



THE

Mukluk Telegraph

THE OFFICIAL QUARTERLY NEWSPAPER FOR THE CUSTOMER-OWNERS OF THE ALASKA NATIVE TRIBAL HEALTH CONSORTIUM

OCTOBER-DECEMBER 2011

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Electronic Health Records arrive



Patient records

are now

digitally stored,

accessed

at ANMC

BY EMILY WILDER

The days of paper medical charts are a thing of the past at the Alaska Native Medical Center.

The Oct. 1 move to Electronic Health Records, or EHR, is the biggest technological endeavor in the history of ANMC. But what does it mean for patients and their families?

In a nutshell, it improves the quality of care you receive because it makes things more efficient for the people who provide care. You and your providers now have centralized access to your charts, medical history, insurance information and appointments. An EHR system reduces medical errors, improves prescription safety and timeliness, allows staff to respond to your questions faster, alerts them when it's time for screenings and immunizations, and more.

SEE EHR, PAGE 4 ▶

PHOTO BY TODD HENRY

From left, ANMC Internal Medicine RN Jessica Marcy, Southcentral Foundation Medical Director Dr. Steve Tierney, and ANMC Emergency Department Director Dr. Richard Brodsky.

Lu Young Children's Fund Invitational raises funds, hopes for families, kids

BY FIONA BROSNAN

This year's inaugural Lu Young Children's Fund Invitational was a big success, raising a net amount of \$38,000 for the fund developed to help children and families of Alaska Natives during their cancer journey.

Special guest Congressman Don Young greeted 45 guests at a dinner in Girdwood and participated in two days of fishing in Whittier in July. The events were fueled by the tireless work and dedication of ANTHC's Cancer Program staff, Christine DeCourtney, Judith Muller, Karen Morgan and Stacy Kelley. Drs. Jay Butler, Greg Marino and Shannon Smiley also participated in the Invitational. The fund has come a long way in a short time – previously it only received proceeds from two items auctioned at the Alaska SeaLife Center Invitational.

The fund is designed to support outside standard cancer treatment services for families facing cancer – it's supplemental assistance, such as help paying for airfare, accommodations and groceries. Staff at the Alaska Native Medical Center identify a need (patients and families cannot seek assistance from the fund directly – a nurse or social worker at ANMC needs to make the recommendation), and ANTHC's Finance Department approves the funds quickly so staff can offer immediate assistance.

The fund has helped about 100 patients and families since its inception in 2004.

To learn more about the cancer program, visit www.anthc.org/chs/crs/cancer. ■

MISSION

Providing the highest quality health services in partnership with our people and the Alaska Tribal Health System

VISION

Alaska Natives are the healthiest people in the world

VALUES

Achieving excellence
Native self-determination
Treat with respect and integrity
Health and wellness
Compassion

VOICE OF THE PEOPLE

This Issue's Question:

The Alaska Native Medical Center is moving from paper files to Electronic Health Records (EHR). What do you think about that?



“In general I think technology is good, but it could be abused and misused.”

– **Caleb Dotomain**
Nome/Shaktoolik

“I think it'll be a lot better – more secure, and it will conserve more paper.”

– **Elizabeth Dalilak**
Nome

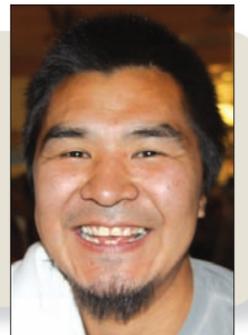


“Maybe it's better through paper. You can't go through machines too much, and we need to sign by hand. People who speak other languages might prefer paper.”

– **Lena Joe**
Mountain Village

“I think it's going to be beneficial in the long run, because it's not going to be so difficult to find things. But there can be pros and cons.”

– **Mike Jones**
Anchorage



“I don't know what the big difference is.”

– **Will Polty**
Pilot Station



Alaska Tribal Conference on Environmental Management (ATCEM)

November 7-11 in Anchorage
Hilton Hotel, 500 W. Third Ave.

Participate in ATCEM

- Join Tribal, federal, state and local entities.
- Assist Alaska Tribes in finding alternative resources and solutions to solid waste, environmental health, alternative energy, air and climate issues.

Register today!
\$150 full conference/five-day event
\$80 presenter full conference (present at one or more sessions)
\$65 single-day registration
Complimentary for elders (must provide date of birth and be 65 or older to apply)

Raising Awareness and Promoting Solutions for Healthy Sustainable Communities

For more information or to register, visit www.atcemak.com or contact Bertha Prince, Division of Environment Health & Engineering, at 800-560-8637, 907-729-4505 or brprince@anthc.org.

THE MUKLUK TELEGRAPH

The Mukluk Telegraph is the official newspaper of the Alaska Native Tribal Health Consortium.

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HOW ARE WE DOING?

Have a suggestion or a compliment for the Mukluk Telegraph?

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FIVE MINUTES WITH ...

Senior Injury Prevention Specialist Hillary Strayer

As Senior Injury Prevention Specialist in ANTHC's Division of Community Health Services – Injury Prevention Program, Hillary Strayer collaborates with tribal partners to encourage wellness and healthy choices as a means to prevent injuries. Activities include teaching suicide prevention skills, sharing resources to help prevent falls, encouraging helmet use and promoting the use of float coats.

INTERVIEW BY JOSH NIVA

MUKLUK TELEGRAPH: *What drew you to injury prevention work at ANTHC?*

HILLARY STRAYER: I received a Centers for Disease Control and Prevention (CDC) fellowship. I spent a year in Atlanta before moving here to do field work for two years. I really liked ANTHC. Our program is dedicated to outreach and the communities we serve. I stayed on after my fellowship ended almost two years ago.

MT: *What are some of the most common injuries facing Alaska Natives, and how does your work help?*

HS: Currently, Injury Prevention is a two-person program. Our work is focused on the prevention of suicide, drowning and falls, the three most frequent injuries occurring within the Alaska Native community. I help with data analysis and I'm heavily involved in several key projects. These include the Burden of Injury Study, revisions to the injury atlas, and developing a fall template for regions to use.

With suicide prevention, the Injury Prevention Program has worked with ANTHC's Behavioral Health Services Department to provide ASIST (Applied Suicide Intervention Skills Training) in various regions. About 1,300 Alaskans have received ASIST training. We've already heard stories from trainers who are using their training to help people stay safe.

The other aspect of my suicide prevention work focuses on environmental safety. The goal is to store guns and medications safely. In Alaska, the two most frequent means of suicide and attempted suicide are connected to guns and medication. We promote gun safes in collaboration with regional tribal partners.

In our drowning prevention efforts, the Injury Prevention Program encourages the use of personal floatation devices. Our white float coat project, which was a two-year pilot, was well received in Alaska's whaling communities. These communities are now setting a positive example for others.

With fall prevention, our primary focus has been with elders. They



PHOTO BY HELEN STAFFORD

ANTHC's Hillary Strayer visited Barrow to distribute white float coats to local whaling captains.

have the highest rate of injuries from falls, and sometimes the most severe injuries. There are many causes of falls – health, vision, cluttered floors, balance and medications. Fall prevention, for elders and others who may be at risk, works best when it is developed and implemented at regional and local levels.

MT: *It sounds like you travel a lot in your work. Do you enjoy it?*

HS: I'm an IHS Fellow so I spent three weeks in Michigan taking epidemiology courses. I also recently spent some time in the Bering Strait region promoting the white float coats and helping with outreach. With travel support from ConocoPhillips, I had the opportunity to attend a white float coat ceremony in Nuiqsut. I enjoy visiting different corners of Alaska, learning about the culture and meeting different people. It's so different than visiting a town in the Lower 48. Alaskans are much

more independent and resourceful.

I never know what will happen when I go to a village – it's a discovery for me, and there's always some marvelous thing going on. In Savoonga, everyone told me I had to go to Eskimo dancing that night. It's fun to be welcomed like that.

MT: *What are some injury prevention tips to keep in mind as Alaskans move into fall and winter?*

HS: Yes, our Injury Prevention team has a few suggestions for Alaskans to stay safe during winter. Always use a helmet when using an ATV or snowmachine. Wear ice cleats to help prevent falling, and if you use a cane or a crutch, put a spike on the end to get a better grip. And use reflective tape on your jackets, backpacks and outside clothing so people driving can see you, especially as the days get darker. ■

Impactful giving



PHOTO BY TODD HENRY

Leaders from the Healthy Alaska Natives Foundation, the Alaska Native Medical Center (ANMC), the Alaska Native Tribal Health Consortium and Southcentral Foundation recently accepted a \$20,000 donation from The Independent Pilots Association Foundation. The funds will be used to replace some of the sleeper chairs that families rest on in ANMC's Kids Wing Pediatric Unit.

Be Inspired.

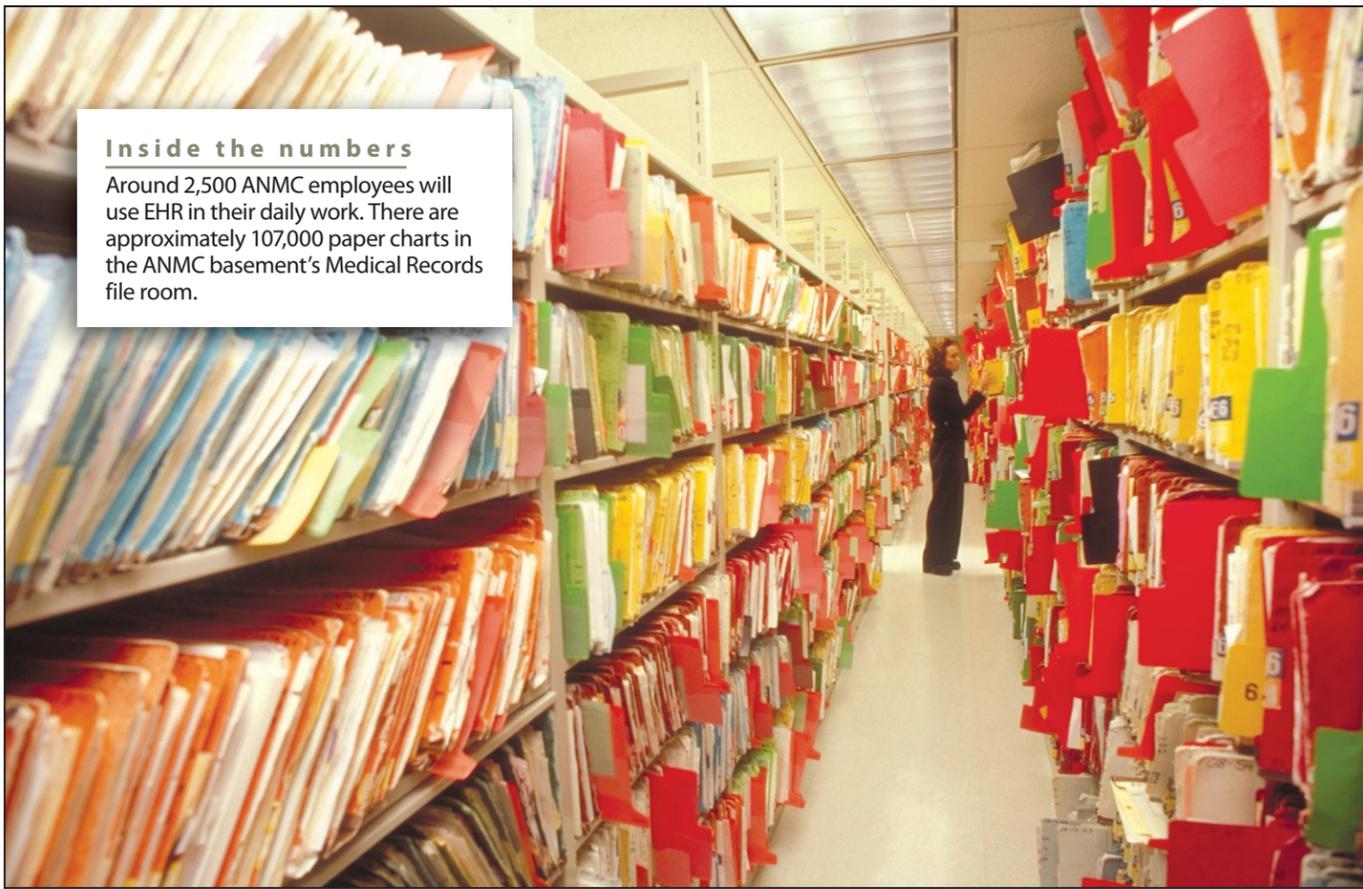
Even though Alaska's communities are separated by hundreds of miles, when it comes to health, we're all connected.

Join the Healthy Alaska Natives Foundation in bringing essential services to individuals and communities in need. Learn more and donate today at InspiringGoodHealth.org.

Michael Orr is a Vice President at Wells Fargo Bank in Anchorage.



Inspired giving



Inside the numbers

Around 2,500 ANMC employees will use EHR in their daily work. There are approximately 107,000 paper charts in the ANMC basement's Medical Records file room.

ANTHC ARCHIVE PHOTO



PHOTO BY JOSH NIVA

Above: ANMC Nurse Lindsey Chronister shows off a new device that medical staff will use to access electronic health records.

Below: ANMC Facilities Technician Richard Charles installs new equipment to help medical staff use electronic health records in their daily work.



PHOTO BY JOSH NIVA

EHR, FROM PAGE 1 ▶

And eventually, EHR will work with the Health Information Exchange so that as patients travel from one Alaska facility to another, "We'll have access to their records," said Physician Consultant and board member of the Alaska eHealth Network Dr. Thomas Nighswander. "So they should not have to every time they go to a place, sign in again and give their background, insurance records, demographic data, all that – that's already on there." In addition, your doctor will know what's already been done elsewhere, like children's immunizations – "whether they've been seen in Kotzebue or Anchorage or Sitka," Nighswander added.

The most exciting EHR development, Nighswander said, is the patient portal – an online forum where you can see and comment on your record from your own computer.

"Our customer-owners want their system to improve the way care is provided and delivered," said Vivian Echavarría, ANMC Vice President of Professional and Support Services. "This transformation ... [helps] improve and expand our services and

Benefits of EHR

EHR will ...

- ... improve health care quality.
- ... result in better care coordination.
- ... centralize access to patients' charts, medical history, insurance information and appointments.
- ... eliminate manual process of collecting medical data, thus reducing medical errors.
- ... reduce paper use.
- ... improve prescription safety and reduce duplication of medical tests.
- ... improve staff response time to patient questions.
- ... provide alerts and reminders about health screenings and immunizations.

programs which is important for the future of health care delivery within our tribal system."

ANMC wants to thank you for your

patience during this transition – it's a large-scale effort, but one that needed to happen.

"In the era of CT scans, gene-splicing and stem-cell breakthroughs, handwritten record-keeping feels about as outmoded as the fluoroscope," wrote Jeffrey Kluger in a 2009 article for "Time."

Nighswander agreed. "Patients' records and the way we currently exchange health information have not changed since the horse and buggy days," he said. "The banking industry would be out of business if they did everything on paper." ■

Emily Wilder is a communications consultant for the Alaska Native Tribal Health Consortium. She can be reached at etwilder@anthc.org.

ANMC's Info Hub

Learn all you need to know about being a patient at ANMC before you visit!

Just log on to ANMC's Info Hub to find:

- Travel information about Quiana House and ANMC shuttle service
- Patient education like what to expect at an appointment
- Contract health services explaining your benefits
- Appointment wait times for ANMC clinics
- And more!



Get connected to ANMC's Info Hub by logging on to www.anmc.org and clicking on "Information Hub"

SAVE THE DATE:

Alaska Native Tribal Health Consortium Annual Meeting Monday, November 28, in Anchorage

ANTHC's annual meeting features an informational slideshow and a Q&A session. Your tribe receives funds to have representation at the meeting, so be sure to attend!

Call (907) 729-1915 for more information or look for updates in your mail and at www.anthctoday.org.



Summer construction season builds healthier communities around Alaska

BY JOSH NIVA

A busy construction season by ANTHC's Division of Environmental Health and Engineering (DEHE) has led to more clean water flowing in more Alaska communities than ever before. And that means healthier Alaska Natives, since access to clean water and sanitation services are directly linked to lowering mortality, pneumonia and infection rates.

This summer, DEHE crews worked on construction projects in nearly 37 communities around the state, including nine water treatment plants.

"All of the residents in these communities are excited to have upgraded facilities, especially for

communities that are receiving water treatment and sewage services for the first time," said Dave Beveridge, DEHE's Director of Project Management. "And for our employees, it's a real pleasure to be involved with these projects."

Here are a few of the DEHE construction projects undertaken this summer:

- A major project in Pitkas Point, near Saint Mary's in Western Alaska, featured crews constructing a water treatment plant, a sewer system, a washeteria and plumbing to serve all homes. The final inspection is expected to take place this fall.
- Completion of a multi-year sewer upgrade in Chignik Bay in Southwest Alaska, providing a consolidated wastewater treatment and disposal

system and connecting several homes to the new community system.

- A heat recovery project at the water treatment plant in the Interior community of Allakaket, which will lead to significant savings in the community's heating oil use.
- A new water treatment plant in Southeast community of Saxman to be completed in the fall, which is using magnetic ionic exchange technology new to Alaska to provide excellent water quality.

The DEHE construction projects also meant a healthy boost for local economies. DEHE estimates it hired more than 200 local employees around the state, an estimated 90 percent of whom were Alaska Natives. ■



PHOTOS BY MARK HASKINS

ANTHC employees work on a new village clinic in Eagle this summer. The project, which began last year but was halted due to flood damage in the area, resumed this spring and is expected to be completed this year.

Family Wellness Warriors Initiative promotes traditional values around Alaska

BY SOUTHCENTRAL FOUNDATION
PUBLIC RELATIONS

Alaska Native people today are working together to break the cycle of domestic violence, child sexual abuse, and child neglect in their communities. Much of the harm can be attributed to intergenerational grief caused by devastating historic events: major disease epidemics; suppression of Native languages and cultural practices; and a swift transition from a subsistence-based economy to a cash-based economy.

Grief, shame and anger are being passed from one generation to the next, feeding into the statistics that Native people see and experience in Alaska. For instance, compared to other Alaskans, Alaska Native people are disproportionately represented in the foster care and correctional systems, as well as in substance abuse treatment centers. Almost 75 percent of Alaskans have experienced, or know someone who has experienced, domestic violence or sexual assault, and most incidents are never reported to law enforcement.

Alaska Native people are resolute, identifying these statistics as unacceptable and working together, in relationship, to heal the hurts that are behind each one of these social issues. The Southcentral Foundation (SCF) Family Wellness Warriors Initiative (FWWI) is a movement that is sweeping across the state to bring back the traditional values that served Alaska Native people for thousands of years. Rather than giving up, Alaska Native people are leading the charge



PHOTO COURTESY OF SOUTHCENTRAL FOUNDATION

to change the statistics and restore a sense of wholeness to families and communities once again.

FWWI offers many types of events, including one-, three- and five-day trainings; two weeks of advanced leadership education and training; and trainings tailored to select populations, although the main focus remains on Alaska Native families and communities.

The FWWI model focuses on healing the wounds of past trauma so as not to pass the pain on to others; virtually saying, "It stops with me," and ending the cycle of abuse. Men are actively involved in FWWI's development; standing up and fighting for their families, and calling for other Alaska Native men to reclaim their roles as protectors of family wellness and women as instillers of family values.

The ultimate goal is to look across Alaska and see healthy communities, healthy villages, healthy families, and healthy people. Working together, Alaska Native people are going to end domestic violence, child sexual abuse and child neglect in the Alaska.

Learn more about the Family Wellness Warriors Initiative by visiting www.fwwi.org or calling (907) 729-5440. ■

Testing, awareness help stop the spread of HIV/AIDS in Alaska

BY DR. ELIZABETH SALTONSTALL AND
CONNIE JESSEN, MA

In the early 1980s, a stigma was attached to people diagnosed with Human Immunodeficiency Virus (HIV)/Acquired Immune Deficiency Syndrome (AIDS), but it was soon understood that HIV knows no boundaries. It even hit Alaska, where 1,107 new cases of HIV infection were diagnosed from 1982-2010.

In 2010, there were 45 new cases in Alaska, 20 of which were given an AIDS diagnosis within the first year. This means that those people may have been living with HIV for many years, and because they weren't tested, they weren't aware that they were infected.

Since the discovery 30 years ago of the virus that causes HIV and can ultimately lead to AIDS, science has come a long way in understanding the virus. Yet, we don't have a cure nor a vaccine, only treatment and prevention. The result: an estimated 33,300,000 adults and children worldwide are currently infected with HIV/AIDS.

That's why testing, awareness and prevention are critical to stopping the spread of HIV and AIDS. Around Alaska, there are numerous opportunities to get tested; in fact, testing locations are just a click away at www.iknowmine.org/gettested.

The primary key to stopping the spread of HIV is to know your status. In 2006, the Centers for Disease Control and Prevention recommended that every American ages 13-64 know their HIV status. But in spite of the knowledge and publicity about HIV/AIDS, 1,300,000 Americans are HIV

Online

For more information on HIV testing in Alaska, please contact Dr. Elizabeth Saltonstall at emsaltonstall@anthc.org or (907) 729-2907, or Connie Jessen at cmjessen@anthc.org or (907) 729-3955.

positive and an estimated 56,000 more get infected each year. Much of the issue lies in the estimate that about 21 percent of the 1,300,000 don't know they're infected.

At first diagnosis, HIV rapidly reproduces in the very CD4 cells (a type of white blood cell) designed to fight infection. Rather than kill the virus, it reproduces until there are millions of copies of the virus per milliliter of blood. The infected person becomes extremely infectious and may have symptoms of a cold or mononucleosis with headache, sore throat, swollen lymph nodes, fever and a rash. Many people with these symptoms are ill enough to seek medical care, but if they or their provider aren't considering acute HIV infection, they may not get tested.

Those unaware of their acute infection can unknowingly transmit the virus to others. The acute HIV symptoms will go away and that person can live 10-20 years without knowing they have the disease. As the CD4 cells are destroyed by HIV, the person can get many illnesses and only then seek medical care. Tell your health care provider that you want to know your HIV status and get tested. Treatments are available that enable people to live a normal length of time.

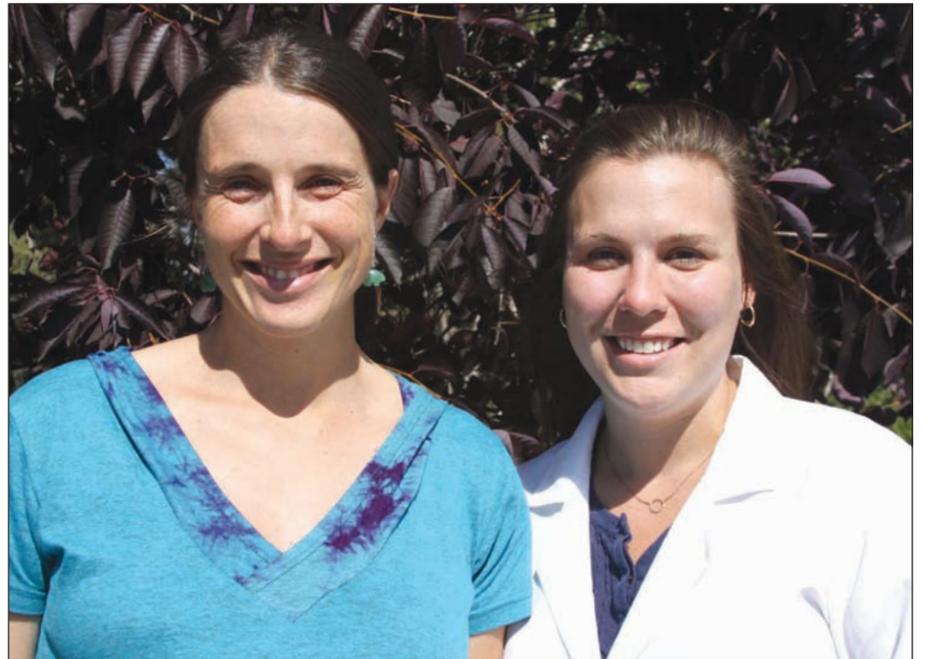


PHOTO BY JOSH NIVA

ANTHC's Connie Jessen, STD program manager, and Brenna Simons, medical research associate, help promote the free and confidential I Want the Kit at-home tests to Alaskans.

It's also important to avoid situations that may put you at risk for acquiring HIV. Substance abuse can decrease inhibitions and compromise your ability to protect yourself. Multiple sexual partners without condom use increases the risk of being exposed to HIV. Injecting drugs and sharing needles can lead to direct transfer of HIV. Having another STD, like chlamydia, herpes or gonorrhea, can increase the risk of acquiring HIV from someone with the virus by 2-5 times.

Other keys are awareness and putting aside stigma. Getting tested for HIV is not an admission of risky behavior but rather routine health

care. The risk comes in not knowing your status. People with HIV/AIDS can be relatives, friends, coworkers and neighbors. The disease does not discriminate and should not change our caring for them. Help them in learning that they do not need to hide because they have HIV/AIDS.

And take ownership of your health. Don't wait; get tested today – for yourself and for those around you. ■

Dr. Elizabeth Saltonstall is Medical Director of the HIV Early Intervention Services for the Alaska Native Tribal Health Consortium. Connie Jessen, MA is STD Program Manager for the Alaska Native Tribal Health Consortium.

Free and confidential STD testing kits aimed at Alaskans

BY ANTHC COMMUNICATIONS DEPARTMENT

Alaska had the highest rate of chlamydia and the second highest rate of gonorrhea in the U.S. in 2010, and has consistently ranked first or second in chlamydia since 2000. But an innovative pairing of technology and preventative health measures is now in place to combat those numbers for Alaska's most vulnerable populations and all Alaskans.

Infectious disease experts at Johns Hopkins University say new research clearly shows that screening teens and young adults for sexually transmitted infections may best be achieved by making free, confidential home-kit testing available over the Internet. Alaskans now have access to those kits as part of the I Want the Kit campaign (IWTK), a successful program launched in Baltimore in 2004.

"From a public health standpoint, we feel this project truly reduces barriers to testing and care," said Brenna Simons, medical research associate at the Alaska Native Tribal Health Consortium (ANTHC). "And we especially hope that teens and young adults who otherwise would not visit a clinic for sexually transmitted infections will be motivated by the confidentiality of this free kit."

Dr. Jay Butler, ANTHC's Director of Community Health Services, added: "The ultimate goal is a reduction in STD infections in Alaska. These kits are just one piece of that puzzle, but they are an important step forward."

Alaskans can request an "I Want the Kit" at-home testing service by visiting www.iknowmine.org or www.iwantthekit.org, or by calling (866) 575-5504. Each home test kit comes in an anonymous envelope with instructions, a unique identification number, and a prepaid return envelope to return self-collected



Male Testing Kit

vaginal, penile or rectal swabs in specially sealed test tubes to the IWTK lab at Johns Hopkins University. The lab tests the swabs for chlamydia, gonorrhea and trichomonas.

The kits are mailed back in plain, brown paper envelopes with basic contact information. Within two weeks of sending the test to the lab, people can call a toll-free number at ANTHC or elect to receive an email or phone call from a nurse to receive their test results. The kits are provided through a partnership between the ANTHC, the Indian Health Service (IHS), and John Hopkins University.

"This has been a collective endeavor amongst tribal, state and federal health organizations in an effort to curb Alaska's endemic rates of chlamydia and outbreak of gonorrhea," said Connie Jessen, ANTHC STD program manager. "We hope this at-home testing initiative will provide a viable addition to the currently available STD testing services in Alaska."

Those who test positive for chlamydia, gonorrhea,



Female Testing Kit

Online

Alaskans can request an "I Want the Kit" at-home testing service by calling (866) 575-5504 or visiting:

www.iknowmine.org
www.iwantthekit.org

For more information about HIV/STD testing in Alaska, call ANTHC's HIV/STD Program Services at (877) 334-8762 or visit:

www.iknowmine.org

or trichomonas will be contacted with various options for treatment. The tests are examined in a qualified laboratory at Johns Hopkins University in Baltimore using standard FDA-cleared state-of-the-art molecular tests and equipment. The testing is confidential, but positive test results will be reported to the State of Alaska as required by law; seven other states have similar projects. Alaskans who have questions can call ANTHC's HIV/STD Program Services at (877) 334-8762. ■

Statewide tobacco education even more critical as Alaskans' addictions deepen

BY ALASKA NATIVE TRIBAL HEALTH CONSORTIUM

Alaskans who want to give up using tobacco products, and those who support them, often have similar reasons for quitting: leading healthier lives, being around for friends and family, or the more than 4,000 chemicals found in cigarettes that contribute to tobacco addiction. But quitting is difficult – the average user tries 7-10 times before becoming tobacco free.

For Alaskans in rural communities, there's an additional, tangible motivating factor to quit: money, and lots of it.

“Did you know that the average cost of a pack of cigarettes in Barrow is \$10.49?” asked Marlene Adams, Tobacco Quit Line Outreach Coordinator for the Alaska Native Tribal Health Consortium (ANTHC). “If a Barrow resident who smokes a pack a day quits, they could save nearly \$4,000 a year. That's enough to buy an ATV or pay for a Hawaiian vacation.”

Adams and Stacy Kelley, ANTHC's Cancer Partnership Coordinator, often discuss the harmful effects of tobacco use in their work, while also informing Alaskans of available resources to help them quit using tobacco. And yes, they even use the financial scenario as incentive.

As tobacco use continues to rise for Alaska Natives, and even spike for Alaska Native youth, this kind of education and awareness around the state is more critical than ever. That's why Adams and Kelley often collaborate and even travel Alaska providing tobacco prevention information.

Alaska Natives use tobacco more than other Alaskans. Forty three percent of Alaska Native adults smoke, compared to the state average of 22 percent. Alaska Native youth are more likely to smoke than their non-Native peers (32 percent to 13 percent). Some parts of Alaska have tobacco use rates as high as 60 percent.



14-month-old Cooper Kelley learned firsthand how Inupiaq babies stay warm from Edith Nageak in Barrow. Cooper traveled to Barrow with his mom, Stacy Kelley, who is ANTHC's Cancer Partnership Coordinator.

That rate of use is having a devastating, and even deadly, impact on Alaskans. Smoking is the leading cause of lung cancer and increases the risk of heart disease, stroke, emphysema, and chronic obstructive pulmonary diseases. Secondhand and third-hand smoke impacts everyone near the smoker, not just the person who uses tobacco. Chewing tobacco can cause oral cancers, throat cancer, cavities, gum disease and heart diseases.

Adams and Kelley recently took their prevention message to Barrow, leading events, providing training tools to help residents and health care teams become more aware of tobacco-related health problems, and helping motivate locals to stop using tobacco products and not start using tobacco in the first place.

Adams and Kelley even delivered their message on the airwaves during an hour-long call-in radio talk show on Barrow's KBRW. The show was hosted

Ready to quit? Get help here.

Quitting tobacco can be one of the hardest things to do, but the Alaska's Tobacco Quit Line can help. The Quit Line is a free service for all Alaskans and is available by calling **1-800-QUIT-NOW** (1-800-784-8669), seven days a week, from 4 a.m. to 11 p.m.

Alaska's Tobacco Quit Line services include a series of phone counseling sessions and up to eight weeks of free Nicotine Replacement Therapy (the patch, gum or lozenge). In addition to Alaska's Tobacco Quit Line, many Alaska Tribal Health System organizations have intensive, on-site tobacco treatment programs. Trained Tobacco Treatment Specialists provide counseling support and pharmacotherapies to tobacco users as they quit.

Call your local tribal health care facility or visit www.alaskaquitline.com for more information.

by Edith Nageak, who translated the conversation in Inupiaq and helped raise awareness of tobacco's impact on residents around the North Slope.

At intervention training at Samuel Simons Hospital, health care providers better understood how to help tobacco users quit. Kelley told the group, “As a health care professional, you are the most influential person in motivating tobacco users to quit. It takes only three minutes of your time to help save a life.”

A two-hour Community Health Aide/Practitioner (CHAP) training was broadcasted by Video Teleconference (VTC) to surrounding North Slope village clinics. During the CHAP training, health aides discussed concerns about advising patients to quit. One health aide commented: “It's hard to talk about quitting tobacco with our patients if we smoke, too.” ■

Better health by boat: Floating Health Fair tours the Aleutians

BY DIANA REDWOOD

Delivering health care in Alaska is unique and challenging in most regions, but especially so along the eastern portion of the Aleutian Islands chain, where a handful of often windblown and fogged-in communities are scattered over more than a thousand miles. The area's distance, weather and travel complications make it difficult for residents to access current health care information about prevention and resources.

Three years ago, the Eastern Aleutian Tribes (EAT) created an innovative, cost-effective and impactful solution to delivering care and information to the 1,900 people in its service population: load a handful of diverse health care professionals onto the Alaska Marine Highway System ferry and bring them to the communities in a Floating Health Fair.

The third annual Floating Health Fair boarded the Tustumena ferry on June 7 and visited five communities: Sand Point, King Cove, Cold Bay, False Pass and Akutan. As many as eight traveling health care professionals participated in a health fair at each stop, often joined by local health providers.

The health fair team handed out kick-balls to children to promote physical activity, healthy snacks to promote nutrition, and distributed informational pamphlets that covered everything from immunization to elder care services to diabetes management. Up to 40 people attended each health



PHOTO COURTESY OF DIANA REDWOOD

Diana Redwood shows off her colon health and awareness booth during a stop on the Floating Health Fair, which recently took place along the Eastern Aleutians.

fair, ranging from village patrol safety officers, fishermen and cannery workers to families and children. At one stop, every school-aged child in town came to the fair.

“Can you think of a more effective way to get information on nutrition, smoking prevention, and healthy living to the entire student body of a community?” asked Michael Christensen, CEO of EAT, who accompanied the tour to a few stops. “Multiply that by each of the communities visited and you start to understand the tremendous impact the Floating Health Fair has in our region.”

For health fair staff to really make

an impact, efficiency was critical. The group had less than two hours in most ports, meaning local health providers advertised the event to community members and set up displays in advance. Most health fairs were hosted in buildings near the docks, to afford extra time. And each time the ferry docked, traveling health fair staff dashed off the boat to their health topic stations.

“The first year we did this we had a U-Haul truck that we had to get off the ferry, set up all the displays, pack up, and drive back onto the ferry – it was crazy, but so rewarding,” said Anna Buterbaugh, EAT Wellness Program

More info

For more information on the Eastern Aleutian Tribes Floating Health Fair, contact Anna Buterbaugh, EAT Wellness Program Manager, at (907) 564-2505.

Manager and lead organizer of the Floating Health Fair. “We knew how important it was to the community and we knew we had to do it again. Now we have the displays mostly set up in advance, which allows us to have more time talking with each community member one on one.”

And there was so much to talk about. This year's Floating Health Fair staff included an EAT Wellness Program Manager; an EAT diabetes management expert; a colorectal cancer control manager from the Alaska Native Tribal Health Consortium, accompanied by ANTHC's inflatable giant pink Nolan the Colon, which is used to educate about colon cancer and promote cancer screening; a consumer advocate from Arctic Access who focused on physical activity and nutrition; a traveling public health nurse who specializes in immunizations and sexual health; and a program manager for Senior and Disability Services from the State of Alaska. ■

Diana Redwood is the Colorectal Cancer Control Program Manager at the Alaska Native Tribal Health Consortium.

Dental Health Aide Therapists making healthy impact around Alaska

BY BARBRO RAKOS
DENTAL HEALTH AIDE THERAPY PROGRAM MANAGER

It's been less than 10 years since Alaska's Dental Health Aide initiative was launched to train and place dental health aide therapists (DHAT) in rural Alaska, and three years since the program graduated its first students. It was an innovative project, the nation's first attempt at developing a dental therapist program of this kind. According to a recent study conducted by Research Triangle Institute, Alaska's dental therapists are now providing safe, competent and appropriate care in their scope of practice.

Nearly two dozen DHATs are currently working around Alaska. They impact 35,000 people in rural Alaska who now have access to a dedicated oral health provider. That's critical care for Alaska Natives, who have long struggled with dental disease; in fact, Alaska Native children still have more than two times the national rate of tooth decay. Communities that once relied on itinerant dental care or had none at all now receive routine restorative and preventive services by local providers.

The initiative spearheaded by the Alaska Native Tribal Health Consortium (ANTHC) is leading Alaska's rural communities toward better oral health, while also making a significant socioeconomic impact because of the new health care provider jobs it's produced.

The two-year academic and hands-on education includes training in dental disease prevention and basic dental treatment skills. When finished, many DHATs return to serve their home villages. That kind of familiarity helps bring cultural competence to the dental care provided.

"The patients showed appreciation for all the work we'd provided, which gave me a boost of confidence as a provider of my people," explained Trisha Patton, a second-year DHAT student from Napakiak, who recently completed a week of work and training in a Yukon Delta village.

After training, most dental therapists work in regional and sub-regional clinics providing local



PHOTO BY BARBRO RAKOS
U.S. Department of Health and Human Services Secretary Kathleen Sebelius, center, discusses dental therapy with ANTHC's Dental Health Aide Therapist team recently in Anchorage. At left is DHAT Director Dr. Mary Williard, at right Kotzebue-based DHAT Stephanie Woods.

Online

Learn more about the Alaska Dental Health Aide Therapy Program by visiting:

www.anthc.org/chs/chap/dhs

care, as well as making regular trips to surrounding communities. That means a crucial part of DHAT training includes several weeks of village travel. In these weeks, students like Patton work with a dentist to treat residents in pain, while also providing preventive services and measures to stem the tide of decay. Patton's recent village-based work was with fellow student Shannon Hardy and dentist instructor Dr. Anthony Brusca.

"Our week started pretty slowly, but as we began the process of unpacking gear, it suddenly felt like it was never going to end," Patton said. "We instantly had two pages of patients we were expected to see."

In fact, demand was so high that the team worked from 9 a.m. to 10 p.m. for nearly a week.

"Shannon and I wrote notes probably until 11:30 p.m., ate dinner, went to sleep and repeated that schedule all week," Patton said. "While we were overwhelmed with all the dental work that needed to be completed, I felt comfort – the village made us feel at home."

"And as I was providing care, I realized that I love making a difference in the lives of the Yup'ik people and helping many feel free of pain," Patton added.

The DHAT program is even inspiring groups outside Alaska, with Lower 48 states looking at Alaska's training as a model for improving access to dental care for people in their areas. The American Association of Public Health Dentistry recently released a special supplement to their journal dedicated to exploring midlevel dental providers



PHOTO BY SARAH SHOFFSTALL



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Above: Dental Health Aide Therapist student Jana Schuerch cares for a patient in Tuntutuliak.

Left: Dental Health Aide Therapist students, left, Jana Schuerch, of Kiana, and Kate Kohl, of Bethel, recently worked in Tuntutuliak.



PHOTO COURTESY ANTHC

Dental Health Aide Therapist student Trisha Patton.

including dental therapists, including a curriculum outline based on the DHAT training curriculum and an article co-authored by Dr. Mary Williard, DHAT Training Director for ANTHC, on DHAT supervision.

Four more Alaska-trained dental

therapists will graduate at the end of 2011, while seven new students are entering class this month at the ANTHC/University of Washington DENTEX Training Center in Anchorage. ■