



North Dakota American Indian Health Summit

**Telling the Stories:  
Health Issues Affecting Native Youth**

Robert Foley  
National Native American AIDS Prevention Center  
March 15, 2011

- Explaining the problem
  - Models
  - Risk and protective factors
- How to change behaviors



# Who is NNAAPC

- National, Native-specific agency
- Founded in Oakland, CA in 1987
  - Now headquartered in Denver, CO
- Mission is to address the impact of HIV/AIDS on American Indians, Alaska Natives, and Native Hawaiians through culturally appropriate advocacy, research, education, and policy development in support of healthy Indigenous people.



# NNAAPC Services

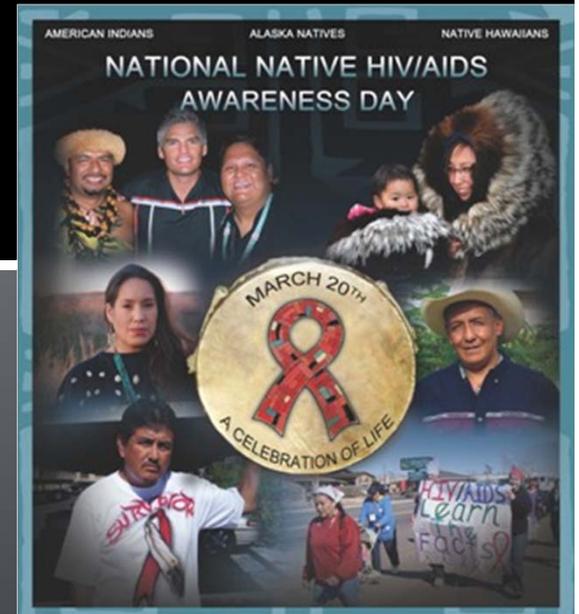
- Research
  - Evidence based practices
- Capacity Building
  - Training
  - Resource brokering
- Awareness
  - Social marketing
  - Materials development



# NNHAAD

## National Native HIV/AIDS Awareness Day

March 20<sup>th</sup> 2011



# About NNHAAD

- National Native HIV/AIDS Awareness Day (NNHAAD) has been held on the first day of Spring since 2007
- It is also a day to honor those who are infected and affected by the disease, as well as to honor those who have passed as a result of AIDS related complications.



# ... A CELEBRATION OF LIFE



# We have the Power!

Knowledge can provides power, and with that comes the empowerment to act accordingly

**One person's knowledge can change individual behavior, but a community's knowledge can change the course of us all**

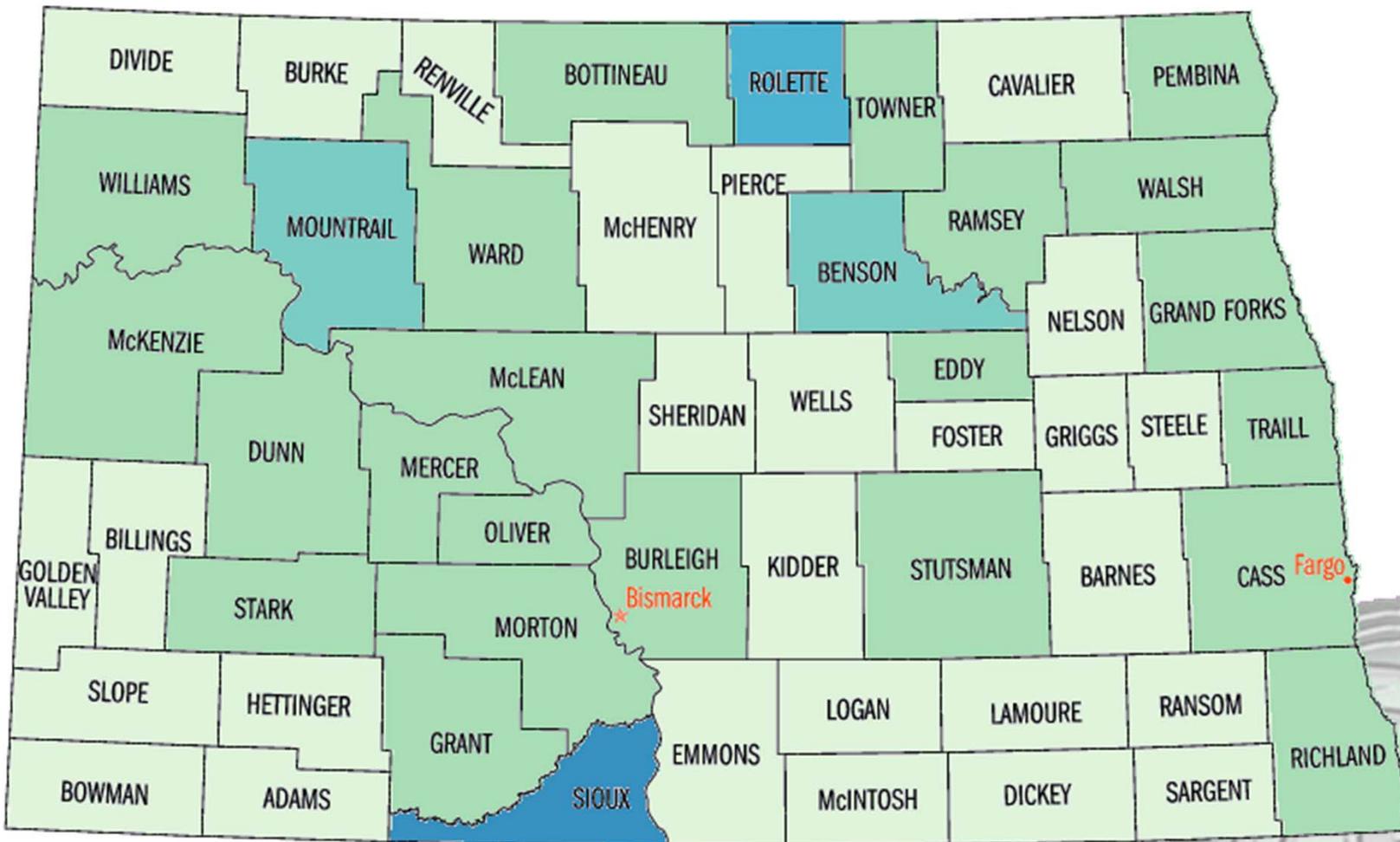


# Native Population in the State

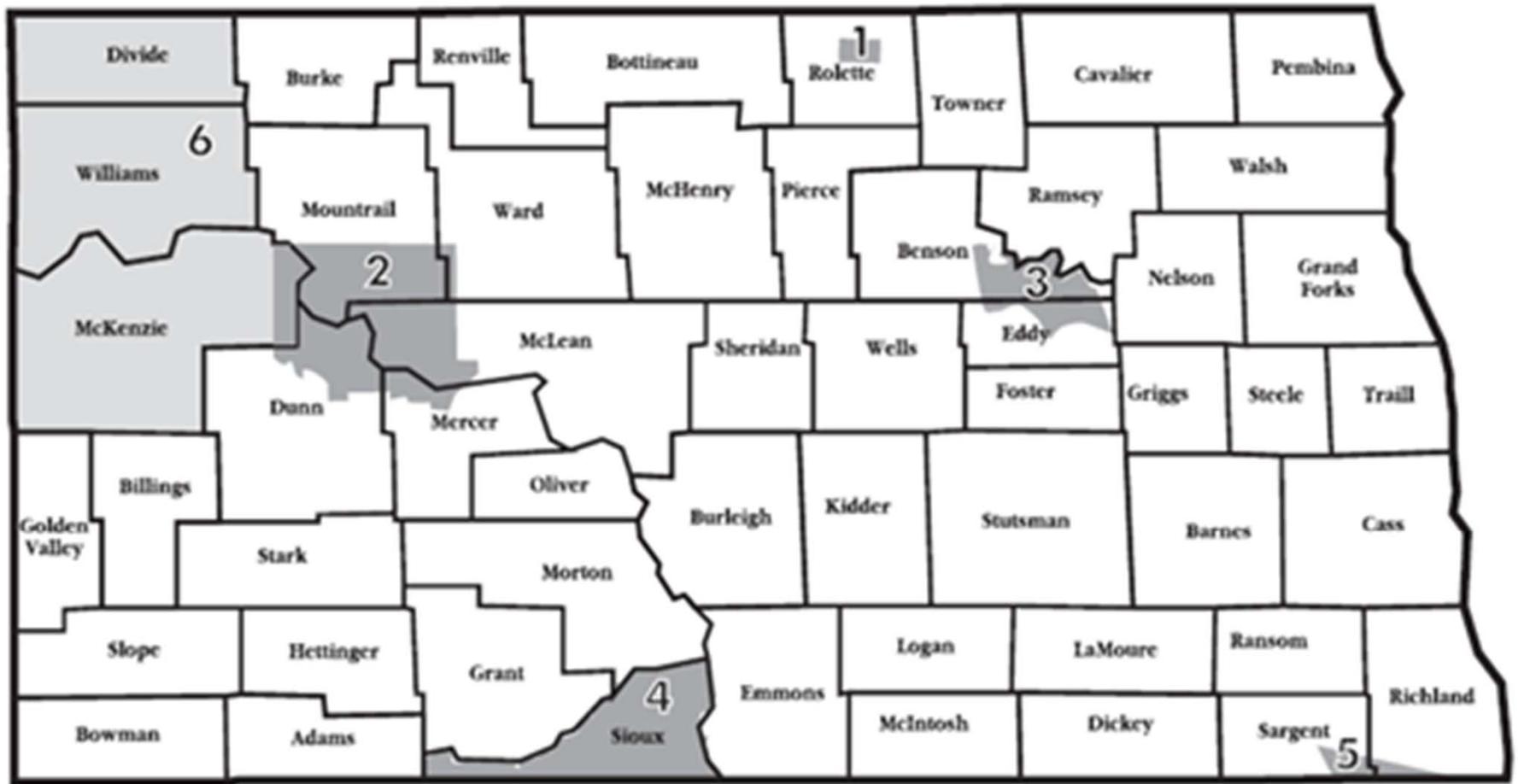
- North Dakota's largest minority at 6.7% of the state's population in 2009
- North Dakota has the 6<sup>th</sup> largest proportion of American Indians in the nation
- There were an estimated 43,167 North Dakotans who considered themselves all or partly Native American in 2009.



# Native Population in North Dakota



# North Dakota Reservations

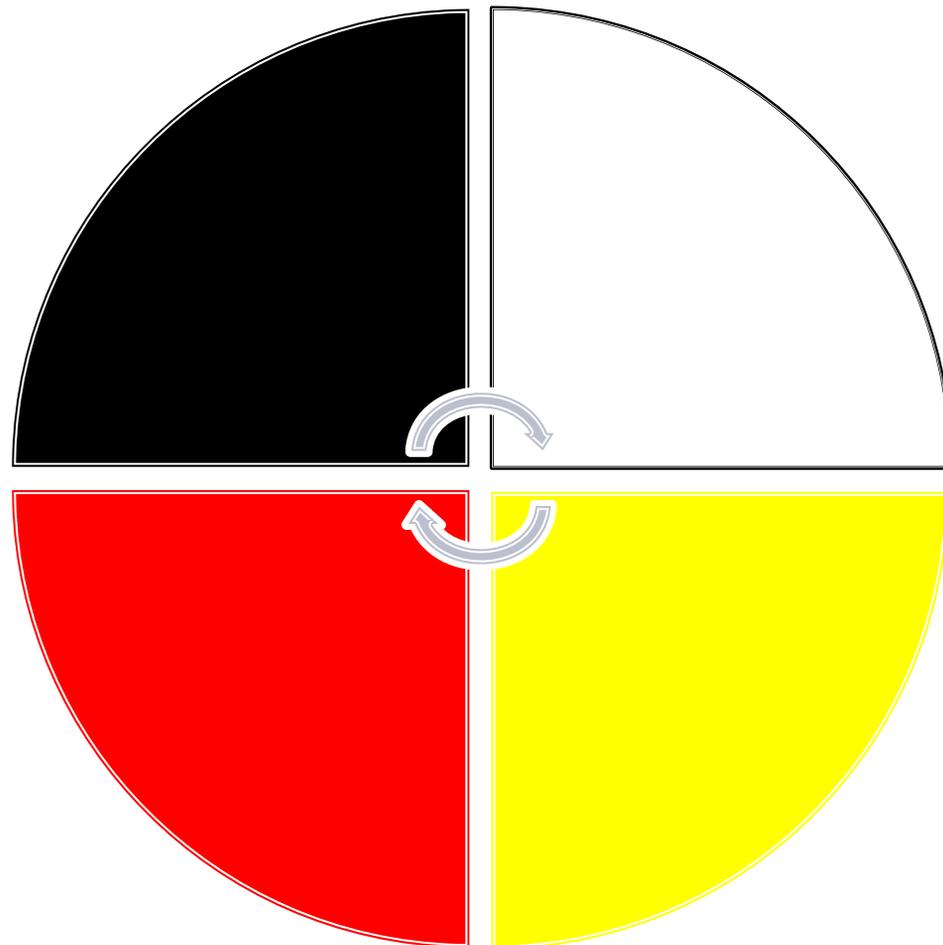


# No Health Issue Lives Alone

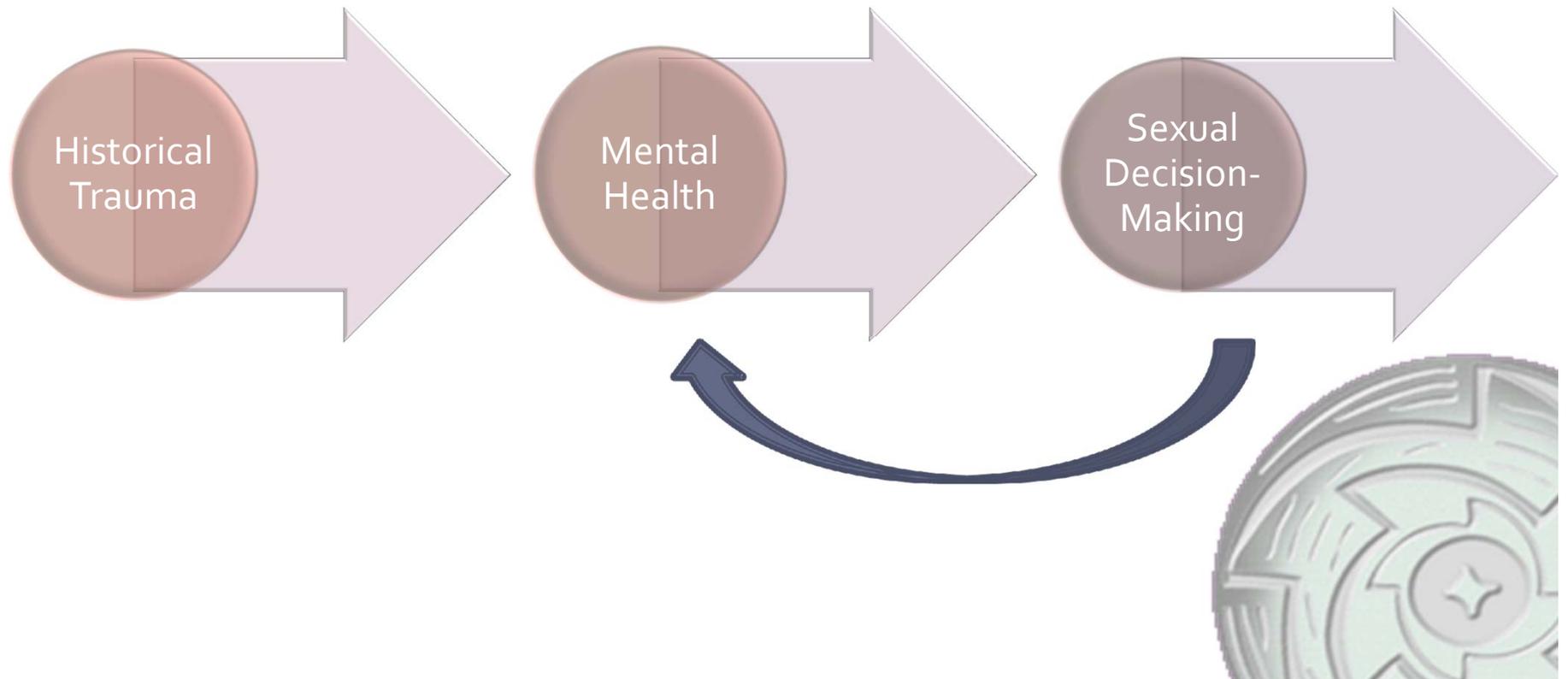
- What impacts one health issue probably ...impacts another
- Health issues impacted by
  - Environments (social, physical, etc.)
  - Families
  - Socioeconomic status
  - Educational attainment
  - And much more



# Balance Among Health Issues



# Interconnectedness of Health



# Health Issues Facing Native Youth Today

- STIs
- HIV
- Unintended Pregnancy
- Diabetes
- Substance Use and Abuse
- Tobacco
- Weight Control
- Mental Health
- Suicide
- Unintentional Injuries



# Sexually Transmitted Infections, 2007

- In the Aberdeen Area IHS
  - Chlamydia rates more than 4 times the US average
    - More than 3 times the rate for women than men
  - Gonorrhoea 50% higher than the US average
- Vast majority of cases are in youth age 15-24

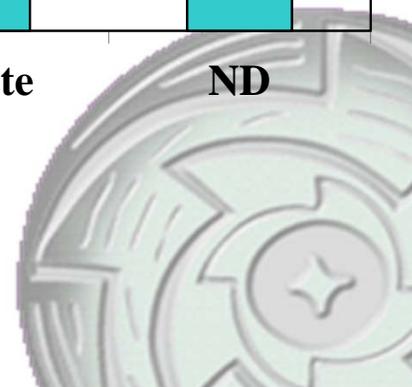
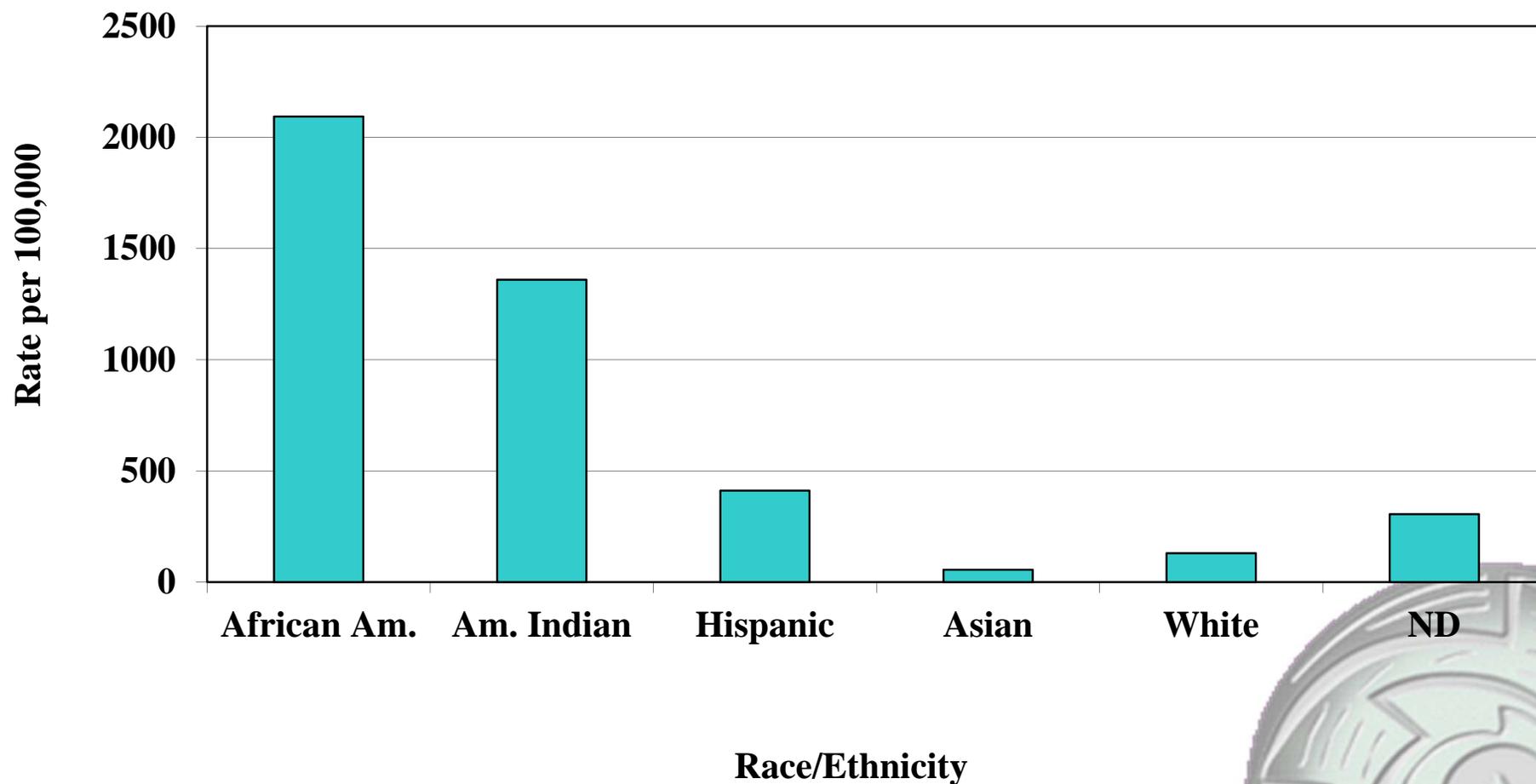


# Sexual Health at a Glance

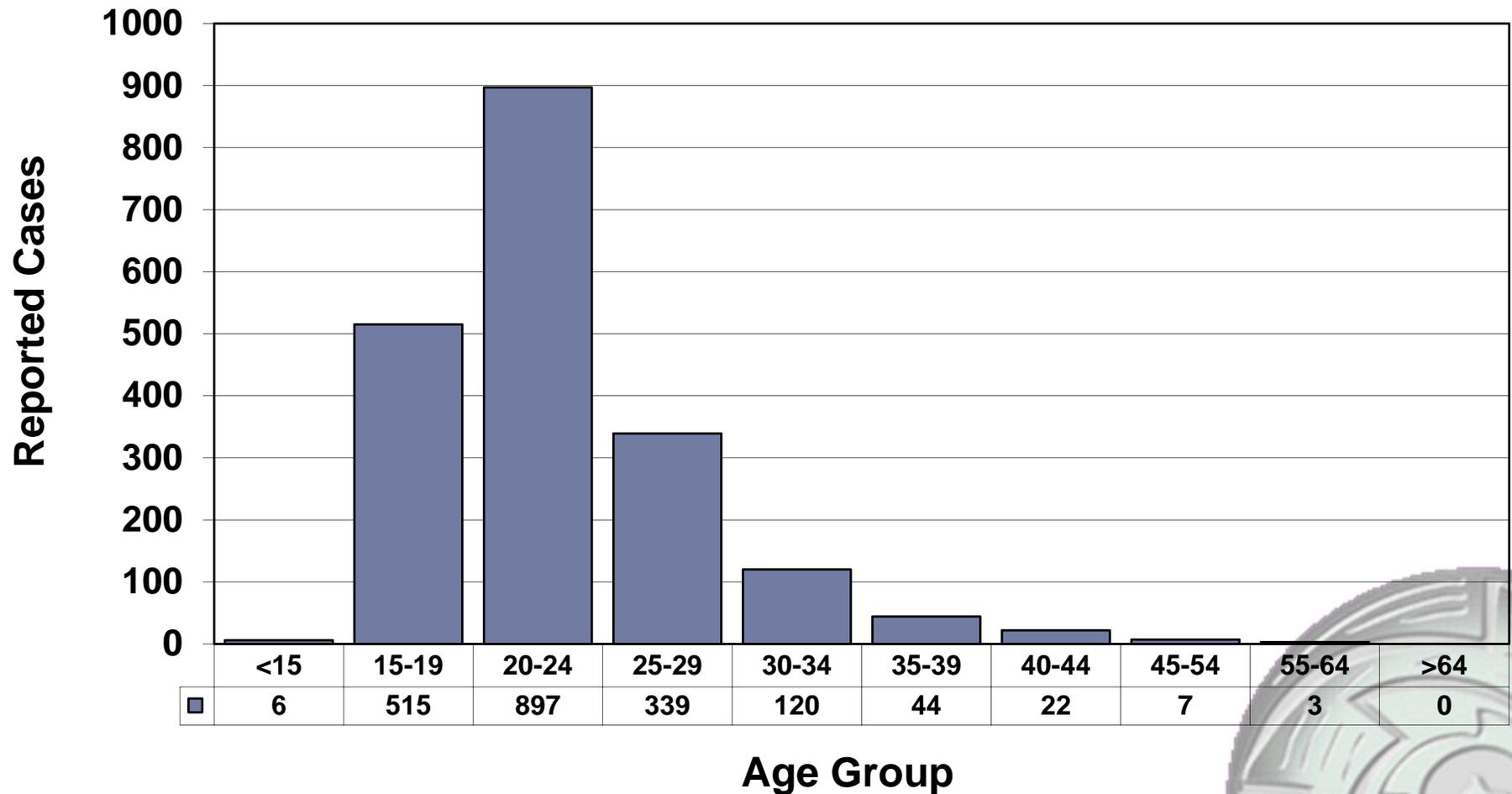
	Teen Pregnancy Rate (per 1,000 people)	Teen Birth Rate (per 1,000 people)	Annual rate of AIDS Diagnoses (per 100,000 people)	Gonorrhea Rate	% of high school students who did not use a condom at last sex
North Dakota	45	29	2.4	23.5	Not reported
National	70	39	12.3	99	39



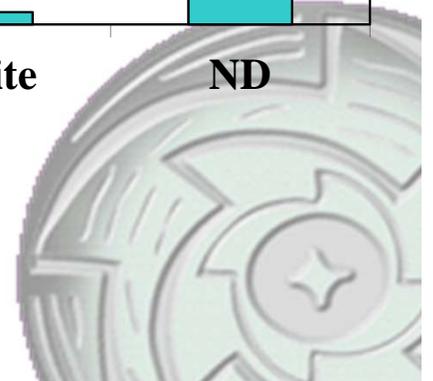
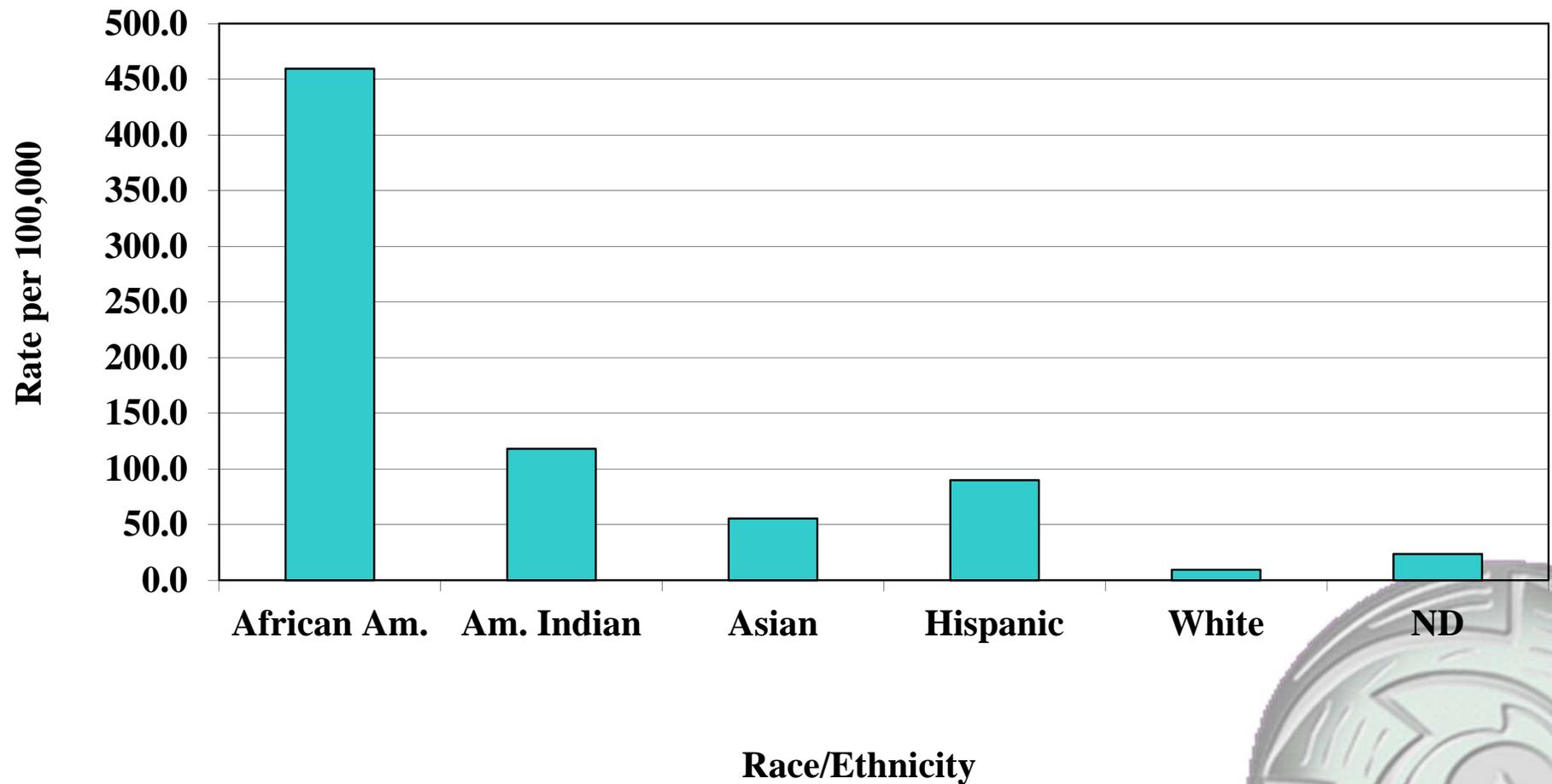
# Chlamydia Rates by Race/Ethnicity North Dakota, 2009



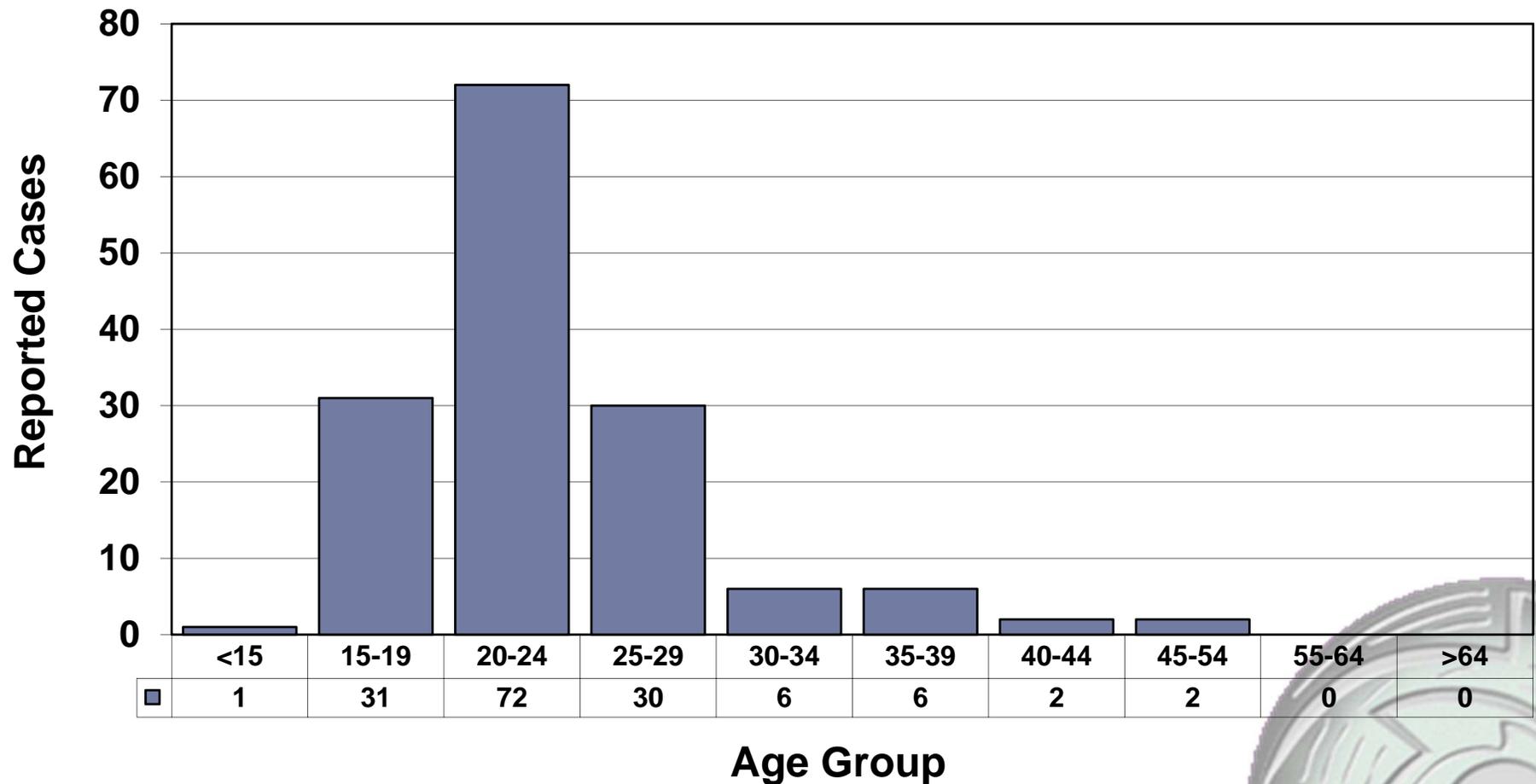
# Reported Cases of Chlamydia by Age Group North Dakota, 2009



# Gonorrhea Rates by Race/Ethnicity North Dakota, 2009



# Reported Cases of Gonorrhea by Age Group North Dakota, 2009



# HIV/AIDS Compared to Other Ethnic Groups

- Native Hawaiians/Other Pacific Islanders (NHOPI) and American Indians/Alaska Natives (AI/AN) have the 3rd and 4th highest rate of new HIV infections, respectively.
- In 2008, the rate was 22.8 per 100,000 persons for NHOPIs and 11.9 per 100,000 for AI/ANs, compared to 73.7 for Black/African Americans, 25.0 for Hispanic/Latinos, 8.2 for Whites, and 7.2 for Asians.
- Of persons who were diagnosed with HIV, AI/ANs had the shortest overall survival time, with 87% living longer than 3 years.



# HIV/AIDS Among Native Children

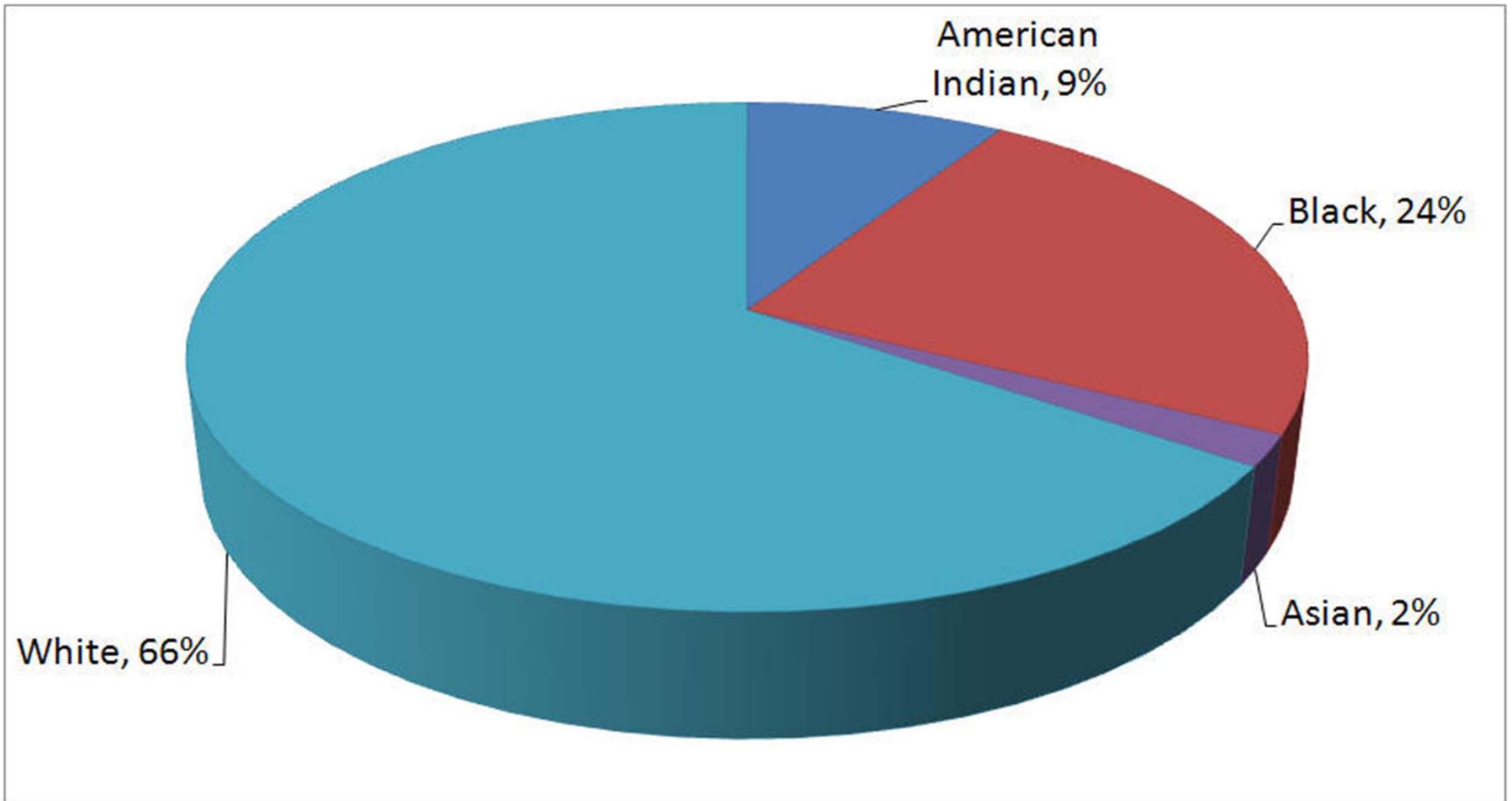
- Since 2005, there have only been 3 American Indian/Alaska Native children under the age of 13 diagnosed with HIV.
- Since 2005, there has not been any Native Hawaiian or Other Pacific Island child diagnosed with HIV.
- Between 2005 and 2008, there was not been a single AIDS diagnosis among a Native child under the age of 13 years of age.



	New HIV/AIDS cases <sup>1</sup>				Total HIV/AIDS Cases Living in ND <sup>2</sup>	
	2009		2008		Number	Percent*
	Number	Percent*	Number	Percent*		
<b>Race/Ethnicity</b>						
American Indian	2	13%	1	8%	29	13%
Black	4	25%	2	17%	38	17%
Hispanic (all races)	0	0%	0	0%	8	4%
Asian	0	0%	0	0%	1	1%
White	10	63%	9	75%	154	69%
<b>Risk</b>						
Heterosexual contact	5	31%	4	33%	75	34%
Injecting drug use (IDU)	1	6%	0	0%	4	2%
Male-to-male sexual contact	7	44%	6	50%	106	48%
MSM/IDU	1	6%	0	0%	9	4%
Sex with IDU	0	0%	0	0%	9	4%
Other	1	6%	1	8%	4	2%
Risk not specified	1	6%	1	8%	15	7%
<b>Age Group</b>						
<15	0	0%	0	0%	9	4%
15-24	2	13%	0	0%	31	14%
25-34	4	25%	3	25%	87	39%
35-44	6	38%	7	58%	59	27%
45-54	3	19%	1	8%	29	13%
55-64	1	6%	1	8%	7	3%
65+	0	0%	0	0%	0	0%
<b>Total</b>	16		12		222	

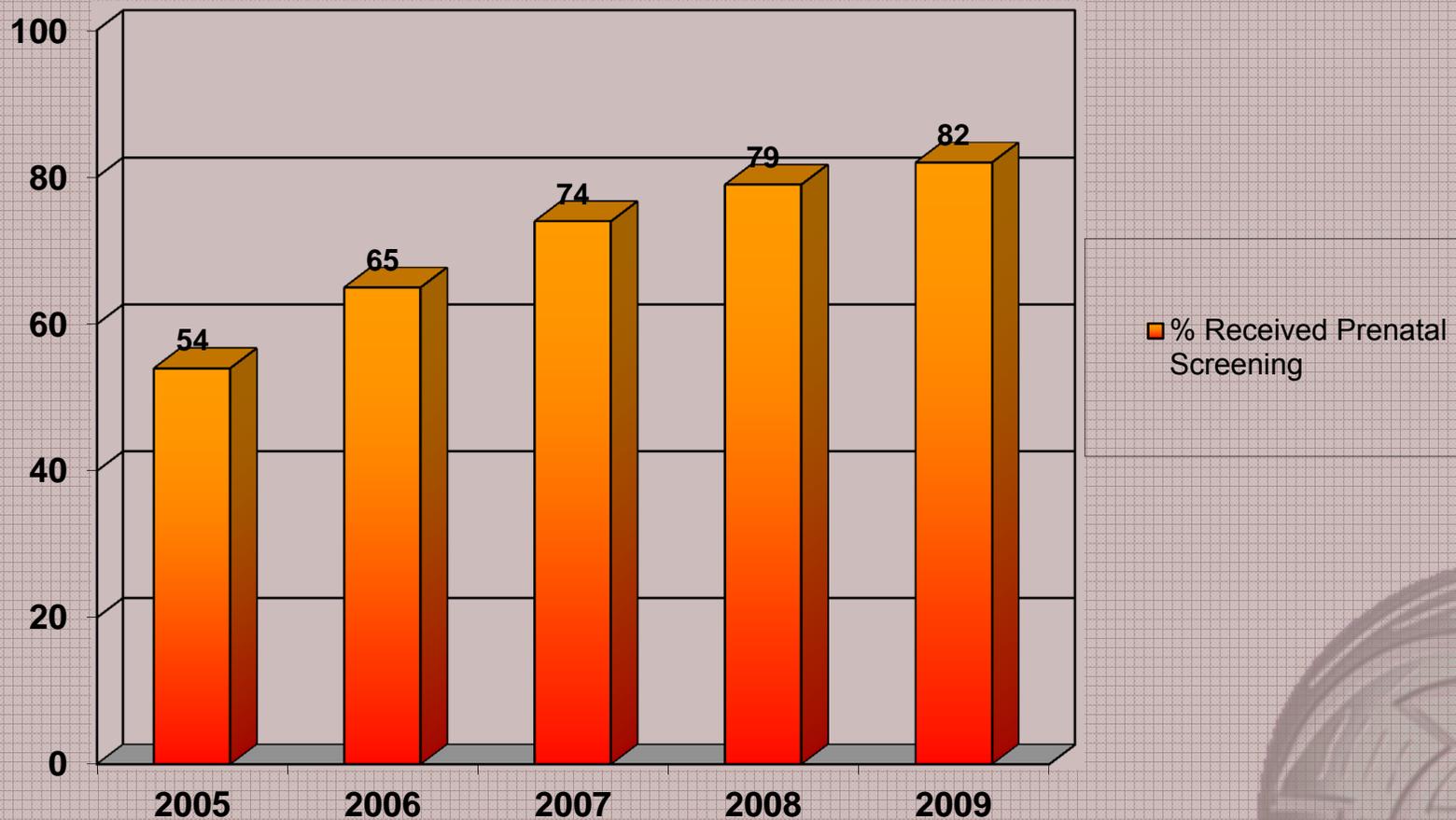
\*Due to rounding, totals may not equal 100%. New HIV/AIDS cases reflects HIV cases that were newly diagnosed in North Dakota during the listed time period. These cases include those which are classified as AIDS cases at initial diagnosis. <sup>2</sup>Total HIV/AIDS cases living in ND reflect HIV/AIDS cases which were alive and residing in North Dakota as of December 31, 2009.

# Race/Ethnicity of HIV/AIDS Cases Diagnosed in ND, 2005 - 2009



# Increase In Testing Efforts

PERCENTAGE OF EXPECTING MOTHERS RECEIVING PRENATAL HIV SCREENINGS  
BY IHS ANNUALLY



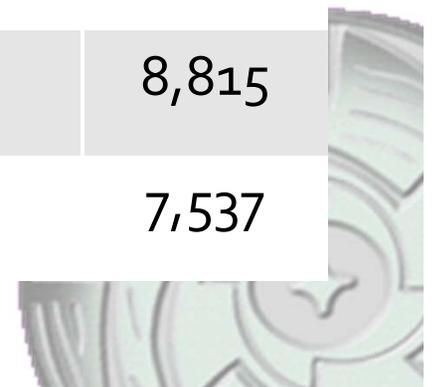
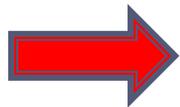
# Unintended Pregnancy

- Between 1988 and 2000, teenage pregnancy rates declined in every state, and between 2000 and 2005, they fell in every state except North Dakota.
  - 5<sup>th</sup> lowest rates of teen pregnancies.



# Number of ND Teen Births by Race/Ethnicity

Statistic	North Dakota	United States
Non-Hispanic White Girls, 2008	380	168,684
Hispanic Girls Age, 2008	47	144,914
Non-Hispanic Black Girls, 2008	15	104,559
Native American Girls, 2008	235	8,815
Asian/Pacific Islander Girls, 2008	1	7,537

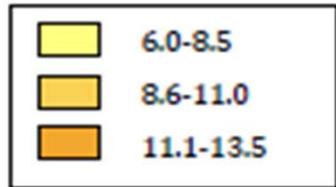
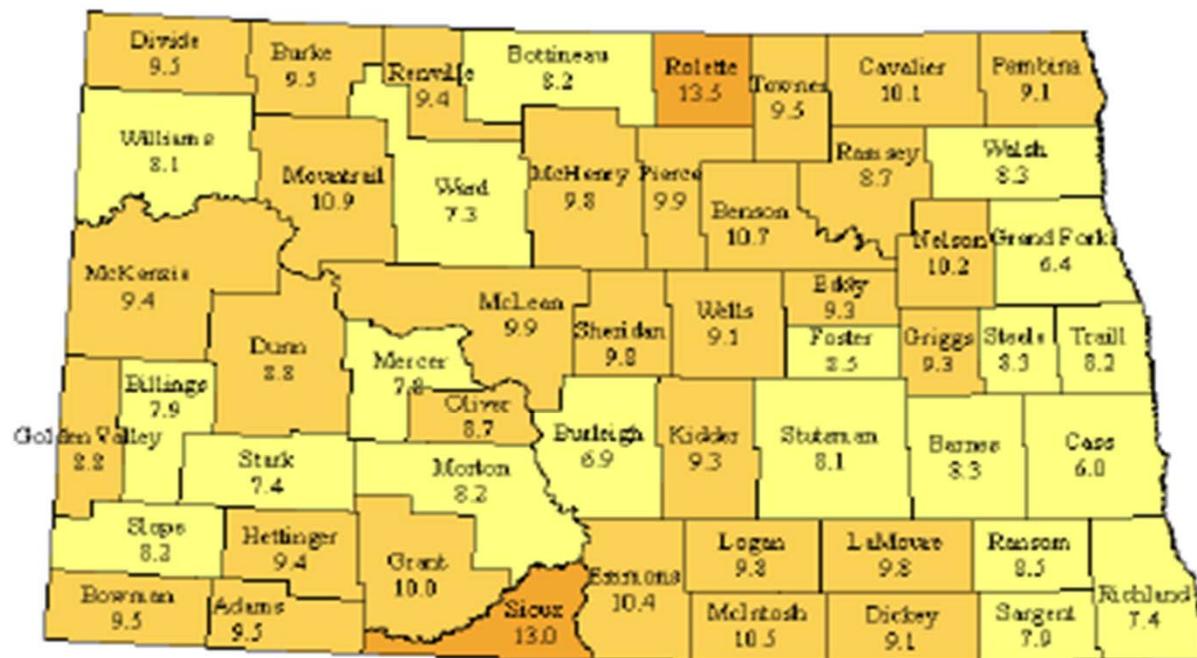


# Diabetes

- Diabetes is the 7<sup>th</sup> leading cause of death in North Dakota, accounting for 3.5% of all deaths in the state in 2008
- Diabetes was a contributing factor in an additional 7.6% of deaths
- Type 2 diabetes is more common in Native American children under the age of 10 than in other races



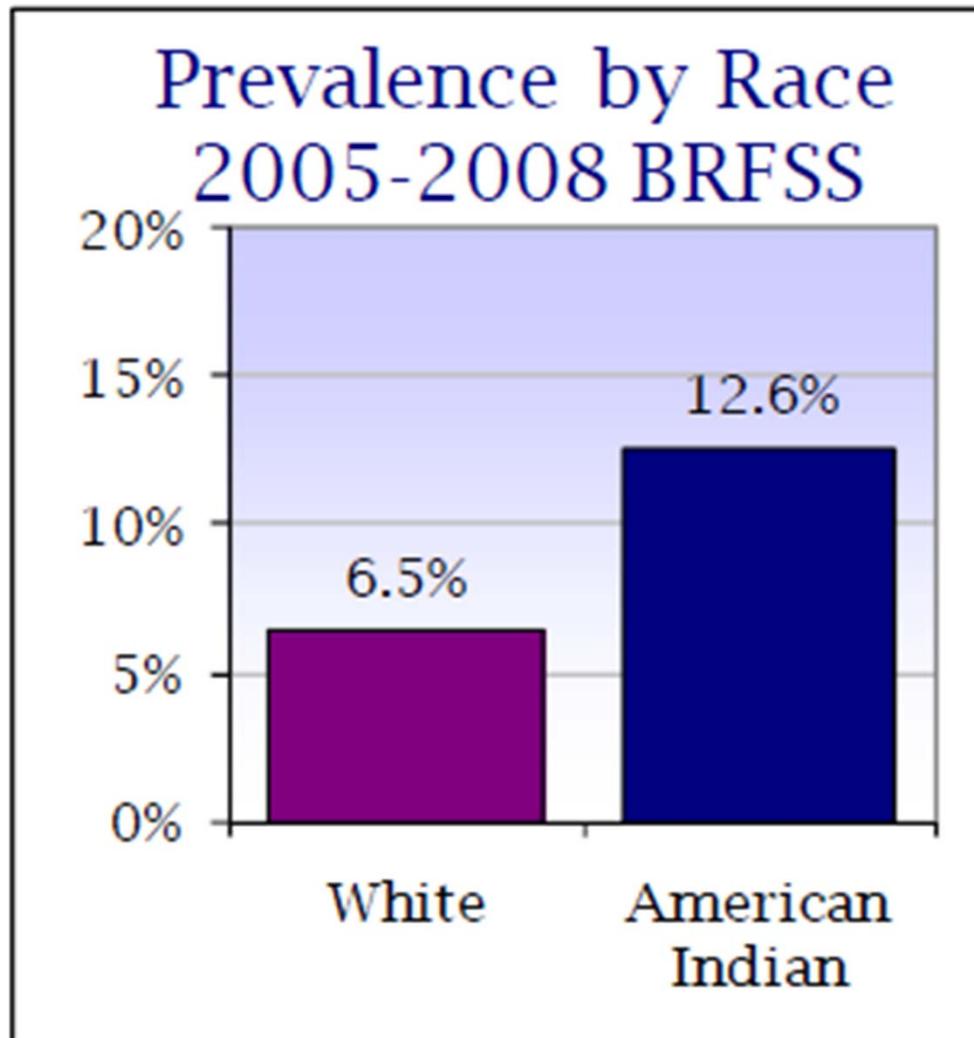
Figure 3. Prevalence of Diabetes by County 2008



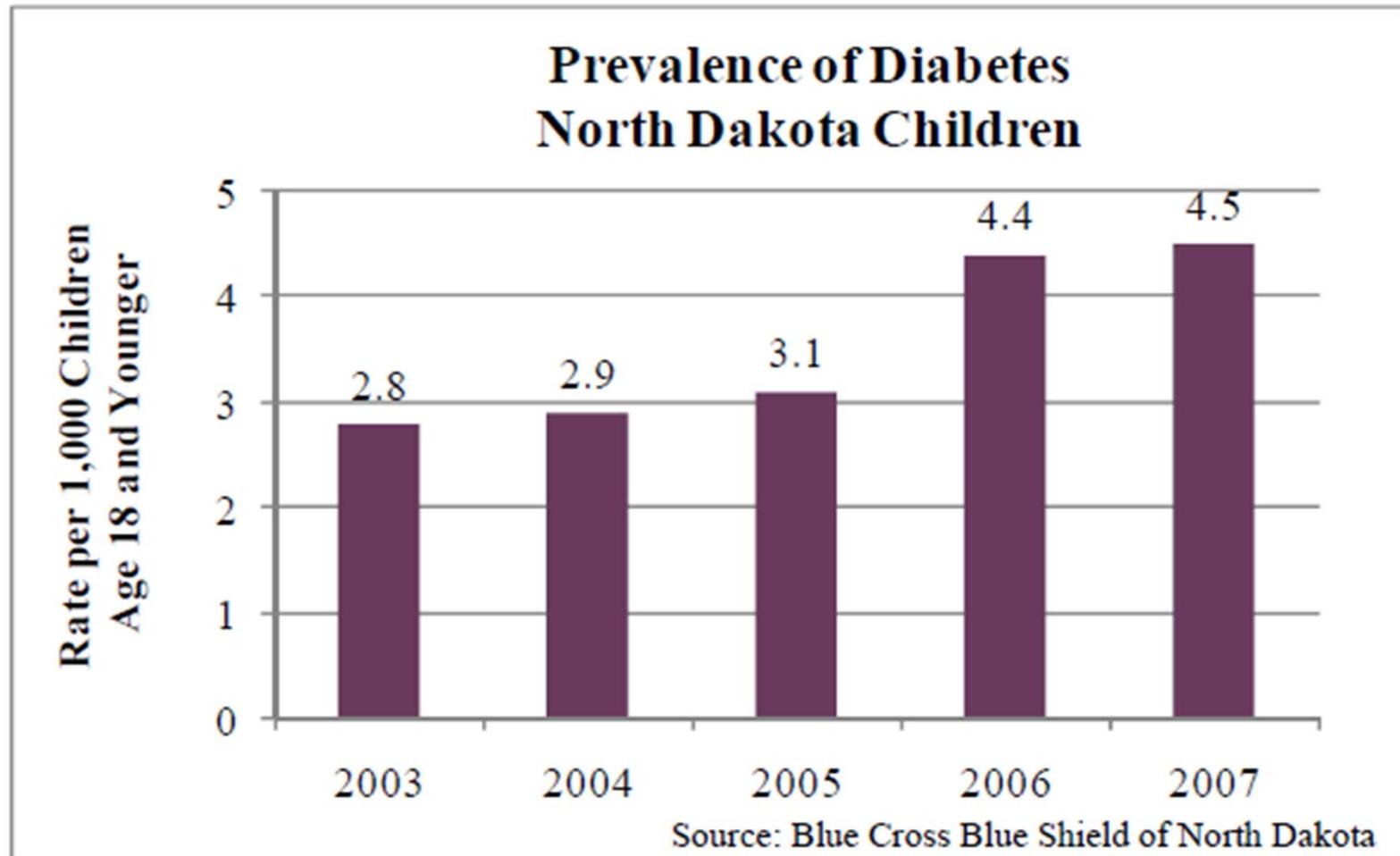
Source: Centers for Disease Control and Prevention and the North Dakota Department of Health



# Diabetes by Race, in North Dakota



# Diabetes in Children, in North Dakota

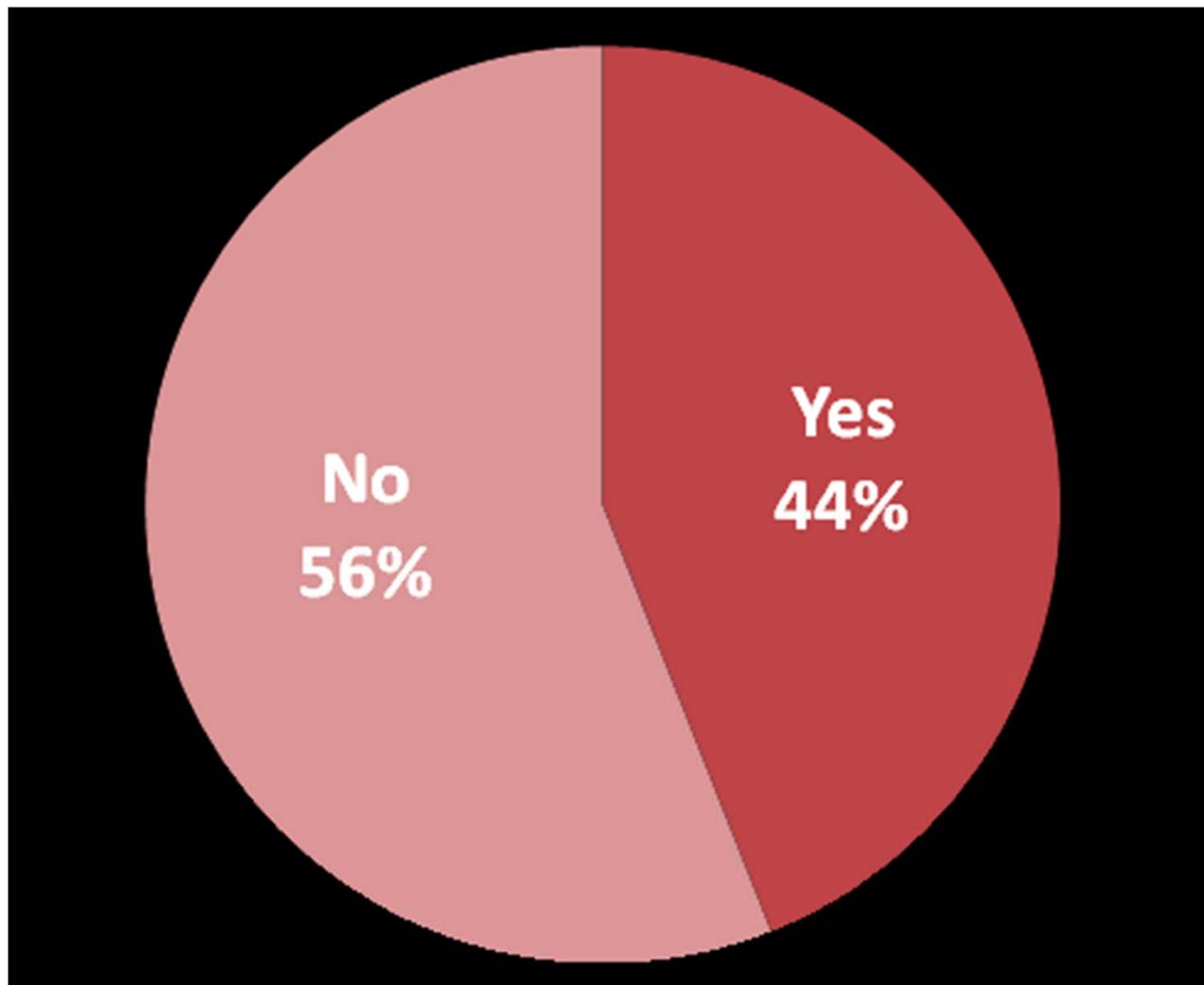


# Substance Use & Abuse

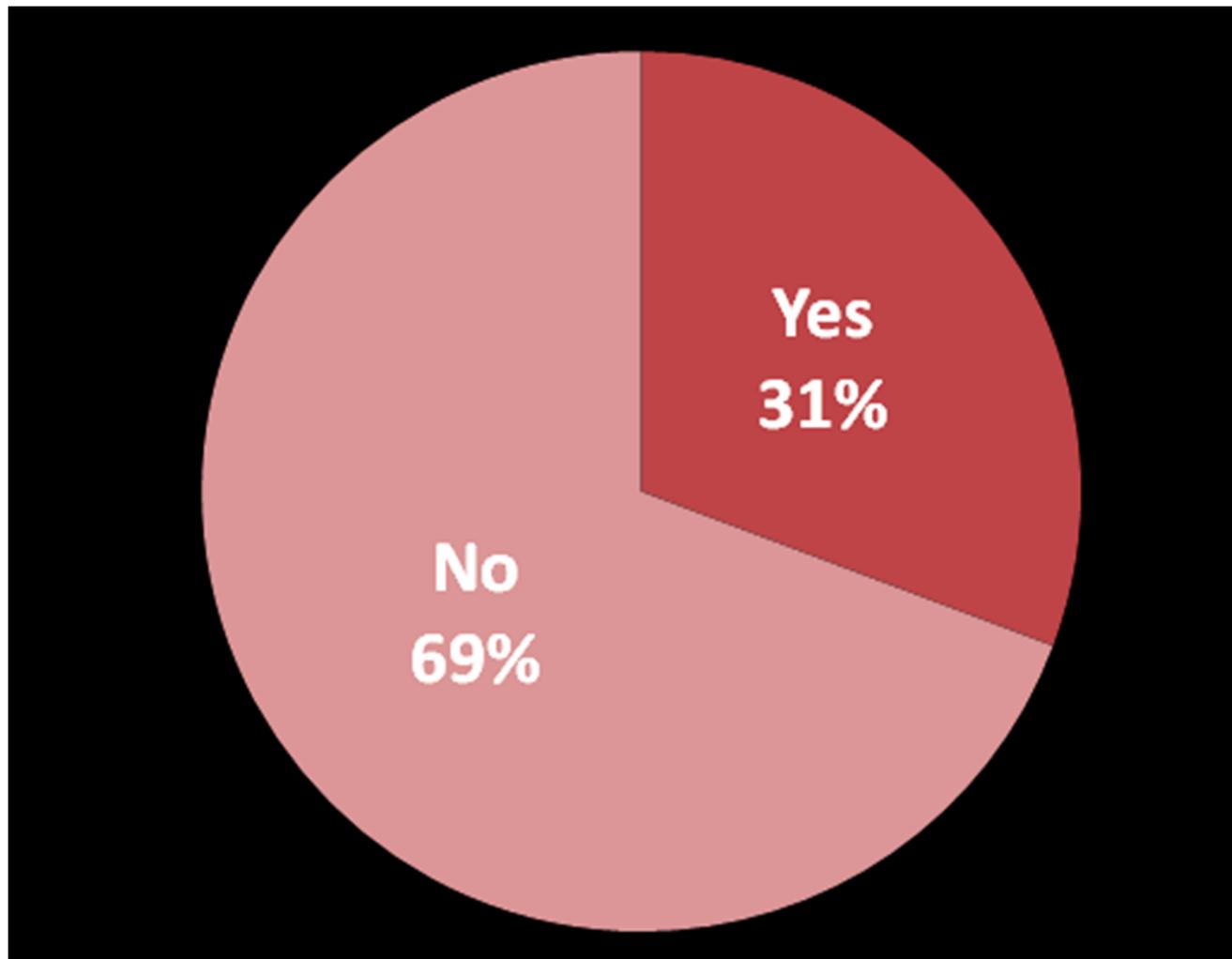
- Decrease in past 30 day alcohol use among Native Americans
  - Binge drinking still ranks the highest
- North Dakota ranks #1 in the nation for the rate of binge drinking among 18-25 year olds
  - 3 out of 4 high school students believe people who binge drink once or twice each week do not put themselves at great risk
- 1 out of 5 ND high school students start using marijuana between ages 13 & 16
- 3% used meth
- 11% used inhalants
- 13% OTC drugs to get high



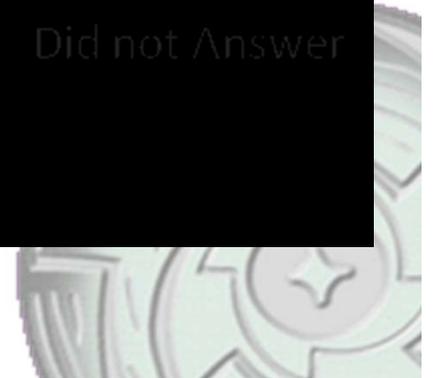
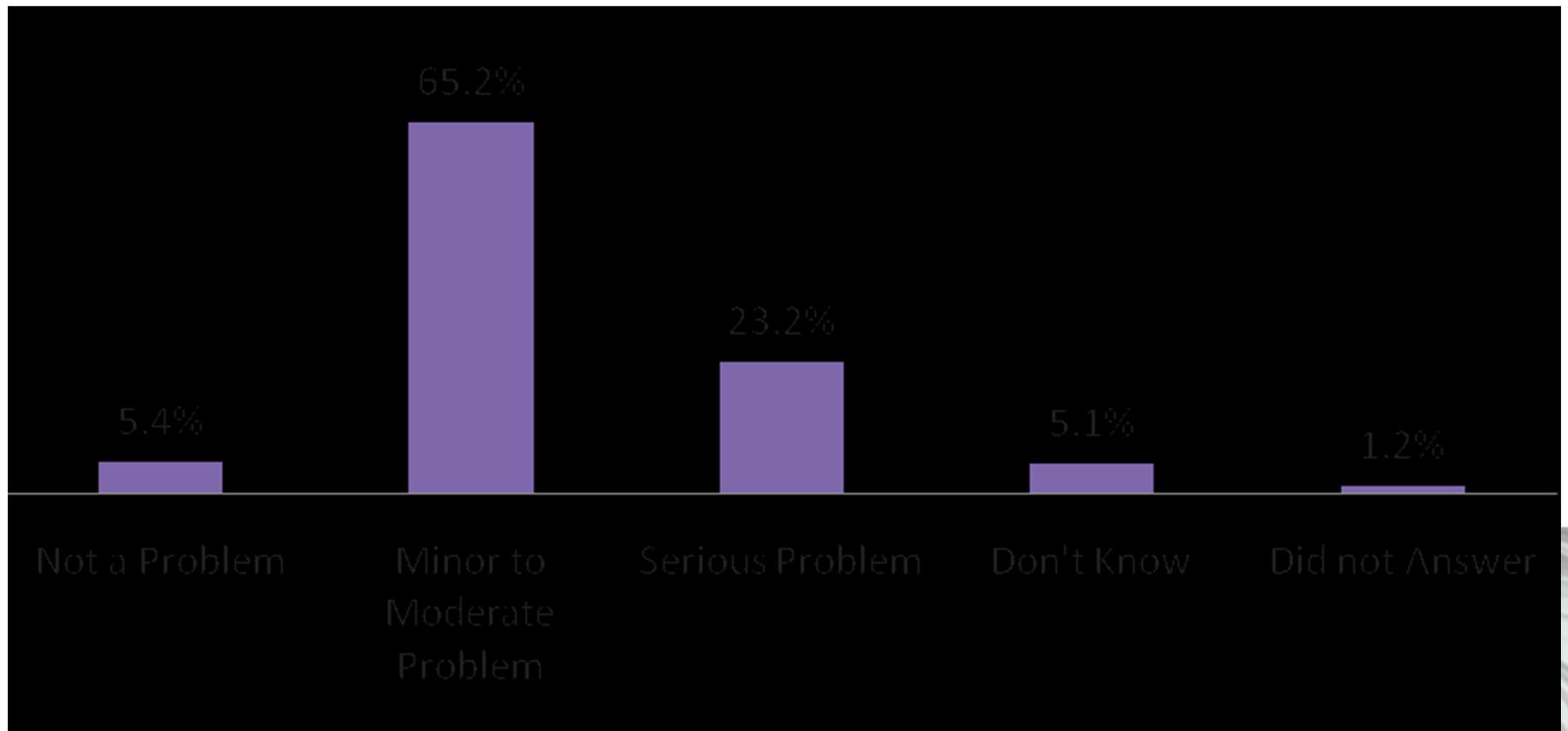
# High Schoolers who have had a drink in the past 30 days



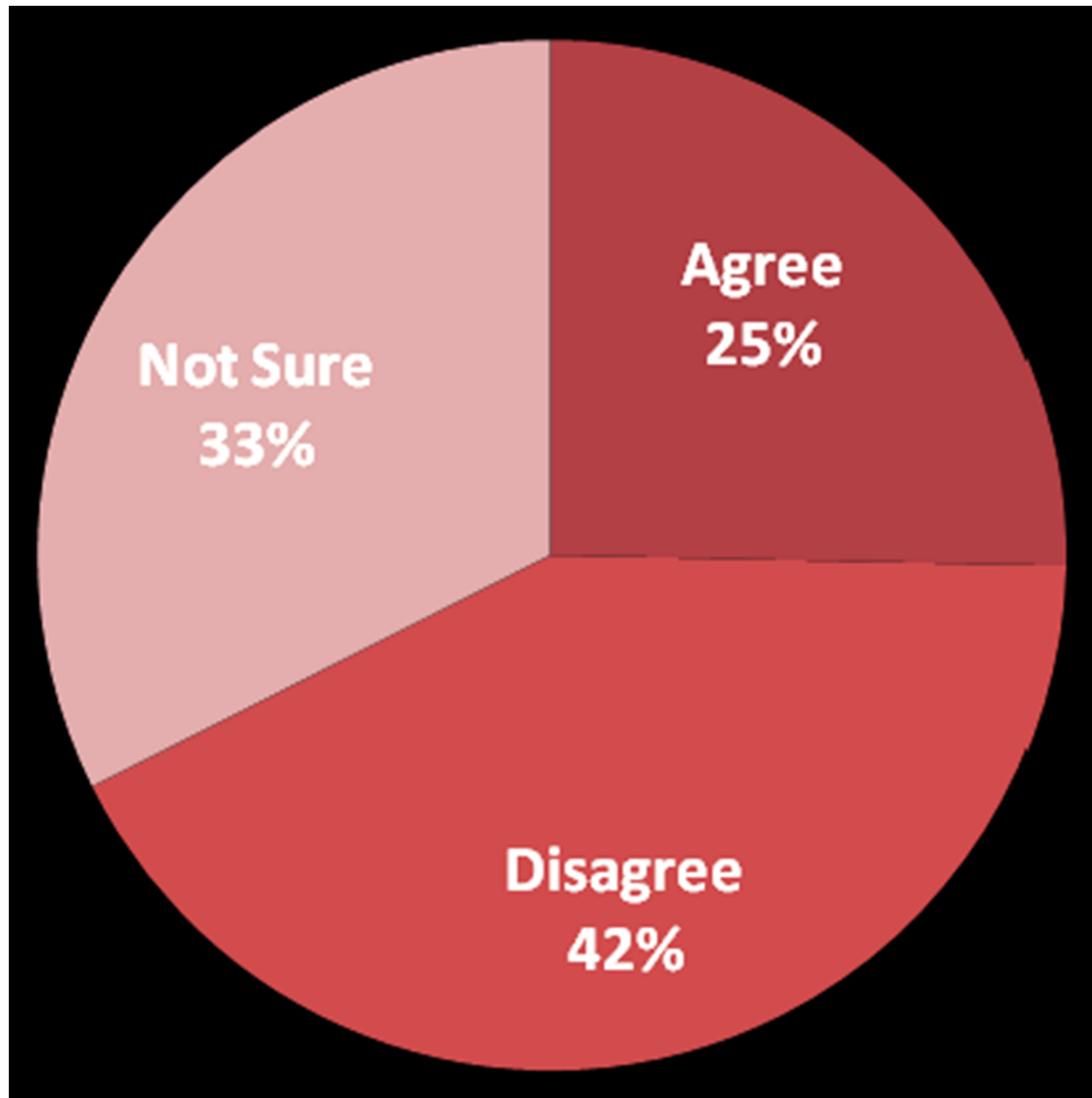
# High schoolers who have binge drank in the past 30 days



# Community Perception of Adult Drinking



# High schoolers who think that teen drinking is acceptable



**1 out of 3  
community  
members perceive  
that drinking  
among teenagers is  
acceptable in their  
community**



# Tobacco Use

- 22.4% of ND high schoolers reported smoking a cigarette in the last 30 days
- By race, in ND, in 2005
  - 48.4% of American Indians smoke
  - Hispanic 23.9%
  - White 20.7%
  - Asian 18.0%
  - Black 17.3%
  - Other 21.6%
- 14.2 – 18.8% of North Dakotans aged 12-17 smoked recently



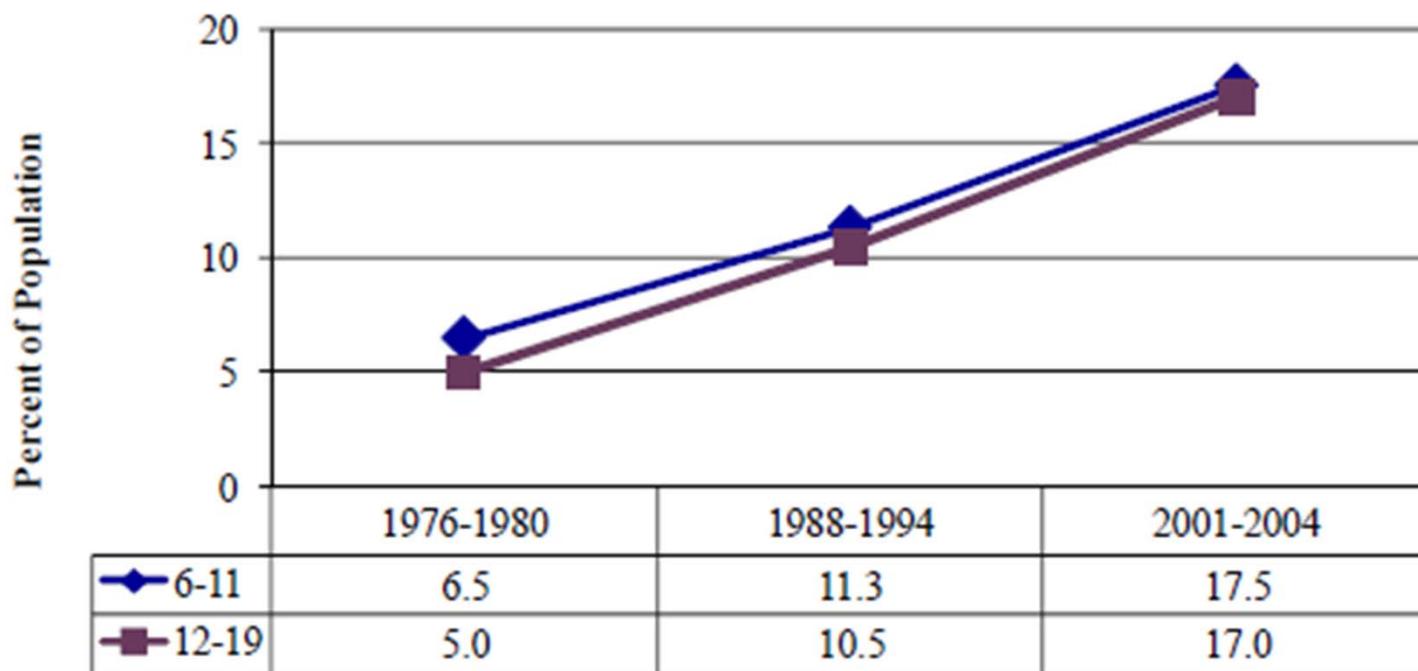
# Weight

- 11% of ND high schoolers were obese
- 29.3% of ND high schoolers thought of themselves as overweight
- 61.1% had exercised in the last 30 days



# Overweight Children in the US

**Overweight Among Children and Adolescents  
6-19 Years of Age  
United States, 1976-1980 Through 2001-2004**



Source: Centers for Disease Control and Prevention, National Center for Health Statistics, National Health and Nutrition Examination Survey

# Mental Health

- 85.2% of ND high schoolers believe that they have an adult in their life that they can trust
- 9.4% of ND high schoolers have a long term emotional problem or learning disability

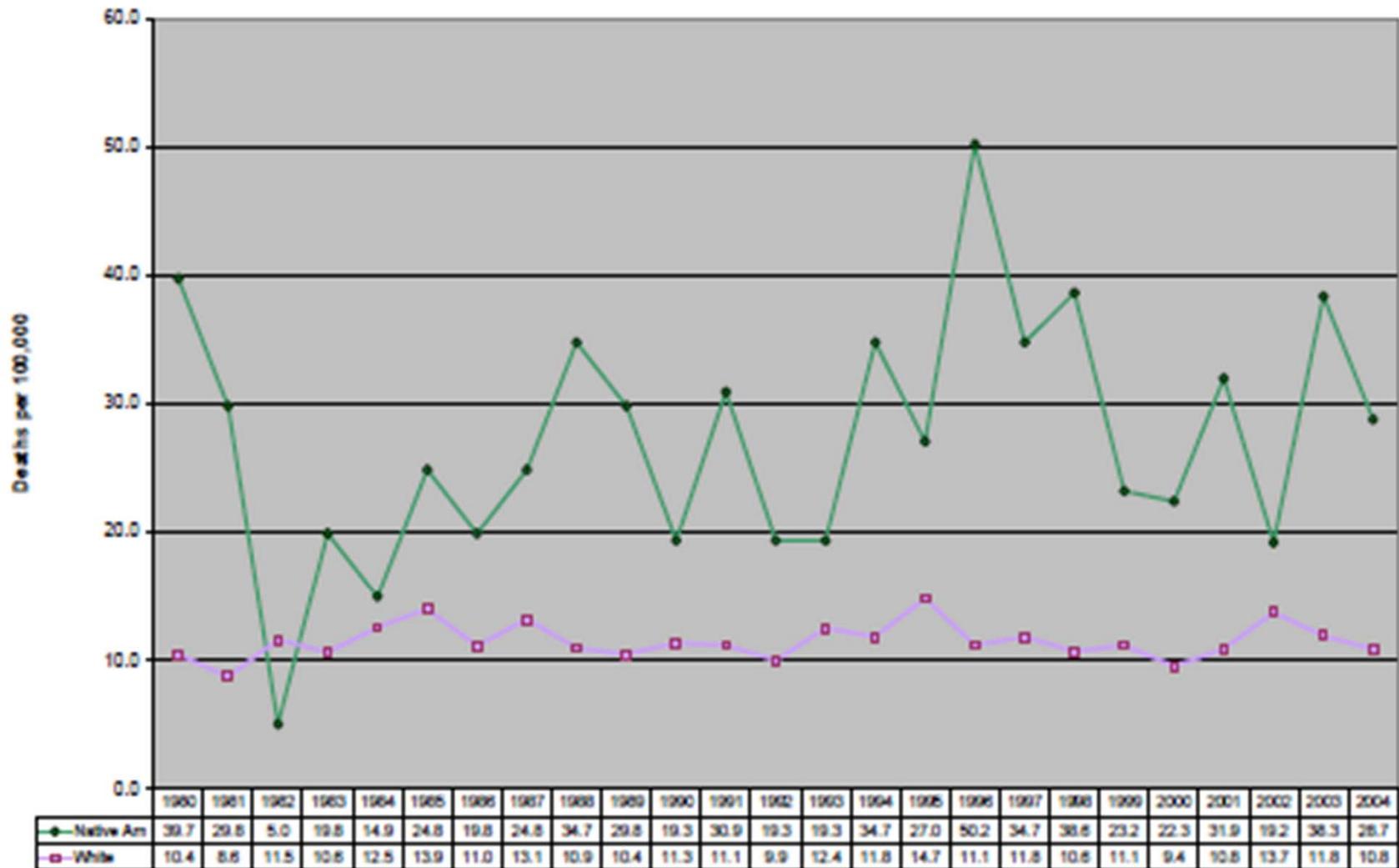


# Suicide

- Suicide is the 2<sup>nd</sup> leading cause of death for Native Americans between the ages of 10 & 34
- The rate of suicide for AI/AN is far higher than that of any other ethnic group in the United States
  - 70% higher than the rate for the general population
- The rate of suicide among Native American youth, ages 15 to 24, is the highest of any racial or age group in the US
  - AI teens have higher suicide rates than do all teens in ND



# North Dakota Suicide Rates, 1980-2004



# Suicide on Tribal Lands

- In North Dakota during 2004, there was an average of 6 suicide attempts and one completion for every 5 days.
  - Of these suicides, up to five times more occurred on Indian reservations than on nontribal land





# Telling the Stories: Explaining the Problem

# Relationship Between Behaviors and Outcomes

- Almost every 'health outcome' is one of the following:
  - A diagnosis (i.e. depression)
  - A behavior (i.e. alcohol use)
  - The result of a behavior or multiple behaviors (i.e. HIV infection)
- We can deal with behaviors and the results of behaviors



# What Causes a Behavior?

????  
■ ■ ■ ■



# We have to begin to understand the nature of human behavior

- We need to start thinking about more than just outcomes and think of the behaviors
  - Lead at the cause and not the end result
- Nothing can be prevented unless :
  - A behavior is never begun
  - Current behavior is changed



# Psychosocial Determinants of Health

- Self efficacy
- Outcome expectations
- Skills
- Perception of Severity of Risk
- Perception of Susceptibility to Condition
- Social Norms
- Subjective Norms

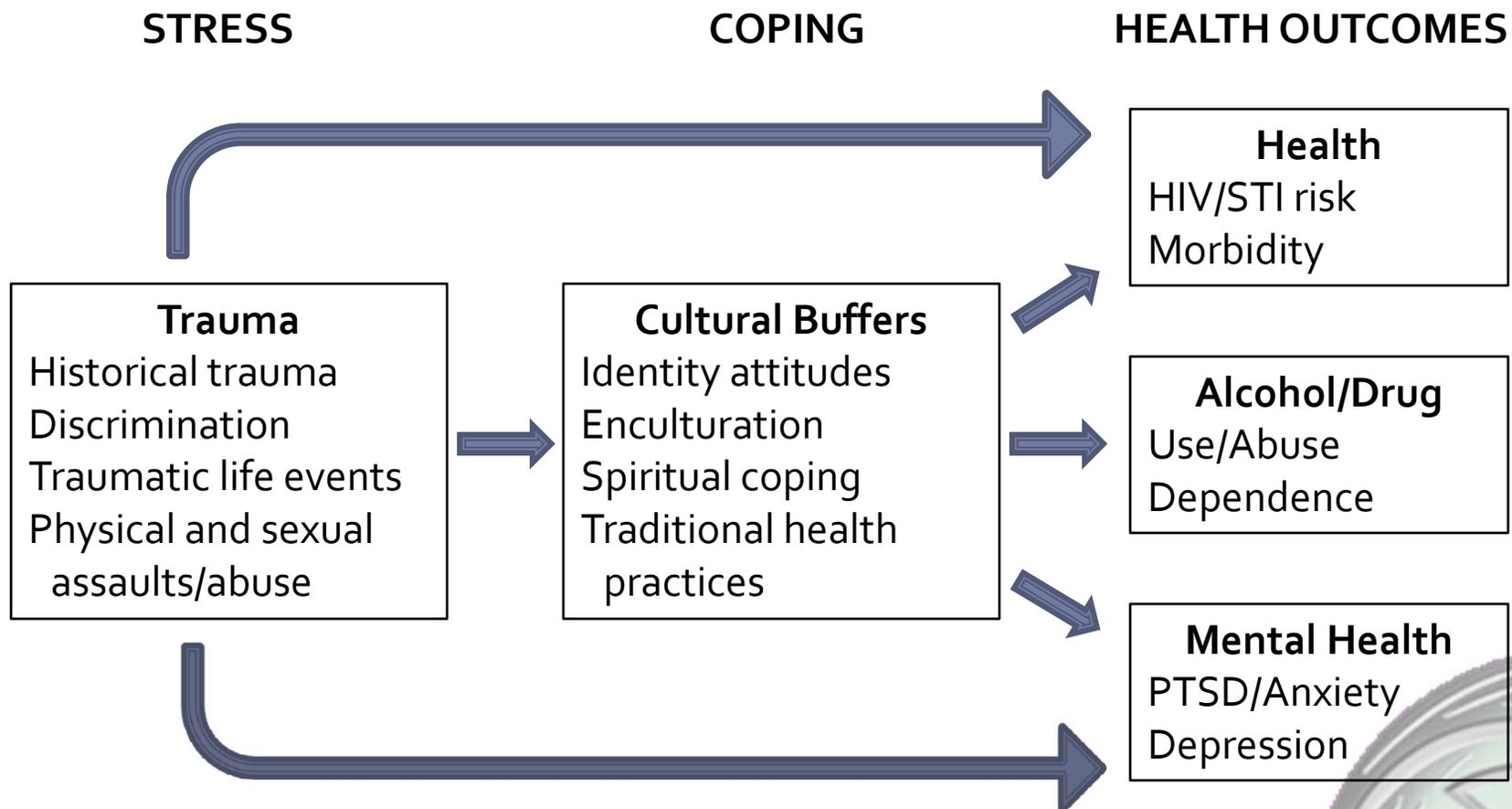


# Social Determinants of Health

- The social determinants of health are the conditions in which people are born, grow, live, work and age, including the health system.
- These circumstances are shaped by the distribution of money, power and resources at global, national and local levels, which are themselves influenced by policy choices.
- The social determinants of health are mostly responsible for health inequities - the unfair and avoidable differences in health status



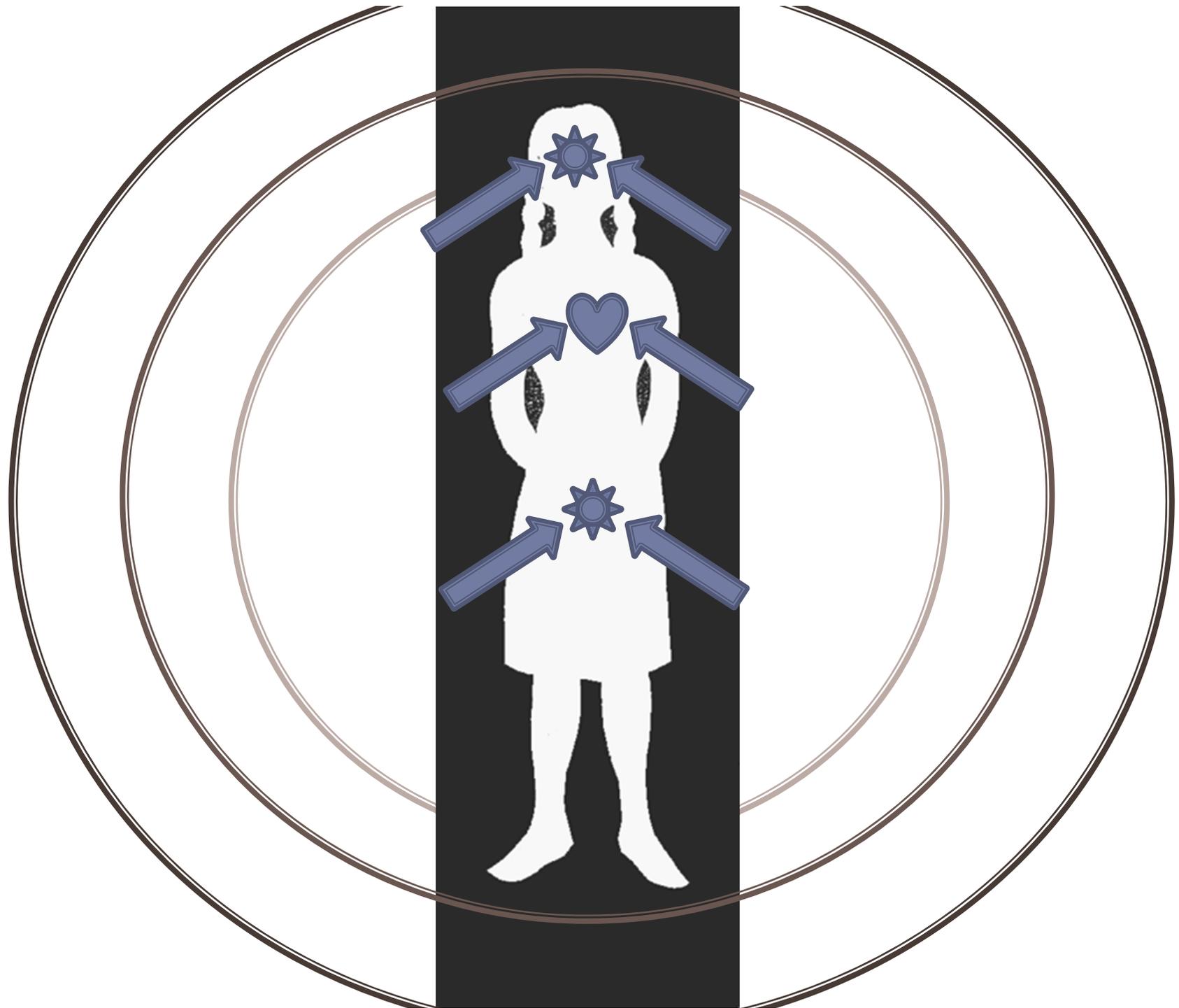
# Indigenist Stress-Coping Model



# Value of Walter Model

- Stresses Indigenous worldviews and history
- Address the impact of social determinants of health





# Risk & Protective Factors

- Risk = those factors that can lead a person to engage in a behavior
- Protective Factors = moderate or help to alleviate, or shield people from some of the determinants and factors that impact health



# Educational Attainment

- Natives in North Dakota are less likely to graduate high school
- American Indian females and males ages 25 and older in ND are more likely than AI women and men in the US to have some college education
  - More than 1 in 5 ND AI youth were enrolled in college in 2000
- Native students have the highest high school dropout rates, and some of the lowest college enrollment rates, in the country. The high school graduation rate for Native students in many states is under 50 percent.



# Areas of Cultural Strength

Spirituality

Education

Survival Skills

Power of the Group

Voices

The Next  
Generation

Identity

Values

Political  
Relationships

Environment



# What can we do?

- Seek to understand the problem from the community's perspective
- Collaboration
  - Across all jurisdictions
  - Leads to program integration and resource pooling
  - Which matches interconnected nature of health issues
  - Creates a wraparound service delivery model
    - Better for service provider and the community





**We all have a role in prevention and health**

**Continue to Celebrate  
Life!!!**



**I thank you and wish you a  
good and healthy journey!**

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[www.nnaapc.org](http://www.nnaapc.org)

# Resources Used

- 2006 Overview of Children's Well-Being in North Dakota, North Dakota Kids Count
- 2005 American Community Survey
- 'Indigenist' Stress Coping Model, Karina Walters, Ph.D.
- IHS Surveillance Report: Sexually Transmitted Diseases 2007
- 2009 High School Youth Risk Behavior Survey, North Dakota
- Amplify Your Voice, [www.amplifyyourvoice.org](http://www.amplifyyourvoice.org) Charlotte Goodluck's research, Northern Arizona University
- Centers for Disease Control & Prevention, 2009
- Alcohol, Tobacco, and Illicit Drug Consumption and Consequences in North Dakota: North Dakota Epidemiological Profile, March, 2007



# Resources Used

- North Dakota Department of Health
  - Ryan White/HIV Program
- Lisa Neel, August 5, 2010, Indian Health Service, HIV/AIDS Program
- Blue Cross Blue Shield of North Dakota
- Indian Health Service, Suicide Prevention Program
- Senator Byron L. Dorgan , The Tragedy of Native American Youth Suicide
- North Dakota Suicide Prevention Plan, 2005
- Substance Use in North Dakota: A Comprehensive Report , 2009 – 2011
- National Survey of Drug Use and Health

