

# News from the *EpiCenter*

Northwest  
Tribal  
Epidemiology  
Center

Northwest  
Portland Area  
Indian Health  
Board

July 2002

## This Issue's Feature Project

Western Tribal  
Diabetes Project

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## Western Tribal Diabetes Project Diabetes Screening Toolkit

In an effort to reduce the burden of disease from diabetes, many tribal communities have either planned or started community-based screening projects. Recently, 43 out of 44 Northwest tribes wrote screening activities into their special diabetes grants. To assist the tribes in reaching their goal of successfully developing and implementing community-based diabetes screening programs, the Western Tribal Diabetes Project (WTDP), Portland Area Indian Health Service (IHS), and Diabetes Coordinators representing several Northwest tribes are developing the Diabetes Screening Toolkit (DST). The purpose of the DST is to give Northwest communities the knowledge, skills, and tools they need to assess their capacity to create a high quality diabetes screening program.

Recent developments in the diabetes field give us hope that tribes can potentially prevent or delay the onset of diabetes. The Diabetes Prevention Project (DPP), a large study involving 3234 adults who were identified as high-risk for developing diabetes, found that 58% of diabetes cases were prevented with a moderate change in diet and exercise. Of note, the DPP study included a number of different ethnic groups, including 171 American Indians. In response to the results of the DPP study, the Department of Health and Human Services (HHS) and the American Diabetes Association (ADA) now recommend clinic-based screening of overweight people age 45 years and older. However, since diabetes is more common in American Indian and Alaskan Native (AI/AN) communities, and the number of AI/AN young people with diabetes continues to grow, tribal communities may need to follow more aggressive community-based screening guidelines. The DST contains community-based screening recommendations designed specifically for high-risk AI/AN communities. These guidelines are intended to give tribes clear and useful information on how to proceed if they do decide to implement diabetes screening programs.

The DST is a step-by-step guide that outlines the essential elements of a high quality diabetes-screening program, leaving the specifics up to each individual tribe. The DST consists of five sections: (1) Readiness Assessment, (2) Preparation, (3) Implementation, (4) Follow-up, and (5) Program Development. Tribal and IHS staff can follow the steps within each section in order to develop and implement an ongoing screening program that best meets the unique needs of their communities. The readiness assessment section provides information to help people determine if they are ready to screen, and what type of screening program they can provide with the resources they have. The preparation, implementation, and follow-up sections outline the steps necessary to develop and implement a community based screening program. The development section provides information about resources tribes can access in order to obtain the funding they need to continue or increase the scope of their diabetes screening program. The DST also contains tools such as databases, templates, and forms that Diabetes Coordinators and IHS staff members can individualize for their screening program. The DST is based on current research, guidelines, standards of care, and community input.

Later this summer the workgroup will have a final draft of the Toolkit ready for evaluation by selected Northwest diabetes programs, program staff from the IHS National Diabetes Program, and the IHS Area Diabetes Coordinators. The WTDP staff plan to disseminate this Toolkit early this fall to Northwest tribes and host a workshop that will guide programs on the use of the Toolkit. James Oliver, RD, Northwest Regional Specialist for WTDP, and Donnie Lee, MD, Portland Area IHS Area Diabetes Consultant, will be available to provide limited technical assistance to Northwest Indian health care programs planning to conduct community-based diabetes screening.

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# 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

*Staff:* Joe Finkbonner RPh, MHA, (Lummi Nation), Director  
Mary Brickell (Grand Ronde), RPMS Support Specialist  
Lynn DeLorme MPA: HA, (Turtle Mountain Chippewa),  
Technical Writer & Portland Area IHS IRB Coordinator  
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 incidence of FAS through effective programs
- Improve services to children and families affected by FAS

*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

*Staff:* Tam Lutz MPH, MHA, (Lummi Nation), Director  
Paul Stehr-Green DrPH, MPH, Consulting Epidemiologist  
Donald Weeks (Lummi Nation), Project Assistant

## **Northwest Tribal Behavioral Risk Factor Surveillance System Project**

- Use locally relevant data for establishing health promotion and disease prevention programs
- Improve the quality of life and to increase the health status of Northwest tribal members

*Staff:* Francine Romero PhD, MPH, (Jemez Pueblo), 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

*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 Elder Diet & Nutrition Project**

- Formulate a dietary survey that will accurately and reliably assess dietary intake of elderly American Indian populations in the Northwest

*Staff:* Francine Romero PhD, MPH, (Jemez Pueblo), Epidemiologist  
Deb Gustafson PhD, Nutrition Epidemiologist

## **Northwest Tribal Health Research Center**

- Toddler Obesity & Caries Prevention Project  
(Tam Lutz MPH, MHA, Lummi Nation, Trainee)
- Evidence-Based Medicine Project
- Native Researcher Training Project
- Child Safety Seat Promotion Project  
(Joe Finkbonner RPh, MHA, Lummi, Investigator )

*Staff:* Tom Becker MD, PhD, Program Director  
Dee Robertson MD, MPH, Principal Investigator  
Luella Azule BS, (Yakama/Umatilla), Coordinator

## **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

*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 for AI/AN health disparities

*Staff:* Tom Becker MD, PhD, Consulting Medical  
Epidemiologist  
Emily Puukka MS, 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

*Staff:* Shawn Jackson BS, (Klamath), 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

*Staff:* Kelly Gonzales MPH, (Cherokee), Project Director  
Sharon Fleming AAS, (Choctaw of Oklahoma),  
Regional Project Assistant  
Crystal Hall-Denny (Makah), National Project Assistant  
Wendi Johnson BA, National Project Specialist  
Jennifer Olson MS, California Regional Project Specialist  
Mike Severson BS, (Turtle Mountain Chippewa),  
California Regional Training Specialist  
James Oliver RD, (Lummi), Regional Project Specialist  
Penny Schumacher BS, Regional Training Specialist

# NTHRC Fellowship Program

The Northwest Tribal Health Research Center (NTHRC) 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. NTHRC 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. 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 also attend 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.

You will have the freedom to tailor your fellowship experience to your experiences, career plans, and research interests. NTHRC 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.

For further information on the NTHRC American Indian and Alaskan Native Fellowship Program, please contact Luella Azule, NTHRC Coordinator, at (503) 228-4185 or e-mail: [lazule@npaihb.org](mailto:lazule@npaihb.org). Additionally, NTHRC applications are available on our website at [www.npaihb.org](http://www.npaihb.org). Simply scroll down to [XI Health Promotion & Disease Prevention](#), then [Northwest Tribal Health Research Center](#), then select [Training Project](#), then select any of the three NTHRC applications: Summer Internship Application, Pre-Doctoral Fellowship Application, or the Post-Doctoral Fellowship Application.

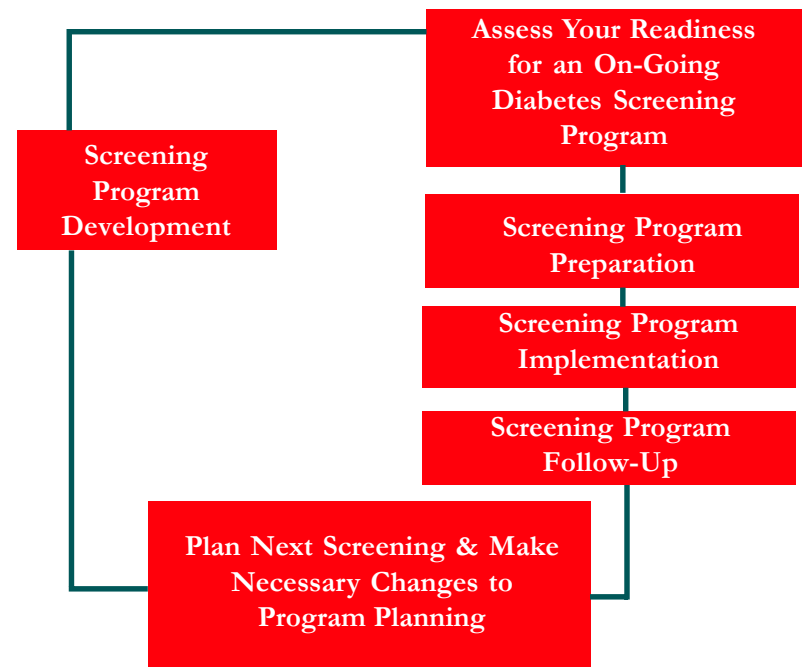


M'Kya Wilson & Snoopy

# Western Tribal Diabetes Project Diabetes Screening Toolkit cont.

## Steps Your Setting Can Take to Develop & Implement an On-Going Screening Program

- (1) **Readiness Assessment**
  - Review Screening Considerations
  - Perform Capacity Assessment
- (2) **Screening Program Preparation**
  - Assign Staff Roles and Responsibilities
  - Review Screening Recommendations for AI/AN Communities
  - Identify a Target Group
  - Choose a Screening Site
  - Prepare for Data Collection
  - Obtain Approval from the Institutional Review Board
  - Obtain Approval for Screening Program
  - Recruit Participants and Notify Screening Site Staff
  - Prepare for Screening Program Evaluation
- (3) **Screening Program Implementation**
  - Pre-Screening Diabetes Education and Orientation
  - Collect Participant Information
  - Implement Level I Screening
  - Implement Level II Screening
  - Implement Level III Screening
  - Debrief with Participants
- (4) **Screening Program Follow-Up**
  - Perform Data Entry
  - Perform Data Analysis and Develop Data Reports
  - Follow-up with Participants
  - Evaluate Screening Program
  - Present Results to Stakeholders
  - Plan Next Screening and Make Necessary Changes to Program Planning
- (5) **Screening Program Development**
  - Potential Funding Sources for Diabetes Screening Programs



**EpiCenter  
Projects**

Fetal Alcohol Syndrome  
Surveillance Project

Indian Community Health  
Profile Project

Northwest Tribal  
Behavioral Risk Factor  
Surveillance System  
Project

Northwest Tribal Dental  
Support Center

Northwest Tribal Elder  
Diet & Nutrition Project

Northwest Tribal Health  
Research Center

Northwest Tribal Infant  
Mortality Project

Northwest Tribal Registry  
Project

Stop Chlamydial Project

Western Tribal Diabetes  
Project

**New EpiCenter Staff Chosen**

Donald Weeks is an enrolled member of the Lummi Nation. Donald worked for the Lummi Nation in a variety of capacities. Previously, he served in an internship position with Lummi, while completing his two-year degree, where he was involved in the implementation of a Constitution Committee Survey.

Donald also worked as an Administrative Assistant for Semiahmoo Restoration where he gathered both legal and historical information on desecrated sites.

He is a Veteran of the Armed Forces and served four years in the U.S. Navy.

Currently, Donald is the Project Assistant working with Tam Lutz, MPA, MPH, (Lummi) on the Indian Community Health Profile Project.

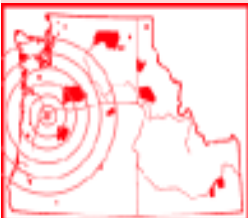


**Donald Weeks (Lummi),  
Indian Community Health Profile  
Project Assistant**



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