A New Look for the Reporter

As you may already have noticed, we have introduced a number of changes to the CURA Reporter with this issue. The redesigned masthead featured on the front cover includes our new logo, which is intended to reflect the breadth and diversity of CURA’s efforts to bring the resources of higher education institutions in Minnesota to communities throughout the state. Our thanks to the University of Minnesota’s student design studio ByDesign, which created the logo, and to local graphic artist Jennifer Wreisner, who designed the new masthead.

Beginning with this issue, we will also switch to a two-color design for the Reporter. This change will allow us to accommodate more detailed and complex maps, diagrams, and other illustrations in future issues.

Finally, beginning with volume 32, the CURA Reporter will be numbered by quarter (Winter, Spring, Summer, and Fall issues) rather than by month to reflect our quarterly publication schedule.

Despite these changes to the look of the Reporter, our editorial staff remain committed as always to providing our readers with interesting, accurate, and up-to-date information about CURA’s community-based programs, projects, and activities.

Project Update: Arthritis in American Indian Country

A recent research project in Wisconsin has found that the rate of arthritis is extremely high among American Indians in the state. The project, which was funded by CURA through the Center for Community and Regional Research (CCRR) at the University of Minnesota’s Duluth campus, was designed to determine the prevalence of arthritis and its effects on the daily lives of the Chippewa people living on tribal lands in Wisconsin.

Researchers Barbara A. Elliott, Karen M. Johnson, Robert D. Leff, and John J. Day conducted interviews with randomly selected tribal residents to determine the prevalence of arthritis among the population. The interviews were followed by focus group sessions and medical chart reviews. More than half of those interviewed (56%) self-reported a diagnosis of arthritis, based either on a previous physician diagnosis or on an evaluation of self-reported symptoms by a certified rheumatologist. Of this group, 80% reported limitations to their activities attributable to arthritis. For only half of the group did medical charts include a diagnosis of arthritis or indicate medical tests to document the diagnosis.

The study found the prevalence of and limitations due to arthritis to be extremely high among the Chippewa. Reasons for this require further investigation, but these preliminary findings have significant implications for housing, community activities, and medical services necessary to accommodate the needs of this group.