



Tribal Health Profiles for Northwest Tribes

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The Improving Data & Enhancing Access (IDEA-NW) Project
 Northwest Tribal Epidemiology Center | Northwest Portland Area Indian Health Board

Health Data: An Essential Tool for Tribes

- Community health status assessment
- Identifying areas of improvement
 - Best practices, sharing strategies
- Grant writing & tribal advocacy
- Allocating limited financial & human resources
 - Where to focus health & research efforts
 - Funding/implementation of programs & interventions
- Participation in health research projects
- Education & community awareness

Tribal/Community Health Profiles (THPs)

- Comprehensive, many health topics
 - Specific to tribe(s) or tribal/community areas
- Examined other organizations' reports for guidance

NW Tribal Epidemiology Center

Mission of the EpiCenter: Collaborate with Northwest Tribes to provide health-related research, surveillance, and training to improve the quality of life of American Indians and Alaskan Natives (AI/ANs).

Obstacles: Finding High-Quality Data

Obstacles	Solutions
<ul style="list-style-type: none"> • Small populations & sample sizes <ul style="list-style-type: none"> – Low statistical precision • AI/AN poorly/inaccurately represented in public datasets <ul style="list-style-type: none"> – Misclassification, sampling error, participation rates • Heterogeneous populations <ul style="list-style-type: none"> – Mix of tribes, cultures, communities, and geographic areas – Difficult to generalize • Tribal data ownership & data sharing 	<ul style="list-style-type: none"> • Unique access to health datasets at EpiCenter <ul style="list-style-type: none"> – Long-standing positive relationship with Tribes & IHS – IDEA-NW: in-house race-corrected versions of state registries • Unique capacity to analyze & interpret data at EpiCenter <ul style="list-style-type: none"> – Biostatisticians from multiple projects

Obstacles: Organizational

Obstacles	Solutions
<ul style="list-style-type: none"> • No central budget <ul style="list-style-type: none"> – Effort spread across EpiCenter projects, IDEA-NW taking the lead (data-centered project) • Number of reports to produce at various geographic levels <ul style="list-style-type: none"> – State-level (3) – CHSDA-level for OR, WA, and ID – 43 NW tribes (available to the tribe only) 	<ul style="list-style-type: none"> • EpiCenter-wide collaboration across projects <ul style="list-style-type: none"> – Regular planning meetings – Balancing analysis time, biostatistician workloads

Obstacles: THP Content & Layout

Obstacles	Solutions
<ul style="list-style-type: none"> • Health topic & indicator selection <ul style="list-style-type: none"> – Identifying what is meaningful/important to tribes – Balancing information needs with information availability 	<ul style="list-style-type: none"> • Tribal feedback throughout process <ul style="list-style-type: none"> – Tribal Health Priorities Survey (April 2013) – QBM roundtable discussion on WA draft report & feedback survey (October 2013)


Tribal Feedback EpiCenter Health Priorities Survey

- Administered at April 2013 QBM at Swinomish Tribe
 - Pre-loaded on NPAIHB delegates' iPads at QBM
- Questions: health priorities, tribal health profile preferences, FWA, data sharing, & data literacy at Tribes
- Guide decisions on THP health topic/indicator content
- Survey Monkey & paper copies, w/ email follow-up
 - 28 total respondents, 26 answered questions

Tribal Feedback Results EpiCenter Health Priorities Survey

- Electronic (PDF), as well as printed full report & shorter summary report preferred
- Organize profiles by health topic, in rough order of priority for NW Tribes
- Include numerical & graphical representations of data
- Include comparisons
- Need more training on research & statistics/data interpretation

Tribal Feedback: Draft WA State Profile



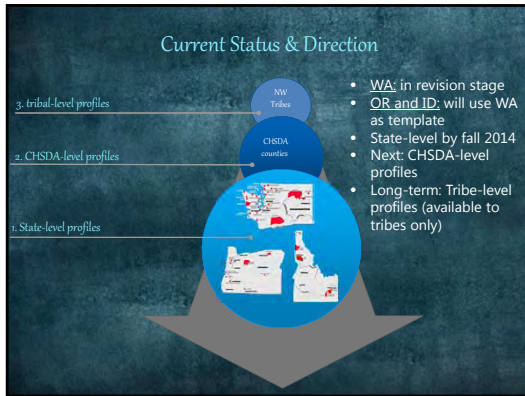
- October 2013 QBM at Lummi Tribe
- Catered lunchtime roundtable discussion
- Post-discussion feedback survey

Tribal Feedback 2013 Roundtable Discussion

- Guide revisions of draft state-level WA profile
- Invitation letter (NPAIHB mailout)
- Half-page invitations/agendas distributed at QBM
- Draft WA reports distributed to delegates at beginning of QBM
- Pre-assigned facilitators, note-takers, microphone runners
- Catered lunch (incentive)
- Paper copies & Survey Monkey, w/ email follow-up
 - Only 12 total respondents, representing 9 tribes in OR, WA, and ID

Tribal Feedback Results 2013 Roundtable Discussion

Likes	Room for Improvement
<ul style="list-style-type: none"> • Overall positive response <ul style="list-style-type: none"> – Informative, Useful, Valuable, Exciting • Organization by health topic, length, amount of text & graphics • Included major health issues important to Tribe/community • Most useful for identifying health priorities & grant writing • Eager for future reports for other geographic areas 	<ul style="list-style-type: none"> • Inconsistent data years • Some topics need more info <ul style="list-style-type: none"> – Healthy lifestyles/environments, substance abuse, access to care, diabetes • Trend data over time/years • <i>Obstacles:</i> Data availability & analysis time



Thank you!

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