National Native Network Newsletter

February 17, 2015



Life is Sacred | Keep it Sacred

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Board of Directors



California Rural Indian Health Board



Great Plains Tribal Chairmen's Health Board



Northwest Portland Area Indian Health Board



Southeast Alaska Regional Health Consortium



World Cancer Day 2015: Not Beyond Us

Feburary 4 was World Cancer Day, where people and agencies across the globe joined together in the fight against cancer to share solutions within our reach.

Each year, over 14 million people across the globe learn that they have cancer and 8 million people die from the disease. Research suggests that one-third of all cancer deaths can be prevented through screening, vaccinations, and lifestyle changes. However, the services and technologies needed for prevention and treatment are not widely available across the globe.

World Cancer Day is an opportunity to raise awareness of the real solutions and change that can be made at the individual, community, and governmental levels to impact cancer prevention and control. This year's campaign focused on four key areas: choosing healthy lives, delivering early detection, achieving treatment for all, and maximizing quality of life.

Read more at <u>www.worldcancerday.org</u> and CDC's International Cancer Control webpage: <u>www.cdc.gov/cancer/international/</u>

February 17, 2015

Letter from the Director

Welcoming in 2015, the National Native Network (NNN) is excited at the pace we are entering into this new year! Our annual "NNN All-Partner Meeting" was held at the start of the year on January 14-15th, at the Grand Traverse Resort and Spa (near Traverse City, MI).



All of our NNN Partners gathered for this meeting: Chris Cooper and Janine Williams (California Rural Indian Health Board), Edy Rodewald (Southeast Alaska Regional Health Consortium), Richard Mousseau and Dennita John (Great Plains Tribal Chairmen's Health Board), and Kerri Lopez, Eric Vinson, and Antoinette Aguirre (Northwest Portland Area Indian Health Board). We were pleased to also have Ena Wanliss, Project Lead, National Partnerships join us. Ms. Wanliss works within the Comprehensive Cancer Control Branch of the Division of Cancer Prevention and Control, Centers for Disease Control and Prevention. I also want to thank the staff from the Inter-Tribal Council of Michigan (ITCMI) for all that they did to make the 2-day conference a success: Noel Pingatore, Robin Clark, Chris Sams and Josh Mayo. A special thank you to Shannon Laing and Jessica Hample from the Michigan Public Health Institute, for leading the group exercises; we are looking forward to the follow up from the input gathered by the NNN Partners. An interesting part of the agenda was when the NNN Partners individually presented on the engaging work they are performing in each of their areas and regions. Again, it is exciting to see the energy and efforts of dynamic individuals leading commercial tobacco use prevention and cessation, and raising cancer awareness and access to care throughout Indian Country!

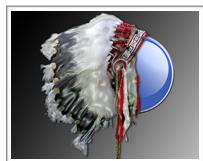
With an update on the upcoming launch of the new NNN website, the NNN Partners and ITCMI staff are working diligently with OneUpWeb on the design, content and resourcefulness for the new site. One of the guiding principles in the website development process is the ease for both professionals and everyday citizens to access the site and obtain the information they seek. The website will not only be a source of information - we are also striving to build a stronger "community" within the National Native Network, with a community forum/place for disseminating resources and sharing success stories. Being able to share and read about the meaningful work being done across Indian Country can empower others working for American Indians/ Alaskan Natives. At the annual NNN Partner meeting, OneUpWeb was able to introduce themselves to the NNN Partners and both talk and "walk" through the pending website design and content - this proved to be very valuable time!

We have created a Linked In profile and will be sharing information and resources through this page: <u>https://www.linkedin.com/company/national-native-network</u>. We ask that you continue to visit our website, <u>www.KeepltSacred.org</u>, to learn more about the National Native Network and encourage and invite you to "like" and follow us on <u>Facebook</u> and <u>Twitter</u>. Social media allows us to share our activities and to keep connections up to date on relevant information, upcoming informational webinars, and opportunities that might assist you in both your personal and professional lives.

Megwetch (thank you),

Derek J. Bailey, MSW Program Director National Native Network Inter-Tribal Council of Michigan





NNN Technical Assistance Webinars

National Native Network technical assistance webinars are hosted on the last Tuesday of each month from 3-4 PM Eastern time.

We are happy to continue working with the Indian Health Service Clinical Support Center to offer continuing education units for upcoming technical assistance webinars.

Winter/spring TA webinars:

February 24: Culturally Understanding Tobacco Abuse Messaging among American Indians and Alaska Natives

March 31: Developing Peer Navigator Programs in Tribal Clinics

April 28: Affordable Care Act and Cancer Care in Indian Country

May 26: Tribal Healthcare Policy and Systemic Issues in Cancer Care

For more information or to register for a webinar, visit us on Facebook, Linked-In, and <u>www.keepitsacred.org</u>.

USPSTF Report on High Priority Evidence Gaps for Clinical Preventative Services

Focus on Children and Adolescents

In 2014, the United States Preventative Services Task Force released its "Fourth Annual Report to Congress on High-Priority Evidence Gaps for Clinical Preventative Services." In the Report, the USPSTF prioritized evidence gaps related to child and adolescent clinical preventative services in the U.S., with the goal of guiding the development of research, knowledge, and evidence based recommendations to improve the health of children and adolescents. Key evidence gaps included commercial tobacco use interventions to prevent use of other tobacco products, such as smokeless or dissolvable tobacco, and the effectiveness of interventions among diverse populations of children and adolescents; overall effect of HPV vaccination on cervical cancer; skin cancer interventions in primary care for young children and their families; and behavioral interventions for obesity and weight management in diverse populations of children and adolescents, among others. Access: www.uspreventiveservicestaskforce.org.

CVS Health Reaches Millions of Americans, Foundation Commits \$5 Million

On February 5, exactly one year after the announcement that CVS pharmacies would stop selling cigarettes and other tobacco products, CVS Health released data on the reach of its smoking cessation program: over a million Americans. That same day, CVS Health Foundation announced a five year \$5 million commitment to the Campaign for Tobacco-Free Kids to launch a new grant program: "Making the Next Generation Tobacco-Free." The program will provide grants to organizations working on public health strategies to reduce youth commercial tobacco use and secondhand smoke exposure, especially among at-risk populations. The first grant recipients will be announced on Kick Butts Day,

March 18, 2015. Read the full press release at <u>http://www.cvshealth.com</u>



PRNewsFoto/CVS Health Foundation

Vitalsigns Learn about the latest public health data. Read COC VIUS JURE COC Releases New Vital Signs on Secondhand Smoke

This month, CDC's National Center for Chronic Disease Prevention and Health Promotion released a new Vital Signs on secondhand smoke with new data and infographics: An Unequal Danger. One in four nonsmokers, 58 million people, in the U.S. are exposed to secondhand smoke, including 2 of every 5 children (7 of 10 black children). One of every three nonsmokers living in rental housing are exposed to secondhand smoke. Homes are a major source of exposure to secondhand smoke and eliminating commercial tobacco use in indoor spaces protects nonsmokers from exposure.

No level of secondhand smoke exposure is safe. Each year, secondhand smoke kills more than 400 infants, through Sudden Infant Death Syndrome, and 41,000 adult nonsmokers, through smoke-related lung cancer and heart disease.

New infographics describe higher exposure rates to second hand smoke among various groups of nonsmoking Americans, exposure rates among children in select races/ethnicities, and health impacts of secondhand smoke exposure.

Tribal governments and agencies can help protect children and nonsmokers from secondhand smoke in the places they live and work by implementing commercial tobacco smoke-free policies in public places such as restaurants, tribal housing, government buildings, worksites, casinos, parks, and pow-wow grounds, among others. See the National Native Network's <u>Tribal Smoke</u> <u>Free Policy Toolkit</u> for more ideas and resources.

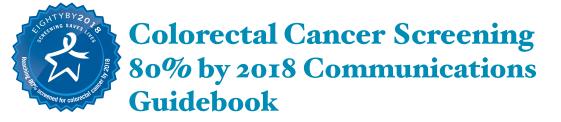


Nathan was a member of the Oglala Sioux Tribe and lived in Idaho. He was exposed to secondhand smoke at work that caused permanent lung damage and triggered asthma attacks so severe he had to leave his job. His illness led to his death on October 17, 2013. He was 54. Watch Nathan's Tips video.

Read the full Vital Signs issue at: www.cdc.gov/vitalsigns/tobacco



Secondhand smoke and the **harmful** chemicals in it are known causes of Sudden Infant Death Syndrome, RESPIRATORY INFECTIONS, ear infections, and aSthma attacks in infants and children. They are also known causes of HEART DISEASE, stroke, and **lung cancer** in adult nonsmokers.



In coordination with the nation-wide goal of achieving an 80% colon cancer screening rate by the end of 2018, the National Colorectal Cancer Roundtable (NCCRT) developed the Communications Guidebook to help with educating and empowering unscreened individuals to get screened for colorectal cancer (CRC). Target audiences include: the newly insured, the insured procrastinator/rationalizer, and the financially challenged. Approximately 75% of individuals who are not up to date on CRC screening have health insurance. The Guidebook includes infographics, social media messages, and other tools developed using current market research from the American Cancer Society.

National and regional surveillance data show that in many regions of the U.S., American Indians and Alaska Natives have higher rates of colorectal cancer incidence and mortality, lower screening rates, and are more often diagnosed with CRC at later stages in the disease than Whites. Screening can lower incidence and mortality rates, prevent CRC with premalignant polyp removal, and increase survival through diagnosis at earlier stages.

Access the Communications Guidebook on the NCCRT website: <u>www.nccrt.org</u>. If your program hasn't yet signed the 80% by 2018 Pledge, you can do so on the NCCRT website here: <u>http://nccrt.org/tools/80-percent-by-2018/80-percent-by-2018-pledge/</u>

Opportunities

COMMITTEE: The US Health and Human Services Office of Minority Health is seeking nominations for the Advisory Committee on Minority Health, representing the health interests of American Indians and Alaska Natives. Nominations are due April 15. See the full notice in the Federal Register at www.federalregister.gov

COMMITTEE: The North American Quitline Consortium is seeking nominations for the Board of Directors. New candidate nominations are due March 2. See the NAQC website at <u>www.naquitline.org</u>

REQUEST FOR INFO: The Food and Drug Administration Center for Tobacco Products is accepting information and comments on electronic cigarettes and public health, due April 15. See <u>www.gpo.gov</u>

SCHOLARSHIP: Legacy is offering \$5,000 scholarships to youth working on commercial tobacco use prevention/control using creative arts, applications are due April 30. See www.legacyforhealth.org

PATIENT TRAVEL ASSISTANCE: Leukemia and Lymphoma Society Patient Travel Assistance Program is available to blood caner patients in need of financial assistance for certain expenses. Providers, caregivers, and patients may submit an application by phone or online at <u>www.lls.org</u>



Events

February 19 Smoking Cessation Leadership Center Webinar 2-3:30 ET: <u>Big Marijuana - Lessons from Big</u> <u>Tobacco</u>

February 24 Research to Reality Webinar 2-3 PM ET: <u>Tools of the Trade: Putting Public Health Evidence in</u> Action

February 24 National Native Network Webinar 3-4 PM ET: <u>Culturally Understanding Tobacco Abuse</u> <u>Messaging among American Indians and Alaska Natives</u>

March 9-10 Food and Drug Administration <u>E–Cigarette Workshop</u>; <u>Register</u> to attend in-person or via webcast by February 20; Hyattsville, MD

March 12-14 National Comprehensive Cancer Control Network <u>Annual Conference: Advancing the</u> <u>Standard of Cancer Care</u>; Hollywood, FL

March 17-21 WCTOH 16th World Conference on Tobacco or Health; Abu Dhabi, UAE

March 19-20 Amercian Legacy Foundation, Sault Tribe UP 4 Health, and Inter-Tribal Council of Michigan Leadership & Advocacy Training for Youth Tobacco Prevention; Sault Ste. Marie, MI

April 7-9 National Indian Health Board Tribal Public Health Summit; Palm Springs, CA

April 7-9 Cherokee Nation Preparing for the 7th Generation Conference; Norman, OK

April 23-26 Association of American Indian Physicians <u>23rd Cross Cultural Medicine Workshop;</u> Santa Fe, NM

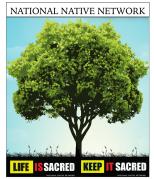
April 22-24 Prevent Cancer Foundation Dialogue for Action; Baltimore, MD

May 1-2 Healthcare Partnership Tobacco Dependence Treatment Certification Program; Tuscon, AZ

May 19-21 California Area Indian Health Service and the National GPRA Support Team <u>California Provider's</u> Best Practices & GPRA Measures Continuing Medical Education; Sacramento, CA

May 20-22 Alaska Tobacco Control Alliance Tobacco Summit; Anchorage, AK

If you have an event or opportunity to share in the next NNN Newsletter, please call or email the National Native Network team at 906-632-6896 x106 or <u>jmayo@itcmi.org</u>.



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