

Setting the Stage

The Suquamish Tribal Council had just passed a resolution supporting a research partnership between the Suquamish Tribe and ADAI when the National Institutes of Health's national Center on Minority Health and Health Disparities published a request for grant applications to use Community Based Participatory Research (CBPR) and Tribally Based Research (TPR) approaches to address issues of health disparities. The concept of the canoe, an important traditional component of coastal Native life and a source of cultural resurgence among West Coast Salish tribes, was seen as the cornerstone of the proposal.

The canoe concept also fit well with the previously developed Canoe Journey/Life's Journey Manual, a life skills and substance abuse prevention curriculum for use with urban Indian youth (LaMarr & Marlatt, 2005; Marlatt et al., 2003). The manual uses the Canoe Journey as a metaphor for one's journey through life and the skills needed to successfully navigate the journey. Many of the staff at the Suquamish Wellness Program expressed an interest in partnering with ADAI to create a similar, culturally based intervention in their community.

The Suquamish Tribal Council directed the Suquamish Cultural Co-Op, whose responsibility is to assure that all programs introduced in the community are respectful of tribal traditions, culture and values, to oversee the development and submission of the proposal. With the development of a second tribal resolution in support of the project, the Suquamish Tribe agreed to participate.

The expectations, scope of work and terms of the collaborative partnership between the Suquamish Tribe and the University were spelled out in a Memorandum of Understanding. This was a time and labor intensive process, however it was a crucial step in developing trust, assuring tribal involvement from the outset, gaining support of key members of the Suquamish leadership and community – and establishing a partnership in which all parties contributed equally.

The proposal was submitted and subsequently funded, beginning a multi-year partnership based on trust and respect for tribal sovereignty. In Phase II the partnership expanded to include a second tribe, the Port Gamble S'Klallam Tribe.

PHASE I SUMMARY

(Sept 2005- June 2008)

Strengthening the Research Partnership

During Phase I of our grant, the Healing of the Canoe project worked diligently to strengthen the partnership between the Suquamish Tribe and the UW Alcohol & Drug Abuse Institute through a number of ways:

- HOC hired research teams located both in Suquamish and at ADAI. HOC staff have an office in the community with an “open door policy.”
- Each team met weekly, with joint meetings held monthly; the location of joint research meetings rotated between the reservation and ADAI.
- The Tribe’s Cultural Cooperative (CC), which assures that all programs introduced into the community are culturally appropriate, served as the project’s Community Advisory Board. It reviewed all project materials and procedures, with final review and approval by the Tribal Council (TC) and also by the University’s Human Subjects Division.
- Research team members made regular presentations about the project and its progress to both the CC and TC, as well as to the Tribe’s Elders. They also met with a number of other agencies within the community, including the Tribal Youth Council and the Education Department.
- The tribal community was kept informed through quarterly Community Meetings. A project update article was regularly included in the monthly tribal newsletter, including responses to questions about the project collected at Community Meetings.
- One member of the ADAI team spent a significant amount of time in the community, attending and volunteering at community events, attending Elders lunch on a weekly basis, participating in Canoe Journey, etc.
- Members of both the ADAI and Suquamish research teams helped prepare and distribute food as part of the community’s summer hosting of traditional tribal canoes at the annual Tribal Canoe Journey.
- Cross training was an important piece of the partnership. The ADAI team held monthly cultural education sessions, consisting primarily of Suquamish recommended reading assignments and films followed by group discussions. In return, training on research methods was provided to the Suquamish team and interested community members.

HOC also regularly assessed the perceived nature and quality of the working relationship from the TC, CC, and the Suquamish and ADAI research teams’ perspectives. This was done using three surveys: 1) the Wilder Collaboration Factors Inventory; 2) the Meeting Effectiveness Inventory; and 3) the Individual Perceptions of the Collaborative Process. Results showed that partners generally felt comfortable participating and felt valued; that there was good communication, flexibility, and adaptability; that there were well established relationships; that the timing for collaboration was right; that both organizations would mutually benefit; that an appropriate cross section of community members were involved; and that individuals were willing to compromise. They also felt that trust among collaborators grew considerably over time.

Community Needs Assessment

The Suquamish CC nominated individuals thought to be Key Stakeholders in the community. A total of 16 individual interviews were conducted using an adaptation of the Community Readiness Model developed by the Tri-Ethnic Center for Prevention Research at Colorado State University. Key stakeholders were asked to identify and rank order what they perceived as the three areas of greatest concern for the community. The interview assessed the community's efforts to address identified issues (programs, activities, policies, etc.), community knowledge of these efforts, leadership, community climate, community knowledge about the issues, and resources related to the issue.

Focus groups were also conducted with four important community groups – Elders, service providers, youth and community members – to follow up and expand on information gained in the key stakeholder interviews. While these focus groups responded to a number of common questions, they also had slightly different sets of questions based upon their unique perspectives on the community and the identified issues. The key stakeholder interviews and focus groups led to the development of a community Needs and Resources Report that was presented to the Tribal Council for the Tribe's use. A summary brochure based on this report was also sent to all tribal members.

Youth Intervention

Based on the identification of substance abuse and need for cultural identity among youth as the top priorities in the community, a focus was placed on developing a culturally relevant intervention to address these related concerns. HOC reviewed a number of American Indian/Alaska Native programs and "best practices." A prevention program (Canoe Journey/Life's Journey: Life Skills Manual for At-Risk Native Youth) developed by members of the UW research team and the Seattle Indian Health Board, and based on the traditional Coastal Salish canoe journey, was identified as the backbone of the intervention.

Members of the ADAI and Suquamish research teams met weekly over 5 months with a curriculum development team composed of Suquamish Elders and community members. These meetings were open to all community members and were held immediately after the Elder's Lunch to allow Elders to participate. This process resulted in a community based, culturally grounded cognitive-behavioral life skills curriculum based on the metaphor of the canoe journey, and that includes Suquamish beliefs, stories and history.

The Suquamish HOC curriculum, now titled " *Holding up Our Youth,*" consists of 11 sessions. Each of the sessions includes training important cognitive-behavioral skills and weaves in information about alcohol and drugs. Traditional stories were collected from Elders and other community members and are included as a way to convey and reinforce session information through the messages and values found in the stories.

Elders and tribal leaders volunteered to come into the sessions to share their experiences and perspective, and to talk to the youth about various topics such as drug and alcohol use, Suquamish spirituality and cultural values, and Suquamish teachings and stories. These guest speakers provided an opportunity for youth participants to meet with community members who can serve as mentors and resources. This allowed for the inclusion of sacred Suquamish knowledge and teachings that could not be provided in written form, as this knowledge belongs to the community. The youth also participated in culturally-related activities such as food gathering and preparation, traditional introductions, traditional storytelling, and gift preparation (including beading, weaving, cedar collection, carving, etc.). Participants were also involved in a number of other activities such as breakfast with the tribal police chief, visiting tribal chambers, and helping with the annual Canoe Journey hosting.

The intervention program ends with an Honoring Ceremony where facilitators acknowledge youth for the completion of the program and honor their unique attributes. The ceremony also incorporates the work participants have done on identifying mentors. Mentors are invited by the youth to attend the ceremony. The youth prepare a short speech about why this person is their mentor and honor them with a handmade gift (necklace, weaving, etc). Tribal Elders, leaders and the youth's families are also invited to witness this ceremony and share a meal.

Two intervention sessions with youth were held during Phase I. The first was during the summer of 2007, during the regular Suquamish summer school session. The second ran from March – June 2008, as a bi-weekly after school program. Participating youth attended Kingston Middle School and were in 6th– 8th grade. Over 20 participants completed the HOC intervention program during Phase I.

The work conducted in Phase I of the project was selected as one of twelve examples/ models of appropriate and respectful community engagement by federal agency representatives and was included in the book, *Principles of Community Engagement (2nd edition)*.

PHASE II SUMMARY

(July 2008 – Feb 2013)

The following is a summary of the work that the Healing of the Canoe Project completed during Phase II of the project, which was a collaborative project between ADAI, the Suquamish Tribe and the Port Gamble S'Klallam Tribe.

There were three general overall goals for Phase II:

Continue to use the CBPR/TPR process to further refine and implement this community-based and culturally relevant substance abuse prevention intervention among Suquamish tribal youth

Extend and replicate this process and developmental model with the Port Gamble S'Klallam Tribe, using the same methods established during Phase I with the

Suquamish Tribe (e.g., Tribal Council approval of partnership, memoranda of understanding, hiring tribal members as project staff, weekly local and monthly joint staff meetings, community meetings, information in tribal newsletters, key stakeholder interviews, focus groups, community advisory board, community-based curriculum review and adaptation group, Tribal Council review, etc) to adapt the curriculum to be specific to its culture, traditions and values.

Implement and evaluate the effectiveness of the curricula more rigorously.

These goals were accomplished through the following steps.

The summer school and after-school venues in which the Suquamish curriculum was originally implemented were not feasible for a number of reasons. The Tribe had recently opened a tribal high school and the HOC project team was invited to expand the curriculum from 11 sessions to a full semester-long daily class, which was later extended to the full academic year. Project staff served as instructors, using the expanded curriculum, and tribal Elders and other community members served as guests to share their experiences and tribal traditions, values, and activities. The class was well received by tribal students, who were able to receive credit from both the high school and the local community college.

Working with the Chi-e-chee Network (which is the Port Gamble S'Klallam Tribe's Alcohol and Other Drugs task force and which oversees cultural prevention programming) as its Community Advisory Board and with a community-level work group, the HOC team developed an 11 session, tribally specific adaptation of the curriculum. While containing the same primary social skills training components as the curriculum in Suquamish, the "Navigating Life the S'Klallam Way" curriculum has been tailored to reflect Port Gamble S'Klallam traditions, values and culture.

The Suquamish tribal high school closed for an academic year as it "retooled" its programs. This required the HOC team to consider alternative ways to deliver the curriculum. At the same time, the Port Gamble S'Klallam team was also beginning to explore methods for delivering its newly developed curriculum. Together, they chose to develop an intensive, multi-session workshop format. Arrangements were made by both Tribes with the local school district to allow tribal high school students to be absent from school in order to attend the workshops, and to receive credit for their involvement. The workshops consisted of three 2.5- 3 day sessions held off the reservations.

The workshop format was felt to be an effective delivery method by the facilitators and was both well accepted and received by the students. The results of a quasi-experimental design analysis indicated that during the course of the approximately 3 months over which the workshops took place, there was an increase in a sense of optimism and self-efficacy, and a decrease of substance use among the participants.

The process of development and delivery has resulted in multiple versions of the curricula, including versions that have been used with middle school children, a year-long curriculum that has been integrated into a tribal high school setting as a stand-

alone class, and curricula that can be used in a multi-session, intensive workshop format. In addition, having the youth develop Digital Stories as a part of their participation in the intervention is now an important component of HOC.

PHASE III SUMMARY

(March 2013 – Jan 2017)

The focus of the third phase of the Healing of the Canoe project was to disseminate the previously developed and evaluated curricula to other tribal communities and organizations. The process was guided by theory-grounded dissemination and implementation approaches and models of diffusion of innovations. The following is a summary of the work that the Healing of the Canoe Project completed during Phase III of the project, which was a collaborative project between the Suquamish Tribe and the Port Gamble S'Klallam Tribe and ADAI:

Implemented the curricula again in Suquamish and Port Gamble S'Klallam, however in different agencies from those in which they were developed. The Holding Up Our Youth curriculum, originally developed within the Wellness Program, was implemented in the Suquamish Sports and Recreation Program which includes all cultural activities in the community. The curriculum was also taught as a regular class at Chief Kitsap Academy, the Suquamish Tribal high school (it continues to be offered as an ongoing class). The Navigating Life the S'Klallam Way curriculum, originally developed in the Youth Program, was implemented in the Port Gamble S'Klallam Wellness Program as part of a behavioral health intervention.

Assisted a new partnering community, the Makah Tribe, in adapting and implementing the curriculum as a component of their Canoe Family Program. The curriculum provided community members with building blocks they can use as they build a healthier and happier future for their youth. The Tribe has dedicated grant funding through 2021 to specifically use the HOC building blocks as part of a larger project to build a comprehensive, community-driven Makah tribal-centric approach to behavioral health prevention, treatment and recovery that uses both lessons from the past, as well as information and resources of the present, to guide the community into the future.

Made a broad dissemination effort beyond these three targeted Tribes to make other communities aware of the curricula. These included the use of social media and other methods (e.g., Facebook, listservs of tribes and tribal organizations, digital stories, presentations at meetings of American Indian/Alaska Native professional organizations, article in tribal newspapers and blogs).

Offered workshops for 291 people from 42 AIAN Tribes and 12 tribal organizations to train them to identify the key concerns and strengths in their community, adapt the HOC curriculum for their specific cultural strengths and teachings, and implement the curriculum in their own communities. Three HOC hosted training workshops were held in 2014, three were held in 2015, and two in 2016. We also provided six additional training workshops in tribal communities, by invitation (including trainings for the three

targeted Tribes). A number of Tribes (including Makah, Cowlitz and Puyallup) have since received grant funding to implement the curriculum in their communities.

Created two new curriculum chapters in collaboration with the THRIVE project, housed at the Northwest Portland Area Indian Health Board in Oregon state. These chapters focus on suicide prevention and intervention. THRIVE has a small grant to support three Tribes in implementing the curriculum with the two new chapters, allowing us to gather input/feedback and further refine and revise content.

Provided three booster workshops for previous trainees, to let them know about updates to the materials and generally refresh them on the curriculum implementation and adaptation process.

Training workshops were all held in tribal-owned/operated facilities.

Provided ongoing technical assistance and consultation to tribal communities and organizations that were trained in the adaptation, implementation, and use of the curricula.

Developed and facilitated peer support networks so that trained individuals could provide assistance to peers in other communities and agencies, a means by which the process could become self-sustaining.

Evaluated the effectiveness of our outreach and dissemination efforts, as well as the success of the training workshops.