



**SUCCESS  
STORY**

## **Cheyenne and Arapaho Tribes Department of Health: Education and Outreach for Increased Impact**

### **Community:**

The Cheyenne and Arapaho Tribes are located in West-Northwest Oklahoma and have about 13,000 enrolled citizens. The grant recipient, the Cheyenne and Arapaho Tribes Department of Health, does outreach to their communities from four major tribal towns. The Cheyenne and Arapaho Tribes highly value their elders for their wisdom, stories, cultural knowledge and histories. Before this grant, those who had had family members or friends go through the cognitive decline process were great advocates for dementia awareness. However, the general community had limited knowledge about Alzheimer's disease and other dementias. This grant was an opportunity to increase knowledge and awareness about brain health and possible changes in brain health.

### **Grant Approach:**

The Cheyenne and Arapaho Tribes Department of Health partnered with their Tribal Eldercare Program, Emergency Medical Services, Community Health Representatives, and RESPECT programs. Together, they distributed information to community members, attended education events, distributed a survey to assess prevalence of dementia, conducted follow up visits with elders, and trained staff.

### **Strategy 1 Increase intentional outreach and education to reach more elders:**

The Cheyenne and Arapaho Tribes Department of Health designed and distributed a flier that advertised the annual Elder's Conference in

ledger art, which is a favorite local art form. At the Elder's Conference, they distributed information to over 250 elders. At a separate event, the annual Elder's Day Out, they presented information on Alzheimer's disease, dementia, cognitive health, and the life course of brain health to over 300 elders. They also designed and published Public Service Announcements to more than 8,000 community members through the Tribal Tribune, TV, Facebook and other social media. After they presented to the legislative body, governor, and chief of staff, one of the tribal elders shared that they were impacted by cognitive decline and were experiencing some challenges. As a result, that tribal elder became a strong advocate for increased outreach. Because of the tribal elder advocacy, they used the tribal legislator offices to reach a large portion of the people that are harder to reach.

#### **Road Map for Indian Country Action #1:**

Work with community members to understand brain health, early warning signs of dementia, and benefits of early detection and diagnosis for persons with dementia and their caregivers.

### **Strategy 2 Adapt data collection methods to reach more people:**

The Cheyenne and Arapaho Department of Health adapted a valid instrument into an informational questionnaire. The questionnaire included brain health information that was more understandable and relevant for the community.

They had limited home visit opportunities with elders and encountered challenges mailing out the informational questionnaires to the 2,240 elders. However, through Pow-Wows and other events, they distributed more than 1,000 informational questionnaires to elders.

The questionnaire had a scannable QR code for elders and their family members. If people wanted to, they could scan the code and enter their answers online.

This improved the response time and streamlined the data analysis process for the Department of Health. The informational questionnaires are also being added to the standard assessments for elders done by Community Health Representatives and Emergency Medical Services contacts.

**Road Map for Indian Country Action #5:**  
Support collection and use of data on dementia and caregiving in AI/AN communities to plan program and approaches.

### Strategy 3 Train providers to support elders with dementia:

The Cheyenne and Arapaho Department of Health also focused on training for providers. They trained more than 20 people on the Emergency Medical Services team, the Community Health Representatives team, the ElderCare Program, and Department of Health staff. These providers received three

**Road Map for Indian Country Action #7:**  
Educate healthcare and aging service professionals in Indian Country about the signs and symptoms of dementia and caregiving for persons with dementia.

hours of training on brain health over the life course, ways to assess warning signs for cognitive decline, and types of resources and referrals for elders and their families.

### Looking forward:

The Cheyenne and Arapaho Department of Health will continue education and outreach through Public Service Announcements and at the annual Elder's Conference and Elder's Day Out. They will also continue their efforts to distribute and collect informational questionnaires. For elders who indicate they may be at risk of cognitive decline, they will do follow up home visits and provide additional information and supportive services. They will continue gathering data and using that ongoing data analysis to guide future steps in efforts to inform and prevent and provide care for those with cognitive health issues. They will continue partnering with the Oklahoma State Department of Health and Department of Human Services to develop referral processes to clinicians and social support services. They will continue looking for opportunities to further their work among their tribal communities.



For more information on the public health response to Alzheimer's, visit [alz.org/publichealth](https://alz.org/publichealth)