

THE CHICKASAW NATION OFFICE OF HEALTH POLICY

COMMUNITY OUTREACH

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Updates from the Office of Health Policy



Greetings from the Chickasaw Nation Office of Health Policy. Our office just launched our first Chickasaw Nation School-to-Work Program student to full-time employment in the workforce with the Chickasaw Nation Department of Family Services. Best wishes to Mindy Corbin!

School-to-work is a tribal program that offers Chickasaw students employment while attending college full time. Corbin joined the health policy team more than two years ago as a 19-year-old student. During her time with us, Corbin developed her skills in health policy.

The office of health policy is busy selecting new, important, health-related bills to track during the second session of the 59th Legislature, along with any bills carried over from the first session that impact the health of Chickasaw citizens. The bills selected will be tracked and reports dispersed to the appropriate departments within the Chickasaw Nation. Legislation can impact citizens regardless of where they live. Familiarize yourself with what your state legislature is doing. One citizen comment to a state legislator can have a significant impact.

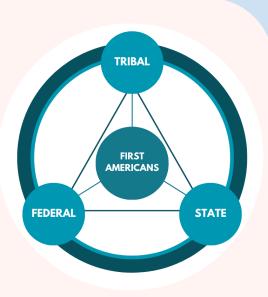
We welcome your input and would like to hear from you. Contact us at Judy.Parker@Chickasaw.net if you have topic ideas.

Chipisala'cho, Judy Goforth Parker, Ph.D., APRN

Trust Responsibility

Trust responsibility is terminology frequently used when tribal advocacy takes place between tribes and the federal government. By definition, trust responsibility describes a relationship between the United States and First American tribes dating back to the creation of the first treaties. As an example, the Seminole Nation v. United States (1942) established trust responsibility for both legal and moral obligation from the U.S. government toward First American tribes.

Situations which invoke trust responsibility typically involve issues surrounding tribal sovereignty, or issues involved in land rights, education, social services or health care for First Americans. Land rights provide a great example of historical treaties and agreements made between tribes and the U.S. These treaties might establish specific boundaries for tribal lands. Problems with land use, en-



croachment or natural resource management are often subject for debate. Trust responsibility is invoked to ensure tribal land rights are respected and protected. Protection of trust responsibility is an ongoing process we have to take seriously.

Special Diabetes Program for Indians

The Special Diabetes Program for Indians (SDPI) was established by Congress in 1997 as part of the Balanced Budget Act to address the growing epidemic of diabetes in First American communities (NIHB). Since 1997, the appropriation has increased to \$170 million annually. The program is administered through the Indian Health Service (IHS) as a grant program to fund diabetes treatment and prevention to tribal, urban and IHS programs.



First Americans have the highest rates of diabetes in the U.S. (NIHB). First Americans have the highest prevalence of diabetes at nearly twice the national average.

Many improvements in diabetes are happening through the SDPI program. The average blood sugars are down 11%, new cases have decreased by 54%, hospitalization for uncontrolled diabetes has decreased by 84% and diabetic eye disease is down by 50%. This is great news. The SDPI continues to be a program that is benefiting First American quality of life. There are more than 300 SDPI sites in 35 states. The special report to congress in 2020 highlighted 23 years of successful interventions (2020 Report to Congress).

Health Literacy

Health literacy is the degree to which individuals obtain, process and understand basic health information and services needed to make appropriate health decisions. This is important because your health impacts your quality of life. Deficient health literacy can lead to medication errors, lower ability to self-manage care, less frequent use of preventative services such as recommended vaccinations and cancer screenings and higher hospital re-admission rates.

You can take steps to improve your health literacy. When you see your health care provider, start with the following:

- ⇒ Prepare a list of questions or concerns to discuss with your provider
- \Rightarrow Ask questions when you do not understand
- \Rightarrow Take notes to review when you get home
- \Rightarrow Call back if you have questions
- ⇒ Use a reliable source when you have questions. The Chickasaw Health Information Center (<u>https://ChicResources.net</u>) is a reliable source.

Understanding your health care plan is vital to living a healthy life. You and your providers can work together as you continue your journey to health literacy.

AYA Challenges

Create a Group

AYA group fitness is a great way to empower yourself and others to achieve health goals. You can start an AYA group in a few easy steps!

- 1. Open the AYA App on your phone or tablet.
- 2. Click on <u>Groups</u> from the bottom menu.



- 3. Click on Create a Group.
- Name your group, upload a photo if you wish, indicate a city where the group will be primarily located, and choose whether the group will be public or private. Then click <u>Create Your</u> <u>Group</u>.
- Next, you will be taken to your group page. Click on <u>Invite</u> to ask friends or family to join.
- Once your friends or family accept your invitation, you can see the activity of all group members and even <u>React</u> to their activity.

Have questions or suggestions for the Office of Health Policy?

Please send an email to Judy.Parker@Chickasaw.net