



# Healthy American Indian Alaska Native Seven Generations

Healthy Babies, Healthy Moms, Healthy Families





# Objectives:



- Introduce the American Indian Health Commission and raise awareness of AIHC's:
- Pulling Together for Wellness, a comprehensive framework that integrates western and Native epistemology;
- Tribal/Urban Indian Maternal, Infant, and Early Childhood Home Visiting work and efforts to achieve health equity;
- Maternal Infant Health proposal for a Maternal Infant Health-Community Health Representative/Aid pilot project to the WA State Healthy Pregnancy Outcomes Advisory Committee;
- The historical role and current developments of Community Health Representatives/Aides in tribal and urban Indian community settings; and
- Explore seven generation strategies to support *Healthy Babies, Healthy Moms, Healthy Families*.



# American Indian Health Commission for Washington State

**Tribal-driven, nonprofit Tribal Organization  
(Unique best practice model)**

**Created:** 1994 – by Tribal Leaders.

**Mission:** Improve the health of American Indian and Alaska Natives through tribal-state collaboration on health policies and programs that will help decrease disparities.

**Constituents:** The commission works with and on behalf of the 29 federally-recognized tribes and two urban Indian health programs in Washington State.

**Commission Membership:** Tribal councils appoint delegates by council resolution to represent their tribes on the commission.



**TRIBAL PUBLIC HEALTH**  
**AIHC Mission:** Improve the Overall Health of Indian People of WA State  
**Strategy:** Advocacy, Policy and Programs to Advance Best Practices

Leadership

Engagement

**PULLING TOGETHER FOR WELLNESS**

**Tribally and Urban Indian Driven**

- Maternal Infant Health
- Women, Infant, Children (WIC)
- Maternal, Infant, Early Childhood Home Visiting
- Immunizations
- Food Sovereignty, Healthy Eating and Active Living
- Commercial Tobacco and Vaping
- Youth Marijuana Prevention and Education
- Youth Suicide Prevention
- Elder's Chronic Care Blood Pressure Self-Mgt.
- Foundational Public Health Services
- Public Health Emergency Preparedness Response

**Culturally Appropriate and Community Specific**

**Maternal Infant Health Strategic Plan**

In Partnership with WA State Departments of Health, Early Learning and the Health Care Authority, and Department of Social and Health Services

**DATA**

**Historical and Intergenerational Trauma**  
**Equity and Health Disparities**  
**Adverse Childhood Experience**  
**Lateral Violence and Oppression**

**DATA**





# Pulling Together for Wellness

The *Pulling Together for Wellness* is a comprehensive, tribally-driven, and culturally-grounded prevention framework developed through the guidance of Washington Tribal and Urban Indian Leaders. It adapts evidence-based practice by integrating western science and Native epistemology.





# Pulling Together for Wellness



**Culture is key to our Health in all aspects of our lives.**

- It is reflected in the way we live, work, pray and play.
- The framework supports a tribally-driven approach using the medicine wheel model; a holistic view of health including social, emotional, physical, and spiritual health—heart, mind, body, and soul.



# Native Epistemology

- ❖ Seven Generations Vision.
- ❖ Embrace a life-long learning perspective with the ***Wisdom of the Elders*** as fundamental.
- ❖ Looking back through the “***Eyes of our Ancestors***” and then moving forward; a traditional practice.
- ❖ Seasonal way of life is traditional and ecological.
- ❖ Knowledge gathering and giving back.





# Principles

- ❖ Understand and know the history of the Tribe(s) and Indian communities in the region.
- ❖ Understand Tribal Sovereignty and Self-Determination.
- ❖ Terminology and concepts must resonate with Tribal and Urban Indian Communities.
- ❖ Use the medicine wheel model to depict a holistic approach including: social, emotional, physical, and spiritual health—heart, mind, body, and soul.
- ❖ Position culture as a core component – Culture is Key to our Health — interwoven in of all aspects of health to maintain balance and to ensure long-term sustainability of social change.





# Pulling Together for Wellness

**American Indian Health Commission for Washington State**  
**PULLING TOGETHER FOR WELLNESS**

*A healthy Tribal and Urban Indian community is a safe and nurturing environment, where American Indian and Alaska Native people can experience emotional, spiritual, physical, and social health.*

Healthy communities provide the resources and infrastructure needed to empower people to make healthy choices and to ensure health equity.

<i>Our Vision</i>	<i>Our Values</i>
<ul style="list-style-type: none"><li>• Our babies are born healthy; our mothers and fathers are supported.</li><li>• Our tribal youth and adults are strong in mind, body, and spirit.</li><li>• Our elders live long healthy lives (100+).</li><li>• Our families have access to healthy nutritious food and know how to hunt, catch, gather, grow, harvest and preserve it.</li><li>• Our families play and learn together in safe and nurturing environments.</li><li>• Our people are self-sufficient and have opportunities for employment and life-long learning.</li><li>• Our people have safe affordable housing.</li><li>• Our people have self-responsibility.</li><li>• Our people are happy, kind, and have good humor.</li><li>• Our communities nurture our children and respect our elders.</li><li>• Our communities embrace traditional values about respect and honor of all people of all ages.</li><li>• Our communities have food sovereignty.</li><li>• Our communities practice and hand down traditions from generation-to-generation in ceremony, language, and living.</li><li>• Our communities respect and are connected to our natural environment.</li><li>• Our environments are safe and provide all people with culturally appropriate choices to be healthy.</li><li>• Our environments are free of alcohol, commercial tobacco, and other drugs.</li><li>• Our systems, policies, and environments are trusted, empower our people, are culturally competent, and promote health equity.</li></ul>	<p>A commitment to the following values will inform and guide the development and implementation of the Pulling Together for Wellness prevention framework:</p> <ul style="list-style-type: none"><li>• We acknowledge tribal sovereignty and self-identity are the highest principles.</li><li>• We encourage a shared responsibility for the health of our communities.</li><li>• We acknowledge the importance of cultural health as our way of life.</li><li>• We serve our elders.</li><li>• We help our Tribe and/or community.</li><li>• We embrace a life course perspective; starting with babies and moms.</li><li>• We respect all people.</li><li>• We acknowledge how resources are distributed show community values as in investing in vulnerable members of society.</li><li>• We embrace the seven-generation principle with the wisdom and experience of our ancestors and elders as fundamental.</li><li>• We acknowledge the importance of ceremony and time to heal.</li><li>• We protect and strengthen culture, traditional values, and spirituality.</li><li>• We embrace the importance of rest and seasonal living.</li><li>• We acknowledge our interconnected relationship with Mother Nature and the responsibility to protect our environment.</li><li>• We understand the importance of community incentives and healthy competition.</li><li>• We promote social justice and health equity.</li><li>• We serve our community with "Sacred Hospitality."</li></ul>

 **PULLING TOGETHER FOR WELLNESS** 

March 2013

© 2015 AIHC

- Culturally Grounded Healthy Communities framework
- Vision / Values
  - Life-course approach
  - Culture as a key factor in health
  - Importance of traditional values
  - Community and Place based
  - Social Ecological Public Health Context
  - Knowledge and Expertise based on Community Wisdom



# Health Equity

## American Indian/Alaska Native Infant Mortality

- Washington has one of the lowest Infant Mortality Rates (IMR) in the nation. However, **inequities exist within populations of color**, specifically, NH American Indian and Alaska Native, NH African American, and NH Native Hawaiian and other Pacific Islander populations.\*
- **Babies born to Non Hispanic (NH) American Indian and Alaska Native (AI/AN) mothers are twice as likely to die before their first birthday than those born to the NH White mothers; and three times as likely as babies born to NH Asian mothers.** \*
- The report indicates that **disparities among these populations have had no statistically significant decrease in IMR in the last decade.**
- To achieve health equity for AI/AN mothers and infants, issues related to high rates of infant mortality including poor maternal health, poor quality of and access to medical care as well as preventive services, and low social economic status must be addressed. \*\*



\*2017 Infant Mortality Reduction Report, Washington State Department of Health.

\*\* AHIC's 2017 Update on Tribal and Urban Indian Healthy Communities: Maternal, Infant, Early Childhood Home Visiting Project



# Health Equity

## American Indian/Alaska Native Infant Mortality

### Top Causes of NH AI/AN Infant Mortality with comparison to NH White

<b>SUID</b>	26.8%	18%
<b>Congenital Malformations</b>	14.5%	24%
<b>Short Gestation and LBW</b>	13.8%	9%
<b>Unintentional Injury (Accident)</b>	4.3%	2.1% *

Top Five Leading Causes of Infant Mortality by Race and Ethnicity, WA State 2011-2015

AI/AN Underlying Causes of Infant Mortality, 2006 – 2015

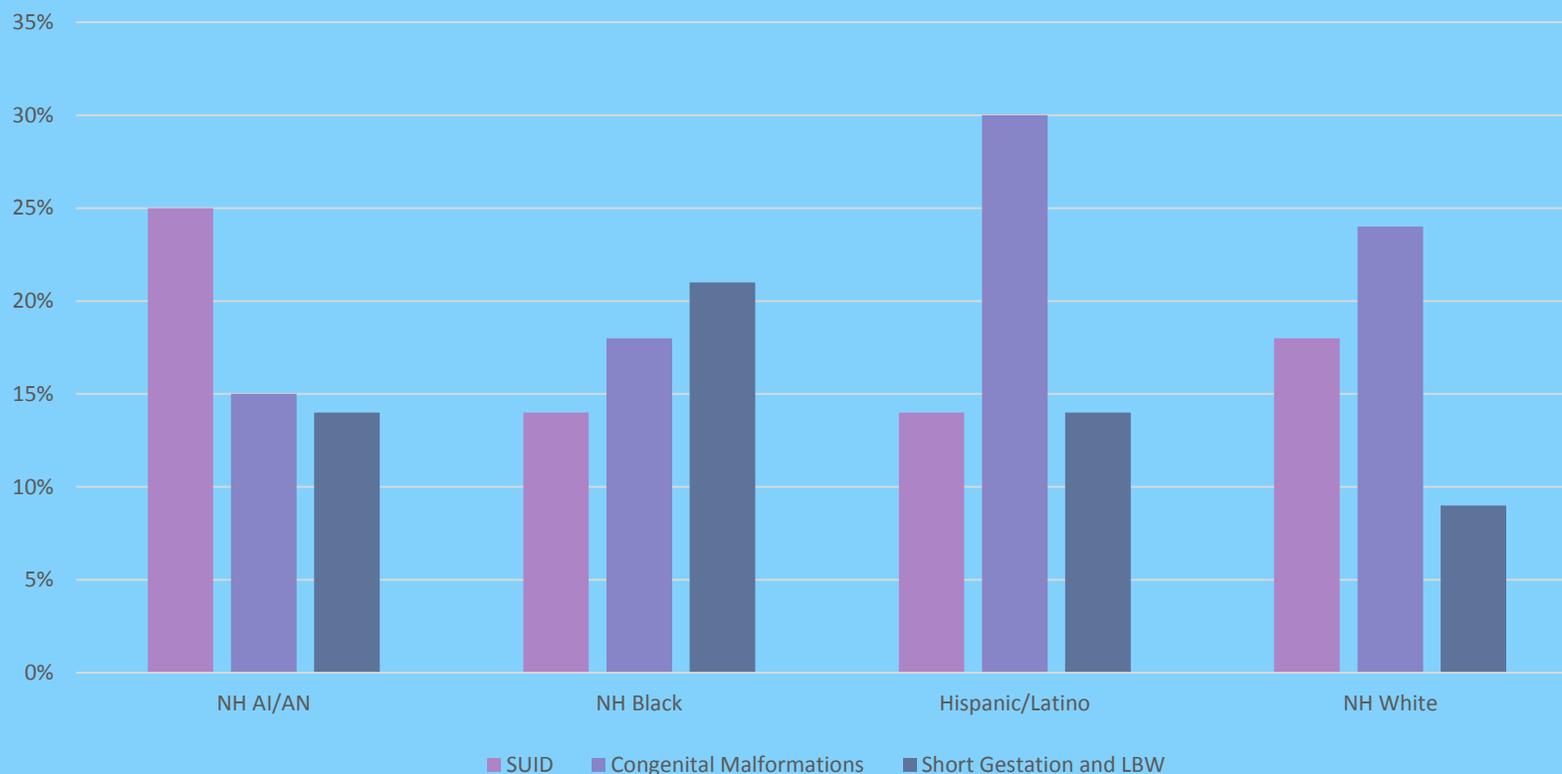
\*This rate is the overall rate for WA State, not the rate for NHW



# Health Equity

## Healthy Babies, Healthy Moms, Healthy Families

Equity: Diverse Populations; Diverse Challenges  
Comparison of Infant Mortality Issues





# Health Equity

## American Indian/Alaska Native Infant Mortality

### Strategies to Relevant Risk Factors\*:

• Smoking Prevention	• Mental Health Screening, etc.
• Parent/Parent Education	• Domestic Violence Prevention
• Breastfeeding: Hospitals	• Access to Care
• Breastfeeding: Community	• Statewide AI/AN Infant Death Review
• Breastfeeding: Workplace	• Immunizations
• Equipment	• Involve Youth Leadership
• Chronic Disease Prevention	• Nutrition and Physical Activity
• Chemical Dependency Prevention & Treatment	

\*AIHC, **Healthy Communities: A Tribal Maternal-Infant Health Strategic Plan, 2010.**



# AIHC's Maternal, Infant, Early Childhood Home Visiting Project

- Evidence exists that home visiting services help to improve:
  - Maternal and child health
  - Child abuse and neglect and injury prevention
  - Reduction of domestic violence
  - Coordination of community resources and supports
  - Child development and parenting
  - Economic self-sufficiency Project Risks



Recent reports suggest that maternal infant and early childhood home visiting services should be a core service in Indian Country, like the Head Start and the Diabetes programs.



# AIHC's Maternal, Infant, Early Childhood Home Visiting Project



## Suggested Strategies

- Acknowledge expert knowledge existing within tribal communities at multiple levels.
- Acknowledge historical and intergenerational trauma, ongoing discrimination, and Adverse Childhood Experiences (ACEs) as a root cause of the health status of American Indians and Alaska Natives.
- Use culturally appropriate strategic engagement:
  - Elders set the path—Oral Histories of Elders.
  - Youth lead the future—Youth involvement in strategic planning.
- Acknowledge that culturally-responsive, strength-based strategies that resonate with cultural values enhance resiliency.
- Use existing strength and value of CHR/CHWs serving as home visitors.
- Use culturally-responsive trauma-informed strategies in all stages of life using seven generation principles.



# Culturally Appropriate Maternal, Infant, Early Childhood Home Visiting

- *Returning to our Aunties and Grandmas  
old ways of being through home visiting,*  
by Pam James, video

# Tribal Natural Helpers Awards



- Trusted community members that help us to see hope when we struggle.
- Provide needed encouragement or words of wisdom that help us in our journey forward to good health and well-being.
- Perpetuate cultural and traditional knowledge and inspire us to fulfill the vision of healthy Native families for generations to come.
- Make a positive impact on the health of our communities by contributing to the well-being of mothers, babies, fathers, children, and families.



*2016 Honorees: Pam Nason, Colville, United Indians of All Tribes; Carmen Watson-Charles, Lower Elwha; Joyce McCloud, Nisqually; Lynn Clark, Councilwoman and trainee, Shoalwater Bay Tribe; Marie Zackuse, Councilwoman, Muckleshoot; Penny Carol Hillaire, Lummi (Lutie Hillaire accepting on behalf of Penny Carol); and Linnette Hernandez, Councilwoman, Upper Skagit.*



*2017 Honorees: Senator John McCoy presents awards to Pam Drake, Shoalwater Bay Tribe; Suzanne Carson, Tulalip Tribes; Elaine McCloud, Chehalis Tribes; and Eileen Penn, (Lummi) Quileute Tribe.*



“Maternal Infant home visiting with tribal people requires the integration of traditional cultural generational wisdom to be shared from the elder generation with the young adult families to keep the promising practice from the past to survive.”

Marilyn Scott, Vice Chair, Upper Skagit Tribe



# Maternal Infant Health Proposed Pilot Community Health Representatives/Aide (CHR/CHA)

## **Recommendation to WA State Healthy Pregnancy Advisory Committee**

A Pilot Program recommendation to positively impact AI/ AN pre-term birth, low birth weight and overall AI/AN infant mortality.

- A Tribally-driven approach that utilizes local expertise and knowledge and builds community capacity and sustainable services reaching AI/AN families through the Federal Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) at Tribal/UIHP sites.
- Designating a Maternal Infant Health-Community Health Representative/Aide (MIH-CHR/CHA) as a billable provider type.



# Community Health Representatives (CHR)

The CHR/CHA program in the Indian Health Service system was established in 1968 and has been critical in providing access to healthcare, wellness programs, and public health education in Tribal communities. CHR/A's are culturally competent health professionals who provide a variety of public health services, including increasing access to health care through transportation of people and health products, educating the community on health and wellness, and providing case management for a variety of health conditions, including assisting people in monitoring chronic diseases.

Currently there is national work underway to:

- Establish a National Community Health Aide Program (CHAP)
- Establish a CHAP Tribal Advisory Group and workgroups
  - Behavioral Health Aide
  - Community Health Aide\*
  - Dental Health Aide

\*Alaska Only



# Challenges and Other Factors



- There is limited funding for CHR/As through Indian Health Services.
- There isn't a reimbursement mechanism for CHR/As.
- A specific CHR/A to support Maternal Infant Health does not exist.
- There is a need for funding to build capacity and support for culturally appropriate Maternal Infant, and Early Childhood home visiting programs in Tribal and Urban Indian settings.
- There is a need to raising awareness of the effectiveness of culturally appropriate home visiting programs within Tribal/Urban Indian Communities.
- CHR's are an important investment in Tribal public health, however, the Fiscal Year (FY) 2019 President's Budget recommends that the CHR program be eliminated.



# Seven Generations Principle



**Seven Generations**



# Contacts:

## **Jan Ward Olmstead, MPA**

Lead, Public Health Policy and Project Consultant  
American Indian Health Commission for WA State

[Janolmstead@gmail.com](mailto:Janolmstead@gmail.com)

## **Cindy Gamble, MPH**

Tribal Public Health Consultant  
American Indian Health Commission for WA State

[csgamble5@gmail.com](mailto:csgamble5@gmail.com)