

Conducted and Presented by:

This Community Health Assessment (CHA) is a product of the collaborative effort of the CCWC, Rocky Boy Health Board (RBHB) and BMC between May 2018 and July 2019. Funding was provided by the Montana Department of Public Health and Human Services (DPHHS).







With Help from a lot of PARTNERS

Box Flder Public Schools Chippewa Cree Housing Authority **Chippewa Cree Law Enforcement** Chippewa Cree Natural Resources Department Chippewa Cree Tribal Court Chippewa Cree Tribal Child Support Program Chippewa Cree Wellness Center CCWC District 4 Human Resources Development Council (HRDC) Our Saviour's Lutheran Church Plain Green Loans **Rocky Boy DVPI RBHC**, Administration and Data Departments

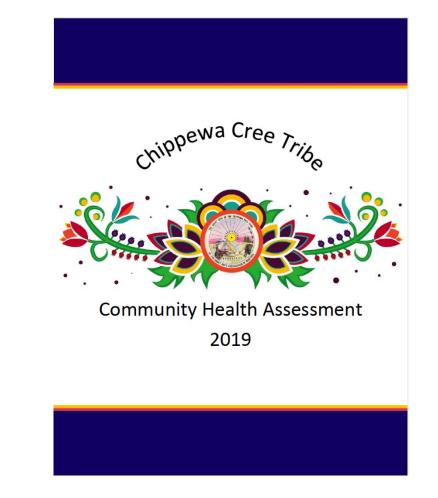
RBHC, Community Health Nurses RBHC, Dental Department RBHC, Department of Behavioral Health RBHC, Emergency Medical Services (EMS) Rocky Boy Methamphetamine/Suicide Prevention Initiative (MSPI) **Rocky Boy Public Schools** Rocky Boy Tobacco Prevention Program **Rocky Boy Veterans Center** Rocky Boy Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) Senior Citizens Center of the Chippewa Cree Tribe Stone Child College White Sky Hope Center (WSHC)



Today's Presentation

Community Health Assessment (CHA)

- About CHAs
- Methodology of this CHA
 - Community Meetings
 - CHA Survey
- FINDINGS
- Thanks and Acknowledgements





To preserve our indigenous ways reflective of each tribe and to protect those involved in our ways, and defend those indigenous ways for each tribe on this Red Turtle Island is of the utmost importance to us as native people.

- Alvin Windy Boy, Cultural Preservationist



What is a CHA?

Definition

 A community health assessment is a process that uses quantitative and qualitative methods to systematically collect and analyze data to understand health within a specific community.

Purpose

 It informs community decisionmaking, the prioritization of health problems, and the development, implementation, and evaluation of community health improvement plans.

-National Association of County and City Health Officials

Methodology

Approach

- Community-based Framework
- Grounded in CHA Best-Practices
- Meets Public Health Accreditation Board (PHAB) Standards for a CHA
 - Primary Data: In-person community survey of 296 participants.
 - Secondary Data: Collection of data from published and unpublished sources.



Stakeholder Meetings

Community Health Priorities Meeting – July 18, 2018

Data Review and Design Meeting – July 18, 2018

Subject Matter Expert Meetings – August 29-30, 2018

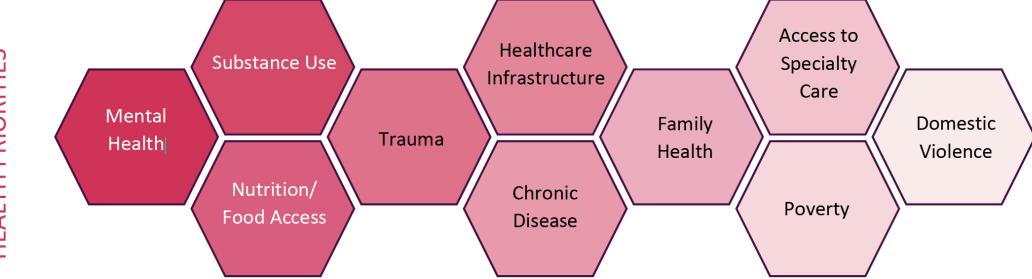
CHA Report Review – June 2019





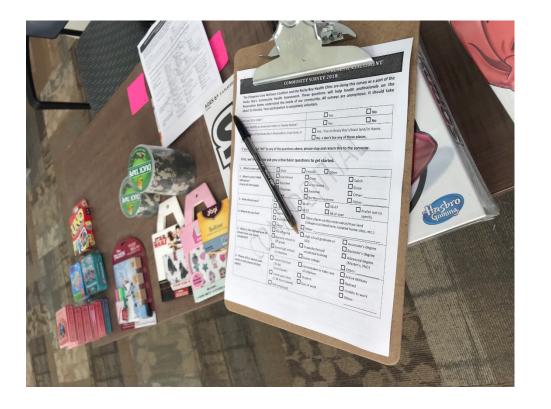
Community Priorities







Survey



Methods of Survey Development

Methods of Survey Analysis

Strengths and Limitations of Survey

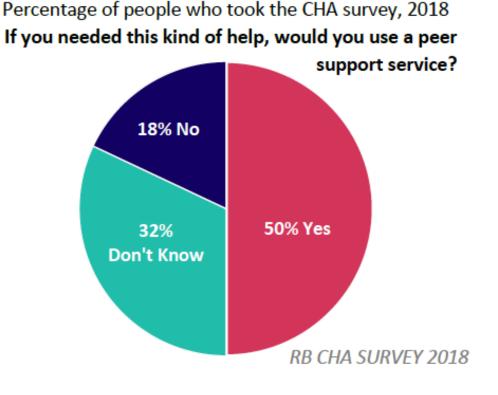


MENTAL HEALTH



MENTAL HEALTH FINDINGS

- Mental illness, suicide, and the related priority of family health are major community concerns.
- One in every five adults surveyed indicated they experienced symptoms of depression.
- 32% of those surveyed reported that they had a friend or relative who had attempted suicide in the past year.
- Community emphasis on emotional stoicism





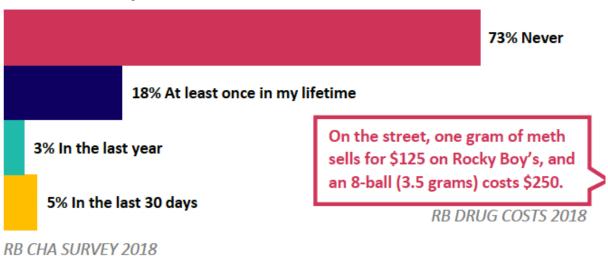
SUBSTANCE USE



SUBSTANCE USE FINDINGS

- Substance use was also identified as a major challenge in the community, with 96% of those surveyed agreeing that drug use was a big problem on the reservation.
- At least 23% of women receiving prenatal screenings at the RBHC admitted using opioids while pregnant.
- 38% of community members surveyed thought that meth was the main drug of abuse on the reservation

Percentage of people who took the CHA survey, 2018 How often have you used meth?





FAMILY HEALTH



FAMILY HEALTH FINDINGS

"In many cultures, elders preserve traditions and share wisdom to help community permanency and balance. Native communities often hold elders in a unique and important social position."

- Related to concerns about mental health, many people expressed the view that if families were able to function in a healthy, strong way – as a unit – that many health issues could be eliminated. This priority area included the goal of resilient families that are able to care for individual members, such as their young children or elders.
- 87% of people who took the CHA survey feel supported and cared for by their family.



TRAUMA



TRAUMA FINDINGS

- Trauma and the need for traumainformed care were identified as major issues facing the community.
- 39% of those surveyed had experienced four or more traumatic events during their childhood, while 68% had a traumatic experience as an adult.
- 44% of those surveyed felt they had unresolved grief from a traumatic experience in adulthood

TYPES OF TRAUMA EXPERIENCED	RBR	MT AI/AN	MT	US
DURING CHILDHOOD	2018	2011	2011	2010
Experienced Verbal Abuse	32%	40%	31%	35%
Experience Physical Abuse	26%	29%	17%	16%
Experience Sexual Abuse	20%	18%	13%	11%
Household Member Mentally III	29%	25%	19%	16%
Household Member in Prison	31%	23%	8%	6%
Household Member Abused Substances	54%	52%	32%	25%
Parents Divorced/Separated	51%	48%	28%	23%
Witnessed Domestic Violence	25%	37%	17%	15%
RB CHA SURVEY 2018, MT BRFSS 2011 ACE, CDC BRFSS 2010 ACE				

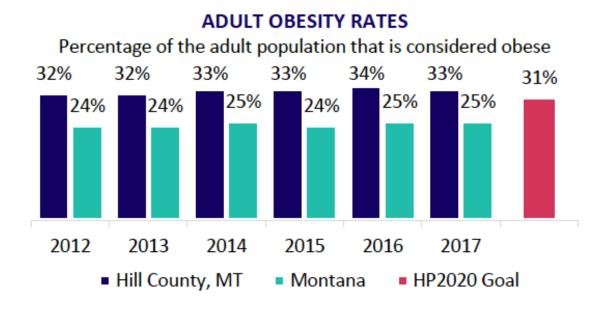


NUTRTION/FOOD ACCESS



NUTRITION/FOOD ACCESS FINDINGS

- Rates of obesity and food insecurity are higher among people living on the RBR than for Montanans as a whole.
- In 2017, at least 50% of students at Rocky Boy and Box Elder High Schools were trying to lose weight.
- 34% of people who took the CHA survey indicated that sometime during the last year they worried about food running out before they had money to buy more, and/or their food did not last and they did not have money to buy more





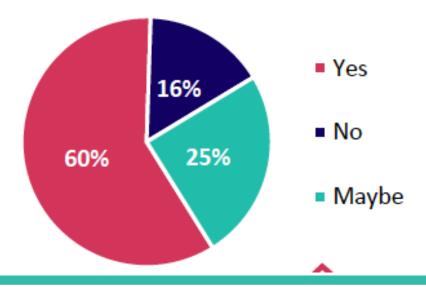
HEALTHCARE INFRASTRUCTURE



HEALTHCARE FINDINGS

- The need for improved healthcare infrastructure, to include consistent funding and access to specialty care through the referral system, was seen by community members as very important.
- Only 44% of community members surveyed reported having a regular doctor that they see for medical issues, and 64% reported trouble accessing adequate medical care in the past year

RB CHA SURVEY: IF A TRADITIONAL HEALER WORKED AT A LOCAL CLINIC, WOULD YOU ASK FOR THEIR HELP WITH HEALTH PROBLEMS?



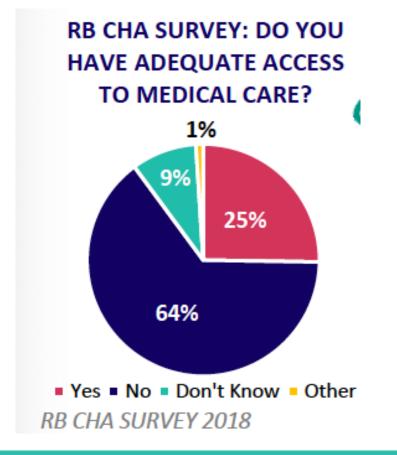


ACCESS TO SPECIALTY CARE



SPECIALITY CARE FINDINGS

- As a component of healthcare infrastructure, concerns about access to specialty care were cited such as not being sent out to specialized clinics in Great Falls in a timely manner.
- There were also larger concerns around the inability to access specialized care off-Reservation, especially when the type of care is generally difficult to access (like substance use and mental healthcare).





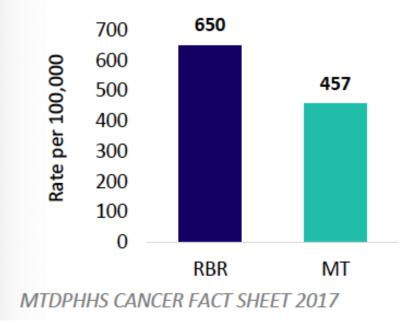




CHRONIC DISEASE FINDINGS

- Issues of obesity and being overweight, diabetes, cancer, and heart disease came up repeatedly and tended to cluster together as one issue under "chronic disease".
- Most commonly, people discussed a lack of opportunities to safely exercise and a lack of education around healthy food purchasing and preparation.
- Finally, people also talked about the need for improved early screening for diabetes and cancer.

CANCER DIAGNOSES (ALL TYPES), 2006-2015





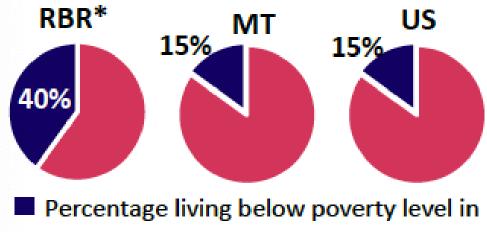
POVERTY



POVERTY FINDINGS

- People are acutely aware that the poverty of the community is directly related to the health of the community, and a priority unto itself.
- Poverty in the community manifests in lack of food and housing, but also encompasses the chronic stress of poverty and its relationship to mental illness and substance abuse.
- Participants commented on the general lack of jobs, and the low pay of jobs that are available.

COMPARATIVE POVERTY RATES



2016 *Weighted average



DOMESTIC VIOLENCE



DOMESTIC VIOLENCE FINDINGS

- People spoke of not only violence amongst intimate partners living together, but also the abuse that happens within families toward children, elders, and women.
- Participants believe that sexual abuse and rape are happening with unsettling frequency, as well as general physical assault.
- Participants also noted the more sophisticated methods of abuse including emotional abuse toward children, and financial abuse aimed at elders living in the home.

In the United States, AI/AN women experienced sexual violence at nearly three times the rate of White women in 2010. AI/AN women were also stalked or experienced physical violence by an intimate partner at nearly two times the rate of White women.



WRAP-UP

- Although this CHA reveals many challenges, it represents a new, positive step for the Chippewa Cree community. The community has already made progress aimed at improving health and wellness, which include the opening of the new RBHC, implementation of a tribal breastfeeding resolution, and the work of several grant-funded initiatives.
- For more information about positive progress as well as areas for improvement beyond the community priorities, please consult the full CHA document.



Thanks to Elinor Nault Wright and the Chippewa Cree Wellness Coalition for vision and trust throughout the CHA process, as well as Jessica Alcorn-Windy Boy and the Rocky Boy Health Center for assistance with data acquisition.

Additional thanks to the many Rocky Boy's community partners, and the CHA team.



For more information: Please contact us at CHEERequity@gmail.com

For a copy of the CHA, please contact Elinor and the CCWC. Thank you!

