GHWC Background
Between 2014-2019, the Centers for Disease Control and Prevention (CDC) will invest over $78 million in chronic disease prevention efforts through the Good Health and Wellness in Indian Country (GHWC) initiative. With the support of GHWC funding, eleven Tribal Epidemiology Centers (TECs):
• Coordinate evaluation activities and data collection to highlight the regional work of GHWC-funded Tribes and Tribal organizations.
• Provide technical assistance to GHWC-funded Tribes and Tribal organizations.
• Enhance cross-sector partnerships and strengthen American Indian and Alaska Native (AI/AN) networks across the service region.

Regional Efforts to Prevent and Manage Chronic Disease
The Northwest Tribal Epidemiology Center (NWTEC) coordinates GHWC evaluation in the Indian Health Service (IHS) Portland Area. Wellness for Every American Indian to Achieve and View Health Equity (WEAVE-NW) is a project of the NWTEC. In the past year 13 Tribes have received direct sub-awards to support chronic disease prevention and management by:

1. Building Capacity and Technical Assistance
The WEAVE-NW staff provided trainings, workshops, webinars, and technical assistance to all of the NWTEC member Tribes. Staff conducted more than 20 trainings, workshops, and webinars reaching over 264 individuals. In addition, 31 of the 43 member Tribes in the area received technical assistance. The most common types of technical assistance included evaluation and resource sharing.

2. Promoting Chronic Disease Prevention Policies
WEAVE–NW focuses on decreasing chronic disease through upstream approaches that lead to long-term sustainable change, including policies focused on improving access to healthy, safe, and affordable foods for Tribal communities across Idaho, Oregon, and Washington. Over the past year, policies have been created regarding food handling, food voucher programs that link tribal clinics with community gardens, and involvement of Tribal Councils to engage long-term support for gardens beyond the years of funding.

3. Implementing a CSR Library
The community resource library was launched on the Northwest Portland Area Indian Health Board (NPAIHB) site in the fall of 2016. Since then, WEAVE-NW has continuously gathered and shared materials from Tribes across Indian country including policy templates, health education curricula, brochure templates, and presentation information. To access the Resource Library at NPAIHB please go to http://www.npaihb.org/resource-lib/

Activity Spotlight: Elders’ Wisdom is Policy
A local tribal community wanted to decrease the high consumption of sugar-sweetened beverages during cultural activities on their reservation, especially for youth. The Tribal Council knew that signing and posting a written policy would not necessarily change the drinks that were brought to different gathering areas and chose to incorporate traditional leaders, calling upon the Elders to promote and encourage healthier drink choices. The Council knew that as soon as an Elder stated a guideline sharing their wisdom, the community would listen. By working with multiple Elders, who told youth that sugar-sweetened drinks were no longer allowed in the public gathering centers, the Council knew that no one would question these words, ultimately creating the greatest change in drink choices. Because community members knew the message came from a good place, they told their friends and relatives. Implementation of this policy could be actively seen within the week.
To support policy, systems, and environmental (PSE) changes that promote healthy behaviors, three Tribal sub-award communities used the community supported agriculture (CSA) model to distribute fresh produce to Tribal families for 5-12 weeks. Through this program, 104 families were reached and over 2,800 pounds of food were delivered to Tribal families. To promote access to healthy foods these Tribes also forged partnerships with local organizations including farmers markets, Tribal food banks, and Tribal market-community programs.

All of these efforts have produced approximately 5,200 pounds of fresh fruits and vegetables which were harvested and distributed to Tribal members, elders and youth programs, nutrition classes, food banks, and other community events. These PSE changes have brought community member together to collectively make behavioral changes that will provide long-term benefits.

By the Numbers

| 13 | built environment changes that increase access to physical activity |
| 15 | sub-awardees have made health systems improvements at the clinical level |
| 18 | settings have enacted food system changes |

PSE changes and interventions allow community members to make healthier choices by creating sustainable key environmental modifications. Some of these changes have included:

- Restoration of traditional food habitats
- Increased access to physical activity through fitness classes.
- Promotion of traditional food gathering.
- Expansion and establishment of community gardens at five Tribes, providing easy access to fresh fruits and vegetables in areas which were previously food deserts.

To reduce wait times and cancellation rates at the clinic level, the use of an open access scheduling model was adopted at some Tribal clinics allowing patients to schedule and view appointments themselves. In addition, care management guidelines were implemented or strengthened at three Tribes.

Community Health Representatives (CHR) have expanded duties to allowing them to conduct home visits. In addition, an Electronic Medical Record template was created to document CHR observations. These improvements act to expand the delivery of care to community members.

To support policy, systems, and environmental (PSE) changes that promote healthy behaviors, three Tribal sub-award communities used the community supported agriculture (CSA) model to distribute fresh produce to Tribal families for 5-12 weeks. Through this program, 104 families were reached and over 2,800 pounds of food were delivered to Tribal families. To promote access to healthy foods these Tribes also forged partnerships with local organizations including farmers markets, Tribal food banks, and Tribal market-community programs.

All of these efforts have produced approximately 5,200 pounds of fresh fruits and vegetables which were harvested and distributed to Tribal members, elders and youth programs, nutrition classes, food banks, and other community events. These PSE changes have brought community member together to collectively make behavioral changes that will provide long-term benefits.

Map of GHWIC-funded Tribes and Tribal organizations in the IHS Portland Area