Implementing the Community of Learning model for Urban Indian Health

Kimberly T. Fowler, PhD
Technical Assistance and Research Center (TARC)
National Tribal Health Forum
August 2016

Excellence, Equity, Effectiveness
Overview

Goals and Objectives:

Objective 1: Explain the Community of Learning model components that make up the national peer-to-peer forum for Urban Indian Health Programs.

Objective 2: Describe the process to develop and implement an effective Community of Learning model for sharing best practices and solutions to challenges across Urban Indian Health Programs.
National Council of Urban Indian Health

• Created in 1998 by Urban Indian Leaders to advance health care of American Indians/Alaska Natives.

• Advocates for Indian Health Care with Congress and Federal Government.

• Provides Technical support to urban Indian programs for implementing quality accessible health care services.

• Provides Technical Assistance support to the 37 Urban Indian Health Programs across the nation.
NCUIH Mission

The NCUIH mission is to support its membership in the development of quality, accessible, and culturally competent healthcare services for American Indians and Alaska Natives living in urban communities by serving as a resource center providing advocacy, education, technical assistance, training, and leadership.
NCUIH Membership Regions

Excellence, Equity, Effectiveness
NCUIH Membership

Region I
- Baltimore, MD
- Boston, MA
- New York City, NY

Region II
- Chicago, IL
- Detroit, MI
- Milwaukee, WI
- Minneapolis, MS
- (Green Bay*)

Region III
- Omaha, NE
- Pierre, SD

Region IV
- Billings, MT
- Butte, MT
- Great Falls, MT
- Helena, MT
- Missoula, MT

Region V
- Portland, OR
- Reno, NV
- Seattle, WA
- Spokane, WA

Region VI
- Bakersfield, CA
- Fresno, CA
- Los Angeles, CA
- Oakland, CA
- Manteca, CA
- Sacramento, CA
- San Diego, CA
- San Francisco, CA
- San Jose, CA
- Santa Barbara, CA

Region VII
- Albuquerque, NM
- Dallas, TX
- Flagstaff, AZ
- Phoenix, AZ
- Salt Lake City, UT
- Tucson, AZ
- Wichita, KA
- Tulsa, OK**
- Oklahoma City, OK**

Region VIII
- Denver, CO

List of UIHPs
Indian Health Service System: I/T/U

Indian Health Services (I)
- Federal facilities consisting of hospitals and clinics.
- Funded at 50% of need for adequate care.
- 12 Regional Offices.

Tribal (T)
- Compact or Contract to provide health services.
- Specialty care through Purchased/Referred Care dollars for “life or limb”.

Urban Indian Health Programs (U)
- Receive approximately 1% of IHS Budget.
- 3 levels of programs: Comprehensive, Limited, and Outreach and Referral.
- Wide variability of services.
The Context: Urban Indian Communities

33 Urban Indian Health Programs operating in 20 states.

**Population:** Estimated 2.5 million

**Economic:**
- Higher poverty rate than other urban dwellers.
- Higher levels of education than rural/reservation natives.

**Political:**
- Needed education on off-reservation trust responsibility, i.e. boundaries follow patient

**Social:**
- Fragmented community with limited gatherings.
- Disconnected from family back home.
- Elements of mainstream society.

**Psychological:**
- Invisibility, isolation in the city.

**Cultural/Spiritual:**
- Some of the greatest loss of cultural knowledge and understanding.
- Multi-tribal; multi-cultural; global indigenous identity.
Health Disparities: A Snapshot

Indian Country Rates Nationally

- 500% higher tuberculosis rate.
- 519% higher alcoholism rate.
- 195% higher diabetes rate.
- 72% higher suicide rate.
- 92% higher homicide rate.
- 149% unintentional injury rate.
- 60% higher infant mortality.

Urban Indian Rates Nationally

- 38% higher accident mortality.
- 126% higher chronic liver disease mortality.
- 54% higher diabetes mortality.
- 178% higher alcohol-related mortality.
- Urban Indian youth are nearly 5x more likely to attempt suicide requiring hospitalization than all other urban youth combined.
Core Strengths of Indian Communities

- Culture and Spirituality.
- Healing practices.
- Humor
- Relational beliefs.
- Extended family networks.
- Natural respite care and support services.
- Oral Communication.
- Youth
- Elders
NCUIH Urban History Resources

Additional Resources on the NCUIH Knowledge Resource Center (KRC) website:

• http://www.ncuih.org/krc/KRC_index

• http://www.ncuih.org/krc/history_traditions
NCUIH Technical Assistance and Research Center (TARC)

Objective: support the development of quality, accessible, and culturally sensitive healthcare programs for American Indian and Alaska Natives living in urban communities

- Support Services
  - Level 1: Information dissemination
  - Level 2: Tools and Training: Webinars, Communities of Learning, In-Person
  - Level 3: One-on-one Technical Assistance support
  - Level 4: Research and Evaluation

Excellence, Equity, Effectiveness
Community of Learning Model

NCUIH mechanism to support various health initiatives within Urban Indian communities.

• To build consensus for national support on policy and relevant national issues
• To improve communications between Urban Indian Health Programs
• To provide the “space” for program professionals to learn and teach one another about what works, what doesn’t work, and innovative solutions to common challenges and problems
• To develop training and tools for Urban Indian Health Programs to support stronger programming and increased community awareness and support
Community of Learning Model

Unique, Culturally Appropriate
Scientific Approaches
Culturally Grounded
Customized Solutions
COL Guiding Principles and Values

• UIHP have a wealth of knowledge and expertise to provide community
• UIHPs and community members are the experts
• TA support is contextual and community-driven
• Services are provided in a way that honors and respects culture

“This customized and multi-knowledge sharing model not only responds to the need for capacity & knowledge but is also culturally embedded in the way Indigenous people have traditionally transmitted knowledge and wisdom from generation to generation”
NCUIH COL Topics

ACA/ Enrollment
Staff Wellness
Behavioral Health
Diabetes
Community Health Representatives
Board of Directors
Executive Directors
Third Party Billing/ Payment Reform Systems
How it works?

Virtual Learning- Sharepoint site

• NCUIH utilizes SharePoint- organizes and categorizes all materials into folders available 24/7 to UIHPs via password protected sites.

Providing and Coordinating Trainings

One-on-one TA
<table>
<thead>
<tr>
<th>Type</th>
<th>Name</th>
<th>Modified</th>
<th>Modified By</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>BH_Priority_Care_Integration 8 8 11</td>
<td>6/8/2011 12:30 PM</td>
<td>Greg Fine</td>
</tr>
<tr>
<td></td>
<td>Enhancing_Pediatric_Mental_Health_Care_Algorithms_for_Priority_Care</td>
<td>6/8/2011 11:50 AM</td>
<td>Greg Fine</td>
</tr>
<tr>
<td></td>
<td>IHRC Integrated Care Webinar</td>
<td>6/8/2011 12:00 AM</td>
<td>Greg Fine</td>
</tr>
</tbody>
</table>

**Shared Documents**

<table>
<thead>
<tr>
<th>Type</th>
<th>Name</th>
<th>Modified</th>
<th>Modified By</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Behavioral Health COL Resources_2014</td>
<td>7/8/2014 10:26 AM</td>
<td>Whitney Hewlett</td>
</tr>
<tr>
<td></td>
<td>CoC Tool Kit</td>
<td>3/4/2014 1:11 PM</td>
<td>Megan Dormond</td>
</tr>
<tr>
<td></td>
<td>EBP GesPR toolkit</td>
<td>6/17/2014 1:37 PM</td>
<td>Whitney Hewlett</td>
</tr>
<tr>
<td></td>
<td>Evidence-Based Practices for Adults</td>
<td>2/28/2013 1:41 PM</td>
<td>Jami Bertgus</td>
</tr>
<tr>
<td></td>
<td>GONA toolkit</td>
<td>6/24/2014 4:07 PM</td>
<td>Kimberly Fowler</td>
</tr>
<tr>
<td></td>
<td>Peer-Support Models and Consumer Driven Care</td>
<td>2/28/2013 1:42 PM</td>
<td>Jami Bertgus</td>
</tr>
<tr>
<td></td>
<td>Social Marketing</td>
<td>4/17/2012 12:13 PM</td>
<td>Jana Lynn Louis</td>
</tr>
</tbody>
</table>
How it works?

Virtual- Sharepoint site
  • NCUIH utilizes SharePoint- organizes and categorizes all materials into folders available 24/7 to UIHPs via password protected sites.

Providing and Coordinating Trainings- webinars

One-on-one TA
Tools and Training

*Web-ex trainings in 2015-2016*
MSPI: Suicide Prevention and Postvention

Best Practices of Medicaid Outreach and Education strategy Implementation: An Urban Indian Program Perspective

Strategic Planning: Creating a Roadmap to the Future for Your Organization
How it works?

Virtual-Sharepoint site
• NCUIH utilizes SharePoint- organizes and categorizes all materials into folders available 24/7 to UIHPs via password protected sites.

Providing and Coordinating Trainings

One-on-one TA
Tools and Training

In-person Training in 2015-2016
• Coordinating Urban presentations at National Meetings and Conferences
• ACA/IHCIA in Urban Indian Communities
• NCUIH Annual Leadership Conference

Developing and Coordinating Tools to Support
• Tools for local evaluation and assessment
• Community training materials
• Training materials for engaging local partners
• Sharing successful grant applications
Behavioral Health Community of Learning

Community of Learning Audience: Open to all Behavioral Health Administrators, Coordinators, and Staff of Urban Indian Health Programs.

Community of Learning Expectations:

• National updates
• Web-based Training on Behavioral Health topics
• Peer Support
• Information and Access to Tools and Resources
• Information and Technical Support for funding opportunities
• Opportunities to provide input into National Policy/Legislation recommendations affecting Urban Indian Behavioral Health
• Participation as Trainers/Presenters on topics of expertise
NCUIH Wellness
Community of Learning

Wednesday 3/12/14 at 3 PM EST

Facilitator: Annie Lowe, MSW

This session will cover:

• Review of goal setting
• Learning new ideas for self-care
• “Flow” activities
Setting Goals

List a Goal: __________________________________________________________

• 3 sub-goals to reach your goal
  (1) ________________________________________________________________
  (2) ________________________________________________________________
  (3) ________________________________________________________________

• Set a date to check in:
  • ________________________________________________________________

• List potential challenges:
  • ________________________________________________________________

• List potential ways to overcome challenges
  • ________________________________________________________________

• List your community resources: who and what can help & support you to reach your goal; how will you recruit their help?
  • ________________________________________________________________

• The one step I will take by the beginning our next COL group:
  • ________________________________________________________________

Inspired by an activity from: Family Spirit Curriculum,
Excellence, Equity, Effectiveness
Similar Models

Learning Communities

Trend to move beyond social networking on the Web towards the building of learning communities (Reynard, 2009).

- Members depend on each other to achieve the learning outcomes for the course. Without the support and participation of a learning community, there is no online course (Palloff & Pratt, 1999).

- Fulton and Riel (1999) defines a learning community as “a group of individuals who are interested in a common topic or area and who engage in knowledge-related transactions as well as transformations within it.”
Similar Models

Community of Practice
Injury Control Research Center for Suicide Prevention (ICRC-S) CoP
  • Explores the ways in which suicide prevention researchers and practitioners can work together.

National Networks
National Network to Eliminate Disparities in Behavioral Health (NNED- SAMHSA)
  • Identifies and links "pockets of excellence" in reducing disparities and promoting behavioral health equity.
NNED Model

NNED Structure

Community & Ethnic-based Organizations & Networks

Knowledge Discovery and Diffusion Centers

National Facilitation Center

Excellence, Equity, Effectiveness
Welcome to NNEDshare!

A collaborative space to share, learn, and connect with community members across the country.

What is NNEDshare?

NNEDshare is a collaborative space to share resources and intervention efforts to improve the delivery of behavioral health care interventions in diverse populations, learn about resources and innovative community efforts across the county, and connect with others to learn from you and support your efforts.

How do I browse or search for resources or innovative interventions?

A Snapshot of Behavioral Health Issues for AANHPI Boys and Men

Search

Categories

Select Category

Recent Posts

Surveillance Success Stories: Fort Peck Indian Reservation
Pet Ownership Among Homeless Youth: Associations
Welcome to NNEDshare!

A collaborative space to share, learn, and connect with community members across the country.

- What is NNEDshare?
- How do I browse or search for resources or innovative interventions?
- Why participate in NNEDshare?
- What kinds of interventions or ideas can I submit?

Intersection of HIV/AIDS, Violence against Women, and Health Disparities
Surveillance Success Stories: Fort Peck Indian Reservation

Following a coordinated emergency response to a suicide cluster in 2010, tribal leaders began collecting data from multiple sources to describe detailed circumstances of suicide ideation, attempts and deaths. This allowed them to identify the role of substance abuse in suicide attempts and initiate family education for family members of...

more »

Pet Ownership Among Homeless Youth: Associations with Mental Health, Service Utilization and Housing Status

Twenty-three percent of homeless youth have pets, according to research from a team led by Harmony Rhoades at the University of Southern California. The team surveyed 396 homeless youth at two drop-in centers in Los Angeles. While previous studies have shown that pets can be very important to homeless young...

more »

Integration Playbook: A Guide to Integrating Behavioral Health in Primary Care Settings
Implementation Best Practices and Outcomes

1. Understand the readiness of the community.
2. Call for Participation for buy-in/commitment.
3. Create a safe space for open sharing.
4. Discourse guides/advances COL.
5. Tribal Practice Based Evidences (PBE) and ‘Promising Practices’ are relevant.
Implementation Best Practices and Outcomes (cont’d)

6. Understand expected outcomes from group.
7. Create space for in-person interaction.
8. Agenda or focus needs to be set.

“The smallness of the group and one to one interaction. It has allowed me to contact a very specific individual on a one and one who may have the same issue as I.”
Strategies for Building a Community of Learning

<table>
<thead>
<tr>
<th>Palloff and Pratt (1999)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Allow members to resolve their own disputes.</td>
</tr>
<tr>
<td>Clearly define the purpose of the group.</td>
</tr>
<tr>
<td>Promote effective leadership from within.</td>
</tr>
<tr>
<td>Define norms and a clear code of conduct.</td>
</tr>
<tr>
<td>Allow for a range of member roles.</td>
</tr>
<tr>
<td>Allow for and facilitate subgroups.</td>
</tr>
<tr>
<td>Create a distinctive gathering place for the group.</td>
</tr>
</tbody>
</table>
Community of Learning Limitations

• Buy-In/ Participation
• Direct Facilitation needed
• Interest wane/ Fresh Ideas
Table Breakout Questions

Have you participated in a COL-type model before? If so, do you feel it was impactful to your work or your field of work?

How would this model help in the work that you do?
THANK YOU!!

Questions???
Contact Information:

Kimberly Fowler, PhD, Director

Technical Assistance and Research Center (TARC)

Washington, DC

kfowler@ncuih.org

www.ncuih.org

Thank You!

Excellence, Equity, Effectiveness