

N C C D P H P
GOOD HEALTH AND WELLNESS IN INDIAN COUNTRY
TRIBAL RESOURCE DIGEST

Welcome to the Centers for Disease Control and Prevention’s (CDC) tribal resource digest for the week of September 19, 2016. The purpose of this digest is to help you connect with the tools and resources you may need to do valuable work in your communities.



Site Visit San Carlos Apache Tribe

*Left to right
 Emery Tahy, Madison Fulton, Dr. Jamie Richtey, Seth Pilsk,
 CJ Randall, Gwenda Gorman, Glenda Tovar, Christina
 Iyengar, Eric Hardy, Larry Alonso, Twila Cassadore*

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Request for Photos

Please send any photos of GHWIC work (community gardens, events, team meetings, etc.) to Anisha Quiroz, myq6@cdc.gov with a short description of the photo!

Announcements

Special Diabetes Program for Indians (SDPI) Diabetes Prevention (DP) and Healthy Heart (HH) Toolkits

For more than a decade, SDPI DP/HH grantees implemented programs for diabetes prevention and cardiovascular disease (CVD) risk reduction in American Indian/Alaska Native (AI/AN) communities. SDPI DP grantees applied a proven lifestyle change intervention designed to reduce the risk of diabetes in high risk individuals, while SDPI HH grantees used an intensive case management approach to reduce CVD risk in people with diabetes. Both programs worked to meet the needs of their communities and incorporated tradition and culture into their interventions.

Based on the work and successful outcomes of the SDPI DP/HH Programs, the toolkits were developed to share grantees' successes and lessons learned. Each toolkit contains four modules that provide information on the development, implementation, and sustainability of a DP or HH program. The appendices in each of the toolkits include examples of resources and materials that were used by SDPI DP/HH grantees.

We thank the SDPI DP/HH grantees for sharing their experiences so that others will benefit. It is hoped that many communities will use the toolkits to implement their own innovative strategies to reduce diabetes and CVD risk – and create healthier futures for AI/AN people. Feel free to adapt the toolkit resources to best meet the needs of your community.

Warm regards,
Division of Diabetes

The SDPI Diabetes Prevention Toolkit offers an excellent resource for programs addressing diabetes prevention in their communities. Good Health and Wellness Program (GHWIC) programs, in particular, which are addressing short-term outcome 4.3 (Increased proportion of high risk adults who participate in CDC-recognized Diabetes Prevention Programs) and plan to report on associated performance measures, may find the Toolkit helpful. Links to the CDC-recognized program are found in the toolkit at [here](#).

Please let your Project Officer or Kai Stewart, Larry Alonso, or Kavitha Muthuswamy of the Division of Diabetes Translation know if we can link you to more information about the CDC-recognized program.

CDC Vital Signs

Dear Colleague,
The CDC Vital Signs series addresses a single important public health topic each month. This month's issue focuses on hypertension medication adherence among Medicare Part D beneficiaries.

Hypertension is one of the leading causes of heart disease, stroke, kidney disease, and death in the United States. About 75 million Americans—nearly one in three adults—have hypertension, but only about half have the condition under control (blood pressure below 140/90 mmHg). Medications, along with lifestyle changes, can successfully lower blood pressure and decrease the risk of heart disease and stroke.

This e-mail contains copies of Vital Signs materials, including the Morbidity and Mortality Weekly Report (MMWR) Early Release, a graphic fact sheet and website, a media release, and social media tools. Please share the Vital Signs information broadly with your colleagues and partners.

Key points in the Vital Signs report include:

- Medications don't work if people don't take them. About 5 million people—one in four adults ages 65 or older with Medicare Part D with a prescription for blood pressure medication—are not taking it as directed.
- Medication adherence varies by race and ethnicity. The percent of Medicare Part D enrollees not taking their blood pressure medicine is higher among certain race/ethnic groups. This puts them at higher risk of heart attack, stroke, kidney disease, and death.
- Medication adherence varies by geographic location. The southern United States has the highest rates of nonadherence. The report includes county and state-level maps showing the areas with the lowest rates of adherence, as well as resources to calculate adherence rates in your county or state.

The materials and tools in this edition of Vital Signs can help guide health care systems, including healthcare professionals, practices, community health workers, pharmacies, hospitals, and insurers, to work with patients with high blood pressure to make taking medicine easier.

Continued on pg. 3

Visit the [Vital Signs Web page](#) to find the Vital Signs fact sheet, [MMWR Early Release](#), and other materials. You can also take advantage of CDC's [social media tools](#), such as the Vital Signs buttons and e-mail updates. In addition, you can use our [content syndication service](#) to have Vital Signs sent directly to your own website for display. You can also find more information about medication adherence, as well as resources and tools, on the Million Hearts® medication adherence Web page.

Sincerely,

Cathleen Walsh, DrPH, MSPH

Acting Director

Division for Heart Disease and Stroke Prevention

National Center for Chronic Disease Prevention and Health Promotion

Centers for Disease Control and Prevention



"The Affordable Care Act: What Native Youth Need to Know" Video and Toolkit Debut

Today, at the largest National Tribal Nations Health Conference to date, the National Indian Health Board is especially excited to debut "The Affordable Care Act: What Native Youth Need to Know" video. The video follows future leaders of Indian Country as they experience Washington D.C. at the NIHB Youth Summit, interact with members of Senate, leading policy officials, and learn about the Affordable Care Act and health care for Indian Country. The film then follows several of these young leaders to their home communities where they reflect on the lessons they learned in Washington D.C. and the importance of Tribal health care reform for themselves and their communities.

The video stresses the importance of health insurance coverage for American Indian and Alaska Native youth because as Native youth from Ohkay Owingeh Pueblo, Ms. Taylor Moya, stated in front of an audience of over 800 Tribal leaders from across the nation, "if we don't do it for ourselves, who's going to do it for us?"

[Learn more.](#)

Articles

NCUIH Receives Award to Support Urban Indian Health Programs

The Indian Health Service, Office of Urban Indian Health Programs (OUIHP) has awarded a cooperative agreement to the National Council of Urban Indian Health (NCUIH) to act as an education and research partner for OUIHP and urban Indian organizations (UIO) funded under the Indian Health Care Improvement Act through public policy, research and data, structured training and technical assistance, and national representation. This program will support UIO to fulfill their mission to provide healthcare services to an estimated 80,000+ American Indian/Alaska Natives (AI/AN) in urban settings in 21 states and more than 100 counties across the country.

Read more [here](#).

Webinars

Tribal Youth Suicide Prevention: Current Perspectives

This webinar is designed to build knowledge of suicide and prevention activities in Indian Country and increase competency to address this problem. Presenters will provide up-to-date information on suicide prevention activities, to include best practices and innovative strategies. An overview of suicide and prevention efforts in Indian Country will set the stage, and information on culturally-relevant prevention, treatment, and rehabilitation activities will be discussed as well as current efforts to address suicide prevention for Native Americans/Alaska Natives.

Read more [here](#).

When: September 22, 2016, 1:00-2:30pm EDT



American Indian Youth Summer Medical Wellness Camp

Obesity has become a major health problem among American Indians. Lifestyle risk behaviors include nutrient-poor food and drink choices, larger food portions, and physical inactivity. This program will describe an American Indian

Youth Summer Medical Wellness Camp that addresses the growing number of Arizona's Indian youth who are at risk for or who have been diagnosed with type 2 diabetes. Components of the Camp that will be explained include an intensive week-long experience focused on healthy eating, exercise, nutrition education and fun! All camp activities take place in an American Indian context, deeply rooted in culture. Participants also receive in-depth physical assessments to track progress and personalize pathways to health. This is part of a four-part [series](#).

Learn more [here](#).

When: October 11, 2016, 12:00pm PDT

Trainings and Conferences

National Conference on Tobacco or Health

The National Conference on Tobacco or Health (NCTOH) is one of the largest, long-standing gatherings of the United States tobacco control movement. It attracts a diverse set of public health professionals to learn about best practices and policies to reduce tobacco use—the leading preventable cause of disease and death in the United States. [Learn more](#)

When: March 22-24, 2017

Where: Austin, TX



2016 14th American Indian Health Research Conference

The annual American Indian Health Research Conference provides a daylong event with national speakers, researchers, students, and community members. This is an opportunity to learn about how to do research with American Indian communities, what research needs to be done in American Indian communities, for students to present their research with American Indians, and opportunities to partner between communities, tribal colleges, and researchers.

[Learn more](#)

When: October 20, 2016

Where: Alerus Center, Grand Forks

Funding Opportunities

Assistance to Firefighters Grant

Offers grants to fire departments and EMS organizations for equipment, training, personnel wellness programs, capital funding, and collaboration efforts. The primary goal of the Assistance to Firefighters Grants (AFG) is to enhance the safety of the public and firefighters with respect to fire-related hazards by providing direct financial assistance to eligible fire departments, nonaffiliated Emergency Medical Services (EMS) organizations, and State Fire Training Academies (SFTA) for critically needed resources to equip and train emergency personnel to recognized standards, enhance operations efficiencies, foster interoperability, and support community resilience. Read more [here](#).

Geographic coverage: Nationwide

Application Deadline: November 18, 2016

Echoing Green Fellowships

Echoing Green Fellowships provide seed-stage funding and strategic assistance to emerging leaders driving positive social change around the globe. Echoing Green Fellows reject the status quo and drive positive social change around the world. While their geographies and approaches are as varied as the problems they are working to solve, their passion and deep commitment are the common threads between this highly-engaged community of leaders. [Learn more](#). Still [more](#)

Deadline: October 25, 2016

Employment Opportunities

Albuquerque Area Indian Health Board, Inc.

Position: Staff Epidemiologist
GENERAL DESCRIPTION: This position reports directly to the Director of the Albuquerque Area Southwest Tribal Epidemiology Center (AASTEC) located at the Albuquerque Area Indian Health Board (AAIHB). The Epidemiologist's primary responsibility is to provide a wide range of epidemiologic assistance to AASTEC. This will include design, implementation and evaluation of core epidemiologic functions such as surveillance, study design, and disease investigation in collaboration with American Indian Tribes in New Mexico, Colorado and Southwest Texas.

More information including major duties and qualifications are posted [here](#).

Deadline: September 30, 2016

Contact Information

National Center for Chronic Disease Prevention and Health Promotion

Office of the Medical Director
4770 Buford Highway, MS F80
Atlanta, GA 30341
(770) 488-5131

<http://www.cdc.gov/chronicdisease/index.htm>

The digest serves as your personal guide to repositories of open and free resources where you can find content to enrich your program or your professional growth. Please note that CDC does not endorse any materials or websites not directly linked from the CDC website. Links to non-Federal organizations found in this digest are provided solely as a courtesy. CDC is not responsible for the content of the individual organization web pages found at these links. If you have comments or suggestions about this weekly update, please email Anisha Quiroz at myq6@cdc.gov with the words "TRIBAL DIGEST" in the subject line.