Tribal Consultation Meeting
July 28, 2020
Katelyn Strasser, MPH, RN
Maternal Child Health Epidemiologist
Inform Priority Setting and OCFS Planning through integration of needs assessment findings and input from OCFS partners, families & individuals, and OCFS staff.
Guiding Principles

- Evidence-based decision making
- Health Equity Lens
- Respond to emerging issues and trends that affect families and individuals
- Social Determinants of Health
- Input from diverse stakeholders and populations
- Do not reinvent the wheel
- Set realistic priorities and performance measures
Guiding Frameworks

Life Course Theory

Health Equity Model
# Health Equity

## An Explanatory Model for Conceptualizing the Social Determinants of Health

### National Influences
- Government Policies
- U.S. Culture & Cultural Norms

### Life Course
- Pregnancy/Women
- Perinatal/Infant
- Childhood
- Adolescence
- Children with Special Needs
- Cross-Cutting

### Social Determinants of Health
- **Economic Opportunity**
  - Income
  - Employment
  - Education
  - Housing
- **Physical Environment**
  - Built Environment
  - Recreation
  - Food
  - Transportation
  - Environmental Quality
  - Housing
  - Water
  - Air
  - Safety
- **Social Factors**
  - Participation
  - Social Support
  - Leadership
  - Political Influence
  - Organizational Networks
  - Violence
  - Racism

### Health Factors
- **Health Behaviors & Conditions**
  - Nutrition
  - Physical Activity
  - Tobacco Use
  - Skin Cancer
  - Injury
  - Oral Health
  - Sexual Health
  - Obesity
  - Cholesterol
  - High Blood Pressure
- **Mental Health**
  - Mental Health Status
  - Stress
  - Substance Abuse
  - Functional Status
- **Access, Utilization & Quality Care**
  - Health Insurance
  - Received Needed Care
  - Provider Availability
  - Preventive Care

### Population Outcomes
- Quality of Life
- Morbidity
- Mortality
- Life Expectancy

### Public Health’s Role in Addressing the Social Determinants of Health
- Advocating for and defining public policy to achieve health equity
- Coordinated interagency efforts
- Creating organizational environments that enable change
- Data collection, monitoring and surveillance
- Population-based interventions to address health factors
- Community engagement and capacity building

Adapted from the Colorado Department of Public Health & Environment
Leadership Roles

- **Needs Assessment Project Team**: OCFS staff/contractors who organize, inform and/or implement the process.

- **OCFS Advisory Committee**: OCFS Program Leaders who inform the process and priorities, as well as serve a pipeline to Partner Organizations and Families & Individuals.

- **MCH Impact Team**: Department of Health Interagency partners who inform and make final decisions on process and priorities.

- **Partner Organizations**: Organizations, agencies, etc. who the Department of Health should and do work with, and can provide a voice to help the assessment regarding partnerships and services and programs that should be supported in order to provides services and programs to families and individuals.

- **Families & Individuals**: This includes women, mothers, children, youth, infants, children with special needs who are the populations served by OCFS programs and partner organizations and inform the priorities.
PLANNING
Guiding Principles
Process Design
Work Plan
Leadership Structure
Data Collection Methods

COMMUNITY ENGAGEMENT
Families & Individuals
Partner Organizations
OCFS Staff

DATA COLLECTION
Qualitative/Quantitative data collection
Programs Capacity Assessment
Partnership Collaboration

PRIORITY
Data compilation/summarization
Prioritization process design and facilitation

FINALIZE REPORT
Compile Priorities and strategies into final report and work plan

IMPLEMENT STRATEGIES
Implement state and local needs assessment priorities

Sep-Dec 2018
Jan-Oct 2019
Oct 2019-Jan 2020
May 2020
2020-2025
Community Engagement

Communication
- Kick-off webinar in January
- Monthly newsletter through MailChimp
- Spring partner meetings: Rapid City, Pierre, Pine Ridge, Sisseton, and Sioux Falls
- Promotion of needs assessment at other meetings
- Fall partner meetings
Community Engagement

Data
• Partner survey
• Data briefs
• Partner meeting summary
• Youth survey
• Community survey
• Focus groups
• Secondary data
Data Collection

Youth Survey

659 Participants:
78% Female
97% English language

Age:
12% 11-13 years
55% 14-16 years
33% 17-18 years

Grade:
22% 5th – 8th grade
42% 9th – 10th grade
35% 11th – 12th grade

Race/ethnicity:
85% White
7% American Indian
8% Two or more races and other
94% Non-Hispanic
# Youth Survey

Percent of participants selecting health concerns in the top five:

<table>
<thead>
<tr>
<th>Concern</th>
<th>All Ages</th>
</tr>
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<tbody>
<tr>
<td>Suicide</td>
<td>84%</td>
</tr>
<tr>
<td>Bullying</td>
<td>68%</td>
</tr>
<tr>
<td>Substance use</td>
<td>61%</td>
</tr>
<tr>
<td>Sexual health</td>
<td>55%</td>
</tr>
<tr>
<td>Physical activity and nutrition</td>
<td>51%</td>
</tr>
<tr>
<td>Injuries from car crashes</td>
<td>43%</td>
</tr>
<tr>
<td>Immunizations</td>
<td>43%</td>
</tr>
<tr>
<td>Adequate health insurance</td>
<td>35%</td>
</tr>
<tr>
<td>Obesity</td>
<td>34%</td>
</tr>
<tr>
<td>Transition to adult care</td>
<td>31%</td>
</tr>
<tr>
<td>Access to care in medical home</td>
<td>29%</td>
</tr>
<tr>
<td>Adolescent well-visits</td>
<td>24%</td>
</tr>
<tr>
<td>Oral health</td>
<td>22%</td>
</tr>
</tbody>
</table>
Youth Survey

Percentage of participants that felt resources in each of the areas was lacking in their geographical area

- Mental health: 64%
- Reproductive or sexual health: 42%
- Substance abuse treatment or prevention: 38%
- Education about healthy eating: 32%
- Education about physical activity: 22%
- Taking care of long-term diseases or...: 21%
- Dental care: 15%
- Regular access to a healthcare provider: 15%
- Emergency services: 13%
- There are no health services missing: 10%
Figure 12. Whether or not participants would take a sex education course if one were offered in their community by whether they had previously taken a sex education course.

- Participant had already taken sex education course:
  - No: 52%
  - Yes: 48%

- Participant had never taken sex education course:
  - No: 69%
  - Yes: 31%
Community Survey

903 Participants (1,020 - 117 with no demographics):

• 92% Female
• 65% Married or in domestic partnership
• Household income:
  – 31% Less than $30,000/y
  – 26% $30,000 - $49,999/y
  – 43% Over $49,999/y
• Number of children in household:
  – 30% No child
  – 43% 1 or 2 children
  – 27% 3 or more children
• Race/ethnicity:
  – 74% White
  – 23% American Indian
  – 3% Other races
## Community Survey
### Infants

<table>
<thead>
<tr>
<th>Unmet needs affecting infants</th>
<th>Overall</th>
<th>Sex</th>
<th>Income</th>
<th>Race</th>
<th>Marital Status</th>
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</thead>
<tbody>
<tr>
<td>Access to quality affordable daycare</td>
<td>58%</td>
<td>F &gt; M</td>
<td>--</td>
<td>W &gt; Al</td>
<td>--</td>
</tr>
<tr>
<td>Affordable health insurance</td>
<td>40%</td>
<td>--</td>
<td>--</td>
<td>W &gt; Al</td>
<td>--</td>
</tr>
<tr>
<td>Safe and affordable housing</td>
<td>39%</td>
<td>--</td>
<td>Lo &gt; Hi</td>
<td>Al &gt; W</td>
<td>Not &gt; M</td>
</tr>
<tr>
<td>Parenting education and support</td>
<td>32%</td>
<td>--</td>
<td>Hi &gt; Lo</td>
<td>--</td>
<td>--</td>
</tr>
<tr>
<td>Substance use prevention &amp; treatment for parents &amp; caregivers</td>
<td>30%</td>
<td>--</td>
<td>Hi &gt; Lo</td>
<td>Al &gt; W</td>
<td>--</td>
</tr>
<tr>
<td>Access to mental health services for pregnant women or new mothers</td>
<td>25%</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Access to healthy food</td>
<td>21%</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Access to transportation</td>
<td>18%</td>
<td></td>
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<tr>
<td>Access to healthcare</td>
<td>14%</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Understanding cultural differences</td>
<td>9%</td>
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### Community Survey
**Children 1-9 Years of Age**

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<th>Unmet needs affecting <em>children</em>:</th>
<th>Overall</th>
<th>Sex</th>
<th>Income</th>
<th>Race</th>
<th>Marital Status</th>
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</thead>
<tbody>
<tr>
<td>Safe and affordable housing</td>
<td>43%</td>
<td>--</td>
<td>Lo &gt; Hi</td>
<td>Al &gt; W</td>
<td>Not &gt; M</td>
</tr>
<tr>
<td>Parenting education and support</td>
<td>36%</td>
<td>--</td>
<td>Hi &gt; Lo</td>
<td>W &gt; Al</td>
<td>M &gt; Not</td>
</tr>
<tr>
<td>Affordable health insurance</td>
<td>35%</td>
<td>F &gt; M</td>
<td>--</td>
<td>W &gt; Al</td>
<td>M &gt; Not</td>
</tr>
<tr>
<td>Substance use prevention &amp; treatment for parents &amp; caregivers</td>
<td>32%</td>
<td>M &gt; F</td>
<td>Hi &gt; Lo</td>
<td>--</td>
<td>M &gt; Not</td>
</tr>
<tr>
<td>Access to healthy foods</td>
<td>30%</td>
<td>--</td>
<td>--</td>
<td>--</td>
<td>--</td>
</tr>
<tr>
<td>Supportive family and friends</td>
<td>24%</td>
<td>--</td>
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<td>--</td>
</tr>
<tr>
<td>Access to mental health services</td>
<td>22%</td>
<td>--</td>
<td>--</td>
<td>--</td>
<td>--</td>
</tr>
<tr>
<td>Access to dental care</td>
<td>21%</td>
<td>--</td>
<td>--</td>
<td>--</td>
<td>--</td>
</tr>
<tr>
<td>Access to healthcare</td>
<td>19%</td>
<td>--</td>
<td>--</td>
<td>--</td>
<td>--</td>
</tr>
<tr>
<td>Access to transportation</td>
<td>15%</td>
<td>--</td>
<td>--</td>
<td>--</td>
<td>--</td>
</tr>
<tr>
<td>Understanding cultural differences</td>
<td>8%</td>
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## Community Survey
### Adolescents 10-19 Years of Age

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<th>Unmet needs affecting adolescents</th>
<th>Overall</th>
<th>Sex</th>
<th>Income</th>
<th>Race</th>
<th>Marital Status</th>
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<tbody>
<tr>
<td>Life skills training</td>
<td>61%</td>
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<td>--</td>
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<td>--</td>
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<tr>
<td>Substance use prevention &amp; treatment</td>
<td>41%</td>
<td>--</td>
<td>Hi &gt; Lo</td>
<td>--</td>
<td>M &gt; Not</td>
</tr>
<tr>
<td>Access to mental health services</td>
<td>39%</td>
<td>F &gt; M</td>
<td>Hi &gt; Lo</td>
<td>W &gt; A</td>
<td>M &gt; Not</td>
</tr>
<tr>
<td>Youth voice in decisions affecting them</td>
<td>28%</td>
<td>F &gt; M</td>
<td>Lo &gt; Hi</td>
<td>A</td>
<td>M &gt; Not</td>
</tr>
<tr>
<td>Safe and affordable housing</td>
<td>26%</td>
<td>F &gt; M</td>
<td>--</td>
<td>--</td>
<td>Not &gt; M</td>
</tr>
<tr>
<td>Supportive family and friends</td>
<td>24%</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Affordable health insurance</td>
<td>19%</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Access to healthy food</td>
<td>17%</td>
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<td></td>
<td></td>
<td></td>
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<tr>
<td>Access to healthcare</td>
<td>11%</td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Access to dental care</td>
<td>10%</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Access to transportation</td>
<td>8%</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Understanding cultural differences</td>
<td>6%</td>
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Community Survey
Women

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<th>Unmet needs affecting <strong>women</strong>:</th>
<th>Overall</th>
<th>Sex</th>
<th>Income</th>
<th>Race</th>
<th>Marital Status</th>
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</thead>
<tbody>
<tr>
<td>Being without a job or having a job that doesn’t meet family needs</td>
<td>56%</td>
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</tr>
<tr>
<td>Affordable health insurance</td>
<td>39%</td>
<td>--</td>
<td>--</td>
<td>W &gt; AI</td>
<td>--</td>
</tr>
<tr>
<td>Access to mental health services</td>
<td>36%</td>
<td>--</td>
<td>Hi &gt; Lo</td>
<td>W &gt; AI</td>
<td>M &gt; Not</td>
</tr>
<tr>
<td>Safe and affordable housing</td>
<td>34%</td>
<td>--</td>
<td>Lo &gt; Hi</td>
<td>AI &gt; W</td>
<td>Not &gt; M</td>
</tr>
<tr>
<td>Parenting education and support</td>
<td>24%</td>
<td>--</td>
<td>--</td>
<td>--</td>
<td>--</td>
</tr>
<tr>
<td>Substance use prevention and treatment</td>
<td>24%</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Access to healthcare</td>
<td>20%</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Supportive family and friends</td>
<td>17%</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Access to healthy food</td>
<td>14%</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Access to transportation</td>
<td>12%</td>
<td></td>
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<tr>
<td>Access to dental care</td>
<td>12%</td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Understanding cultural differences</td>
<td>4%</td>
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Community Survey
CYSHCN

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<th>Unmet needs affecting CYSHCN</th>
<th>Overall</th>
<th>Sex</th>
<th>Income</th>
<th>Race</th>
<th>Marital Status</th>
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<tbody>
<tr>
<td>Access to specialists</td>
<td>46%</td>
<td>--</td>
<td>--</td>
<td>--</td>
<td>--</td>
</tr>
<tr>
<td>Lack of transition care</td>
<td>33%</td>
<td>--</td>
<td>--</td>
<td>Al &gt; W</td>
<td>--</td>
</tr>
<tr>
<td>Parenting education and support</td>
<td>33%</td>
<td>--</td>
<td>Hi &gt; Lo</td>
<td>--</td>
<td>--</td>
</tr>
<tr>
<td>Communication between support services &amp; health care providers</td>
<td>32%</td>
<td>--</td>
<td>--</td>
<td>--</td>
<td>--</td>
</tr>
<tr>
<td>Access to mental health services</td>
<td>24%</td>
<td>--</td>
<td>--</td>
<td>--</td>
<td>--</td>
</tr>
<tr>
<td>Access to healthcare</td>
<td>23%</td>
<td>--</td>
<td>--</td>
<td>--</td>
<td>--</td>
</tr>
<tr>
<td>Affordable health or dental coverage</td>
<td>23%</td>
<td>--</td>
<td>--</td>
<td>--</td>
<td>--</td>
</tr>
<tr>
<td>Safe and affordable housing</td>
<td>19%</td>
<td>--</td>
<td>--</td>
<td>--</td>
<td>--</td>
</tr>
<tr>
<td>Access to transportation</td>
<td>17%</td>
<td>--</td>
<td>--</td>
<td>--</td>
<td>--</td>
</tr>
<tr>
<td>Supportive family and friends</td>
<td>13%</td>
<td>--</td>
<td>--</td>
<td>--</td>
<td>--</td>
</tr>
<tr>
<td>Substance use prevention and treatment</td>
<td>7%</td>
<td>--</td>
<td>--</td>
<td>--</td>
<td>--</td>
</tr>
<tr>
<td>Access to healthy food</td>
<td>6%</td>
<td>--</td>
<td>--</td>
<td>--</td>
<td>--</td>
</tr>
<tr>
<td>Access to dental care</td>
<td>5%</td>
<td>--</td>
<td>--</td>
<td>--</td>
<td>--</td>
</tr>
<tr>
<td>Understanding of cultural differences</td>
<td>4%</td>
<td>--</td>
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</tr>
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</table>
Focus Groups

Bison: co-parents
Lower Brule: Native American women
Huron: single parents
Yankton: youth
### Priorities

#### Mental, social, and behavioral health
- Need for more suicide prevention programs and education
- Expand mental health services and raise awareness of existing services
- Concerns about confidentiality and trust, embarrassment and judgment were barriers to accessing counseling services

#### Drug, alcohol, and tobacco use
- Issues with methamphetamine and alcohol misuse
- Need to expand and improve local alcohol and chemical dependency treatment options and substance misuse prevention programming

#### Sexual health
- Need for sexual health education
- Continued education throughout middle school and high school
- Content suggested includes consent, healthy relationships, sexually transmitted infections, and contraceptives

#### Physical activity and nutrition
- Need for a free or low-cost local wellness center or gym

#### Afterschool programs and extracurriculars
- Need for targeted programming, particularly topic-focused programs teaching life skills
Final Priorities linked to NPMs and SPMs

<table>
<thead>
<tr>
<th>Priority</th>
<th>MCH Population Domain</th>
<th>NPM or SPM</th>
</tr>
</thead>
<tbody>
<tr>
<td>Safe sleep</td>
<td>Perinatal/Infant Health</td>
<td>NPM 5 Safe sleep</td>
</tr>
<tr>
<td>Parenting education and support</td>
<td>Child Health</td>
<td>NPM 6 Developmental screening</td>
</tr>
<tr>
<td>Access to care and services</td>
<td>CSHCN</td>
<td>NPM 11 Medical home</td>
</tr>
<tr>
<td>Adolescent suicide/mental health</td>
<td>Adolescent Health</td>
<td>NPM 7.2 Injury hospitalization</td>
</tr>
<tr>
<td>Mental health and substance abuse</td>
<td>Women/Maternal Health</td>
<td>NPM 1 Well-woman visit</td>
</tr>
<tr>
<td>Sexual health/healthy relationships</td>
<td>Adolescent Health</td>
<td>SPM 1</td>
</tr>
<tr>
<td>Data sharing and collaboration</td>
<td>Cross-Cutting</td>
<td>SPM 2</td>
</tr>
</tbody>
</table>
SD PRAMS: Pregnancy Risk Assessment
Monitoring System:
A Statewide Survey

Purpose of PRAMS

• To assess maternal attitudes and behaviors before, during and after pregnancy

• To provide data for guidance on DOH programs, MCH Block Grant performance measures & compare trends over time

Previous and Current Studies

• 2014 PRAMS-like Survey:

• 2016 PRAMS-like Survey: data collection completed – keep eyes open for report later in 2018

• 2017-2020 PRAMS
South Dakota 2017-2018 PRAMS

• Surveillance Data Report for American Indian Mothers by Reservation Counties
• No information on Tribal affiliation is obtained in PRAMS
• Data from these reports may provide Tribes with information on attitudes, behaviors and health of these mothers