



Successful Strategies for Improving the Lives of American Indian and Alaska Native Youth and Families

What is success? Who gets to decide what is successful? What evidence does a program need to demonstrate that its practices produce successful outcomes? These are a few of the questions that are at the heart of a five-year project to demonstrate new research approaches aimed at producing “practice-based evidence.” This unique project is a collaboration between the Portland Research and Training Center, the National Indian Child Welfare Association, and the Native American Youth and Family Center, a Portland, OR-based non-profit agency. The project is designed to address a challenge faced by community-based, culturally-specific youth and family agencies—providing evidence that their practices and services are effective in a context where typical research techniques are often neither feasible nor culturally appropriate. Building evidence from the ground up, with the involvement of elders, families, and youth

is the ultimate goal of this effort.

The more than 4 million American Indian and Alaska Native (AI/AN) youth and families who live in the United States face many challenges to healthy development and thriving. These problems, which include poverty, substance abuse, low graduation rates, unemployment, and mental and emotional disorders, must be understood within a historical context of oppression, genocide, and government policies of assimilation. Today, especially when compounded by racism and discrimination, these negative social factors present barriers to the healthy functioning of AI/AN families.

Despite these pervasive social challenges, the strengths and resilience of AI/AN people provide opportunities to support positive change and positive community-sanctioned outcomes. For example, the rate of physical abuse among AI/AN is lower than that of mainstream fami-

lies, despite conditions that are highly correlated with abuse. For Native Americans, cultural strengths such as family and community, spirituality, traditional healing practices, and group identity are key moderators of physical and mental health outcomes and substance abuse.² They provide the building blocks for developing effective programs for AI/AN people.

Paradoxically, although the problems faced by AI/AN families and their children are well documented, access to appropriate services is far poorer for them than for other populations. About half live on reservations, often in rural or remote areas with little access to services. Those who live in urban environments are often unable to utilize the available services. In addition, many AI/AN families regard current mainstream mental health and social services as culturally inappropriate or ineffective; thus, many of the existing models for mental health services do not

meet AI/AN cultural expectations associated with seeking and receiving services.

This problem is even more acute in light of the current emphasis on evidence-based practice (EBP). Increasingly, federal agencies are requiring EBP as a condition for funding, and

not against the idea that evidence of effectiveness is valuable, but there are many aspects of the current approach to EBP that pose difficulties. These include the fact that many EBPs have been developed without consideration of either cultural context or concerns about lack of fit between cultural

rigorous evaluation. This final strategy is the approach adopted by our Practice-Based Evidence project.

Program Examples and Evaluation Challenges

Many community-based practices that are believed to be effective and are highly valued by families, youth, and practitioners have little or no scientific evidence base to support their effectiveness, despite their wide use and apparent success. Two such examples are “Positive Indian Parenting” (PIP), a curriculum designed to promote and support culturally and developmentally appropriate parenting practices in Indian families, and the comprehensive program of the NAYA Youth and Family Center, which serves Native American children and families in the Portland, Oregon metropolitan area.

Positive Indian Parenting

Positive Indian Parenting (PIP) is a parent education curriculum developed by the National Indian Child Welfare Association to promote positive parenting. This curriculum relies heavily on values clarification and development, using traditional cultural teaching as a base for effective parenting. PIP has been in existence and steady use since 1987 and is widely used throughout the United States and internationally. It was re-



the State of Oregon has enacted legislation which requires EBP in many health and human services funded by the state. The development of EBP has depended primarily on a “gold standard” of randomized controlled trials, efficacy studies, quasi-experimental designs, or series of single case studies.¹ Many service providers that address the needs of culturally and linguistically diverse populations are concerned about the mandatory use of EBP because many of the research studies that support the use of EBPs have not included large numbers of children and families of color and even fewer have focused specifically on AI/AN populations. Little evidence exists that EBPs are effective for diverse groups and populations with different worldviews and values.

Of course, AI/AN people want the best possible services. Most are

norms and requirements of some evidence-based practices.

Responses to mandates for community organizations to implement evidence-based practices have led to three strategies among AI/AN researchers and advocates. One approach is to adapt existing EBPs for Native American youth and families.

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The second is to seek exemptions from EBP mandates, or advocate for extended timelines for Native American populations and agencies. A third strategy is to work to establish evidence of effectiveness of existing practices that are culturally appropriate, acceptable, and believed to be effective, but have not been subjected to

cently named as a best practice by the National Association of Minority Behavioral Health Associations, but it has had no formal evaluation of its efficacy or effectiveness.

Built on a foundation of information gathered through a series of interviews with AI/AN elders and practitioners, PIP is based in the idea

that many present-day AI/AN parents have been deprived of the right to learn positive parenting traditions that have been handed down from generation to generation. Through forced assimilation, removal to boarding schools, and forced foster placement and adoption programs, traditional parenting practices were lost or weakened. This curriculum reframes parenting problems as a function of colonial oppression rather than personal deficit and empowers AI/AN parents to reclaim teaching and return to their rightful state as positive parents. PIP taps into the power of culture, identity and belonging, giving Indian parents a positive standard of behavior to

emulate and a number of basic skills to actualize the values.

While the specific content of PIP may be flexible from tribe to tribe, core principles are maintained across sites (see box at left). The “fidelity” of this curriculum is not in the specific tribe’s teaching from one site to another but in the principles themselves, which were developed in consultation with diverse tribal elders and found to be nearly universal among North American tribes.

To date, PIP evaluation designs have been limited to participant satisfaction and assessment of the achievement of learning objectives. However, effectiveness is evidenced by widespread use, acceptability, approval by elders, low dropout rates of participants, and many testimonials from trainers and parents alike. Randomized control trials have been not been feasible due to the limited size and geographic distribution of groups using the curriculum and because of cultural as well as economic issues. However, as more is learned about evaluation of culturally-specific approaches, the current project is helping to build a framework for evaluation and the options for appropriate research are growing.

NAYA Youth and Family Center

The Native American Youth and Family Center (NAYA Family Center) was founded in 1974 by American Indian/Alaskan Native (AI/AN) parents to keep their children engaged in healthy activities such as sports and cultural arts. NAYA Family Center’s mission is “to enhance the diverse strengths of our youth and families in partnership with the community through cultural identity and education.” The agency focuses on activities that encourage alternatives to high-risk behavior for Native youth and case management for families experiencing domestic violence, in order to break endemic community patterns of poverty, build youth leadership, job skills, and self-esteem; and support community self-sufficiency.

(See related article, page 14.)

NAYA Family Center is an example of a program that has excellent

PIP CORE PRINCIPLES

- *Traditional culture offers positive parenting that was effective for centuries;*
- *Positive parenting is rooted in spiritual teachings that direct how children should be treated;*
- *The oral traditions of tribes necessitate effective communication skills;*
- *Parents are the first teachers and are responsible for transmission of values;*
- *Nurturing a child is an essential cultural value;*
- *Children can not learn a skill until they are developmentally ready;*
- *Teaching self discipline is the ultimate form of behavior management;*
- *Teaching children their place in the world and helping them develop skills to successfully interact with their environment is an essential part of parenting; and,*
- *Reinforcement based in ceremony, ritual, relationship and non-verbal communication is a powerful tool for shaping positive behavior, identity, and self- and group-esteem.*

POETRY BY TEDDY PEREZ

My Feelings

Inside me is a sun shining and shining on everyone.

Inside me is a bird, flying and soaring.

Inside me is a snake it makes me mad and rattles to let you know when you're too close.

Inside me is a tree, tall and shady.

Inside me is a dying flower.

I get sadder and sadder.

Inside me is the sky.

I hold it inside.

I won't let the thunder roar.

Inside me is a heart that is dancing.

The Indian Spirit

As I lie in my bed I listen to the spirits that wander at night.

Suddenly, I hear my grandma's voice calling to me.

I open my eyes seeking her like an owl stalking his prey.

But I don't see her.

My eyes get watery and tears start flowing like rivers.

I picture her in my head,

her black hair,

her brown skin,

representing the great Indian that she was.

Teddy Perez is a Native American youth active in NAYA Family Center.

evidence of youth outcomes at the organizational level, but none of its culturally-specific interventions qualify as an “evidence-based practice.” Examples of good outcomes achieved by enrolled NAYA youth include:

- High school graduation rates 5 times that of all Indian children within the Portland Public Schools (PPS);
- Participants in the Summer Institute have a 90% graduation rate from high school, compared to a graduation rate of 20% for all PPS Indian children;
- NAYA students who participate in the tutoring center complete and exceed state benchmarks in math, science, and reading at more than twice the rate of all PPS Indian students;
- Students who participate in the Culture, Arts, and Sports programs have significant increases in their daily school attendance rates and benchmark achievement rates, as well as decreases in behavioral incidents or referrals.

Through the Practice-Based Evidence project (PBE), NAYA is working to document the effectiveness of the resources and practices that it provides. However, several features of the NAYA program that are seen as culturally congruent also complicate the research/program evaluation task. First, NAYA’s program is holistic, comprehensive, and dynamic; the services provided to families change as their needs change. Although this program design is intentional and appropriate to NAYA’s mission, it does not lend itself to being manualized. A second program feature is that staff behaviors designed to bring about positive change in children are rooted in NAYA values and practice principles: Staff utilize more than 20 strategic practice elements across program areas and interventions. Examples include mentoring, cultural preser-

vation, role modeling, and identity enhancement. This makes it difficult to identify the effect of any given program component or intervention. Another evaluation issue is that, because enrollment in NAYA’s program is voluntary, there may be (unknown) biases due to the self-selection process



of participation. Those who enroll in NAYA’s school programs may be more motivated or have caregivers who can provide more structure, resources or encouragement; or conversely, they may enroll because they are more in need of intervention.

Though neither is designated as an “evidence-based practice,” both PIP and NAYA demonstrate important positive qualities. First, each of them has high acceptability and engagement by intended participants. This feature constitutes an enormous hurdle for many mainstream social service and mental health programs. Secondly, NAYA’s program-level data provide strong evidence that it is effective. The PBE research team is working to connect program design, strategic interventions, and outcomes in a systematic way. A third positive quality is connected to increasing evidence of the powerful protective effect of positive cultural identification for AI/AN people, both at the individual level and for communities. This sug-

gests that these two culturally-specific programs are employing program strategies likely to produce positive outcomes for AI AN youth and their families.

References

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Authors

Terry L. Cross is the Co-Principal Investigator of the Practice-Based Evidence Project, and the Executive Director of the National Indian Child Welfare Association (www.nicwa.org).

Barbara J. Friesen is the Co-Principal Investigator of the Practice-Based Evidence Project, and Director of the Research and Training Center on Family Support and Children’s Mental Health (www.rtc.pdx.edu).

Nichole Maher is Executive Director of the Native American Youth and Family Center (www.nayapdx.org).