Dear TCU Institute Participants,

AIHEC is very pleased to host its 4th Annual Behavioral Health Research Institute. This Institute builds upon previous years’ Institutes and the experiences of the first cohort of the five Tribal Colleges and Universities (TCUs) who were funded to build their research capacity in behavioral health research. These first five TCUs are Cankdeska Cikana Community College, Diné College, Oglala Lakota College, Northwest Indian College, and Stone Child College. It is with great appreciation that these colleges stepped forward to initiate research projects. A second cohort of six TCUs joined this research capacity initiative last year and include: Aaniiih Nakoda College, Fort Peck Community College, Haskell Indian Nations University, Ilisaġvik College, Keweenaw Bay Community College, and Tohono O'odham Community College. They, too, have had an amazing experience as they develop and implement important research in their communities. They will be sharing some of their experiences and preliminary research findings with you.

AIHEC is greatly appreciative of the National Institute for Health (NIH) and the Indian Health Service for its NARCH VII award. This award has allowed AIHEC to fund this these annual institutes and promote the behavioral health research capacity building at the individual, department, and tribal college level. It is our goal to eventually be able to assist all of the TCUs in their efforts to build research capacity in behavioral health as there is a critical need to effectively address this area in Indian country.

I would also like to offer a special note of appreciation to President Venida Chenault and Haskell Indian Nations University for hosting this event. AIHEC recognizes that it takes extra effort to make this institute a success and we are grateful for the work that is done to share the culture of the community and the college. We hope you take home some new ideas and a commitment to develop and implement behavioral health research at your institution.

Sincerely,

Carrie Billy
President & CEO
American Indian Higher Education Consortium
The AIHEC NARCH Project is designed to build the research capacity in behavioral health at the Tribal Colleges and Universities (TCUs). An important component of this effort is the provision of an Annual Behavioral Health Research Institute to provide professional development in behavioral health research theory, practice, and technical assistance. This is the fourth annual institute and the content is driven primarily by research that has been completed or in progress in Native communities. This annual conference begins with three foundational concepts that set the tone of the institute: 1) definitions and implications of historical trauma, 2) community based participatory research processes, and 3) the need for Indigenous people to develop their own research agendas. The impact of historical trauma that American Indian communities have experienced and continue to experience is an important concept to recognize in doing research in this field. In addition, AIHEC recognized that American Indians are traditionally collective societies whose decisions are made by the group or by elders, and not on an individual basis. This dynamic is an important cultural process to consider in designing research and found that the use of Community-Based Participatory Research (CBPR), when operationalized in American Indian communities facilitated tribes as equal partners with regard to research resulting in tribal communities participating in the identification of the problem, the research design, the selection of measures, subjects, and findings. Native communities have often experienced others determining the research questions that are important to them and not necessarily the community which is a motivating factor to own this process and determine what questions are of greatest important for research.

Definition of CBPR
CBPR and related approaches, i.e., Participatory Action and Community-Engaged Research, is defined by the Kellogg Foundation as a “collaborative approach that equitably involves all partners in the research process… with the aim of combining knowledge and action for social change to improve community health and eliminate health disparities.” Not a set of methods, CBPR is an overall orientation which fundamentally changes the relationship between researchers and researched.

Purpose and Structure of the Institute
The Institute will meet for three days, June 19 to June 21, 2017. The goal of this Institute is the continued development of research capacity in behavioral health for TCUs through presentations, research experience of Native-based research projects, small group breakouts, interactive activities, reflections on readings, and reflection on one's own research experience. Participants will gain an appreciation of the impact of historical trauma and CBPR strengths and challenges, as well as learn hands-on skills necessary for participating effectively in CBPR projects. Both academic discussions and experiential exercises will reflect a commitment to co-teaching and co-learning.
Learning Objectives

By the end of the course, participants will be able to:

• Identify some of the key elements resulting in the distrust of behavioral health research in American Indian communities.

• Describe the role of historical trauma and its impact in behavioral or mental health for American Indian communities.

• Discuss the major principles of CBPR.

• Appraise effective CBPR research practices conducted in Native communities.

• Define potential issues regarding research in American Indian communities and solutions to address issues and concerns.

• Distinguish the need for the protection of human subjects and the role of Institutional Review Boards.

• Initiate and facilitate construction of a behavioral health network through individual contacts.
Deana Around Him, DrPH
   Johns Hopkins Bloomberg School of Public Health

Mirtha Beadle, MPA
   Office of Tribal Affairs and Policy

Teresa Brockie, PhD, RN
   Johns Hopkins School of Nursing

Sean Chandler, EdD
   Aaniiih Nakoda College

Venida Chenault, PhD
   Haskell Indian Nations University

Daniel Dickerson, DO, MPH
   University of California-Los Angeles

Rebecca Drummond, MA
   Tohono O’odham Community College

Deborah His Horse is Thunder, EdD
   American Indian Higher Education Consortium

Melissa Holder, PhD
   Haskell Indian Nations University

Lauren Kelly, MA, LMFT
   Ilisaġvik College

Terry Lerma, PhD
   Keweenaw Bay Ojibwa Community College

Darryl Monteau, MSE
   University of Kansas

Myra Parker, PhD, JD
   University of Washington

Adriann Ricker, MPH
   Fort Peck Community College

Loy Sprague, MA
   Fort Peck Community College

Kerri Wertz, PhD
   Aaniiih Nakoda College

Lawrence Wetsit, MBA
   Fort Peck Indian Reservation

David Wilson, PhD
   Office of Tribal Health
### Agenda

**Meeting Site:** Haskell Indian Nations University  
Navarre Hall, Regents Room

**Monday, June 19, 2017—Introduction to Enhancing Research Capacity: Historical Trauma and CBPR**

<table>
<thead>
<tr>
<th>Time</th>
<th>Title/Description</th>
<th>Presenter(s)</th>
<th>Activities and Readings</th>
</tr>
</thead>
</table>
| 9:00 am    | **Welcome**  
Blessing  
Introductions  
Overview of Institute                                                                 | Venida Chenault, PhD, President, HINU  
Deborah His Horse is Thunder, EdD, NARCH Project Director, AIHEC | Name  
Where are you from?  
What do you hope to gain from this training? |
| 9:30 am    | **Office of Tribal Health Research at NIH**  
The Office of Tribal Health Research was established in 2015 in the Division of  
Program Coordination, Planning, and Strategic Initiatives in the Office of the Director at NIH. A description of  
how this office interfaces with research in Indian country is described. | David Wilson, PhD, Director, Office of Tribal Health Research | The National Tribal Behavioral Health Agenda. (December 2016). SAMHSA  
Tribal Technical Advisory Committee. |
| 10:00 am   | **American Indian Historical Experience with Research**  
Presentation provides an overview of American Indian experience with research in the past and its  
contribution to distrust.                                                                 | Deborah His Horse is Thunder, EdD, NARCH Project Director, AIHEC | Havasupai Tribe and the lawsuit settlement aftermath. Retrieved from  
NCAI http://genetics.ncai.org/case-study/havasupai-tribe.cfm  
| 10:30 am   | **Break**                                                                                     |                                                                              |                                                                                         |
| 10:45 am   | **Historical Trauma and Behavioral Wellness Among American Indians and Alaska Natives**  
Colonization of AI/AN communities included community massacres, genocidal policies and practices,  
pandemics from the introduction of new diseases, forced relocation, forced removal of children though  
Indian boarding school policies, and prohibition of spiritual and cultural practices. Historical Trauma refers to the biological and mental health impacts of these events on AI/AN populations. This session provides a broad overview of historical trauma in the context of AI/AN communities, and compares and differentiates historical trauma from multi-generational trauma. | Myra Parker, PhD, JD, Assistant Professor, Center for the Studies of Health and Risk Behavior in the  
Department of Psychiatry and Behavioral Sciences, UW School of Medicine | Didactic Presentation and Group Discussion  
### Monday, June 19, 2017—Introduction to Enhancing Research Capacity: Historical Trauma and CBPR

<table>
<thead>
<tr>
<th>Time</th>
<th>Title/Description</th>
<th>Presenter(s)</th>
<th>Activities and Readings</th>
</tr>
</thead>
<tbody>
<tr>
<td>Noon</td>
<td>Lunch—HINU Student Ambassadors will provide a walking tour after lunch. Prepare with comfortable walking shoes.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2:45 pm</td>
<td>Break</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3:00 pm</td>
<td>CBPR in Your Community</td>
<td>Round Table Discussion</td>
<td>Write down one idea how you would use CBPR in a behavioral health project at your tribal college.</td>
</tr>
<tr>
<td>4:00 pm</td>
<td>Closing the Circle</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Tuesday, June 20, 2017—Enhancing Research Capacity: Research in Native Communities

<table>
<thead>
<tr>
<th>Time</th>
<th>Title/Description</th>
<th>Presenter(s)</th>
<th>Activities and Readings</th>
</tr>
</thead>
<tbody>
<tr>
<td>9:00 am</td>
<td>Greet the Day Additional Introductions</td>
<td>Deborah His Horse is Thunder, EdD, NARCH Project Director, AIHEC</td>
<td>One-word check in.</td>
</tr>
<tr>
<td>Time</td>
<td>Title/Description</td>
<td>Presenter(s)</td>
<td>Activities and Readings</td>
</tr>
<tr>
<td>--------</td>
<td>-----------------------------------------------------------------------------------</td>
<td>-----------------------------------------------------------------------------</td>
<td>-------------------------</td>
</tr>
<tr>
<td>10:30 am</td>
<td>Break</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10:45 am</td>
<td>Research on Student Strengths and Strength-Based Wellness at Tribal Colleges and Universities</td>
<td>Melissa Holder, PhD, Interim Vice President, NARCH Project Director, HINU Lauren Kelly, MA, LMFT NARCH Project Director, Ilisaġvik College Terry Lerma, PhD, NARCH Project Director, KBOCC Rebecca Drummond, MA, NARCH Project Director, TOCC</td>
<td></td>
</tr>
<tr>
<td>Noon</td>
<td>Lunch</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2:30 pm</td>
<td>Break</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2:45 pm</td>
<td>Community Respondents Members of the research community provide their firsthand experience with, involvement in, and concerns with regard to the CBPR process in the suicide research on their reservation community.</td>
<td>Adriann Ricker, MPH, Deputy Director, Fort Peck Tribes Health Promotion Disease Prevention Wellness Program, FPCC Larry Wetsit, MA, Fort Peck Indian Reservation</td>
<td></td>
</tr>
</tbody>
</table>
**Tuesday, June 20, 2017—Enhancing Research Capacity: Research in Native Communities**

<table>
<thead>
<tr>
<th>Time</th>
<th>Title/Description</th>
<th>Presenter(s)</th>
<th>Activities and Readings</th>
</tr>
</thead>
<tbody>
<tr>
<td>3:30 pm</td>
<td>Culturally-based Mindfulness Intervention</td>
<td>Loy Sprague, MA, FPCC</td>
<td></td>
</tr>
<tr>
<td></td>
<td>A small tribal college is examining the impact</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>of culturally-based mindfulness intervention</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>on students’ stress and persistence in college.</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>This research project is presented and discussed.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5:00 pm</td>
<td>Cultural Dinner</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Wednesday, June 21, 2017—Enhancing Research Capacity: Current Practices**

<table>
<thead>
<tr>
<th>Time</th>
<th>Title/Description</th>
<th>Presenter(s)</th>
<th>Activities and Readings</th>
</tr>
</thead>
<tbody>
<tr>
<td>9:00 am</td>
<td>Greet the Day</td>
<td>Deborah His Horse is Thunder, EdD, NARCH Project Director, AIHEC</td>
<td></td>
</tr>
<tr>
<td>10:15 am</td>
<td>Break</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10:30 am</td>
<td>The Role of Culturally-related Anxiety in fulfilling a Tribal College's Mission</td>
<td>Kerri Wertz, PhD, Co-PD, Faculty, ANC Sean Chandler, EdD, Co-PD, Faculty, ANC</td>
<td></td>
</tr>
<tr>
<td></td>
<td>A small tribal college examined students’ culturally-related anxiety regarding</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>their engagement in both Native and non-Native culture in order to assess</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>students’ existing cultural knowledge and barriers to that knowledge so that</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>the college could design interventions to fulfill its mission of revitalizing</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>indigenous lifeways.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Wednesday, June 21, 2017—Enhancing Research Capacity: Current Practices

<table>
<thead>
<tr>
<th>Time</th>
<th>Title/Description</th>
<th>Presenter(s)</th>
<th>Activities and Readings</th>
</tr>
</thead>
<tbody>
<tr>
<td>Noon</td>
<td>Lunch</td>
<td></td>
<td>Student participants have lunch together in Navarre Hall, Room 114.</td>
</tr>
<tr>
<td>3:15 pm</td>
<td>Break</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3:30 pm</td>
<td>Resources for Research Application and Implementation</td>
<td>Mirtha Beadle, MPA, Director, Office of Tribal Affairs and Policy, SAMHSA</td>
<td>The National Tribal Behavioral Health Agenda. (December 2016). SAMHSA Tribal Technical Advisory Committee.</td>
</tr>
<tr>
<td>4:15 pm</td>
<td>Wrap up and closing comments</td>
<td></td>
<td>Thank you and Safe Travels!</td>
</tr>
</tbody>
</table>


The National Tribal Behavioral Health Agenda. (2016). Substance Abuse and Mental Health Services Administration (SAMHSA); Indian Health Service (IHS). PEP16-NTBH-AGENDA


The AIHEC NARCH project is designed to establish sustainable tribally-centered partnerships between TCUs and the tribal communities they serve and the behavioral health research and intervention community. It will develop the capacity of TCUs to employ Indigenous Community Based Participatory Research (ICBPR) methods, using the AIHEC Indigenous Evaluation Framework, and identify and implement culturally-appropriate evidence based interventions. The project will assist TCUs in establishing and developing sustainable, community- and culturally-based behavioral health research and academic programs, and will disseminate information about behavioral health intervention and research relevant to TCUs and their communities.

The American Indian Higher Education Consortium’s (AIHEC) NARCH VII project will also establish a vital, effective, and sustainable behavioral health network involving Tribal Colleges and Universities (TCUs), mainstream university partners, and tribal communities through which significant behavioral health issues will be addressed using Indigenous Community-Based Participatory Research methods. The AIHEC NARCH VII project’s network of colleagues and resources include faculty, staff, and students at the nation’s 37 TCUs, the University of New Mexico’s Center for Rural and Community Behavioral Health, the University of Washington’s Indigenous Wellness Research Institute, and other behavioral health research and education resources. Through the TCU Behavioral Health Network, TCUs will (1) access curriculum, evidence-based strategies, professional development resources, and (2) gain support for implementing community-based research and intervention activities to address critical behavioral health issues that are destroying too many American Indian and Alaska Native (AI/AN) families and threatening the very future of our sovereign Tribal nations.

The goals of this project include:

• Improving the quality of behavioral health services provided to AI/ANs through use of a science-based empirical approach to intervention development and evaluation founded on tribal values and culture;

• Establish a community of practice in behavioral health at the nation’s 37 TCUs;

• Establish TCUs as an essential tribally-centered component of the national behavioral health research and education infrastructure;

• Support TCUs in engaging their communities in the identification, development, and implementation of behavioral health intervention strategies based on traditional cultural values and sensibilities;

• Support establishment of a TCU behavioral health research and education career pipeline component to recruit, support, and provide key linkages for AI/AN students to pursue careers in behavioral health;
• Empower tribal communities to develop and control the research agenda and connect that research to tribal values and needs—thereby significantly increasing the validity and usefulness of the research—which will promote trust and the understanding within AI/AN communities that health-related research can be tribally-driven, tribally-focused, and tribally-conducted serving the common good rather than supporting practices that perpetuate inequality and social injustice; and

• Promote the integration of Indigenous knowledge and Western knowledge.

All United States-based TCUs will have the opportunity to participate in the important work of developing and sharing effective intervention models that address the specific needs and cultural sensibilities of their tribes and tribal communities. The education component of the project will establish the capability of TCU faculty and students to conduct research and develop and enhance their education programs to prepare students for careers in health services and health-related research.

The AIHEC NARCH Project uses a cohort model to begin building the research capacity of the TCUs with five TCUs selected for cohort one in 2014. These five TCUs are: Cankdeska Cikana Community College (North Dakota), Diné College (Arizona and New Mexico), Northwest Indian College (Washington and Idaho), Oglala Lakota College (South Dakota), and Stone Child College (Montana). A second cohort of six TCUs was established in 2016 which includes: Aaniiih Nakoda College (Montana), Fort Peck Community College (Montana), Haskell Indian Nations University (Kansas), Ilisaġvik College (Alaska), Keweenaw Bay Community College (Michigan), and Tohono O’odham Community College (Arizona).
Introduction
Historical trauma is a reality throughout the indigenous nations in the United States impacting many of the 5.2 million (1.7 percent) American Indians living in this country. The impact of this reality has been recognized by tribal education leaders of the largest post-secondary education system established to serve Indian country—that of the 37 Tribal Colleges and Universities (TCUs). With 75 campus sites in fifteen states, TCUs offer a college education to over 80 percent of Indian Country. This student body represents more than half of federally recognized tribes (250) and it is estimated that TCUs directly impacted nearly 47,000 community members not enrolled as students through community-based education and support programs (American Indian Higher Education Consortium, 2012). The answers leading to effective solutions to remedy the generational impact of historical trauma must come from within Native communities. TCUs are the best resource to implement essential research to find these answers. The AIHEC NARCH Project is designed to build the research capacity in behavioral health at these institutions to find these answers.

Overview of Sub-Award Projects and Status
The AIHEC NARCH Project is a five-year project that was funded in 2013 specifically to build the research capacity of TCUs through financial support in the form of two-year sub-awards to two cohorts of TCUs. In addition, the AIHEC NARCH Project provides professional development at the individual, department, and institution level. The first cohort of five TCUs was selected through a competitive application process in 2014 and included Cankdeska Cikana Community College (Spirit Lake Reservation, ND); Diné College (Navajo Nation, AZ/NM); Northwest Indian College (Lummi Nation, WA); Oglala Lakota College (Pine Ridge Sioux Reservation, SD); and Stone Child College (Rocky Boy Indian Reservation, MT). This cohort completed their funded activities and continue to leverage findings to seek additional resources.

The second TCU cohort was selected in 2016 and consisted of six TCUs: Aaniiih Nakoda College (Fort Belknap Reservation, MT); Fort Peck Community College (Fort Peck Reservation, MT); Haskell Indian Nations University (National Native base, KS); Ilisaġvik College (North Slope, Barrow, AK); Keweenaw Bay Ojibwa Community College (Keweenaw Bay Ojibwaw Reservation, MN); and Tohono O’odham Community College (Tohono O’odham Nation, AZ).

The accomplishments of Cohort One and the goals of Cohort Two TCUs are provided in the inserts for each cohort.

Accomplishments
As the AIHEC NARCH Project is moving towards the end of its fourth year of a five-year project, the NARCH TCUs have made some significant accomplishments. The effort to provide support to assist the TCUs in behavioral health research is proving effect. Good research takes time especially in American Indian communities where distrust of research is extremely high. The focus has been on defining behavioral health needs in the community, training American Indian student researchers; and then designing and implementing behavioral health research—all of which are major undertakings. The
AIHEC NARCH Project is very pleased to report the following accomplishments:

◊ Five TCUs completed behavioral health community needs assessments with continued support for those who are seeking to publish the results.

◊ Twenty-four student researchers are trained in Community-Based Participatory Research.

◊ Eleven TCUs now have enhanced behavioral health research infrastructure. At least one TCU had no policies with regard to research in place and it has now established baseline policies and identified an Institutional Research Board for review of proposed research.

◊ Specific behavioral health interventions continue to be researched such as establishing positive community norms (Dine College); mindfulness to impact stress reduction (FPCC); historical trauma awareness, healing, and community impact curriculum (SCC).

Annual Behavioral Health Institute
Three highly successful week-long behavioral health institutes were conducted with two more scheduled in June, 2017 and 2018 in which:

◊ A total of 146 participants have attended the AIHEC Behavioral Health Institute (note that several participants attended more than one institute) with the breakdown by year as: 40 participants attended the first Institute in 2014; 34 participants attended the 2015 Institute; and 72 participants attended the 2016.

◊ Twenty-one (21) highly successful researchers in American Indian country presented on topics such as definitional information regarding historical trauma, CBPR, institutional research boards and their roles and responsibilities. They also presented on examples of good research such as the effective use of CBPR and provided models of intervention, e.g., historical trauma and grief intervention; American Indian Life Skills Curriculum; Historical Trauma Curriculum; cognitive reframing; and mindfulness in traditional contexts.

◊ Presenters represented the following research institutions: Stanford University; UCLA; U of WA—Indigenous Wellness Center; NAU—CAIR Project; UNM; University of Virginia; North Dakota State University; and University of Colorado-Denver.

Professional Development
Historical Trauma Curriculum Training: Training in the three-course series developed by SCC on historical trauma was offered with 22 participants representing 12 TCUs.

Individual Professional Development
◊ Professional development has been provided at the institution, department, and individual levels. One TCU requested support to assist in the professional development of its staff, faculty, students and community in the area of establishing positive community norms.

◊ Twenty-nine TCU faculty and staff members have attended professional development activities in behavioral health since the beginning of this project. This includes six faculty
members who attended the NIH sponsored BRAD training and two faculty planning to attend the 2017 BRAD training.

◊ 42 TCU faculty and staff members attended the Historical Trauma Curriculum Training which has been offered twice. It has been reported that one TCU conducted this training for its employees as a result of attending this training and a number of the participants have incorporated aspects of the material in their courses. This curriculum is also posted on the AIHEC NARCH website.

Society for Advancement of Chicanos/Hispanics and Native Americans in Science (SACNAS) - Forty-nine (49) participants were provided travel support to attend the 2015 SACNAS Conference in National Harbor, MD and 45 participants received travel scholarships to attend the 2016 SACNAS Conference in San Diego, CA.

Partnerships and Leveraged Resources

◊ TCU has worked with a community coalition of over 25 behavioral health related organizations for healthy communities.

◊ At least one TCU is seeking additional resources through its own NARCH application using the lessons learned from this project.

Conclusion

In less than four years, the AIHEC NARCH Project is having a positive impact in building the research capacity of the Tribal Colleges and Universities by assisting with the establishment of research policies, training student researchers and faculty in community-based, participatory research, and in the design and implementation of behavioral health research. It also has fostered a greater understanding of the impact of historical trauma on today’s American Indian communities. Research projects allowed Native communities to assess their behavioral health needs; piloted curriculum as a means of healing and intervention; and examination of potentially effective intervention strategies. AIHEC anticipates strong evidence of the success of these projects to be further reinforced at the end of this five-year project.

References


Cankdeska Cikana Community College

The Cankdeska Cikana Community College Behavioral Health Research Development (CCCC BHRD) Project was designed to build infrastructure to conduct behavioral health research at Spirit Lake, to better address behavioral health needs identified by the community, and pilot the research and education program that is developed. Cankdeska Cikana Community College was chartered in 1974 by the Spirit Lake Dakota Nation and is located in Benson County of North Central North Dakota.

The CCCC BHRD project has three goals:

1. Increase the capacity of Cankdeska Cikana Community College (CCCC) to teach research skills and conduct behavioral health research, through staff development and the creation of behavioral health research education opportunities for students;

2. Increase student ability to understand and conduct behavioral health research through course offerings and a summer research project; and

3. Increase knowledge regarding behavioral health needs and research support for developing interventions based on those needs.

Project Update

Students ability to understand and conduct behavioral health research was increased through modules in CCCC course offerings. Students also participated in the two research projects, including workshops teaching skills in data collection and analysis, planning a research project with a research workgroup, collecting data through individual interviews, analysis of the results using SPSS, and dissemination of results locally, regionally, and nationally. The research studies led to increased knowledge regarding behavioral health needs. The results were used in a successful grant application to SAMHSA for funding to initiate a student behavioral health support program at CCCC. Cankdeska Cikana Community College BHRD successfully conducted a comprehensive behavioral health needs assessment that involved student researchers and collaborations with several local entities.
Diné College

The project at Diné College has two specific aims: 1) coordinate a behavioral health needs assessment of students at Diné College, and 2) initiate partnerships between the faculty in public health and social and behavioral science and with other key individuals at the College to address the issues identified in the needs assessment through education, research and community-based interventions. The project team consists of faculty from the areas of public health and social/behavioral science, and staff of other college health promotion programs. Other partners include the College’s Student Success Program, a community coalition for health communities, a local non-profit, the Montana Institute and the NARCH-funded BASICS study on issues of substance use and abuse among tribal college students being conducted by the University of Washington (UW).

The UW BASICS study on issues of substance use and abuse among tribal college students surveyed 523 Diné College students in 2015, and provided Diné College with summarized data showing that the majority (over 50 percent) of our students have a sense of “connectedness” with culture and community, attend tribal activities and ceremonies and abstain from alcohol. The UW research team and Diné College Motivational Interviewers have worked on posters with alcohol and drug prevention messages to be printed and distributed to all Diné College campuses. The Positive Community Norm Survey developed by this project was first administered to 292 students during the 2014–2015 academic year. The findings revealed that “protective factors” exist within the student population and are underestimated as the strong “norm” that they are. Two examples include mentoring young people (73 percent) and caring for elderly family members (74 percent). Diné College also found strong norms among students who say, “I know how to limit my interaction with drugs and alcohol . . .” (77 percent) with engaging in regular exercise (68 percent).

After sharing these results with partners, and revising to focus on protective factors, the research team completed survey administration to 323 students in fall 2016. Clicker Technology was used to instantly collect data directly into the computer from classrooms of students. Each student had a clicker, and they were used to answer the survey questions as they were projected on power point slides in the front of the classroom. In designing the approach and questions, we worked closely with one of our partners at the San Juan County Partnership and colleagues at the Montana Institute for technical support, guidance, and advanced data analysis. While our samples were not randomly selected, we did find that they were representative of the age, sex, and campus demographics of the overall student body. Therefore we are relatively confident that the survey findings have some validity. Students reported that they make positive behavior choices but did not always correctly perceive this about their college friends. For example, in questions about practicing safe sex, 283 students (87 percent combining strongly agree and agree) practice safe sex. However, only 83 students (25 percent) reported that they perceive other college students are practicing safe sex. In a question about whether students know how to limit their interactions with drugs, alcohol, and commercial tobacco, 286 students (87 percent) reported that they know how to limit their interactions with alcohol and other
substances, while 84 students (26 percent) reported that other college students know how to limit their interactions. Some survey questions show possibly unique connections to the culture of Diné College such as helping an elderly person at least weekly (57 percent strongly agree and agree) and mentoring young people regularly (75 percent strongly agree and agree).

Project Update
The team is working with the Student Success Department and college administration to develop a campaign that announces the positive norms students share at Diné College through social media, posters, PSAs and the College website. These will be designed to be data-based and re-iterative to validate the best student behaviors in ways to better align campus norms. Currently posters of the results have been approved by the Navajo Nation Human Research Review Board and are being displayed at both Tsaile and Shiprock campuses in an effort to communicate these important findings.
Northwest Indian College

The Northwest Indian College (NWIC) Behavioral Health Research Network project used Community Based Participatory Research (CBPR) to develop, implement, analyze, and report the results of an NWIC student behavioral health survey while mentoring students to conduct research.

Project Update
Northwest Indian College student researchers modified a previous survey developed by Dr. Jeff King, Western Washington University, to assess NWIC students for strengths and resiliency (including aspirations, values, and sources of support), and also for risk factors (including adverse childhood experiences and historical trauma), related to behavioral health and retention of NWIC students with and without a disability. Student researchers were taught the community-based participatory research (CBPR) method, in which NWIC is the community. Student researchers surveyed American Indian, Alaska Native, and other Indigenous (AI/AN) students at NWIC regarding resiliency and risk factors, including students who have discontinued their college education. Based on the survey results, they have submitted a faculty authored article about the project’s qualitative results to the American Indian College Fund Tribal College and University Research Journal and are currently working on a student-authored peer-reviewed journal article for future submission.
The purpose of the Behavioral Health Research project conducted by Oglala Lakota College (OLC) is threefold:

1. Learn about the behavioral/mental health issues and needs of OLC students;
2. Increase the knowledge and capacity of OLC students and faculty regarding behavioral health issues and research; and
3. Develop behavioral health curricula based on historical trauma.

Whereas the first project year was devoted to the preparation of the study, the actual data collection took place in the first half of the second year. Two questionnaires were administered September–October 2015 to survey perceptions of OLC student behavioral health needs: The Student Survey received 109 responses and the Faculty/Counselor Survey was completed by 58 individuals. In November 2015, two focus groups were held to obtain more in-depth information about how to meet unmet needs. Findings included identification of the main behavioral/mental health issues of OLC students which were stress-related problems (by 80 percent of respondents), followed by substance-related problems and depression (both 56 percent). Institutions of higher education are under increased pressure to improve retention, persistence, and completion rates. Students were therefore asked whether their academic performance has been affected by their own or someone else’s emotional/behavioral problems. Half of the students reported that their performance has been impacted by their own problems.

Currently, OLC offers no mental/behavioral health services except for an occasional talking circle. Survey participants were therefore asked if they think that OLC should offer more services. A large majority, 85 percent of students and 67 percent of faculty/counselors, expressed that they would like OLC to offer more

**Project Update**

The research team continues analyzing the data. The findings will be used to develop educational materials for college staff, students, and community members and to make recommendations to better meet students’ mental and behavioral health needs.
Stone Child College

Stone Child College (SCC) Behavioral Health Research Network Project is a tribal community-based research initiative administered by SCC. The intent of this comprehensive effort was to identify, develop, pilot, and evaluate intervention strategies and models that address significant Chippewa Cree behavioral health issues, especially related to substance abuse and mental health, on Rocky Boy’s Indian Reservation in Montana. The project goal was to “improve ownership that Chippewa Cree peoples’ experience with regard to local research.” To reach this target, SCC addressed three objectives:

1. Conducted a needs assessment on Rocky Boy’s Indian Reservation which revealed recommendations to strengthen tribal cultural programming, specifically in Native language, and to enhance communication about the educational and support services provided by the College;

2. Initiated a student-driven community-based research (CBPR) program focused on substance abuse and mental health treatment and prevention with an emphasis on historical trauma through its Rural Health Associate Degree Program; and

3. Established a base level behavioral health research infrastructure through the development of an SCC Office of Institutional Research.

Project Update

Stone Child College was successful in accomplishing all of its objectives through its sub-award. In the expansion and reinforcement of its Rural Health associate’s program, it developed a three-course series on historical trauma which provided fundamental information about historical trauma in course one which then was reinforced in course two with a focus on healing and including research training of students in CBPR. The third course built upon the two previous courses and implemented a CBPR research initiative with its students on the impact of historical trauma using a phenomenological approach. These courses were all developed and piloted in this project. Stone Child College also shared this curriculum with other tribal colleges and universities through the overall AIHEC NARCH initiative with a total of 42 participants attending two historical trauma curriculum trainings. In addition, the seven student researchers were very active in sharing the results of their work in the local and regional communities, as well as, with other TCUs through the annual AIHEC Behavioral Health Institute.
Aaniiih Nakoda College

The goal of the Aaniiih Nakoda College (ANC) project is to design, develop and implement a community based, culturally appropriate research project that will address critical behavioral health issues facing the people of the Fort Belknap Indian Reservation. Project personnel will employ a community based participatory research (CBPR) model to identify a research question, develop appropriate methodologies, implement research activities, and disseminate findings in a manner that reflects the self-identified needs and values of the Fort Belknap community. The accomplishment of this goal will provide three outcomes:

1. Provide the people of Fort Belknap with meaningful, context-rich research data related to a critical behavioral health issue that will provide a foundation for future interventions;
2. Build behavioral health research capacity at ANC; and
3. Provide four ANC students with meaningful undergraduate research experiences in behavioral health.

Project Update
Aaniiih Nakoda College determined that providing a culturally relevant education is a high priority for American Indian education. Based on this, its study seeks to examine if student cultural engagement and knowledge affects their anxiety and persistence in college. It initiated its research project by conducting a community focus group with many of these participants now engaged as a community consultant team who assisted in the determination of the final research questions and design of its study. Aaniiih Nakoda College narrowed its focus to study enculturation and anxiety related to enculturation and transculturation. The project research question is: Does the degree of cultural knowledge/participation affect anxiety levels regarding interacting with both Native and Non-Native communities? Sixty students were randomly selected to participate in the study of which 20 students were randomly selected for individual interviews. Three data collection tools were used: 1) American Indian Enculturation Scale; 2) Cultural Involvement and Detachment Anxiety Questionnaire, and 3) Qualitative Interview. Aaniiih Nakoda College has administered the two data instruments and it has completed the qualitative interviews. It is now analyzing data using Dedoose. This research has been approved by the ANC Institutional Review Board and all student researchers have completed CITI training.
The research objective aims to introduce a mindfulness-based intervention to American Indian and Alaska Native (AI/AN) college students and measure efficacy in reducing stress-related symptoms related to identified risk factors, as well as, build resiliency factors to better manage or prevent future symptoms.

The purpose of the proposed research is threefold:

1. Adapt a mindfulness-based stress reduction program to target unique risks and needs of AI/AN college students at Fort Peck Community College (FPCC);

2. Assess feasibility and initial efficacy for improving coping/resiliency, reducing perceived stress and associated physical, psychological, and emotional conditions in college students; and

3. Provide data on feasibility, acceptability, initial efficacy, and pilot data for a larger-scale treatment study.

The proposed project consists of three phases:

**Phase I:** Student researchers will have an opportunity to submit an initial project design to the Fort Peck Tribes Institutional Review Board (IRB). Student researchers will develop a focus group guide and conduct two focus groups, one on each campus, to assess perceptions, opinions, anticipated barriers, and needs of students attending at least one course at FPCC. The guide will also identify and explore key elements of mindfulness-based interventions.

**Phase II:** Professional consultation and training with certified and experienced professionals around the program components will be included in the mindfulness-based intervention including yoga and mindfulness practices.

**Phase III:** Early stage pilot waitlist control trial investigating post-course, three and six month outcomes. Participants will be individuals attending at least one course at FPCC and will participate in an eight week mindfulness-based stress reduction program.

**Project Update**

The title of FPCC's behavioral health research project is *Cande owastege* (to have one's heart in the right place). This study is designed to address the harmful impact of long-term stress resulting in long-term exposure to glucocorticoid cortisol which can lead to harmful negative health outcomes, e.g., diabetes mellitus, coronary artery disease, stroke, hypertension, heart attack, and eventually death. The research question defined by this project is: Will a mindfulness based culturally compatible community intervention reduce toxic allostatic load (toxic stress/elevated cortisol) on the Fort Peck Indian reservation? Three focus groups were completed in May 2016 for community input. A five-week intervention following a four directions cultural model was designed with learning outcomes,
teaching elements, support practices, and journaling activities defined for each week. Recruitment has relied on word-of-mouth with over 30 individuals expressing interest in participating. The first cohort of 11 participants completed this mindfulness intervention April 7, 2017. A second cohort scheduled to begin mid-April 2017 hopes to complete three cohorts by June 2017. Seven assessment tools are used in this research: 1) Brief Resiliency Scale, 2) Adverse Childhood Experiences Scale, 3) Historical Loss Scale, 4) Applied Mindfulness Process Scale, 5) Perceived Stress Scale, 6) Ryff’s Psychological Wellbeing Scale, and 7) Mindfulness-Based Self-Efficacy Scale, which is in addition to the cortisol testing. Initial data analysis has begun with the first cohort. This research has been approved by the FPCC Institutional Review Board and all student researchers have completed CITI training. Students presented a poster at the AIHEC Student Conference and won third place in the poster competition.
Haskell Indian Nations University

Haskell Indian Nations University (HINU) will use AIHEC-NARCH funding to create a behavioral health campus initiative, Generation Indigenous Liberation. This initiative will be based upon the principles of liberation psychology, in a participatory manner for purposes of undertaking transformative action and advancing social justice; particularly for interpersonal violence issues on campus. Twenty-first century Native America faces significant behavioral health challenges including socio-economic disparities, interpersonal violence, substance abuse, psycho-spiritual distress, and physical health issues. Haskell Indian Nations University students come from communities significantly impacted by these behavioral health challenges, so a significant component of this project will be on the development of a behavioral health needs assessment to document and address baseline data that will define the content to be focused on in the development and implementation of research infrastructure in HINU’s Behavioral Health Initiative.

Project Update
Haskell Indian Nations University established a community advisory board to work with this research project. This behavioral health project examines the behavioral health needs of HINU students with a focus on implications of historical trauma related to interpersonal violence. This research is being conducted through a behavioral health needs assessment survey and through focus groups. Student researchers have approached the student government to inform them about the survey and gain their support. Haskell Indian Nations University has completed 203 surveys and is in the process of convening focus groups. It is anticipated two to three focus groups will be completed in April 2017 with the transcribing of focus group sessions and data analysis in process. The project director and coordinator provided training for student researchers conducting the focus group sessions. This research has been approved by the HINU Institutional Review Board and all student researchers have completed CITI training.
Ilisaġvik College

Ilisaġvik College (IC) requested a modification of its behavioral health research project after the initial startup of this project. Research regarding the behavioral health of North Slope residents remains the focus. However, after careful consideration, IC proposed the following changes to create more student engagement: 1) provision of increasing the focus on career pathways for behavioral health professions among Alaska Natives, 2) provision of information regarding behavioral health issues via workshops to the North Slope communities, 3) adaption of the available curriculum for student researchers to become junior public health educators, and 4) assessment of access to behavioral health services.

Project Update

Ilisaġvik College NARCH Project had a change in project leadership within a month of receiving the sub award. The change in leadership and the awareness of what is entailed with the implementation of a behavioral health research project created an excellent learning experience for the institution. This resulted in the College developing procedures for conducting behavioral health research, identification of an Institutional Review Board (IC decided to work with the IRB from Northwest Indian College which serves as the IRB for AIHEC), discussion about the role and responsibilities of an IRB and the potential for developing a board at IC in the future, and researching human subjects’ protection training programs. This process also resulted in the request to modify its original research proposal which was approved by the NWIC IRB in February 2017. The learning curve for Ilisaġvik College has been intense and noteworthy with regard to behavioral health research. It has worked closely with the AIHEC/NWIC IRB, especially with the goal revision. The project director and student researchers are now in the process of going to the local communities to begin data collection through focus groups. This research has been approved by the NWIC/AIHEC IRB and all student researchers have completed Protecting Human Subjects training offered online by NIH.
Keweenaw Bay Ojibwa Community College

The goal of Keweenaw Bay Ojibwa Community College’s (KBOCC) project is two-fold: 1) build capacity in KBOCC staff and students to conduct research on behavioral health, and 2) support the introduction of culturally appropriate and informed adaptations of evidence-based, best and promising practices to meet identified behavioral health needs. Needs assessment is an important research tool and initial step in designing interventions. Keweenaw Bay Ojibwa Community College proposes to conduct a college-specific needs assessment following a community-wide assessment conducted in academic year 2016–2017.

Project Update

The KBOCC NARCH Project has been reviewing behavioral health interventions implemented by other TCUs for possible implementation following conclusion of the assessment. The assessment is intended to identify priorities for meeting its students’ behavioral health needs by surveying students, former students, and graduates. It has completed surveys with current student body and graduates. Keweenaw Bay Ojibwa Community College has worked with the tribal council to keep them informed and obtained its approval to conduct this research. Upon the analysis of data, KBOCC plans to use the findings to identify curricula and training programs that will continue to build capacity to meet behavioral health needs, identify and adapt interventions and outcome measures, and to use the data to plan and develop behavioral health programs and services to facilitate student success. This research has been approved by the KBOCC Institutional Review Board.
Tohono O’odham Community College

The Tohono O’odham Community College (TOCC) AIHEC NARCH project will conduct community-based, participatory research on behavioral health issues that may affect TOCC students’ ability to succeed in college. Retention and graduation rates are low, and there is primarily anecdotal evidence that behavioral health problems are a major factor. The project will provide the means to identify the behavioral health issues that affect student retention through a class that will provide students with in class and fieldwork education on conducting community-based, participatory research on behavioral health issues affecting TOCC students. The research results will provide data to address the issues so that TOCC administration can develop appropriate supports for students to improve health and retention.

Project Update

The Tohono O’odham Nation still feels the impact of the Havasupai violation by ASU (2006). Tohono O’odham Community College remains very sensitive to the concern of the Nation and the College has moved slowly, while collaborating with colleagues and students to understand the complexities and gain a mutual understanding of implications of building capacity to conduct behavioral health research. Tohono O’odham Community College is preparing to present its proposal to tribal leadership as the next step in their behavioral health research capacity building process. The emphasis of the project thus far has been on the student researchers’ research training. The project has also developed research questions and interviewed key personnel to inform survey design. Once the Tohono O’odham Tribal Council approves this research project, TOCC will use the NWIC/AIHEC Institutional Review Board to approve its research proposal and implementation.
Deana Around Him (Cherokee Nation), DrPH, is a Collaborative Research Center for American Indian Health (CRCAIH) Fellow with the National Congress of American Indians (NCAI) Policy Research Center (PRC). In this role, Dr. Around Him works with both CRCAIH, based in Sioux Falls, SD, and the NCAI PRC to develop and integrate training modules on research for AI/AN communities and health researchers, facilitate collaborative efforts between CRCAIH and NCAI that utilize CRCAIH cores and advance research in the Northern Plains region, and disseminate CRCAIH products and resources to a national audience. She also assists with a research project that aims to develop, implement, and evaluate a culturally informed intervention to promote infant safe sleep environments in tribal communities.

Dr. Around Him received a Bachelor of Arts degree in Community Health at Brown University in 2004. From 2004 to 2006 she taught high school science on the Pine Ridge Indian Reservation as a Teach for America South Dakota charter corps member. In 2006, she began a two-year Master of Science program in the Department of Society, Human Development & Health at the Harvard School of Public Health. While at Harvard, she concentrated in Maternal and Child Health and focused her Masters practicum project on the social determinants of infant mortality among American Indians in the Northern Plains. Her dissertation research titled, Depressive and Anxiety Symptoms in Pregnancy: Associations with Maternal Characteristics and Infant Birth Weight among American Indians in the Northern Plains was completed as part of the Doctor of Public Health program in the Department of Population, Family & Reproductive Health at the Johns Hopkins Bloomberg School of Public Health.

She also trained as a postdoctoral fellow in the Research and Practice Development Section of the Nursing Department at the National Institutes of Health (NIH) Clinical Center. At NIH she worked closely with Dr. Teresa Brockie on a study titled, Assessing the Effect of a Trauma-Focused Intervention on Reservation-Based Native American Parent-Child Dyads. In addition to her post-doctoral training at NIH, she also participated in the Institutional Review Board Internship Program with the NIH Bioethics Department.

Dr. Around Him is interested the development and adaptation of interventions to meet the cultural and contextual needs of American Indian communities, particularly those that address outcomes related to pregnancy and maternal wellbeing. In addition to American Indian maternal and child health, she is interested in the translation of research to practice, culturally responsive assessment and evaluation, and building public health practice and research capacity in Indian Country.
Mirtha Boadle

Mirtha Beadle, MPA, is director, Office of Tribal Affairs and Policy (OTAP). OTAP serves as SAMHSA’s primary point of contact for tribal nations, tribal organizations, federal departments and agencies, and other governments and agencies on behavioral health issues facing American Indians and Alaska Natives. In this capacity, Ms. Beadle is responsible for advancing cross-agency actions that support tribal self-governance; working to ensure agency policies, programs, and activities address behavioral health needs of tribal communities; leading and supporting tribal consultation, outreach, education, coordination, and engagement efforts with an emphasis on Native youth; and, implementing specific provisions of the Tribal Law and Order Act. Ms. Beadle also served as deputy director, Center for Substance Abuse Prevention and Deputy Administrator for Operations at SAMHSA.

Prior to joining SAMHSA, Ms. Beadle served as deputy director of the Office of Minority Health (OMH) within the Office of the Secretary, HHS. In this capacity she was the principal advisor to the deputy assistant secretary for minority health in planning, developing, and implementing policies, programs, and activities to achieve the secretary’s goals for improving the health of American Indians and Alaska Natives, African Americans, Hispanics/Latinos, Asians, Native Hawaiians, and Pacific Islanders and eliminating health disparities. She was also responsible for strategic planning, evaluation efforts, Congressional and White House Initiative reports, and overseeing the OMH budget, operations, and programs. Ms. Beadle led the development of the National Partnership for Action, a community-inspired effort that led to the development of the National Stakeholder Strategy for Achieving Health Equity.

Ms. Beadle has extensive federal grants experience, overseeing development, implementation, and management of grant programs and has served in other notable positions during her federal and state public health career, including the areas of bone marrow donation, emergency medical services, and trauma care systems. Her focus on children and racial and ethnic minorities was shaped by her first civil service position as a child care worker for a state psychiatric hospital for children and adolescents.

Ms. Beadle emigrated from Cuba at a young age and holds a Master of Public Administration degree from Western Michigan University and a Bachelor of Science degree in management systems from the College of Technology at Andrews University.
Teresa Brockie

Teresa Brockie, PhD, RN, is a research associate focusing on achieving health equity through community-based prevention and intervention of suicide, trauma, and adverse childhood experiences among vulnerable populations. A member of the White Clay (A’aninin) Nation from Fort Belknap, Montana, Dr. Brockie earned her doctorate degree at the Johns Hopkins School of Nursing and completed a postdoctoral fellowship with the National Institutes of Health Clinical Center. In 2011, she led an all Native American team to collect data to study suicidal behavior among reservation-based Native American youth.

Dr. Brockie received the RADM Faye G. Abdellah Publication Award for Nursing Research by the United States Public Health Service Professional Advisory Committee for Nursing.

PUBLICATION:

Sean Chandler, EdD, an enrolled member of the Aaniinen (Gros Ventre Nation), is the Director of American Indian Studies at Aaniiih Nakoda College (ANC) located on the Fort Belknap Indian Reservation. He also teaches the Aaniiih (Gros Ventre) Language to grade school aged children at the White Clay Language School at ANC.

Dr. Chandler acquired a Bachelor of Arts in art in 1997, as well as a Master of Arts in Native American studies in 2003 from Montana State University-Bozeman. He attained a Doctorate of Education in educational leadership from the University of Montana in May of 2014.

He serves as Co-PI of the ANC NARCH Behavioral Health project entitled, “The Role of Culturally-Related Anxiety in Fulfilling a Tribal College’s Mission.”
Venida Chenault

Venida Chenault, PhD, was selected as the seventh president of Haskell Indian Nations University in January 2014. Prior to this selection, she served as a faculty member in social welfare and American Indian studies and as the Vice-President for Academics at Haskell. She is a member of the Prairie Band Potawatomi and Kickapoo tribes of Kansas.

The leadership of Dr. Chenault is marked by a strong commitment to collaborative and inclusive models of decision-making focused on student success, continuous improvement and transformative change. Her commitment to addressing the needs of Indigenous communities through higher education has been reflected in new initiatives and strategies that prioritize the core mission of Haskell.

One of the themes of her administration has focused on raising awareness of violence against Indigenous women in ways that promote culturally-based empowerment approaches. This topic also been a focus of her academic research and published book on the topic. Dr. Chenault worked with campus leadership to design and implement a Title IX program that protects the rights of both the accused and accuser, to provide educational sessions on violence for students, staff and faculty; as well advancing the University commitment to equity and diversity of all students.

Dr. Chenault has worked diligently to advance programs of distinction, academic excellence and to raise campus-wide expectations for accountability and results. Her leadership has recognized the historic role of Haskell in meeting the needs of federally recognized tribes and a hallmark of her leadership has been to ensure graduates of the University provide the professional capacity needed to meet the needs of Indian Country. Haskell serves enrolled members of 567 federally recognized tribes from throughout the United States.

During her tenure at Haskell, Dr. Chenault has provided leadership at multiple levels and is a strong proponent of mentoring emerging leaders, scholars and researchers. She has generated significant revenue for capacity building as a faculty member, as the vice-president for academics and president. She has received several honors and awards, including being selected as an American Indian College Fund Mellon Fellow, receiving the American Indian Leadership Award in 2005 from the University of Kansas Indigenous Studies Program and being selected as the Recipient of the Haskell Outstanding Alumni of the Year Award for her contributions to Indian Education in the Spring of 2009.

In April 2016, Dr. Chenault was inducted into the University of Kansas Women’s Hall of Fame—Emily Taylor Center for Women and Gender Equity. She was also selected as the recipient of the Raindrop Award for Higher Education by the Dialogue Institute of the Southwest in April 2016.
Daniel Dickerson

Daniel Dickerson (Inupiaq), DO, MPH, is an addiction psychiatrist and assistant research psychiatrist at the University of California, Los Angeles, Integrated Substance Abuse Programs. He also provides psychiatric services at American Indian Counseling Center through the Los Angeles County Department of Mental Health. His research focuses on the development of substance use treatment and prevention programs for Native Americans.

Mr. Dickerson is a co-principal investigator on a National Institutes of Health-funded study, “Motivational Interviewing and Culture for Urban Native American Youth (MICUNAY),” an alcohol and drug use prevention intervention program for urban American Indians/Alaska Natives (AI/AN) youth that integrates evidence-based treatment with traditional practices. This program addresses an important gap in services for this underserved population.

Mr. Dickerson was also the principal investigator on his second National Institutes of Health-funded study analyzing the potential benefits of “Drum-Assisted Recovery Therapy for Native Americans (DARTNA),” a substance abuse research program analyzing the benefits of drumming for Native Americans with substance use disorders.
Rebecca Drummond, MA, has over 20 years’ experience in community based research, evaluation, and education. Ms. Drummond’s professional interest include organizational development and leadership, and strategic partnerships for systems and policy change in the areas of health, environment, and education. During her 12 years’ experience with campus community partnerships, she worked in a leadership capacity on over 20 projects that included collaboration with local, state, and federal entities. Ms. Drummond’s academic experience includes being Project Director/PI of numerous consulting, technical assistance, research, and evaluation contracts and grants. This experience gave her the knowledge and expertise to engage in local and statewide advocacy efforts, and work with dozens of coalitions and advisory boards. She currently directs the AIHEC NARCH project at the Tohono O’odham Community College: “I-We:mta T-Apedag: Working Together for Our Wellbeing.”

Ms. Drummond is also working with TOCC to create a certificate and associates degree health program and will pilot Introduction to Public Health & Health Careers in the fall of 2017.

In addition to “saving the planet,” she is passionate about travel, the outdoors, and her horse Angel.
Deborah His Horse is Thunder

Deborah His Horse is Thunder (Assiniboine), EdD, works closely with the American Indian Higher Education Consortium (AIHEC) and the tribal colleges and universities (TCUs) throughout the country. She is currently project director of AIHEC’s NARCH Project which is designed to enhance the behavioral health research capacity and curriculum at TCUs and she assists with the coordination of the TCU Summer Meeting at SKC.

Dr. His Horse is Thunder has previously served as the Chief Academic Officer at three tribal colleges: Haskell Indian Nations University, Fort Peck Community College, and Aaniiih Nakoda College. She holds a doctorate in education, a master’s degree in higher education, and a bachelor’s degree in sociology.

Dr. His Horse is Thunder has previous experience working with her own tribal community, held a tenure track faculty position in Counselor Education at the University of Montana, and provided training and technical assistance to the majority of tribal colleges. She was appointed by President Bush to serve on the President’s Advisory Council on Tribal Colleges and Universities and she was appointed by Governor Racicot to serve on the Montana University System’s Board of Regents.

Dr. His Horse is Thunder is a member of the Assiniboine (Nakoda) Nation and lives on the Standing Rock Indian Reservation in North Dakota with her husband, Ron.
Melissa Holder (Winnebago), PhD, is the acting dean of students at Haskell Indian Nations University and a faculty member in the Indigenous and American Indian studies program. As a fulltime professor at Haskell, Dr. Holder oversees the social work program and works with students in remaining at Haskell or transferring to other baccalaureate social work programs. She also works with students in expanding their interest areas by engaging in service learning and conducting research at an introductory level as the Project Director for the AIHEC NARCH grant and Co-PI for the KU/Haskell Bridge grant.

In 2015, Dr. Holder earned her doctorate degree in social welfare from the University of Kansas. Her qualitative dissertation is titled, “Exploring the Potential Relationship Between Historical Trauma and Intimate Partner Violence Among Indigenous Women”. In her research, Dr. Holder interviewed Indigenous advocates who work(ed) with Indigenous women who experienced intimate partner violence. She is an alumnus from both Haskell Indian Nations University and the University of Kansas.
Lauren Kelly

Lauren Kelly, MA, LMFT, is the director of Northwest Area Health Education Center (NW AHEC) in Alaska which includes the North Slope, Kotzebue and Nome. Ms. Kelly has lived and worked on the North Slope since early 2013 and since mid-2015 has been at Iļisaġvik College. Born and raised in Southern California, she has lived and worked in Arizona, Illinois, Georgia and now calls Alaska home.

Ms. Kelly has spent more than 20 years as a psychotherapist having worked in various settings, with varied client populations ranging from the worried-well to eating disordered clients in inpatient settings, to political refugees and torture and trauma survivors newly emigrated from countries such as Afghanistan, Iraq, Pakistan, Burma/Myanmar, Nepal, Bhutan, Haiti, Eritrea and Ethiopia. Prior to taking the position at Iļisaġvik, she worked almost exclusively as a clinician/psychotherapist. Since 2013 Ms. Kelly has worked with Alaskan Natives, primarily the Iñupiat People of the North Slope Borough, as both a marriage and family therapist and now as the director of NW AHEC.

Ms. Kelly is the project director for Iļisaġvik’s AIHEC NARCH Behavioral Health Grant researching the behavioral health needs and access to services of North Slope residents. The North Slope Borough is composed of one hub village, Utqiagvik (formerly Barrow), with a population just under 5,000 residents and seven small villages ranging from 248 residents to 711 residents. The outlying villages are more than 85 per cent Iñupiat, while Utqiagvik is 63 per cent Iñupiat. Undertaking travel to any of the villages on the North Slope requires small aircraft travel, the investment of at least two, if not three, days, a good pair of snow pants and a parka.

Ms. Kelly holds a master of arts degree in Clinical Psychology, a bachelor of arts degree in Pastoral Ministries and is a licensed marriage and family therapist in both Georgia and Alaska.
Darryl Monteau

Darryl Monteau, MSE, is a member of the Kiowa Tribe of Oklahoma originally from Carnegie, Oklahoma and currently resides in Lawrence, Kansas. Ms. Monteau has worked in education for over 15 years in many areas including administration, student affairs, and research at a tribal college and mainstream university. She currently works as the Education Coordinator for the Center of Remote Sensing of Ice Sheets (CReSIS) at the University of Kansas (KU) where she oversees K-12 educational outreach and undergraduate and graduate programming.

Her research interests include tribal colleges and universities and Native American college student persistence. She has experience working with community based participatory research and has coordinated a Research Experience for Undergraduates (REU) and Research Experience for Teachers (RET, preservice) program for the past several years.

Ms. Monteau received her bachelor’s degree in American Indian studies from Haskell Indian Nations University in 2007 and was chosen as Haskell’s American Indian College Fund Student of the Year. She obtained her masters degree in higher education administration at KU in 2009 and was a recipient of the First Year Graduate Student Fellowship and also received KU’s University Women’s Club scholarship. She will be completing her doctoral degree (EdD) from KU in higher education administration this fall and aspires to develop a mentoring program for Native youth focusing on college preparation.

Other interests include health and wellness and working with youth/community in becoming more physically active. She was involved in the development of the Mini-Mocs Track Club in Lawrence which provides local youth the opportunity to be active and learn about track and field fundamentals at no cost.
Myra Parker

Myra Parker (Mandan-Hidatsa-Cree), PhD, JD, is an assistant professor in the Center for the Studies of Health and Risk Behavior in the Department of Psychiatry and Behavioral Sciences, in the University of Washington School of Medicine. She also works at the Indigenous Wellness Research Institute at the University of Washington School of Social Work.

Dr. Parker received her bachelor degree in human biology from Stanford University. She received a Juris Doctor degree from the James E. Rogers College of Law at the University of Arizona in 2001, with an emphasis in Federal Indian Law. She received her master of public health degree from the Mel and Enid Zuckerman School of Public Health at the University of Arizona in 2002. Dr. Parker graduated with a doctoral degree in health services from the University of Washington School of Public Health in 2010.

Dr. Parker has worked for over ten years on tribal public health program implementation, and coordination with tribal communities in Arizona, Idaho, and Washington, as well as with tribal colleges and universities across the United States. She has over five years experience in tribal public health research. Prior to embarking on a career in research, Dr. Parker worked for five years in the policy arena within Arizona state government, in tribal governments, and with tribal working groups at the state and national level.

Her research experience in public health involves community based participatory research, cultural adaptation of evidence-based interventions, and disparities research. She received a Robert Wood Johnson Foundation New Connections Junior Investigator grant in 2011, one year into her post-doctoral fellowship. Dr. Parker’s research in this project focused on alcohol related fatalities and tribal cross-jurisdictional agreements with local non-Native communities. She has provided trainings to tribal health department staff, tribal research teams, and urban Indian service delivery teams. She has also provided Indigenous health research training to University of Washington students from undergraduates through doctoral students.

As an enrolled member of the Mandan and Hidatsa tribes, she is aware of the historical health practices and misconduct perpetuated on tribes in the United States, as well as other minority and disenfranchised populations. Her background in law and policy has informed a broader understanding of the principles of ethics as well as honed her skills in identifying methods to address the disparities in research control and access through the use of formalized agreements. She has experience in working with tribes in their ongoing efforts to balance the collective rights of communities and individuals.
Adriann Ricker, MPH, is an enrolled member of the Fort Peck Assiniboine and Sioux Tribes and currently resides in her hometown of Poplar where she resides with her husband Griffin and their two children Kaniel and Grady.

Ms. Ricker has been involved in a variety of research grants in partnership with Montana State University including: the Male Sexual Health Grant, Ceremony of Research Grant, Fort Peck Sexual Health Study, and Fort Peck Addictions Study. She currently serves as the deputy director for the Fort Peck Tribes Health Promotion Disease Prevention Wellness Program which provides wraparound school based health services to reservation youth.

Ms. Ricker has served terms on the Fort Peck IRB Board and Montana HIV Prevention Planning Board.

Ms. Ricker has been advocating for health issues on her reservation since the age of 13 and has honed her expertise primarily in the realm of public speaking, group facilitation, grant writing, and program development.

Ms. Ricker has a bachelor of science degree from Montana State University, Billings, in health promotion with a minor in organizational communications and a masters in public health from A.T. Still University Arizona School of Health Sciences with an emphasis of program planning, development and evaluation.
Loy Sprague

Loy Sprague, MA, is a faculty member at Fort Peck Community College (FPCC) in Wolf Point, MT. She was raised in Wolf Point and attended college at Carroll College in Helena and Argosy University in Seattle.

Ms. Sprague’s background is in social work and she has worked for government, private, and non-profit organizations in a variety of systems including immigration, child protection, and medical social work.

Ms. Sprague was an adjunct instructor at FPCC for 16 years prior to coming on full-time at FPCC in 2012. Her areas of emphasis have been in addiction studies, social work, sexual health, and mindfulness.

Ms. Sprague is currently funded under an AIHEC-NARCH grant to conduct research on culturally-compatible mindfulness-based stress reduction at Fort Peck Community College.

Ms. Sprague completed her teacher qualification in Mindfulness-based Stress Reduction through the UMass Medical School Center for Mindfulness in Medicine, Health Care, and Society, Shrewsbury, Massachusetts in 2016.
Originally from Atlanta, Georgia, Kerri Patrick Wertz, PhD. earned her doctorate in social foundations of education from the University of Georgia in 2013 with an emphasis on critical theory, critical pedagogy, and qualitative research with a focus on phenomenology.

Dr. Wertz is experienced in cross-cultural research after conducting her dissertation research in Beijing, China; likewise, she is experienced in cross-discipline research after working for three years in engineering education.

Dr. Wertz has published her work in the *American Journal of Engineering Education* and *The International Journal of Teaching and Learning in Higher Education*.

Dr. Wertz is currently the humanities instructor at A’aniih Nakoda College but will become the new human services instructor in fall 2017. Her husband also works at ANC as an IT specialist and teaches computer programming and 3D modeling.
Lawrence Wetsit

Lawrence “Larry” Wetsit (Assiniboine), MBA, has a bachelor degree in community education and a masters degree in business administration in executive management.

Most of Mr. Wetsit’s career has been in management positions with his tribe and with a local telephone company. He has served ten years as tax administrator/mineral director for the Fort Peck tribes, 20 years as senior executive manager for Nemont Telephone Cooperative, five years as vice president at Fort Peck Community College and one term as chairman of the Fort Peck tribes. His service has included 27 years on the Fort Peck Community College Board of Directors with over 20 of those as chairman. He has served on his local school board and has been appointed to serve in various positions by several Montana governors. He has devoted time, throughout his career, to encourage young people to utilize educational opportunities to improve life for Native people.

Twenty-six years ago, Mr. Wetsit was selected by his elders to be the keeper of the Assiniboine Medicine Lodge, where he is called the Spiritual Chief. A new keeper was selected so he will now take the position of spiritual educator and counselor for the next four years for the Wadopana Band of Assiniboine.

Mr. Wetsit is retired and lives on the Fort Peck Indian Reservation in Wolf Point, Montana, with his wife Edna.
David Wilson

David Wilson (Diné), PhD, serves as the first Director of the Office of Tribal Health. This office coordinates the National Institutes of Health (NIH) research related to the health of American Indians and Alaska Natives (AI/AN) across the NIH Institutes, Centers, and Offices.

Dr. Wilson comes from the NIH Office of the Director from the Department of Health and Human Services Office of Minority Health where he previously served as public health advisor and the American Indian/Alaska Native policy lead.

Dr. Wilson graduated with a doctorate in molecular and cellular biology from Arizona State University. He completed a three-year postdoc, and served as a senior research scientist at the National Institute on Aging. He also serves as an adjunct professor at the Johns Hopkins School of Public Health at the Center for American Indian Health.

His commitment to encouraging underrepresented minorities to pursue careers in science began when he was a graduate student and Regent’s scholar working with high school and community college students in the Four Corners area.