



The Great Lakes EpiCenter News

Epidemiology Project of the Great Lakes Inter-Tribal Council, Inc.

Vol.6, No.2—Spring 2005

Epidemiology is the study of the distribution and determinants of health-related states or events in specified populations and the application of this study to the control of health problems.

The EpiCenter provides epidemiological services to the Tribes in the Bemidji Area (Michigan, Wisconsin, and Minnesota). The services include training and technical assistance in many areas of public health, data management, program planning, and program evaluation.

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Building Community Based Research Partnerships

A. Adams, MD, Ph.D., N. Miller-Korth, RN, MSN

Community based participatory research (CBPR) is an important methodology for addressing local health concerns in a collaborative way. Academic researchers can effectively make use of partnerships with communities to develop agreed upon research agendas, timelines and goals. This produces research outcomes that are important to communities, adds to the scientific knowledge base and builds the capacity of communities to initiate and engage in future collaborative research projects concerning health issues. (1)

CBPR has been described as an equal partnership between the academic researcher and community that in its practice promotes the establishment of trust and community participation in research design, data collection, analysis, and dissemination of results. (2,3,4,5) This model differs from how researchers are often trained. Historically, researchers have been trained in conventional scientific methodologies. Researchers trained this way often find it difficult to share control with a community. Historically, this has caused significant distress and has led to mistrust and misunderstanding of research within communities. (2)

Some important differences between CBPR and conventional research include: 1- The process of initiation is usually reversed. In the conventional approach, a researcher designs the study, applies for, and receives funding, and then recruits subjects and communities to participate. In CBPR projects, the community may initiate the study, including pulling together academic and other research resources. 2 - Conventional research tends to be quite linear, CBPR projects can often have iterative process in which research findings and practical objectives are continually revisited. 3 - CBPR projects are distinctly collaborative, involving an ongoing mutual process of research planning and data interpretation thus fostering mutually beneficial partnerships. (1)

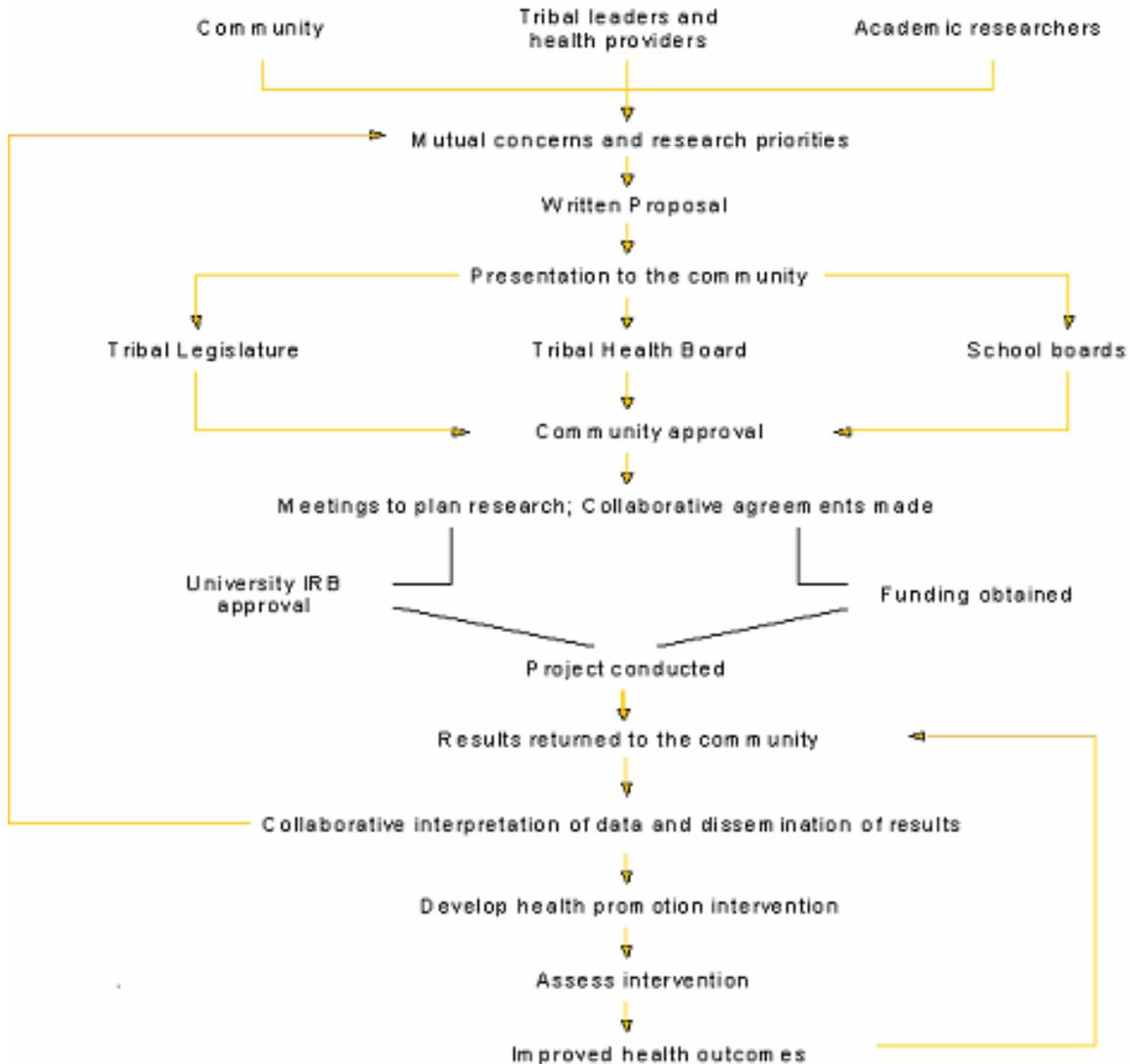
Research goals and objectives, project methods and duration, confidentiality issues, partnership terms, data control issues and joint dissemination of results are among the things that are negotiated between communities and researchers in the CBPR process. CBPR acknowledges that community involvement is essential and beneficial in the research process, and sees direct community benefit as a desirable outcome of the study. (1) Table 1 describes basic principles of CBPR. (3)

Community based participatory research is based on the following principles:

- CBPR is based on a mutually respectful partnership between researchers and community.
- CBPR equitably involves all partners in all phases of research.
- CBPR builds on knowledge, strengths, and resources within the community.
- CBPR involves a cyclical and iterative process.
- CBPR educates both researchers and communities.
- CBPR results in action based on results obtained from the research. (3)

Tribal communities have mistrusted academic institutions and research in general. In the past Tribes had little input into research agendas, and scientists from outside the American Indian Culture directed the research. Figure 1 illustrates a model of CBPR developed and used in the Wisconsin Nutrition and Growth Study (WINGS) which is a collaboration between Dr. Adams (UW Madison Medical School) Menominee, Bad River and Lac du Flambeau Tribes and Great Lakes Inter-Tribal Council. (1)

FIGURE 1



Continued on page 3

Useful Websites:

- www.cdc.gov/pcd/issues/2004
- www.ccpb.info
- www.napcrg.org/exec.html

Upcoming Training Sessions: CBPR trainings have been arranged for later this summer. The first session, Community Based Participatory Training – Overview has been scheduled for July 19-21, 2005. This session will be held in Rhinelander, WI. The second session, Community Based Evaluation has been scheduled for August 23-25, 2005 in Bloomington, MN. For additional information regarding these trainings please visit the EpiCenter web site (www.glitc.org then click on the EpiCenter button) or contact Nancy Miller-Korth at nkorth@glitc.org.

References

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- Learning to work together: developing academic and community research partnerships. *WMJ*.2004; 103(.2): 15-19.
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 4. Tsark JU. A participatory research approach to address data needs in tobacco use among Native Hawaiians. *Asian Am Pac Isl J Health*. 2001; 9(1):40-48.
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Kimmine Pierce, Epidemiologist (right) and Denise Marth, RN, MSN, STEPS Coordinator, Keweenaw Bay Indian Community (left) presented the findings of the Great Lakes Inter-Tribal Council 2004 Youth Tobacco Survey at the 17th Annual Indian Health Service Research Conference in Seattle, WA April 28-May 1st.

Upcoming Trainings

Advanced Diabetes Management System	June 14-15, 2005	Kewadin Hotel, Sault Ste. Marie, MI
Contract Health Service	July 19-20, 2005	Holiday Inn, Rhinelander, WI
Third Party Billing	July 21-22, 2005	Holiday Inn, Rhinelander, WI
Patient Registration	August 16-17, 2005	Kewadin Hotel, Sault Ste. Marie, MI
Scheduling	August 18, 2005	Kewadin Hotel, Sault Ste. Marie, MI

See website for further details: [http:// www.glitc.org/epicenter/events](http://www.glitc.org/epicenter/events)

New Staff in GLNARCH Student Development Program

In early March we sent out a mailing to all Tribal Health and Education Directors describing the Great Lakes Native American Research Center for Health (GLNARCH), four phased, Student Development Program. We are pleased to announce that we have three new additions to our GLNARCH Student Development Program. Our two new Student Development Coordinators, **Brian Jackson** and **Asha Petoskey** will be focusing their activities on Phases II-IV of the Student Development program. Brian will be covering the western part of Wisconsin and Minnesota and Asha will serve Tribes and academic institutions in the eastern part of Wisconsin and Michigan.

Kathleen Skoraczewski has been hired as the Middle School Coordinator. The Middle School Program will be initially focusing on middle schools in Wisconsin which have greater than 50% AI enrollment. Kathleen will also be assisting with the GLNARCH Phase I component (target: high school students). It is our hope that the middle school piece of the program will consist of opportunities for experiential learning, along with mentoring and shadowing with current science and healthcare professionals. We feel that by sharing these opportunities with middle school students much of the mystery surrounding these professions will be lifted and students will feel encouraged to pursue their interests.

Below, please find biographical sketches for each of the new staff members.

Brian Jackson

Boozhoo, my Anishnabe name is Chi-Abay (Big-Buck), I am a 35 years young Lac Du Flambeau Tribal Member with blood ties to Bad River & Lac Vieux Desert. Educational endeavors include: High School Diploma (Wausau East High), Associate Degree Native American Studies (Lac Courte Oreilles Community College), Bachelor's Degree Youth Development (Concordia University St. Paul, Minnesota), currently enrolled in Master's Program for Human Service, emphasis on Family Education (Concordia University St. Paul, Minnesota) and veteran of Army National Guard. Work experience includes; seven years with the Boys and Girls Club of Lac Courte Oreilles, (four years executive Director), Special Education assistant (Lac Courte Oreilles Tribal School), Middle & High School Basketball coach (Lac Courte Oreilles Tribal School), and Little League Coach (Sawyer County Little League), Woodland Hills Correctional Facility for Juveniles and Duluth School District integration

program. Interests include: Dancing & making outfits (Pow-Wows), softball, basketball, fantasy football, Packer Fan to the heart, and traveling. Main goals in my current position as a Student Development Coordinator include: Teach the up-coming college bound students to the best of my ability and encourage the opportunities in Healthcare & Science Research areas and be a positive role model.

Asha Petoskey

Boozhoo, I am a member of the Grand Traverse Band of Ottawa and Chippewa Indians, Turtle Clan from Peshawbestown Reservation, located approximately six miles north of Suttons Bay, Michigan. My father was the late Stephen Petoskey, Sr. and my grandparents were the late Louise Chippewa and Sylvester (Pete) Petoskey. I have lived most of my life away from Peshawbestown, though, residing in Ann Arbor for a few years where I completed my post-secondary education at the University of Michigan, where I received my bachelor's degree in

elementary education.

Kathleen Skoraczewski

Growing up on the shores of Lake Superior led me to develop a strong connection to the northern part of Wisconsin, and I happy to have returned to the great northwoods. My husband Gregg and I have a ten month old daughter, Ella, who lights up our lives and keeps us on our toes. I have always been drawn to working with middle school students and am excited to be the new Middle School Program Coordinator. I received my BA from Beloit College in Psychology and Sociology, and my MS from the University of Wisconsin in Counseling with a focus on school counseling. While pursuing my education I directed an after school program and worked with a middle school summer enrichment camp. More recently I worked with a very challenging population in a child and adolescent psychiatric hospital. Needless to say, I am looking forward to returning to work in the school systems.

Epidemiological Data, What is it Good For?

Chandra Reddy and John Mosely Hayes

The purpose of this article is to discuss in general the usefulness of epidemiological data. But before moving into an overview of some of the uses of epidemiological data, here is a quick answer to the question, "What is epidemiology?"

While there are many definitions, an easy one to remember is "the collection and analysis of information to improve health". A longer definition that we like is that epidemiology is the study of the distribution and determinants of health related states or events in specified populations, and the application of this study to the control of health problems (Ref. John M. Last, "A Dictionary of Epidemiology"). Here at the Great Lakes EpiCenter we are striving to use epidemiology to support Tribal communities in their efforts to improve health by assisting with data needs through: Partnership Development, Community Based Research, Education, and Technical Assistance. With that said, here are four general uses for epidemiological data (compiled from an internet Google search site):

1. **The big picture:** When health data is compiled into epidemiological reports it can give an overall picture of what is happening to the population in general. It allows you see if a particular disease is plaguing your population, or if only the very elderly are using medical services, or if most women are getting regular pap smears.
2. **Numbers:** A necessary evil: Epidemiological data can show you quite easily a variety of different angles of a picture that depict various aspects within a population that you work with. This data can show a different perspective or view previously never seen.
3. **Getting your story told:** Even if you have a good idea of what is going on within your community, your knowledge does not extend to those that do not work with you everyday or at all. People that may make decisions on funding, health policy, health regulations, and project directions need to see your data.
4. **Funding and Health Policy:** Epidemiological reports are used by many individuals to determine what projects need to be undertaken, and how much need there is for funding in particular areas. Numbers derived from these reports are used in funding calculations, as proof that their really is a problem area, that the budget should be adjusted to incorporate additional costs for certain areas, as background information for grant writing, or for requests that policies be changed or modified.

If you are eager to learn more about epidemiology the Great Lakes EpiCenter team is available to help, whether one on one or in group training sessions. Just let us know. In addition, a nice way to start on your own is working through the Centers for Disease Control and Prevention self study module, "Principles of Epidemiology; An Introduction to Applied Epidemiology and Biostatistics". If you would like a copy of this study tool, please contact us to send you the module as a pdf file.

Bemidji Area Diabetes Annual Coordinators Meeting

September 21-22, 2005

Theme: Interviewing techniques to increase positive patient behaviors that prevent and decrease the impact of diabetes on Native American people.

Holiday Inn Select Hotel & Suites
3 Appletree Square
Bloomington, MN

See our website for further details.
<http://www.glitc.org/epicenter/events>

GLITC Regional Conference for Tribal Emergency Preparedness

Great Lakes Inter-Tribal Council is pleased to announce our second annual regional conference for Tribal emergency preparedness “Promoting tribal, federal, state and local alliances”. The conference will be hosted at the Soaring Eagle Casino and Resort in Mount Pleasant MI on June 21 through June 23, 2005. The initiative for this conference is based on our successful 2004 regional conference in Green Bay, WI, which provided the opportunity for tribal and state representatives to come together and promote discussions for interactive collaboration between various local and state agencies and the tribes. The conference is funded through Tribal grants, CDC Public Health Preparedness and Homeland Security.

People working with Tribal Disasters and Emergency Management, Homeland Security, HRSA and Public Health, as well as local and state partners are invited to attend this conference. We also extend our invitation to all of those interested in Tribal emergency management and public health issues. The registration is free and open for all. Also, first class rooms are made available through Soaring Eagle Resort at the rate of \$115 nightly.

This three-day conference offers separate tracks for Public Health and Homeland Security, discussion forums, joint tabletop exercise, and various cultural and social entertainments. The cultural events will include a Veterans Flag Ceremony, Pow-Wow, and visits to the cultural centers.

Our distinguished speakers for this conference include, Dr. Kathleen Annette, Bemidji Area IHS, will focus on “Partnerships between Tribal and Urban Health systems for emergency preparedness”. Mary Jean Erschen, Executive Administrative Director, Center for Emergency Health and Safety for Schools, UW La Crosse, will address the school safety issues.

The Public Health track on Day 2 offers a presentation on “Identification and response to Biological and Chemical Terrorism” by Erik R. Janus Toxicologist with the Division of Environmental and Occupational Health, State of Michigan. The Discussion forum will be on “Surveillance and Outbreak Investigation Protocols” in the three states utilizing various state based and international models. The Public Health session will conclude with Community response models on Public Health Preparedness for each one of the Tribes from the MI, MN and WI.

The Homeland Security Track offers presentations from Barbara Waller, Federal DOT on issues concerning transportation of Hazardous material on Tribal Land. Jeff Wester, from WI DOT will talk about roads and transportation safety during emergency situations. Michael Kunesh (WI OJA) and Capt. John (MI State Police) will provide information on Homeland Security and funding issues for tribes. Lloyd Weber, (Retired British Army) from Stockbridge Munsee will offer a presentation on “Terrorism Responce”. The Homeland Security track will conclude with a presentation from Jim Opoka, FEMA region V, Citizens Corps program.

The conference will conclude on Day 3, with individual state representative meetings followed by joint discussions on best practices and evaluation.

More information on registration, comprehensive agenda and travel can be found at <http://www.glitc.org/~ept/>

MN/WI American Indian Cancer Conference

Thursday & Friday: June 9-10, 2005

For additional information contact:
Deanna Finifrock, PHN
(218) 878-2125
Email: deannafinifrock@fdlrez.com



Black Bear Hotel
Carlton, MN

American Indian Talking Circles Project

Lorelei De Cora RN BSN

Background

The American Indian Talking Circles Project was funded by the National Institute of Nursing Research (NINR) through a joint partnership with the Center for American Indian Research and Education (CAIRE) at the University of Minnesota and the Seva Foundation Native American Diabetes Project. The four-year research and education intervention project was conducted amongst American Indian adults living with diabetes and at-risk adults across four Northern Plains reservations: Winnebago Tribe of Nebraska; Yankton Sioux Tribe, Rosebud Sioux Tribe and the Oglala Sioux Tribe of the Pine Ridge reservation, all of South Dakota. The research was conducted during the period 1998-2002. The Diabetes Talking Circles were tested as a culturally appropriate tool to increase knowledge of diabetes, how it is treated, nutrition, and activity /exercise. Additionally measured was whether this new knowledge will lead to behavior change towards wellness.

Results

Pre and post testing clearly demonstrated a successful culturally appropriate intervention at the four reservations. Statistically significant changes were observed in several areas:

1. Fatalistic attitudes toward diabetes were significantly reduced.
2. Diabetes knowledge was improved in several areas.
3. Knowledge improved significantly regarding dietary fat.
4. Dietary fat and fiber knowledge increased among the male intervention group members.
5. Exercise knowledge increased significantly.
6. Diabetes treatment compliance improved.
7. Exercise increased in frequency.
8. Obesity levels (BMI) were reduced.

Conclusions

This scientific-based study changed fatalistic beliefs and created an acceptable educational program that was readily adopted as an empowerment step toward the prevention and control of diabetes among American Indian adults living with diabetes and those who are at-risk. The use of traditional circles, group support, and traditional food (including buffalo meat) in a spiritual milieu, created an acceptable way for participants to express their feelings, receive support, absorb information, and strengthen traditional ties - all contributing to the goal of prevention, treatment and control of diabetes.

Great Lakes EpiCenter Mission: To support Tribal communities in their efforts to improve health by assisting with data needs through: Partnership Development, Community Based Research, Education, and Technical Assistance.

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