

CASE STUDY FOCUS



AMERICAN INDIAN HEALTH COMMISSION FOR WASHINGTON STATE (AIHC)

Pulling Together for Wellness



BACKGROUND

The American Indian Health Commission (AIHC) for Washington State is a Tribally-driven non-profit organization with a mission of improving health outcomes for American Indians and Alaska Natives (AIAN) - particularly through health policy at the state level. AIHC works on behalf of the 29 federally-recognized Indian Tribes and two Urban Indian Health Organizations (UIHOs) in the state.

In collaboration with the Washington State Department of Health, AIHC has historically provided tobacco prevention and control support for Tribes, including tribal leader training, a tobacco leader health summit and healthy communities position paper, and a nationally-televised tobacco “town hall” with the United States Surgeon General and other Pacific Northwest communities.

BUILDING CAPACITY FOR CULTURALLY COMPETENT POLICY, ENVIRONMENT, AND SYSTEMS (PES) CHANGES IN TRIBAL-URBAN INDIAN COMMUNITIES

AIHC was funded by the Department of Health to build capacity for healthy communities work that is culturally competent in Tribal and Urban Indian settings. Unlike other communities experiencing health disparities, Tribes are sovereign nations. Rather than dictate expectations for them, AIHC works to create opportunities for discussion, supports Tribes to identify their own priorities, and creates resources to support PES efforts by the Tribes.

AIHC’s capacity building support for PES work has been defined by three components:

- 1. Engaging** Tribal and Urban Indian Leadership around PES to Create Healthy Tribal and Urban Indian Communities.
- 2. Developing** a menu of effective PES strategies and the Healthy Tribal and Urban Indian Communities Framework.
- 3. Creating** tools and resources to support action on PES strategies.

Engaging Tribal and Urban Indian Leadership around PES to Create Healthy Tribal and Urban Indian Communities

Established the Healthy Tribal and Urban Indian Leadership Advisory Committee

AIHC established the Healthy Tribal and Urban Indian Leadership Advisory Committee (LAC) to provide guidance and direction on an approach to create healthy Tribal and Urban Indian Communities. Among its efforts, the LAC discussed the relevance of a healthy communities framework and gathered leadership insight about culturally appropriate strategies. In-person interviews with LAC members established a vision for healthier Tribal and Urban Indian communities throughout Washington State.



The project has been a success – leaders remain engaged in the process, attending multiple meetings and continuing to assist in project guidance and direction. During development, the LAC renamed the project *Pulling Together for Wellness* (PTW) to represent the analogy of the canoe journey emphasizing Tribal and Urban Indian communities “pulling together” to build and strengthen health and wellness.

Conducted Joint Trainings

In 2012, a series of three trainings were conducted jointly by AIHC and the Department of Health to orient the LAC, AIHC delegates, and other Tribal and Urban Indian partners on the PTW project. From the start, in-person presentations were made bi-monthly to AIHC delegates to ensure that Tribal community leaders were aware of the project’s purpose and status, and could provide advice or participate.

Showcased Healthy Tribal and Urban Indian Communities at the 2012 Tribal Leaders’ Health Summit

The 2012 Tribal Leaders’ Health Summit – *Healthy Tribal and Urban Indian Communities: The Journey Forward to 2014* – was attended by approximately 150 people and showcased the healthy communities project. Tribal leaders discussed what a healthy community is relative to their Tribes and Urban Indian communities, and guidance was provided on the development of a Tribal- and Urban Indian-centric comprehensive framework to address chronic disease.



The outcome from this work was a plan for applying public health goals and practices in a meaningful Native context. The Tribally-centered process of developing the plan brought historical perspective to the discussion and shared understanding about the underlying reasons for some current health problems. The plan describes how to utilize the best data available and to understand what influences the current health status and disparities experienced by AIAN people (risk factors, social determinants of health, adverse childhood experiences (ACES), and historical inter-generational trauma).

Developing a Menu of Effective PES Strategies that Support the Healthy Tribal and Urban Indian Communities Framework

AIHC and Tribal leaders developed a framework for PES changes that included Tribally-centered goals and values, with attention to what are considered public health best practices. The framework – recently named *Healthy Communities: Pulling Together for Wellness* – is supported by the Tribes and Urban Programs in Washington State (demonstrated by the passage of an AIHC resolution dated February 13, 2014). The framework was presented in late 2013 at a variety of forums, including Tribal communities, councils, and advisory boards, as well as state, regional, and national events. The detailed framework identifies 18 competencies for leaders approaching chronic disease prevention and planning.

Creating Tools and Resources to Support Action on PES Strategies

AIHC is currently developing tools and resources to support the implementation of plans and PES strategies. Multiple opportunities exist to link different programs and funding sources with common approaches. One challenge to an integrated approach is the “topic-driven” funding provided by



different agencies. However, the PTW framework provides a guide for effective linkages of topics to common approaches from seemingly diverse sources. One example is reviewing existing home visiting efforts in Tribal and Urban Indian communities to provide recommendations for implementing chronic disease prevention activities. Home visiting is a culturally relevant model for educating AIAN families and is already being used in maternal and infant health work. Home visiting can also support additional health goals, like ensuring that home visiting curriculum includes culturally appropriate information on the use of commercial tobacco during pregnancy, health risks from exposure to smoke, and the promotion of smoke-free homes.

AIHC also sees addressing historical inter-generational and childhood trauma as a foundational need for a variety of health issues. For example, ACES have repeatedly been shown to correlate with persistent smoking during adulthood. One approach for building Tribal skills to understand and address childhood trauma is to bring a national trainer in to address linkages between historical inter-generational trauma and current scientific knowledge regarding childhood trauma and cultural resilience, in partnership with existing efforts in Maternal Infant Health (MIH) and the Department of Early Learning.

THE WAY FORWARD

AIHC has built capacity for supporting PES work in Tribal and Urban Indian communities and leaders have developed a framework that can be used by different communities for health planning. Momentum has been generated, with support from the Department of Health, for a “whole new way of thinking” about chronic disease prevention efforts in Tribal communities from a PES perspective. This framework has already been put to use in supporting AIHC work with MIH programs.

The development of the plan and framework represents a shift in planning for and implementing health programs. The previous “government program-centered approach” provided topic-driven plans, dictated values, and oppressively required Tribes to develop a variety of approaches to address topics. The AIHC “Tribal- and Urban Indian-centric” approach organizes different topical plans within Tribal values, articulated by respected leaders, with respect for history, Native epistemology, Tribal culture, and with identification of common approaches to improve efficiency.

FIGURE 1: Government program-centric approaches

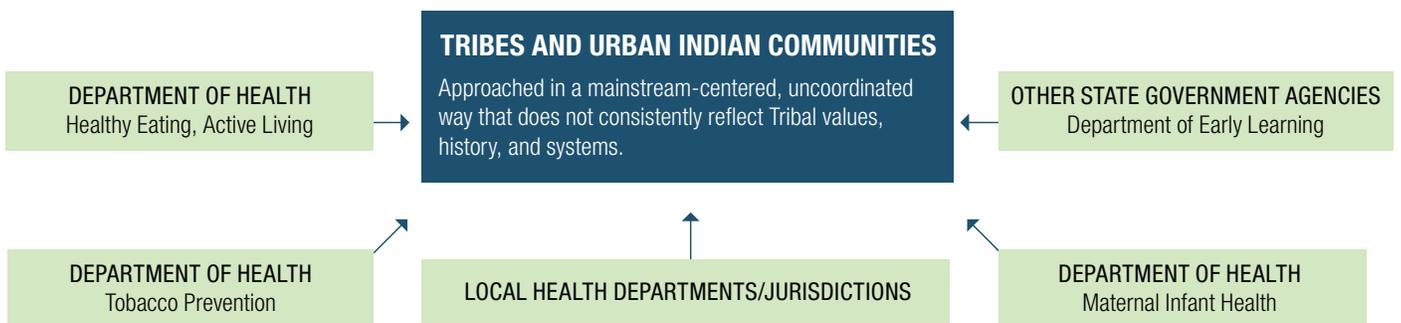
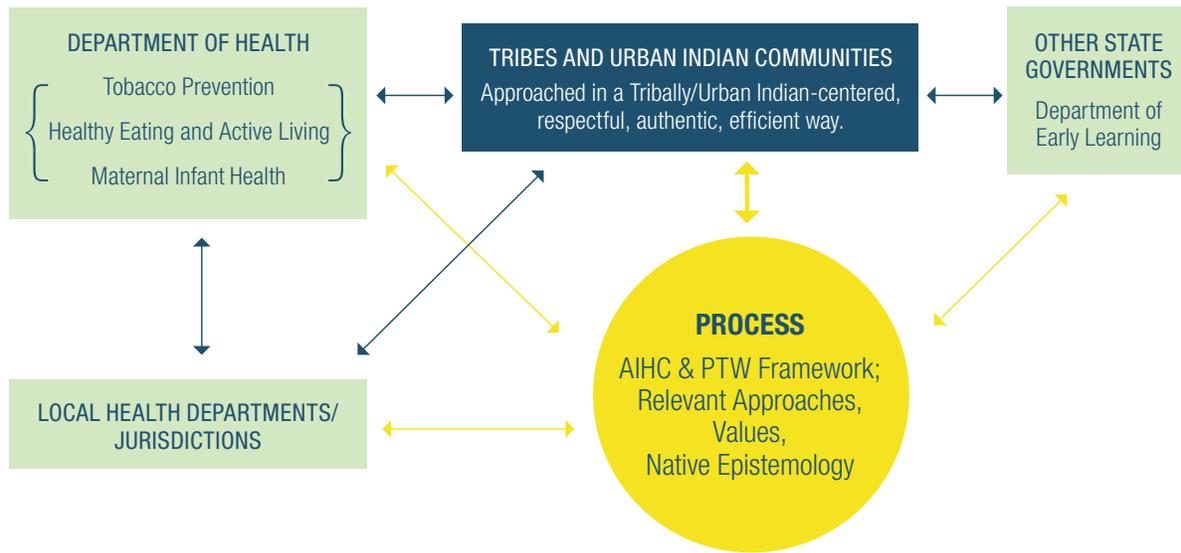




FIGURE 2: Tribal and Urban Indian culture-centric approaches



The lessons learned from the AIHC and the Department of Health partnership have provided mutual benefits, including using the framework created by AIHC to inform a revision of the Department of Health Strategic Plan. The framework provides a way for thinking about commercial tobacco that helps Tribal leaders and communities consider the impact on people and health, while allowing the Department of Health to talk about commercial tobacco in a culturally-relevant context.

We have to find innovative and Tribally-specific ways to implement changes that have broad scale impacts in our tribal communities. Many Tribes have begun this work and much can be built on the knowledge and success from their various initiatives, including policies that guide or influence behavior and change the way we deliver services.

–Marilyn Scott, former Chair, American Indian Health Commission and Vice Chair of the Upper Skagit Tribe

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