INDIGENOUS PEOPLES TASK FORCE



Ikidowin Youth Peer Education and Theater



CONTEXT

Goal: Indigenous Peoples Task Force (IPTF) contributes to closing the gap in teen pregnancy rates for American Indian youth in the Twin Cities metro area.

Causes: Racism and discrimination have caused long-standing disparities in education, employment, income/wealth, housing, neighborhood conditions, access to health care, transportation, social connections and support that directly affect health.

Population: Approximately 28,000 American Indians live in the Twin Cities 7-county metro region.

Issue: Although American Indian adolescents account for 1% of Minnesota's 15-19 year old population, they have the highest rate of teen births among all racial groups statewide.

APPROACH



Providing training to youth as peer educators and actors to educate the community on sexual health and teen pregnancy prevention topics. Offering free theatre performance and post-performance discussions about teen pregnancy prevention and healthy relationships for American Indians and others in Twin Cities communities.

ROOT CAUSES/ CONDITIONS FOR HEALTH

Addresses the social and economic conditions for health (also known as the social determinants of health). This often happens by changing local, regional or state policy, changing the way systems work or changing the environment.

ORGANIZATIONAL/ INSTITUTIONAL CHANGE

Addresses a health area by changing policies or systems in a school, clinic, hospital, etc. to support healthy behaviors and individual risk/protective factors.

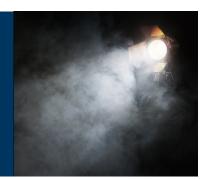
HEALTH PROMOTION/

Addresses individual or family-level risk/protective factors through health education, programming, case management, etc.

IMPACT

- 73% of youth recruited completed the program
- 42 lessons taught from Native STAND curriculum and Ogitchidaag curriculum
- 165 hours of theater and theater training completed
- 5 peer workshops on sexual health led by teens with a total of 108 (unduplicated) youth attending workshops

12 theater performances led by peer educators reached an audience of 451 people





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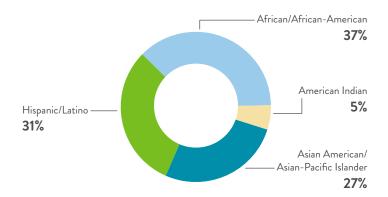
The Indigenous Peoples Task Force strengthens the wellness of our community in a way that is based in indigenous values and ways of knowing.

We were founded in 1987 to develop and implement culturally appropriate HIV education and direct services to the Native community in Minnesota.

PRIORITY HEALTH AREA SPOTLIGHT

In 2016, Minnesota reported 3,004 pregnancies among 15- to 19-year-olds. Rates of teen pregnancies among American Indians (56.1 per 1,000 pregnancies) and African Americans (39.6 per 1,000 pregnancies) were among the highest in the state. Disparate rates of unemployment, poverty, adverse childhood experiences, and access to comprehensive sexual health education directly affect sexual health and increase the likelihood of early pregnancy.

Collective Impact: 52,974 individuals were reached through the work of fourteen grantees addressing this priority health area in 2017-18. The proportions of individuals reached by race/ethnicity are shown in the figure below.



EHDI grantees addressing teen pregnancy prevention identified common measures to track and report. Collective results include:

- ★ 86% of program participants know where to access sexual health care
- ↑ Increased comfort talking about sex and birth control with partners
- Increased number of young people who reported having adults in their lives with whom to talk about sexual health issues

MDH ELIMINATING HEALTH DISPARITIES INITIATIVE

The Eliminating Health Disparities Initiative (EHDI) grant program was created to address health inequities for populations of color and American Indians across eight different priority health areas. Since 2001, the EHDI approach has been to support organizations and projects run by and for communities of color and American Indians to develop and implement strategies that are effective in reaching their communities. Every few years, the program reallocates the competitive grants to organizations and tribes across the state of Minnesota. The current grant cycle is from 2016-2019.

