

A young girl with reddish-brown hair is the central figure, wearing a traditional Choctaw dress. The dress features a pink long-sleeved top with intricate beaded patterns in blue, yellow, and red. She holds a large, colorful fan with many thin, multi-colored sticks. The background is a soft-focus sunset with warm orange and yellow light.

2023

Choctaw Nation

HEALTH SERVICES
AUTHORITY

Tribal Health Improvement Plan

Choctaw Nation of Oklahoma

FAITH ► FAMILY ► CULTURE

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ACKNOWLEDGEMENTS

Many individuals and departments contributed to this Tribal Health Improvement Plan 2023, including the community-at-large. We are grateful for the efforts of the following individual who served on the Tribal Health Improvement Planning committee.

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This Tribal Health Improvement Plan was made possible through support by a grant from the Centers for Disease Control and Prevention. Award number 5NU38OT000259-05-00.

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Halito!

Improving the overall health of the Choctaw Nation continues to be the focus of the CNHSA (Choctaw Nation Services Authority) and Public Health team. In 2020, we created the Tribal Health Assessment to identify the immediate health needs of our Tribal community. The results of our Health Assessment helped to further our progression along the roadmap to a healthier Choctaw Nation. The Assessment “tell(s) a story about the health and [well-being] of the Choctaw Nation.”

In 2023, the Public Health team and CNHSA staff created the Tribal Health Improvement Plan to increase the mental and physical health of our Nation and Community. In the Improvement Plan (THIP), we report the process and techniques used to reach our strategic goals, or immediate Tribal Health needs. We promote and use data-driven innovation, continuous quality improvement (QI) and internal and external partnerships to strengthen and transform our Tribal Health infrastructure.

We adopt our health improvement tools through the Public Health Accreditation Board (PHAB). Through Accreditation, the CNHSA staff and Public Health team strive to be transparent to achieve our Nation’s trust in our health services. We encourage our audience to visit PHAB’s website at Phaboard.org to learn about the “gold standard” of promoting, delivering, and ensuring high quality public health services.

The Tribal Health Improvement Plan involves collaboration from numerous CNHSA departments and other inter-tribal resources. We emphasize the importance of how both internal and external partnerships assist our Health Department with promoting and making healthier communities. The CNHSA and Public Health team recognize and appreciate the Choctaw Housing program, mental and behavioral health department, and clinical care units for dedicating their time and effort to the Health Improvement Plan.

Yakoke,

Public Health Director

A handwritten signature in cursive script, reading "Ricki RoRoche".

Epidemiologist

A handwritten signature in cursive script, reading "Mason B. EQ".

Public Health Accreditation Coordinator

A handwritten signature in cursive script, reading "Cory Burdshaw".

Excellence In Rural Health Care

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EXECUTIVE SUMMARY

The Choctaw Nation's Health Services Authority (CNHSA) is committed to promoting and ensuring the health and well-being of people where they live, work, learn and play so that our **Vision**: "a Tribal community in which all people have equitable access to high-quality healthcare and are able to achieve their full potential for health and well-being" will continue. The CNHSA is responsible for delivering a wide array of services to a population of over 38,000 living in the Choctaw Reservation, which covers 13 counties in southeastern Oklahoma. Utilizing our Tribal health services and creating partnerships with public health communities, the Public Health Team works to ensure the health and well-being of all people. We promote and use data-driven innovation to reach our strategic goals, support quality improvement and strengthen improvement planning strategies.

The Tribal Public Health team's focus on innovation and partnership helps to strengthen the infrastructure of new and existing programs for elder-care, youth services and clinical care. The existing public health goals are to eliminate health disparities, identify community health needs, provide effective leadership for the development of health policies, and assure the availability of health services.

The Tribal Public Health team worked with other Team leaders, stakeholders, CNHSA, and collaborated with Dr. Janis Campbell, Epidemiology Professor at OUHSC (Oklahoma University Health and Sciences Center) to create 1.) Tribal Health Assessment, 2.) Tribal Health Improvement Plan, 3.) Organizational Strategic Plan. The Team identified high priority areas and developed strategies to reduce health disparities, enhance the quality of life and empower community members.

The following health priorities have been identified:

- 1.) Reduce the rate of cancer among American Indians in the Choctaw Nation.**
- 2.) Increase the use of mental and behavioral health services.**
- 3.) Improve the Social Determinants of Health among American Indians in the Choctaw Nation.**

Public Health Accreditation helps the CNHSA and Public Health team to achieve these priorities by offering a comprehensive approach to including data surveillance, monitoring, and quality improvement (QI). The three-part phase includes the following prerequisites: 1.) **Tribal Health Assessment Plan** 2.) **Tribal Health Improvement Plan** 3.) **Tribal Health Strategic and Organizational Plan**. The Choctaw Nation Health Service Authority holds sacred the culture of health and well-being of its Tribal members and community. Programs will be implemented and continuously monitored so that our **Mission**: "To improve the health of the Choctaw Nation, protect against disease and injury, and to promote health and well-being through education, services and partnerships" will be achieved.

CHOCTAW NATION PUBLIC HEALTH VISION AND MISSION

Vision

A Tribal community in which all people have equitable access to high-quality healthcare and are able to achieve their full potential for health and well-being.

Mission

To improve the health of the Choctaw Nation, protect against disease and injury, and to promote health and well-being through education, services and partnerships.



INTRODUCTION

Originally occupying what is now Alabama, Florida, Georgia, Kentucky, Mississippi, North Carolina, Tennessee and Louisiana, the Choctaw Nation is one of the largest tribes in the United States. With a population of over 200,000 people and over 38,000 residing within Choctaw Nation's Reservation, The Choctaw Nation is sovereign, with its own government, laws, and jurisdiction. The Choctaw Nation has a strong tradition of education and community service and is known for its contributions to art, music, and literature. The Choctaw Nation is actively involved in economic development and, through various programs and initiatives, works to improve the lives of its Citizens.

The Chahta have a history of forward-thinking and servant leadership. The Nation values traditions and holds sacred “holittopa” the health and wellness of our communities “achukmąka.” Delivering a wide array of services, the Choctaw Nation Health Services Authority (CNHSA) is the hub of our Health System. CNHSA is responsible for delivering services to community members residing across our jurisdictional area. We uphold a tradition of servant leadership “i toksvli” to create better lives for those we serve.

The Choctaw Nation believes a public health approach to health care service is essential to healthy communities. Health promotion and disease prevention are of equal importance, as well as the care of patients when they are ill. The Public Health Accreditation Board (PHAB), the national accrediting body for public health has identified three prerequisites for public health accreditation. The Tribal Health Assessment (THA) (2020), the Tribal Health Improvement Plan (THIP), and the Organization strategic plan (2023) will be used to promote the health and well-being of our Tribal members and community.



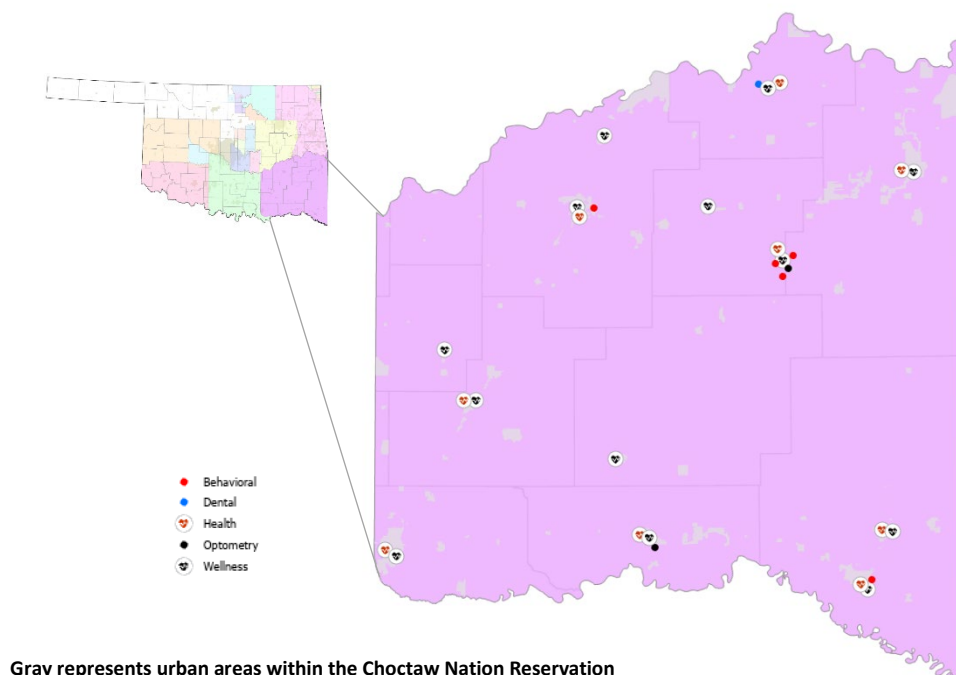
ABOUT CHOCTAW NATION

The Chahta Proud, are resilient and strong. The Nation presently makes its home in a thirteen-county reservation in southeastern Oklahoma (Figure 1). The Chahta pride ourselves on our ability to preserve and celebrate our many unique traditions, including our language, historical games, dances, and artwork.

Today the Choctaw Nation is the third largest federally recognized tribe with nearly a quarter million enrolled members and a reservation area that spans nearly 11,000 square miles and thirteen Counties (see Figure 1). With its government seat located in Durant OK, the Choctaw Nation has three branches of government: executive, legislative, and judicial. The nation delivers a wide range of services including education, housing, family, elder, culture, and health services.

In 1999, the Choctaw Nation was the first tribe to build its own hospital. This state-of-the-art facility located in Talihiina, includes inpatient care surgery, family practice and pediatrics, radiology, physical therapy, optometry dental, 24/7 emergency services and more. In addition, CNHSA operates eight outlying clinics “ahlakoffi” located in Atoka, Broken Bow, Durant, Hugo, Idabel, McAlester, Poteau, and Stigler (Figure 2). CNHSA operates other services throughout southeastern Oklahoma including a diabetes wellness center, behavioral health and substance abuse programs, residential treatment facilities and fitness centers.

Figure 2: Choctaw Nation Reservation and health center locations



PUBLIC HEALTH ASSESSMENT REPORT 2020

In 2020, CNHSA completed a Tribal Health Assessment Report. Through this report, CNHSA showed their commitment to an overall health improvement process that promotes a culture of wellness, uses evidence-based practices, and engages stakeholders and communities. The process was part of a large effort toward data-based planning and decision-making and increased accountability for making measurable improvements in health outcomes. The assessment provided a comprehensive report that serves as a centralized source of information and data to better understand the community's overall health.

The assessment report was used to establish priorities, educate leaders, mobilize Tribal resources, and develop an improvement plan. As shown in the report, the Choctaw Nation worked with CNHSA staff and partnered with community stakeholders to develop their Tribal Health Improvement Plan (THIP). CNHSA used public health accreditation as a framework to improve quality, strengthen the health information management system, address inefficiencies, and improve health outcomes.



PUBLIC HEALTH IMPROVEMENT PLAN

Public health is concerned with promoting and protecting the health of entire communities. This work is achieved by promoting healthy lifestyles and choices, preventing disease and injury, and ensuring safe and healthy environments where people live, learn, work and play. The Choctaw Nation believes a public health approach to health care services is essential to healthy communities.

This Tribal Public Health Improvement Plan (THIP) is part of the Public Health Accreditation Board (PHAB) accreditation process for the Choctaw Nation. PHAB is a non-profit organization that provides accreditation to public health departments in the United States. The purpose of PHAB is to improve the quality and effectiveness of public health agencies by setting standards for performance and providing a process for evaluating and recognizing those agencies that meet those standards. To be accredited by PHAB, a public health department must demonstrate that it is meeting a set of national standards for public health practices, including leadership, governance, policy development, data and information systems, and community engagement. Accreditation by PHAB is voluntary, but it is seen as a mark of excellence and can help the Choctaw Nation to secure funding, partnerships, and other resources.

A THIP is a long-term, systematic approach to improving the health of the Choctaw Nation. It is developed by a group of stakeholders, such as the CNHSA representatives, Tribal Public Health Department, community organizations, Choctaw government and members of the Tribal community.

The process of developing a THIP typically involves several steps, including:

1. **Identifying the Choctaw and community's health needs:** This involves collecting data on health status and identifying the factors that contribute to poor health outcomes.
2. **Setting goals and objectives:** Once the health needs of the community have been identified, the next step is to set specific, measurable goals and objectives that address those needs.
3. **Developing strategies:** Based on the goals and objectives, the group will then develop strategies to address the identified health needs. These strategies may include educational campaigns, policy changes, or new programs and services.
4. **Implementing the plan:** The group will then implement the strategies and interventions outlined in the THIP.
5. **Evaluating progress:** Regular evaluation is an important part of the THIP process. This can involve collecting data on the interventions' effectiveness and soliciting feedback from the community.

A well-developed THIP addresses a wide range of health issues within the Choctaw community, including chronic diseases, mental health, and access to healthcare. It helps to build a sense of

community “tamahushi” and encourages CNHSA representatives to work together to improve the health and well-being of all Citizens and community members.

The CNHSA utilized the Mobilizing for Action through Planning and Partnerships (MAPP) model to inform the Tribal Public Health Improvement Plan.

MAPP is a community-based strategic planning process developed by the National Association of County and City Health Officials (NACCHO) in collaboration with the Centers for Disease Control and Prevention (CDC) (<https://www.naccho.org/programs/public-health-infrastructure/performance-improvement/community-health-assessment/map>). MAPP is designed to help communities improve their public health systems and outcomes by engaging stakeholders in a collaborative process to assess, prioritize, and address public health issues (Figure 2).

The MAPP process involves six phases:

1. **Organizing for Success:** In this phase, the CHNSA creates a steering committee or workgroup to guide the MAPP process and to identify and recruit other stakeholders.
2. **Visioning:** This phase involves developing a shared vision for the Community's public health future, based on input from a range of stakeholders.
3. **Assessing the Public Health System:** Through a variety of data collection methods and input from stakeholders, the CHNSA assesses the current state of its public health system, including its strengths and weaknesses.
4. **Identifying Strategic Issues:** In this phase, the CNHSA identifies and prioritizes strategic issues based on the assessment of the public health system and input from stakeholders.
5. **Formulating Goals and Strategies:** In this phase, the CNHSA develops goals and strategies to address the identified strategic issues, based on the input and feedback of stakeholders.
6. **Action Cycle:** This phase involves implementing the strategies, monitoring progress, and evaluating the success of the MAPP process, with the aim of continuous improvement and adaptation.

Overall, MAPP is a process to help the Choctaw Nation improve their public health systems by engaging stakeholders in a collaborative and data-driven process to identify and address priority public health issues.

Figure 2: Mobilizing for Action through Planning and Partnerships (MAPP) Model



Adapted from <https://ctb.ku.edu/en/table-of-contents/overview/models-for-community-health-and-development/mapp/main>

Choctaw Nation convened a Tribal Public Health team comprised of Clinical Care staff, Public Health Programs staff, Epidemiologist, Public Health Accreditation Coordinator, Tribal Leadership, Environmental Specialists and Housing Executives. The Team included Choctaw Nation staff who were not traditionally considered public health but whose jobs impact the health and well-being of people. The Public Health Committee engaged community representatives who provided input and guidance throughout the improvement planning process. The University of Oklahoma, Hudson College of Public Health, a tribal public health consultant, assisted with planning and facilitating community and stakeholder engagement. The Tribal Public Health team, which met routinely, was instrumental in reviewing health assessment data, guiding community engagement efforts, identifying strategic priorities, and developing the overall THIP. The Team recommended that the Tribal Health Assessment data be presented to CNHSA staff, Tribal law enforcement, housing development, community groups and public health system stakeholders for input and priority setting. Using a consistent approach and consensus-building techniques, participants identified the following health areas to be priorities addressed in the plan:

- 1. Social Determinants of Health**
- 2. Chronic Disease Prevention**
- 3. Mental and Behavioral Health**

Issues and themes identified by Tribal community stakeholders included social determinants of health, chronic disease prevention, and mental and behavioral health. Public health system stakeholders identified opportunities to leverage data resources to use our data more effectively. Resources identified by stakeholders included the resiliency and sovereignty of Choctaw people, honor to which staff implement programs and strong Tribal leadership. Tribal Leadership, staff and the community are committed to a happy and healthy Choctaw Nation and positive relationships with state and local agencies, community-based organizations, the faith community, and others. Choctaw Nation operates a strong, comprehensive health care system and works with diverse public health stakeholders who are committed and invested in the overall health and wellness of those served by the Nation.



HEALTH IMPROVEMENT PRIORITIES

The Choctaw Tribal Health Improvement Plan is a roadmap to promote health and quality of life among communities and families through culture, collaboration, community engagement and empowerment. While all health issues are a priority, the Tribal Health Improvement Plan focuses on the following areas:

PRIORITY ISSUE: Social Determinants of Health



Social determinants of health are the various economic, social, and environmental factors that influence people's health and well-being. These factors include access to healthcare, education, housing, employment, and income, as well as social and cultural norms, political and legal systems, and the physical environment. Social determinants of health can create health inequalities, where some groups experience poorer health outcomes than others. The Tribal Public Health team and CNHSA identifies Choctaw Nation Housing security as a priority. Housing security for the Choctaw will help to achieve health equity and ensure that our Choctaw community will live a healthy life regardless of their background or life circumstances.

Housing is a crucial social determinant of health that can significantly impact an individual's physical and mental well-being. Access to safe, secure, and affordable housing is essential for good health outcomes. Poor housing conditions, such as overcrowding, inadequate ventilation, or exposure to environmental hazards like mold or lead, can lead to respiratory diseases, allergies, and other health problems. Additionally, living in unstable or inadequate housing can cause chronic stress and negatively impact mental health. Homelessness and housing insecurity

can further exacerbate these health risks and lead to increased rates of infectious diseases and mental health problems. Therefore, addressing housing as a social determinant of health is vital to promoting overall health and well-being.

The Tribal Public Health team and CNO (Choctaw Nation of Oklahoma) strive to overcome housing insecurity for the Choctaw. Working with inter-tribal resources and public entities, the CHNSA and Tribal Public Health team will improve by 2 percent yearly, the number of AI/AN families housed in Choctaw Nation Reservation. This objective will be achieved through increasing applications for Choctaw Nation Housing services and by the promotion of Choctaw Nation Housing programs through media and community events. Additional strategies include the following: sharing qualifications with Tribal community and other area housing authorities, promoting program qualifications through media, and promoting new elder community build projects “sipokni aiasha” through senior citizen centers. The promotion of housing program qualifications for the LEAP Program (Lease to Purchase), home rehabilitation projects, and new build projects will help the Choctaw Nation overcome housing insecurity. As of March 2023, four-hundred-forty homes have been built by the Choctaw Nation Housing program. Utilizing the Nation’s Housing Program and other Tribal resources, seven-hundred-fifty homes will be built by 2025.

Goal	Strategic Objective	Measure	Target	Strategy
Priority A: Social Determinants of Health				
Improve the Social Determinants of Health among Choctaw Nation.	Each year, improve by two percent, the number of families housed in Choctaw Nation reservation.	TBD	2% increase	<ul style="list-style-type: none"> • Increase applications for Choctaw Nation Housing services. • Promote housing programs through media and community events.
		70 (2021&2022) ¹	72	<ul style="list-style-type: none"> • Increase number of Choctaw Nation Tribal members participating in the Affordable Rental program. • Promote program and share qualifications with tribal community and other area housing authorities.
		18 (2021&2022) ¹	19	<ul style="list-style-type: none"> • Increase the number Choctaw Nation Tribal members participating in the independent elder program. • Promote program and share qualifications through media with area senior centers and Public Health Departments. • New elder community build projects

		120 (2021&2022) ¹	123	<ul style="list-style-type: none"> • Increase the number of new homes built for Choctaw Nation Tribal members participating in the Lease Purchase (LEAP) program. • Promote program and qualifications. • New build projects
		396 (2022)	404	<ul style="list-style-type: none"> • Increase the number of affordable rental homes in Choctaw Nation Reservation • New build projects
		600 (2022)	612	<ul style="list-style-type: none"> • Increase the number of homes rehabilitated in the Choctaw Nation Reservation. • Promote program and qualifications.
		TBD	2% increase	<ul style="list-style-type: none"> • Decrease the number of housing insecure in the Choctaw Nation Reserve.

Background
Stakeholders: Choctaw Nation Housing, Choctaw Nation Human Resources, Choctaw Nation Public Health
Policy, systems, environmental changes: Advocacy with federal government; policies for the equitable distribution of housing resources
Alignment with Health People 2030: Reduce the proportion of families that spend more than 30 percent of income on housing — SDOH-04 Reduce blood lead levels in children aged 1 to 5 years — EH-04 Increase the proportion of homes that have an entrance without steps — DH-04

TBD-To be determined. There are current surveys underway.

PRIORITY ISSUE: Chronic Disease Prevention



Chronic disease prevention is important because chronic diseases, such as heart disease, diabetes, and cancer, are the leading causes of death and disability worldwide. Chronic diseases significantly impact individuals, families, communities, and entire societies, both in health and economic consequences. Chronic diseases are often linked to lifestyle factors such as poor diet, physical inactivity, and tobacco use. Effective prevention measures help reduce the incidence and severity of chronic diseases by addressing these risk factors. Prevention measures include promoting healthy behaviors, such as regular physical activity, healthy eating, and avoiding tobacco use. Screening can lead to early disease detection and access to appropriate medical care is essential for the overall health of our Nation. For the Chahta, chronic disease prevention “ataklummi” can lead to better health outcomes and improved quality of life.

Cancer is a chronic disease characterized by the uncontrolled growth and spread of abnormal cells in the body. Unlike acute diseases, which have a sudden onset and short duration, cancer develops gradually over time and can persist for years or even decades. Cancer can occur in any part of the body and can have diverse types and subtypes, each with different risk factors, symptoms, and treatments.

The OK2SHARE (2020) sites the rate of cancer in Choctaw Nation Counties to exceed the rates of other American Indians, as well as all ethnicities. According to the State of the Nation’s Health Report, 2014, Cancer Focus Edition, lung and breast cancer are among the most prevalent in the Choctaw Nation Jurisdictional Area (CNJA). For Choctaw Nation, 2010-2012, breast cancer affected 19 percent, lung cancer affected 17 percent and colorectal cancer affected 13 percent of the Nation’s population.

Effective cancer prevention and treatment require a comprehensive approach, including reducing exposure to risk factors such as tobacco use, promoting healthy lifestyles, and

providing timely and appropriate medical care. For instance, cancer screenings, such as low dose CT scans, FOBT (Fecal Occult Blood Test) and mammography can be used to identify cancer before the patient exhibits symptoms. Support services such as psychosocial support, symptom management, and palliative care can help individuals with cancer manage the chronic nature of the disease and maintain their quality of life.

The State of the Nation report 2019 documents the percentage of screenings performed by the CNHSA for breast and colon cancers to be well above the U.S. Prevention Rates. The CNHSA providers and Tribal Public Health team identified three cancer screening objectives and related strategies to help reduce the rate of cancer in the Choctaw Nation. The Objectives and Strategies for improvement are as follows:

- Increasing yearly, by 3 percent the number of eligible adults (age 45-75) who receive colorectal cancer screening from 34 percent in 2020 to 37 percent. To increase the rate of screenings for American Indian/Alaskan Native who are over age 50, the CNHSA will utilize case managers for patient follow-up, FOBT (Fecal Occult Blood Testing) awareness and screening reminders. The case managers will also use screening reminders and patient follow-ups for colonoscopy screening methods. Our main strategy for increasing the colorectal cancer screening rates has been promotion of the FOBT kits as a screening measure.
 - The colorectal cancer screening RN (Registered Nurse) and Grant Case Manager reports phone calls are made, and letters are sent to patients that are due for screening along with sending FOBT kits through the mail. The process includes getting a standing order for a FOBT kit for all patients that are within the age range (45-75) and due for screening. The FOBT kits are part of the Moonshot Grant through the Stephenson Cancer Center & Oklahoma communities ACCESS hub, part of the National Cancer Institute. She includes the return postage on the kits so that it is simpler for patients to get the kits returned to the labs for testing. CNHSA uses FOBT kit only requiring 2 stool samples instead of the 3 samples previously required.
 - The Grant provides in-service education for providers and clinic staff and information about FOBT. The RN and case managers follow-up with patients that receive a positive FOBT. This typically involves following their charts and making sure they are going to appointments and placing phone calls to provide education as to why follow-ups are important.
- Each year, increase by three percent, the number of eligible adults who received mammogram screening increased by 3 percent from 72.6 percent (2020) to 75.6 percent. To increase the rate of American Indian/Alaskan Natives in southeastern Oklahoma who have had a mammogram in the past 2 years, the CHNSA will utilize case managers for patient follow-up and reminders. Case managers will promote patient self-exam and offer screening to women over the age of 40. CHNSA will use media and community events to promote annual screenings.

- Each year, increase by three percent the number of eligible adults (age 55-74) and otherwise eligible) who receive lung cancer screening. To increase the use of rate of screenings, the CHNSA will initiate a low-dose CT scan program, use media to promote screenings and utilize case managers for patient follow-up and reminders.

Goal	Strategic Objective	Measure	Target	Strategy
Priority D: Chronic Disease Prevention				
Reduce the rate of cancer among Choctaw Nation.	Each year, increase by three percent, the number of eligible adults (age 45-75) who receive colorectal cancer screening.	34.0% (2020)	37.0% (2023)	<ul style="list-style-type: none"> Increase the rate of AIAN in southeastern Oklahoma who are aged 50+ that have had home blood stool test.
		1952 (2021)	2011 (2023)	<ul style="list-style-type: none"> Increase the use of FOBT colorectal screening methods
		2000 (2022)	2060 (2023)	<ul style="list-style-type: none"> Increase the use of screening colonoscopy for colorectal screening methods Utilize case managers for patient follow-up and reminders.
	Each year, increase by three percent, the number of eligible adults who received mammogram screening.	72.6% (2020)	75.6% (2023)	<ul style="list-style-type: none"> Increase the rate of AIAN in southeastern Oklahoma who are aged 40+ that have had a mammogram in the past 2 years. Utilize case managers for patient follow-up and reminders.
		5,546 (2022)	5,712 (2023)	<ul style="list-style-type: none"> Increase the use of approved mammography screening methods Promote patient self-exam and offer screening to women over the age of 40. Use media and community events to promote annual screenings.
	Each year, increase by three percent, the number of eligible adults (age 55-74 and otherwise eligible) who receive lung cancer screening.	1,227 (2022)	1,264 (2023)	<ul style="list-style-type: none"> Increase the use of approved lung screening methods. Initiate a Low- dose CT scan program. Use media to promote screenings Low-dose CT scan program. Utilize case managers for patient follow-up and reminders.
Background:				
Stakeholder: Choctaw Nation colorectal cancer prevention program; Choctaw Nation Lung cancer screening program; American Cancer Society; University of Oklahoma Health Sciences Center; Patient Outreach and Marketing, Choctaw Nation Public Health.				
Policy, systems, environmental changes: Non-smoking health and national headquarters.				
Alignment with Health People 2030: Increase the proportion of adults who get screened for colorectal cancer — C-07 Increase the proportion of adults who get screened for lung cancer — C-03 Increase the proportion of females who get screened for breast cancer — C-05				

PRIORITY ISSUE: Mental and Behavioral Health



“Fohachi,” or to rest one’s mind, dismiss or recess refers to a person's overall psychological well-being “achukmaka.” Mental and behavioral health includes emotional, psychological, and social aspects of an individual's life and encompasses a range of mental states, from the absence of mental illness to the presence of positive mental health. Mental health can impact how a person thinks, feels, and behaves, as well as their ability to cope with stress, maintain relationships, and make decisions.

Mental health conditions have significant health, social, and economic consequences. According to the World Health Organization (WHO), one in four people will experience a mental health condition at some point in their lives. The Choctaw Nation recognizes that mental health is a significant public health problem that impacts the Nation’s individuals, families, and communities.

The CNHSA Behavioral Health Department and the Public Health team understand mental and behavioral health requires a comprehensive approach to addresses prevention, treatment, and support. The CHNSA, Tribal Public Health team and other stakeholders strive to increase members' use of mental and behavioral services. Our objective is to increase yearly, by 3 percent the number of depression screenings among the American Indian over age 18 in the Choctaw Nation Jurisdiction.

Strategies developed to meet the increase of depression screenings include the CNHSA providers increasing awareness of the importance of depression screenings and conducting quarterly baseline and pulse surveys to determine Tribal awareness. In addition, the increased use of depression screenings in Choctaw Nation clinics, the implementation of depression screenings in all Employee Health Clinics, and use of screenings in all clinics for scheduled and same day appointments will be utilized to meet our depression screening objective.

The CNHSA and Public Health team aims to increase screening awareness in adolescents (age 12-17) among Choctaw Nation and to increase use of depression screening of adolescents (age 12-17). The increased use of depression screenings for scheduled and same day appointments in the pediatric clinic will benefit the mental and behavioral well-being of Choctaw adolescents. A comprehensive approach that prioritizes mental health promotion, prevention, and care can improve the overall health and well-being of the Choctaw Nation.

Goal	Strategic Objective	Measure	Target	Strategy
Priority E: Mental and Behavioral Health				
Increase the use of mental and behavior health screenings in Choctaw Nation.	Each year, increase by three percent, the number of depression screens among AI 18+ in the Choctaw Nation area.	TBD	2% increase	<ul style="list-style-type: none"> • Increase awareness of the importance of depression screening among Choctaw Nation Providers. • Conduct baseline and pulse surveys quarterly to determine Tribal awareness.
		10,378 (2022)	10,689 (2023)	<ul style="list-style-type: none"> • Increase use of depression screening in Choctaw Nation clinics. • Implement depression screenings to all clinics for scheduled and same day appointments. • Conduct depression screenings in all Employee Health Clinics.
	Each year, increase by three percent, the number of depression screenings among adolescents aged 12-17	TBD	2% increase	<ul style="list-style-type: none"> • Increase awareness of importance adolescents (age 12-17) among Choctaw Nation Providers.
		1,025 (2022)	1,056 (2023)	<ul style="list-style-type: none"> • Increase use of depression screening of adolescents (age 12-17) in Choctaw Nation clinics. • Implement depression screenings to all pediatric clinics for scheduled and same day appointments.

Background
Stakeholder: Choctaw Nation Behavioral Health Program, Choctaw Nation Public Health, Choctaw Nation Public Health.
Policy, systems, environmental changes:
Alignment with Health People 2030: Increase the proportion of primary care visits where adolescents and adults are screened for depression — MHMD-08 Reduce cirrhosis deaths — SU-02 Reduce the proportion of people aged 21 years and over who engaged in binge drinking in the past month — SU-10

TBD-To be determined. There are current surveys underway.

NATIONAL PRIORITIES

Using the National Priorities of the U.S. Department of Health and Human Services provides a list of national objectives for improving health for all Americans over the next by 2030 (see above for the specific ones of interest to the (CNHSA). These National objectives are Healthy People 2020. The Healthy People program has created targets and examine progress to encourage collaboration across communities and sectors; to empower individuals toward making informed health decisions; and to measure the impact of prevention activities. Healthy People 2020 is the first to include Tribally specific objectives. The 2030 includes three Tribe specific objectives including:

PHI08



Increase the proportion of tribal communities that have developed a health improvement plan.

Target-Setting Method: Percentage point improvement

Data Source: Public Health in Indian Country Capacity Scan (PHICCS), National Indian Health Board (NIHB)

PHI03



Increase the number of tribal public health agencies that are accredited.

Target-Setting Method: Projection

Data Source: Accredited Health Department List, Public Health Accreditation Board

PHI09



Increase the proportion of tribal public health agencies that use Core Competencies for Public Health Professionals in continuing education for personnel.

Target-Setting Method: Percentage point improvement

Data Source: Public Health in Indian Country Capacity Scan (PHICCS), National Indian Health Board (NIHB)

The Choctaw Tribal Health Improvement Plan aligns with Healthy People 2030 and includes objectives focusing on increasing the use of mental and behavior health, improving access to and consumption of health foods, and decreasing food insecurity. While our Tribal Health Improvement Plan focuses on specific health priorities and strategies, it is important to acknowledge that the health of all our Choctaw citizens, families and communities is a priority. Choctaw Nation also recognizes the importance of community partners. We partner with schools, faith-based organizations, federal government, state government, local governments, food banks, and many other organizations.

This plan is a result of collaboration between these organizations, the University of Oklahoma Health Sciences Center, public health leaders within the tribe, and other health professionals. Each objective, current rate, target, and strategy was developed based on tribal assessment data that will be used to track progress and measure impact. The Public Health team will continue to monitor the programs engaged in the plan's implementation. This public health improvement plan is a strategy aimed at improving the health of Choctaw Nation and our community. The benefits of a public health improvement plan are as follows:

Preventing disease and injury: A public health improvement plan can help prevent the spread of disease and reduce the incidence of injury by promoting healthy behaviors, providing education on disease prevention, and implementing policies that encourage healthy living.

Improving the quality of life: A public health improvement plan can improve the quality of life for members of a community by addressing the social determinants of health, such as housing, education, and employment. By improving these factors, the plan can create a healthier environment that supports the well-being of all members of the community.

Saving healthcare costs: A public health improvement plan can save healthcare costs by preventing illness and injury and reducing the need for expensive medical treatments. By promoting preventative care and healthy behaviors, the plan can help to reduce the burden on healthcare systems and save money for both individuals and society.

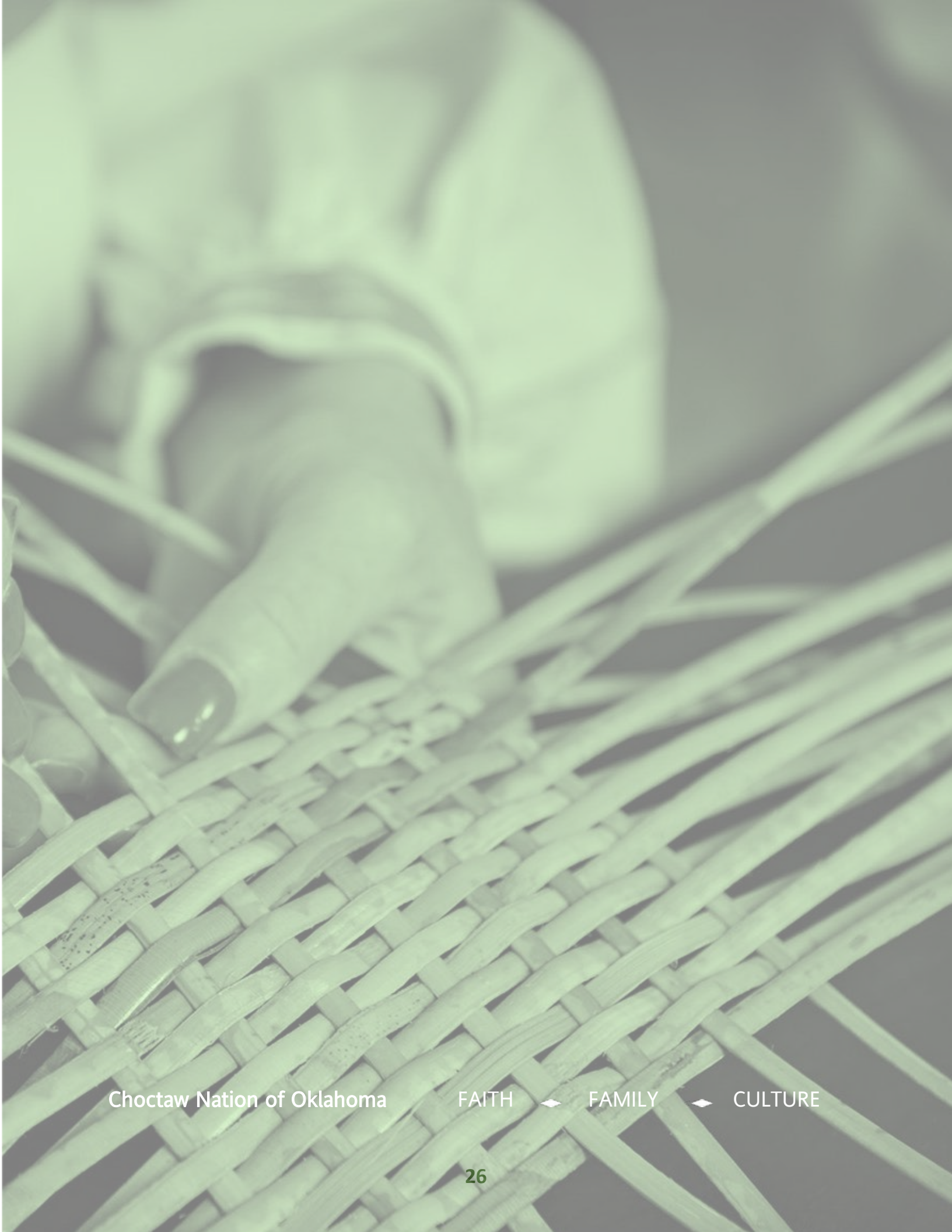
Building resilience: A public health improvement plan can help a community to become more resilient in the face of health emergencies, such as disease outbreaks or natural disasters. By establishing protocols and systems to respond to these events, a public health improvement plan can help a community to recover more quickly and effectively from health crises.

Addressing health inequities: A public health improvement plan can help address health inequities by focusing on the specific health needs and challenges of different populations. By identifying and targeting areas with the greatest health disparities, a public health improvement plan can help to reduce health inequities and ensure that all members of the community have access to the resources they need to lead healthy lives.

In summary, a Tribal Public Health Improvement Plan is critical for promoting the health and well-being of the Choctaw Nation. It addresses objectives and strategies set forth by CNHSA and the Public Health team. The over-arching goal of our Tribal Health Improvement Plan is to improve the quality of life of our Tribal and Community members.







Choctaw Nation of Oklahoma

FAITH



FAMILY



CULTURE