

“Health and wellness programming in urban Native American communities: Perspectives of Native Americans with diabetes”



*JASON CHAMPAGNE (RED LAKE BAND OF CHIPPEWA)
MPH STUDENT IN PUBLIC HEALTH NUTRITION,
UNIVERSITY OF MINNESOTA
COMMUNITY WELLNESS CHEF, SHAKOPEE MDEWAKANTON SIOUX
COMMUNITY*

Health Concerns among Urban American Indians



- The majority of American Indians live in urban areas at some point in their lives
- Nearly 1 million American Indians relocated from rural and reservation communities to urban areas between 2000 and 2010
 - 34% increase in a decade
- Some urban health care systems not aware of unique health care needs and issues of American Indians
- Survey of American Indians aged 18 years and older living within the Minneapolis/St. Paul metro area

Survey Methods



- A 30-item needs assessment questionnaire developed based on review of previous research and on topic suggestions from key informants
 - 28 quantitative, 2 qualitative questions
- **Topics covered:**
 - Demographics
 - Self identified major health concerns
 - Awareness of programs currently providing services for these health concerns
 - Food procurement, preparation and security

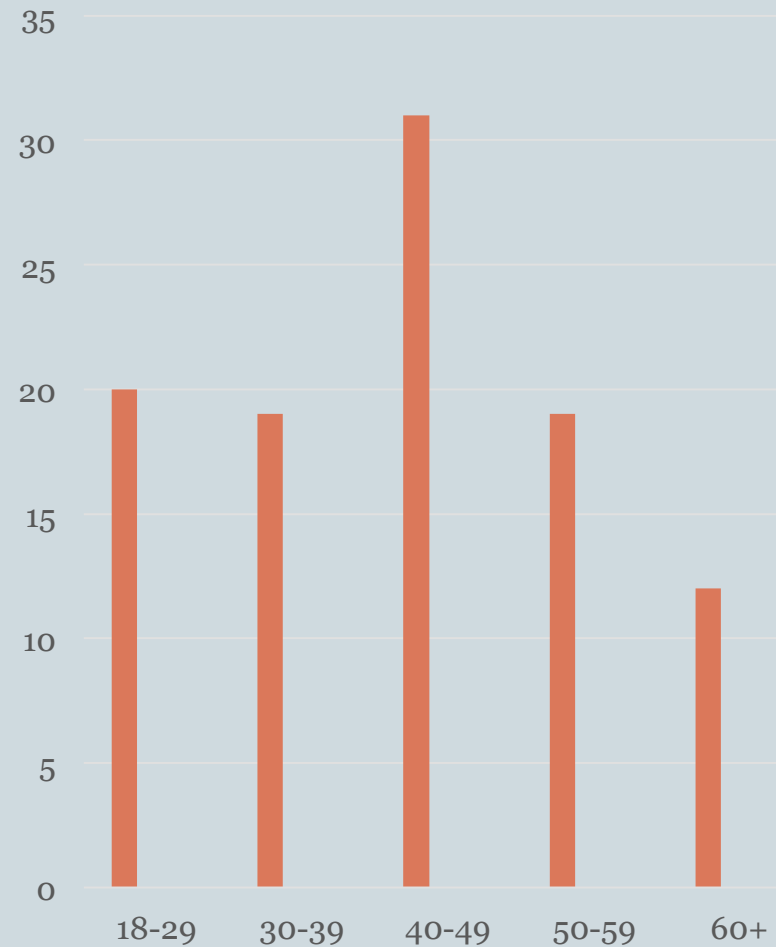
Survey Methods



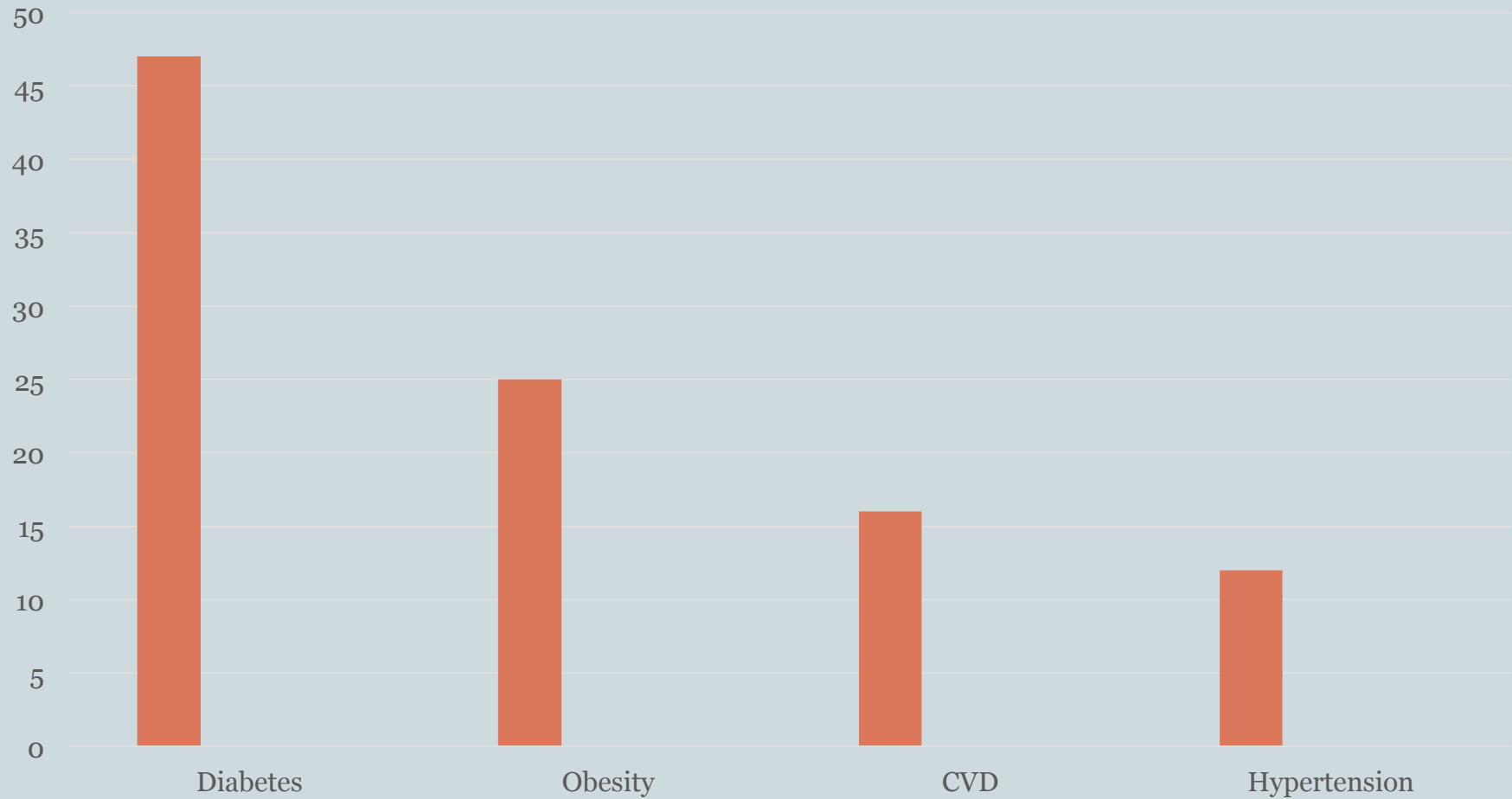
- **Computer-based survey using Survey Monkey**
 - Surveys administered at the Red Lake Embassy in a private office space
 - Assistance provided for completion of survey when needed by study PI
- **Inclusion criteria: self-identification as American Indian, member of a federally recognized tribe, 18 years or older**
- **Exclusion criteria: under 18 years of age, not a member of a federally recognized tribe**

Demographics

- N=65
 - 68 individuals responded, 3 were excluded from analysis due to lack of tribal affiliation
- 59% of respondents were female, 41% were male
- 22 (34%) had diagnosis of diabetes
 - 59% male, 41% female
 - Respondents 30 and older more likely to have diabetes than total sample



Ranking of Health Issues

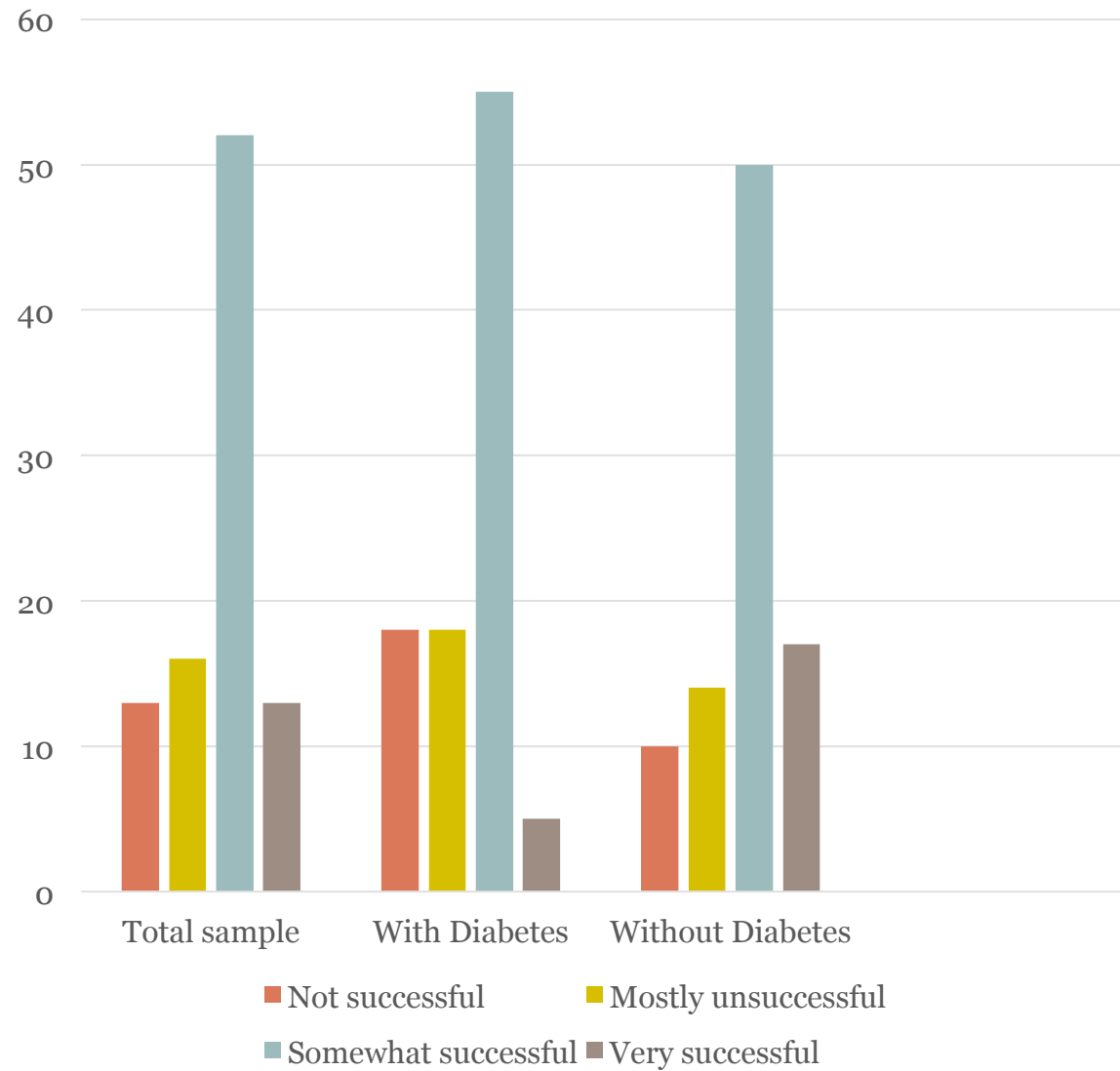




Results: Weight Loss

72% had tried to lose weight in past year

91% among those with diabetes diagnoses



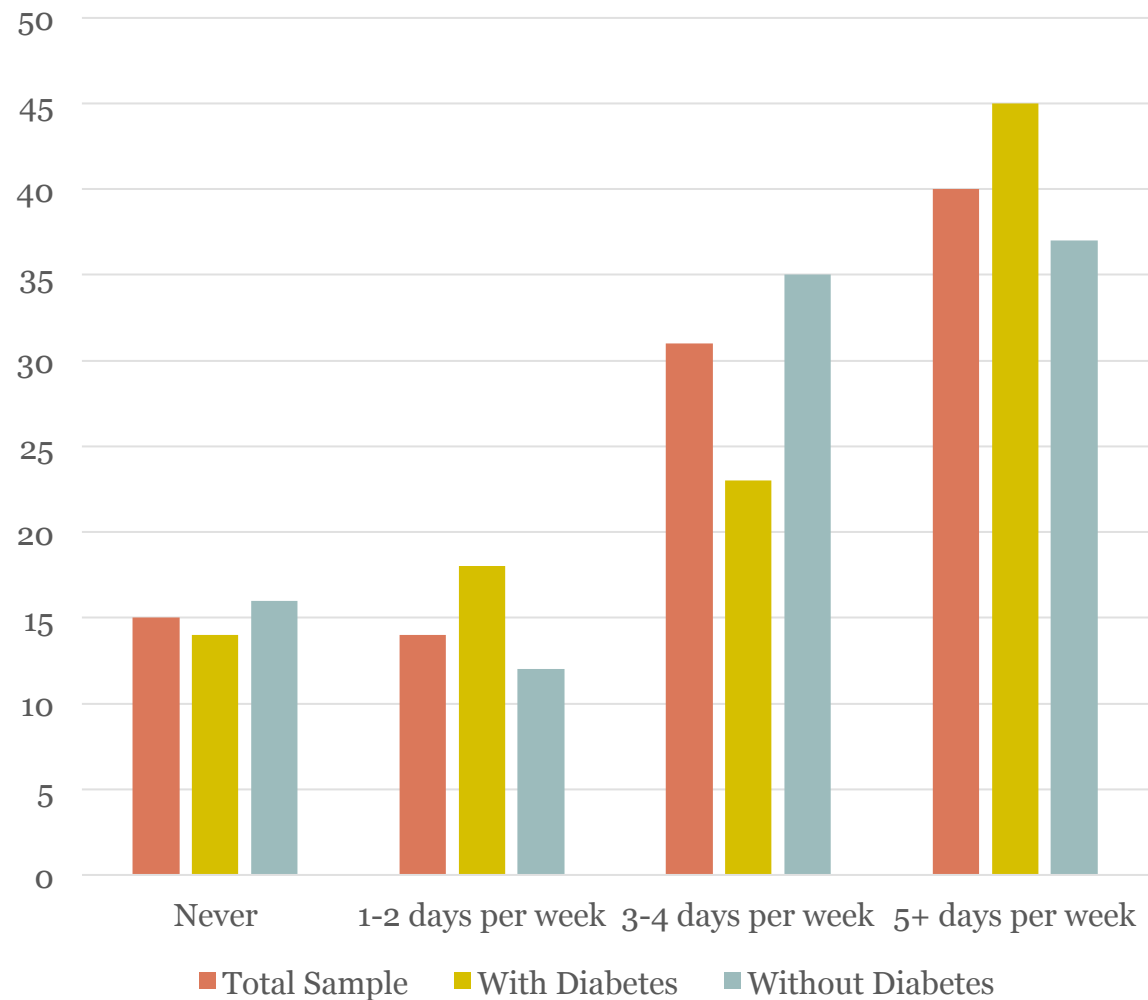


Results: Frequency of Cooking Meals at Home

Cooking meals at home was very common among survey respondents

However, about 15% of people never cooked at home

Frequency of cooking at home

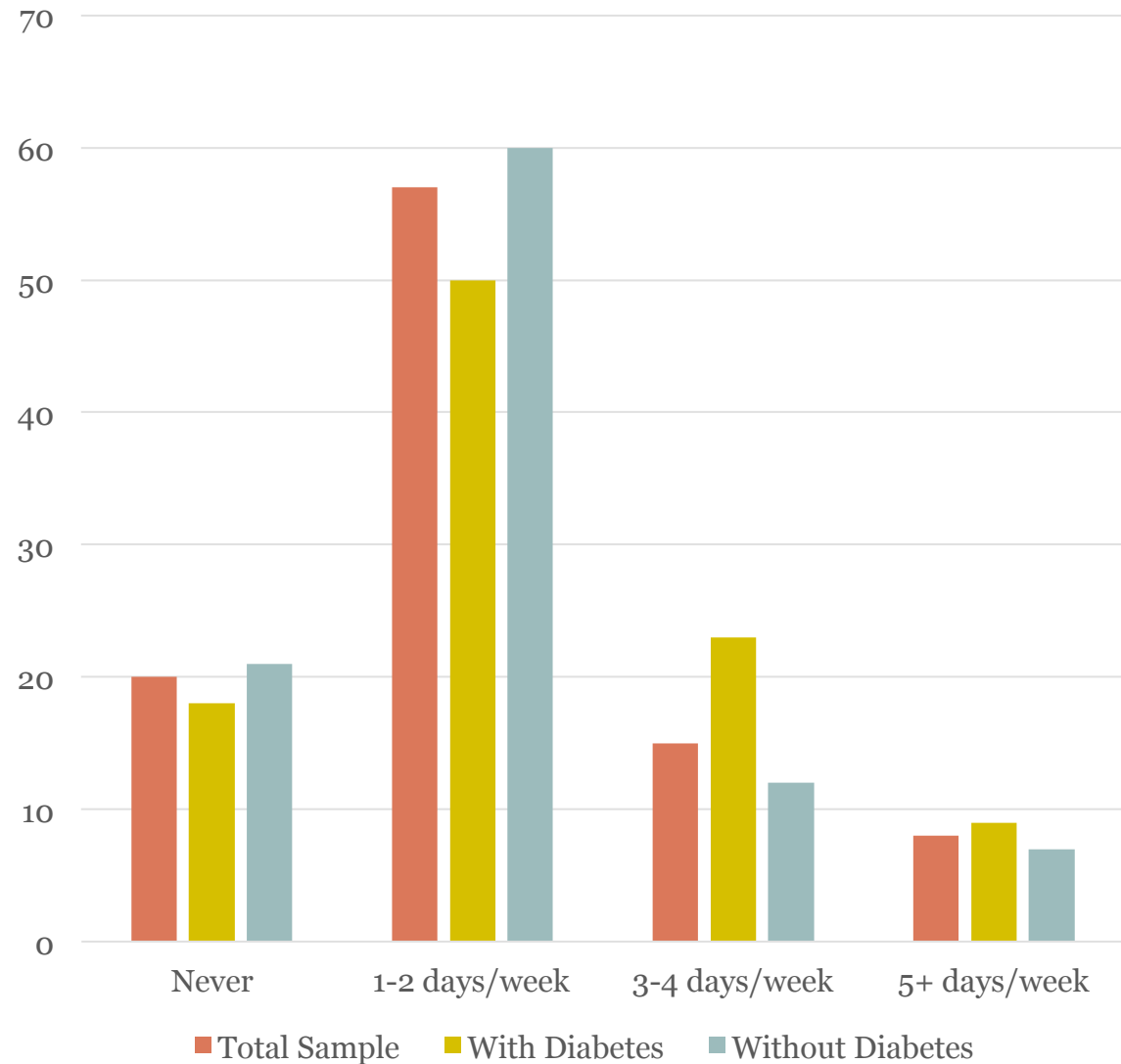




Results: Frequency of Eating Outside the Home

Eating outside the home was common among participants

Interestingly, survey respondents with diabetes reported eating out 3 or more times a week more frequently than those without diabetes



Results: Food Purchasing and Preparation



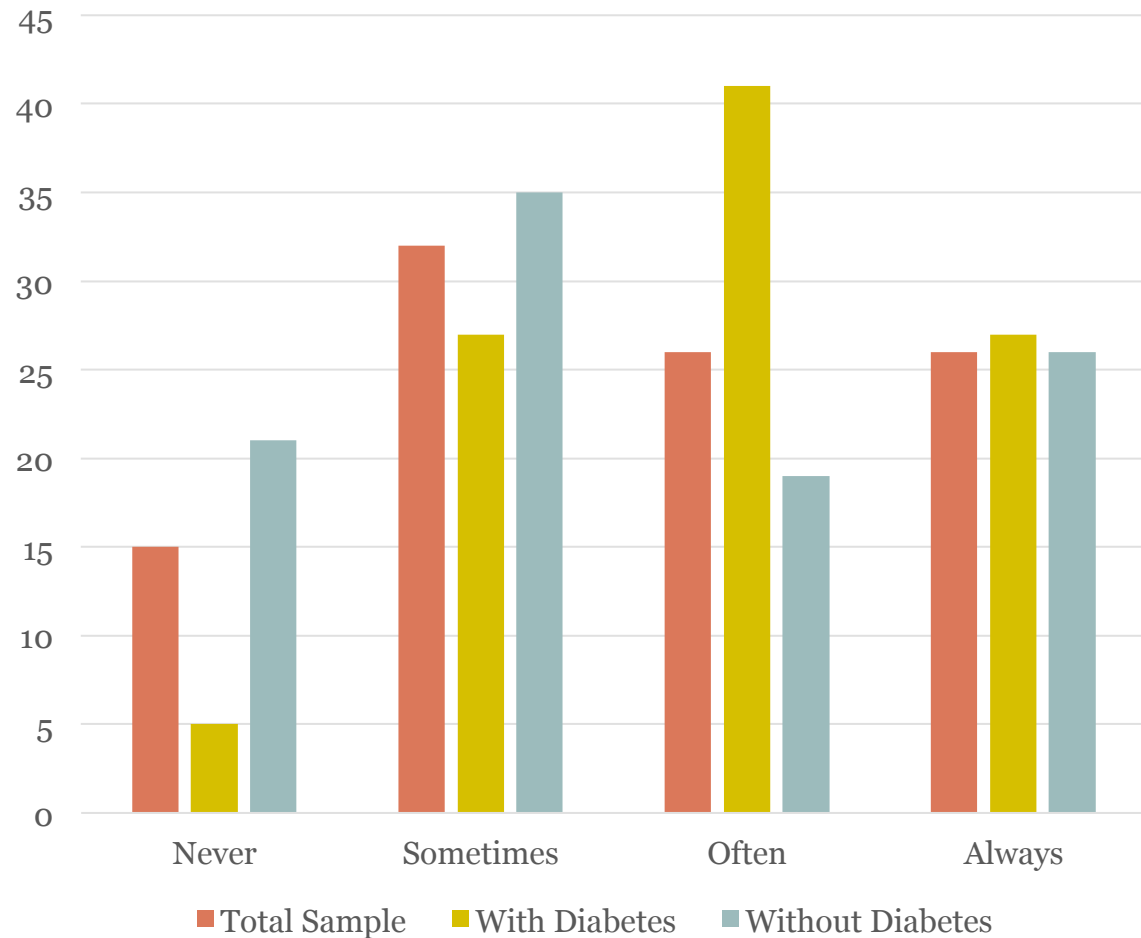
- 77% of respondents had made attempts to cook more healthy foods
 - 73% of those with diabetes
 - 79% of those without diabetes
- 63% had questions about how to cook healthier foods
 - 82% of those with diabetes
- 70% of those surveyed reported reading labels or changing how they shopped to purchase healthier foods
 - 82% with diabetes
- 58% reported difficulty identifying appropriate portion size
 - 82% of those with diabetes



Results: Food Purchasing and Preparation

The cost of purchasing healthy foods was a barrier for many people who completed the survey

Difficulty in Purchasing Healthy Foods Due to Cost



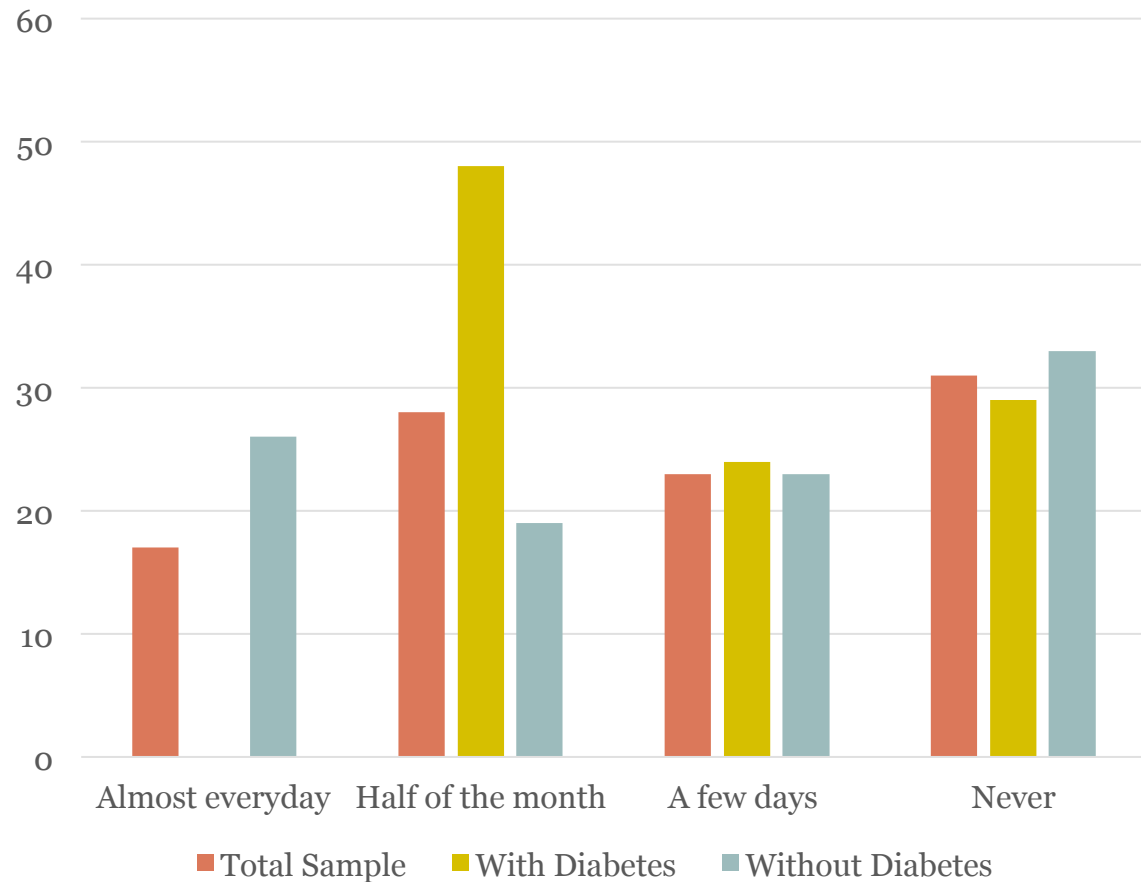


Results: Food Security

Many people worry frequently about not having enough money to feed their families

45% of those surveyed worried half of the month or more about having adequate access to food

How often in the past month have you felt you did not have enough money to feed yourself and your family?

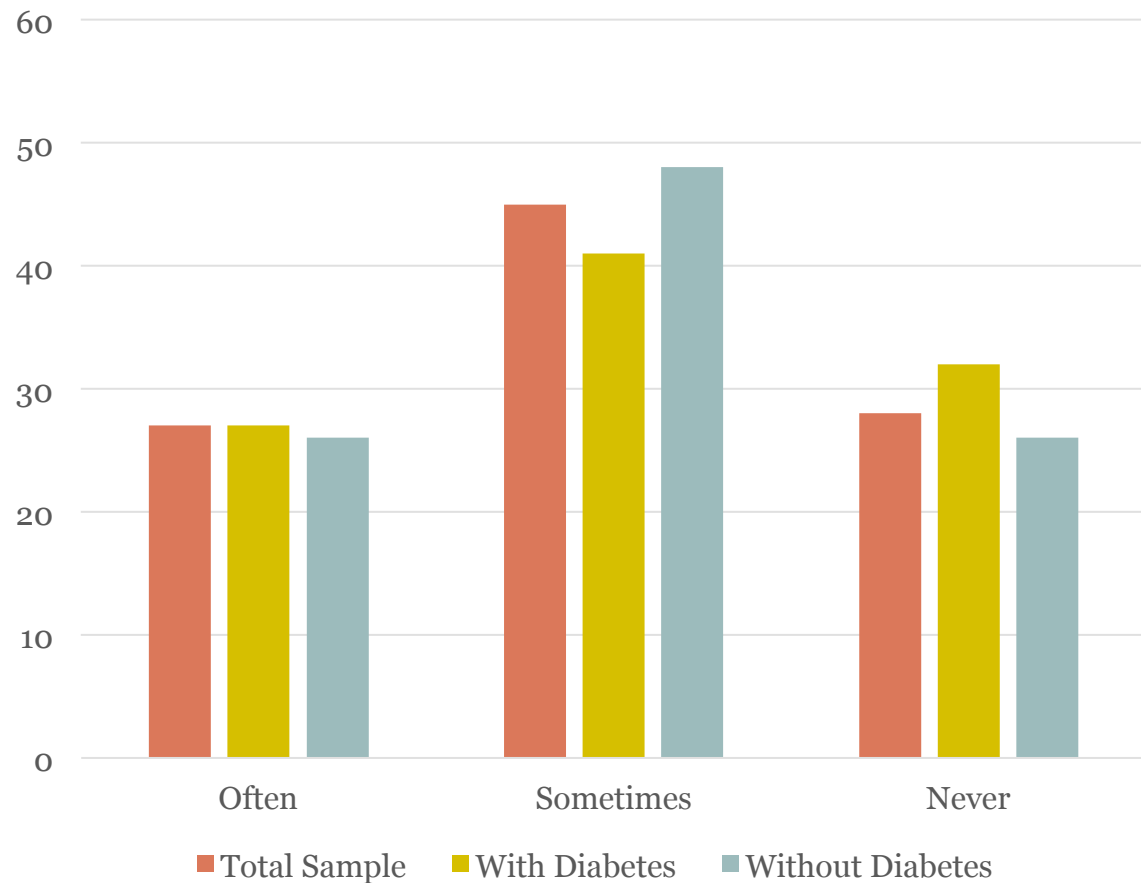




Results: Hunger

More than one quarter of those surveyed ran out of food often in the past year

In the past 12 months, how often did you or your family run out of food and didn't have money to buy more?



Results: Education Programs and Services



- 66% of respondents were aware of programs and services for American Indians that addressed their top 4 health concerns
- Barriers to participation included: wanting more holistic focus (integrating mental, physical and spiritual health),

Results: Interests in Education by Topic



- 62% of respondent were somewhat or very interested in participating in a healthy cooking education program
 - No differences by diabetes diagnosis status
- 69% interested in participating in a program to help people shop for healthy foods on a budget
 - 77% of those with diabetes were interested
- 75% of respondents interested in group walking or physical activity programs
 - 81% interest among those with diabetes

If You Could Develop an Education Program, What Would You Recommend?



- Programs should integrate physical, mental and spiritual health
- Integration of services for health, food support and economic assistance
- Multi-generational programs “that would be attractive to all ages of people”
- More focus on teaching young people to eat right early in life
- More assistance with daily monitoring of blood sugar levels and food (home visits and home delivered meals)
- Incentive programs to encourage continued success
- Gardening and food preservation classes that stress indigenous foods and spiritual connection to the land

Results: Importance of Educational Instructor



- One of the most important considerations for participation in an education program was that the program be taught or led by an American Indian instructor
 - 86% of respondents reported this as a key consideration
 - “We want knowledgeable instructors on subjects that are health concerns of American Indian people”

Discussion



- There is great interest in nutrition, physical activity and disease prevention activities within this urban American Indian community
- Individuals are actively trying to lose weight and eat more healthful diets
- Food cost and security issues are a barrier for many

Recommendations



- Gather valuable knowledge from Native elders, providing them with an opportunity to share their knowledge in program development
 - Multigenerational programming is desired
 - Focus on youth is a community priority
- Provide a primary focus on nutrition education, physical activity, and assistance with basic cooking skills.
 - Incentive programs may help keep people motivated after initial participation

Discussion/Recommendation



- Collaboration from diabetes programs, elderly programs, food shelf programs, and individual Tribal agencies within the urban setting this population resides
- Increase number of AI health professionals
- Initiative programs for youth entering health professions

Conclusion



- This urban American Indian population is interested in improving their overall health and well-being
- How important is it to have AI health professionals instructing programs/classes
- Our AI youth could be the answer to improvement of health and wellness of urban AI individuals

Questions



- Miigwech!!
- Thank you!!