

FOREST COUNTY POTAWATOMI COMMUNITY HEALTH ASSESSMENT 2012



Origin: 10.23.13 (HAC Approval) Revised: 11.19.13 (HAC Approval) Reviewed:





Dear Community Member,

The Forest County Potawatomi Public Health Accreditation Committee has developed this report with the intent of sharing information about the overall health of the Forest County Potawatomi Community. This report includes information on demographics, health factors and lifestyle behaviors that impact health and quality of life. The data that has been collected is specific to the Forest County Potawatomi Tribe.

This information is intended to help improve the overall health of the Forest County Potawatomi Community. By identifying health challenges that the community faces, we will be better able to develop a community health improvement plan that addresses these health factors.

We know that our efforts will not be successful without the involvement and voice of the community. By engaging the community, we hope to move forward by developing programs that are accepted and effective in reducing and eliminating poor health outcomes.

We invite you to review this report and take action in improving the health of your community.

Sincerely,

Lorrie Shepard, RN, FCP Community Health Department Director

FCP Tribal Public Health Accreditation Committee

FCP Community Health Department

Yorig Shepa W. KN





Table of Contents
Purpose of Assessment/Data Sources3-5
Forest County Potawatomi Demographic Overview
Contributing Factors to Health6-12
Alcohol and Drug Use13-15
Chronic Disease Prevention and Management16-18
Communicable Disease
Environmental and Occupational Health21-22
Healthy Growth and Development23-25
Injury and Violence
Mental Health
Adequate, Appropriate and Safe Food and Nutrition31-33
Oral Health34
Physical Activity35-36
Reproductive and Sexual Health
Tobacco Use and Exposure39-40
Identification of Health Priorities41
Health Priorities Summary41-43
Acknowledgements44





Purpose of Assessment

- To collect updated data and information regarding the Forest County Potawatomi Community's health status, which will be used to identify and prioritize health needs of the community.
- Utilize key health findings to develop a comprehensive community health improvement plan that strives to reduce or eliminate poor health outcomes.
- Develop a process to engage the Forest County Potawatomi Community and encourage their input in the community improvement planning process.
- To gather information that will aide in internal program planning and resource allocation.

Assessment Data Sources

The process used to collect health data consisted of a workgroup involving the Forest County Potawatomi Health and Wellness Center's Clinical Data Analyst, Health Educator and the Maternal/ Child Health Nurse. Collaboration with the Great Lakes Inter-Tribal Epidemiology Center, Forest County Health Department and the Wisconsin Department of Health assisted in producing some of the health-related reports. Forest County Potawatomi (FCP) Tribal Members also completed surveys, which assessed health status and health behaviors. Survey results were included in the assessment.

Processes included:

- 1) Forest County Potawatomi specific data was extracted from the Resource and Patient Management System (RPMS) system by diagnosis codes and pre-defined reports. Health related data was viewed on patients who were considered active in the system (at least 1 visit in the past 3 years to the Health and Wellness Center).
 - A. An initial report was ran on the top 10 diagnoses of FCP Tribal members.
 - B. Individual reports were ran on each of the top 10 diagnoses to obtain the percent of the population with the diagnosis.
- 2) The Healthiest Wisconsin 2020 Health Improvement Plan's focus areas were used as a framework for assessing data. Data was included from RPMS, FCP Tribal Member Health Surveys, Forest County and the Wisconsin Department of Health Services.
- 3) The Great Lakes Inter-Tribal Council produces the Honoring Our Children Report for the Forest County Potawatomi. Data related to pregnant women and their children involved in the Honoring Our Children Program was added into the assessment.







Forest County Potawatomi Youth Community Health Opinion Survey 2010

The Forest County Potawatomi Community Health Department developed a health opinion survey that contained a variety of health-related questions. A total of 41 individuals (ages 8-18) were surveyed, approximately 20% of the youth FCP population residing on or near the reservation. There were 19 females and 22 males that participated in the survey. The survey asked participants to answer questions regarding their lifestyle and health behaviors.



Healthiest Wisconsin 2020: Everyone Living Better, Longer

represents a statewide community health improvement plan designed to benefit the health of everyone in Wisconsin and the communities in which we live, play, work, and learn. The Healthiest Wisconsin 2020 health improvement plan's 12 focus areas provided the framework for this assessment. Data was gathered for each area and strengths and gaps were identified.



Forest County Potawatomi Adult Community Health Opinion Survey 2010

The Forest County Potawatomi Community Health Department developed a health opinion survey that contained a variety of health-related questions. A total of 153 individuals were surveyed, approximately 24% of the adult FCP population residing on or near the reservation. Ages ranged from 19 and above with the majority being between 26 to 45 years of age. There were 92 females and 60 males that participated in the survey. The survey asked individuals to identify areas in the Forest County Potawatomi Community that are in need of more services or improvement of services.



Great Lakes Inter-Tribal Council: Honoring Our Children 2010 Data Report Forest County Potawatomi

The report provides information on a variety of health factors specific to pregnant women and their children involved in the Honoring Our Children Program. The program services Forest County Potawatomi Tribal Members until children have reached the age 2.



Resource and Patient Management System (RPMS)

A template of active FCP Tribal Members was created for the use of visit and diagnosis data in this report. The template included patient of all ages, both male and female. The total number of patients was 1,016.





Other Sources of Data:

- Forest County Potawatomi Insurance Department
- Forest County Potawatomi Education Department
- Forest County Potawatomi Diabetes Audits
- Great Lakes Inter-Tribal Epidemiology Center
- Forest County Health Department
- Wisconsin Epidemiological Disease Surveillance System (WEDSS)
- Wisconsin Department of Health Services
- Wisconsin Interactive Statistics on Health (WISH)
- Community Health Data Profile: Michigan, Minnesota, Wisconsin Tribal Communities 2012

Forest County Potawatomi Demographic Overview

The Potawatomi Reservation, which is located primarily in Forest County, totals 12,000 acres. The FCP Reservation forms a checkerboard pattern throughout Forest County and includes three communities: Stone Lake, Blackwell and Carter.

There are a total of 1,444 FCP Tribal Members; approximately 725 reside in Forest County. Roughly 38 percent of FCP Tribal Members live on the reservation, trust or fee land. The FCP Community Health Department serves Tribal Members that reside in Forest County, as well as those that live in the service area, which includes areas in Oconto, Oneida and Langlade Counties.

The FCP Community Health Department is part of the FCP Health and Wellness Center, which is located in Stone Lake. The Health and Wellness Center provides Medical, Optical, Dental, Physical Therapy, Radiology, Laboratory, OB/GYN, Endocrinology, Podiatry, Pediatrics, Mental

BAD RIVER

LAC COURTE OREILLES
ST. CROIX

FLAMBEAU POTAWATOM
MOLE LARE
MUNSEE
HO-CHUNK
ONEIDA

Great Lakes Inter-Tribal Council

Health and AODA services. The clinic is open to FCP Tribal Members and the general population.

The Forest County Potawatomi Health and Wellness Center is accredited by the Accreditation Association for Ambulatory Health Care (AAAHC) and was provided with the Patient Centered Medical Home Accreditation Award in August, 2011.





Contributing Factors to Health

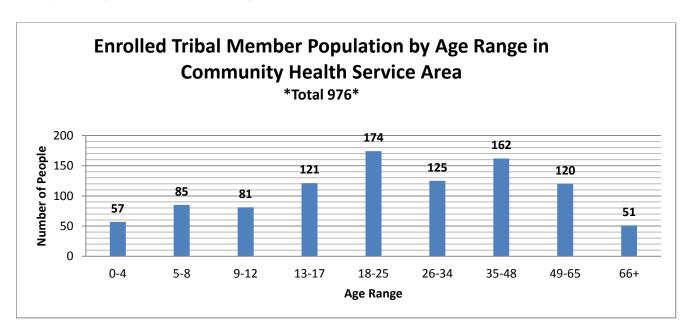
Many contributing factors merge together to influence the health of a population. Environmental factors, access to health care services, age, income, education level, interpersonal relationships, cultural beliefs, customs, and genetics all have an impact on overall health. It's important to consider all these factors when assessing the health a community.

Age and Gender

Both age and gender influence patterns of morbidity and mortality and the utilization of health services. Therefore, the analysis of the age and sex distribution of the population is important in assessing the health of a community. It also plays an important role in public health planning because age is a significant indicator of specific disease prevalence and the overall health of a community. Current age distribution can be used as a predictor for how many people will be in the older age groups in the future.

Gender also plays an important role in the health of a community. For select diseases, males and females have differing mortality and morbidity rates. Disease conditions or injuries can affect one sex more dramatically than the other or can affect one sex exclusively. Average life expectancy also tends to differ by sex.

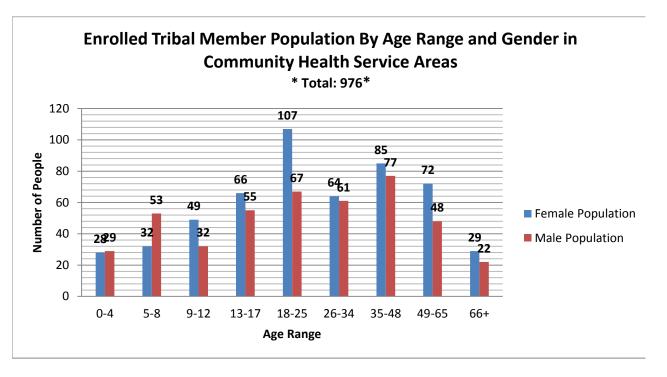
Source: Great Lake Inter-Tribal Epidemiology Center



Community Health Service Area includes: Crandon (54520), Wabeno – Blackwell/Carter (54566), Lakewood (54138), Townsend (54175), Laona (54541), Rhinelander (54501), Elcho (54428), Argonne (54511), Pelican Lake/ Monico (54463), and Antigo (54409). Source: FCP Insurance Department







Community Health Service Area includes: Crandon (54520), Wabeno – Blackwell/Carter (54566), Lakewood (54138), Townsend (54175), Laona (54541), Rhinelander (54501), Elcho (54428), Argonne (54511), Pelican Lake/ Monico (54463) and Antigo (54409).

Source: FCP Insurance Department

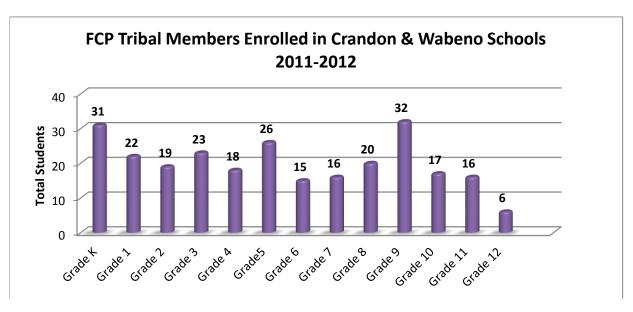
Education & Socio Economic Status

Education and socioeconomic status have been shown to correlate with overall health and well-being. Typically individuals with higher education levels tend to fall into a higher socio-economic bracket and vice versa. Socio-economic status affects a person's ability to live in a safe home and environment and also limits access to appropriate health care services. Low education is a risk factor for poor health outcomes and unhealthy lifestyle behaviors as individuals may not possess the skills, knowledge and resources necessary to make important choices regarding their health.

The Forest County Potawatomi Community is fortunate in that self-funded health care insurance is provided to Tribal Members. It is also the number one employer in Forest County and has a Tribal preference policy. Financial resources are greater today than they were in the past; this has created a wealth of opportunities for the community, however it has also caused a unique set of challenges specifically related to financial management and continuation of education.

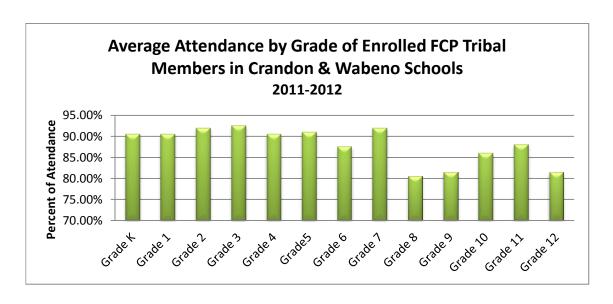






Grade 12 has a significant decrease in enrollment rates, compared to previous grade levels.

Source: Tom Boelter- FCP Education Department



Grades 8, 9 and 12 have the lowest attendance rates at school.

Source: Tom Boelter-FCP Education Department





Environment & Community Resources

When assessing community health status, it is important to look beyond the health data and consider the environment in which a typical person lives. Individual health is more than just a personal choice, the environment where a person lives, works and plays can greatly influence health.

The Forest County Potawatomi Community is located in Northern Wisconsin, which has an array of outdoor recreational activities that promote health and embrace the traditional Native American culture. People choose to live in the northwoods because of the relaxed environment, natural beauty and small town values, however with all of these perks comes many challenges when it comes to healthy living.

Access to fresh produce is a challenge due to the short growing season and limited grocery stores in the area. There are only two full service grocery stores within Forest County limits, which requires some residents to drive long distances to access food for their families. Although grocery stores are limited, there are eight gas stations and convenience stores in Forest County. These stores contain a majority of foods that are low in nutritional value and high in calories, fats and preservatives. A majority of the foods found in these locations are untraditional to Native Americans; traditional diet includes berries, vegetables, lean protein (venison, bison, fish, etc.), seeds and nuts.

The Forest County area is filled with lakes and various recreational trials, making it an ideal place for outdoor enthusiasts. FCP Tribal Members also have access to a baseball field and many enjoy this outdoor sport. Unfortunately during the long winter months, cold and inclement weather can be a barrier for individuals who typically enjoy exercising outdoors. The FCP Community is fortunate to have two fitness facilities in the Stone Lake and Carter communities, however hours are limited and can be restrictive for some individuals. The size of the facilities as well as limited space and exercise equipment can also be a barrier for some individuals. Like many other communities, fitness among youth is a challenge. Many of the popular activities among youth include activities that require very little physical fitness such as ATVing, snowmobiling and video games.

Social and cultural norms greatly influence health. Sometimes these factors can be the most difficult to change because these behaviors have been embedded in the traditions and customs of the community over generations. One particular social norm that Wisconsin is known for is its high levels of alcohol consumption. Forest County is no exception to this norm; there is approximately one bar for every 75 residents. While there are a large number of bars in Forest County, only one bar is located on the Forest County Potawatomi Reservation.

Although every Tribal Community is unique, on average, Native Americans experience disproportionately higher rates of alcohol use than other ethnic groups as evidenced by a study completed by SAMSHA in 2011.





The study indicated that rates of substance abuse and dependence among American Indians or Alaska Natives was twice that of other ethnic backgrounds. These high rates can be attributed to a variety of factors such as historical trauma and mental health conditions. Intergenerational trauma stemming from the "Boarding School Era," 1879-1973, has resulted in many unresolved issues and has also contributed to the current mental health status of the community. These feelings and beliefs have been passed on from one generation to the next and have led to unhealthy coping mechanisms, substance abuse being one example. Substance abuse and mental health often go hand-in-hand. According to the National Alliance of Mental Illness, recent studies indicate that nearly one-third of people with all mental illnesses and approximately one-half of people with severe mental illnesses also experience substance abuse. On the other hand, more than one-third of all alcohol abusers and more than one-half of all drug abusers are also battling mental illness. Often times individuals with mental illnesses use drugs and alcohol to self-medicate.

Ordinances that promote safe environments and roadways can greatly influence the health of the community. These ordinances may include road safety, helmet use, car seat use or recreational vehicle safety to name just a few. The FCP Community is unique in comparison to other Tribes, in that it doesn't have a Tribal police department. Although, the local Sheriff's Department has jurisdiction over Tribal land, there are limitations in the ability to enforce laws and ordinances due to 1,046 square miles of land that law enforcement is required to cover. In order for a law or ordinance to be effective it must be enforced regularly and consistently.

The FCP Reservation is also unique in that it has never had a road safety audit. Road audits are an important tool for identifying improvements in the current road system. According to 2012 WisDOT Tribal Taskforce Crash Report, the key contributing factors for vehicle collisions on the FCP Reservation were roadway geometry, environmental factors, lighting conditions, and alcohol. The roadway geometry is a contributing factor due to the reasoning that almost two-thirds of the crashes were categorized as a vehicle running off the road as well as having 24 percent of the collisions occurring within an intersection. Environmental factors also contribute to motor vehicle collisions as there was an increase in crashes during the winter months of November, December, and January. Further proof of this trend is that 25 percent of the crashes took place when the road condition was listed as being snowy or icy. One-third of the crashes happened when the lighting conditions were said to be dark, which suggests lighting to be a factor. Lastly, alcohol was a contributing factor as 15 percent had alcohol associated with the crash.





Forest County Potawatomi Community Resources & Assets

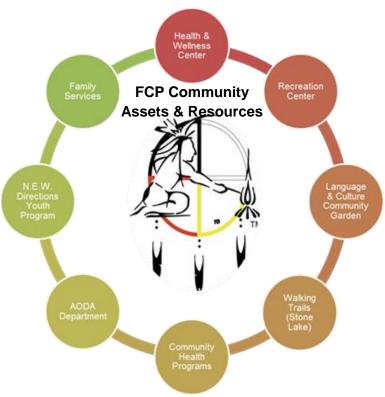
In many rural settings, access to care can be a challenge. With the exception of not having a hospital within Forest County, the FCP Community has a wealth of health care services and programs and services that promote health.

Health & Wellness Center – The FCP Health and Wellness Center provides Medical, Optical, Dental, Physical Therapy, Radiology, Laboratory, OB/GYN, Endocrinology, Podiatry, Pediatrics, Community Health, Mental Health and AODA services. The clinic is open to FCP Tribal Members and the general population.

Recreation Center – The FCP Recreation Center has a fully equipped gym and weight room. The Recreation Center offers a variety of events and programs that promote physical activity and healthy living. Hunter's Safety and ATV Safety Classes are also offered.

Language & Culture Community
Garden – Fresh produce is available to
Tribal Members during the growing
season. Staff deliver vegetables to Elders
in the Community.

Walking Trails – Groomed walking trails are available in the Stone Lake Community.



Community Health Programs – The FCP Community Health Department has the following programs, events and services that promote healthy living: Special Diabetes Program for Indians, Maternal Child Health/Honoring Our Children Program, Infant Nutrition Program, Women, Infants and Children (WIC) Program, Tobacco Cessation Program, HIV/AIDS Prevention Program, WI Well Woman Program, In-Home Care Program, Health Promotion, Disease Prevention Programs (Youth Walking Program, Youth Day Camp, Fall Hike), Mental Health Consultations, Nutrition/Weight Management Consultations, Case Management Services and Annual 5K Fitness Events.





AODA Department – The FCP AODA Department is a Native American outpatient treatment program that provides an effective and unique treatment experience that is culturally sensitive for Native Americans struggling with addiction and other mental health disorders. They utilize a treatment approach that combines medication management, 12 step recovery and wellbriety principles, individual, community based and group therapy, psycho-educational talks, and family participation. Clients have the opportunity to learn more about spirituality and culture through individual work and participation in traditional practices which include: Smudging, Talking Circles and Story Telling, and Sweat Lodges.

Family Services – FCP Family Services Center offers various family friendly events and programs that focus on healthy living, healthy relationships and positive parenting. Child-Care, Indian Child Welfare, Child Support and Domestic Violence Services are also available. The goal of the Family Services Center is to offer a one stop resource center, which offers a wide array of services for Tribal Families in order to enhance, engage and strengthen families.

N.E.W. Directions Program – The N.E.W. Directions youth program aims to provide culturally appropriate activities and educational sessions for Tribal Youth. The education activities cover a variety of topics including cultural traditions, healthy lifestyle behaviors, safe sex and alcohol and drug abuse prevention.







Healthiest Wisconsin 2020 Focus Area Data Analysis

Note: For this portion of the report we have included internal data, however due to limitations to Forest County Potawatomi specific data, we have included data from Forest County as appropriate.

Alcohol and Drug Use

Alcohol and other drug use means any use of a broad array of mood-altering substances that include, but are not limited to, alcohol, prescription substances, and illegal mood-altering substances. Negative consequences or unhealthy uses include, but are not limited to, operating a motor vehicle while intoxicated, drinking while pregnant, alcohol dependence, fetal alcohol spectrum disorder, alcohol-related hospitalizations, heavy drinking, alcohol-related liver cirrhosis deaths, motor vehicle injury or death, liquor law violations, other alcohol-attributable deaths, underage drinking, non-medical or illicit drug use, drug-related deaths, drug-related hospitalizations, arrests for drug law violations, and alcohol- or drug-related crimes (e.g., property crimes, violent crimes).

Alcohol-related deaths are the fourth leading cause of death in Wisconsin behind heart disease, cancer, and stroke. Wisconsin tops the nation in wasted lives, harm, and death associated with its drinking culture. We find ourselves in a culture that in some ways is tolerant of excessive, dangerous, unhealthy, and illegal drinking, which results in a host of societal problems such as homelessness, child abuse, crime, unemployment, injury, health problems, hospitalization, suicide, fetal abnormalities and early death. (Healthiest Wisconsin 2020 "Alcohol & Other Drug Abuse Focus Area" July 2010)

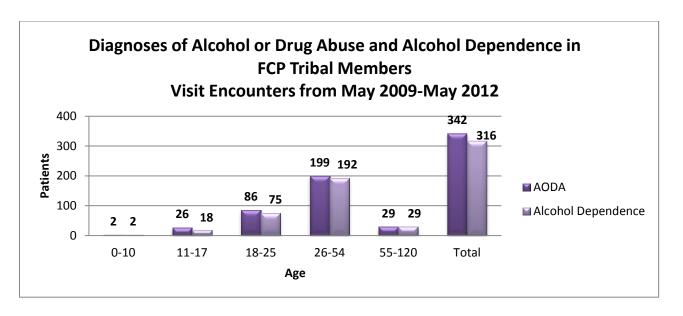
Forest County Potawatomi Community Alcohol Data:

- 27% (274 out of 1,016) active Tribal Members seen at the Health and Wellness Center have been diagnosed with alcohol dependence.
 - RPMS
- 15% (152 out of 1,016) active Tribal Members seen at the Health and Wellness Center have an alcohol abuse diagnosis.
 - RPMS
- 33% (42 out of 128) of adult Tribal Members who participated in the Community Opinion Survey self-reported that they have an alcohol problem.
 - Forest County Potawatomi 2010 Adult Opinion Survey
- 46% (69 out of 151) of adult Tribal Members who participated in the Community Health Opinion Survey currently use alcohol.
 - 32% (22 out of 69) of those Tribal Members that currently drink feel they drink too much.
 - Forest County Potawatomi 2010 Adult Opinion Survey

^{*} FCP 2010 Adult Opinion Survey represents 24% of adult FCP Tribal Members that reside on or near the reservation.

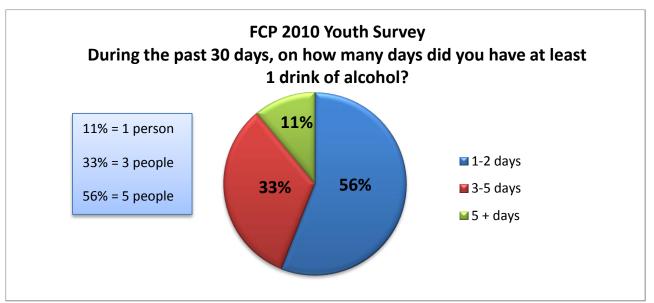






The age group of 26-54 year olds has the highest diagnosis rate for alcohol/drug abuse and alcohol dependence. Alcohol dependence is the top diagnosis in the AODA category.

Source: RPMS



❖ 56% of the surveyed FCP youth admitted to having drank at least 1 drink of alcohol, 1-2 days in the past 30 days. Of the 41 surveys completed only 9 youth chose to answer this question.

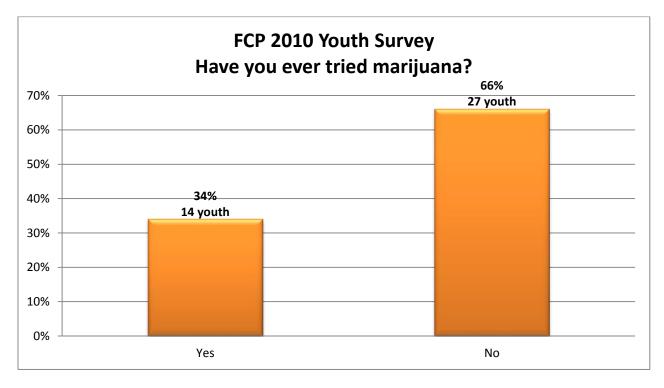
Forest County Potawatomi 2010 Youth Opinion Survey





Forest County Potawatomi Community Drug Data:

- 16% (163 out of 1,016) of Tribal Members seen at the Health and Wellness Center have been diagnosed for abuse or dependence of one of the following substances: cannabis, opioids or polysubstances, which is the addiction to being in an intoxicated state without a preference for one particular substance.
 - RPMS
- 20% (25 out of 125) of the adult Tribal Members who participated in the Community Health Opinion Survey self-reported that they abuse drugs.
 - Forest County Potawatomi 2010 Adult Opinion Survey



❖ 34% (14 out of 41) of surveyed FCP youth admitted to trying marijuana.

Forest County Potawatomi 2010 Youth Opinion Survey





Chronic Disease Prevention and Management

Chronic diseases are defined as illnesses that last a long time, do not go away on their own, are rarely cured, and often result in disability later in life. Chronic diseases, such as heart disease, stroke, cancer, diabetes, asthma and arthritis are among the most common and costly of all health problems in the United States.(1) Chronic diseases such as diabetes, heart disease and cancer are currently among the leading causes of death in American Indian/Alaska Native adults.(2) Rates of chronic disease are expected to rise over the decade as the average age of the population increases and because of the current epidemic of obesity. (1)

Unhealthy diet, insufficient physical activity, tobacco use and secondhand smoke exposure, and excessive alcohol use are responsible for much of the illness, suffering, and early death related to chronic diseases. It is estimated that by eliminating the risk factors leading to chronic disease, at least 80 percent of all heart disease, stroke and type 2 diabetes would be prevented, as would over 40 percent of all cancers. (3)

Note: Body Mass Index (BMI) is a number calculated from a person's weight and height. BMI provides a reliable indicator of body fatness for most people and is used to screen for weight categories that may lead to health problems. (Centers for Disease Control and Prevention)

- Healthiest Wisconsin 2020 "Chronic Disease Prevention and Management Focus Area Profile" July 2010
- 2. WI Department of Health Services- American Indian Health
- 3. WI Department of Health Services- The Epidemic of Chronic Disease in Wisconsin: Why it Matters to the Economy and What You Can Do to Help- 2010

Forest County Potawatomi Data:

- 19% of Tribal Members who are seen at the Health & Wellness Center are diagnosed with diabetes, compared to 13.4% in Forest County.
 - RPMS, WI Department Health Services -The 2011 Burden of Diabetes in Wisconsin
- 66-68% of Tribal Members in the Crandon and Wabeno Elementary Schools are overweight or obese.
 - Forest County Health Department
- 57% of Tribal Members who are seen at the Health & Wellness Center are obese (BMI ≥ 30).
 - RPMS
- 25% of Tribal Members who are seen at the Health & Wellness Center are diagnosed with heart disease.
 - RPMS





Wisconsin Bemidji Indian Health Service Area:

- Approximately 33% of Native Americans are diagnosed with diabetes.
 - Community Health Data Profile: Michigan, Minnesota Wisconsin Tribal Communities 2010
- 74% of Native Americans are obese (BMI ≥ 30).
 - Community Health Data Profile: Michigan, Minnesota Wisconsin Tribal Communities 2010

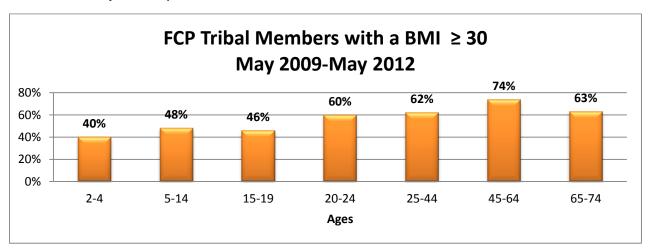
BMI Summary for FCP Children in Crandon Elementary School												
Boys Girls Total												
Number of children												
assessed:	41	39	80									
Underweight (< 5th												
%ile)	2%	0%	1%									
Normal BMI (5th - 85th												
%ile)	27%	36%	31%									
Overweight or obese												
(≥ 85th %ile)*	71%	64%	68%									
Obese (≥ 95th %ile)	61%	49%	55%									

*Terminology based on: Barlow SE and the Expert Committee. Expert committee recommendations regarding the prevention, assessment, and treatment of child and adolescent overweight and obesity: summary report. Pediatrics. 2007;120 (suppl4):s164-92.

BMI Summary for FCP Children in Wabeno Elementary School												
Boys Girls Total												
Number of children												
assessed:	11	18	29									
Underweight (< 5th												
%ile)	9%	0%	3%									
Normal BMI (5th - 85th												
%ile)	45%	22%	31%									
Overweight or obese (≥												
85th %ile)*	45%	78%	66%									
Obese (> 95th %ile)	18%	44%	34%									

*Terminology based on: Barlow SE and the Expert Committee. Expert committee recommendations regarding the prevention, assessment, and treatment of child and adolescent overweight and obesity: summary report. Pediatrics. 2007;120 (suppl4):s164-92.

Source: Forest County Health Department

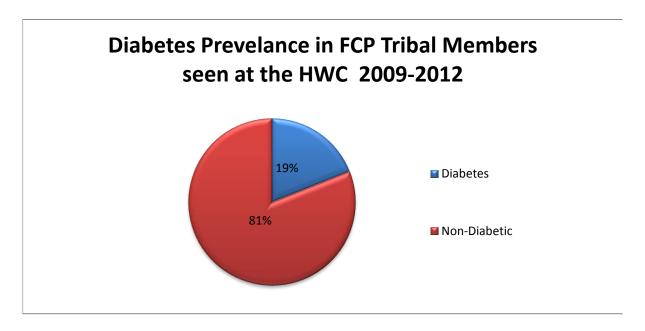


❖ Over 60% of Tribal Members ages 20-74 have a BMI ≥ 30. A BMI ≥ 30 is categorized as obese, which is a risk factor for many chronic diseases. This is less than the average for Native Americans residing in the Bemidji Area.

Source: RPMS

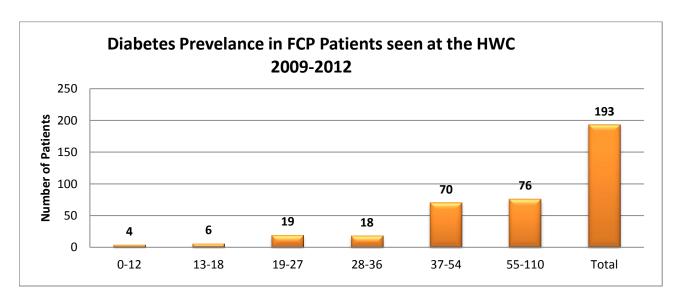






❖ 19% of FCP Tribal Members have diabetes, compared to 33% of Native Americans in the Bemidji Areas and 13% of all population in Forest County. Please note that FCP data is also included in both Forest County and Bemidji Area.

Sources: RPMS, Community Health Data Profile: Michigan, Minnesota Wisconsin Tribal Communities 2010, RPMS, WI Department Health Services -The 2011 Burden of Diabetes in Wisconsin and WI Department Health Services -The 2011 Burden of Diabetes in Wisconsin



19% (193 out of 1,016) of FCP Tribal Members seen at the Health and Wellness Center have diabetes.
Sources: RPMS





Communicable Diseases

Communicable diseases (infectious diseases) are illnesses caused by bacteria, viruses, fungi or parasites. Organisms that are communicable may be transmitted from one infected person to another or from an animal to a human, directly or by modes such as airborne, waterborne, foodborne, or vectorborne transmission, or by contact with an inanimate object, such as a contaminated doorknob.

Communicable disease prevention and control involves the surveillance for and protection from communicable diseases that may result from changes in or evolution of infectious agents (bacteria, viruses, fungi or parasites), spread of infectious agents to new geographic areas or among new populations, persistence of infectious agents in geographic areas and populations, newly emerging infectious agents, or acts of bioterrorism.

Communicable disease prevention and control is the cornerstone of public health. Waves of severe illness and death due to communicable diseases have occurred throughout history, including smallpox prior to its eradication, the bubonic plague in 14th century Europe, the influenza pandemic of 1918 and, close to home, the massive waterborne outbreak of cryptosporidiosis in Milwaukee in 1993. Advancements in clean water and refrigeration and the development of safe, effective vaccines have greatly decreased such threats; however, common diseases still cause outbreaks and new communicable diseases emerge. The worldwide AIDS epidemic, multidrug-resistant tuberculosis, West Nile virus, severe acute respiratory syndrome (SARS), avian influenza and drug-resistant staphylococcus infections are all reminders of our continued vulnerability to communicable diseases. (Healthiest Wisconsin 2020 "Communicable Disease Focus Area Profile" July 2010)

Note: The Forest County Potawatomi Health & Wellness Center reports communicable disease data to the Forest County Health Department. The data is aggregated with the County's data through the Wisconsin Epidemiological Disease Surveillance System (WEDSS)

Reportable Communicable Diseases in Forest County 2002-2011											
Diseases	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	Total
Influenza A	0	0	0	0	0	0	0	4	1	0	5
Pertussis	0	0	1	0	0	1	0	0	0	0	2
Tuberculosis	0	0	0	0	0	0	0	0	0	0	0

From 2002-2011, there were 5 cases of Influenza A, 2 cases of Pertussis and 0 cases of Tuberculosis reported in Forest County.

Source: (WEDSS) Communicable Disease Report- Forest County

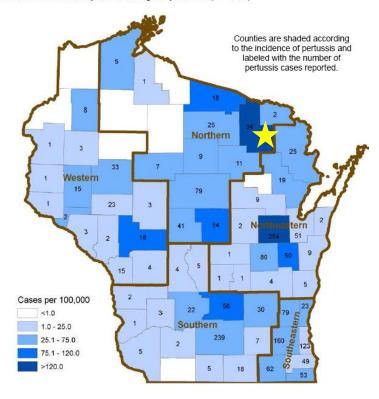




H1N1 Incidence in Forest County - All Races									
	Confirmed Cases Hospitalizations								
4/15/09 - 8/29/09 (1 st wave)	1	0							
8/30/09-1/2/10 (2 nd wave)	3	2							

Source: Wisconsin Department of Health Services

Figure 3. Number and incidence of reported confirmed and probable cases of pertussis, by county of residence, Wisconsin, January 1, 2012 through May 31, 2012 (N= 1,877)



Forest County Pertussis Data:

- 36 confirmed and probable cases of pertussis in Forest County from January 1 – May 31, 2012.
- 8 confirmed cases.
- 2nd highest county incidence in Wisconsin.

Source: WI Department of Health Services Pertussis Report, Wisconsin June 1, 2012





Environmental and Occupational Health

Environmental and occupational health includes the broad and diverse suite of interrelated regulatory and educational programs and services needed in every Wisconsin community to prevent, identify, and mitigate illnesses and injuries resulting from hazards in the natural, built, and work environments. Environmental and occupational health practice requires close collaboration with environmental and public health system partners to achieve and maintain the healthy places required for healthy living.

More and more clear associations and linkages are emerging to demonstrate the ways human health is affected by the environments where people live and work. The air we breathe, water we drink, communities where we live and food we eat are increasingly recognized as underlying determinants of health. In response, the fields of environmental and occupational health have expanded into a diverse area of work with the main focus to protect people from exposures (e.g., lead, contaminated water, asthma triggers, toxic waste) that cause health problems. (Healthiest Wisconsin 2020 "Communicable Disease Focus Area Profile" July 2010)

Note: The Forest County Potawatomi Health and Wellness Center reports all required reportable diseases to the Forest County Health Department. The data is aggregated with the County's data through the Wisconsin Epidemiological Disease Surveillance System (WEDSS).

Foodborne & Waterborne Illnesses in Forest County 2002-2011 (WEDSS)											
Disease	'02	'03	'04	'05	'06	'07	'08	'09	'10	'11	Total
GIARDIASIS	6	0	1	1	0	2	2	3	2	0	17
CAMPYLOBACTERIOSIS	0	0	0	1	1	0	1	2	3	2	10
BLASTOMYCOSIS	2	1	1	0	0	3	0	0	1	0	8
CRYPTOSPORIDIOSIS	1	0	2	0	0	1	0	0	2	0	6
E-COLI, SHIGA TOXIN- PRODUCING (STEC)	1	0	0	0	0	0	0	0	0	1	2

- <u>Giardia</u> germ that causes diarrhea. It is found in the fecal matter of an infected person and commonly spread through recreational water sources.
- <u>Campylobacteriosis</u> bacterium that causes diarrhea, cramping, abdominal pain, and fever. Diarrhea may be bloody and can be accompanied by nausea and vomiting.
- <u>Blastoymycosisis</u> disease caused by a fungus, which lives in the soil and causes various lung infections.
- <u>Cryptosporidosisis</u> diarrheal disease caused by microscopic parasites that live in water; it is the most frequent waterborne illness among humans in the U.S.
- <u>Escherichia coli</u> (abbreviated as E. coli) large and diverse group of bacteria. Although most strains of E. coli are harmless, others can make you sick. Some kinds of *E. coli* can cause diarrhea, while others cause urinary tract infections, respiratory illness pneumonia, and other illnesses.





2011 Lyme Disease Rates	Confirmed Cases	Confirmed Rate per 100,000	Probable Cases	Probable Rate per 100,000
Forest County	3	32.2	1	10.7
Wisconsin	2376	41.8	1233	21.7

Source: WI Department of Health Services Lyme Disease: 2011 Cases by County



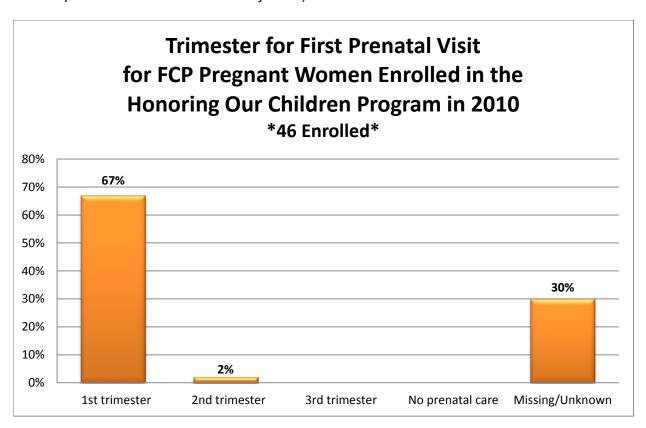




Healthy Growth and Development

Healthy growth and development requires family-centered, community-based, culturally competent, coordinated care and support throughout the life course during preconception and prenatal periods, infancy, childhood, adolescence, and adulthood.

Healthy growth and development in early life has a profound effect on health across the lifespan. Research studies over the past decade demonstrated the link between early life events and adult chronic diseases and found that babies born at lower birth weights have an increased risk of developing heart disease, diabetes, and high blood pressure in later life. Infants with poor birth outcomes begin life with multiple risk factors that may prevent them from reaching their full health and development potential. (Healthiest Wisconsin 2020 "Healthy Growth and Development Focus Area Profile" July 2010)



❖ 67% (31 out of 46) pregnant FCP Tribal women, enrolled in the Honoring Our Children Program, saw a provider within their first trimester. Two percent were seen by their provider in the second trimester. Thirty 30% were unaccounted for.

Source: Great Lakes Inter-Tribal Council: Honoring Our Children 2010 Data Report - FCP

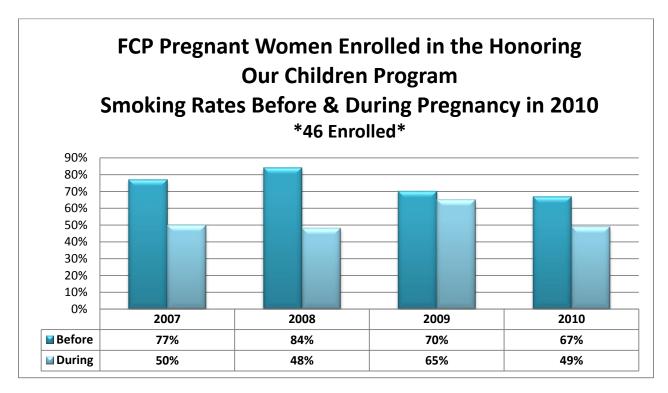




Unduplicated clients weight at birth by	Single E	Births	Multi Births		
Birth Plurality:	Count	Percent	Count	Percent	
Very Low Birth Weight (lesser than 3# 5oz)	0	0.0%	0	0.0%	
Low Birth Weight (Between 3# 5oz and 5# 7oz)	7	7.1%	1	14.3%	
Normal (Between 5# 8oz and 8# 15oz)	89	90.8%	6	85.7%	
High Birth weight (Greater than or equal to 9#)	2	2.0%	0	0.0%	
Total	98	100.0%	7	100.0%	
Missing/Blank	2	2.0%	0	0.0%	

In single births, 90.8% of birth weights are normal. In multiple births, 14.3% of birth weights are low and 85.7% of birth weights are normal.

Source: SPHERE

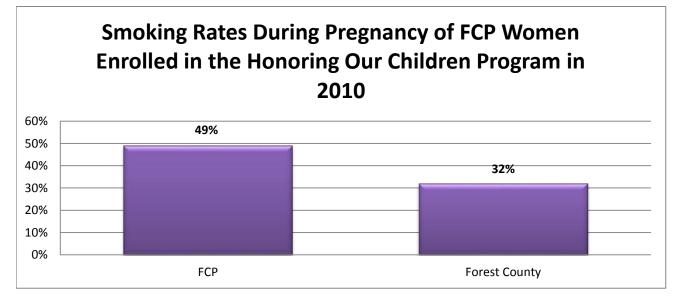


Roughly 50% (23 out of 46) FCP pregnant women enrolled in the Honoring Our Children Program smoked while pregnant, which is on average a 25% reduction in smoking rates prior to pregnancy.

Source: Great Lakes Inter-Tribal Council: Honoring Our Children 2010 Data Report - FCP

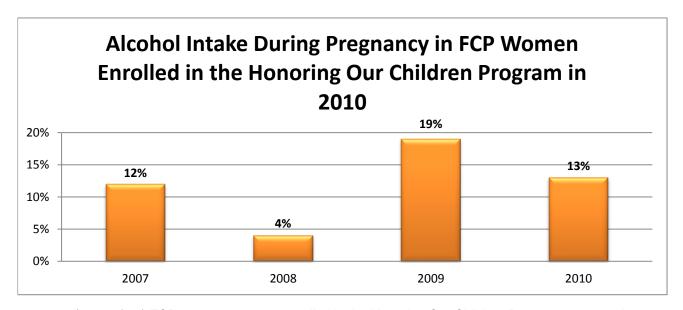






In 2010, 49% (23 out of 46) FCP women enrolled in the Honoring Our Children Program smoked during pregnancy, compared to 32% of all pregnant women in Forest County.

Source: Great Lakes Inter-Tribal Council: Honoring Our Children 2010 Data Report - FCP



13% (6 out of 46) FCP pregnant women enrolled in the Honoring Our Children Program consumed alcohol during pregnancy in 2010, which was a 6% decrease from the previous year. In 2008, the rate was 4%, which was the lowest within a 4 year span.

Source: Great Lakes Inter-Tribal Council: Honoring Our Children 2010 Data Report - FCP



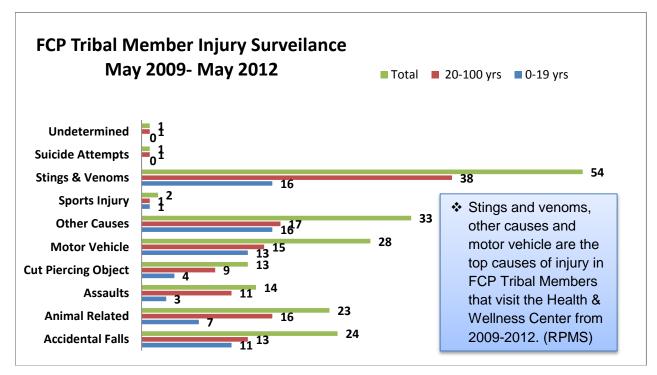


Injury and Violence

Injury and violence encompasses a broad array of topics. Unintentional injuries are often referred to as accidents despite being highly preventable. Examples include falls, drowning, motor vehicle crashes, suffocation and poisoning. Intentional injuries include those that were purposely inflicted, with the intent to injure or kill someone (including self). Intentional injuries often involve a violent act. Examples include homicide, child maltreatment, sexual assault, bullying and suicide. Common prevention strategies exist across all causes and manners of injury that include but are not limited to environmental changes, education, and enforcement of policies, laws and standards.

The burden of injury differs across the life span. The effects of unintentional and intentional injury include costs related to care and treatment of injuries, but also loss of productivity (economic loss to the individual, family and workforce), years of potential life lost due to injury mortality, and the influence of injury and violence on chronic disease, physical and mental health.

Injuries are the leading cause of death among Wisconsin people age 1-44 years and are a significant cause of morbidity and mortality at all ages. Though many of these deaths due to injury are unintentional, the majority are also preventable. Injuries and violence are not discriminatory; they occur in all ages, races, and socioeconomic classes. (Healthiest Wisconsin 2020 "Injury and Violence Focus Area Profile" July 2010)







Forest County Emergency Department Visits for Injuries (2002-2010)								
Cause of Injury	Incidence							
Falls	504							
Struck by or against object or person	339							
Cutting or piercing objects	140							
Motor vehicle traffic crash - Occupant	136							
Overexertion	132							
Other specified classifiable cause of injury	114							
Natural or environmental factors	90							
Unspecified cause of injury	89							
Nontraffic transportation	68							
Poisoning	47							
Fire, heat, chemical burns	31							
Nontraffic pedal cyclist	29							
Other specified cause of injury, not elsewhere classifiable	24							
Motor vehicle traffic crash - Motorcyclist	15							
Machinery	10							
Motor vehicle traffic crash - Other, unspecified	8							
MVT - Self-inflicted/Assault/Undetermined	4							
Motor vehicle traffic crash - Pedestrian	3							
Motor vehicle traffic crash - Pedal cyclist	2							
Suffocation	1							

❖ Falls, struck by or against object or person and cutting or piercing objects are the leading causes of injury of all Forest County Residents, who have visited the Emergency Department from 2002-2010.

Source: WI Interactive Statistics on Health (WISH) Emergency Department Visits for Injuries Module (WI, 2002-2010)

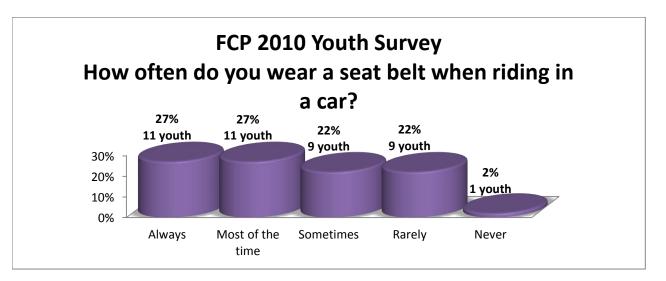


❖ 76% (31 out of 41) FCP youth haven't driven or rode with someone who has been drinking in the past 30 days.

Forest County Potawatomi 2010 Youth Opinion Survey

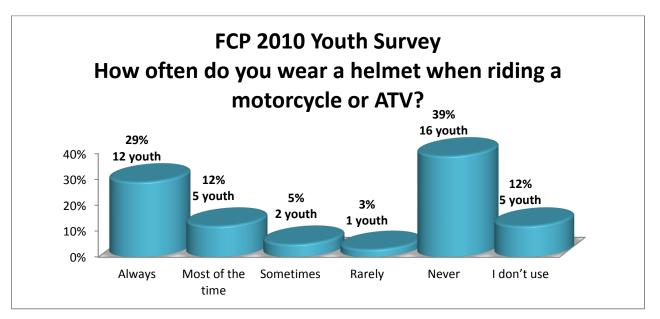






❖ Of the surveyed FCP youth, 22% (11 out of 41) rarely and 2% (1 out of 41) never wear a seat belt when riding in a car.

Forest County Potawatomi 2010 Youth Opinion Survey



❖ 39% (16 out of 41) of the surveyed FCP youth never wear a helmet when riding a motorcycle or ATV.

Forest County Potawatomi 2010 Youth Opinion Survey





Mental Health

Mental health is a state of well-being in which the individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully and is able to make a contribution to his or her community. Mental health is the foundation for well-being and effective functioning for an individual and community. It is more than the absence of mental illness; it is a resource vital to individuals, families and societies.

Mental and physical health are closely connected, and the statement "there is no health without mental health" accurately summarizes the relationship between the two. More specifically, mental health disorders are associated with increased rates of chronic health problems and risk factors such as smoking, physical inactivity, obesity, and substance abuse and dependence. In the U.S., persons with mental illnesses represent an estimated 44.3% of the tobacco market and are nicotine dependent at rates that are 2-3 times higher than the general population. Data show that mental health clients treated in publicly funded systems of care have high rates of smoking-related medical illnesses and premature death, resulting in as much as 25 years of potential life lost compared to the general population. (Healthiest Wisconsin 2020 "Mental Health Focus Area Profile" July 2010)

Forest County Potawatomi 2010 Adult Opinion Survey Data:

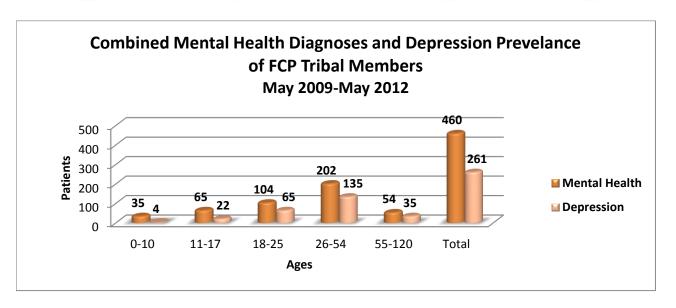
- 36% (46 out of 128) self-reported that they had depression.
- 32% (49 out of 153) have needed support for feeling depressed.
- 25% (30 out of 121) self-reported that they had emotional problems.
- 25% (39 out of 153) have needed support for lack of motivation.
- 22% (33 out of 153) have needed support for feeling unhappy.
- 18% (28 out of 153) have needed support for feeling lonely.
- 18% (27 out of 153) have needed support for inability to focus.
- 11% (16 out of 145) admitted to suicidal thoughts during difficult times.

^{*} FCP 2010 Adult Opinion Survey represents 24% of adult FCP Tribal Members that reside on or near the reservation.



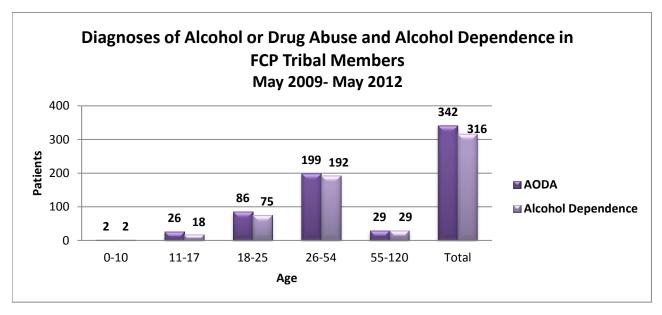






The age group of 26-54 year olds has the highest diagnosis rate for mental health and depression. Depression is the most frequent diagnosis in the mental health category. Note: Depression is included in the mental health category; therefore mental health totals include depression diagnoses.

Source: RPMS



The age group of 26-54 year olds has the highest diagnosis rate for alcohol/drug abuse and alcohol dependence. Alcohol dependence is the top diagnosis in the AODA category. Note: Alcohol dependence is included in the AODA category; therefore AODA totals include alcohol dependence diagnose.

Source: RPMS





Adequate, Appropriate and Safe Food and Nutrition

Adequate, appropriate and safe food and nutrition means the regular and sufficient consumption of nutritious foods across the life span, including breastfeeding, to support normal growth and development of children and promote physical, emotional, and social well-being for all people. Good nutritional practices can also reduce the risk for a number of chronic diseases that are major public health problems, including chronic conditions such as obesity, type 2 diabetes, cancer, heart disease and stroke.

Healthy eating is a staple for a good life. Adequate and appropriate nutrition is a cornerstone to prevent chronic disease and promote vibrant health. Because nourishment is required for survival, eating also serves as a basic source of enjoyment. In addition, preparing and sharing meals provide a common means through which people maintain a sense of family and community. The nutritional, social, cultural, and pleasurable aspects of food contribute to quality of life for all.

Fortunately, people can incorporate all of these benefits into a healthy lifestyle. Healthy nutrition is concerned with striking a balance in the types of foods and beverages consumed that falls squarely on the side of health. A healthy diet can be constructed from foods associated with very different cultures, customs, or places of origin. (Healthiest Wisconsin 2020 "Adequate, Appropriate and Safe Food and Nutrition Focus Area Profile" July 2010)

FCP Adult 2010 Survey Reasons for Not Eating Adequate Amounts of Fruits and Vegetables (142 Surveyed)

Availability is the most common reason for not eating adequate amounts of fruits and vegetables.

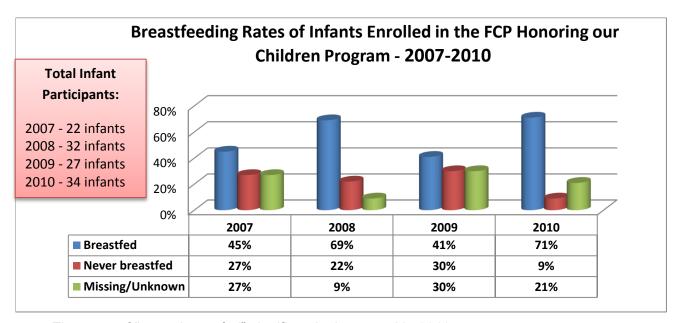


Source: Forest County Potawatomi 2010 Adult Opinion Survey

FCP 2010 Adult Opinion Survey represents 24% of adult FCP Tribal Members that reside on or near the reservation.

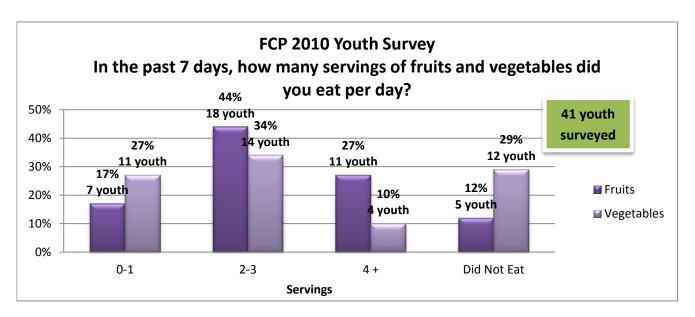






The rates of "never breastfed" significantly decreased in 2010.

Source: Great Lakes Inter-Tribal Council: Honoring Our Children 2010 Data Report - FCP

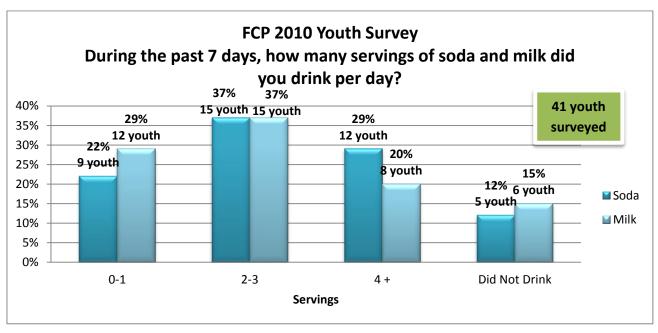


❖ Two to three servings of fruits and vegetables are most commonly consumed by the surveyed FCP youth. However, 12% (5 out of 41) youth did not eat fruits and 29% (12 out of 41) did not eat vegetables in the past 30 days.

Source: Forest County Potawatomi 2010 Youth Opinion Survey

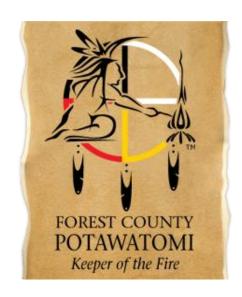






Surveyed FCP youth are drinking similar serving amounts of milk and soda.

Source: Forest County Potawatomi 2010 Youth Opinion Survey







Oral Health

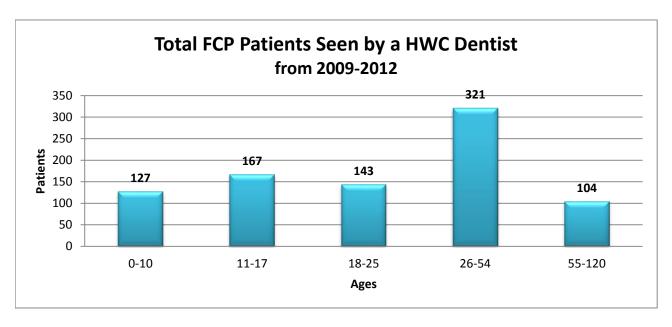
Oral health is basic to general overall health throughout the life span. It means being free of mouth pain, tooth decay, tooth loss, oral and throat cancer, oral sores, birth defects, gum (periodontal) disease, and other diseases that affect the mouth and surrounding structures.

Oral health means much more than having healthy teeth. It means being free of chronic oral-facial pain, oral and pharyngeal (throat) cancers, oral soft-tissue lesions, birth defects such as cleft lip and palate, and scores of other diseases and disorders. Good oral health also includes the ability to carry on the most basic human functions such as chewing, swallowing, speaking, smiling, kissing, and singing. Oral health is integral to general health, and people cannot be healthy without good oral health. Oral health and general health should not be interpreted as separate entities. Many systemic diseases may initially start with and be identified through oral symptoms. (Healthiest Wisconsin 2020 "Oral Health Focus Area Profile" July 2010)

Forest County Potawatomi Adult Community Health Opinion Survey 2010 Data:

36% (47 out of 132) are due to be seen by a dentist.

^{*} FCP 2010 Adult Opinion Survey represents 24% of adult FCP Tribal Members that reside on or near the reservation.



FCP Adults ages 26-54 made the most visits to the dentist.

Source: RPMS





Physical Activity

Physical activity means any bodily activity that enhances or maintains physical fitness and overall health. Public health strategies focus on environmental and policy changes (e.g., active community environment initiatives, urban planning, safety enforcement, trails and sidewalks) to reach large sections of the population.

Physical activity is important and yet most people don't get enough. Recent developments such as reliance on cars for almost all transportation, significant decrease in walking and biking to schools, existence of suburban developments where shopping and parks are not within safe walking distances, busy lifestyles, and an increase in the time spent with computer and video gaming all have engineered activity out of the daily routine. In schools, physical education and recess are often one of the first areas to experience reductions in assigned time, specially trained instructors, and funding. (Healthiest Wisconsin 2020 "Physical Activity Focus Area Profile" July 2010)

Forest County Potawatomi 2010 Adult Opinion Survey Data:

• 57% (85 out of 150) indicated that they exercise less than 3 times per week.

^{*} FCP 2010 Adult Opinion Survey represents 24% of adult FCP Tribal Members that reside on or near the reservation.

Reports of Physical Activity Levels at Clinic Visits by Forest County Potawatomi Ages 5+ (2009-2010)								
Inactive 240								
Some Active 278								
Active 202								
Very Active	380							

RPMS Physical Activity Levels:

- Inactive- little or no physical activity/week
- Some Active- up to 2.5 hours of physical activity/week
- Active- 2.5-5 hours of physical activity/week
- Very Active > 5 hours + of physical activity/week

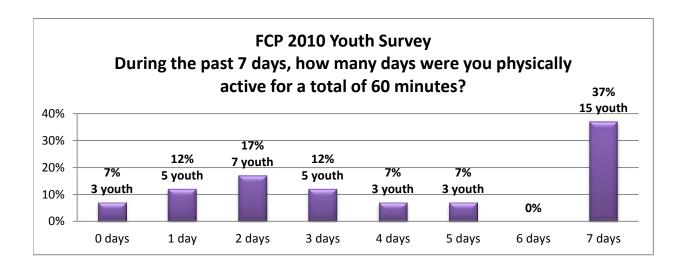
Note: CDC recommends that adults achieve at least 2.5 hours of physical activity each week (Some Active Category)

❖ At 240 visits, FCP patients reported that they are inactive.

Source: RPMS







❖ 37% (15 out of 41) of surveyed FCP youth met the physical activity guidelines (60 minutes of activity per day).

Source: Forest County Potawatomi 2010 Youth Opinion Survey







Reproductive and Sexual Health

Reproductive and sexual health includes the factors that affect the physical, emotional, mental, and social well-being related to reproduction and sexuality across the life span, including engaging in same-sex and/or heterosexual behaviors. Reproductive and sexual health is a core component of individual and community public health.

Health outcomes are not driven by individual behavior alone. Supportive community attitudes toward healthy sexuality, positive social and economic environments, and constructive public policies are as important as access to education and services in fostering reproductive and sexual health. Supportive community attitudes recognize that sexuality is normal. Constructive public policies must support individuals and communities. (Healthiest Wisconsin 2020 "Reproductive and Sexual Health Focus Area Profile" July 2010)

Note: The Forest County Potawatomi Health & Wellness Center reports communicable disease data to the Forest County Health Department. The data is aggregated with the County's data through the Wisconsin Epidemiological Disease Surveillance System (WEDSS)

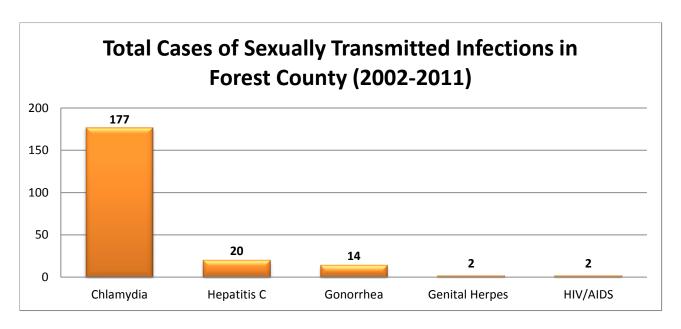
	Sexually Transmitted Infections in Forest County											
Disease	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	Total	
Chlamydia	0	0	0	0	0	32	24	38	39	44	177	
Hepatitis C	1	9	0	2	0	0	3	1	3	1	20	
Gonorrhea	0	0	0	0	0	3	2	4	2	3	14	
Genital Herpes	0	0	0	0	0	2	0	0	0	0	2	
HIV/AIDS	0	0	0	0	0	0	1	0	0	1	2	

During 2002-2011 there were 177 cases of Chlamydia, 20 cases of Hepatitis C and 14 cases of Gonorrhea reported in Forest County. (See graph on page 33.)

Source: WEDSS

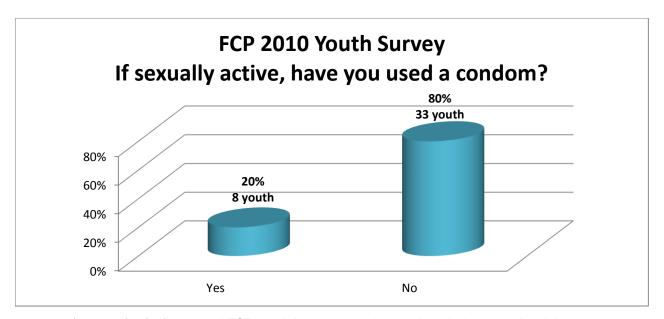






During 2002-2011 there were 177 cases of Chlamydia reported in Forest County.

Source: WEDSS



80% (33 out of 41) of surveyed FCP youth have not used a condom during sexual activity.

Source: Forest County Potawatomi 2010 Youth Opinion Survey





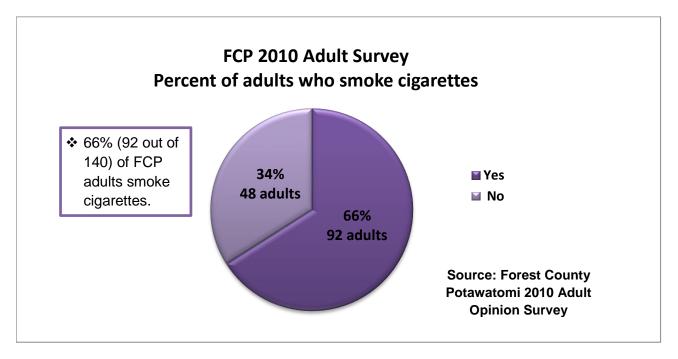
Tobacco Use and Exposure

Eliminating tobacco use and exposure means improving health by preventing tobacco abuse, promoting tobacco dependence treatment, protecting all people from exposure to secondhand smoke, and identifying and eliminating tobacco-related disparities. This is accomplished by partnering with state and local leaders to implement a research-based comprehensive tobacco prevention and control plan.

Tobacco use is the single most preventable cause of death and disease in the U.S. Every day, people across Wisconsin suffer from the effects of tobacco, and the effects of this deadly addiction are felt throughout Wisconsin communities and by Wisconsin families. (Healthiest Wisconsin 2020 "Tobacco Use and Exposure Focus Area Profile" July 2010)

Forest County Potawatomi Data:

- 18% of FCP Tribal Members report using tobacco to their health care provider.
 - RPMS
- 49% (22 out of 46) of pregnant women smoke.
 - Great Lakes Inter-Tribal Council: Honoring Our Children 2010 Data Report FCP



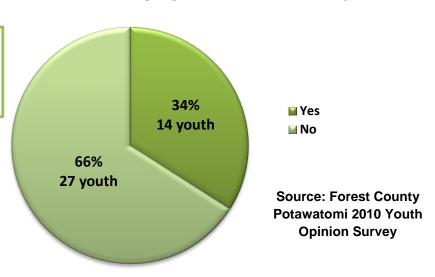
^{*} FCP 2010 Adult Opinion Survey represents 24% of adult FCP Tribal Members that reside on or near the reservation.





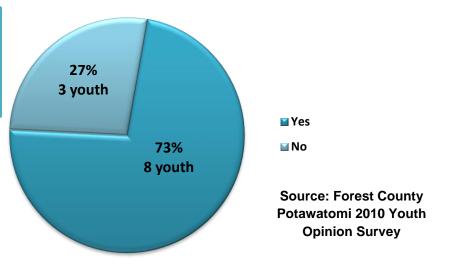
FCP 2010 Youth Survey Have you ever tried smoking cigarettes, even 1 or 2 puffs?

34% (14 out of 41) of youth have tried smoking cigarettes.



FCP 2010 Youth Survey During the past 12 months, did you ever try to quit smoking cigarettes?

73% (8 out of 11) of youth that smoke cigarettes tried to quit in the past 12 months.







Identification of Health Priorities

After the completion of the FCP Community Health Assessment (CHA) the Public Health Accreditation (PHA) Committee reviewed the data and discussed the major health concerns identified in the report. The group reached consensus on three health areas that they believed the FCP Community Health Improvement Plan (CHIP) should address. The PHA Committee presented the CHA to the Health Advisory Committee (HAC), a group of elected Tribal Members who oversee Health & Wellness Center activities to ensure they align with the values of the community and meet their needs. The PHA Committee reviewed key findings and concerns from the CHA with the HAC and discussed the three health areas that they would like to address in the FCP CHIP. The HAC made a motion to approve the CHA and the 3 proposed focus areas:

- Obesity Prevention
- Injury Prevention
- AODA/Mental Health



Obesity Prevention

The health consequences associated with obesity are numerous. Many chronic diseases are linked to obesity. The more overweight or obese a person, the greater risk they are for developing the following health problems.

- Heart disease and stroke
- High blood pressure
- Diabetes
- Cancer
- Gallbladder disease and gallstones
- Osteoarthritis
- Gout
- Breathing problems, such as sleep apnea and asthma





The prevalence of these chronic conditions is increasing due to a growth in the number obese individuals. (WebMD) Obesity levels could significantly decrease if individuals made modifications to their lifestyle, for example improving nutrition, increasing physical activity and avoiding tobacco use and alcohol that could potentially limit ability to exercise.

- 67% of FCP Tribal Members in the Crandon and Wabeno Elementary Schools are overweight or obese.
- Over 60% of FCP Tribal Members ages 20 and older are obese.
- 57% of adult FCP Tribal Members indicated that they exercise less than 3 times per week.
- 56% of FCP youth eat little to no vegetables a day.
- 29% of FCP youth eat little to no fruits per day.
- 27% of active Tribal Members seen at the HWC have been diagnosed with alcohol dependence.
- 66% of FCP adults smoke cigarettes.
- 34% of youth have tried smoking cigarettes.

Injury Prevention

Injury and violence encompasses a broad array of topics. Unintentional injuries are often referred to as accidents despite being highly preventable. Examples include falls, drowning, motor vehicle crashes, suffocation and poisoning. Intentional injuries include those that were purposely inflicted, with the intent to injure or kill someone (including self). Intentional injuries often involve a violent act. Examples include homicide, child maltreatment, sexual assault, bullying and suicide.

The burden of injury differs across the life span. The effects of unintentional and intentional injury include costs related to care and treatment of injuries, but also loss of productivity (economic loss to the individual, family and workforce), years of potential life lost due to injury mortality, and the influence of injury and violence on chronic disease, physical and mental

Common prevention strategies exist across all causes and manners of injury that include but are not limited to environmental changes, education, and enforcement of policies, laws and standards. (Healthiest Wisconsin 2020 "Injury and Violence Focus Area Profile" July 2010)

- 24% of FCP youth reported riding in a vehicle while drinking or riding with someone who has been drinking.
- 24% of FCP youth reported rarely or never wearing a seat belt.
- 39% of FCP youth never wear a helmet when riding a motorcycle or ATV.
- Motor vehicle crashes, accidental falls and animal related injuries are a few of the most frequent purposes of clinic visits at the Health and Wellness Center.
- 11% of adult Tribal Members admitted to suicidal thoughts during difficult times.





AODA/Mental Health

Mental health is a state of well-being in which the individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully and is able to make a contribution to his or her community. Mental health is the foundation for well-being and effective functioning for an individual and community. It is more than the absence of mental illness; it is a resource vital to individuals, families and societies.

Mental and physical health are closely connected, and the statement "there is no health without mental health" accurately summarizes the relationship between the two. More specifically, mental health disorders are associated with increased rates of chronic health problems and risk factors such as smoking, physical inactivity, obesity, and substance abuse and dependence. (Healthiest Wisconsin 2020 "Mental Health Focus Area Profile" July 2010)

- 36% of adult Tribal Members self-reported that they had depression.
- 32% of adult Tribal Members have needed support for feeling depressed.
- 25% of adult Tribal Members have needed support for lack of motivation.
- 22% of adult Tribal Members have needed support for feeling unhappy.
- 18% of adult Tribal Members have needed support for feeling lonely.
- 18% of adult Tribal Members have needed support for inability to focus.
- 11% of adult Tribal Members admitted to suicidal thoughts during difficult times.
- Depression is the most frequent diagnosis in the mental health category at the Health and Wellness Center (26%).
- Alcohol dependence is the most frequent diagnosis in the AODA category at the Health and Wellness Center (31%).







Acknowledgements

Thank you to those who were involved in the development of The Forest County Potawatomi Community Health Assessment. We appreciate you taking the time out of your busy schedules to share your knowledge and expertise. A special thank you is extended to the Health Advisory Committee for their guidance and feedback throughout the community health assessment process.

Public Health Accreditation Committee

- Lorrie Shepard, RN, Director FCP Community Health Department
- Michelle Stoffregen, RN, Nurse Educator/Clinical Data Analyst FCP Health and Wellness Center
- Jodie Harris, RN, Maternal Child Health Nurse
- Linda Sturnot, Q.I./Patient Services Administrator and HIPAA P.O., FCP Administration Department
- Heather Robinson, Assistant FCP Community Health Department
- Brenda Cornell, Community Outreach Coordinator
- Sara Cleereman, BSN, RN FCP Community Health Department
- Kristin Kuber, CHES, Health Educator FCP Community Health Department

Health Advisory Committee

- Cindy Miller, Chairperson
- Gordon Tuckwab, Member
- Brooks Boyd, Member
- Ira Frank, Member
- Dina LeMieux, Member
- Ken George Sr., Former Member
- Hazel George, Former Member
- J.R. Holmes, Former Member



Community Health Department Vision:

To promote healthy lifestyle choices through ongoing educational outreach and programming for FCP Tribal Members and their families in a trusting, culturally respectful manner, for the wellness and future of the community.

