
 - 3 Technical Representatives
 - 1 Urban Indian Health Representative
- Meeting Quarterly, annually face to face



What is Epidemiology?



- The study of how often diseases and health issues occur in different groups of people, and why.
- Examples of epidemiology include:
 - Prevalence of asthma (24% in Als; 15% in Whites)
 - ▼ 1950: First study linking smoking to lung cancer



What We Do



- Collect and disseminate data
 - Provide analysis of health data
- Area/Tribal specific health status report
 - Community Health Profiles
- Improve surveillance databases –linkage studies
- Conduct epidemiologic studies
- Support public health emergency response
- Assist Tribes in disease control and prevention
- Provide technical assistance

Partner with Tribes, state, federal and academia:



- Work together to improve AIAN health
- Ensure data is accurate and reliable
- Increase utility/quality of health reports
- Makes efficient use of limited resources
- Increased capacity to serve AIAN tribes and IHPs

Highlighted Projects



- Tribal Behavioral Risk Factor Surveillance Survey
- Indian Health Priorities Survey
- Breast Cancer Training Grant
- Linkage Studies
- Native Oral Health Project



CA Tribal BRFSS



- CTEC is using a tribally adapted Behavioral Risk Factor Surveillance Survey tool.
- CTEC will be conducting the California Tribal BRFSS as a self administered survey.
- Collecting surveys at community gatherings and events throughout California from 2012-2013.
 - Participants must be AIAN, at least 18 years, and a California resident.
 - Participants will receive \$20 gift card incentive.

Indian Health Priorities Survey

- To determine if there has been a change in the health problems of concern, we conduct the Indian Health Priorities Survey every two years.
- Survey is available online, as a fillable PDF, as well as a paper version.
- Leaders and THP directors have been asked to encourage community members and staff to fill surveys.
- To date we have received over 250 surveys.



Breast Cancer Research Grant

- Purpose of Study:
 - To better understand the individual, community, and health system-level factors that prevent AIAN women from receiving mammograms.

State Data Linkage Projects



- To explore racial misclassification in CA state data
- Linking CA state data with the IHS Patient Registry
 - Sexually Transmitted Diseases (STDs)
 - Suicide related injuries and deaths



(Funded by the National Institute of Dental and Craniofacial Research, NIH)

Health issue:

- In California, cavities & tooth decay among American Indian/ Alaskan Native (AIAN) children 1-5 years is the highest of all racial groups surveyed.
- 47% of Native children surveyed in California were found to have ever experienced tooth decay.
 (California Dental Support Center)

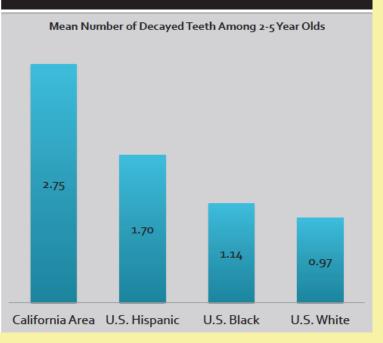
Health Issue



Key Finding #4

As depicted in the graph, AI/AN preschool children have the highest level of tooth decay of any population group in the US; about 3 times higher than white children.

AI/AN children continue to have more decay than other minority populations in the United States.



Results from the 2010 Indian Health Service Basic Screening Survey, conducted in California, compared to nationwide decay rates among pre-school children.



- Purpose of Study: To assess feasibility and acceptability of a storytelling intervention among AIAN mothers of young children & mothers-to-be.
- 3 study phases
 - Phase A: AIAN storytellers will give us feedback on the story

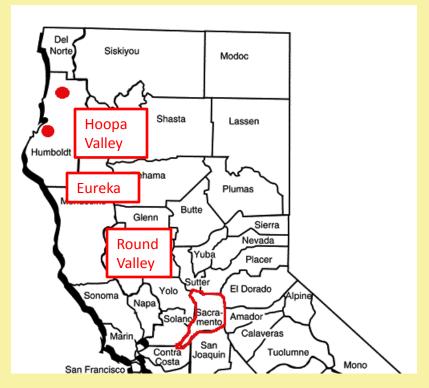




CTEC

- Phase B: Focus group with AIAN women to gain further feedback about the story
- Phase C: storytelling sessions with AIAN women; participants will answer two surveys and participate in a focus group. They will answer a final survey 6 months later.

Partnerships with Head Start Centers in Hoopa, Eureka and Round Valley





- The study protocol has been approved by the funding agency and now is awaiting CRIHB IRB approval
- A Community Advisory Board provides input on a regular basis



Reports and Products



- Data Reports
- Community Health Profiles
- Methods and Technical Reports
- Fact Sheets

http://crihb.org/ctec/reports.html



Wohl-thou Thank You!

Virginia Hedrick

virginia.hedrick@crihb.org

(916) 929-9761 ex. 1602