# Sault Tribe's Strategies for Raising Healthy Anishinaabeg Youth

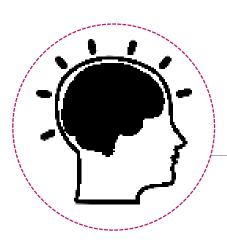


NIHB TRIBAL PUBLIC HEALTH SUMMIT, ANCHORAGE, AK JUNE 7, 2017

> Shannon Laing, Michigan Public Health Institute Lisa Myers, Sault Tribe Community Health

## Session Description

Results from the Sault Tribe's community assessment identified several issues affecting the health of tribal youth. Assessment results revealed that youth faced challenges in their physical, mental, spiritual, and social wellbeing. Over the next few years, Sault Tribe engaged the community in planning a holistic set of strategies aimed at strengthening and empowering youth. Presenters will highlight key findings of the Tribe's assessment, and show how specific strategies are being tailored to address risks and build upon assets of their youth. Examples of innovative programs, such as Farm-to-Tribal Preschool, Boat-to-School, and Anishinaabemowin Yoga programs, that weave cultural practices, traditional food, and language into recommended strategies will be shared. Presenters will also discuss gaps in their current strategies and plans to fill those gaps in the coming years by building these approaches into their policies and plans and maximizing future program development opportunities.



## In this session, participants will:



Name specific risks and assets of tribal youth and ways those can be assessed

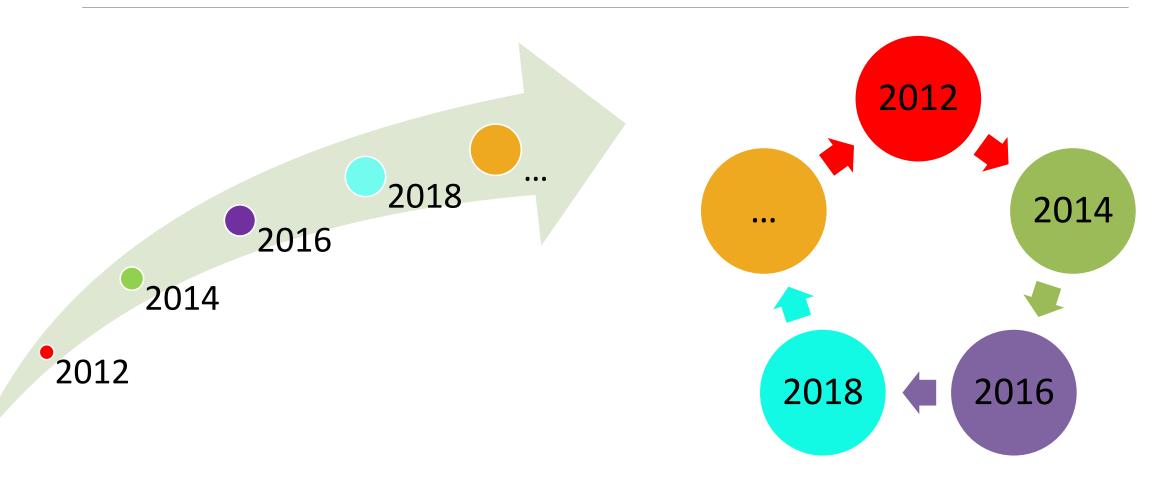


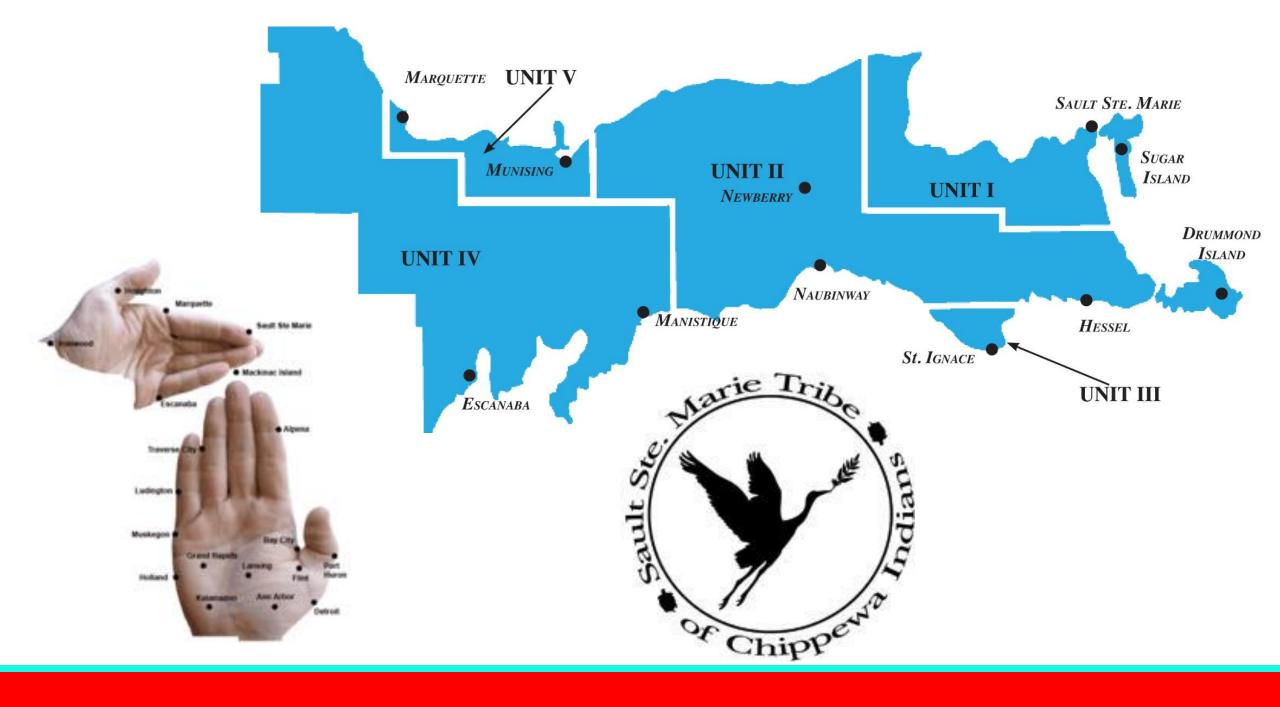
Understand how community-wide strategic plans can be designed to address risks and assets of tribal youth



Discuss ways to collaborate with agencies and groups, to incorporate cultural practices and language into tribal community health programs

# This is Our Story







#### Assessment

- **CDC CHANGE Tools**
- **EHR and Vital Records**
- Sault Tribe Health Survey
- Spirit of Community Health (PHSSR Grant) interviews & focus groups



#### **LEADING CAUSES OF DEATH**

Sault Ste. Marie Tribe



From 2004 to 2013, a total of 1,254 reported deaths occurred among Sault Tribe members living in Michigan.

#### 1. Cancer

Cancer was the leading cause of death in Sault Tribe.



were due to cancer.

#### 2. Heart Disease



23% of deaths were due to heart disease.

#### 3. Chronic Lower **Respiratory Disease**



Sault Tribe members were 1.3 times more likely to die from respiratory diseases than all Michigan residents.

#### 4. Accidents

Sault Tribe members were less likely to die from accidents than all Michigan residents.



#### 5. Diabetes



Sault Tribe members were 1.6 times more likely to die from diabetes than all Michigan residents.

#### 6. Stroke

F.A.S.T.

Sault Tribe members were less likely to die from stroke than all Michigan residents.

#### 7. Suicide

Sault Tribe members were 1.2 times more likely to die from suicide than all Michigan residents.

8. Chronic Liver Disease & Cirrhosis



3% of deaths were due to chronic liver disease.

Sault Tribe

9. Kidney

Disease

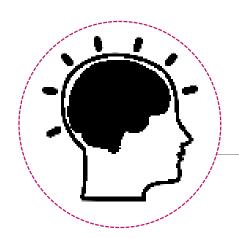
nembers were to die from kidney diseases than all Michigan residents.

#### 10. Flu and Pneumonia

**Sault Tribe** members were slightly less likely to die from flu and pneumonia than all Michigan residents.



Nearly all of the top 10 leading causes of death are preventable. Health risk behaviors such as smoking, obesity, physical inactivity, and unhealthy eating are related to most of the leading causes of death of Sault Tribe members.



## What Did We Learn?



Smoking rates were highest among our young adult age group (18-35)



Almost 1 in 4 tribal members were exposed to secondhand smoke in the their home



Nearly **9 in 10** children did not eat enough daily servings of fruit and vegetables



Only **1 in 4** children were active at least 20 minutes per day

- Our policies and environments did not support good health (esp. worksites, schools, community organizations)
- Community Health services were mostly supported by grants with limits and restrictions
- Staff & resource shortages in our region were major drivers of collaboration and our Tribal Health Division became a leading change agent in local communities

2014

## Community Action Plans

## Partnerships to Improve Community Health (PICH) Project

- ✓ Broad community-wide approach
- ✓ Partner with coalitions, schools, local communities with mini grants
- ✓ Emphasis on strengthening policies and improving environments
- ✓ Collect population-level data and assessment of actual use

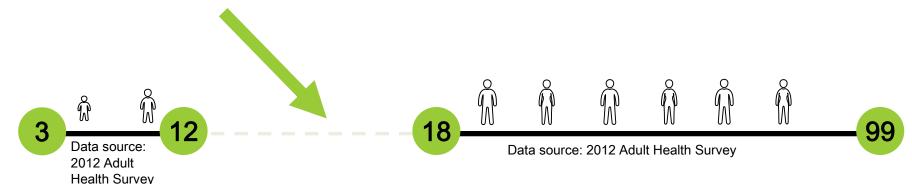
#### **Good Health & Wellness in Indian Country**

- Culturally based approach
- ❖ Partner with other tribal programs
- Healthy, traditional activities
- Emphasis on doing things 'in a good way'
- Collect stories and community member feedback



# Youth Strengths & Needs Survey

- Need for population health data on Sault Tribe youth
- Understand the areas of strength for tribal youth
- Watch trends & spikes in health risk behaviors and compare them to other youth
- Plan and evaluate tribal programs
- Fill the <u>qap</u> in data for **12-18 year olds**



Age of Sault Tribe members with health data available

# Online Survey



#### **Tobacco & Substance Use**

Questions about tobacco, alcohol, and other drug use.



#### **Health Behaviors**

Questions about nutrition, physical activity, sexual health, bullying, mental health & suicide.



#### Strengths and Assets

Questions about involvement in the community, role models, and responsible choices.

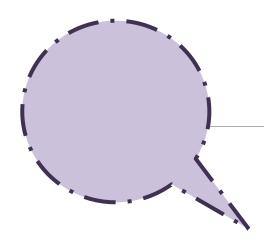
**Youth Tobacco Survey** 

**Youth Risk Behavior Survey** 

**Youth Asset Survey** 

# Survey Process

Mailed pre-notice letter to 1,792 parents	October 2016	
Mailed pre-notice postcard to 1,792 youth	October 2016	
Mailed invite letter to 1,792 youth	November 2016	
Mailed reminder postcard to remaining youth	Nov - Dec 2016	•
Collected online responses via Qualtrics	Nov 2016 - Jan 2017	
\$ Distributed \$10 e-gift card	As youth completed	



# Please share your story!

What creative strategies have you tried to gather data about youth?

# Survey Participants

375 youth

Race Age

**Sexual Orientation** 

Sex



# **Emotional Support**

Feel encouraged by adults often

Most adults in their life are good role models

Knows at least one adult they can talk to about problems

Talks to parents about problems

usually or

almost always

Talks to elder or grandparent about problems

agree or strongly agree

agree or strongly agree

agree or strongly agree

usually or almost always



## Mental Health

XX%

of youth identify with signs of depression

**X**%

of youth are on medication or getting treatment for mental health problems

XX% seriously considered suicide in the last year



## Beliefs About Harms of Tobacco Products

XX% of youth believe all tobacco products are dangerous



XX% of youth believe electronic vapor products are dangerous





#### Access to Tobacco & Alcohol

XX% of youth said it would be easy for them to get commercial tobacco products



X% of youth said they were given alcohol by someone in the past 30 days





# Secondhand Smoke Exposure



**XX%** 

of youth said smoking is not allowed in their home

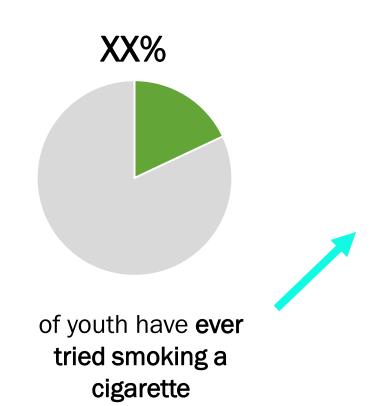


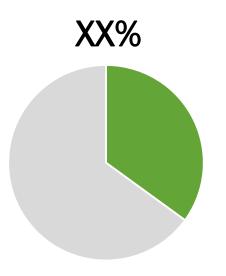
**XX%** 

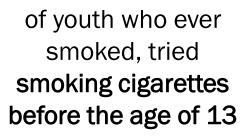
of youth said they were exposed to secondhand smoke in public in the last week

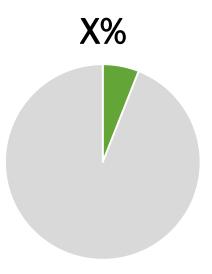


# Smoking





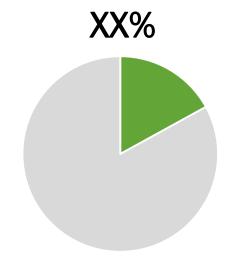




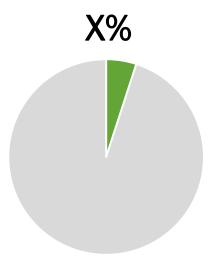
of youth are current smokers
\*unweighted



## Other Tobacco Products



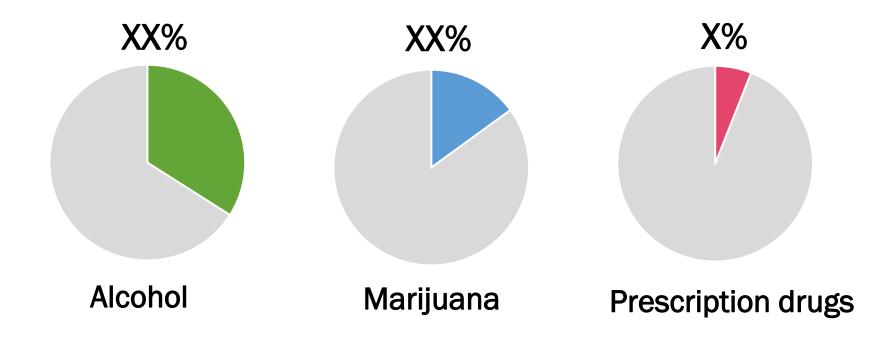
of youth have ever tried **electronic vapor products** 



of youth currently use electronic vapor products

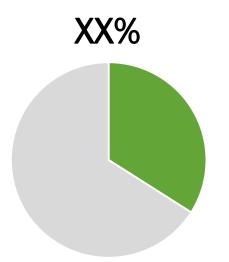


## Substances Ever Tried

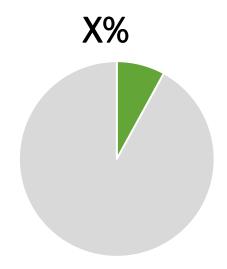




## Alcohol Use



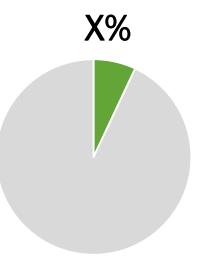
of youth have drank alcohol at least once



of youth tried drinking alcohol before the age of 13



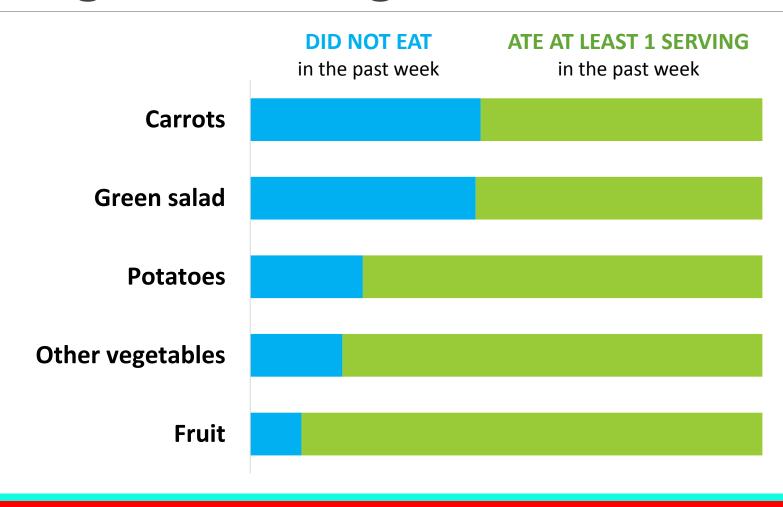
of youth drank alcohol in the last month



of youth reported binge drinking in the last month



# Eating Fruit & Vegetables





# Physical Activity

Physically active at least one day

*In the past week* 

**2015 HS YRBS** 

ST youth

Physically active at least 5 days

*In the past week* 

**2015 HS YRBS** 

ST youth

Physically active all 7 days

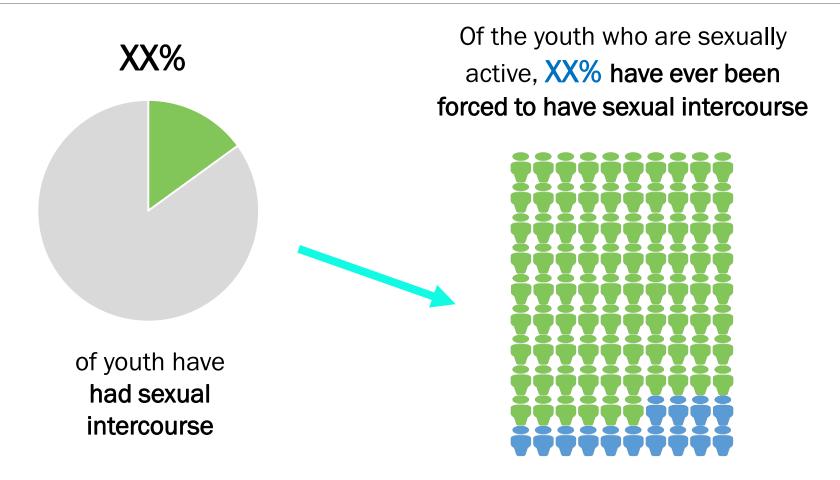
In the past week

**2015 HS YRBS** 

ST Youth

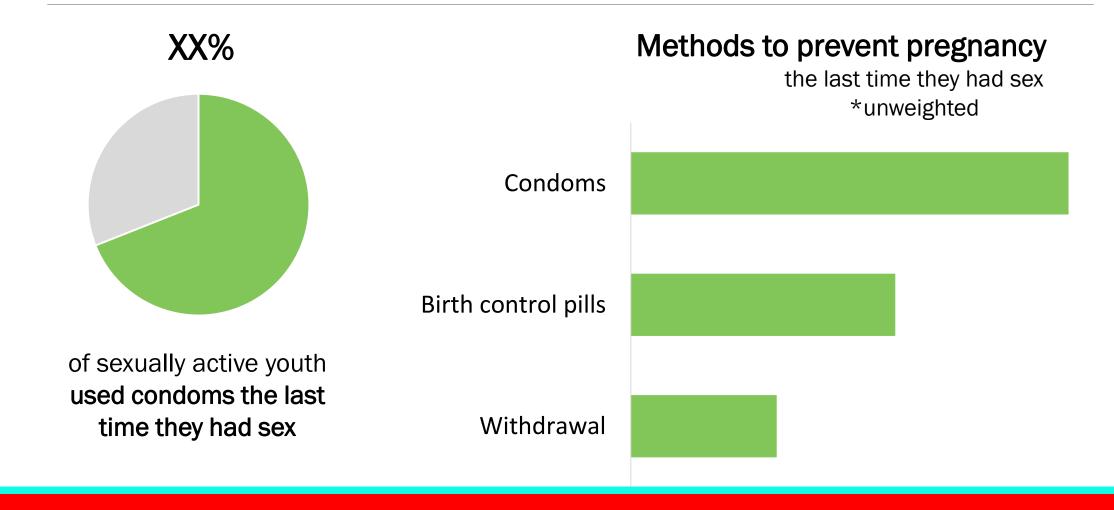


# Sexual Activity





## Sexual Health





# Bullying



**Bullied on school property** 

2015 HS YRBS

ST youth



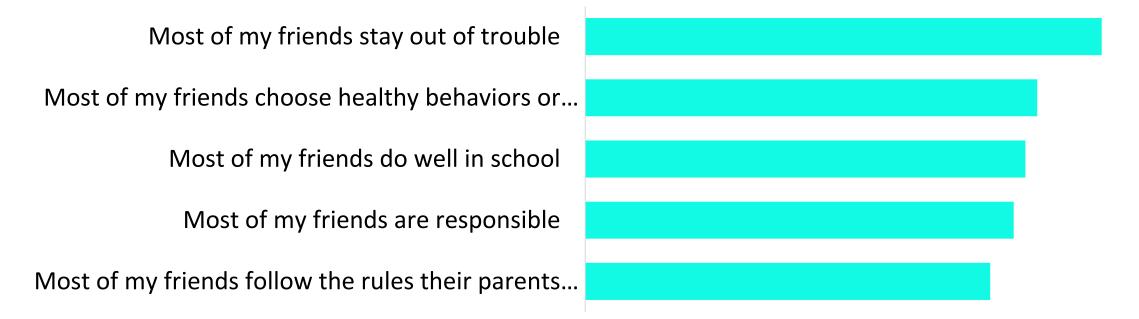
**Electronically bullied** 

2015 HS YRBS

ST youth



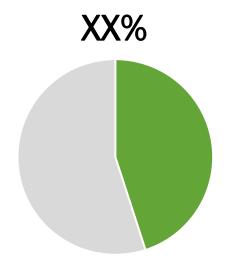
## Peer Influence



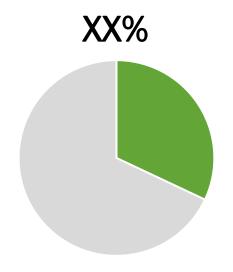
\*\*youth who said the statement was 'usually' or 'almost always' true



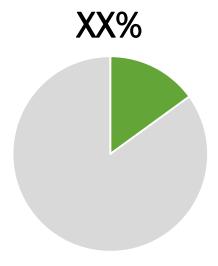
## Extra-Curricular Activities



of youth are very involved on a school sports team



of youth are very involved on an out-of-school sports team



of youth are very involved in clubs or groups

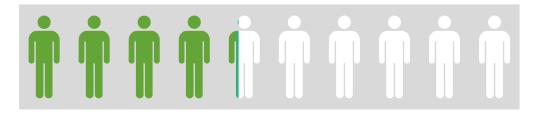


# Community Support

XX% of youth are proud to be part of their community



XX% of youth said they work to make the community a better place

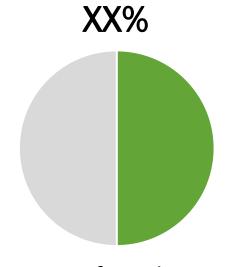


XX% of youth volunteer on a regular basis

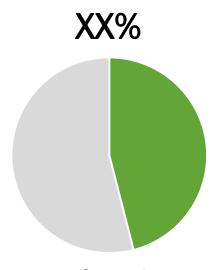




# Community Involvement



of youth
participate and are
involved in church or
religious activities

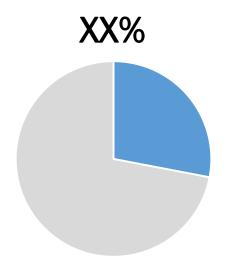


of youth

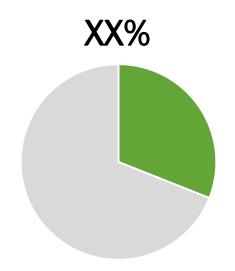
participate and are
involved with tribal
ceremonies, pow-wows,
culture camps, or
cultural events



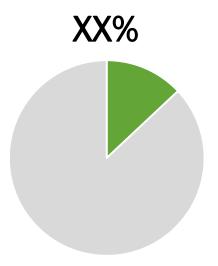
## Traditional Tobacco Use



of youth
know nothing
about traditional
tobacco use

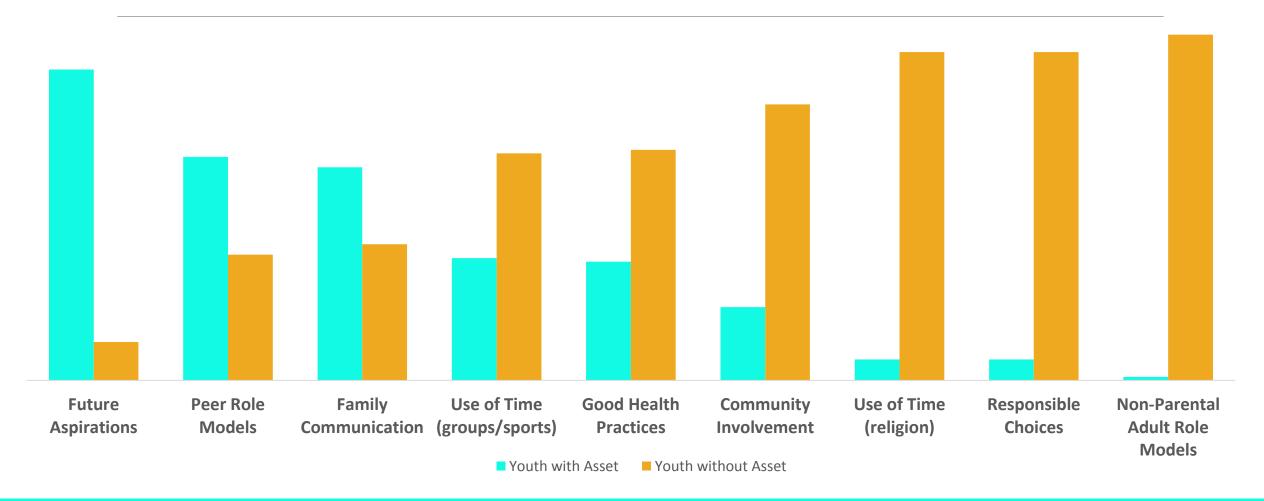


of youth
have been taught
how to use traditional
tobacco



of youth
currently use tobacco
for ceremonial and
traditional purposes

## Sault Tribe Youth Asset Areas



# Strengths and Assets

The top three assets most youth had were







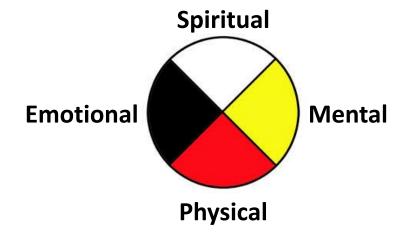
- The top three assets most youth did not have were
  - Non-Parental Adult Role Models
  - Use of Time for religious/spiritual activities
  - ✓ Responsible Choices

#### Youth Assets

The majority of youth said they have positive peer influences

The majority of youth cared about their education and future

Half of youth participated in cultural events



Almost all youth cared about doing well in school and getting a higher education

Almost all youth had an adult they can talk to about their problems

Rates of drug abuse was relatively low among youth

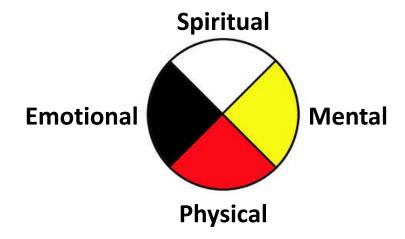
Youth have a low rate of exposure to secondhand smoke at home

## Youth Risks

1 in 4 youth experienced bullying at school

Half of youth said it's easy for them to get tobacco and alcohol

Most youth knew nothing about traditional tobacco use

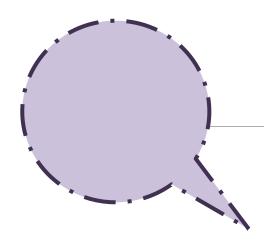


Youth don't believe that electronic vapor products are as dangerous to one's health as cigarettes

1 in 5 youth felt depressed and 1 in 10 youth have had suicidal thoughts

Youth were not getting enough physical activity on a daily basis

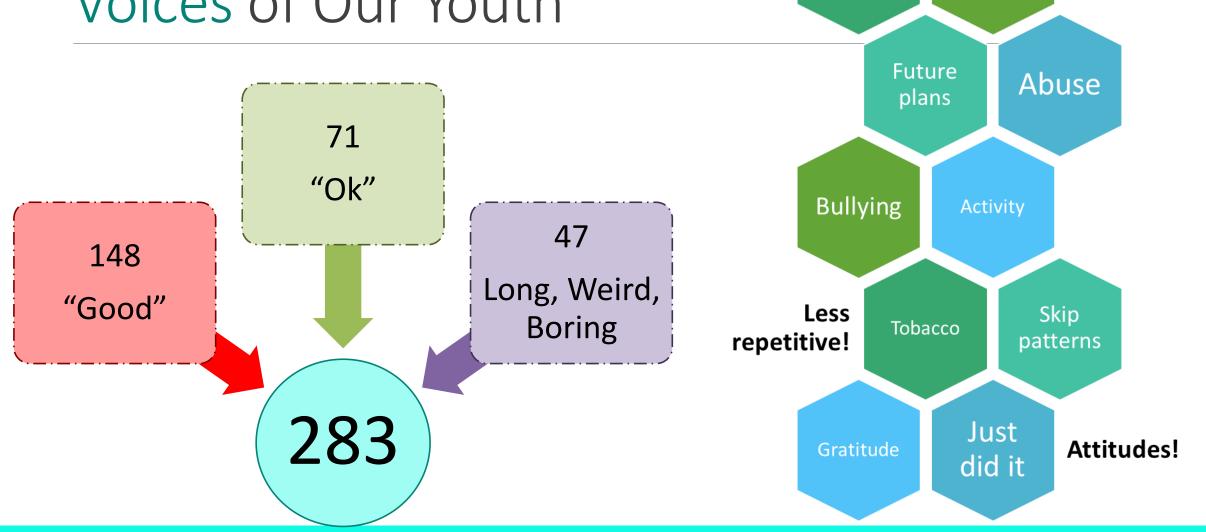
Only 7 in 10 youth were using condoms during sexual activity



## Please share your story!

What risks and assets are priorities for youth in your communities?

## Voices of Our Youth



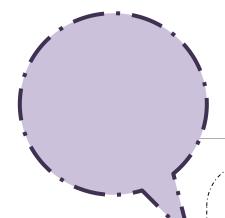
Family

life

Mental

health

More topics!

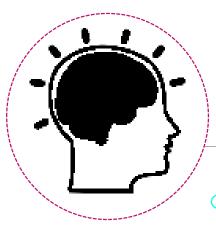


### Voices of Our Youth

"I think that it's good that y'all are showing interest in us teens and wanting to know what it's like and how easy it is to get things."

"I thought it was nice, but I think there should be a question on if you know how to get involved at powwows and ceremonies, because I would like to but I don't know how."

"It was a little weird to talk about this kind of stuff. It just isn't the usual thing that you talk about. I couldn't even pronounce half of the drugs that you listed."



#### What Did We Learn?

- Youth appreciate having a voice and a role in improving their community
- Youth want & need positive, active opportunities to get involved in community and cultural activities
- More positive adult role models, especially between elders and youth, would increase youth assets
- Youth have unmet needs related to mental health, alcohol use, peer relationships, and sexual health that need more focused efforts
- Youth would benefit from greater knowledge & support to make healthy, responsible choices



### What Will We Do?

- Share our data and stories with community leaders (and youth leaders!) to encourage collaboration and change throughout the Tribe
- •Build youth leaders to promote policies in settings that impact youth in their daily lives (schools, housing, parks)
- Design more creative, youth-centered strategies
- •Promote healthy indigenous ways with Anishinaabe teachings and language
- Use media and digital storytelling to help youth tell our story
- Keep collecting data to tailor our approach and watch what changes occur over time

## Share our Data: Farm-to-Tribal Preschool



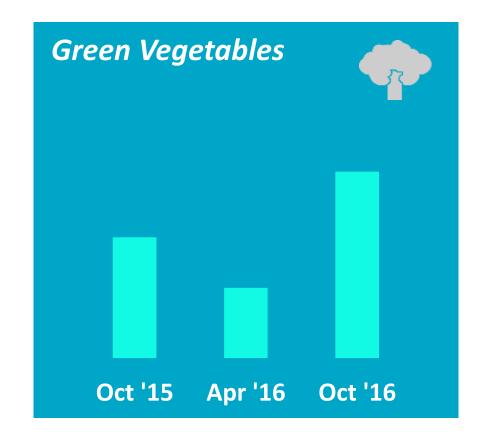
Partner with Tribal Early Childhood program to get more fresh produce into daily meals and resources and training for hands-on nutrition education



Provide more parent nutrition education and healthy meals during family involvement events



Create take-home activities that teach gardening and cooking skills with healthy foods



## Build Youth Leaders: Youth Task Force





# Promote Healthy, Indigenous Ways



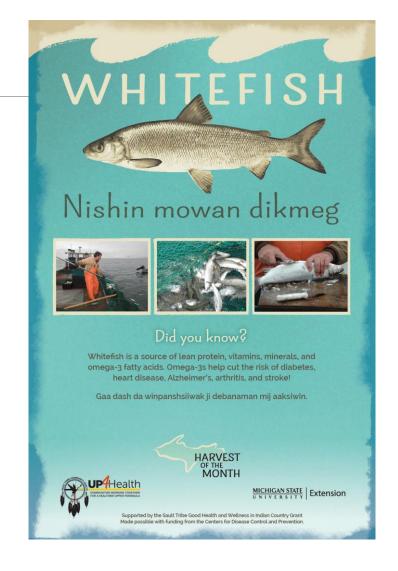






# JKL Bahweting Boat-to-School

- Partner with Tribal Food Sovereignty
   Collaborative, MSU-Extension, Fisheries
   Program
- Classroom cooking with nutrition education
- Fisheries fieldtrip: community-based science education activities
- Fisheries career panel
- JKL Cafeteria menu features local whitefish

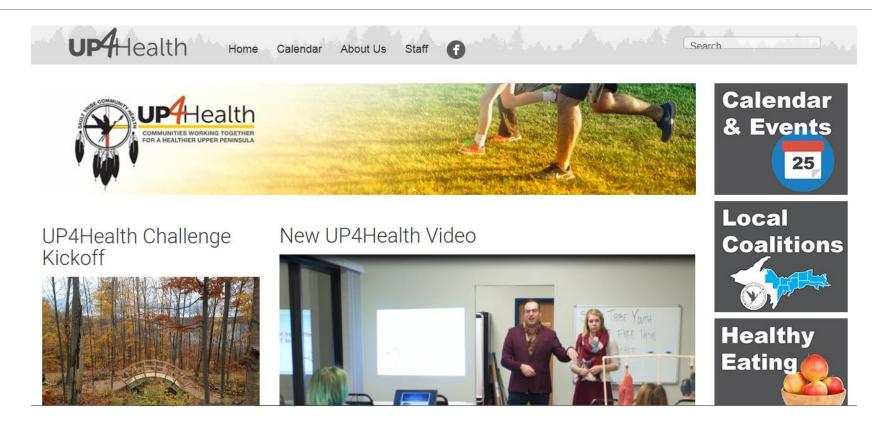


## Anishinaabemowin Yoga



- Partner with Ojibwe language instructor, early childhood programs
- Create Yoga program using Ojibwe language (e.g. Yoga poses use clan names)
- Train tribal early childhood staff to lead yoga instruction
- Staff lead yoga with Anishinaabe teachings regularly in early childhood and youth programs

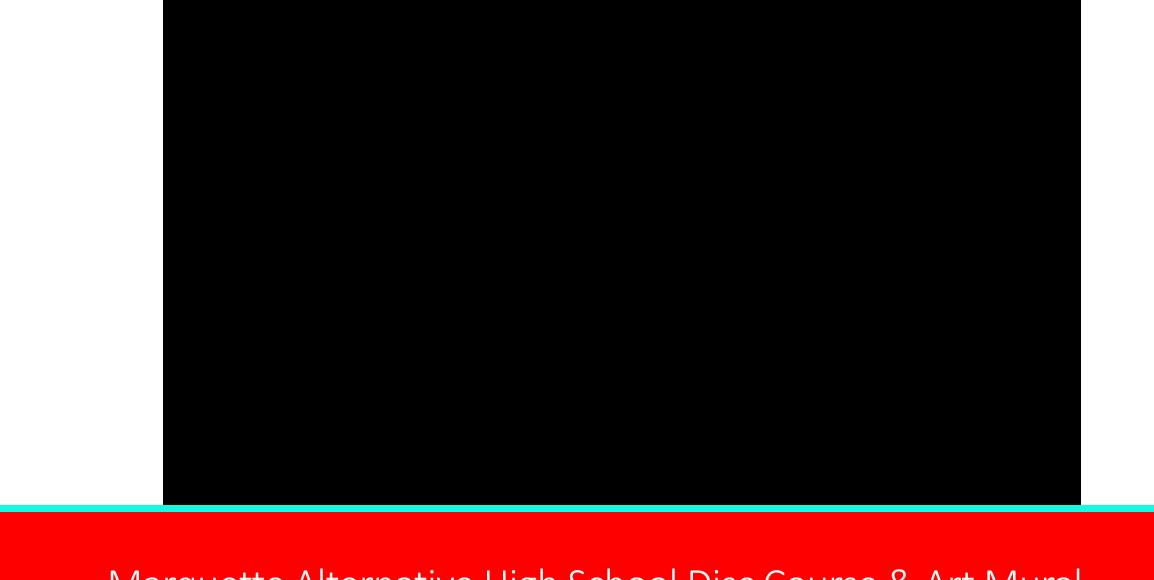
# Tell Our Story: Digital Stories & Media



<u>Up4Health YouTube</u>



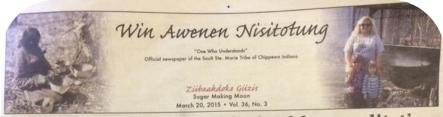
Tribal YEA Fitness



Marquette Alternative High School Disc Course & Art Mural



## Where Will We Go From Here?



#### Tribe blazes trail for public health accreditation

Sault Tribe Commun Health was chosen recently by the National Indian Health Board (NIHB) for an award of \$10,500 to work on projects leading to public health accreditation. Five

tribes were picked for this award.

This is the first year for the Iribal Accreditation Support Initiative (ASI), a pilot project to support tribes in their efforts to achieve public health accreditation through the Public Health Accreditation Board, the only voluntary national accreditation program for public health depart-

This funding will allow Community Health the opportunity to critically assess their departrocesses and identify and priori- to move forward with our pubding to Health Division Bonnie Culfa, is to



Above (L-R) are Shannon Lang of the Michigan Public Health Institute, Health Services Director Bonnie Culta. NIHB Acting Director of Public Health Programs and Policy Robert Foley, Sault Tribe Health and Wellness Manager Lisa Myors, Health Education Supervisor Colleen Commons and Unit I Rep. Cathy Abramson.

e community needs. Their goal, lie health accreditation. We are already accredited in Behavioral Health and all of our medical tegic plan that will services, so this would be our

Colleen Commons said, "Our work plan is to pull our data together into one report which we can use to develop a strategic plan. We do not know what

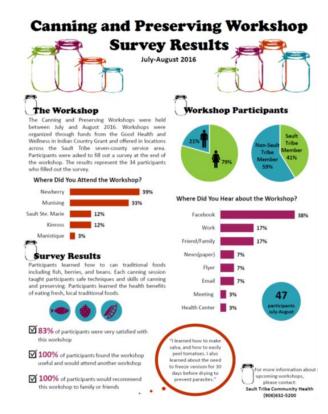
about their plans for the next six months, how the funding will be administered and what kind of assistance they might need, how the NIHB can help connect them any of the state and

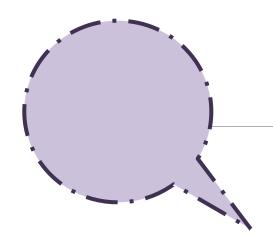
ground in Indian Country and this is the first such effort specific to Indian County, so the Sault Tribe is really kind of blazing the way,"

"Accreditation in general is about aligning programs and service delivery in the public health sector with a set of national standards and measures," he said. If you can meet the standards, that is saying you are doing a good job in your public health service delivery. The tribe will now be examining some of their practices, systems, processes, and procedures and try to align them with national standards of measures. The end result will be not just a stamp of accreditation but it will be the ability for the tribe to step forward and say the we are operating at the same le and providing the same leve quality and efficient servi-









## Please share your story!

How have you collaborated with other agencies to incorporate cultural practices and language into creative tribal community health programs?

## Questions?

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