

# Successful Strategies & Lessons Learned from Implementing Evidence-Based Programs in American Indian, Alaska Native, and Native Hawaiian Communities



**A**merican Indian, Alaska Native, and Native Hawaiian (AI/AN/NH) communities face significant health disparities compared to the general United States population. Specifically, Elders manage a high burden of chronic conditions and report the greatest percentage of falls (34.2%) of all races and ethnicities. In an effort to address these disparities, some organizations serving AI/AN/NH Elders have implemented evidence-based health promotion programs in the community to empower individuals to manage chronic conditions and prevent falls.

The following strategies were collected from professionals responsible for delivering evidence-based health promotion programs for American Indian, Alaska Native, and Native Hawaiian Elders in their communities. This is a summary of information from discussions with current and former Administration for Community Living grantees and 58 professionals that participated in listening sessions focused on evidence-based program implementation. Use these successful strategies and lessons learned to enhance program planning and delivery in your community.

## What are Evidence-Based Programs?

Evidence-based programs have been proven effective for improving the health and well-being or reducing disease, disability and/or injury among older adults. These programs can be focused on topics like chronic disease self-management education, falls prevention, behavioral health, or physical activity, among others.

# Successful Strategies

## Planning

- Be flexible in which evidence-based programs to offer. Ask Elders what programs appeal to them rather than making assumptions.
- In most cases, organizations can modify the name of a program for marketing purposes. Identify a program name that will be culturally relevant and of interest to Elders.
- Hold workshops in locations that are already familiar and accessible. Bring the workshops to sites in your community where Elders live and visit, like senior centers. Or use a variety of locations to minimize travel distance for those in remote locations.
- Consider the time of day and location of the workshop when scheduling.
- Integrate programs with local cultural activities such as beading, drumming, dancing, and crafts.
- Pair programs with successful initiatives like celebrations that honor Elders, community gardening projects, and group outings such as fishing, traditional food harvesting, and camping.
- Build in time for planning, training leaders, and establishing partnerships for implementation.

## Training Leaders

- Train friendly and supportive program leaders.
- Ensure both staff and volunteer leaders are American Indian, Alaska Native, or Native Hawaiian and familiar with community events and traditions.
- Cross-train leaders to offer more than one program, allowing participants to move from one to another (example A Matter of Balance, CDSMP, Tai Chi, etc.).

## Outreach and Recruitment

- Common outreach methods include: Mail, radio announcements, flyers, e-mails, announcements at public events, personal contact or word of mouth, among others.
- Promote programs as fun and competitive.
- Hold an orientation session (also known as “session zero”) to demonstrate planned activities.
- Follow up with those expressing interest in the programs. Often, it can take three or more contacts with an individual to get them enrolled in workshops.



- Know that recruitment in your community may become more difficult over time as members participate and the pool of potential participants becomes smaller.
- Recruit community members, not only tribal Elders, to attend and to share information about the program with others.
- Use the “each one, reach one” strategy. Ask each participant to reach out to a family member or friend to join the program or participate in the future.

- Help participants identify a “buddy” to participate in programs together and keep each other accountable.
- Use digital storytelling (a method of capturing the tradition of storytelling in digital media, such as audio podcasts, image slide shows, and videos).

## Implementation

- Offer support for or coordinate transportation.
- Provide snacks or a meal.
- Consider incentives such as water bottles, towels, note pads, tee shirts, night lights, flashlights, and others that can help encourage participation and help make homes safer.
- Add traditional music (like drums) to physical activities.
- Tailor programs to the culture of your community. For example, the Wisdom Warriors program for the Chronic Disease Self-Management Program (described on page xx).
- Contact program developers for approval in making changes to the core curriculum.

## Build Partnerships

- Partnerships help expand the reach of the program. Build partnerships with organizations like senior centers, health care providers, community members, faith-based organizations, state falls prevention coalitions, and other community organizations. Partners can support marketing, recruitment, leader training, and identification of funding opportunities.
- Engage local transportation programs.
- Collaborate with local Tribal Offices.
- Involve local health care providers. Referral from a trusted health care professional can greatly increase the likelihood of participation.
  - Educate health care providers about what the programs are and the benefits they offer. Consider a lunch and learn or personal contact. Health care providers are more likely to refer people to the program if they understand it.
  - Encourage providers to discuss falls prevention programs in the community when conducting falls risk assessments.
  - Ongoing communication and education may be necessary if provider turnover is frequent.

## Program Adaptations for American Indian Participants

- Use talking circles for participant engagement
- Create educational materials in Indigenous languages
- Incorporate cultural traditions into the class setting (e.g. allowing time to socialize and eat before class begins; extending the length of the class to accommodate storytelling and narrative discussions)
- Begin and end class with a blessing
- Pass trading sticks to designate speakers in a group (specific to Navajo participants)
- Have flexibility to start class late to accommodate participant emergencies

## Program Adaptations for Native Hawaiian and other Pacific Islander Participants

- Create linguistically relevant material and session titles
- Use images of Native Hawaiian characters on educational materials
- Disseminate educational materials in a lauhala (a plant fiber) bag
- Use pule (prayer) at the start of all sessions
- Utilize kūkākūkā (talk story) during discussion to exchange information
- Incorporate ethnic music in class
- Share mea'ai (food) as an entity to fuel the spirit among participants

## Sustain Programs Over Time

- Implement quality assurance processes to ensure programs are implemented according to the provided curriculum and participants are engaged.
- Identify diverse funding opportunities that can contribute to long-term sustainability including federal or state funding, partnerships, local

philanthropic funding, tribal revenue, and others.

- Consider pursuing Medicare reimbursement for select evidence-based programs, like the Diabetes Self-Management Program. This includes several required steps such as accreditation through the American Diabetes Association, formal documentation, quality assurance processes, and billing systems.

## Success Stories

### Wisdom Warriors

Wisdom Warriors was developed by Shelly Zylstra, Melody Coleman, and Becky Bendixen at the Northwest Regional Council (NWRC) tribal outreach program in Bellingham, Washington in 2011.

It offers culturally appropriate incentives to support tribal Elders with their self-management goals, while maintaining fidelity to the Chronic Disease Self-Management Program (CDSMP) (managed by the Self-Management Resource Center). Wisdom Warriors is true to the CDSMP model, with some added cultural components. It is patterned after Wisdom Steps in Minnesota, a successful tribal program that enrolled over 1,000 tribal members. The NWRC now proudly provides Wisdom Warriors training and other services to several tribes in Washington state, as well as other states across the country.

Tribal Elders are designated as Wisdom Warriors after they complete a CDSMP workshop. This designation is their commitment to leading a healthier lifestyle. Wisdom Warriors meet monthly for educational presentations or activities and receive a “Wisdom Bag,” signifying their commitment to their health. As they make healthy lifestyle choices, they are rewarded with pony beads and charms to celebrate their efforts to improve their health. This sustaining support for the lessons learned recognizes the importance of community in a cultural context where “self-management” may be rejected as selfish. Communal support of the Wisdom Warriors in group meetings

allows continuing application of the concepts learned in a culturally appropriate context. Each tribe follows the basic structure of the program and can customize it by designing their own incentives and developing other guidelines to help their members maintain the gains they made through the initial six-week program.

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*“The monthly meetings are an opportunity to encourage others to join Wisdom Warriors and also for community members to celebrate with the Elders — family members, clinic staff, police, Tribal Council, and others who value tribal Elders and their role in the community.”*

— Becky Bendixen

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### Lake County Tribal Health Center

When the Diabetes Self-Management Program (DSMP) was first offered in 2015, the Lake County Tribal Health Center’s Native Diabetic Audit showed that only 9% of patients who have received care for diabetes at the clinic in the past year were in control of their ABC bundle, which includes A1C<=8, Blood Pressure <140/90, and

Cholesterol LDL <100. Following implementation of DSMP over a two-year period, 28% of patients achieved control of their ABCs.

This improvement of ABC management was due to a combination of improved clinical care and self-management education. At the start of this project, about 10 Elders (8.4% of the 118 active Elders) attended a monthly diabetes support meeting. At the end, about 54.2% of the active Elders attended at least one DSMP session.

Lake County Tribal Health Center increased the number of participants by training additional community leaders to increase the number of workshops offered in a year. Instead of depending on a Registered Dietitian to provide education, tribal community members were able to lead the workshops.

Workshops were offered locally for 6 participating tribes to decrease the barrier of transportation and to make workshops more accessible to tribal members. Having tribal Elders and community members teach the Diabetes Self-Management Workshops helped create positive peer-led groups and connect participants to on-going support and reverse the cultural stigma to one of understanding and hope. Each of the participants accomplishments was celebrated by providing a Wisdom Warrior pouch which tribal Elders proudly wear to indicate their commitment to improving self-management behaviors.

### Inter Tribal Council of Arizona

The Inter Tribal Council of Arizona (ITCA) implemented two falls prevention programs, Stepping On and Enhance Fitness, with two tribes. Within the first year of program, both tribes opted out as program implementation partners because of lack of staff to conduct the program, due to

the burden of conducting marketing and outreach, general staff attrition, and duplication of services already available in the community.

Following identification of these challenges, ITCA pivoted to reach out to additional tribes and offer a different program, A Matter of Balance. This willingness to recognize the need to make changes based on the needs of the community was the key to their success. In addition, they recognized the need to create culturally appropriate evidence-based falls prevention programs for tribal communities and have advocated for increased cultural relevancy. As a result, a tribal community is now included in A Matter of Balance training video. They have continued to be a resource to other tribal health promotion and disease prevention programs.

### Lac Courte Oreilles Community Health Center

The Lac Courte Oreilles Community Health Center initiated DSMP workshops, under the name of “Healthy Living With Diabetes” in 2014 and added the Chronic Pain Self-Management program, “Healthy Living with Chronic Pain” in 2018. Through robust partnerships, the health center was able to collaborate to share workshop leaders and leverage training funds, identify workshop locations that served Elders in multiple tribes, and cross-promote Stepping On and Powerful Tools for Caregivers—two programs offered by the Sawyer County health promotion office.

Partnerships included the Great Lakes Inter Tribal Council, the county aging department, the county health promotion office, and the Sawyer County Senior Resource Center. Each of these partnerships provided an opportunity to share resources, experiences and cultures.

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<sup>i</sup> Indian Health Service. (2016). Disparities. Retrieved from <https://www.ihs.gov/newsroom/factsheets/disparities/>

<sup>ii</sup> Centers for Disease Control and Prevention. (2016). Falls and fall injuries among adults ≥ 65-United States 2014.

<sup>iii</sup> Morbidity and Mortality Report Weekly. Retrieved from <http://www.cdc.gov/mmwr/volumes/65/wr/mm6537a2.htm>



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