



The Great Lakes EpiCenter News

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

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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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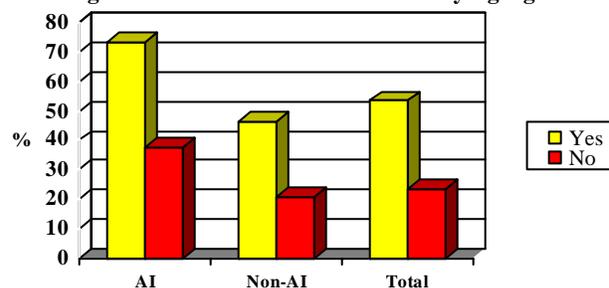
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MICHIGAN YOUTH TOBACCO SURVEY 2004

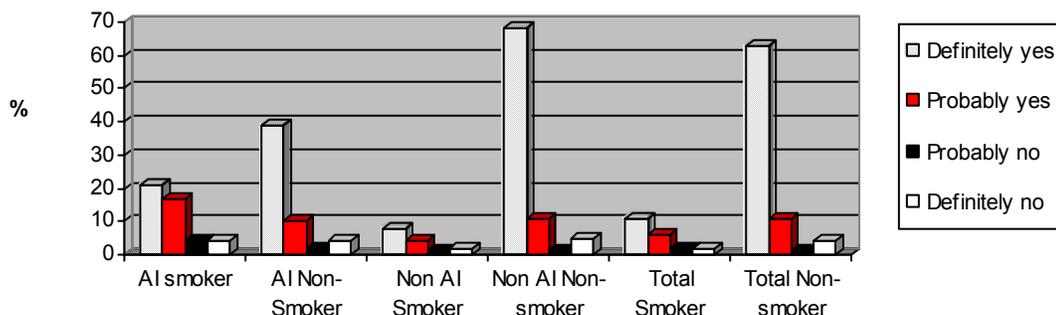
The Michigan Youth Tobacco Survey (MI YTS) is a measure of youth tobacco use among Michigan middle school students with a focus on American Indian (AI) students. The MI YTS tracks tobacco use, attitudes and related behaviors among middle school students, as does the Center for Disease Control (CDC)'s National Youth Tobacco Survey (NYTS). In addition, the MI YTS also examines AI Tribal affiliation, geographic location, knowledge of traditional and ceremonial uses of tobacco, and age initiated smoking. This report addresses the prevalence of tobacco use, social influences, environmental tobacco exposure, opinions of anti-smoking programs and thoughts on smoking in the media among Michigan AI youth and their peers.

Great Lakes Inter-Tribal Council EpiCenter (GLITC EpiCenter) contacted all twelve Tribal Nations in Michigan and invited them to participate in the MI YTS. Eight Tribes agreed to participate. The remaining four Tribes did not participate due to either a very small number of AI students attending each school (n=3) or they administered a Tribal specific youth tobacco survey the previous year (n=1). The eight participating Tribes underwent a review process and obtained Tribal Council approval. Each Tribe identified the schools which their Tribal members attended. There were no set guidelines for which schools were included. All schools contacted by the Tribes agreed to participate in the MI YTS.

Percentage of students who indicated ever trying cigarettes



Students Were Asked If They Thought Other People's Cigarette Smoke Could Hurt Them



All sixth, seventh and eighth grade students in the participating schools were asked to complete the survey, regardless of race. A total of 1527 students (339 American Indian students, 22.2%) in 12 schools were surveyed (86.5% participation rate). Students had the choice whether or not to complete the survey. A passive permission form was used for parental consent, meaning that the parents could choose to not allow their child(ren) to complete the survey. Surveys were administered by trained school staff, Tribal Health Clinic staff or by GLITC EpiCenter staff, depending on the school's choice. Students responded on a scantron answer sheet. Students were included in the American Indian (AI) population if they identified themselves as American Indian or Alaskan Native (on at least one of two questions).

The following are MI YTS key findings:

- ◆ A higher percentage of American Indian students reported having ever tried all of the various tobacco products compared to their peers.
- ◆ American Indian students had more females report that they had ever tried cigarettes compared to American Indian males. However, American Indian males had reported ever trying smokeless tobacco and pipes more than American Indian females.
- ◆ All students, regardless of race, had higher percentage of ever trying all of the various tobacco products if they lived in a household where someone smoked tobacco products compared to students that lived in a smoke-free household.
- ◆ American Indian students that live in a smoking environment had a significantly higher percentage of ever trying cigarettes and cigars compared to their non-American Indian peers that lived in a smoking environment.
- ◆ Sixth graders have a higher percentage of current smokers compared to frequent smokers while eighth graders have a higher percentage of frequent smokers than current smokers.
- ◆ 75% of American Indian students who had ever used a pipe for tobacco smoked them on all 30 days in the previous month.
- ◆ The majority of American Indian students (61.7%) reported having either a little or a lot of knowledge of traditional tobacco use.
- ◆ American Indian students who live on a reservation reported having more knowledge of traditional tobacco use (31.7%) compared to American Indian students who live in a city or town (16.7%).
- ◆ There was a significant difference between non-smoking and smoking students in the attitude that not smoking was a way to express their independence.
- ◆ Most smoking students had four or more smoking friends.
- ◆ 85% of smoking students were not asked to show proof of age when they bought cigarettes.
- ◆ 83% of smoking students were not denied purchase of cigarettes because of their age.
- ◆ 61% of students reported seeing billboards and ads in magazines for cigarettes one to three times in the past 30 days.
- ◆ 28% of American Indian students reported buying something with a tobacco brand name or picture on it.
- ◆ 26% of American Indian students reported they would probably wear or use a product with a tobacco company's name on it.

The full report can be found at: www.glitc.org/epicenter

Great Lakes EpiCenter Core MCH Epidemiology Project Overview

We have just received funding for a Core Maternal and Child Health Epidemiology project. This will be a three year project that will be incorporated into our existing Epidemiology Center.

Purpose

The Great Lakes EpiCenter Core MCH Epidemiology Project, using a collaborative approach with existing and new federal, tribal, inter-tribal, state and academic partners, will work to do the following: Assess current MCH surveillance activities within a three-state region; Enhance the surveillance for perinatal disease conditions and assist with investigations of elevated rates of adverse MCH outcomes; Provide an area wide AI/AN MCH Health Status Report; Develop and implement epidemiologic studies as deemed appropriate by the tribes.

Project Activity Summary

This project will initially be funded for a three-year period (FY 2005-2007). Year one of the project will focus on assessment of current state-wide MCH surveillance systems and data available in a three-state area as well as local MCH program activities with their corresponding data collection activities. Based on the assessment, gaps and needs will be identified and prioritized and developed into a work plan that will guide the project for the remaining two years. Tribal input will be sought throughout this process. We also intend to produce a regional AI/AN MCH report using currently available data.

Staffing and Oversight

We have created a new position, MCH Epidemiologist that will be located within the Great Lakes EpiCenter. This position requires a Master's Degree in Public Health or equivalent health related master's degree

with emphasis in epidemiology. We will be looking for someone with a minimum of three to five years experience in applied epidemiology, with some of this experience in the field of maternal child health.

Technical oversight will be provided by a Core MCH Epidemiology Project Advisory Committee that will meet quarterly (two face-to-face meetings and two teleconference calls). The proposed membership for this committee will be made up of representatives from tribal health programs (MN, WI, MI), inter-tribal council MCH programs (ITCMI and GLITC), state health departments (MN, WI, MI), federal programs (IHS and National MCH Center for Child Death Review) and academic partners

Contact Information

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Allison La Pointe began employment with Great Lakes Epicenter as the Minnesota Epidemiologist in early October 2004. She relocated from Vermont where she worked, for the past 4 years, with the Chronic Disease Epidemiology unit at the Vermont Department of Health, covering topics such as asthma, arthritis, cancer, disability, and newborn hearing screening. She holds an A.B. in Biochemistry from Smith College and an M.P.H. in General Epidemiology with an interdepartmental concentration in Public Health Genetics from the University of Michigan School of Public Health. She enjoys swimming, pilates, and various outdoor activities, and is a classically trained mezzo-soprano. Allison is very excited to be here at GLITC and looks forward to meeting each of you.



Carol Wright joined Great Lakes Indian Health Program staff to serve the Wisconsin tribes as coordinator related to public health/bio-terrorism concerns. Carol rejoins the GLITC staff, having worked as the Director of several federal grants in the area of Maternal/Child Health from 1990-97.

Carol received her RN education from Milwaukee County General Hospital School of Nursing. She received a BS from the College of St. Francis in Joliet, IL and holds an MS in Health Services Administration from Cardinal Stritch University. She also is an officer in the United States Army Reserve, serving with the 452nd Combat Support Hospital in Milwaukee since 1989.

Her area of clinical expertise is in the AODA (alcohol/drug) field, but she has had a variety of clinical experiences including acute medical/surgical, long term care, clinic office practice and college student health. The majority of her positions over the past 25 years have been in management.



Nitin Bagul is the new Bio-Terrorism Epidemiologist for Wisconsin tribes and recently moved to the Northwoods. Before joining Great Lakes, he worked with the Seattle King County Public Health department on the TB Epidemiology studies consortium, a CDC funded research project concerning disease transmission and new screening tests.

Nitin graduated from Oregon State University and received his Masters of Public Health in 2003. During his MPH program, he worked as a research assistant with the Department of Health and Human Services, Community Mobilization project, creating community awareness for HIV, and conducting needs assessments for HIV/AIDS prevention in minority populations of Oregon. He also holds primary care physician credentials from University of Pune, India. In India, he practiced medicine for about a year working for homeless and low income people at the Holy Shrines in Northern states of India. He lives in Minocqua, where he enjoys hiking, discovering the Northwoods and making new friends.

2005 RPMS Training Schedule

Diabetes Management Systems	November 16-17, 2004 Rhineland, WI
Patient Registration	February 22-23, 2005 Rhineland, WI
Scheduling	February 24, 2005 Rhineland, WI
PCC Data Entry I	March 22-24, 2005 Bloomington, MN
Immunization	April 26, 2005 Sault Ste. Marie, MI
Community Health Representative	April 27-28, 2005 Sault Ste. Marie, MI
Diabetes Management System	June 14-15, 2005 Sault Ste. Marie, MI
Contract Health Service	July 19-20, 2005 Rhineland, WI
Third Party Billing	July 21-22, 2005 Rhineland, WI
Patient Registration	August 16-17, 2005 Sault Ste. Marie, MI
Scheduling	August 18, 2005 Sault Ste. Marie, MI

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