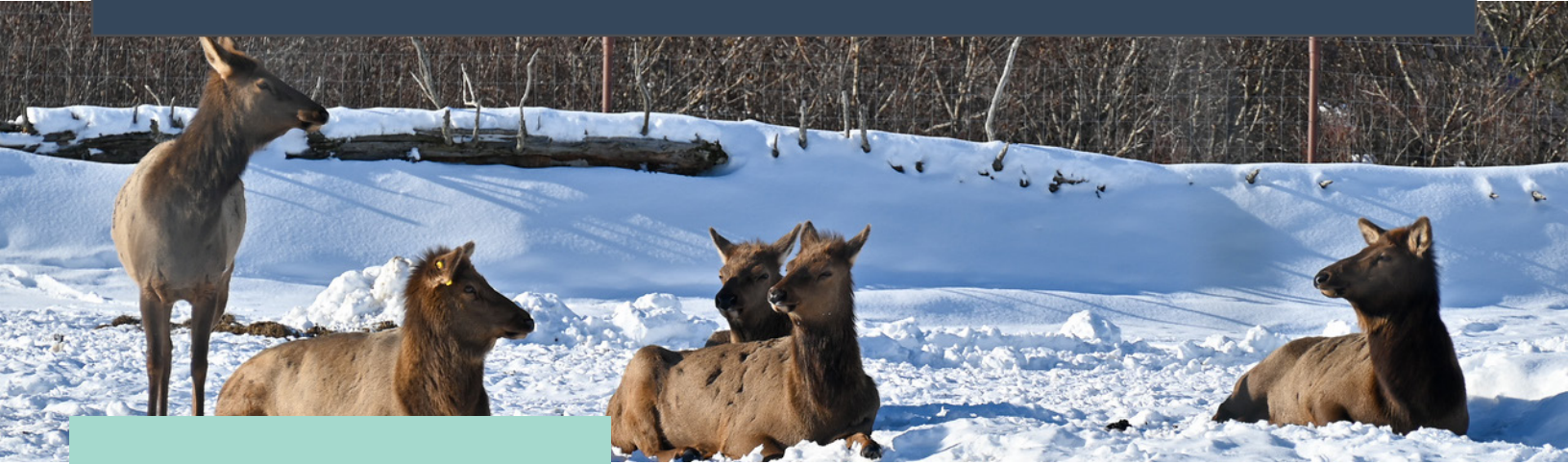


TIPCAP NEWS

Newsletter of the Tribal Injury Prevention Cooperative Agreement Program of the Indian Health Service



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WHITE EARTH NATION

White Earth Nation steps in to educate on new child passenger restraint laws

By: Bryanna Chilton

Boozhoo from White Earth Nation, MN. With the changing of seasons, came a change in child passenger restraint use laws throughout the State of Minnesota. White Earth Car Seat Program seized the opportunity to not only distribute appropriate seats for children but also to update our patrons on the new, potentially life-changing car seat laws that went into effect statewide on August 1, 2024. The new laws read as follows: a child must be rear-facing until age of 2 years old and until the maximum weight or height of the rear-facing seat has been met; forward-facing seat until at least 4 years old and maximum weight or height of the internal harness has been met; 9 years old or has outgrown the booster seat maximum and can pass the five-step test; and all children under 13 years old must sit in the backseat if possible.

In preparation of the changes, we held car seat clinics and checks in two separate communities and increased our signage providing the new laws in printed handouts and web and digital media posts. Following the implementation of the new laws, we hosted two more car

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Office of Environmental Health & Engineering
Division of Environmental Health Services
Injury Prevention Program

[cont.] White Earth Nation steps in to educate on new child passenger restraint laws

seat clinics in additional communities and welcomed all to attend. From our clinics alone, we were able to distribute 74 new car seats, provide education on 4 improperly installed car seats, and encourage the use of car seats for several children who had previously been “removed” from car seats.

Seeing the need for greater education on the updated car seat use laws in Minnesota, we have also been seeking opportunities to provide educational sessions in various settings like Headstart, Child Welfare, local family treatment centers, and through print-media.

What a season of change it has been! Through our diligent work to promote the new laws and provide education, we have seen an increase in the number of self-referrals and walk-in appointments for our Car Seat Program. With that being said, we better get back to work! Miigwech. ■

Minnesota Child Passenger Safety Law

<https://www.revisor.mn.gov/statutes/cite/169.685>

Changes effective August 1, 2024

If a child can be placed in more than one category, then the child must be placed in the more protective category.

| | |
|--|---|
|  REAR-FACING CAR SEAT | An infant under 2 years old must be secured in a rear-facing convertible or infant carrier seat. |
|  FORWARD-FACING CAR SEAT | A child at least 2 years old AND has outgrown the manufacturer's height or weight limits for a rear facing car seat must be secured in a forward facing car seat with internal harness. |
|  BOOSTER SEAT | Children at least 4 years old who have outgrown their forward facing car seat with internal harness must be secured by a belt-positioning booster seat using the lap and shoulder belt |
|  SEAT BELT | A child at least 9 years old or has outgrown their booster seat AND the child can pass the "5 Step Test" may be restrained by lap and shoulder belt if the child can be secured properly. |

A child under 13 years old, must sit in a back seat of a motor vehicle, if a rear seat is available, and be properly restrained.

GREAT PLAINS TRIBAL LEADERS HEALTH BOARD



Welcome Sunshine Pond

Hello, TIPCAP community! My name is Sunshine Pond, and I am the Program Coordinator for the Injury Prevention Program for the Great Plains Tribal Leaders' Health Board. I am excited to share that I have recently become a certified Child Passenger Safety Technician. With this certification, I am now equipped to help ensure the safety of our youngest passengers by providing expert guidance on proper car seat installation and usage. I look forward to contributing to our community's safety and supporting families in keeping their children secure on the road.



CHILD PASSENGER SAFETY AND PARTNERSHIPS ON HOPI



By: Megan Talahaftewa

Greetings from the Hopi Tribe Injury Prevention Program!

The Hopi Injury Prevention Program (IPP) has been active in child passenger safety (CPS) and has built an amazing Hopi CPS Team through our great partnerships in the community! The excellent partnership programs for the Hopi CPS Team come from the Hopi Community Health Representative program, Public Health Nursing program, Hopi Structural Fire Crew, and the IHS Office of Environmental Health. We also welcomed a community "Parent Educator" to our Hopi CPS Team. In addition, the Hopi IPP has also been collaborating with our neighboring community, Tuba City, with their car seat clinics and events.

Over the months, we have conducted car seat events and clinics for our community members to raise awareness and provide much-needed services for our community families. Our goal and mission as the Hopi CPS Team are to increase our car seat use rate to decrease fatalities and injuries to our "Tsa'tsay'hoyam" children.

On July 3, 2024, we had a successful event where we served 28 children.

At the event, we distributed seats of all types, provided installation education and educational hand-outs, and offered car seat recall checks. In support of this community CPS event, we were granted 55 child safety seats from the Arizona Governor's Office of Highway Safety Program. Their partnership has been instrumental in our efforts to promote child passenger safety. The seats left over are used for our daily one-on-one car seat services, which we continue to provide as part of our ongoing commitment to the community. We are currently getting ready for another community event in November, demonstrating our ongoing commitment to the safety of our children.

The Hopi IPP has also been working with the Hopi Head Start Program to increase car seat use among their students. Because the Hopi Head Start Program has no transportation services, parents, guardians, and caregivers are responsible for transporting their children to and from Head Start on a daily basis. The IPP took this opportunity to observe car seat use through observational surveys to see where the use rate stands. The goal is to see if we can make a difference throughout the

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[cont.] Child passenger safety and partnerships on Hopi

school year and increase car seat use. We are scheduled to present at the parent night meetings to discuss why child safety seats and seat belts are important. This is a topic that parents tend to focus less on, even though it concerns their children's safety. We hope to increase use rates with our efforts through education, bringing awareness, and providing services to protect our children.

In all this ongoing effort, I am very grateful for the partnerships we have built thus far and look forward to creating more along the way. It has made our efforts to increase child safety seat use much more enjoyable and attainable! ■



NORTON SOUND HEALTH CORPORATION

IHS Injury Prevention Fellowship offers unique opportunity to advance knowledge and build relationships

By: Katie Hannon



In May 2024, I graduated from the Indian Health Service Injury and Violence Prevention Fellowship Program.

The fellowship was more than education and work experience—it also brought so much opportunity to me and my program. I was able to build relationships with the other fellows and the professors that encouraged me to work in injury prevention.

The education and experience that I gained in the 18 months during the fellowship was the most meaningful education I have ever experienced. I had the opportunity to travel and work at the Centers for Disease Control and Prevention. I also had the amazing experience and opportunity to work with the other fellows at the Fond du Lac tribe in Minnesota.

I enjoyed learning from the fellow students through their projects along with learning from our professors. During the in-person sessions, I was able to connect with the other fellows and work towards my project with their support.

The biggest take away for me during the fellowship was traveling to other tribes and experiencing hands on learning with topics that are familiar to our program. Being able to work with other tribes overcoming obstacles in their programs was able to help me guide my way through obstacles in my own program.

I would encourage everyone that works in injury prevention to apply for the fellowship program. It is an awesome opportunity to further your education and build relationships with other injury prevention professionals from all over the country. ■

Oklahoma sends strong message for Child Passenger Safety Week

Law enforcement agencies, injury prevention advocates, emergency medical services, insurance companies, and others joined together to spread the message that “Losing one child is one child too many.” The event, held on Tuesday, September 10, 2024 in Oklahoma City, OK, commemorated Child Passenger Safety Week. Advocates shared potentially life-saving reminders to the crowd gathered. On display were 31 backpacks, representing the 31 unrestrained children and teenagers killed in car crashes in 2021.

Antoinette Short, the Injury Prevention and Safe Kids Naisha Coalition Coordinator for the Apache Tribal Headquarters in Anadarko, Caddo County, Oklahoma, gave remarks, reprinted below.



“In our great state of Oklahoma, there are 39 federally recognized tribes. Four of these tribes currently have Injury Prevention programs. The Apache Tribe supports the only Native American Indian Safe Kids coalition in Oklahoma, Safe Kids Na-I-Sha.

“Each tribal community in Oklahoma is unique with its traditions, languages, practices, connections to elders, and social ties. Native communities work with the support of Indian Health Services Environmental Health and CDC’s National Center for Injury Prevention and Control (Injury Center) to prevent injuries. These federally funded programs educate on the proper use of child restraints and vehicle seat belts in rural Oklahoma communities.

Motor vehicle crashes are a leading cause of death for American Indian and Alaskan Native people. According to 2021 fatality data provided by the National Highway Traffic Safety Administration:

- American Indians and Alaskan Natives had the highest traffic fatality rate at 28.51 per 100,000 population.
- They also had a higher proportion of traffic fatalities in rural areas than urban areas in 2021.
- Based on known restraint use, 50 percent of all passenger vehicle occupants killed in 2021 were unrestrained at the time of the traffic crashes.
- American Indian and Alaskan Native people showed the highest percentage of unrestrained passenger vehicle occupants killed at 65 percent.

Tribal leaders, community members, parents, and caregivers, as an Injury Prevention specialist, I encourage each of you to model safety for our children. Research shows a strong correlation between caregivers who buckle up and their child passengers’ restraint use. We are asking all parents and caregivers to please ensure their child is in the right car seat or using the seat belt correctly for every car ride. Losing ONE CHILD is one too many.”

—Antoinette Short

Promoting Fall Prevention Efforts in Our Community

By: Cami Miller

Hello from central Wisconsin. My name is Cami Miller, and I work as a Community Health Representative for the Stockbridge-Munsee Community with the Fall Prevention Program. We have been able to maintain our fall prevention program with support from the TIPCAP grant and other tribal grants. We continue to offer home safety assessments, educational flyers to our monthly tribal newspapers and elderly newsletters, educational booths at events, fall prevention trivia during Fall Prevention Week, and educational talks at our community elderly center.

New Bingocize Program

A recent addition to our programming includes “Bingocize,” an evidence-based health promotion program that incorporates the fun of playing bingo with health education and exercise. We were able to get one staff member trained and are now providing the program to our community. Bingocize is available at our assisted living center and fitness center.



Bingocize has had positive results with our participants as it allows them to not only socialize, but to also improve their balance, strength, endurance, and flexibility. We had one participant report that prior to Bingocize he was unable to bend down to pick anything up from the floor. He stated, “My mobility is better, I can pick things up from the floor now, and I couldn’t do that before the class.”

Fall Prevention in Homes

We provide fall prevention equipment such as grab bars, night lights, non-skid adhesive strips, emergency power failure night lights, light bulbs with increased brightness, shower mats, reachers, tub transfer benches, flashlights, and assistance with acquiring Lifeline as needed. We recently acquired tub transfer benches and created

an educational flyer to promote the benches for distribution to community members to improve their safety and mobility at home.

Since April 2024, we have completed 10 home assessments and distributed 21 grab bars, along with other types of fall prevention equipment through our program. Home assessment referrals have increased from medical providers and elder nurses, as well as an increase with community members reaching out for assistance to decrease their fall risk. We will continue to promote fall prevention education and provide equipment to assist with decreasing falls in our community. ■

TCRHCC

Ramps Up Efforts

to Make Elders' Homes Safer

By: Tina Billy

Ramp Project in Tuba City Service Area

The "Ramp Project" was the largest initiative launched by the Tuba City Regional Health Care Corporation (TCRHCC) in 2024. Aimed at improving accessibility for fall patients in the Western edge of Navajo Nation, within the TCRHCC Service Area, the project installed EZ-Access Aluminum Wheelchair Ramps in 24 homes across 8 communities.

Based on home assessments from 2023, we selected threshold ramps and 36" wide ramps in 12' and 24' sizes, equipped with handrails and transition plates. Many homes lacked ADA compliance, making entry difficult for patients. In collaboration with the ASIST to Independence Program, a nonprofit focused on helping individuals with disabilities, a certified worker oversaw the installation of the home modifications to ensure ADA compliance. We also referred cases for wooden ramp installations to Assist to Independence. We appreciate our partnership with ASIST to Independence and look forward to future collaborations to enhance the well-being of those in need.

The project's positive impact highlights the need for accessible infrastructure and community support. Simple accessibility solutions can significantly impact lives, especially during emergencies. We're pleased to have facilitated this positive change for a family, who reported great satisfaction with the ramp's functionality. It's a game-changer, allowing for quick evacuations in emergencies, unlike before when EMS struggled with high concrete steps or soft sand. The family now feels more secure, knowing they can ensure a swift and safe evacuation if needed.



Before



After

Other Injury Prevention Activities

- Elder fall prevention posters were posted throughout the hospital and clinics and at local businesses within the 8 communities in the Service Area to bring awareness on elder falls. Additionally, an elder fall prevention 1/2-page advertisement was placed in the *Navajo/Hopi Observer*.
- As part of the Arizona State project, 200 smoke alarms and 100 combined smoke alarms/carbon monoxide detectors were donated to TCHRCC Injury Prevention Program. It was found that most of the homes where the assessments were conducted for the elderly did not have smoke alarms or carbon monoxide alarms. As a result, 218 smoke/combo alarms were distributed to the homes of the elderly, some to senior citizen centers, and chapter houses. Additionally, 82 smoke alarms were delivered to the local Tuba City Fire Department. ■

Falls Freedom: Data Driven Results and Capacity Building

By: Monte Yazzie

“What is our intention?” This question is asked before the start of every fall prevention class conducted by the Salt River Pima-Maricopa Indian Community (SRPMIC) Public Health Injury Prevention Program. Unanimously, the senior tribal Community members respond, “To feel better!”

“Feel Better” is the nearly 9-year rallying cry for fall prevention efforts within Salt River. Monte Yazzie, TIP-CAP Injury Prevention Coordinator, explains, “Our motto was created by the Community members participating in class. During their first fall prevention assessments, they made it clear that their primary goal for taking yoga or tai chi classes was to simply feel better.”

The SRPMIC Public Health Injury Prevention Program annually coordinates Yoga and Tai Chi for Fall Prevention. All classes incorporate a pre- and post-physical/functional

fall risk assessment for new and continuing clients, utilizing the Centers for Disease Control (CDC) Stopping Elderly Accidents, Deaths & Injuries (STEADI) testing tools. Incorporating the 3-step process of SCREENING patients for fall risk, ASSESSING modifiable risk factors, and INTERVENING to reduce fall risk using effective strategies, the Injury Prevention Program in Salt River has found success by providing clients with an understanding of their risk for falls through data collected and connection to resources within the Community. Celinda Joe, SRPMIC Senior Services Health and Wellness Program Manager, explains, “The fall risk assessments provide our seniors with clarity about the risk of falling, which then provides us the opportunity to have a healthy hand-off to services that help with the specific concerns found through the data collected. It has opened so many doors of partnership.”

Providing a data-driven program that conducted 300+ fall risk surveys for community members 55 years and older in 2023 provides the seniors/elders with fall risk understanding and, more importantly, health ownership. The fall risk assessments, a double-sided single piece of paper, clearly show the risks associated with their physical/functional abilities connected to balance, strength, and endurance. It also assists in relaying information to providers, such as diabetes prevention services, physical therapy, and primary care physicians, to help coordinate a better understanding of their fall risk and fear associated with falling.

“Everyone has a fall story,” explains Yazzie, “the goal for the Injury Prevention program is to make sure these stories don’t have catastrophic or traumatic endings.” The Salt River Pima-Maricopa Indian Community

continued on next page



[cont.] Falls Freedom: Data Driven Results and Capacity Building

Public Health Injury Prevention Program continues to experience positive outcomes with fall prevention classes, with 82% testing out of fall risk categories after 12-week course participation. The program also continues its yoga teacher training course tailored for tribal communi-

ties. This year, the national certifying body Yoga Alliance approved the tribal-focused curriculum. Yazzie concludes, "Our Community elders are the guardians of the stories, traditions, and culture; it's an honor to support their journey to feel better and stay free from falls." ■

PONCA TRIBE OF OKLAHOMA

Elder Fall Prevention in Oklahoma

By: Jocelyn Parker

Greetings from the Ponca Tribe of Oklahoma Injury Prevention Program. Here in Oklahoma, we are focused on keeping our elders safe by reducing fall hazards, partnering with community resources, and providing strength and mobility exercise programs.

Uneven surfaces are one of the main culprits for falls. Many homes use brick pavers on dirt walkways leading to the front door, which can shift with time and weather. This type of uneven walkway, which also did not have a handrail or lighting at night, was the cause of an elderly home owner's fall. She ended up at the hospital with some scrapes and a hairline fracture, and although she recovered, the fall left her with a fear of leaving her home. With a local contractor from the community, we were able to come up with a cost efficient way to fix the problem. She now has a concrete paved walkway with a handrail, and we also ensured that her porch light had a new light bulb.

Another crucial home modification for elder safety are accessible ramps. In the event of an emergency, ramps provide an easy and quick exit from the home. We are pleased to have maintained a 9-year partnership with a local organization to provide amps at no cost to the client.

Finally, we are excited to launch our first Bingocize workshop. Bingocize combines the fun game of bingo with exercises, fall prevention education, and incentives! Currently, we have 16 participates pre-registered for Bingocize and expected to begin winter 2024. ■



Before

After



Gratitude on the Green A Tribal Community's Support in Action

By: Mona Maxwell

Early one warm Louisiana morning, the hum of a John Deere tractor rolled through the parking lot of the Jena Band of Choctaw Indians' Tribal Center (JBCI). At the wheel was a tribal member named "Henry," who worked for the Louisiana Highway Department mowing medians. Today, though, he happened to be working in the area of the JBCI Tribal Center. He had called the MVIPP program coordinator several times to see if the chief was in and wanted to speak to her.

Just last month, Henry and his wife welcomed premature twins into the world—a tiny boy and a girl who needed extra care and protection. With the unexpected costs of their early arrival, Henry had struggled to find the funds to buy the necessary car seats. He felt a mix of worry and helplessness, knowing the safety his little ones required but unsure how he could manage it all. Then, he learned about the tribe's Motor Vehicle Injury Prevention Program (MVIPP), which provided car seats to tribal families in need. With a glimmer of hope, Henry reached out. He soon found himself with two sturdy, reliable car seats for his newborns and extra bases to use in their other vehicle. It was everything he needed for the safe transport of his precious twins.

Later that week, Henry pulled his tractor to a stop in the tribal center's circle drive. The tribal chief and the MVIPP program coordinator were surprised to see a John Deere tractor in the tribe's circle driveway. Henry jumped from the enclosed tractor cab and entered the building with a big, humble smile; his gratitude was evident as tears filled his eyes.



I cannot thank you enough... There was no way I could afford those car seats alone.

He stood there, almost overwhelmed. "I cannot thank you enough," he said softly, his voice wavering. "There was no way I could afford those car seats alone. Without them... I don't know what I would have done." Henry reached out to shake hands, but at that emotional moment, he gave them grateful hugs instead. This is exactly what the MVIPP is about for the chief and the MVIPP staff: helping and supporting their tribal members.

Watching Henry climb back into his tractor, the chief and MVIPP program coordinator felt a renewed sense of purpose. They knew the work with the MVIPP mattered and that every effort the staff put into it helped to keep their tribal community strong and safe. And as Henry drove away, he gave them a wave, a symbol of appreciation and connection that they would remember long after he disappeared down the road.

The MVIPP made it all possible. It was rewarding having him stop by on his John Deere tractor to say thank you. It is times like this that make it so worth it all! ■

HO-CHUNK NATION

The Success of the Midwest Tribal Child Passenger Safety Coalition

By: Lisa Herritz

In 2024, the Ho-Chunk Nation Injury Prevention Program was able to focus on car seat distribution and the Midwest Tribal Child Passenger Safety (MTCPS) Coalition. In 2023, the program distributed 289 car seats to tribal members and our Head Start students. The TIPCAP program maintains 13 Child Passenger Safety Technicians (CPST) covering 15 counties in the state of Wisconsin. The MTCPS Coalition is in the second year of operation; its main objectives are training, re-certifying CPST, and building partnerships across state lines. The program also provides information on grant funding opportunities, car seat institutional sales, benchmarking practices, and continued CPS learning education.

The MTCPS and the Occupant Protection (OP) networking group were established to support new and existing CPS/OP programs and to form a regional network of tribal CPS and OP advocates. The MTCPS Coalition has offered virtual and in-person meetings. This year the program sponsored a CPST education course, two CPST re-certification days, an expired CPST class, and a school bus training.

The TIPCAP program and the MTCPS Coalition have helped expand other tribes' and partners' programs by

training two CPST proxies and one tribal instructor in the recent 4-year period. Our two CPST Re-certification Day programs have an average attendance of 18 CPSTs seeking recertification per year. The program has trained 29 CPSTs since 2020, which has reduced training costs and travel expenses for the Ho-Chunk Nation. It has also helped other programs maintain CPSTs and eliminated technician recertification barriers.

The MTCPS Coalition provides other educational resources such as the Safe Native American Passenger – SNAP program, a culturally appropriate 1-day course introducing child passenger safety. The target audience for this class is anyone who works with families and children in tribal communities. Other educational resources include the latest program updates and evidence-based strategies, including sources such as UPPABABY, Toyota, SafeRide News, Buckle Up for Life, NHTSA, Kids in Motion, SafeKIDS, and Check to Protect.

The MTCPS Coalition featured trainings on virtual seat checks for parents and CPSTs through the National Child Passenger Safety Board. Virtual car seat checks are one of the ways parents and caregivers can connect with CPSTs. All that is needed is to

identify a virtual conferencing platform that will work such as FaceTime, Skype, or Zoom. Virtual seat checks are another resource to assist tribal programs that have questions or helping CPSTs stay certified.

Cassandra Herring from SafeKids Worldwide provided an interesting data set comparison on the number of tribal CPSTs compared to nationwide statistics. As of 2024, there were a total of 331 CPSTs that identified as American Indian and/or Alaska Native (AI/AN), compared to the nationwide total of 38,573. AI/AN CPSTs are only represented in 29 states. (See table below for more.)

The Ho-Chunk Nation realizes the importance of ongoing trainings and community outreach efforts in Child Passenger Safety and Occupant Protection. A culturally appropriate approach is needed for working with families and children in tribal communities. We need to bring attention to injury prevention programs working with limited CPSTs and resources. Tribes need to increase the number of trained CPSTs, Instructors, and Tech Proxies. Virtual resources and continued training and recertification opportunities can continue to grow programs and eliminate barriers. ■



The Ho-Chunk Nation Injury Prevention Coordinator, Lisa Herritz, was recognized in August 2024 by Kids in Motion as a Safety Hero!

"Lisa Herritz has championed tribal nations in Wisconsin offering annual CPST certification and recertification training, improving attrition rates, and providing essential resources. Her unwavering support makes her a true Safety Hero."

Winnebago Injury Prevention

Protecting the Generations

By: Jennifer Hardeman

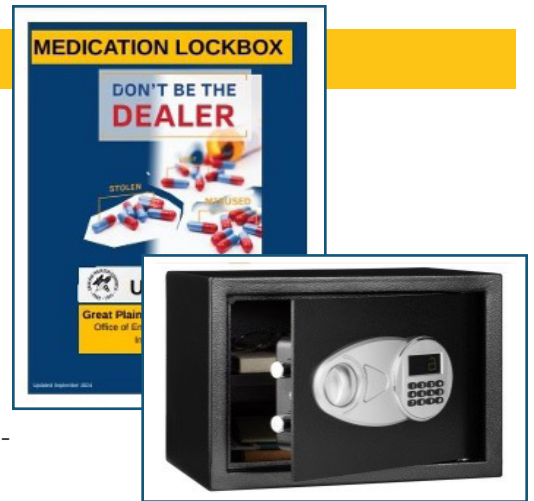
Hello friends. My name is Jennifer Hardeman, and I am writing to you from the Winnebago Tribal Reservation in northeast Nebraska. I am the TIPCAP coordinator supporting the health of my Tribal community. Our injury prevention efforts support **elderly fall prevention**—supporting our elders, our story tellers—and **child passenger safety**—supporting children from birth to age eight, or those who carry on the story telling. For fall prevention, activities include home safety assessments, home modifications, and balance classes for the elderly. Activities to protect children include car seat distribution paired with evidence-based education, car seat check events, and facilitating child passenger safety technician courses. Our activities span generations, which is why “Protecting the Generations” turned into a mantra for the injury prevention program.

In May 2024, my project officer Connie Giroux contacted me about free smoke alarms and carbon monoxide detectors from the Johns Hopkins Smoke Alarm project. We scheduled a meeting with the Senior Scientist, and project research nurse from the Center for Injury Research and Policy, and I presented our program and its strengths and weaknesses. It was mutually determined that 100 smoke alarms, 50 hearing impaired alarms, and 50 combo alarms would be sufficient to begin the project. A month later, we were contacted by the Center again, this time about

medication storage in our community and overdose data. Again, a need was determined, and 50 medication lockboxes were provided, as well as a customized medication lockbox guide, to provide to our Tribal community in the Great Plains Area. With these resource, we aimed to address concerns over fire prevention and safe medication storage.

Before we began any lockbox installations, a town hall meeting is held at the senior center. Stakeholders were asked about how important safe medication storage is to them, and the community environment that influenced use of safe medication storage. The elderly population expressed two main concerns, and they were “keeping medications safe from children,” and secondly, “keeping their medications from getting into the hands of drug abusers,” or those “seeking opioid use for recreation.”

Safe medication storage is a proven strategy to the safe keeping and use of prescription drugs. We found that people in our community are often unaware of the importance of safe storage practices or do not have a safe place to store medications. This meeting with stakeholders brought about many issues pertaining to safe medication storage and knowledge about safe storage. We created a questionnaire based on that town hall meeting and the lockbox guide and have been rolling that out at community events. We have one more event to cover in December



then we plan to utilize Qualtrics to analyze the results. We look forward to sharing the questionnaire results with you all and our next steps.

Currently, the medication lockbox and smoke alarm installs are moving along smoothly. The only drawback we are experiencing is the inability to install onto the wall due to renting restrictions.

We are grateful for the partnership with Johns Hopkins. The partnership, paired with guidance, has brought valuable resources and an opportunity to learn how to reduce harm in our community. Injury prevention strives to create and maintain a healthy community. Medication lockboxes are a form of harm reduction, which is a tool just like child car seats, bike helmets, and use of designated drivers. They all share a common goal to reduce harm. These added safety applications span generations and work well in our community as a part of the existing home safety assessments for the elderly, where we often encounter a cultural norm of multiple generations under one roof.

Pinagigi (thank you) for reading this today. I look forward to another year of TIPCAP and protecting the generations here in Winnebago. ■

Rooted in collaboration

Falls Prevention Awareness Week 2024

By: Sixtus Dominguez

Throughout the year, the Albuquerque Area Indian Health Board Inc. (AAIHB), the parent organization of the Albuquerque Area Southwest Tribal Epidemiology Center's (AASTEC) Tribal Injury Prevention Program (TIPP), engaged tribal community members, staff, and leaders to co-develop a fall prevention media awareness campaign and to implement a day of action, to align with Fall Prevention Awareness week. These efforts are part of our ongoing actions to effectively implement evidence-based interventions, to engage in meaningful and effective partnerships, and to expand community support.



Falls Prevention Awareness Week of Action Toolkit

In August, TIPP launched a Falls Prevention Awareness Week of Action Toolkit. The toolkit included sample materials for organizations and community leaders to use leading up to and during the Falls Prevention Awareness "Week of Action" (9/20/24 - 9/27/24). The goal of the social media materials was to encourage older adults to take part in the Falls Free CheckUp, an assessment of their risk of falling, and to join a Falls Risk Screening event to be held on Sept. 20, 2024 in Albuquerque. By engaging with a toolkit we designed, partnering organizations had easy access to promotional materials.

Day of Action

The Falls Risk Screening event was held at the North Domingo Baca Multigenerational Center on Sept. 20, 2024 in Albuquerque, NM. The event was organized by TIPP, with support and partnership from National Council on Aging (NCOA), and in collaboration with the New Mexico Adult Falls Prevention Coalition (NMAFPC) and Albuquerque's Department of Senior Affairs and their Sports and Fitness Program. Many other partners (too many to list!) also contributed to the success of this event.

During the event, elders could participate in a falls risk screening, strength and balance tests, medications reviews, receive home safety materials, observe Tai Chi demonstrations, and so much more. Staffing the event were 95 volunteers who contributed to screening assessment, instruction, educational outreach, and cultural engagement.

The event drew 205 attendees from three tribes, and 94 adults were screened (the average age of adults screened was 73 years old). The screenings revealed critical insights into falls risk among attendees, informing ongoing public health interventions:

- **Falls History:** 43% of participants reported at least one fall in the past year, compared to the national average of 28% for adults aged 65+.
- **Strength and Balance:** Nearly half of the participants showed signs of elevated fall risk based on balance tests, with 39% showing reduced leg strength.
- **Medication Usage:** 48% reported taking four or more prescription medications, a factor linked to falls risk.
- **Healthcare Interactions:** 58% had discussed falls with their healthcare provider, aligning with CDC recommendations for regular screening.

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[cont.] Rooted in collaboration: Falls Prevention Awareness Week 2024

TIPP also provided health and home safety materials, falls prevention fact sheets, and handouts on how to talk about falls with your physician. TIPP also distributed 79 nonslip bathmats, and 205 lunches, along with cultural items such as vouchers for a bowl of Blue Corn Atole at the Indian Pueblo Kitchen for Indigenous elders who completed the Falls Free CheckUp.

This event, which highlighted the importance of falls prevention and health screening assessment and intervention for older adults, demonstrated the power of community partnerships, health advocacy, and action. ■



NAVAJO DEPARTMENT OF HIGHWAY SAFETY



TIPCAP Update

By: Stella Begay, Program & Project Specialist and Taylor Foster, Safety Technician

Navajo Department of Highway Safety (NDHS) is a centralized program located at the Navajo Division of Transportation (NDOT) Office Complex in Tse Bonito, NM under the direction of NDOT. The program's focus is towards highway safety awareness, specifically to promote safe driving practices, raise public knowledge of injury prevention, and make roads safer.

Recent accomplishments:

- Department employees conducted outreach operations by setting up educational booths at Navajo Nation-wide events for people of all ages. (Ex: Kayenta school, Window Rock Back to School event, Cornfield chapter, and Fort Defiance)
- Car seat clinics were held in Crown Point, NM, Fort Defiance, AZ, and Kayenta, AZ. (Approximately 15-20 car seats distributed)
- Every Friday, NDHS schedules car seat appointments with parents or caregivers to provide a car seat for the child, including both education and installation
- Throughout the Navajo Nation, presentations were given in person at community gatherings, schools, and other departments ■

NDHS Focus Areas

- Prevention of underage drinking & impaired driving
- Occupant protection including seat belts & child restraints
- Prevention of distracted driving
- Prevention of aggressive & road rage driving
- Awareness of existing seatbelt law, child restraint law, & alcohol impairment law
- Working with law enforcement
- Safety campaigns
- Crash data compilation & analysis



Helping Our Older People Become More Active Safely

By: Teri De La Cruz



In our Ak-Chin community of elders, injury prevention remains a priority as we work to keep our elders safe and respected. Within the last year (year 4 of TIPCAP), we have seen so many great improvements physically for our elders, but also many improvements within their homes.

The Functional Fitness class is a transition from seated yoga to a more intense workout. We offer classes twice per week, with 20 classes a cycle. Right now, participants are all women, but we are working to get more men to the classes. We have had a consistent group and have seen tremendous changes, both physically and socially. We assess progress through the 4-stage balance test, 30-second chair stand, and TUG test. Increases in speed and overall strength have shown through the numbers reported and from feedback

when they visit their physician. But the greatest improvements are seen mostly in their everyday lives. Whether it's attending an event where stairs are present or having to walk a distance, these ladies have certainly achieved many personal goals.

We've also noticed how the classes have been beneficial in the elders' social lives—how they have come together and look forward to “catching up” at classes. As our elders get older, the social part of having friends starts to fade. A couple of years ago, we all were kept from visits and our daily routines because of the pandemic. Some older people had a hard time changing, and the everyday tasks got harder so it continued with staying home or visiting again. The cognitive health of conversations with others was replaced with TV shows and phone time. I have seen these elders

open up, laugh, and look forward to seeing each other every class. With that social and physical component present, that makes for a successful, joyful, and well-attended class.

We also work with elders on making their homes safer. We complete home assessments twice per year. Each year, we see changes in our O'odham elders physical abilities, and modifications are needed to the home. With a walk-through of the home and a questionnaire completed, we are sensitive to the repairs and listen to the needs of the elder. If it's time to add that grab bar or maybe that step is now a trip hazard, we work with them to make it safe. With a great partnership with Maintenance, I also can be their advocate for other repairs for the home. In all aspects of injury prevention, we all want to make our people safer. ■

2024 Rick Smith Injury Prevention Award

Award Nominations Deadline in February!

Please consider submitting nominations for the 2024 Rick Smith Injury Prevention Award; nominations are due to CDR Molly Madson at molly.madson@ihs.gov by 07 February 2025

The Rick Smith Injury Prevention Award recognizes the performance of individuals or groups whose special efforts and contributions in the field of injury prevention have resulted in a significant impact and led to improved public health for American Indians/Alaska Natives.

NVIH continues to support "Standing Strong on Your Feet" and "You Matter"

By: Amanda Holley

Hello from Northern California. My name is Amanda Holley, and I am Northern Valley Indian Health's Injury Prevention Program Coordinator. With the continuous support from the TIPCAP grant, Northern Valley Indian Health (NVIH) has been able to maintain "Standing Strong on Your Feet," a fall prevention program, and are piloting "You Matter," a suicide prevention program.

"Standing Strong on your Feet" has embraced Bingocize, Healthy Steps, and Tai Chi as the primary strength and balance classes offered to the elders. The team has observed that the tribal elders particularly enjoy listening to music while they work on enhancing their strength and balance. Movement classes are available at least once a week at all locations. Also through this program, NVIH successfully rebuilt a ramp for an elder, demonstrating our commitment to accessibility and support.

"You Matter" provided lock bags for medications and firearms, along with cable gun locks as a means to reduce access to lethal means, thereby preventing suicide. The team also delivered medication safety education equipment to the community. At end of project, the team successfully distributed 36 medication boxes and 20 cable gun locks, reaching out to a total of 23 dwellings. ■



TIPCAP Monitoring Contractor Honored to Receive the 2024 Safe States Advancing Health Equity Award

The Safe States Advancing Health Equity Award recognizes a member who has helped make a substantial impact to improve equitable outcomes and/or reduce inequities impacting the field of injury and violence prevention. The Safe States Alliance is a non-profit organization that strengthens the practice of injury and violence prevention.

The TIPCAP Monitoring Contractor Team was presented with this award for their unwavering commitment to support equitable practices in tribal communities. The team is responsible for monitoring the overall progress of 27 IHS TIPCAP sites while collaborating with the injury prevention coordinators to implement injury prevention initiatives that address disparities in injury rates throughout American Indian and Alaska Native communities.





TIPCAP ANNOUNCEMENTS

Annual Progress Reports are due March 31, 2025

The annual progress report is due March 31 and will cover July-December 2024. Plan ahead and keep in mind the following:

- Report should be submitted to projects officers for review by Friday, March 14, 2025
- Reports should be submitted by Monday, March 31, 2025 in Grant Solutions
- Submitted reports should include the progress report narrative, cover page with reporting checklist, data reporting forms, and Federal Financial Report (FFR, SF-425)
- Visit TIPCAP.org for reporting templates and tools

Upcoming Injury Prevention Conferences

Lifesavers National Conference

Long Beach, CA | March 9-11, 2025

Link: <https://lifesaversconference.org/>

SAVIR Conference

New York, NY | April 7-9, 2025

Link: <https://savir.joyconference.com/v2/>

Kidz in Motion

Madison, WI | August 14-15, 2025

Link: <https://kidzinmotion.org/>

Safe States Injury & Violence Prevention Conference

Atlanta, GA | September 9-11, 2025

Link: <https://www.safestates.org/page/AnnualConference>

National Transportation in Indian Country Conference

Gila River, AZ | September 21-25, 2025

Link: <https://www.nticc.org/>

American Public Health Association (APHA) Annual Meeting

Minneapolis, MN | October 27-30, 2024

Link: <https://www.apha.org/events-and-meetings/annual>

Save the Season: TIPCAP Annual Workshop & National Conference

The TIPCAP Annual Workshop will be held in conjunction with the National Conference on American Indian and Alaska Native Injury and Violence Prevention in summer 2025. Exact dates and location coming soon!



3rd National Conference on American Indian and Alaska Native Injury and Violence Prevention



Empowering Indigenous Voices

Summer 2025





TIPCAP ANNOUNCEMENTS

Join TIPCAP for the New Poster Presentation Webinar Series

The new webinar series will allow all of the TIPCAP programs to give a poster presentation about their program and/or work in injury prevention. The series kicked off on December 12 and will continue monthly on the 2nd Thursday of each month at 12 PM Mountain (except for January, which will take place on Thursday, January 9 at 1pm). A calendar invite to the series was sent to TIPCAP coordinators and IHS staff and includes a tentative schedule of presenters and Zoom information.

If you would like to receive this invite, please email Shelby Billie at shelby.billie@cuanschultz.edu.

Funding Available for Tribal-led Fatality Review Teams



The National Center for Fatality Review and Prevention (National Center) is pleased to announce funding is available to support Tribes in participating or leading Child Death Review (CDR) and Fetal and Infant Mortality Review (FIMR) programs. CDR and FIMR teams seek to understand how and why children die, without ever placing blame on any individual, agency, or system. Learn more about [CDR](#) and [FIMR](#).

Tribal involvement in fatality review provides unique circumstantial information about how and why children die. The potential benefits to participating in fatality review are:

- Address preventable deaths in your communities.
- Use culturally responsive approaches to identify and address health disparities.
- Strengthen community systems and partnerships.
- Retain access to and control of your own data for decision-making and program development.
- Gain insights to improve health outcomes and reduce future losses.

There are multiple paths to engaging in fatality review and the National Center recognizes and respects the sovereignty and needs of tribal nations.

Funding is available until all funds have been allocated. There is no limit to how much funds can be awarded to each Tribe; however, most awards will be around \$50,000 - \$100,000. To learn more or apply for funding, please contact Jessica Perfette at jperfett@mphi.org.



Smoke Alarm Project Offers Free Smoke Alarms

Consider this opportunity for your community to receive FREE smoke alarms and CO detectors from the Johns Hopkins Smoke Alarm project. The project is looking for partner agencies to help get the alarms out to tribal communities. The goal would be to identify individuals in communities to install the detectors in homes, provide home fire safety education, and do some very light data collection. Johns Hopkins would ship the units to your location, but it would be up to the partner agencies to get them out to the communities.

If this is something you are interested in for your area, please email Dr. Wendy Shields (wshield1@jhu.edu), project lead and injury prevention researcher and practitioner with the Center for Injury Research and Policy.



TIPCAP ANNOUNCEMENTS

IHS and Monitoring Contractor Staff Changes

Some welcomes and goodbyes



Cherron Smith joins IHS as Grants Management Specialist

Cherron Smith joins the IHS Division of Grants Management as a Grants Management Specialist. With 27 years of federal grants administrative experience and a professional certification from Management Concepts, she manages a portfolio of grants that include, the Special Diabetes Program for Indians, as well as the Great Plains, Oklahoma City, and Portland Areas. Cherron enjoys spending time with family and friends, reading books and talking long walks with her dog Bootsy.



Holly McKinney leaves TIPCAP (but she hasn't gone far!)

Holly McKinney will no longer serve in the role of Technical Assistance Coordinator for the monitoring contract team at the Centers for American Indian and Alaska Native Health (CAIANH). Holly has joined a new project at CAIANH, so fortunately those of us who work with her in Denver can still enjoy her company!

The CAIANH team, as well as the Indian Health Service Injury Prevention Program, would like to thank Holly for over three years of work with TIPCAP. Holly played an integral role in providing assistance to TIPCAP programs during her time as the TA Coordinator, and she cared deeply about the success of the overall project. But most of all, Holly's compassion and commitment to every TIPCAP team member, and the personal and professional relationships she built, will no doubt have had a lasting impact. It was a joy to see her grow in her professional career and we wish her the best of luck in her new endeavors. Thank you for everything, Holly!



Ann Johnson retires from the University of Colorado

Ann Johnson will no longer serve formally in her role as biostatistician for the monitoring contract team. After 19 years at CAIANH (and many more at the University of Colorado), Ann has decided to retire! Though, we are pleased to say that Ann has agreed to work with TIPCAP on a temporary basis for the last year of this funding cycle.

Over the last 8 years, Ann contributed immensely to TIPCAP, helping to create and refine data reporting tools that meet the needs of the TIPCAP programs and to analyzing data to represent the incredible impact TIPCAP programs have made individually and collectively. CAIANH and IHS appreciate Ann's dedication and outstanding contributions to tribal injury prevention. We wish her the best in retirement!

A Farewell Message from Casey Crump, who is retiring from IHS

As I close out my time at IHS, it is with fond memories of working with you and the wealth of knowledge and friendship you have given me that makes it so difficult to say farewell. I have worked hard in my career to enact change and hope the lives touched have been lifted up through my efforts. You all do work that is directed towards making others lives better and there is no greater journey then that! Always remember we may not see the difference directly but every effort we make to improve lives touches someone at a time that we may never know about. Stay focused on that and you will do GREAT and AMAZING things!



TIPCAP Sites and Project Officer Contact Information

| IHS Area | TIPCAP Site | Contact | Part | Project Officer |
|--------------|---|--|---------|---|
| Alaska | Bristol Bay Area Health Corporation | Jared Miller JHMiller@bbahc.org | Part II | Hugh Denny Hugh.Denny@ihs.gov |
| Alaska | Maniilaq Association | Joshua Rhodes Joshua.Rhodes@maniilaq.org | Part I | Hugh Denny Hugh.Denny@ihs.gov |
| Alaska | Norton Sound Health Corporation | Katie Hannon KHannon@nshcorp.org | Part I | Hugh Denny Hugh.Denny@ihs.gov |
| Albuquerque | Albuquerque Area Indian Health Board | Sixtus Dominguez ASDominguez@aaihb.org | Part I | Antoinette Toya Antoinette.Toya@ihs.gov |
| Albuquerque | Santo Domingo Pueblo | Eric Bailon Timothy.Bailon@kewa-nsn.us | Part I | Antoinette Toya Antoinette.Toya@ihs.gov |
| Bemidji | Stockbridge-Munsee Community | Judy (Vera) Heubel Vera.Heubel@mohican.com | Part II | Ryan Wheeler Ryan.Wheeler@ihs.gov |
| Bemidji | Ho-Chunk Nation | Lisa Herritz Lisa.Herritz@ho-chunk.com | Part II | Ryan Wheeler Ryan.Wheeler@ihs.gov |
| Bemidji | White Earth Band of Chippewa Indians | Bryanna Chilton Bryanna.Chilton@whiteearth-nsn.gov | Part II | Ryan Wheeler Ryan.Wheeler@ihs.gov |
| Billings | Rocky Mountain Tribal Leaders Council | Elliot Moore Elliot.Moore@rmtlc.org | Part I | Roberta Other Medicine Roberta.OtherMedicine@ihs.gov |
| California | Bakersfield American Indian Health Project | Joseph Anderson JAnderson@bakersfieldaihp.org | Part II | Alyssa Bernido Alyssa.Bernido@ihs.gov |
| California | California Rural Indian Health Board | Julie Villa Julie.Villa@crihb.org | Part II | Rinnah Wyatt Rinnah.Wyatt@ihs.gov |
| California | Indian Health Council, Inc. | Shonna Parker sparker@indianhealth.com | Part I | Brian Lewelling Brian.Lewelling@ihs.gov |
| California | Northern Valley Indian Health, Inc. | Amanda Holley Amanda.Holley@nvih.org | Part I | Carolyn Garcia Carolyn.Garcia2@ihs.gov |
| Great Plains | Great Plains Tribal Leaders Health Board | Chelsea Randall Chelsea.Randall@gptchb.org | Part II | Connie Giroux Connie.Giroux@ihs.gov |
| Great Plains | Winnebago Comprehensive Healthcare System | Jennifer Hardeman Jennifer.Hardeman@wchs.health | Part I | Connie Giroux Connie.Giroux@ihs.gov |
| Nashville | Jena Band of Choctaw Indians | Mona Maxwell MMaxwell@jenachoctaw.org | Part II | Michael Hiles Michael.Hiles@ihs.gov |
| Navajo | Navajo Nation-Department of Highway Safety | Orlando Bowman OBowman@navajodot.org | Part II | Theresa Yazzie Theresa.Yazzie2@ihs.gov |
| Navajo | Tuba City Regional Health Care Corp | Tina Billy tina.billy@tchealth.org | Part I | Wilpita Honie Wilpita.Honie@ihs.gov |
| Oklahoma | Apache Tribe of Oklahoma | Antoninette "Toni" Short Antoinette.Short@apachetribe.org | Part II | Tod Narcomey Tod.Narcomey@ihs.gov |
| Oklahoma | Choctaw Nation of Oklahoma | David Jones, DEJones@choctawnation.com Consuelo Splawn, CSplawn@choctawnation.com | Part I | Dustin Joplin Dustin.Joplin@ihs.gov |
| Oklahoma | Kaw Nation | LaVina Clark LClark@kawnation.com | Part I | David Bales David.Bales@ihs.gov |
| Oklahoma | Ponca Tribe of Oklahoma | Jocelyn Parker Jocelyn.Jackson2@ihs.gov | Part I | James Isaacs James.Isaacs@ihs.gov |
| Phoenix | Ak-Chin Indian Community | Teri De La Cruz TDeLaCruz@ak-chin.nsn.us | Part II | Kayla Davis Kayla.Davis@ihs.gov |
| Phoenix | Hopi Tribe | Megan Talahaftewa METalahaftewa@hopi.nsn.us | Part I | George Chung George.Chung@ihs.gov |
| Phoenix | Salt River Pima-Maricopa Indian Community | Monte Yazzie Monte.Yazzie@srpmic-nsn.gov | Part I | Kayla Davis, Kayla.Davis@ihs.gov Rob Morrones, Robert.Morrones@ihs.gov |
| Phoenix | Washoe Tribe of Nevada & California | Claudio Magana Claudio.Magana@washoetribe.us | Part I | Rob Morrones Robert.Morrones@ihs.gov |
| Portland | Northwest Portland Area Indian Health Board | Erin Nelson enelson@npaihb.org | Part I | Chris Fish Christopher.Fish@ihs.gov |

TIPCAP Monitoring Contractor Contact Information

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|----------------------------|--|------------------------------|--|--------------|
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| Ashley Brooks-Russell, PhD | Injury & Violence Prevention Center, Colorado School of Public Health | Director | Ashley.BrooksRussell@cuanschutz.edu | |
| Spero Manson, PhD | Centers for American Indian and Alaska Native Health, Colorado School of Public Health | Director | Spero.Manson@cuanschutz.edu | 303-724-1444 |
| Sara Mumby, MA, MPH | Centers for American Indian and Alaska Native Health, Colorado School of Public Health | Media Coordinator | Sara.Mumby@cuanschutz.edu | 720-341-9131 |
| Jenn Russell, MHA | Centers for American Indian and Alaska Native Health, Colorado School of Public Health | Project Director | Jenn.Russell@cuanschutz.edu | 303-724-1422 |

Indian Health Service Staff Contact Information

| Team Member | Organization | Title | Email | Phone |
|----------------|---|--|--|--------------|
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| Molly Madson | Division of Environmental Health Services | Injury Prevention Program Manager | Molly.Madson@ihs.gov | 301-945-3189 |
| Andrew Diggs | Division of Grants Operation | Senior Grants Management Specialist | Andrew.Diggs@ihs.gov | 301-443-2241 |
| Cherron Smith | Division of Grants Operation | Grants Management Specialist | Cherron.Smith@ihs.gov | 240-672-7926 |