



News from the *EpiCenter*

Northwest Tribal Epidemiology Center

Northwest Portland Area Indian Health Board

January 2002

This Issue's Feature Project

Toddler Obesity & Tooth Decay Prevention Project

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An Exciting New Intervention Project to Reduce Toddler Obesity & Tooth Decay

The Facts on Sugared Beverages, Tooth Decay, Obesity, & Our Children

Did you know that people living in the United States consume more sugared beverages, such as Pepsi and Sunny Delight, than any other population in the world? This extremely high consumption rate has serious health implications. First, sugared beverages are replacing nutritious beverages, such as water, milk, and fruit juice, in our diets. Second, this replacement of nutritious beverages with soft drinks and other sugared beverages has coincided with increases in childhood obesity and early childhood caries (tooth decay).

- Fact:** American Indians experience the highest rates of childhood obesity and early childhood tooth decay of any United States population.
- Fact:** Obesity is a major risk factor for type 2 diabetes
- Fact:** Type 2 diabetes is now occurring in our Indian youth as well as adults

These health implications are particularly damaging to minority groups, such as American Indians and Alaska Natives, who are affected disproportionately by health disparities. In fact, American Indian youth experience the highest rates of childhood obesity and early childhood tooth decay of any United States population. Obesity is a major risk factor for type 2 diabetes, which is now occurring in our youth as well as in adults. Reducing the consumption of sugared beverages is one important starting point for improving the health of our communities.

An Exciting New Project

Please welcome a new project out of the Northwest Tribal Research Center, "The Toddler Obesity and Tooth Decay Project, informally coined as the TOIs Project. The overall aim of the TOIs Project is to test whether community and family-based interventions can reduce the consumption of soft drinks and other sugared beverages in expectant mothers and their offspring, and extend the length of breast-feeding. The TOIs project will also test whether such behavioral changes can impact childhood obesity and tooth decay. The project is innovative in its focus on a

single aspect of diet—beverage. If successful, the intervention would have great significance for the many tribal communities facing these problems.

Community Recruitment

The project will recruit four intervention communities among the Northwest American Indian tribes. Two of the communities will each receive a community-based intervention, and a WIC/MCH-based intervention. The other two communities will each receive a community, WIC/MCH, and family-based intervention. These interventions will be designed under the consultation of participating tribes. Project staff began recruiting communities this fall and will continue to recruit communities throughout the month of January. It is preferred that intervention communities have a birth cohort that is greater than 65 births per year.

As part of the site selection process, project staff will be reviewing letters of interest from tribes and setting telephone conferences with interested tribes during January and February 2002.

Is Your Community Interested in Participating?

Please contact:

Tam Lutz, Project Director
Julia Putman, Project Assistant,
(503) 228-4185, or tlutz@paihb.org, or
submit a letter of interest to:
NPAIHB, TOTS Project
527 SW Hall Street, Suite 300
Portland, Oregon 97201



Project Investigators:

Tam Lutz (Lumli), MPH, MHA, Dr. Cheryl Ritenbaugh, Dr. Njeri Karanja, and Dr. Gerard Marrow

Projects of *The EpiCenter*

The EpiCenter's Goals

- Provide accurate, timely, and useful health information to Northwest tribes on their health status
- Provide advocacy and technical assistance for Northwest tribes to achieve the health status objectives of the Indian Health Care Amendments

Project Staff:

Mary Brickell (Grand Ronde), RIMS Support Specialist
Lynn DeLorme, (Turtle Mountain Chippewa), MPA: HA,
Technical Writer & IRB Coordinator
Joe Finkbonner (Lummi), RPh, MHA, Director
Chandra Wilson (Klamath), Project Assistant

The following is a list of current *EpiCenter* projects that includes project goals and staff.

Fetal Alcohol Syndrome Surveillance Project

- Assess the community level issues related to fetal alcohol syndrome (FAS) among the Northwest tribes
- Reduce the level of FAS through effective programs

Project Staff:

Kathryn Alexander (Tuscarora Mohawk), Project Assistant
Carolyn Hartness, BA, FAS Contractor
Suzie Kuerschner, BA, FAS Contractor

Indian Community Health Profile Project

- Provide Indian communities with a feasible method of assessing their overall health status and monitoring that health status over time

Project Staff:

Tam Lutz (Lummi), MHA, MPH, Project Specialist
Paul Stehr-Green, DrPH, MPH, Consulting Epidemiologist

Northwest Tribal Dental Support Center

- Provide clinical and preventive program support
- Design and implement an area-wide surveillance system
- Measure progress toward achieving the Oral Health Objectives of Health People 2010

Project Staff:

Kathryn Alexander (Tuscarora Mohawk), Project Assistant
Bonnie Bruerd, DrPH, MPH, Prevention Support Contractor
Jeff Hagen, DDS, MPH, Clinical Support Contractor
Kathy Phipps, DrPH, Oral Health Surveillance Contractor
Dee Robertson, MD, MPH, Acting Project Director
James Toothaker, DDS, MPH, Research Support Contractor

Northwest Tribal Health Research Center

- Toddler Obesity & Caries Prevention Project
- Evidence-Based Medicine Project
- Training Project
- Child Safety Seat Promotion Project

Project Staff:

Tom Becker, MD, PhD, Program Director
Dee Robertson MD, MPH, Principal Investigator

Northwest Tribal Infant Mortality Project

- Develop a clearer understanding of the factors involved in the recently reported reduction in infant mortality among Northwest AI/AN
- Examine current infant mortality trends

Project Staff:

Jim Gaudino, MD, MS, MPH, Maternal and Child Health Medical Epidemiologist
Dee Robertson, MD, MPH,
Consulting Medical Epidemiologist

Northwest Tribal Registry Project

- Determine the extent of American Indian and Alaskan Native (AI/AN) racial misclassification
- Improve the understanding of AI/AN morbidity and mortality in smaller communities
- Provide a valid way of measuring racial health disparities

Project Staff:

Tom Becker, MD, PhD, Consulting Medical Epidemiologist
Dee Robertson, MD, MPH, Acting Registry Manager

Stop Chlamydia! Project

- Obtain comprehensive information about chlamydia infection within Northwest AI/AN communities
- Provide technical assistance to support tribal sexually transmitted disease prevention efforts

Project Staff:

Shawn Jackson (Klamath), BS, Project Specialist

Western Tribal Diabetes Project

- Support Northwest and California diabetes programs with their existing special diabetes grants
- Assist Northwest and California tribes in developing applications for the expanded Special Diabetes Funds projects

Project Staff:

Sharon Fleming (Choctaw of Oklahoma), AAS,
Project Assistant
Kelly Gonzales (Cherokee), MPH, Project Director
Ed Lutz (Lummi), Information Systems Specialist
Vacant, Project Coordinator
James Oliver (Lummi), RD, Northwest Project Specialist
Penny Schumacher, BS, Northwest Training Specialist
Jennifer Olson, MS, California Project Specialist
Mike Severson (Turtle Mountain Chippewa), BS,
California Training Specialist

What is Fellowship?

According to the American Heritage College Dictionary, fellowship is either a close association of friends or of equals sharing similar interests or a financial grant made to a fellow in a college or university. The Northwest Tribal Health Research Center (NIHRC) can fulfill both definitions of the word through its American Indian and Alaskan Native (AI/AN) Fellowship Program. NIHRC is looking for AI/AN undergraduate, graduate, and post-doctoral students who are interested in a fellowship position at Oregon Health Sciences University or the University of Washington. The fellowships are expected to begin in October 2001.

What Experience Will an NTHRC Fellowship Offer?

That's up to you

NIHRC has a short list of requirements for its fellows, but a long list of innovative and flexible tools that you can use to tailor your fellowship experience.

First, the requirements

Each fellow will spend two years at one of the two premier medical and public health research institutions of the Pacific Northwest: Oregon Health Sciences University in Portland, Oregon, or the University of Washington in Seattle, Washington. Although you will choose one school as your "home base," you will attend frequent seminars and workshops at the other school. These seminars will

be developed to help foster your research skills. At your home base, you will work with your mentor on a project in biomedical, clinical, behavioral, or population-based research.

Second, the options

You will have the freedom to tailor your fellowship experience to your experiences, career plans, and research interests. NIHRC has obtained the commitment of a number of potential mentors at NPAIHB, Oregon Health Sciences University, and the University of Washington who are AI/AN or who have extensive experience in working with tribal communities. Areas of expertise for some of our mentors include diabetes and nutritional epidemiology, mental health issues, cardiovascular disease, injury prevention, and Indian youth suicide prevention. Want to focus your research on cancer epidemiology? NIHRC can match you with a mentor who specializes in that field. Need to focus on statistics? You will be able to take courses in fields that interest you or in fields that need improvement. Want to attend a summer epidemiology institute? As an NIHRC Fellow, NIHRC will be able to provide you with this type of experience to help further your career in research.

You have the flexibility to decide

For further information on the NIHRC American Indian and Alaskan Native Fellowship Program, please contact *The EpiCenter* at (503) 228-4185. Additionally, a copy of the application will soon be available at the NPAIHB website at www.npaihb.org.



Kelly Gonzales, (Cherokee), MPH



Francine Romero (Jemez Pueblo), PhD, MPH



Northwest Tribal
Epidemiology
Center Projects and
Activities

Community Health
Training

Health Status Objectives

Indian Community Health
Profile Project

Northwest REMS Cancer
Assessment Project

Northwest Tribal Dental
Support Center

Northwest Tribal Fetal
Alcohol Syndrome Project

Northwest Tribal Health
Research Center

Northwest Tribal Infant
Mortality Project

Northwest Tribal Registry
Project

REMS Support and
Training

REMS Surveillance
Capacity Project

Stop Chlamydia! Project

Western Tribal Diabetes
Project

New *EpiCenter* Director Chosen


On January 1, 2002, Joe Finkbonner (Lummi), RPh, MHA, officially became the Director of the Northwest Tribal Epidemiology Center (*The EpiCenter*). Joe accepted the position in mid-December, and has been introduced to the NPAIHB staff. Joe is an enrolled member of the Lummi Tribe. He received both his Bachelor of Science and Masters degrees from the University of Washington. He worked for several years as a pharmacist in the Providence Hospital system in Seattle before returning home to Lummi in 1995.

From 1995–2000 Joe was the CEO and Health & Social Services Director for the Lummi Tribe. He worked on a variety of local, state, and regional Indian Health issues during his tenure at Lummi. Governor Gary Locke appointed Joe to the State Board of Health in October of 1998, and he served in the pivotal role of Chair of the American Indian Health Commission for Washington State. He is widely known and widely respected among Northwest tribal communities and among public health officials in Washington.

It was the strong reputation of both the NPAIHB and *The EpiCenter* that attracted Joe to the position: "I want to build upon the foundation that is already in place. I believe that the research and surveillance activities taking place

at *The EpiCenter* should bring enhanced services and value back to the communities that provided the data. I am looking forward to working with each and every Tribal community in the Portland Area to ensure that they directly benefit from our projects and activities," said Joe.

Commenting on the hiring of Joe as the new Director of *The EpiCenter*, Ed Fox, PhD, Executive Director, stated, "I believe we have greatly solidified our administration at NPAIHB by hiring Joe Finkbonner." The replacement of Dr. Dee Robertson, who vacated the position after retiring from Indian Health Service, was one of the first assignments given to Ed when he began as the Executive Director for NPAIHB. Dee will continue to work with NPAIHB and *The EpiCenter*, but he will be a direct employee of NPAIHB instead of an IHS assignee. "Dee will be an important element in the transition to the new Director," stated Ed.

Please congratulate and welcome Joe Finkbonner as the new Director of *The EpiCenter* at NPAIHB. 



Joe Finkbonner (Lummi), RPh, MHA, *The EpiCenter* Director

Northwest Tribal Epidemiology Center

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