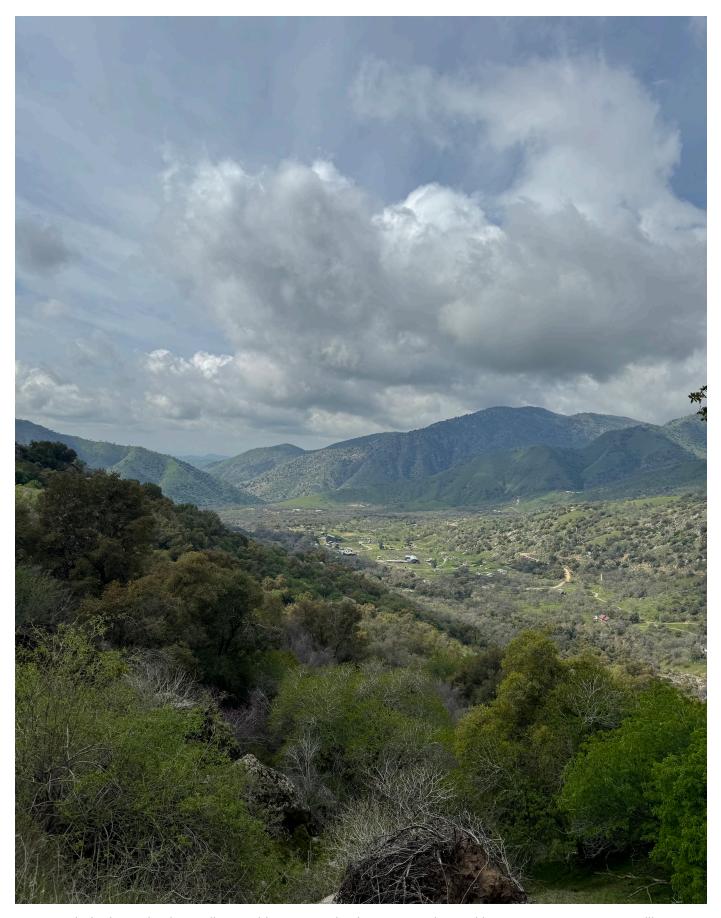


TULE RIVER INDIAN HEALTH CENTER: Community Health Assessment



Public Health Department March 2024





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Tripnee My words are tied in one With the great mountains With the great rocks With the great trees In one with my body And my heart Help me Tripnee And you day And you night All of you see me ONE WITH THIS WORLD

-Yokuts Prayer

ONE WITH THIS WORLD

Health Components



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SUMMARY

The Tule River Indian Health Center, Inc (TRIHCI) serves the Tule River Reservation community and other American Indians and Alaskan Natives in Tulare County, California. Every day, TRIHCI works to create healthier Native American families and communities. However, there are many challenges to our community's health. Under the leadership of the Board of Directors, TRIHCI staff conducted a community health assessment (CHA) between September and December 2023 to identify the community's health challenges and priorities and plans to use the results to design future solutions. The information is shared here so the entire community has this information and can use it to engage in solutions as well. In later 2024, TRIHCI staff plan to create a community health improvement plan from this assessment to make healthier families and communities.

For this report, 'health' is considered to have four different areas: healthy body, healthy mind, healthy spirit, and a healthy community. Each is essential to having a healthy family and community. The report lists the findings of issues within each area.

Key Data

- **TRIHCI has** 2,631 patients, including 830 children (18 and under), 1537 adults (19-64), and 264 seniors (65+) as of December 4, 2023.
- The top 5 health issues in the community are 1.) Diabetes, 2.) Obesity, 3.) Substance Abuse, 4.) Alcohol Abuse, and 5.) Mental Health, based on a survey completed by 92 community members.
- The top 5 leading causes of death are 1.) Heart Disease, 2.) Cancers, 3.) Accidents, 4.) Diabetes and 5.) Lower Respiratory Diseases for American Indians and Alaskan Natives living in Tulare County, CA between 1999-2020 based on data from the CDC.
- 22% of patients at TRIHCI had a positive COVID-19 test at one point in time.
- Rates of common chronic conditions among all age groups were 16% with Asthma, 12.5% with Diabetes, 3.8% have sexually transmitted diseases (STIs), 2.4% have chronic renal failure, and 2.4% have chronic obstructive pulmonary disorder (COPD).
- **21% of patients** had Depression, 9% with major depression and 17% with substance abuse.

INTRODUCTION

TRIHCI is located on the Tule River Indian Reservation and serves mostly American Indians and Alaskan Natives in Tulare County, California. It is governed by a nine-member Health Board comprised of seven regular Board Members and two alternate Board Members, all elected by Tule River tribal members. TRIHCI's mission is to improve the health status and quality of life of those we serve, and our vision is healthier Native American families and communities.

In the Fall of 2023, TRIHCI staff began a community health assessment to identify the health needs in our community. Data collection occurred between September and December 2023. The goal of the assessment was to identify and measure the most pressing health needs in the community so that we have data to help decision-making, design more effective interventions, and support the community to overcome these challenges.

Health can be a difficult word to define. Is being healthy the same as not being sick? Does it only apply to the physical body? What about the mind, spirit, environment and community? To answer these questions, TRIHCI staff relied on the Yokuts prayer at the beginning of this report. The prayer ends with asking to be *'one with this world*,' which we see as being in balance with all that is around us.

We believe *being one with this world* includes 4 components: mind, body, spirit, and community. Mind includes mental health and addiction disorders.



Body encompasses the health of our physical bodies, and the ailments it can have. Spirit reflects the needs between mind and body that are important to our patients. Community is factors of our health that reflect the collective as a whole, rather than people as individuals.

With efforts spanning from medical care to behavioral health, outreach, and public health, TRIHCI aims to provide holistic services that cover all aspects of health because we believe each state is unique and important.

The following report lists the data results of the assessment. Sources included de-identified health records at TRIHCI¹, national and state health databases, public environmental health data, and data from the community itself, through a short survey and two focus groups of adults and elders held in December 2023.

We thank everyone who contributed their thoughts, ideas, comments and questions to the development of this report. This final report serves as the culmination of all this input and gives a thorough analysis of health in the Tule River community.

Community Health Assessment Basics

What is a community health assessment?

According to the CDC, a community health assessment, also known as community health needs assessment, refers to a state, tribal, local, or territorial health assessment that identifies key health needs and issues through systematic, comprehensive data collection and analysis.² The goal of a community health assessment is to develop strategies to address the community's health needs and identified issues.

Why is a community health assessment important?

The CDC recommends completing a community health assessment because it gives organizations comprehensive information about the community's current health status, needs, and issues. This information can help develop a community health improvement plan by justifying how and where resources should be allocated to best meet community needs.





Who are our patients?

TRIHCI is proud to serve primarily American Indian/Alaskan Natives who live in Tulare County, California. As of December 4, 2023, TRIHCI had 2,631 patients, based on internal records of the number of people who had an appointment at TRIHCI in the last three years. The number per age group is: 830 under the age of 18, 309 between the ages of 19-25, 1,228 between 26-64, 177 between 65-74, 67 between 75-84, and 20 over the age of 85. These numbers can change daily as patients come and go.

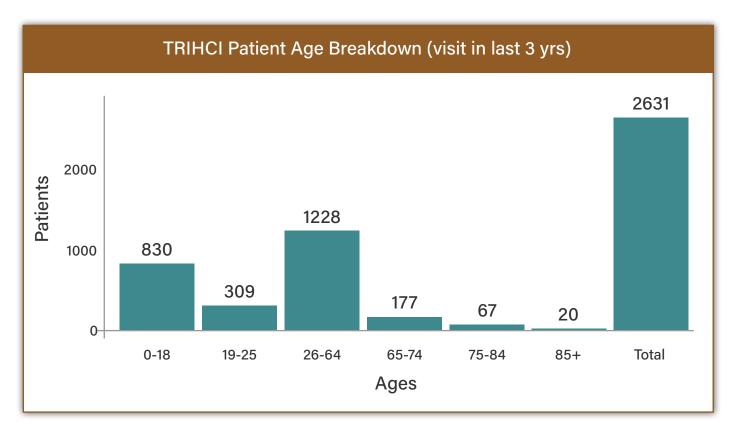


Figure 1. TRIHCI Patient Age Breakdown

VOICES FROM OUR COMMUNITY

In the Fall of 2023, TRIHCI staff collected 92 surveys from community members at the TRIHCI Health Fair and through an online form, with support from the California Rural Indian Health Board (CRIHB).³ Respondents were asked to select which health issues they thought the community faced. The table below shows which ones were selected the most. The most selected health issue was diabetes with 58% of respondents including it. The other issues in the top 5 were: obesity (50%), substance abuse (46%), alcohol abuse (40%), and mental/emotional health issues (40%). The table below lists every issue that received at least 10% of responses.

	Health Priorities	Percent
1	Diabetes	58%
2	Obesity	50%
3	Substance abuse	46%
4	Alcohol abuse	40%
4	Mental/Emotional Health Issues	40%
6	Cancer	30%
7	High Blood Pressure	28%
8	Poor Elder Health	24%
9	Suicides	22%
10	COVID-19	20%
11	Domestic Violence	20%
12	Hypertension	18%
12	Historical Trauma	18%
14	Heart Disease	16%
15	Arthritis	16%
16	Wildfires	16%
17	Liver Disease/Cirrhosis	14%
18	Accidents (unintentional injuries)	11%
18	Violent Acts (ex: homicides)	11%
20	Limited Access to Traditional Medicine/Healer	10%
20	Maternal health	10%
20	Flooding	10%

³The survey was exempted from Institutional Review Board by the CRIHB IRB Chair.

During focus groups in December 2023, community members were asked what causes these problems and gave a variety of answers. For diabetes and obesity, many members pointed to nutrition, saying that "chips and soda were easy to access." Others suggested that people needed to 'monitor' what they are eating and have more information about how to live a healthy lifestyle. For substance abuse and mental health, community members mentioned generational cycles of trauma, being in "survival mode" just to get by, and "feeling like you have no one you can turn to for help."

The priority survey also asked community members for their opinion on what is the single most important health issue in the community. The results are below. Diabetes again received the most votes for the most important health issue in the community, second was substance abuse, third was obesity and fourth was cancer. Each of these issues will be explored in more detail in the following sections.

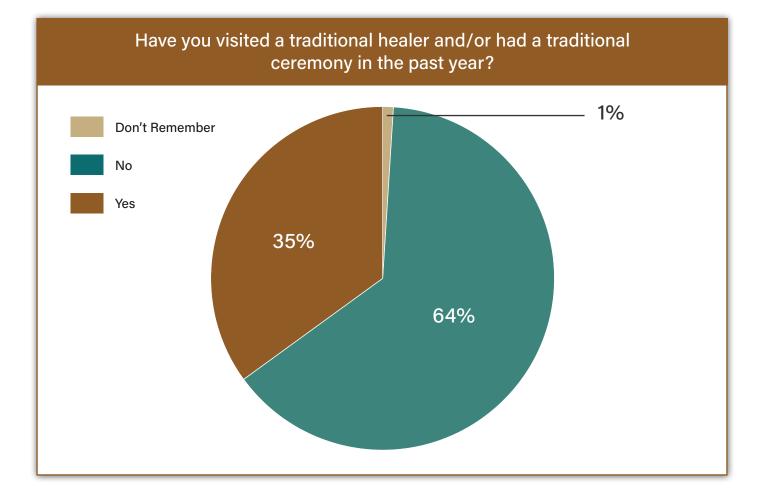
Mo	Most Important Health Issue			
1	Diabetes			
2	Substance Abuse			
3	Obesity			
4	Cancer			

CHUEHANA

HEALTHY SPIRIT

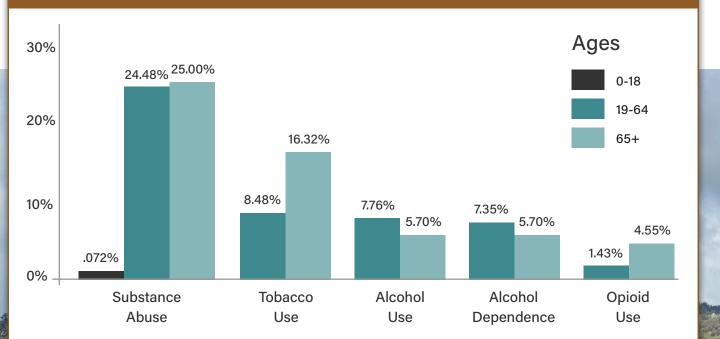
Health is often discussed in terms of our bodies, like whether we have a disease or not, but there are other ways to consider being healthy or unhealthy. In the Tule River community, we believe an important component of health is spirit. Many community members told us about how historical trauma is causing generational cycles of suffering and the need to counter this problem with resilience, a key part of a healthy spirit. Facing trauma is only one example of the importance of our spirit to address health problems, especially those caused before we are born.

Some community members use traditional healing to address spiritual challenges. As part of our community prioritization survey, we asked if community members have used traditional medicine or a healer within the last year. Results are below. We found that 35% have used traditional healing practices within the last year.



Graph 1. Community Members using Traditional Health Practices

When a healthy spirit is suffering, people can turn to substance abuse to feel better. In our surveys and focus groups, nearly half of survey respondents said that substance abuse was an issue. We used TRIHCI's internal records to identify how many people have been diagnosed with any form of substance abuse by their medical provider. The graph below shows the rates of substance abuse for tobacco, alcohol, opioids, and combined (general) in TRIHCI's patient community. For adults 19-64, we found that 24.48% have a substance abuse problem, 8.48% have a tobacco use disorder, 7.76% have an alcohol use disorder, 7.35% have alcohol dependency, and 1.42% have opioid use disorder. For seniors over the age of 65, 25% have substance abuse problems, 16.32% a tobacco use problem, 5.7% have alcohol dependency, and 4.55% have opioid use disorder. For children under the age of 18, 0.72% have any substance use disorder.

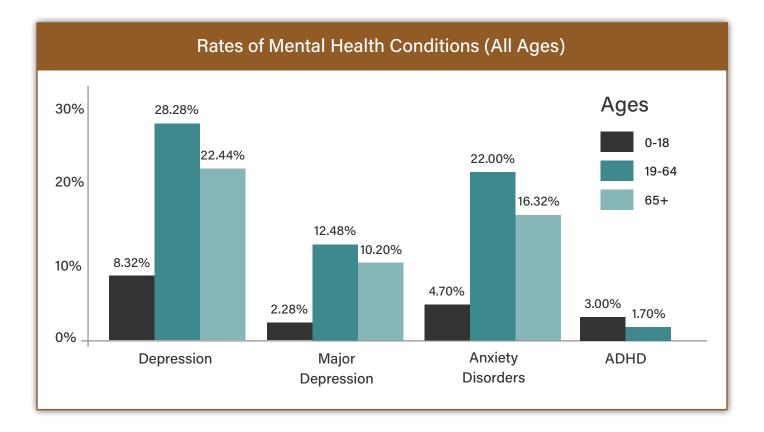


Rates of Substance Use Disorders Conditions (All Ages)

HEALTHY MIND

A healthy mind is another important part of being one with this world. Community members identified mental and emotional health as the fifth highest ranked health priority with 40% of respondents including it as a problem in the community. TRIHCI offers its Behavioral Health Department to provide community members with the mental health services they need. We hope that all community members who suffer from mental health problems can seek help from trained professionals to improve their health.

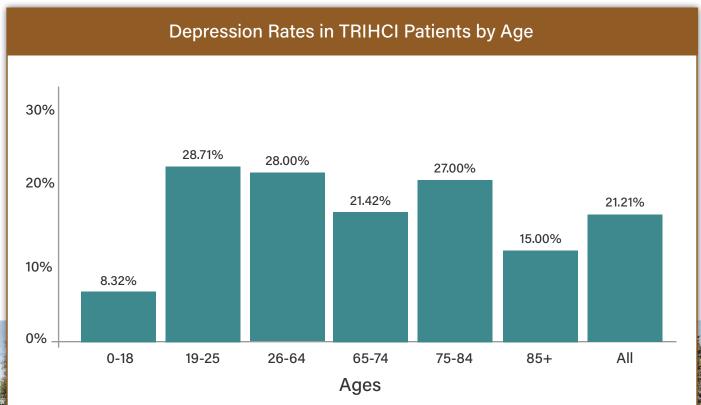
The graph below shows the rates of mental health conditions in our patient population based on our internal records. For children under the age of 18, 8.32% have depression, 2.28% have major depression, 4.7% have anxiety disorders, and 3% have attention deficit/hyperactive disorder (ADHD). For adults 19-64, the rates are 28.28% for depression, 12.48% for major depression, 22% for anxiety disorders, and 1.7% for ADHD. For seniors 65 and older, 22.44% have depression, 10.20% have major depression, 16.32% have anxiety disorders, and less than 0.5% have ADHD.



Graph 2. Rates of Mental Health Conditions

Due to the high rates of depression, we examined this issue further with smaller age groups. We found that 8.32% of children 18 and under, 28.71% of 19-25, 28% of 26-64, 21.42% of ages 65-74, 27% of ages 75-84 and 15% of ages 85 and older have depression. See graph below.







Success Story

Ms. Cassandra Gonzales works in TRIHCI's Behavioral Health Department and offers advice to anyone facing mental health problems:

"I want people in our community to know that they are not alone in this struggle. Praying, working out and journaling is how I work through or overcome any issue. We all struggle at times, but our struggle will not be forever. Trust that no matter the situation things will be okay even if it doesn't look like it. Never give up."



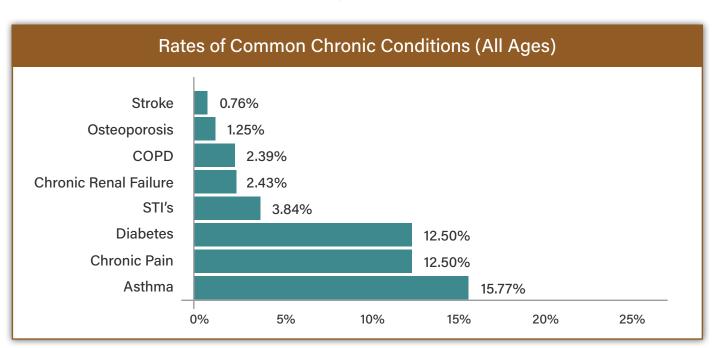
HEALTHY BODY

Having a healthy body is another important part of being one with this world. The community highlighted many physical health problems in their survey responses, such as diabetes, cancer, COVID-19 and heart disease. Most of the health center's efforts are aimed at improving the physical health of the community, such as the services provided by the Medical, Outreach, and Dental departments.

In this section, we will review the prevalence rates of common health diseases and conditions based on internal health records at TRIHCI. According to the CDC, a prevalence rate is "the proportion of persons in a population who have a particular disease or attribute at a specified point in time."⁴ We will conclude this section with the leading causes of death according to a CDC national database for identified American Indians/Alaskan Natives living in Tulare County who died between 1999-2020.

Common Conditions

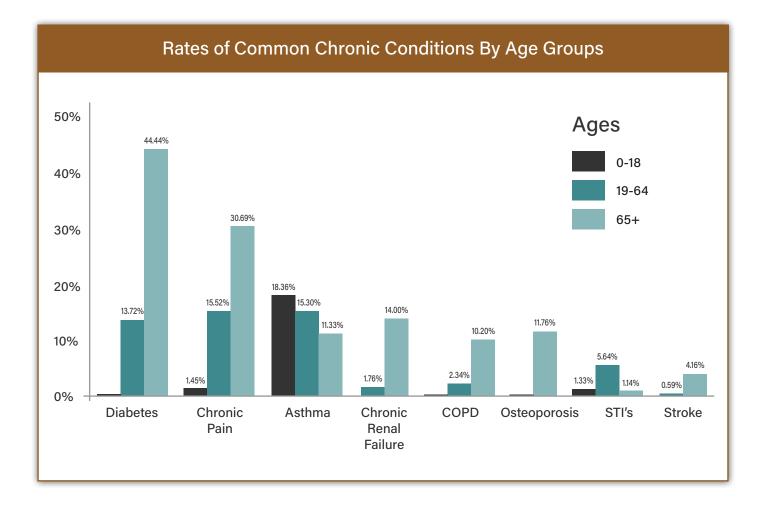
The following graphs give several prevalence rates for a selection of diseases and conditions. The first graph shows the rates of some common diseases and conditions for all age groups at TRIHCI. For all TRIHCI's 2,631 patients, 15.77% have asthma, 12.5% have chronic pain, 12.5% have diabetes, 3.84% have sexually transmitted diseases (STIs), such as syphilis or gonorrhea, 2.43% have chronic renal failure, 2.39% have chronic obstructive pulmonary disorder (COPD), 1.25% have osteoporosis, and .76% have had a stroke.



Graph 4. Rates of Common Conditions across all ages.

⁴ https://www.cdc.gov/reproductivehealth/data_stats/glossary.html#:~:text=PREVALENCE.,a%20specified%20period%20of%20time

As we age, certain diseases come and go which changes the rates. The next graph looks at the rate of conditions for specific age groups: children (0-18), adults (19-64) and seniors (65+). This data gives a better picture of where issues are among different age groups. The rates of diseases for children are close to zero for diabetes, chronic renal failure, COPD, osteoporosis, and stroke. For other diseases, the rates for children are 1.45% for chronic pain, 18.36% for asthma, and 1.33% for STI's. For adults ages 19-64, the rates of diseases are 13.72% for diabetes, 15.52% for chronic pain, 15.3% for asthma, 1.76% have chronic renal failure, 2.34% have COPD, 5.64% have STI's, and .59% for stroke. For seniors over the age of 65, 44.44% have diabetes, 30.69% have chronic pain, 11.33% have asthma, 14% have chronic renal failure, 10.2% have COPD, 11.76% have osteoporosis, 1.145 have STI's, and 4.16% have stroke.



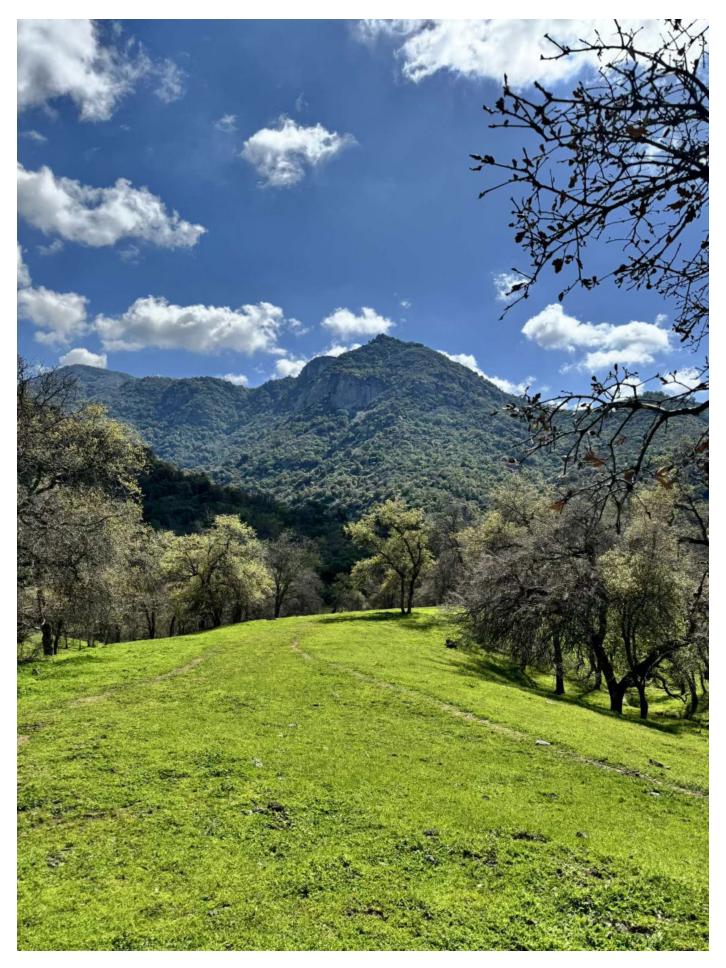
Graph 5. Common Conditions By Age Groups

Tips to Eating Healthy

Eating healthy is important for many diseases. TRIHCI's Registered Dietician, Ms. Shannon Beasley, offers tips on eating healthy:

"Healthy nutrition is having balance, variety, and moderation. When thinking about how to set up your plate, try to make half of your plate vegetables. Green, red, orange, and purple vegetables contain many vitamins and minerals that are recommended to nourish our body. They may also help decrease inflammation and boost our immune system."

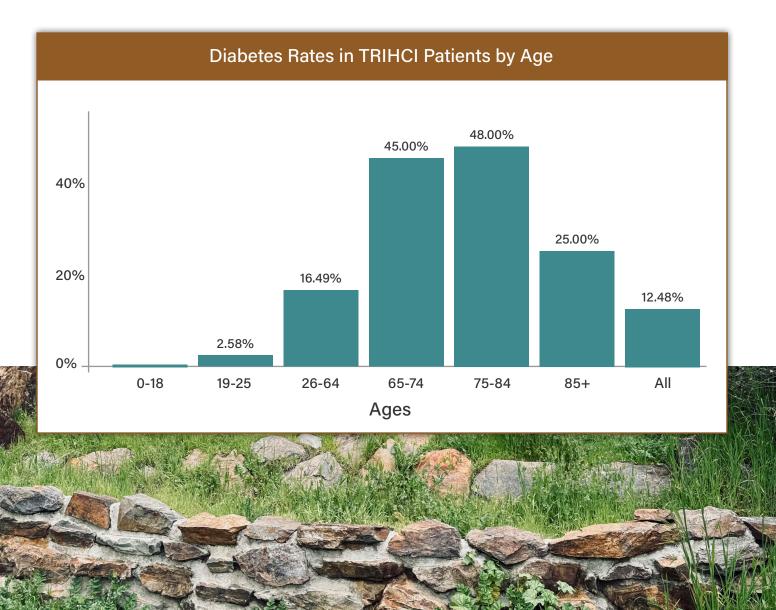




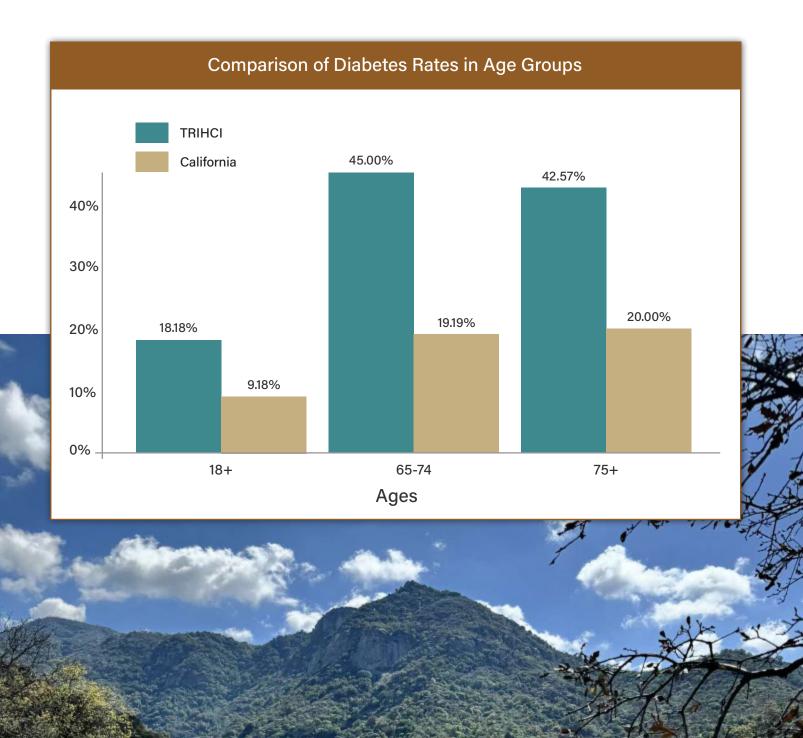
Diabetes

The number one health priority as voted on by the community is diabetes. The next graph shows the rates of diabetes for specific age groups. The rate of diabetes in children under 18 is 0. The rate of diabetes in the following age groups are: 2.58% for 19-25, 16.49% for 26-64, 45% for 65-74, 48% for 75-84, and 25% in elders over the age of 85.

Graph 6. Diabetes by Age Groups



The next graph compares rates of diabetes in certain age groups within TRIHCI's patients with all of California. We find that for adults over the age of 18, the rate in California is 9.18% but for TRIHCI patients is 18.18%. For people aged 65-74, the rate in California is 19.19% but 45% in TRIHCI patients. Finally, for people 75 years and older, the rate in California is 20% and 42.57% in TRIHCI's patients.



Graph 7. Diabetes Rates Comparison by Age Groups

Success Story

TRIHCI offers special services to our patients with diabetes. Ms. Sheyann Chavez, who oversees our diabetic program, says:

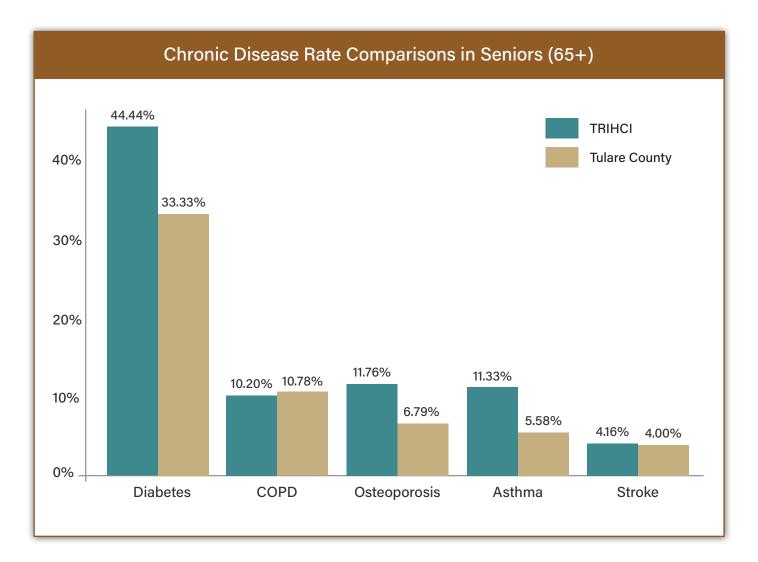
"My Grandmother, who I cared for, suffered from diabetes for over 30 years. The strain on her heart and other organs from treatment ultimately led to the passing of her life in October of 2023. I want the community to know how important Diabetic care really is. I advise everyone who is pre-diabetic or diabetic to practice healthy eating habits, physical activity at least three times a week, maintain a healthy body weight, test your blood sugar often and stay up to date on all labs, check your feet daily for cuts, sores or ulcers, see the podiatrist and stay up to date on your foot care, and control your blood pressure and cholesterol. The clinic is always available for questions or concerns you may have

in regard to your health condition. Diabetes can be managed and controlled with the advice of your provider and the your commitment to be a healthier you."



Elder Health

Elder health was another problem mentioned by community members. To examine elder health issues, we made comparisons with rates of diseases in people over the age of 65⁵ in TRIHCI's records and data for all seniors in Tulare County from a national dataset. The graph below shows the comparisons. For diabetes, 44.44% of seniors at TRIHCI have it, compared to 33.33% in Tulare County. For COPD, 10.2% of TRIHCI seniors have it, while 10.78% of seniors in Tulare County have it. For osteoporosis, 11.76% of TRIHCI seniors have it, compared to 6.79% of seniors in Tulare County. For asthma, 11.33% of TRIHCI seniors have it, compared to 5.58% of seniors in Tulare County. For stroke, the rates are similar at 4.16% of TRIHCI seniors and 4% in Tulare County.



Graph 8. Elders Chronic Disease Comparison with Tulare County

⁵ Though the community defines elders as 55 years and older, only data for 65 years old and over was available.

Success Story

Tribal Elder, Ms. Joyce Carothers has recommendations for other Elders:

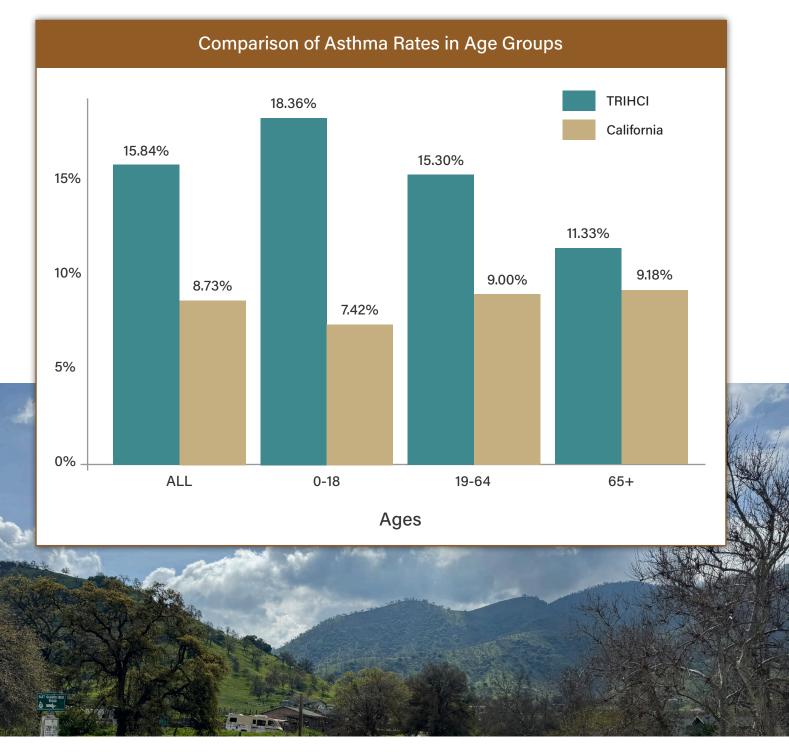
"My personal experience with elder health is arthritis in the joints of my fingers, knees and beginning stages of carpal tunnel, I also lacked motivation and was very lethargic, I had no energy whatsoever. In 2021 I changed my diet by eating healthier foods. I cut out sugar, bread, torts, rice, soda pop, candy, ice cream and basically all white foods. The only way for better health is to change what you put into your body. Since June of 2023 I've been juicing 4 oz ginger shots, 5 days a week. I don't take any medication as of today and my energy levels are extremely high, I'm motivation and I feel extremely good and healthy. My last annual appointment this year my doctor told me that I'm healthier

now, then I was in 2021, so whatever I'm doing keep on doing it. That was a good feeling, so I will continue my journey for better health. It was hard and challenging in the beginning, but once I adapted, life began to get better, and I've never felt better in my life."



Asthma

In looking at the rates of common conditions, we found higher rates of asthma than expected. The graph below compares rates of asthma in TRIHCI's population with California. For children 18 years and under, the rate of asthma in California is 7.42% and 18.36% for TRIHCI's patients. For adults aged 18-64, the asthma rate in California is 9% and 15.3% for TRIHCI's patients. For seniors 65 years and older, the asthma rate in California is 9.18% and 11.33% for TRIHCI's patients.



Success Story

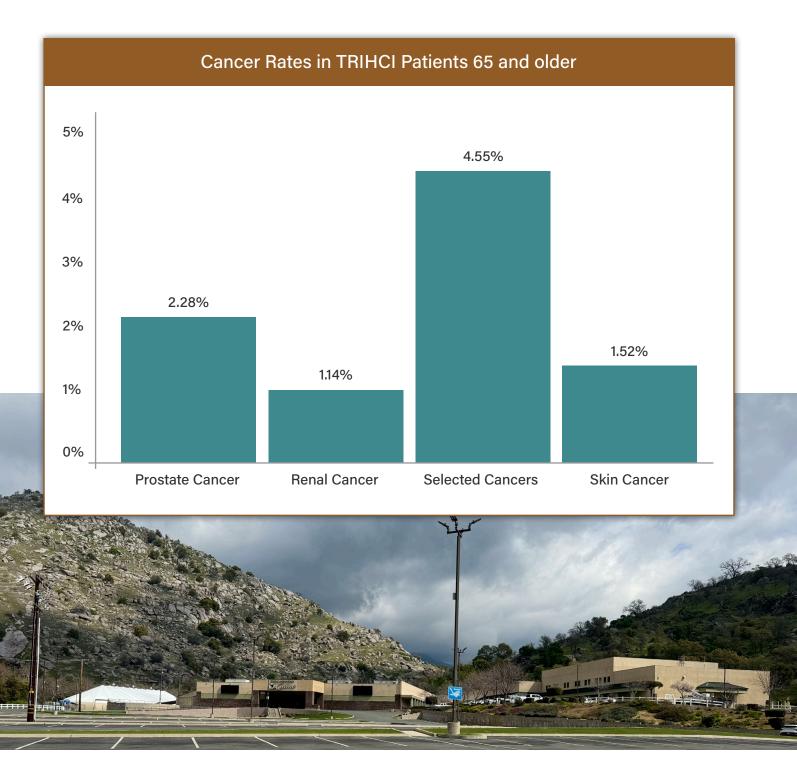
Ms. Corina Hernandez has experience managing asthma in her family:

"My son has had asthma since he was 5 months old. It's a challenge for any parent to make sure medication is taken properly. I personally discovered that certain foods cause reactions for asthma attacks. Educate yourself on certain medication and what works best for your child, where they feel comfortable, and know when it's working. I would like the community to take asthma seriously. It can affect you and your family's wellbeing, just in general in life. It is a very serious illness."



Cancer Rates

Cancer was the sixth highest health priority, with nearly 1 in 3 responses listing it as a health priority. The data below shows rates of cancer available through TRIHCI's internal records for all living patients. We found that 4.55% have selected cancers, including mouth, esophagus, colon, liver, pancreas, lung, brain, and leukemia, 2.28% have prostate cancer, 1.52% have skin cancer, and 1.14% have renal cancer.



Success Story

Cancer can be overcome. Ms. Adrianna Davisson says:

"I was diagnosed with breast cancer on July 5, 2021. I was diagnosed at an early stage 3. On July 16, I had a double mastectomy (both of my breasts removed). While they did the removal, they also tested some lymph nodes from under my arm. When the nodes were tested, they tested positive for cancer, so it was then determined that I needed chemo and radiation. I had 8 rounds of chemo, was really sick most of the time, lost all my hair and had the worst body aches ever. Once those were done, I had 35 rounds of radiation. It was hard because it was every day 5 days a week. The hardest part was convincing myself not to give up. I utilized the behavioral health department at the clinic. I knew if I werent able to stay positive, I would just lay down and give up. I also had amazing support, from my family, my co-workers and especially my husband."

Her message to the community is: "Don't put things off, get tested. I always put off my mammograms because they are so uncomfortable, but now I'm a big advocate for them. They can save your life. Better safe than sorry."



Leading Causes of Death

The CDC makes data on the causes of deaths for certain demographic groups available to the public at a website called CDC Wonder.⁶ The information at CDC Wonder is based on death certificates for U.S. residents. Each death certificate identifies a single underlying cause of death and includes other demographic data, such as race, age, county of residence, and ethnicity, among other variables. It is not possible to get data only for residents of the Tule River Indian Reservation though more specific data might be available in the future.

The closest estimate to the community on the Reservation is identified American Indian/Alaskan Natives who lived in Tulare County, according to their death certificate data, and died between 1999-2020, the last year available. These results are in the table below. The number one cause of death for AI/AN residing in Tulare County between 1999 and 2020 was heart disease, which accounted for about one quarter of all deaths. The second leading cause is cancer, which caused 14% of all deaths, and accidents, which caused 9%. Within accidents, the most common accident was caused by motor vehicles, which caused 26 deaths. Other leading causes of death are diabetes, lower respiratory diseases, liver diseases, cerebrovascular diseases, influenza and pneumonia, kidney diseases and hypertension. Suicides and homicides each contributed 2% of all deaths.

Causes of Death - AI/AN in Tulare County, 1999-2020, All Ages				
Rank	Cause	Deaths	% TD	
1	Heart Diseases	131	24%	
2	Cancers	80	14%	
3	Accidents (unintentional injuries)	48	9%	
4	Diabetes	31	6%	
5	Lower Respiratory Diseases	31	6%	
6	Liver Diseases	31	6%	
7	Cerebrovascular diseases	19	3%	
8	Influenza and pneumonia	14	3%	
9	Suicides	11	2%	
10	Homicides	11	2%	
11	Kidney Diseases	11	2%	
12	Hypertension	10	2%	
	Other	126	23%	

⁶ https://wonder.cdc.gov/ucd-icd10.html

CDC Wonder also allows causes of death to be separated by age. The tables below show the leading causes of death for AI/AN in Tulare County for elders, 55 years and older, and non-Elders, or those who were younger than 55 at death. The leading causes of death in Elders are heart disease, cancer, lower respiratory diseases, diabetes, cerebrovascular diseases, and chronic liver diseases. More specific data was available for the cancer category and lung, trachea, and bronchus cancer was the leading type of cancer and liver cancer was the second. The leading causes of death for non-elders are accidents, heart disease, chronic liver disease, cancers, and suicides.

Table 2. Leading Causes of Death for Elders and Non-Elders, AI/AN living in Tulare County, 1999-2020

Elders (55+)		Non-Elders (younger than 55)	
Cause	Deaths	Cause	Deaths
Heart Disease	108	Accidents (unintentional injuries)	41
Cancers	68	Heart Diseases	23
Chronic lower respiratory diseases	29	Chronic liver disease and cirrhosis	15
Diabetes	23	Cancers	12
Cerebrovascular diseases	19	Suicides	11



HEALTHY COMMUNITY

In addition to a healthy spirit, a healthy mind, and a healthy body, we are working towards building a healthy Tule River community. A healthy community includes things that are beyond any single person – like the health of our environment and availability of important programs to our community.

Access to Healthcare

One way to ensure the health of the community is for individuals to be able to access healthcare. Based on TRIHCI's records, about half our patients use Medicaid, 40% use private insurance, and 8% use Medicare. These rates differ compared to everyone in Tulare County. According to the California Health Interview Study,⁷ the insurance coverage of Tulare County residents in total is: 39% have Medicaid, 35% have private insurance, 11% have Medicare, and 9% are uninsured.

Environmental Health

The Tule River environment has challenged the community several times recently. In just the last few years, the community has faced wildfires, drought, heat waves, floods and atmospheric rivers. TRIHCI has worked closely with the Tribal government, including the Environmental Department, Public Works and the Tribal Administrator to ensure continuity of operations and the safety of both our staff and patients. We will continue to do.

With the dangers posed by the environment, monitoring equipment, such as for air quality, is being set up around the Reservation. When this data becomes available, we will have more ability to monitor environmental concerns which could impact the health of the community. We plan to share this information with the community so everyone can follow the best practices to keep themselves and their families safe and informed.

Success Story

Ms. Kerri Vera, who leads the Tribe's Environmental Protection Department, offers her expertise on environmental health:

"Through my educational background in wildlife biology, and as the Director of the Tribe's Environmental Protection Department, I have an understanding of how the health of our natural world has a direct impact on our own health. The Environmental Protection Department coordinated with the Tule River Public Health Authority's Public Health Officer, to create a collaborative partnership that resulted in a threeyear data-driven research project, funded by the US EPA in 2023. Our project includes air quality data collection and community engagement to assess and mitigate the impacts of climate change and wildfire smoke within the Tule River Reservation community. In addition to this effort, the Department of Environmental Protection continues

to monitor, assess and mitigate impairments of water quality within the South Fork Tule River watershed. The health of our watershed, air and land serves as an indicator that reveal what the ultimate outcome of our own health will be. If our natural world is impaired, our health will also be impaired."



To the Future: Building Our Health Together

Where do we go from here? The goal of this report was to assess and identify the major health issues facing the Tule River community so that we can move to overcome them. The community provided their input on the problems and challenges that they want to prioritize. We also analyzed data of the health center and the best publicly available sources to try to understand what the health problems are in the community.

There are solutions available. Community members and staff have shared their stories and expertise about how we can be better. Ms. Cassandra Gonzales, from TRIHCI's Behavioral Health Department, said how she uses prayer, meditation and exercise to relieve stress and recommends the community never give up. Ms. Corina Hernandez shared how her family managed asthma. Ms. Sheyann Chavez talked about how to control diabetes and be proactive to live a long life. Ms. Adrianna Davison described her successful experience with cancer and the importance of check-ups to catch cancer early. Ms. Joyce Carrothers talked about her experience as a Tribal Elder and improving her health by changing her diet. Ms. Shannon Beasley, our Registered Dietician, talked about eating healthy by making half of your plate vegetables. Finally, Ms. Kerri Vera talked about the importance of environmental health and how her department is establishing air quality monitoring equipment.

TRIHCI's next project will be a community health improvement plan. We will continue to engage with the community to develop and create services and programs that are necessary to address the health issues in the community. Our hope is to build on the experience, expertise and knowledge of Tule River Tribal members and staff to build a healthier community **ONE WITH THIS WORLD.**

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