



2019

American Indian and Alaska Native National Behavioral Health Conference

MAY 15-17, 2019

**>>> ALBUQUERQUE
CONVENTION CENTER**

**>>> ALBUQUERQUE
NEW MEXICO**

Preserving Wisdom > Promoting Innovation



CLARA FERNANDO

ARTIST

Clara Fernando was born and raised in Gallup NM, where her father worked for the AT&T railroad. She comes from the Tribes of the Laguna and Zuni Pueblos. She began her career in the late 1980s, developing her talents with pottery and jewelry making. She returned to the Laguna reservation in the early 1990s where she sold at a pull off from I-40, a scenic view overlook capturing the magnificent view of the Pueblo and Mount Taylor behind it. After 30 years of painting pottery, she recently started painting on canvas. Her love for color mixed with science and mathematics combine to portray traditional art with a modern edge. She is multifaceted, producing unique pieces of beaded and wire wrap jewelry, ceramic and traditional pottery, drawings and paintings on card stock and canvas. She creates new concepts but respects the traditional upbringing of her pueblo background. She currently resides in the village of Mesita with her two young sons, Takia, 16 and Seneca, 13. As a cultural artist, she continues to volunteer in her community and work towards positive solutions for the youth. She is building on her career by developing her company called "Designs by Pie". Pie was a childhood nickname given to her by her father. Her logo is the mathematic "Pi" sign with traditional design. You can find her art page on Facebook under Clara Fernando.

2019 American Indian and Alaska Native National Behavioral Health Conference

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Albuquerque Area Indian Health Board Inc.

Tóhajiilee Band of Navajos * Jicarilla Apache Nation * Mescalero Apache Tribe
Ramah Band of Navajos * Southern Ute Indian Tribe * Ute Mountain Ute Tribe

Letter of Support 10th Annual National Tribal Public Health Summit and The 2019 American Indian and Alaska Native National Behavioral Health Conference

Dear NIHB Health Summit and AI/AN National Behavioral Conference attendees,

On behalf of the Albuquerque Area Indian Health Board, Inc., we are pleased to welcome you to the 10th Annual National Tribal Public Health Summit and the 2019 American Indian and Alaska Native National Behavioral Health Conference. We are delighted that the Albuquerque Area Southwest Region has been selected to host these important conferences to promote the health and wellness of Indigenous people throughout the country.

Albuquerque Area Indian Health Board (AAIHB), Inc. has a long tradition of partnership with the National Indian Health Board, Inc. (NIHB) to host events, conferences and important health initiatives. We are especially grateful for the opportunity to share our indigenous hospitality, foods, history, culture, language and work; the proud home to the 27 Indigenous Bands, Nations, Pueblos and Tribes. We invite all of you to attend our culture night to observe some of our traditional songs and dances and bridge a greater understanding and appreciation of the core activities that have contributed to our health and resilience for generations. We also look forward to learning from each of you about the vigorous research, interventions, and promising preventive practices that are taking place to promote health and wellness on tribal lands and in urban Indigenous communities throughout our country. .

The AAIHB, namely the Tóhajiilee Band of Navajos, the Ramah Band of Navajos, the Jicarilla Apache Nation, the Mescalero Apache Tribe, the Ute Mountain Ute Tribe and the Southern Ute Indian Tribe, formed in 1980 for the interest and commitment toward the health and wellness of tribes; and provides leadership in matters that pertain to the health and well-being of its people.

AAIHB supports public health activities in the consortium communities that prevent and reduce the impact of adverse health conditions and health disparities; and continues to lead and advocate for maintaining trust responsibility by the federal government for quality health care services for all Native Americans. For four decades, AAIHB has provided high quality tribal health care services, training, and technical assistance to enhance tribal public health infrastructure, capacity, and wellness while respecting spiritual and cultural values.

AAIHB also serves as the parent organization to the Albuquerque Area Southwest Tribal Epidemiology Center (AASTEC) which serves the 27 Tribes, Bands, Pueblos and Nations in the Indian Health Service Albuquerque Area to provide public health services including epidemiology, community health assessment, health promotion/disease prevention intervention, program evaluation, public health surveillance, student development, health research, and training to improve the quality of life of American Indians.

On behalf of the Albuquerque Area Indian Health Board, Inc. and the indigenous people we serve, we welcome you all to the Southwest Region. We look forward to your support by your participation in these two important events. Thank you in advance for your attendance.

Sincerely,

Albuquerque Area Indian Health Board, Inc.



CULTURE NIGHT

Sponsored by



Albuquerque Area Indian Health Board Inc.

Tóhajiilee Band of Navajos * Jicarilla Apache Nation *

Mescalero Apache Tribe

Ramah Band of Navajos * Southern Ute Indian Tribe * Ute Mountain Ute Tribe

www.aaihb.org | www.aastec.org

Join Us for an
Exciting Evening at the
Indian Pueblo Cultural Center
Wednesday, May 15, 2019
6:00~8:00 PM



INDIAN PUEBLO
CULTURAL CENTER

Gateway to the 19 Pueblos of New Mexico

2401 12TH ST NW,

ALBUQUERQUE, NM 87104



Southwest Indigenous Buffet and Performance

In partnership with



And celebration of



THE FORMER MISS NAVAJO
NATION SUNNY DOOLEY
MISTRESS OF CEREMONIES
TRADITIONAL PHILOSOPHY,
SONGS, STORIES,

THE ZUNI OLLA MAIDENS
PERFORMANCE

SOUTHERN UTE TRIBE
YOUTH GROUP TRADITIONAL
SIGN LANGUAGE STORIES

AND MORE!!!

The Pueblo Indian Cultural Center is 2.2 miles from the Convention Center. **Transportation will be provided via shuttle bus** or you are welcome to arrange your own transportation via taxi or ride share or personal vehicle.

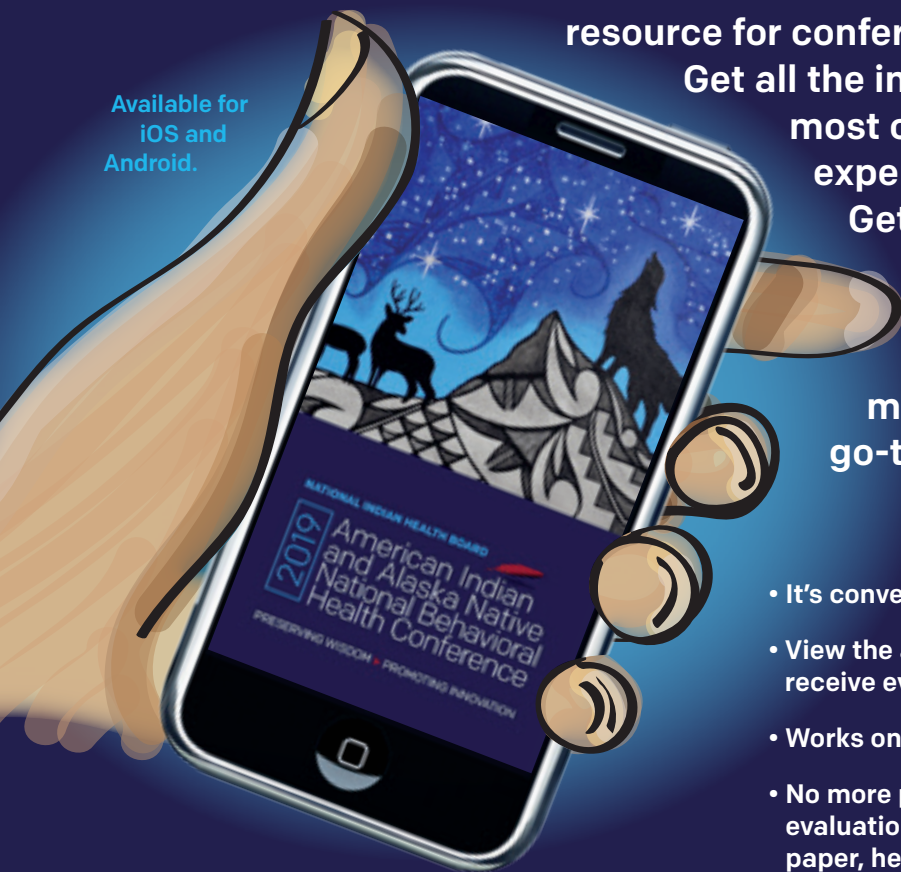
NIHB EVENT APP

The National Indian Health Board's event app is a resource for conference and event information.

Get all the information you need to get the most out of your NIHB conference experience by downloading the app!

Get everything you need from agendas, speaker information, conference logistics, maps, sponsors, exhibitors, social media links, and more. This is your go-to resource!

Available for
iOS and
Android.



- It's convenient.
- View the agenda, speakers, sponsors, maps, evaluations, receive event reminders, and more!
- Works on all your mobile devices.
- No more paper evaluations! Submitting electronic evaluations via the app saves roughly 3,000 sheets of paper, helping to reduce NIHB's environmental footprint.
- **YOU CAN WIN PRIZES BY FILLING OUT SESSION EVALUATIONS USING THE APP!**
The evaluations are for Plenary Sessions, Workshops, and Roundtable Sessions.



TO USE THE APP:

- 1 Download the app by entering the following URL into your mobile browser: <https://crowd.cc/s/1E1IO>
- 2 Open the app and tap on NIHB 2019 American Indian & Alaska Native National Behavioral Health Conference
- 3 Click Login for more features!
 - a. Enter your First and Last Name
 - b. Type in your email and a verification code will be sent to your email inbox
 - c. Enter the verification code from your email

OR just use
this QR code to
download the
app and then
follow from #2 !!



WHAT IS THE NATIONAL INDIAN HEALTH BOARD?



PURPOSE

To advocate for the rights of all federally recognized American Indian and Alaska Native Tribes through the fulfillment of the trust responsibility to deliver health and public health services.

MISSION

Established by the Tribes to advocate as the united voice of federally recognized American Indian and Alaska Native Tribes, NIHB seeks to reinforce Tribal sovereignty, strengthen Tribal health systems, secure resources, and build capacity to achieve the highest level of health and well-being for our People.

WHAT IS THE NATIONAL INDIAN HEALTH BOARD?

The National Health Board (NIHB) is a 501(c) 3 not for profit, charitable organization serving all 573 federally recognized Tribal governments for the purpose of ensuring that the federal government upholds its trust responsibilities to provide health care to the Tribes. Whether Tribes operate their own health care delivery systems through contracting and compacting or receive health care directly from the Indian Health Services (IHS), NIHB is their national advocate. NIHB also provides policy analysis on American Indian and Alaska Native (AI/AN) health and public health services, facilitates Tribal budget consultation, delivers timely information to all Tribal Governments, leads national Tribal public health programs, assists with Tribal capacity building, provides national and regional Tribal health events, conducts research, and provides training and technical assistance. These services are provided to Tribes, Area Health Boards, Tribal organizations, Tribal Leaders and members as well as federal agencies and private foundations. NIHB works collaboratively with the Tribes, through the Tribal health organizations, in the twelve IHS Service Areas, to accurately capture and present the Tribal perspective in response to federal legislation, regulations and policy. NIHB also serves as a conduit to foster collaboration between Indian Country and national and international organizations, foundations, corporations, academic institutions and other key stakeholders, in its quest to advance Indian health.

OUR BOARD OF DIRECTORS

Because NIHB serves all federally-recognized Tribes, our work must reflect the unity and diversity of Tribal values and opinions in an accurate, fair, and culturally-sensitive manner. This objective is accomplished through the efforts of the NIHB Board of Directors, which is comprised of representatives elected by the Tribes in each of the twelve IHS Service Areas, through their regional Tribal Health Board or health-serving organization. Each Health Board elects a representative and an alternate to sit on the NIHB Board of Directors. In Areas where there is no Area Health Board, Tribal governments choose a representative. The NIHB Board of Directors elects an Executive Committee comprised of Chairman, Vice-Chairman, Treasurer, and Secretary, who serve staggered, two-year terms and a Member-at-Large who serves a one year term. The Board of Directors meets quarterly.

NIHB BOARD OF DIRECTORS

NIHB serves and represents all Federally Recognized Tribes through our Board of Directors and partnership with Tribal Health Boards or health-serving organizations in each of the twelve IHS Service Areas:

- Victoria Kitcheyan – Winnebago Tribe of Nebraska Tribal Council Member, NIHB Chairperson and Great Plains Area Representative
- William Smith – Valdez Native Tribe Chief, NIHB Vice Chairperson and Alaska Area Representative
- Lisa Elgin – California Rural Indian Health Board Chair, NIHB Secretary and California Representative
- Sam Moose – Director of Human Services at Fond du Lac Band of Lake Superior Chippewa, NIHB Treasurer and Bemidji Area Representative
- Andrew Joseph, Jr. – Confederated Tribes of the Colville Reservation Tribal Council Vice Chair, Northwest Portland Area Indian Health Board Chairperson, NIHB Member-at-Large and Portland Area Representative
- Donnie Garcia – Albuquerque Area Indian Health Board Chairperson, Albuquerque Area Representative
- Kaci Wallette – Fort Peck Assiniboine and Sioux Tribal Council Member, Billings Area Representative
- Beverly Cook – St. Regis Mohawk Tribe Chief, Nashville Area Representative
- Jonathan Nez – President Navajo Nation, Navajo Area Representative
- Marty Wafford – Southern Plains Tribal Health Board Chairperson, Oklahoma City Area Representative
- Phoenix Area – Vacant
- Sandra Ortega – Tohono O'odham Nation Tribal Council Member, Tucson Area Representative

AGENDA AT-A-GLANCE

WEDNESDAY, MAY 15 (PRE-CONFERENCE)

	LA SALA LOBBY	ANASAZI	COCHITI	PICURIS	SANTA ANA
8:00 am					
9:00 am					
10:00 am			8:00 am - 12:00 pm SASSP/DVPP Area Project Officer Meeting (Invite Only)		9:00 am - 12:00 pm IHS Zero Suicide Initiative: Profiles in Progress (Invite Only)
11:00 am	8:00 am - 5:00 pm			8:30 am - 3:45 pm Dialectical Behavioral Therapy (DBT) Training (Pre-registration required)	
12:00 pm					
1:00 pm	Exhibit Hall Open				
2:00 pm		1:00 pm - 5:00 pm Culture and Drugs Don't Mix (Pre-registration Required)	1:00 pm - 5:00 pm START UP!: Art Therapy Trauma Treatment for Native American Youth (Pre-registration Required)		
3:00 pm					3:00 pm - 5:00 pm Centers for Disease Control & Prevention (CDC) Environmental Health Discussion Session
4:00 pm					
5:00 pm					

THURSDAY, MAY 16

	LA SALA LOBBY	AZTEC/BRAZOS/CIMARRON/ DONA ANA/GALLESTEO	ANASAZI	COCHITI	TAOS
6:30 am		6:30 am - 7:30 am — Fitness Event: Walk/Run (Meet at registration desk)			
8:00 am		8:30 am - 10:00 am Plenary Session			
9:00 am					
10:00 am			10:30 am - 12:00 pm Healing through Culture and Story: The Family Wellness Warriors Initiative	10:30 am - 12:00 pm Wisdom Warriors: Evidence- based Indigenous Healing	10:30 am - 12:00 pm Native Veteran Curriculum: Healing the Returning Warrior
11:00 am					
12:00 pm	8:00 am - 5:00 pm		12:00 pm - 1:30 pm — SPECIAL SESSION: Therapy Dogs — TAOS		
1:00 pm	Exhibit Hall Open		1:30 pm - 3:00 pm Successes and Challenges Implementing Infant and Early Childhood Mental Health Consultation	1:30 pm - 3:00 pm Documenting Traditional Elder Knowledge: Indigenizing Prevention and Health Promotion	1:30 pm - 3:00 pm Zero Suicide in Oklahoma - Tribal Healthcare System Implementation
2:00 pm					
3:00 pm			3:15 pm - 4:15 pm — SPECIAL SESSION: Poster Presentations & Networking — AZTEC/		
4:00 pm					
5:00 pm	5:30 pm - 6:30 pm Clinical Scholars Information Reception Hosted by RWJF		4:30 pm - 5:30 pm Strengthening our Nets		4:30 pm - 5:30 pm Indian Health Manual: Chapter 34 Suicide Prevention and Care Program Policy
6:00 pm					

FRIDAY, MAY 17

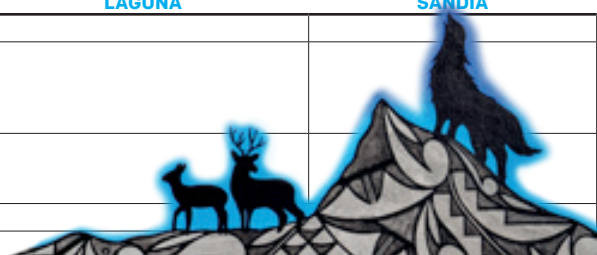
	LA SALA LOBBY	AZTEC/BRAZOS/CIMARRON/ DONA ANA/GALLESTEO	ANASAZI	COCHITI	TAOS
8:00 am					
9:00 am			8:30 am - 10:00 am Leveraging Cultural Assets in Impacting Outcomes in Tribal Wellness Court Programs	8:30 am - 10:00 am Healing the Healers: Lessons from the Good Road of Life Training for Mental Health Professionals	8:30 am - 10:00 am Integrating Behavioral Health with Cancer Prevention and Treatment
10:00 am					
11:00 am	8:00 am - 3:00 pm		10:15 am - 11:45 am The Lasting Effects of Lateral Violence in Native Communities	10:15 am - 11:45 am "Sa'ah naaghei bik'eh gozhoo" - Apache Path to Wellness	10:15 am - 11:45 am Multi-level programming to support public health intervention and prevention efforts
12:00 pm	Exhibit Hall Open				
1:00 pm			12:45 pm - 1:45 pm Top line findings and recommendations of Alaska's opioids needs assessment	12:45 pm - 1:45 pm Kupuna (elder) Councils: Using Native Hawaiian Traditional Healing & Cultural Practices to Reconnect Our Lahui (People) in Healing and Wellness	12:45 pm - 1:45 pm Suicide Screening: Screening Evidence, Clinical Pathways and Treatment Priorities
2:00 pm		2:00 pm - 3:00 pm Closing Plenary Session			
3:00 pm					

KEY

Track: Community-based
Behavioral Health Services

Track: Sharing Traditional
& Promising Practices

American Indian and Alaska Native National Behavioral Health Conference

LAGUNA	SANDIA	TAOS	SAN MIGUEL/RUIDOSO	Wednesday MAY 15 6:00 pm - 8:00 pm CULTURE NIGHT LOCATION: Indian Pueblo Cultural Center HOSTED BY: Albuquerque Area Indian Health Board and local Tribes
		9:00 am - 12:00 pm National Opioid Response Planning	9:00 am - 10:30 am Indian Health Service (IHS) and U.S. Department of Veterans Affairs Listening Session 10:30 am - 12:00 pm Centers for Disease Control and Prevention (CDC) Listening Session	
1:00 pm - 5:00 pm National Action Alliance for Suicide Prevention American Indian and Alaska Native Task Force Meeting		1:00 pm - 5:00 pm Tips for Successful Grant Writing	1:00 pm - 3:00 pm Special Listening Session: Developing the National Strategies for HIV and Viral Hepatitis and an STD	

PICURIS	SANDIA/SANTA ANA	NAVAJO/NANBE	ISLETA/JEMEZ	SAN JUAN
10:30 am - 12:00 pm A qualitative analysis: A pilot study to determine the efficacy of a vetted provider program for tribal Community Health Aides serving rural and remote regions	10:30 am - 12:00 pm A Path to Change - From Small Tests to Big Results	10:30 am - 12:00 pm Tribal Medication Assisted Treatment (MAT) Project Efforts to Reduce Opioid Use Disorders (OUD) among American Indian and Alaska Natives in CA	APO-TEC Meeting	
1:30 pm - 3:00 pm A Competency based Approach to Developing a Rural Behavioral Health Workforce	1:30 pm - 3:00 pm Responding to Concerning Posts on Social Media: Tips and Tools for Adults who work with Native Youth	1:30 pm - 3:00 pm Building Resilience, Building Health: An Integrated Approach to Suicide Prevention and Community Wellness	APO-TEC Meeting	1:30 pm - 2:30 pm Culture as Prevention: Addressing Adverse Childhood Experiences in Indian Country
BRAZOS/CIMARRON/DONA ANA/GALLESTEO				
4:30 pm - 5:30 pm Clinicians Lived Experiences with Culturally Adapting Empirically Supported Treatments for American Indian and Alaska Native Populations	4:30 pm - 5:30 pm People of a Place: Comparing Indigenous evaluation approaches with Western frameworks	4:30 pm - 5:30 pm Indian Country and Adverse Childhood Experiences	APO-TEC Meeting	4:30 pm - 5:30 pm Cultural Connections and the Northern Cheyenne Tribal Board of Health's Cheyenne Connectedness Survey Results

PICURIS	SANDIA/SANTA ANA	NAVAJO/NAMBE	ISLETA/JEMEZ	SAN JUAN
8:30 am - 10:00 am Innovative Strategies with the Expressive Arts, Behavioral Health Aides and Community Centers	8:30 am - 10:00 am A public health professional-research partnership to reduce adolescent risk for substance use and suicide on the Navajo Nation	8:30 am - 10:00 am (CMS) Improving American Indian and Alaska Native (AIAN) Behavioral Healthcare through improved access to Medicaid services and reimbursements to Indian health care providers.	8:30 am - 10:00 am Teaching Mental Health in Native Communities: Lessons Learned and Cultural Considerations.	
10:15 am - 11:45 am Strengths, Challenges and Highlights of the Indian Health Service Behavioral Health Initiatives: MSPI & DVPI	10:15 am - 11:45 am Empowering Native Youth to Assist Their Peers in Remote Navajo Schools	10:15 am - 11:45 am Advancing Indigenous School-Based Health Services: Wholeness and Healing by Design	10:15 am - 11:45 am Growing Our Own: A Grassroots Approach to Increasing Behavioral Health Access for American Indian and Alaska Native People	
12:45 pm - 1:45 pm Collaboration for Youth Focused Suicide Prevention	12:45 pm - 1:45 pm A public health-research partnership to promote adolescent sexual and reproductive health on the Navajo Nation	12:45 pm - 1:45 pm Incorporating the Recovery Wheel in a Therapeutic Village of Care Treatment Model	12:45 pm - 1:45 pm It All Begins with A Story: Community-Based Participatory Research, Traditional Foods, Place-Making, and Storytelling for Positive Comprehensive Health Outcomes	12:45 pm - 1:45 pm Problem Gambling in Tribal Communities: Storytelling and Conversations on a Hidden Public Health Issue.
Track: Behavioral Health Integration-Substance Use Disorders, Mental Health Disorders, Suicide Prevention		Track: Behavioral Health Workforce Innovation		Track: MSPI & DVPI Grantee

2019

NATIONAL INDIAN HEALTH BOARD

American Indian and Alaska Native
National Behavioral Health Conference

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PRE-CONFERENCE AGENDA

WEDNESDAY >>> MAY 15, 2019

6:30 am - 6:00 pm**Registration and Information Desk****8:30 am - 3:45 pm****Dialectical Behavioral Therapy (DBT) Training****ROOM: PICURIS****PRESENTER:****Dr. David Joel Beckstead**

This workshop introduces health-care professionals to Dialectical Behavior Therapy (DBT) and helps with decisions about whether DBT is the right fit. Clinicians working with patients who have multiple problems are often stymied by the complex clinical presentations and challenges that arise during treatment. This introductory session will describe the theoretical and empirical foundations for DBT. It covers the basic principles of balancing change and acceptance strategies in standard DBT and discusses ways of applying these strategies and principles to your clients. Participants can expect to learn useful DBT skills; however, this workshop is not sufficient for acquiring the competence necessary to conduct comprehensive DBT. Suggestions for additional training and self-study will be provided. Methods of instruction include lecture and demonstrations of treatment. This workshop is appropriate for mental health providers who are exploring whether learning DBT to a standard of clinical proficiency would benefit their own clinical skills and their clients suffering from complex disorders. It can also be

useful for health care providers, outside of mental health, who are interested in determining whether DBT is appropriate for their patients. Teaching methods include lecture and demonstration to illustrate the treatment strategies used in DBT.

Primary Objective: As a result of this training participants will be able to make a decision about using DBT with clients.

Learning Objectives: As a result of this training, participants will be able to:

1. Describe two key characteristics each of the theoretical and practice based foundations for DBT.
2. List and describe the main components of DBT and apply them to your everyday practice.
3. Identify the main problem areas that DBT addresses in high-risk populations.
4. Describe, integrate and utilize the goals of the four DBT skills modules.
5. Describe and create an action plan to utilize DBT skills and interventions in your everyday practice.
6. Describe, develop and apply 3 key strategies to utilize with the American Indian/Alaska Native population.
7. Describe and understand the fit of DBT for your clinical practice and treatment center.

Agenda:

- 8:30 amRegistration, Sign-in
 9:00 amOverview/Foundations of DBT
 10:15 amBREAK
 10:30 am...Structure of DBT/DBT Skills Mindfulness & Distress Tolerance
 11:45 amLUNCH
 1:00 pmDBT Skills: Emotion Regulation & Interpersonal Effectiveness
 2:15 pm.....BREAK
 2:30 pmIs DBT Right for you and your clients?
 3:45 pmQ & A, Evaluation, and Sign-out

5 CE or 5 NBCC hours provided by the UNM Department of Psychiatry & Behavioral Sciences, The Division of Community Behavioral Health

Disclosure Statement: The presenters have no financial relationship to this program.

9:00 am - 12:00 pm**National Opioid Response Planning****ROOM: TAOS****PRESENTERS:**

Jessica Leston, *Clinical Programs Director, Northwest Portland Area Indian Health Board*

Robert Foley, *Chief Program Officer, National Indian Health Board*

High rates of opioid and substance use among AI/AN people have created an urgency for tribes to come together in a manner that meaningfully improves the well-being of Tribal communities. Coordination and collaboration among tribes across Indian Country will help contribute to an overall Tribal opioid response. The Northwest Portland Area Indian Health Board and National Indian Health Board are working to build a strategic framework to be co-owned by all Tribes to help form a clear foundation to develop and elevate priorities for action and further learning. This session will be highly interactive in order to formulate content across the different pillars of a proposed cross-tribal strategic framework (including but not limited to: prevention, clinical treatment and recovery, perinatal substance use, harm reduction, and data).

9:00 am - 10:30 am**Indian Health Service (IHS) and U.S. Department of Veterans Affairs Listening Session****ROOM: SAN MIGUEL/RUIDOSO****SPEAKERS:**

RADM Michael Weahkee, *Deputy Director, Indian Health Service*

P. Benjamin Smith, *Intergovernmental Affairs, Indian Health Service*

Thomas F. Klobucar, *Executive Director, Office of Rural Health, U.S. Department of Veteran Affairs*

Stephanie E. Birdwell, *Director, Office of Tribal Government Relations, U.S. Department of Veterans Affairs*

The Indian Health Service (IHS) and U.S. Department of Veterans Affairs will hold a Listening Session to hear comments and recommendations to consider prior to formally initiating Tribal Consultation and Urban Confer on updating a Memorandum of Understanding (MOU) between IHS and VA later this year. In 2010, IHS and VA updated their 2003 MOU, to build upon its purpose for coordination, collaboration, and resource-sharing between IHS and VA to improve the health status of American Indian and Alaska Native Veterans. IHS and VA welcomes your input on conducting Tribal Consultation and Urban Confer on the MOU, as well as, other IHS or VA programs.

10:30 am - 12:00 pm**Centers for Disease Control and Prevention (CDC) Listening Session - E-cigarettes and Indian Country****ROOM: SAN MIGUEL/RUIDOSO****PRESENTER:**

Corrine Graffunder

The Office on Smoking and Health (OSH) is at the forefront of the nation's efforts to reduce deaths and prevent chronic diseases that result from tobacco use. The topic, along with smoking cessation is the use of electronic cigarettes (e-cigarettes). OSH would like to hear from tribal public health practitioners and leaders on the use, impacts, and challenges of e-cigarettes in their communities and across Indian Country

12:00 pm - 1:00 pm**LUNCH (On Your Own)**

1:00 pm - 5:00 pm**Tips for Successful Grant Writing****ROOM: TAOS****FACILITATOR:****Robert Foley, M.Ed., National Indian Health Board**

American Indian and Alaska Native Tribes and Tribal organizations were excluded when the U.S. federal government was formulated its public health system. Because of this significant oversight, federal government dollars earmarked for public health systems, practices, and activities may not make it directly to Tribes. For this reason, Tribes rely more heavily than other entities on grant funding to support public health operations, and development work becomes a significant part of any Tribal public health division. This institute will provide some fundamentals tips for preparing competitive grant applications for government and private funding sources. Key topics covered will include: 1) how to identify a grant 2) how to define your project, and 3) how to outline a grant. The session will include interactive activities with participants so that they can practice some of the skills discussed in the institute.

Learning Objectives:

By the end of this institute, participants will be able to:

- Explain the steps in generating a proposal
- Outline a grant proposal
- Describe a logic model
- Describe the elements of a work plan
- Outline a project narrative

No credits provided

Disclosure Statement: The presenters have no financial relationship to this program.

1:00 pm - 5:00 pm**START UP! : Art Therapy Trauma Treatment for Native American Youth****ROOM: COCHITI****PRESENTER:****Carey MacCarthy, MA-ATR, LPCC**

The AI/AN National Behavioral Health Conference will host a pre-conference training session on Art Therapy Trauma Treatment for Native American Youth. This workshop, held on pre-conference day, Wednesday, May15, 2019, will introduce health-care professionals to the START UP! Program: Art Therapy Trauma Treatment for Native American Youth.

START UP! is aimed at healing historical and inter-generational trauma by bringing mental health to the tribal classroom as prevention and early intervention of PTSD, depression, anxiety, substance abuse and suicide in children and adolescents. Trauma-informed care is important in working with AI/AN youth. Teachers and mental health professionals will be introduced to the Neurobiology of trauma and an abbreviated presentation on Neurodevelopmental Art Therapy Four Stage Chronic Trauma treatment model. Participants will be guided through Art Therapy experientials using various art media.

Learning Objectives:

1. Understanding Neurobiology of Trauma
2. Learn principals of Art Therapy and Neurodevelopmental Art Therapy
3. Understand the Efficacy of Art Therapy for the Healing of Trauma in native Youth through research results

No credits provided.

Disclosure Statement: The presenters have no financial relationship to this program.

1:00 pm - 5:00 pm**Culture and Drugs Don't Mix****ROOM: ANASAZI****PRESENTER:****Teresia M. Paul, M.S. (Oglala Lakota), Student Health Program Specialist, BIE Office of the Director**

The Culture and Drugs Don't Mix (CDDM) Train-the-Trainer is a collaborative effort between the Bureau of Indian Education (BIE), the Indian Health Service (IHS), and the Substance Abuse and Mental Health services Administration (SAMHSA). The CDDM initiative strives to educate students about healthy alternatives to alcohol and other drug use and ensure that students understand that meth is NOT a part of Native culture. The goal of the CDDM is to provide a culturally appropriate alcohol and drug prevention tool for Native American youth through community and inter-agency involvement. The interactive speaker series has been held in BIE and Tribally-Controlled schools, as well as Boys and Girls Clubs in Indian Country. Each session features a speaker from Tribal justice, a behavioral health professional, and a cultural expert from the local community. This Train-the-Trainer series will walk each participant through the nine sessions of the CDDM curriculum, and will provide information and guidance to allow participants to lead the CDDM program in schools within their own Tribal communities.

1:00 pm - 3:00 pm**SPECIAL LISTENING SESSION:
Developing the National Strategies for HIV and Viral Hepatitis and an STD****ROOM: SAN MIGUEL/RUIDOSO****FACILITATORS:****Melisa Habel, Health Scientist Office of HIV/AIDS and Infectious Disease Policy, HHS****Nate Fecik, Public Health Advisor, Office of HIV/AIDS and Infectious Disease Policy, HHS**

The current National HIV/AIDS Strategy (NHAS) and the National Viral Hepatitis Action Plan (NVHAP) expire in 2020. Scientific advances, the evolution of the health care system, emerging strategies for effective prevention, treatment and cure, and ongoing and emerging challenges have created imperatives and opportunities to develop the next iterations of these strategies. The HHS Office of HIV/AIDS and Infectious Disease Policy (OHAIDP), in close collaboration with federal leadership across HHS and other departments as well as nonfederal stakeholders, coordinates development of the next iterations of the national HIV and viral hepatitis strategies. In addition,

OHAIDP is collaborating with federal partners to develop a STD Federal Action Plan, as the nation continues to see increases in sexually transmitted diseases. During this session, federal leaders will provide brief remarks on the process, policies, and scientific advances that guide HHS' efforts to develop these initiatives. Tribal leaders, health department staff, researchers, individuals living with and at risk for infection, and other stakeholders from Indian Country are encouraged to attend a listening session to share with federal leaders their input for these national strategies and federal action plan.

1:00 pm - 5:00 pm

National Action Alliance for Suicide Prevention American Indian and Alaska Native Task Force Meeting

ROOM: LAGUNA

3:00 pm - 5:00 pm

Centers for Disease Control and Prevention (CDC) Environmental Health Discussion Session

ROOM: SANTA ANA

The purpose of this listening session is to help elevate Indigenous knowledge and the expertise of Tribal leaders in addressing environmental concerns. The National Indian Health Board (NIHB) is convening listening sessions to discuss environmental health concerns in Tribal Nations and innovative ways Tribes are addressing these concerns. The information shared during these sessions will inform the development of national programs and policies.

5:00 pm - 6:30 pm

Exhibitor & Vendor Set-up

6:00 pm - 8:00 pm

CULTURE NIGHT

INDIAN PUEBLO CULTURAL CENTER

Hosted by the Albuquerque Indian Health Board and local Tribes.

You won't want to miss this exciting evening at the Indian Pueblo Center featuring a Southwest indigenous buffet and cultural stories, dances and songs. Culture night is sponsored by the Albuquerque Area Indian Health Board in partnership with Tóhajiilee Band of Navajos, Jicarilla Apache Nation, Mescalero Apache Tribe, Ramah Band of Navajos, Southern Ute Indian Tribe, Ute Mountain Ute Tribe.

SPECIAL SESSIONS

(BY INVITATION ONLY):

8:00 am - 12:00 pm

SASPP/DVPP Area Project Officer Meeting

ROOM: COCHITI

9:00 am - 12:00 pm

Indian Health Service (IHS) Zero Suicide Initiative: Profiles in Success

ROOM: SANTA ANA

PRESENTER:

Sean K. Bennett, L.C.S.W., BCD CDR, USPHS, Public Health Advisor National Lead, Zero Suicide Initiative, Division of Behavioral Health, Office of Clinical and Preventive Services, Indian Health Service

Objectives:

- Increased understanding best and promising practices among the eight (8) IHS Zero Suicide Initiative Program
- Viewing work of Indigi-Dreams native media organization producing AIAN ZSI Digital Narrative
- Onsite interviews of AIAN principals implementing the Zero Suicide model in Indian country





CONFERENCE AGENDA

THURSDAY >>> MAY 16, 2019

6:30 am - 6:00 pm
Registration and Information Desk Open
8:00 am - 5:30 pm
Exhibit Hall Open
8:30 am - 10:00 am
Plenary Session
ROOM: AZTEC/BRAZOS/CIMARRON/DONA ANA/GALLESTEO

- Opening Prayer, Opening Comments
- Welcome
- Opening remarks from Donnie Garcia, Albuquerque Area Indian Health Board Chairperson, NIHB Albuquerque Area Representative
- Theresa Galvan, National Tribal Advisory Committee on Behavioral Health (NTAC) remarks
- Dr. Evan Adams, Coast Salish actor and physician from the Tla'amin First Nation remarks
- Closing remarks from Stacy A. Bohlen, NIHB Chief Executive Officer

10:00 am - 10:30 am
BREAK
10:30 am - 12:00 pm

BREAKOUT SESSION I

(CONCURRENT BREAKOUT SESSIONS)

WORKSHOPS

10:30 am - 12:00 pm
Track: Community-based Behavioral Health Services
Healing through Culture and Story: The Family Wellness Warriors Initiative
ROOM: ANASAZI
PRESENTERS:
Polly Andrews
Alfred Quijance
Learning Objectives:

- Describe how cultural strengths can be used to address the spiritual, emotional, mental, and physical effects of abuse
- Use new strategies for working with the community to end domestic violence, child abuse, and child neglect
- Harness the power of story to break the silence associated with abuse and initiate a safe, healing journey
- Describe how helping adults who have experienced violence and abuse can lead to better health and conditions for children

No credits provided.
Disclosure Statement: The presenters have no financial relationship to this program.

10:30 am - 12:00 pm**Track: Sharing Traditional & Promising Practices****Wisdom Warriors: Evidence-based Indigenous Healing****ROOM: COCHITI****PRESENTERS:****Becky Bendixen****Learning Objectives:**

- We will demonstrate through a Power Point and audience participation how simple tools can bring about change in the way you manage problems from chronic disease. The audience will experience a sense of community and empowerment during our session. Several tools will be discussed and modeled.
- We will describe how you can tailor evidence-based tools to fit into our Indigenous life styles and communities. We will demonstrate how our indigenous selves have been oppressed to the point it makes our physical selves ill.
- We will identify ways that various tribes can use the same tools even if their cultures and traditions may vary greatly. We will work with the audience to show real life examples of how you can use the program for your own tribe. We will identify how we are all different and yet the same inside.
- Participants will have first-hand knowledge as to steps to bring evidence based program to diverse communities.

*No credits provided.**Disclosure Statement: The presenter has no financial relationship to this program.***10:30 am - 12:00 pm****Track: Behavioral Health Integration-Substance Use Disorders, Mental Health Disorders, Suicide Prevention****Native Veteran Curriculum: Healing the Returning Warrior****ROOM: TAOS****PRESENTERS:****Sean Bear, BA, CADC****Raymond Daw, MA****Learning Objectives:**

- Discuss historical attitudes and trauma associated with native warfare
- Compare traditional healing practices to mainstream mental health services for veterans
- Identify ways to improve engagement with native veterans around mental health disorders

*No credits provided.**Disclosure Statement: The presenters have no financial relationship to this program.***10:30 am - 12:00 pm****Track: Behavioral Health Workforce Innovation****A qualitative analysis: A pilot study to determine the efficacy of a vetted provider program for tribal Community Health Aides serving rural and remote regions****ROOM: PICURIS****PRESENTERS:****Seth Green****Royleen Ross****Learning Objectives:**

- Identify strengths and resiliency of remote and rural community health aide providers in Indian Country.
- Demonstrate how intersectionality of behavior health interventions and community health program workforce may result in workforce longevity and retention.
- Discuss unique aspects to the Bering Straits region of Alaska that impact strengths and challenges to intervention, access to care, within the PCMH integrated care model.

*No credits provided.**Disclosure Statement: The presenters have no financial relationship to this program.***10:30 am - 12:00 pm****Track: MSPI/DVPI Grantee****A Path to Change - From Small Tests to Big Results****ROOM: SANDIA/SANTA ANA****PRESENTERS:****Kirsten Krane****Learning Objectives:**

- Identify areas ripe for change in their organization that align with programmatic or evidence-based goals.
- By the end of the session, participants will be able to formulate a plan to achieve a larger goal by breaking it into smaller objectives first.
- By the end of the session, participants will be able to create a PDSA cycle that will set the participants up to begin creating change within their own programs.

*No credits provided.**Disclosure Statement: The presenters have no financial relationship to this program.***KEY****Track: Community-based Behavioral Health Services****Track: Sharing Traditional & Promising Practices****Track: Behavioral Health Integration-Substance Use Disorders, Mental Health Disorders, Suicide Prevention****Track: Behavioral Health Workforce Innovation****Track: MSPI & DVPI Grantee**

10:30 am - 12:00 pm

Track: Behavioral Health Integration-Substance Use Disorders, Mental Health Disorders, Suicide Prevention

Tribal Medication Assisted Treatment (MAT) Project Efforts to Reduce Opioid Use Disorders (OUD) among American Indian and Alaska Natives in CA

ROOM: NAVAJO/NAMBE

PRESENTERS:

Claradina Soto, PHD. MPH

Gloria Miele, PhD

Melissa Eidman

Learning Objectives:

- Demonstrate and highlight culturally specific programs that are addressing prevention, treatment, and recovery needs of AI/AN communities in CA to reduce OUD.
- Describe how the Tribal Medication Assisted Treatment (MAT) program is implemented in Urban and Indian Health Programs.
- Illustrate how providers and clinicians are provided OUD training and technical assistance.
- Understand the identified strengths, weaknesses and available resources to address OUD.

No credits provided.

Disclosure Statement: The presenters have no financial relationship to this program.

12:00 pm - 1:30 pm

LUNCH (On Your Own)

12:00 pm - 1:00 pm

SPECIAL SESSION: Therapy Dogs

ROOM: TAOS

1:30 pm - 3:00 pm

BREAKOUT SESSION II

(CONCURRENT BREAKOUT SESSIONS)

WORKSHOPS

1:30 pm - 3:00 pm

Track: Community-Based Behavioral Health Services

Successes and Challenges Implementing Infant and Early Childhood Mental Health Consultation

ROOM: ANASAZI

PRESENTERS:

Whitney Danz, MSW

Marcella Adolph, MSW

Learning Objectives:

- Describe, integrate and utilize four key characteristics of the Infant and Early Childhood Mental Health Consultation Model implemented in the CSKT community.
- Describe strategies for communicating the preliminary findings of the IECMHC Model to the families being evaluated.
- Describe an action plan for implementing the IECMHC model in your everyday practice including listing potential barriers for implementation and strategies for overcoming them.
- Describe how key learning from Project LAUNCH's work that will inform your implementation strategies

1.5 CE or 1.5 NBCC hours provided by the UNM Department of Psychiatry & Behavioral Sciences, The Division of Community Behavioral Health

Disclosure Statement: The presenters have no financial relationship to this program.

KEY

Track: Community-based Behavioral Health Services

Track: Sharing Traditional & Promising Practices

Track: Behavioral Health Integration-Substance Use Disorders, Mental Health Disorders, Suicide Prevention

Track: Behavioral Health Workforce Innovation

Track: MSPI & DVPI Grantee

1:30 pm - 3:00 pm**Track: Sharing Traditional & Promising Practices****Documenting Traditional Elder Knowledge: Indigenizing Prevention and Health Promotion****ROOM: COCHITI****PRESENTERS:****Maria Crouch, MS****Rebecca Ervin****Melissa Castaneda****Learning Objectives:**

- Understand the history and context of traditional Elder knowledge as a system and transmission of prevention, health promotion, and resiliency.
- Describe how understanding cultural and spiritual Elder knowledge will impact and benefit current and future generation's health and wellness.
- Learn strategies to enhance and strengthen intergenerational dialogue in order to gain deepened understandings of diverse cultural knowledge for documentation and use in healthcare settings and beyond.
- Describe how cultural knowledge of self can both favorably and unfavorably impact wellness and prevention for tribal health.

1.5 CE or 1.5 NBCC hours provided by the UNM Department of Psychiatry & Behavioral Sciences, The Division of Community Behavioral Health

Disclosure Statement: The presenters have no financial relationship to this program.

1:30 pm - 3:00 pm**Track: Behavioral Health Integration — Substance Use Disorders, Mental Health Disorders, Suicide Prevention****Zero Suicide in Oklahoma — Tribal Healthcare System Implementation****ROOM: TAOS****PRESENTERS:****Kristie Brooks, MS, LPC****Shannon Dial, PhD, LMFT****Learning Objectives:**

- Describe, understand and utilize the 7 essential elements of Zero Suicide
- Apply the knowledge just learned about different implementation strategies of Zero Suicide to decide which the best fit for your agency is.
- Understand and describe 4 ways that Zero Suicide operates for two different large tribal healthcare systems.
- Describe how the Joint Commission's national patient safety goal of identifying those at risk for suicide is best achieved through screening and assessment implementation.

1.5 CE or 1.5 NBCC hours provided by the UNM Department of Psychiatry & Behavioral Sciences, The Division of Community Behavioral Health

Disclosure Statement: The presenters have no financial relationship to this program.

1:30 pm - 3:00 pm**Track: Behavioral Health Workforce Innovation****A Competency based Approach to Developing a Rural Behavioral Health Workforce****ROOM: PICURIS****PRESENTERS:****Sheri Patraw****Jolene Firmin Telford****Learning Objectives:**

- Describe a training model that integrates adult-learning principles and cultural values.
- Practice the use of a competency-based skills assessment tool
- Identify opportunities to integrate Native Elders and Traditional Ways of Knowing into learning experiences
- Use competency-based tools to support professional development goals.

No credits provided.

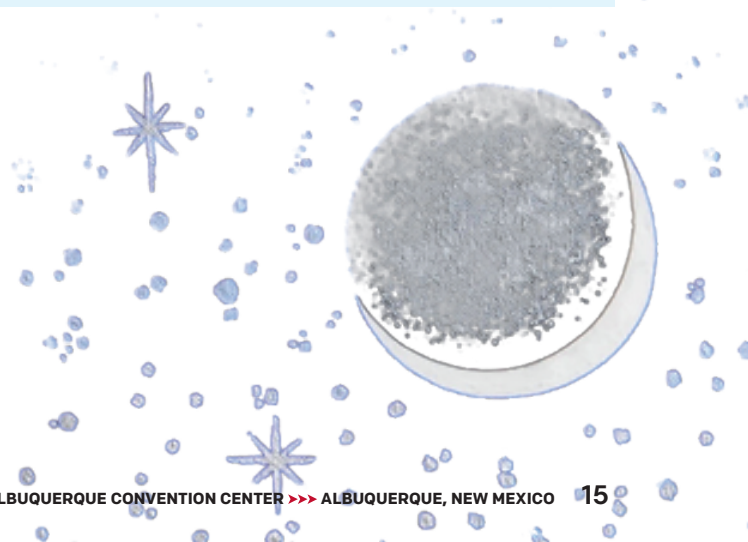
Disclosure Statement: The presenters have no financial relationship to this program.

1:30 pm - 3:00 pm**Track: MSPI/DVPI Grantee****Responding to Concerning Posts on Social Media: Tips and Tools for Adults who work with Native Youth****ROOM: SANDIA/SANTA ANA****PRESENTERS:****Celena McCray****Michelle Singer****Learning Objectives:**

- Discuss outreach strategies and the challenges that surround a response to concerning posts on social media.
- Participants will be able to describe three themes that emerged from focus groups with Native youth.
- Participants will be able to list steps in the Viewer Care Plan to support youth who post or view concerning messages on social media.

No credits provided.

Disclosure Statement: The presenters have no financial relationship to this program.



1:30 pm - 3:00 pm

Track: Behavioral Health Integration — Substance Use Disorders, Mental Health Disorders, Suicide Prevention

Building Resilience, Building Health: An Integrated Approach to Suicide Prevention and Community Wellness

ROOM: NAVAJO/NAMBE

PRESENTERS:

Leolani Ah Quin
Kelly McGrady, RN
Anita Martin, MD

Learning Objectives:

- Recognize key components of integrated care model.
- Participants will recognize and understand the interrelation between Adverse Childhood Experiences and health outcomes.
- Participants will learn practical interventions to build resilience as it relates to suicide prevention and reduction.

No credits provided.

Disclosure Statement: The presenters have no financial relationship to this program.

1:30 pm - 2:30 pm

Track: Sharing Traditional & Promising Practices

Culture as Prevention: Addressing Adverse Childhood Experiences in Indian Country

ROOM: SAN JUAN

PRESENTERS:

Carolyn Hornbuckle, JD
Katie Ports, PhD

Learning Objectives:

- Define and explain the phenomena of Adverse Childhood Experiences (ACEs) and its specific connections to Historical and Inter-generational trauma in Indian Country
- Identify and list protective factors, strategies, and practices that are critical to the development of resiliency and positive youth development
- Describe the process and protocols of developing culturally responsive ACE prevention resources, which may include a resource guide/basket and discuss what other elements would be needed to address ACEs in Indian Country.

No credits provided.

Disclosure Statement: The presenters have no financial relationship to this program.

3:15 pm-4:15 pm

SPECIAL SESSION: Poster Presentations and Networking

ROOM: AZTEC/BRAZOS/CIMARRON/DONA ANA/GALLESTEO

4:30 pm - 5:30 pm

BREAKOUT SESSION III

(CONCURRENT BREAKOUT SESSIONS)

ROUNDTABLE (60 MINUTES)

4:30 pm - 5:30 pm

Track: Community-based Behavioral Health Services

Strengthening our Nets

ROOM: ANASAZI

PRESENTERS:

Amy Carlough, MSW, (Subject Matter Expert)

Learning Objectives:

- Describe three methods that Aleutian Pribilof Islands Association has used to incorporate culture and sustainability in suicide prevention efforts.
- Describe and utilize four strategies to engage youth, community, and youth advisory boards in prevention activities.
- Describe strategies to increase partnerships and strengthen access to resources available in rural communities for suicide prevention.

1 CE or 1 NBCC hours provided by the UNM Department of Psychiatry & Behavioral Sciences, The Division of Community Behavioral Health

Disclosure Statement: The presenters have no financial relationship to this program.

4:30 pm - 5:30 pm

Track: Behavioral Health Integration-Substance Use Disorders, Mental Health Disorders, Suicide Prevention

Indian Health Manual: Chapter 34 Suicide Prevention and Care Program Policy

ROOM: TAOS

PRESENTERS:

Pamela End of Horn, MSW, LICSW

Learning Objectives:

- Define IHS standards of care for treating people at risk of suicide.
- Apply the previously mentioned standards of care to patients presenting with risk of suicide.
- Describe and understand IHS standards of care as they relate to unique aspects of American Indians/Alaska Natives.

1 CE or 1 NBCC hours provided by the UNM Department of Psychiatry & Behavioral Sciences, The Division of Community Behavioral Health

Disclosure Statement: The presenters have no financial relationship to this program.

4:30 pm - 5:30 pm**Track: Behavioral Health Workforce Innovation****Clinicians Lived Experiences with Culturally Adapting Empirically Supported Treatments for American Indian and Alaska Native Populations****ROOM: PICURIS****PRESENTERS:****Meagan Rides At The Door, LCPC****Learning Objectives:**

- Describe useful strategies obtained from a review of the cultural literature of the cultural adaptation of Empirically Supported Treatments for American Indian and Alaska Native populations.
- Identify knowledge gained from discussions with clinicians who have utilized the cultural adaptations of EST for AI/AN.
- Describe how and understanding of the cultural adaptations of EST for AI/AN will impact you everyday practice.

1 CE or 1 NBCC hours provided by the UNM Department of Psychiatry & Behavioral Sciences, The Division of Community Behavioral Health

Disclosure Statement: The presenters have no financial relationship to this program.

4:30 pm - 5:30 pm**Track: MSPI/DVPI Grantee****People of a Place: Comparing Indigenous evaluation approaches with Western frameworks****ROOM: SANDIA/SANTA ANA****PRESENTERS:****Colin Gerber, MPH****Learning Objectives:**

- Differentiate between Indigenous and Western evaluation frameworks.
- Compare purposes and methods of evaluation styles.
- Identify practical applications of Indigenous evaluation practices that you can apply in your current study.

1 CE or 1 NBCC hours provided by the UNM Department of Psychiatry & Behavioral Sciences, The Division of Community Behavioral Health

Disclosure Statement: The presenter has no financial relationship to this program.

4:30 pm - 5:30 pm**Track: Behavioral Health Integration-Substance Use Disorders, Mental Health Disorders, Suicide Prevention****Indian Country and Adverse Childhood Experiences****ROOM: NAVAJO/NAMBE****PRESENTERS:****Jacque Gencarelle****Learning Objectives:**

- Review current trends around trauma and environmental factors impacting Tribal communities.
- Understand substance use and domestic violence incidents and how they contribute to adverse childhood experiences.
- Attendees will complete ACE test and self-reflect on what the test scores mean and how this knowledge can be understood in Resiliency.

No credits provided.

Disclosure Statement: The presenters have no financial relationship to this program.

4:30 pm - 5:30 pm**Track: Community-based Behavioral Health Services****Cultural Connections and the Northern Cheyenne Tribal Board of Health's Cheyenne Connectedness Survey Results****ROOM: SAN JUAN****PRESENTERS:****Allyson Kelley, DrPH, MPH****Desiree Restad, MPH****Rufus Spear****Learning Objectives:**

- Describe and understand the process of developing a tribal-specific survey for American Indian youth attending K-12 schools in reservation settings.
- Describe and understand how to utilize existing cultural knowledge to develop culture-based curriculums and teachings that give youth meaning and purpose.
- Describe and understand culture-based teachings as a method to address suicide, substance use, and school drop-out risk factors in American Indian youth.

1 CE or 1 NBCC hours provided by the UNM Department of Psychiatry & Behavioral Sciences, The Division of Community Behavioral Health

Disclosure Statement: The presenters have no financial relationship to this program.

KEY**Track: Community-based Behavioral Health Services****Track: Sharing Traditional & Promising Practices****Track: Behavioral Health Integration-Substance Use Disorders, Mental Health Disorders, Suicide Prevention****Track: Behavioral Health Workforce Innovation****Track: MSPI & DVPI Grantee**

FRIDAY >>> MAY 17, 2019

6:30 am - 3:00 pm

Information Desk Open

8:00 am - 3:00 pm

Exhibit Hall Open

8:30 am - 10:00 am

BREAKOUT SESSION IV (CONCURRENT BREAKOUT SESSIONS)

WORKSHOPS

8:30 am - 10:00 am

Track: Community-based Behavioral Health Services

Leveraging Cultural Assets in Impacting Outcomes in Tribal Wellness Court Programs

ROOM: ANASAZI

PRESENTERS:

Louis Lafrado

Judge. Randolph Collins

Tonya Louis

Learning Objectives:

- Multi-level programming that engages a wide range of disciplines can have a direct impact on Wellness Court outcomes that build resilience and leverage assets to protect graduates in after-program efforts.
- Leveraging culture, tradition and native language preservation with public health responses and non-punitive judicial action can improve outcomes and protect Wellness Court graduates in after program efforts.
- Multi-level approaches to Wellness Court programs can have a direct impact on outcomes for participants and graduates by leveraging community-wide

and enterprise-wide assets and resources to support current and graduate Wellness participants to succeed in after-care.

- The Acoma program highlights the value added to the effort by weaving cultural assets and resources with western approaches to prevention and intervention. The collaborative approach between cultures values each and leverages each to support the entire program's goals and objectives across the Tribe.

No credits provided.

Disclosure Statement: The presenters have no financial relationship to this program.

8:30 am - 10:00 am

Track: Sharing Traditional & Promising Practices

Healing the Healers: Lessons from the Good Road of Life Training for Mental Health Professionals

ROOM: COCHITI

PRESENTERS:

Allyson Kelley, DrPH

Clayton Small, PhD

Learning Objectives:

- Describe the components of the Good Road of Life training for mental health professionals.
- List the sources of strength of mental health professionals attending the Good Road of Life Training and changes in their knowledge, strengths, and perspectives.
- Describe the impact of culture-based trainings like Good Road of Life on mental health professionals and how attendees plan to use the skills, knowledge, and information gained in their communities.
- Describe and review the importance of culture and resilience based trainings for mental health professionals working in Indian Country.

1.5 CE or 1.5 NBCC hours provided by the UNM Department of Psychiatry & Behavioral Sciences, The Division of Community Behavioral Health

Disclosure Statement: The presenters have no financial relationship to this program.

KEY

Track: Community-based Behavioral Health Services

Track: Sharing Traditional & Promising Practices

Track: Behavioral Health Integration-Substance Use Disorders, Mental Health Disorders, Suicide Prevention

Track: Behavioral Health Workforce Innovation

Track: MSPI & DVPI Grantee

8:30 am - 10:00 am

Track: Behavioral Health Integration-Substance Use Disorders, Mental Health Disorders, Suicide Prevention

Integrating Behavioral Health with Cancer Prevention and Treatment

ROOM: TAOS

PRESENTERS:

Hon. Joshua Hudson

Taslim van Hattum, LCSW, MPH

Learning Objectives:

- Describe the implications of cancer diagnosis and treatment relating to behavioral health outcomes
- Attendees will be able to identify culturally tailored resources for cancer survivors
- Attendees will be able to demonstrate and duplicate traditional medicine bundle construction

No credits provided.

Disclosure Statement: The presenters have no financial relationship to this program.

8:30 am - 10:00 am

Track: Behavioral Health Workforce Innovation

Innovative Strategies with the Expressive Arts, Behavioral Health Aides and Community Centers

ROOM: PICURIS

PRESENTERS:

Denise Curtis, MA, LPC

Learning Objectives:

- Put together 4 Expressive Art Therapy activities that will bring in ancestral wisdom, purpose in life and/or basic coping strategies. These will include: "Ancestral Healing through Mask Making", "Clay Bowl Meditation and the Art of Int
- Envision success for their own community centers utilizing Behavioral Health Aides (BHA).
- Appreciate the healing power of art making in community and witness how community center "events and activities" can serve to de-stigmatize counseling while providing a less direct approach to therapy.
- Facilitate and process the experiences and feelings that resulted from the expressive art activity in circle.

No credits provided.

Disclosure Statement: The presenters have no financial relationship to this program.

8:30 am - 10:00 am

Track: MSPI/DVPI Grantee

A public health professional-research partnership to reduce adolescent risk for substance use and suicide on the Navajo Nation

ROOM: SANDIA/SANTA ANA

PRESENTERS:

Lauren Tingey, PhD, MPH, MSW

Annette Gonnig, MHA

Joleen Tapaha, MPH

Learning Objectives:

- Describe the collaborative effort between Indian Health Service and Johns Hopkins University to reduce substance use and suicide on the Navajo Nation.
- Discuss the key components of the Arrowhead Business Group Youth Entrepreneurship Education program for reducing risk for substance use and suicide among Navajo youth.
- List the research results from the public health program implementation of the Arrowhead Business Group Youth Entrepreneurship Education intervention on the Navajo Nation.
- Detail how the Arrowhead Business Group Youth Entrepreneurship Education program was delivered to Navajo youth through a multi-level approach.

No credits provided.

Disclosure Statement: The presenters have no financial relationship to this program.

8:30 am - 10:00 am

Track: Behavioral Health Integration-Substance Use Disorders, Mental Health Disorders, Suicide Prevention

Improving American Indian and Alaska Native (AIAN) Behavioral Healthcare through improved access to Medicaid services and reimbursements to Indian health care providers.

ROOM: NAVAJO/NAMBE

PRESENTERS:

Kitty Marx

Ed Fox

Susan Karol

Learning Objectives:

- Understanding the basics of Medicaid for Beneficiaries and Providers and the impact on Health Disparities and Reimbursement.
- Understanding Medicaid State Plans and Behavioral Health Providers requirements for billing and reimbursements.

No credits provided.

Disclosure Statement: The presenters have no financial relationship to this program.



8:30 am - 10:00 am

Track: Behavioral Health Integration-Substance Use Disorders, Mental Health Disorders, Suicide Prevention

Teaching Mental Health in Native Communities: Lessons Learned and Cultural Considerations

ROOM: ISLETA/JEMEZ

PRESENTERS:

Alyssa Jojola

Rachell Tenorio

Beverly Bowman

Learning Objectives:

- Identify one cultural and one contextual factor that impact a Native individual with a dual diagnosis.
- Describe how the four directions model/corn stalk model can be used to assist a Native individual with a dual diagnosis.
- Inform how the Mental Health First Aid curriculum can be used to address cultural stigma in Native communities

No credits provided.

Disclosure Statement: The presenters have no financial relationship to this program.

- Develop strategies to decrease lateral violence in order to improve treatment environments and patient care.
- Identify and discuss trauma informed approaches to prevent lateral violence.

1.5 CE or 1.5 NBCC hours provided by the UNM Department of Psychiatry & Behavioral Sciences, The Division of Community Behavioral Health

Disclosure Statement: The presenters have no financial relationship to this program.

10:15 am-11:45 am

Track: Sharing Traditional & Promising Practices

“Sa’ah naaghei bik’eh gozhoo” — Apache Path to Wellness

ROOM: COCHITI

PRESENTERS:

Ginger Myers, LMFT

Larold Pinal

Learning Objectives:

- Identify concepts of the strategic planning process as it relates to implementation of culture and history with mental health clinical programming.
- Identify specific strategies for a road map of developing and modifying evidence-based curriculum to teach foundational concepts of culture and history.
- Identify specific examples of how connecting providers, stakeholders and community members to culture and tribal history leads to improvements of the behavioral health workforce, increased resource sharing, stakeholder engagement, and community mobilization around behavioral health education.
- Identify lessons learned by White Mountain Apache Behavioral Health services in the journey to implementing White Mountain Apache culture & history into mental health programming.

1.5 CE or 1.5 NBCC hours provided by the UNM Department of Psychiatry & Behavioral Sciences, The Division of Community Behavioral Health

Disclosure Statement: The presenters have no financial relationship to this program.

10:15 am-11:45 am

BREAKOUT SESSION V (CONCURRENT BREAKOUT SESSIONS)

WORKSHOPS

10:15 am-11:45 am

Track: Community-Based Behavioral Health Services

The Lasting Effects of Lateral Violence in Native Communities

ROOM: ANASAZI

PRESENTERS:

Rain McNeill, ACSW

Learning Objectives:

- Identify how historical trauma has created intergenerational problems in indigenous communities referred to as “Lateral Violence.”
- Describe common behaviors associated with lateral violence in the workplace.

KEY

Track: Community-based Behavioral Health Services

Track: Sharing Traditional & Promising Practices

Track: Behavioral Health Integration-Substance Use Disorders, Mental Health Disorders, Suicide Prevention

Track: Behavioral Health Workforce Innovation

Track: MSPI & DVPI Grantee

10:15 am-11:45 am

Track: Behavioral Health Integration-Substance Use Disorders, Mental Health Disorders, Suicide Prevention

Multi-level programming to support public health intervention and prevention efforts

ROOM: TAOS

PRESENTERS:

Louis Lafrado

Tonya Louis

Autumn Drags Wolf

Learning Objectives:

- Supportive, consistent community messaging across varied components of a Tribal enterprise can reinforce and amplify intervention and prevention messages to reduce risk factors by building of assets and resiliency.
- Multi-level programming provides a consistent, cohesive message across the community and engages, encourages and supports “belonging” through strength and resiliency.
- Consistency of public health intervention and prevention efforts provides a seamless environment across the community, there is always a sense of belonging to the community when all components are supportive.
- The outcome of the learning objective is the ability recognize the strengths of the entire enterprise and take advantage of each and drive the program to address the intervention, prevention and supportive needs of the community. Doing this accomplishes the sustainability by engaging a strengths-based approach to public health issues.

No credits provided.

Disclosure Statement: The presenters have no financial relationship to this program.

10:15 am-11:45 am

Track: MSPI/DVPI Grantee

Strengths, Challenges and Highlights of the Indian Health Service Behavioral Health Initiatives: MSPI & DVPI

ROOM: PICURIS

PRESENTERS:

Tamara James, PhD

Kevin English, DrPH

The session will highlight the strengths and challenges of the MSPI and DVPI IHS behavioral health initiatives via data reported during the 2015-2018 project years.

10:15 am-11:45 am

Track: MSPI/DVPI Grantee

Empowering Native Youth to Assist Their Peers in Remote Navajo Schools

ROOM: SANDIA/SANTA ANA

PRESENTERS:

Jeremy Willie

Eli Bigthumb

Learning Objectives:

- Identify the core components of a Peer Helper Program where students are trained to recognize and assist their peers experiencing mental and behavioral health issues in a confidential matter.
- Compare the positive outcomes, challenges and barriers of implementing a Peer Helper Program.
- Analyze the data that has been collected by the Crownpoint MSPI Program in order to apply it to your practice setting.
- Identify the steps needed to implement a Peer Helper Program in their communities and schools.

No credits provided.

Disclosure Statement: The presenters have no financial relationship to this program.

10:15 am-11:45 am

Track: Behavioral Health Integration-Substance Use Disorders, Mental Health Disorders, Suicide Prevention

Advancing Indigenous School-Based Health Services: Wholeness and Healing by Design

ROOM: NAVAJO/NAMBE

PRESENTERS:

Micah Woodard

Learning Objectives:

- Compare and contrast current School-Based Health practices with Whole Health and Wellness Approaches that fully integrate the full continuum of behavioral health care.
- Discuss current community gaps and success stories around Whole Health and Wellness Approaches that fully integrate the full continuum of behavioral health care.
- Discuss the implementation science of designing for a full continuum of behavioral health care within a School-Based Whole Health and Wellness framework that can reduce risk, promote resiliency, and learning.
- Identify and discuss Prevention Science within the context of School-Based Positive Youth Development, Positive Behavioral Intervention and Supports, and an Interconnected Systems Framework.

1.5 CE or 1.5 NBCC hours provided by the UNM Department of Psychiatry & Behavioral Sciences, The Division of Community Behavioral Health

Disclosure Statement: The presenters have no financial relationship to this program.

10:15 am-11:45 am

Track: Sharing Traditional & Promising Practices

Growing Our Own: A Grassroots Approach to Increasing Behavioral Health Access for American Indian and Alaska Native People

ROOM: ISLETA/JEMEZ

PRESENTERS:

Sue Steward, BSHA

Xiomara Owen

Learning Objectives:

- Explain the need to develop culturally informed Tribal behavioral health workforces;
- Describe the evolution of the National Portland Area Indian Health Board (NPAIHB) Behavioral Health Aides and Practitioners (BHA/P) program and how it relates to increasing behavioral health access to AI/AN.
- Discuss and identify the steps to create a system of Behavioral Health Aide education and training.
- Explain how Federal Certification increases behavioral health access for AI/AN.

1.5 CE or 1.5 NBCC hours provided by the UNM Department of Psychiatry & Behavioral Sciences, The Division of Community Behavioral Health

Disclosure Statement: The presenters have no financial relationship to this program.

11:45 pm - 12:45 pm

LUNCH (On Your Own)

12:45 pm-1:45 pm

BREAKOUT SESSION VI

(CONCURRENT BREAKOUT SESSIONS)

12:45 pm-1:45 pm

ROUNDTABLE (60 MINUTES)

Track: Community-based Behavioral Health Services

Top line findings and recommendations of Alaska's opioids needs assessment

ROOM: ANASAZI

PRESENTERS:

Jackie Engebretson, MSW

Tim Collins, MPH, MA

Cody Chipp, PhD

Learning Objectives:

- List and describe how to use health data, CDC/SAMHSA-based logic models and inventories of activities and resources to design a needs assessment that can be applied to a community, a region or a whole state.
- Identify and describe the top six public information priorities and how this information will enhance your practice.
- Recognize and illustrate messaging, presentation and content of public health educational media about opioids that are culturally responsive to AI/AN communities.

1 CE or 1 NBCC hours provided by the UNM Department of Psychiatry & Behavioral Sciences, The Division of Community Behavioral Health

Disclosure Statement: The presenters have no financial relationship to this program.



12:45 pm-1:45 pm

Track: Sharing Traditional & Promising Practices

Kupuna (elder) Councils: Using Native Hawaiian Traditional Healing & Cultural Practices to Reconnect Our Lahui (People) in Healing and Wellness

ROOM: COCHITI

PRESENTERS:

Babette Galang

Sean Chun

Learning Objectives:

- Compare the similarities between Native Hawaiian traditional healing practices and their own cultural practices.
- Participants will be able to analyze the differences associated with both traditional cultural practices and Western healing modalities.
- Participants will be able to begin to design or re-design, assess and/or formulate health and wellness models specific to the indigenous community they serve

No credits provided.

Disclosure Statement: The presenters have no financial relationship to this program.

12:45 pm-1:45 pm

Track: Behavioral Health Integration-Substance Use Disorders, Mental Health Disorders, Suicide Prevention

Suicide Screening: Screening Evidence, Clinical Pathways and Treatment Priorities.

ROOM: TAOS

PRESENTERS:

Pamela End of Horn, MSW, LICSW

Learning Objectives:

- List and describe current evidence based suicide screens applicable to the AI/AN population.
- Describe implementation strategies for suicide screens for the American Indian/Alaska Native population.
- Describe strategies that clinicians can use to assess population needs when identifying and using suicide screens within tribal communities.

1 CE or 1 NBCC hours provided by the UNM Department of Psychiatry & Behavioral Sciences, The Division of Community Behavioral Health

Disclosure Statement: The presenters have no financial relationship to this program.

12:45 pm-1:45 pm

Track: MSPI/DVPI Grantee

Collaboration for Youth Focused Suicide Prevention

ROOM: PICURIS

PRESENTERS:

Michelle Smoke

Elizabeth Eggleston

Learning Objectives:

- Demonstrate how to start a youth group from start to finish
- Assess Needs
- Identify Age-Appropriate Topics
- Design an evaluation
- Identify other ways to collaborate for a youth group
- Discuss different programs to collaborate with in your area: create a list, define your groups design

12:45 pm-1:45 pm

Track: MSPI/DVPI Grantee

A public health-research partnership to promote adolescent sexual and reproductive health on the Navajo Nation

ROOM: SANDIA/SANTA ANA

PRESENTERS:

Lauren Tingey, PhD, MPH, MSW (Subject Matter Expert)

Cassandra Allen

Learning Objectives:

- Describe the collaborative effort between Indian Health Service and Johns Hopkins University to promote adolescent sexual and reproductive health on the Navajo Nation.
- Describe and utilize the key components of the Respecting the Circle of Life program implemented with Navajo youth and families.
- Describe key research results from the public health program implementation of the Respecting the Circle of Life intervention on the Navajo Nation and apply those findings to your study.

1 CE or 1 NBCC hours provided by the UNM Department of Psychiatry & Behavioral Sciences, The Division of Community Behavioral Health

Disclosure Statement: The presenters have no financial relationship to this program.

KEY

Track: Community-based Behavioral Health Services

Track: Sharing Traditional & Promising Practices

Track: Behavioral Health Integration-Substance Use Disorders, Mental Health Disorders, Suicide Prevention

Track: Behavioral Health Workforce Innovation

Track: MSPI & DVPI Grantee

12:45 pm-1:45 pm

Track: Behavioral Health Integration-Substance Use Disorders, Mental Health Disorders, Suicide Prevention

Incorporating the Recovery Wheel in a Therapeutic Village of Care Treatment Model

ROOM: NAVAJO/NAMBE

PRESENTERS:

Becky Jacobs, MSCP

Michael Mooradian, CDCS

Learning Objectives:

- Describe strategies for utilizing the recovery wheel in the Therapeutic Village of Care Treatment Model.
- Utilize the Recovery Wheel for yourself to gain experience in how to use this with individuals in your work settings.
- Describe how the Therapeutic Village of Care Treatment Model incorporates culture and traditions and how this might benefit people you see in your agency.

1 CE or 1 NBCC hours provided by the UNM Department of Psychiatry & Behavioral Sciences, The Division of Community Behavioral Health

Disclosure Statement: The presenters have no financial relationship to this program.

12:45 pm-1:45 pm

Track: Sharing Traditional & Promising Practices

It All Begins with A Story: Community-Based Participatory Research, Traditional Foods, Place-Making, and Storytelling for Positive Comprehensive Health Outcomes

ROOM: ISLETA/JEMEZ

PRESENTERS:

Elisha Oliver, PhD, MA

Learning Objectives:

- Describe key design elements of a Community-Based Participatory Public Health.
- Research Project that incorporates traditional practices.
- List ways in which traditional practices could be implemented in situations in which they were not initially utilized.
- Review and apply key features of implementing traditional practices.

1 CE or 1 NBCC hours provided by the UNM Department of Psychiatry & Behavioral Sciences, The Division of Community Behavioral Health

Disclosure Statement: The presenters have no financial relationship to this program.

12:45 pm-1:45 pm

Track: Community-based Behavioral Health Services

Problem Gambling in Tribal Communities: Storytelling and Conversations on a Hidden Public Health Issue

ROOM: SAN JUAN

PRESENTERS:

Ted Hartwell

Sydney Smith, LPC, PADC, CPGC-S ICGC-II

Learning Objectives:

- Describe the challenges and dilemmas of engaging in a clinical conversation about "problem gambling" in tribal communities.
- Describe key characteristics of "problem gambling" that differentiate it from "recreational gambling".
- Describe strategies for engaging tribal communities in dialogue and data gathering on "problem gambling".

1 CE or 1 NBCC hours provided by the UNM Department of Psychiatry & Behavioral Sciences, The Division of Community Behavioral Health

Disclosure Statement: The presenters have no financial relationship to this program.

2:00 pm - 3:00 pm

CLOSING PLENARY

AZTEC/BRAZOS/CIMARRON/DONA ANA/GALLESTEO

- **Welcome remarks from Victoria Kitcheyan, Winnebago Tribe of Nebraska Tribal Council Member, NIH Chairperson and Great Plains Area Representative**
- **Dr. Doreen Bird remarks**
- **Closing Remarks - Stacy Bohlen, NIH CEO**
- **Retiring the Colors**
- **Closing Prayer**
- **Adjourn**



2019 BEHAVIORAL HEALTH POSTER PRESENTATION AND NETWORKING SESSION

The posters feature highlights on evidence-based practices, practice-based approaches, and Tribal best practices in enhancing Tribal behavioral health. Hear from academic researchers, clinical researchers, clinical providers, Tribal government professionals, and the federal government in how they serve American Indians and Alaska Natives through innovative programs and research. We welcome all behavioral health professionals and conference attendees to visit the poster exhibit and participate in a robust dialogue with our presenters to continue building connections between culture and purpose.

- Patricia Roth & Sierra Wollcot — Sisseton Wahpeton Oyate Behavioral Health
- Danna Peterson & Michelle Miller — Hualapi Suicide Surveillance Program
- Nicole Tamayo — SOMS Youth and Family Program
- Andrea Dudley & Marc Clanton — Anadarko Indian Health Center MSPI Collaborative
- Joleen Tapaha & Lauren Tingey — Implementation of Arrowhead Business Group Youth Entrepreneurship Education program to reduce adolescent substance use and suicide on the Navajo Nation
- Cassandra Allen — Implementation of the Respecting the Circle of Life program to promote adolescent sexual and reproductive health on the Navajo Nation
- Arlene Kashata & Bonnie Inman — Culture is Prevention
- Janet Hoskie & Dedra Tsosie — Uniting Lifeskills and School-Based Mental Health for our Navajo Youth
- Carrie Manning & Maria Vega — A Modern Gathering Rooted in Traditional Practices
- Rose DeBerry — “So what? She’s just going to go back.” Implementing a Victim-Centered Approach to Interviewing by Rocky Boy’s Law Enforcement
- Joshua Allison-Burbank & Colby Hagen — Prevention of Developmental Delay to Foster Mental Health in American Indian Children
- Janelle Timber-Jones — Moving from Grief to Dance: Gourd Dancing on the Northern Cheyenne
- Joseph Lafromboise & Janice Myers — Using the Cast Program to Prepare Seventh Grade Boys on the Rocky Boy’s Nation
- Bridget Valenzuela — Pascua Yaqui MSPI Program
- Jessica Two Eagle, Michelle Colombe, & Tokala Inajinyo — Suicide Prevention Mentoring Program
- Cody Chipp — Connecting Cultural Activities in a State Psychiatric Hospital — Stories of Success
- Kimberly Fowler & Sebouh Kouyoumjian — NCUH’s National Youth Council Suicide Prevention Campaign: Using Social Media to Impact Policy
- Patricia Ramirez & Richard Skaggs — PREPaRE Emergency Response for Schools

PRESENTER BIOGRAPHIES

Evan Tesla II Adams, MD, MPH is a Coast Salish actor & physician from the Tla'amin First Nation near Powell River, BC, Canada. Evan stars as Thomas Builds-The-Fire in Miramax's *SMOKE SIGNALS*, written by Sherman Alexie & directed by Chris Eyre. He also won Best Actor awards from the American Indian Film Festival, & from First Americans in the Arts, & a 1999 Independent Spirit Award for 'Best Debut Performance'. He won a 2011 Gemini Award for co-hosting the National Aboriginal Achievement Awards along with Adam Beach. Aside from his career in the arts, Evan has completed a Medical Doctorate from the University of Calgary in 2002, & a residency in the Aboriginal Family Practice program at St. Paul's Hospital in Vancouver, BC. Dr. Adams has a Masters of Public Health (2009) from Johns Hopkins University in Baltimore, MD. He was the first-ever Aboriginal Health Physician Advisor in the Office of the Provincial Health Officer, BC Ministry of Health (2007-2012). He was the Deputy Provincial Health Officer for the province of BC from 2012 to 2014. He is currently the Chief Medical Officer of the First Nations Health Authority.

Marcella I. Adolph, MSW currently works for the Confederated Salish & Kootenai Tribes – Project LAUNCH as the Childhood Mental Health Consultant, collaborating with two Preschool locations on the reservation. She has a history of working as a Foster Care/CPS Social Worker for twelve years with CSKT, in addition, as a Therapist-in-Training with the Ronan School District 30.

Leolani Ah Quin serves as the Director of Circle of Life; MHA Nation's Tribal Health substance use program. She is a 2017 Clinical Scholar; a recipient of the 2018 Cummings Graduate Institute -Biodyne Award for the agency that most embodies the Biodyne model of integrated behavioral healthcare. She has been appointed to the North Dakota Board of Social Work Examiners, and participated in North Dakota State BRSS TACS training to create policy change and implement recovery supports across the state. As a trained provider in integrated behavioral health she has been a primary influence in redefining the department's provision of services and developing integrated health care through comprehensive behavioral health services, and integrated behavioral health in both primary care and as an adjunct to psychiatric services. More specifically, she is building on a current movement in the community to build capacity across all disciplines to establish suicide prevention protocols. As the previous director of Elbowoods Memorial Health Center's behavioral health department Dr. Ah Quin is an active lead in these efforts supported by the medical, psychiatric care providers and local schools; thus increasing accessibility of much needed services.

Cassandra Allen is a Coordinator for Chinle Service Unit Health Promotion managing four sites: Pinon, Chinle, and Tsaile Health Promotion and the Chinle Wellness Center. I have worked with the Chinle Service Unit from June 2006 to present. I have a special interests in Indigenous people's health, community driven initiatives, improving patient care initiatives, and grant funding. I currently serve as Project Director for DVPI Purpose Area 1.

Polly Andrews received a Bachelor's in Human Services, and is currently pursuing a Master's in Education. Today, she

is a Learning & Development Associate with Southcentral Foundation Family Wellness Warriors Initiative, a movement that inspires families and communities to break the silence to end cycles of abuse in Alaska.

Sean A. Bear earned his B.A. from Buena Vista University, Double majoring in psychology/human services. He also studied mental health counseling at Drake University for 2 years. He has not graduated as of yet, but stills intend to graduate with his Master's degree. He has worked with Native Americans with Substance Use issues for many years. He received his third honorable discharge from the Army after over 9 years of service and served with the 82nd Airborne Division.

David "Joel" Beckstead joined the Indian Health Service in 2009 as the Clinical Director of Desert Visions Youth Wellness Center in Sacaton, Arizona. Desert Visions Youth Wellness Center is one of 12 federal and tribal residential treatment centers in IHS that provides substance use services to American Indian and Alaska Native Youth. He is currently serving as the National Alcohol and Substance Abuse Lead for the Division of Behavioral Health in the Office of Clinical and Preventive Services. The Division of Behavioral Health serves as the primary source of national advocacy, policy development, management, and administration of behavioral health, alcohol and substance abuse, and family violence prevention programs for American Indian and Alaska Native (AI/AN) people.

Becky Bendixen has increased her outreach to indigenous nations every year as Wisdom Warriors goes nationwide. Collaborating with tribes to create Wisdom Warriors and share it throughout indigenous communities will always be one of her life's greatest passions. The Wisdom Warrior program is changing elders' lives on a daily basis and she feels blessed to be one of the programs creators.

Eli Bighthumb serves as the Recreation Specialist for the Division of Public Health at Crownpoint Healthcare Facility in Crownpoint, New Mexico. He has 8 years of experience in coordinating the day-to-day operations of planning, implementation, evaluation and documentation of a dynamic Peer Helpers Program at the Thoreau High School in Thoreau, NM. He has received the Navajo Area Indian Health Service Director's Award for Health Promotion in 2014 and 2016 for his continuing efforts to make an impact by promoting community outreach programs and for being an integral team member of the Crownpoint MSPI Program.

Doreen M. Bird, PHD, MPH, comes from Kewa Pueblo, NM. She is a recent graduate from Arizona State University's School of Social Transformation where she obtained her doctorate in Justice Studies while participating in the second Pueblo PhD Cohort Program. Her undergraduate education includes a bachelor's degree in Psychology and a master's degree in Public Health from the University of New Mexico. Dr. Bird started training as a researcher under the direction of Philip May, Ph.D. through the Career Opportunities in Research program and has focused her research interests in the areas of substance abuse, mental health, suicide prevention and resilience in Native American populations. After living away from

her tribal lands to obtain a higher education, her recent migration back to her home community has been a completion of a cycle that is often spoken by tribal leaders when they say, “Go get an education, then come back to help our People.” Dr. Bird is a member of Kewa Pueblo Health Corporation’s Board of Directors, works as an independent consultant and is a Guest speaker invited by tribal communities to speak on topics such as suicide prevention, which has been her area of study for the past 15 years. More recently, Dr. Bird has been engaging in social justice issues such as environmental justice and the protection of water and sacred sites. She is a mother of 6 and grandmother of 4 and continues with her cultural traditions. Doreen is fluent in her Native language and refuses to work full-time, so that she can spend more time with her family and with Nature.

Beverly D. Bowman (Navajo) is from Tohatchi, New Mexico and resides in Albuquerque, New Mexico. Being a strong advocate for reducing and preventing substance abuse and suicide among Native American youth, she worked as a Substance Abuse Health Technician for the Division of Public Health, Crownpoint Health Care Services/Indian Health Services. At that time she served as the Team Lead for the Eastern Navajo Suicide Crisis Response/Postvention Team. She currently serves as the Program Coordinator for the Intergenerational Intertribal (I2) Positive Directions for Native Health – Native Connections/SAMHSA Grant, Albuquerque Area Indian Health Board. She continues her advocacy for suicide prevention, intervention and postvention in the two (2) communities she serves in. She has helped the Ramah Navajo/Pine Hill community establish a “uniformed” suicide protocol, phone tree, crisis call number and suicide vocabulary brochure that is being disseminated within the community.

Kristie Brooks, MS, LPC serves as the Director of the Behavioral Health Department for the Choctaw Nation of Oklahoma. She oversees the BH Outpatient department, nine Federal grants, and two residential substance abuse treatment facilities. She previously served as the Clinical Director of the BH department and provided clinical support to her staff. Prior to her employment with the Choctaw Nation, Kristie worked for the state of Oklahoma for approximately 5 years. Kristie received her BA degree in 2003 and MS degree in 2007. She received her licensure as an LPC in 2009, and her LPC Supervisor certification in 2012.

Amy Carlough, MSW is the Health Department, Youth Program Coordinator at Aleutian Pribilof Islands Association, Inc. in the State of Alaska. In her current position, she oversees youth programming as well as the SAMSHA Native Connections grant. The Health Department provides IHS, Behavioral Health and Elders, Youth and Wellness services to Anchorage, Atka, Nikolski, St. George, and Unalaska, Alaska. She has her MSW from University of Alaska Anchorage and has devoted herself to providing social work services to Native communities for over 18 years.

Melissa J. “Qillauruq” (Tabor) Castaneda works for the Wellness and Prevention Department at the Alaska Native Tribal Health Consortium. She has earned a Bachelor’s Degree in Psychology, Religion, and an Interdisciplinary Minor in Gerontology from Syracuse University in Syracuse, NY. She has also earned a Bachelor of Arts in Rural Development from the University of Alaska-Fairbanks.

Cody Chipp, Ph.D. licensed psychologist, serves as Director of Behavioral Health for the Alaska Native Tribal Health Consortium. He advocates for policies to support behavioral health services, program development, and systems

improvement to address needs within the Alaska Tribal Health System. His professional background includes research in rural settings on service delivery and health outcomes of underserved populations. He participates in circumpolar health research and advocacy as a member of the United States Arctic Research Commission (USARC) Arctic Mental Health Working Group and was a former Co-Chair of the Arctic Human Health Expert Group within the Arctic Council.

Sean A. Chun resides on the island of Kauaʻi, Hawaiʻi. He is the Traditional Healer and Cultural Advisor for Hoʻola Lahui Hawaiʻi, a Native Hawaiian Community Health Center. Sean, also known as Puahi or just “Uncle” is a practitioner of various arts, such as pule (prayer), hoʻponopono (spiritual resolution), laʻau lapaʻau, (herbal medicine), lomilomi (massage), and lua (martial arts). Sean is a great advocate of building community and bridging relationships to build a stronger, healthier, Hawaiian community. He works systemically throughout the community by providing traditional healing, healing classes, and programs with in public schools. He also is well vested in the community thru various Hawaiian Agencies and Organizations (HAO), as a small business owner, and various boards he sits on. Sean was trained traditionally by several practitioners, including “Coach” Ken Kamakea, Kumu Levon Ohai, Papa Tom Takahashi, Auntie Daisy Nash, Papa Francis “Wongy” Wong, Uncle Bruce Keaulani, and Olohe Jerry Walker. He honors his teachers by continuing their work and passing down their knowledge. He has also work at the University of Hawaiʻi, Hawaiian Studies with Na Pua Noʻeau, a program directed at young Hawaiians and higher education. He has a degree in Hawaiian studies and a background in horticulture.

Judge Randolph Collins oversees the Pueblo of Acoma Judicial court and is the program director for the Acoma Wellness Court. He has been a critical motivator in the Acoma safety-net that provides support and engagement for graduates of the Acoma Wellness Court. Through his direction of Wellness Court, the program braids judicial response to alcohol and drug use and misuse with health and prevention efforts to lead Wellness Court participants to a healthier and more sustainable outcome after graduation.

Tim Collins, MPH, MS, MA is an epidemiologist with 20+ years of experience in public health, research and community relations. As research director for U.S. Agency for International Development-funded projects in Europe and Central Asia, he led teams in large-scale survey implementation. As advisor to heads of state, he assisted with restructuring of health ministries and funding healthcare systems through tax-fiscal reform. In Abu Dhabi, he served as interlocutor to tribal leaders and Bedouin communities. Using data to advocate for rural and disaffected populations, he has presented research worldwide. Recently, he provided statistical analysis for an obesity intervention for Alaska Native children. Currently, he supports opioid and substance use related initiatives of the Alaska Native Epidemiology Center. He holds an MPH from Keck School of Medicine, University of Southern California, and graduate degrees in psychology and diplomacy.

Maria Christina Crouch currently works in the Behavioral Health Department at Alaska Native Tribal Health Consortium. She is a doctoral candidate in the Clinical-Community Psychology program with a rural and indigenous emphasis at the University of Alaska Anchorage. She is a National Institute of Health Diversity Award fellow and an Indian Health Service scholarship recipient. Her passions are in community, research, and clinical pursuits related to the health promotion, holistic wellness, and advancement of Alaska Native peoples.

Denise Curtis, MA, LPC is a full-time doctoral student in Counselor Education & Supervision at the University of South Dakota. She focuses on Expressive Art Therapy and facilitated the "Women of Wisdom" Circle in Cherokee NC for Analenisi Behavioral Health. While Denise is currently a college mental health counselor at USD, she has also served as a high school counselor at Saint Francis Indian School on the Rosebud reservation.

Whitney Danz, MSW currently works for the Confederated Salish and Kootenai Tribes Project LAUNCH as the Project Director; formerly she worked as a Childhood Mental Health Consultant within reservation preschools. Before coming to Project LAUNCH, her previous work experiences took place in educational settings, and focused on family partnership, counseling, and mental health supports with children and youth of various ages.

Ray Daw is Navajo originally from Houck, Arizona. Immediately after graduating from high school, he enlisted in the US Army. He has a Masters Degree from the University of New Mexico. He has been in the behavioral health field for over 35 years, as a Clinical Director, Executive Director, and Administrator. His work in behavioral health has been heavily on developing trauma-appropriate approaches that are healing and effective in prevention and treatment by application of the historical trauma model in with tribal communities; youth, adults, families, elders, veterans, and providers.

Shannon Dial, LMFT currently works as the Executive Officer of the Integrated Services Division for The Chickasaw Nation in Ada, OK. This division includes Medical Family Therapy, which is in its fourth year of implementing behavioral health integration throughout the Chickasaw Nation Department of Health's four locations. The transition to Integrated Care has improved access to mental health services and provides a biopsychosocial team approach to healthcare. She also oversees Prevention Services which includes two programs; one with a focus on tobacco cessation and wellness education and another dedicated to suicide prevention. In the Integrated Services Division she has overseen the implementation of Zero Suicide, which has included implementation of universal depression and suicide screening throughout the Chickasaw Nation healthcare system. The Zero Suicide project is in its fourth year of development and has had a great deal of success.

Autumn Drags Wolf, LCSW is an enrolled member of the Mandan, Hidatsta and Arikara Nation. She is Itazipco from Cheyenne River reservation. Autumn graduated with her Master's Degree from New Mexico Highlands University and is a licensed Clinical Social Worker. Autumn currently holds the position as Clinical Supervisor with ABHS.

Elizabeth Eggleston is a Mental Health Therapist at Saint Regis Mohawk Tribe Mental Health located in Akwesasne, NY. She graduated from SUNY Empire State University with a Bachelor's degree in Psychology and Human Development with a concentration in trauma. Elizabeth obtained her master's degree in Social Work from Simmons University; college of Social Work in Boston MA with a certification of trauma and interpersonal violence. She is a licensed Master Social Worker and is a member of the International Association of Trauma Professionals, a Certified Clinical Trauma Professional and a Certified Family Trauma Professional. Prior to working with the Saint Regis Mohawk Tribe Mental Health Services she worked with veterans that had co-occurring disorders providing individual counseling as well as intensive family counseling. She has experience in facilitating therapeutic groups to include: IDDT, DBT, PTSD, relapse prevention and open processing group and Social Skills group.

Melissa Eidman is an enrolled member of the Yurok Tribe of California. She graduated from Stanford University, earning a bachelor's degree in Human Biology with a concentration in Native American community health. She has 4 associate's degrees from the Los Rios community colleges in biology, chemistry, social science, and liberal arts. While at Stanford, she worked with the Yurok Tribe to identify contributors to health and health seeking behavior on the Yurok Reservation. Upon graduation, Melissa earned the John Gardner Public Service Fellowship, taking positions to further engage with Native American health policy and delivery. Melissa is now the Medication Assisted Treatment (MAT) Program Coordinator for CCUIH. She works in partnership with the California Department of Health Care Services and the California Rural Indian Health Board to execute the Tribal MAT Project.

Pamela End of Horn, MSW, LICSW National Suicide Prevention Consultant, Indian Health Service Headquarters Rockville, Maryland. She is responsible for the development and oversight of the Suicide Prevention and Care Program. Her work focuses on program policy development, program implementation and evaluation. Her prior work experience includes working as a Public Health Advisor serving as a project officer for the MSPI/DVPI, area liaison for the Great Plains Area as well as working as a Suicide Prevention Coordinator in the Department of Veterans Affairs at the Eastern Colorado Healthcare System in Denver, Colorado and the Saint Cloud VA Healthcare System in Saint Cloud, Minnesota. She has a Master's Degree in Social Work with practicums in Domestic Violence. In addition, she is certified in Cognitive Processing Therapy. She currently holds advanced practice licenses in North Dakota and Minnesota as a Licensed Independent Clinical Social Worker. She is currently completing a Doctorate in Social Work at the University of Pennsylvania, in Philadelphia, Pennsylvania.

Jackie Engebretson, MSW is a Behavioral Health Program Manager at the Alaska Native Tribal Health Consortium (ANTHC). Her work centers on reducing and preventing opioid and substance use disorders. Jackie previously worked with the YMCA of Snohomish County, Tulalip Tribes of Washington (Youth Services Department), and the National Indian Health Board. She received her BA from the University of Alaska Anchorage. She also completed her MSW in Community-Centered Integrative Practice and a Nonprofit Management Certificate at the University of Washington.

Kevin English, DrPH is the Director of the Albuquerque Area Southwest Tribal Epidemiology Center (AASTEC), which serves 27 Native American communities in the Southwest. Current AASTEC services are organized around four priority

areas— epidemiology, health research, training, and public health practice. Kevin has been working with tribal communities across the country since 1995 as a researcher, public health practitioner and a clinical pharmacist. He received his Doctorate in Public Health from Columbia University in 2013.

Rebecca Ervin currently works as The Elder Outreach Coordinator at The Alaska Native Tribal Health Consortium. Rebecca earned her BA, in Counseling Psychology from the Alaska Pacific University in the fall of 2017. She is currently pursuing her Master of Science in Counseling Psychology at the Alaska Pacific University. Her passions include learning her Upper Tanana Athabascan culture and language, subsistence hunting and fishing, and working on improving behavioral health wellbeing within the Alaska Native Community.

Kimberly Fowler, Ph.D. hails from Jacksonville, FL, received her Ph.D. from Yale University in New Haven, CT in May 2005 and Bachelors of Science from Tennessee State University in Nashville, TN in 1998. Dr. Fowler completed a postdoctoral fellowship in 2009 from the University of Colorado-Denver where she also received a Certificate in Public Health. During her postdoctoral training, Dr. Fowler supported a local non-profit by writing a grant and supporting the community in developing, implementing, and managing a women's health behavior intervention program to reduce health disparities risk. Since completing her training Dr. Fowler has supported a number of initiatives through the coordination and delivery of technical assistance in health systems and clinical operations. Her technical assistance projects have included supporting insurance applications for non-profits, credentialing of clinicians, improving clinical operations workflow, Electronic Health Records/Electronic Patient Management system development, billing and coding strategies to increase clinic reimbursements and revenue, third party billing implementation, implementation of emergency preparedness programs and supporting a variety of health education projects focused on reducing health disparities for communities of color.

Robert Foley, M.Ed. is the Chief Program Officer with the National Indian Health Board (NIHB) where he works on programs and advocacy initiatives providing technical assistance, training, resource brokering and information dissemination services on a variety of issues including: Medicare/Medicaid/CHIP; methamphetamine; behavioral health; and HIV prevention; and public health accreditation. At the core of NIHB's work is to ensure that the federal government upholds the trust responsibility for health. Previously, Mr. Foley worked with the National Native American AIDS Prevention Center delivering HIV technical assistance, creating national prevention and educational materials, and promoting targeted social marketing efforts. Mr. Foley worked as a training specialist with the National Network of Prevention Training Centers to train on HIV/STI evidence-based prevention. Prior, he was a research assistant with the Tri-Ethnic Center for Prevention Research at Colorado State University where he examined substance use and domestic violence prevention in rural and ethnic communities.

Edward Fox, Ph.D. is the Director of the National CMS Tribal Data Project at the National Indian Health Board. Dr. Fox has a Ph.D. in political science from the University of Washington, a BA from the University of Minnesota, and a Master's in Public Administration, SFSU. He is a former Policy Analyst and then Executive Director of the Northwest Portland Area Indian Health Board, 1995 to 2005. Dr. Fox has also served as Health Services Director at the Port Gamble S'Klallam Tribe 2011 to 2016 and as the Director of the Squaxin Island Tribe's Health and Social Services Department 2006- 2010. He previously

worked in academia as Professor of Government at Eastern Washington University from 1991-1995.

Babette Lilinoe Galang, MPH, LMT is the Traditional Healing and Complementary Health Director at Papa Ola Lokahi (POL), a native Hawaiian health consortium established by Congressional Act in 1988 to address the dire health statistics of the Hawaiian people. She has been employed at Papa Ola Lokahi since 1997 in the area of Native Hawaiian traditional healing and cultural practices, advocating for their protection, preservation, perpetuation and cultural integrity. She was trained in these practices by masters Henry "Papa" Auwae (la-au lapa-au/herbal medicine), Margaret Machado (lomi-lomi/ massage) and Malia Craver (ho'oponopono/resolving broken relationships). She supports kupuna (elder) cultural practitioners, advocating for their efforts to perpetuate their knowledge and wisdom for future generations. She has organized and supported POL's kupuna team in cultural awareness/sensitivity workshops for various agencies and organizations. She also assists with Kupuna Councils Statewide who provide healing and cultural services to clients of the Native Hawaiian Health Care Systems.

Jacque Gencarelle is a substance abuse prevention specialist with over 20 years of experience in community development, coalition building, marketing, strategic planning and grass-root outreach. She is a certified federal trainer of the Indian Country Drug Endangered Children (DEC) curriculum and the Substance Abuse and Mental Health Services Administration (SAMHSA) Substance Abuse Prevention Skill Training (SAPST). Ms. Gencarelle specializes in substance abuse prevention, community coalition development, and strategic planning utilizing the Strategic Prevention Framework. She has extensive experience in collaborating with Tribal communities and the underserved, vulnerable rural populations in addressing the issues from a community based approach. She has facilitated various seminars and workshops on various topics, including prescription drug use and abuse, alcohol, suicide prevention, strategic planning, and the Tribal Action Plan 101 developed in conjunction with SAMHSA. Ms. Gencarelle is currently the Program Coordinator for the Prescription Drug Overdose Prevention Program through the Coconino County Public Health Services District and Arizona Department of Health Services. She is Navajo (Diné)/Chiricahua Apache, mother of four, and resides in Flagstaff, AZ.

Colin Gerber, MPH serves as an Epidemiologist with the Urban Indian Health Institute (UIHI) in Seattle, WA where he provides technical assistance for urban Indian organizations funded under the Indian Health Service's Methamphetamine, Suicide, and Domestic Violence Prevention Initiatives. He also assists with the CDC Good Health and Wellness in Indian Country program evaluation and UIHI's sexual violence research. Colin completed his Master's in Public Health at the University of Minnesota and has worked extensively in public health monitoring, evaluation, and research, including a year of service as a Global Health Corps Fellow in Rwanda, East Africa.

Seth Green, PhD is a licensed clinical psychologist. He serves as the Director of Psychological Services at Norton Sound Health Corporation, Director of Rural Health Psychology Fellowship at NSHC, and as Co-Director of the Alaska Psychology Internship Consortium. He enjoys serving as a site visitor for APA accreditation for training programs to ensure training standards are upheld throughout the country and teaching classes to behavioral health aides on rural practice issues at one of Alaska's tribal colleges. Seth is passionate about rural workforce development issues, training across

the spectrum for psychologists, and access to care issues in rural settings.

Ted Hartwell is on the research faculty of the Desert Research Institute. He is the Principal Investigator of a study examining the impact of problem gambling in Nevada tribal communities. A problem gambler in long-term recovery, he promotes awareness, prevention, and treatment of problem gambling for the Nevada Council on Problem Gambling as their Community Engagement Liaison. He lectures for UNLV's Boyd School of Law and University of Utah Gaming Regulation classes, UNLV's School of Medicine, and trains Clark County social workers and other providers on the issue of problem gambling.

Joshua Hudson (Ojibwe) is a citizen of Bay Mills Indian Community, and lives on the shores of Lake Superior in Northern Michigan. He currently serves as the Program Manager for the National Native Network (NNN), in addition to serving as Judge for Bay Mills Tribal Court's Court of Appeals and the Healing to Wellness Court. He has an educational background centered in public administration, leadership and American Indian studies; with work experience spanning coast to coast in a variety of capacities including substance abuse, mental health, youth development, and public health. Within his current work with the NNN, he provides training and technical assistance nationally as well as developing, cultivating, and disseminating commercial tobacco and cancer resources for Tribes and tribal organizations.

Becky Jacobs, MS, has her MS from Alaska Pacific University in Counseling Psychology and is currently working as the Co-Occurring Clinician at Ernie Turner Center, a residential treatment program for adults in recovery. She works individually with each participant to create a Recovery Wheel (a graphic representation of the whole person seeking long-term recovery).

Tamara D. James, PhD currently serves as the Acting Director for the Division of Behavioral Health (DBH). Dr. James joined IHS in 2016 as the National Data Coordinator within the DBH. In this role, she has supported DBH program priorities including reporting and evaluation efforts related to Suicide Prevention, Alcohol and Substance Abuse, and the Community Health Representatives programs. She received her PhD in Biomedical Sciences from New York University School of Medicine and completed postdoctoral fellowships at the National Institute of Child Health and Human Development (NICHD-NIH) and a bioinformatic startup, GeneCentrix Inc. Throughout her career she has worked as a health science resource within tribal, non-profit, and federal settings to promote the health and wellbeing of the American Indian and Alaska Native (AI/AN) population. Her transition from "bench science" to health science administration was possible through her selection into the American Association for the Advancement of Science (AAAS) Science and Technology Policy fellowship program. As a policy fellow within the National Institute of Dental and Craniofacial Research (NIDCR) she participated in science policy activities to advance the mission of the Institute. In that capacity, she was awarded leadership training through the Society for Advancement of Chicanos/Hispanic & Native Americans in Science and Americans for Indian Opportunity Ambassadors program. She is passionate about strengthening AI/AN families and communities with a focus on the promotion of wellbeing and resilience among AI/AN males. Tamara is a member of the Choctaw Nation of Oklahoma.

Alyssa Jojola is from Isleta Pueblo, New Mexico. She received her B.S. in Physical Education from the University

of New Mexico and has 4 years of teaching experience in grades K-12. Currently, Alyssa is a Project Specialist at the Albuquerque Area Indian Health Board and a graduate student at the University of New Mexico studying Community Health Education. Her work includes creating awareness and education on mental health, as well as substance abuse and suicide prevention in Native American communities in the New Mexico and Colorado areas. Her certifications include Certified Mental Health First Aid Instructor (Youth and Adult).

Allyson Kelley, DrPH, MPH is a senior community health scientist and the founder of Allyson Kelley & Associates PLLC. She leads a multidisciplinary team of associates and together they work to build evaluation capacity, understanding, and infrastructure that results in opportunities for community healing and transformation. Since 2005, she has worked with tribes as a research partner, expert public health consultant, lead evaluator, methodologist, epidemiologist, writer, and educator. She earned her Master's degree in Public Health Practice from the University of Alaska Anchorage and her Doctorate in Public Health from the University of North Carolina at Greensboro. She is the author of more than 30 peer reviewed publications, and the author of *Evaluation in Rural Communities* text book published in December 2018 by Routledge.

CAPT Susan V. Karol, MD, FACS is the Associate Medical Director and a Health Insurance Specialist for the CMS Division of Tribal Affairs. She is an enrolled member of the Tuscarora Indian Nation. Dr. Karol was the National Chief Medical Officer for the Indian Health Service, 2008-2017. She is a Captain in the United States Public Health Service serving in a variety of positions; presently working to improve the Quality of health-care for American Indian and Alaska Natives through her work at CMS. Dr. Karol graduated from Dartmouth College in 1979 and received her M.D. from the Medical College of Wisconsin in 1983. Her post-doctoral training includes serving as a Clinical Fellow in Surgery at the Massachusetts General Hospital and Chief Resident at the University of Massachusetts Surgical Program. Dr. Karol is a Fellow of the American College of Surgeons and a member of the Association of American Indian Physicians.

Sebough Kouyoumjian, MPA, HAS is a highly experienced development and public health professional with over 3 years in specialized subject matter experience focusing on mental health, trauma-informed-care, infectious diseases, substance abuse, and medical health policy/advocacy for underserved populations and American Indian and Alaskan Native populations. As the Public Health Associate for the Technical Assistance and Research Center (TARC) at National Council of Urban Indian Health (NCUIH), Mr. Kouyoumjian provides leads and supports NCUIH's National Youth Advisory Council ("Youth Council") with professional development trainings on areas behavioral health topics, strength-based resiliency, peer support tools. Sebough also supports UIHP's with program evaluation efforts to advance UIHPs in an optimal direction, facilitates Behavioral Health Community of Learnings webinars focused supporting Member Programs' efficiency and effectiveness in capacity building, quality of care and providing greater access to urban AI/AN populations. Sebough earned his Master's degree in Public Administration/ Health Service Administration from the University of San Francisco.

Kirsten Krane has worked with more than 65 hospitals and organizations to implement quality improvement initiatives. Kirsten assists the 14 MSPI and DVPI grantees in the Billings Area with data collection and evaluation support. She also designs and manages projects for Boston Medical Center's

'Center for Health Equity, Education, and Research' (CHEER) where she has assisted more than 50 hospitals and communities across the nation to catalyze change and improve maternity care practices. Kirsten runs a public health consulting business, Krane Consulting in East Glacier Park, MT, which focuses on grant writing, evaluation, and healthcare improvement services in Native and rural communities.

Louis J Lafrado, Ph.D. holds a doctorate from The Ohio State University College of Veterinary Medicine and has worked in public health program development and evaluation since 2000. The focus of much of his effort has been on grantmaking and sustainability of community public health programs. He has worked with the Pueblo of Acoma for nearly 15 years where he has served as an external program evaluator and program developer for a series of public health programs including alcohol misuse and substance use disorders. In addition, he has worked on suicide prevention, intervention and postvention, Acoma Drug Court, Department of Education programs, and tobacco cessation and prevention programs. On this AI/AN Behavioral Health Summit programming, he has contributed to the program evaluation assessments for Suicide prevention and intervention and wellness court outcomes in Acoma.

Jessica Leston (Tsimshian) has worked with Tribal health services for 15 years, currently at the Northwest Portland Area Indian Health Board. Jessica has contributed to community-based participatory research and systematic program development at the local, regional and national level – focusing on HIV, HCV, STI and drug use and misuse. She is a healthcare advocate and respects the influence and positive effect people and communities have on healthcare systems. Jessica is currently enrolled in a DrPH program at the University of Illinois.

Tonya M. Louis, MSW is an enrolled member of the Acoma Pueblo Tribe and has been working in the field of Behavioral Health Services for over 10 years. She received her Master of Social Work from New Mexico Highlands University in 2012. She also received her Bachelor of Social Work from Western New Mexico University in 2011. Currently, Ms. Louis is a Licensed Master Level Social Worker, serving in the capacity of the Clinical Director with Acoma Behavioral Health Services. She specializes in the field of substance use and suicide prevention. She is also certified in Native American Inspired Equine Psychotherapy, Motivational Interviewing and is a certified trainer in Connect (prevention/postvention) and Mental Health First Aide (youth/adult).

Carey MacCarthy, MA, LPCC- ATR is a Registered Art Therapist and a Licensed Professional Clinical Counselor, holding a Master's Degree in Psychology/Art Therapy, with eighteen years' experience within the Art Therapy field. She is the Founder, Executive Director and Facilitator of Indigenous Healing Arts Alliance. She is a contributing author to the American Art Therapy journal, presenter, lecturer, and researcher, with most current research studying the efficacy of the Start Up! curriculum within tribal schools on reservations.

Carrie Manning is a Dakota Sioux, tribal enrolled member of the Fort Peck Assiniboine & Sioux Tribes. She has her education degree and is currently working on a community leadership degree. Carrie has been in the education field for the past 20 years. She became the project coordinator for the MSPI GEN I in 2016. Carrie is ASSIT trained; SafeTALK trained and is currently on the Fort Peck Tribes suicide awareness team, and a member of the ZERO Suicide team for the state of Montana. Carrie is a wife, mother, grandmother and a very active community member. Carrie has been a role model for

the youth and is guiding the youth to become leaders in their schools and in their community.

Anita Martin, MD received her medical degree from the University of North Carolina at Chapel Hill in 1983. She completed her pediatric residency training at Columbus Children's Hospital in Ohio. From there, she practiced in a rural North Carolina setting as part of the Rural Health Program. In addition, she has practiced in multiple primary care settings including Kaiser Permanente, a private practice, a hospital owned practice, and an urgent care. She currently works as a staff pediatrician for the Three Affiliated Tribes on the Fort Berthold Reservation in North Dakota. She is a fellow of the American Academy of Pediatrics. As a pediatrician, she believes her role is to work with children and their families to improve the health of the family and the community. Her special interests include childhood obesity, asthma, and ACEs (Adverse Childhood Experiences.)

Kitty Marx is the Director, Division of Tribal Affairs, in the Center for Medicaid and CHIP Services, at the Centers for Medicare & Medicaid Services (CMS). CMS Tribal Affairs serves as the point of contact on Indian health issues for the agency and for tribal leaders, Indian health providers, and beneficiaries. Prior to CMS, Kitty served as the Legislative Director, National Indian Health Board. She has also worked for Indian Health Services and for Montana Legal Services in Browning, Montana. Kitty received a Bachelor of Arts from the University of Maryland and a Juris Doctor degree from Vermont Law School.

Celena McCray, Navajo, MPH(c) is a tribal member of the Navajo Nation and serves as the THRIVE (Tribal Health-Reaching out Involves Everyone) suicide prevention & WA DOH (Washington Department of Health) Parenting Teens Project Coordinator at the Northwest Portland Area Indian Health Board. Her clans are the Bitter Water People born for the Mountain Cove People. She provides suicide prevention training, technical assistance, and develops culturally appropriate media campaigns and resources related to suicide prevention. Celena assists adolescent health project staff with www.wernative.org, the national multimedia health resource for Native teens and young adults.

Kelly McGrady, RN is a professional who seeks to assist all people to find their true wellness within. It is a true calling to be of good cheer and stay in prayer while assisting clients in a state of distress to help promote their inner balance. I love working with young and old clients. Always seeking to help the clients utilize their own strength to build themselves up. Promotes resilience protective factors and helps clients identify their risk factors and learn how to reduce health disparities in Indigenous communities. Years of adversity have strengthened the passion to find own inner strength that is prayers of the generations of old. I am resilient along with her husband Jason and five wonderfully blessed and healthy children (Kelson, Makalie, Khael, Jersey, and Kaylor). I am a member of the Three Affiliated Tribes, along with Seminole Tribe of Oklahoma, and Sioux of Rosebud SD.

Zoann T. McKenzie, DVM, MPH Zoey has a BS in Environmental Health from Colorado State University, an MPH from University of New Mexico, and a DVM from Washington State University. She is currently the Navajo Area Injury Prevention Specialist and a Veterinarian. She lives in Shiprock in her straw bale house with her dependable Chow-mutt mix Foxy and the interminably incorrigible tuxedo cat Nermal. Her most recent harrowing adventure was surviving a three-month string of bad luck at the end of 2017—hit by car, hit a deer, horrible haircut. Just this month, Zoey has taken up the daunting challenge of learning to knit.

Rain McNeil, MSW has a Bachelor's degree in Sociology and Master's degrees in Therapeutic Recreation Administration and Social Work. He has worked in clinical social work, education, and substance abuse for almost 20 years, mainly in Child Welfare and is currently an Associate Social Worker within the state of California. He is originally from North Carolina and is wartime military veteran.

Gloria Miele, Ph.D. is a Clinical Psychologist who has been designing, developing and delivering training in substance use disorders for over 25 years. In her current role as Learning Collaborative Coordinator for the California Hub and Spoke System MAT Expansion Project at UCLA's Integrated Substance Abuse Programs, she is on the team responsible for training and technical assistance for the 18 Hub and Spoke networks across California. Dr. Miele's focus areas include empirically-supported behavioral and pharmacological treatments, comorbid mental disorders, gender issues, trauma-informed care, HIV and more. She was Training Director for the Long Island/Greater New York Node of NIDA's Clinical Trials Network (CTN) from 2001 to 2016 and has worked on projects funded by SAMHSA, NIDA, and the Canadian Institute of Health Research. She was Instructor of Clinical Psychology (in Psychiatry) at Columbia University College of Physicians & Surgeons, 1996-2018. Other interests include women's leadership development and organizational change.

Michael Mooradian, CDCS Graduated from Anchorage Drug Court in 2003. The treatment model used was a Therapeutic Community Model of Substance use treatment. Since his completion of that program he has become a student of the T.C. Model and has worked in a T.C. Model for over 10 years and is currently working in a modified T.C. He is a person in long term recovery and has over 16 years clean and sober. Since graduating, he has obtained the State of Alaska, Chemical Dependency Clinical Supervisor Certification. He currently holds a position on the board of directors for the Alaska therapeutic Court Alumni, which he co-founded in 2006. Since his completion of the Drug Court Program he has presented numerous times at the national association of Drug Court Professionals annual conference as well as the Alaska Annual School of Addiction specializing in Peer to peer work with those addicted to substances.

Ginger Myers is a licensed marriage and family therapist with over 16 years' experience providing clinical therapy services for children, adolescents, adults, couples and families in outpatient and residential clinic settings as well as school and military installation settings. Ginger's specialized training includes suicide risk assessment/intervention, clinical supervision, play therapy, trauma therapy (EMDR Level II), military deployment/reunification, team building and sex offender treatment for adolescents. Ginger currently serves as the Quality Management Administrator

for the White Mountain Apache Tribal Regional Behavioral Health Authority and Apache Behavioral Health Services. Her prior positions at ABHS include clinical supervisor and mental health counselor as part of the Nowhi' Ida' bagoye' (Life is Precious) Suicide Prevention Team.

Elisha Oliver is a biocultural anthropologist and visual ethnographer. Her research explores the intersections space and place, health, and language in rural and urban communities, with particular focus on structural violence, women's biopsychosocial health, intergenerational and historical trauma, and the use complimentary and alternative medicine and syncretic religion to produce positive health outcomes. She has worked extensively on research to improve birth outcomes for pre-term babies and reduce infant mortality. Elisha is working on a variety of research projects. Currently, her top three projects are: Suicide Prevention in American Indian/Alaska Native Communities, The Role of Caregivers for Parents with Early Onset Dementia, and Infant Mortality in Urban African American Communities. Elisha is an adjunct professor at OSUOKC and serves as the Chief Operating Officer for Thick Descriptions. She is a STEM mentor for a national organization. Elisha earned her Ph.D. and M.A. in Anthropology from the University of Oklahoma.

Xiomara Owen, MS grew up in Wasilla, Alaska and currently lives in Anchorage with her wife and 3 sons. Xio obtained her bachelor and master degrees in psychology from the University of Alaska Anchorage and she is a PhD Candidate in the UAA-UAF Clinical-Community Psychology program. She completed her pre-doctoral internship as a clinician in Bethel, Alaska and has worked at the Alaska Native Tribal Health Consortium for nine years, serving tribal partners throughout the state. Xio's professional interests focus on issues related to behavioral health in multicultural populations, mental health literacy, behavioral health training, and workforce development. As the Director of Behavioral Health Aide Training, Xio seeks to understand statewide behavioral health concerns, align training needs and resources, and assist in the continued development of a culturally sensitized behavioral health workforce to serve rural Alaskan communities. In her off time, Xio enjoys being with her family, biking, cooking, and playing games.

Sheri Patraw was born and raised in Bethel, Alaska and is of Yup'ik Eskimo and Dena'ina Indian descent. She holds a bachelor's degree in Psychology and has thirty years of experience in the social service field including family preservation, child protection and mental health case management. Much of her work has been with Native American/Alaska Native populations utilizing the Indian Child Welfare Act. Her goal as Program Manager of the Behavioral Health Aide Program is to elevate the profession of village-based behavioral health providers and to provide them with a network of support that enables them to address a wide array of behavioral health issues with confidence. In her spare time, Sheri enjoys reading, sewing, gardening and deciphering people's personality profiles with her husband Robert.

Larold Pinal is an enrolled member of the White Mountain Apache Tribe. His maternal clan is (Green Mesquite People) and his paternal clan is (Line of White Sand People). He is a traditional Apache medicine man from the community of Canyon Day on the Fort Apache Indian Reservation. He conducts many Apache healing ceremonies that include the use of herbs and traditional prayers and songs. He was taught these Apache ways and ordained by his grandfather, who was also an Apache Medicine Man, as well as another elderly Apache Medicine Man. Larold currently works for Apache Behavioral Health Services

and White Mountain Apache Tribal Regional Behavioral Health Authority as the Tribal Relations Administrator. Larold has more than eight years mental health experience and is credentialed as a Behavioral Health Technician. Larold has more than four years experience developing and adapting curriculum specific to mental health and the White Mountain Apache.

Katie A. Ports, PhD is a behavioral scientist on the Sexual Violence and Child Maltreatment Team with the Research and Evaluation Branch in the Division of Violence Prevention at the National Center for Injury Prevention and Control at the U.S. Centers for Disease Control and Prevention (CDC). She received her doctorate in experimental psychology from the University of Wisconsin in Milwaukee. Much of her current work examines risk and protective factors for Adverse Childhood Experiences (ACEs) in order to identify and improve evidence-based prevention strategies that address health outcomes and inequities across the lifespan. Dr. Ports is CDC's subject matter expert on the Adverse Childhood Experiences (ACE) Study and a co-chair of the Injury Center's Tribal Workgroup.

Alfred Quijance was born in San Jose, California. At the age of three months, Alfred was taken to Old Harbor to live with his Grandmother until the age of 11. He then moved to Seldovia, where he currently resides. Alfred has been married for 49 years to Helen. He and his wife have served as Family Wellness Warriors Initiative Committee members for many years. Together they have two children, one boy and one girl and proud grandparents of four grandchildren and one great grandchild. Alfred has volunteered with Family Wellness Warriors Initiative for many years as a group leader, and speaker and also an advocate for FWWI. Alfred's passion is to reach out to those hurting and bring healing to our people, while giving glory to God.

Patricia "Tish" Ramirez, R.S., MPH was raised in the wilds of the Navajo Reservation at a time when TV went on and off at a respectable hour, gas was cheap, and sugar was real. *"You made your own fun and read books."* Tish read a sufficient number of books, when computers were in their infancy, to graduate from the University of Arizona in Tucson, with a BS in Microbiology. Midway between insanity and senility, she completed her MPH at the University of New Mexico, College of Medicine. The science of Injury Prevention is very near and dear to Tish, since she lives her life vicariously through her daughters. Tish currently serves as the Shiprock District Sanitarian, Anthony Ramirez's wife of 32 meritorious years, and a frustrated seamstress poet.

Desiree Restad, MPH is the Director of Health Promotion Programs for the Northern Cheyenne Tribal Board of Health and the Cottonwood Connections Program. She oversees the following tribal programs: health education, environmental health, and oncology as well as: tobacco, WIC, Tribal Injury Prevention Cooperative Agreement Program, and the Methamphetamine and Suicide Prevention Initiative grant programs. She earned her Master's degree in public health from the University of Montana and her Bachelor's degree in health promotion from Montana State University Billings. She started working for the Northern Cheyenne Tribe in September 2004 and for the last fifteen years, she has led a dynamic team of health professionals and together they have improved the health and wellbeing of Northern Cheyenne tribal members.

Maegan Rides At The Door, LCPC is the Director of National Native Children's Trauma Center. As Director of the National Native Children's Trauma Center, Maegan Rides at the Door has had a key role in designing and implementing a range of

training and technical assistance initiatives in tribal communities, including projects for trauma-informed systems change in mental health, child welfare, and educational settings, each of which address early childhood populations, as well as cross-system projects focusing on the sequelae of early exposure to trauma, including projects in juvenile justice reform and suicide prevention. She is a member of the Fort Peck Sioux and Assiniboiné Tribes and a descendent of the Absentee Shawnee Tribe.

Royleen J. Ross, PhD (Pueblo of Laguna) is employed at the Norton Sound Health Corporation, in the Rural Health Psychology Fellowship track, serving the rural and remote Alaska Native population. She received her PhD in Clinical Psychology from UND, as a member of the INPSYDE program. She serves as the Society of Indian Psychologists (SIP) secretary and is the SIP Fellow for the APA CNPAAEMI, Leadership Development Institute. She is active in APA Divisions 18, 45, and 35, Section 6 (Indigenous Women). Dr. Ross' professional interests include policy development, tribal and federal advocacy, and mental health advancement for Indigenous Peoples. Dr. Ross is working on an Indigenous perspective child maltreatment book. She is involved in MMIWG awareness and treatment modalities, and projects exploring the intersectionality between mental health and law enforcement in Indian country, attributed partly to her former career experience as an FBI agent and New Mexico State Policeman.

Patricia Roth brings to the position as the project coordinator for the grant includes 7 years in the counseling field. Coordinating individualized care plans for clients in crisis and receiving long-term care as well as a year experience as program director for level III.7 medically monitored inpatient treatment center. She also has experience as director for student services for community college. Ms. Roth has 8 years' experience of collaborating with service providers that include probation/parole officers, social workers, attorneys, nurses and aftercare providers. Domestic violence prevention focus on collaborating with community services and resources to provide education, counseling, court ordered safety protection petitions and access to homeless shelters. As project coordination she is responsible for organizing DV/SA information exchange collaborative community events. She has a rapport with the different agencies utilized to provide services to victims of domestic violence.

Michelle Singer (Navajo), B.S. worked on behalf of tribal people at Oregon Health & Science University for 13 years, most recently as Project Manager for the Native STAND (Students Together Against Negative Decisions) Dissemination, Implementation and Evaluation project. She now works as the Healthy Native Youth Project Manager at the Northwest Portland Area Indian Health Board, where she will help transition the Native STAND project into Phase II under their robust adolescent sexual health programming. Michelle's professional experience spans over 30 years of experience in education, research, government affairs and community engagement in Indian Country & Alaska.

CDR Richard E. Skaggs Jr., R.S., MPH, was born in Owensboro Kentucky and raised on a small farm in rural Western Kentucky. In 1989, he graduated from the University of Kentucky with a B.A. in Economics. In 1997, Richard graduated from Eastern Kentucky University with a B.S. in Environmental Health Science. After graduation, his first permanent US Public Health Service assignment was with the IHS Tucson Area on the Tohono O'odham Nation in Sells, Arizona. In 2000, he completed the IHS Injury Prevention Fellowship. In 2004, Richard came to the Navajo Nation as the District Injury

Prevention Specialist, Shiprock NM. Richard completed his Masters in Public Health from New Mexico State University in December 2010. Richard currently lives in Cortez, Colorado where he enjoys mountain biking (except for an occasional fall), hiking and the splendor of the 4 Corners.

Clayton Small has been an elementary, middle, and high school principal on reservations and in urban communities. He has been a faculty member at the University of New Mexico, University of Montana, and Gonzaga University. He served as a CEO for Indian Health Services and directed several non-profit organizations. His organization, Native P.R.I.D.E., provides prevention, wellness, healing, and leadership training throughout Indian Country. He has developed prevention programs for the Bureau of Indian Affairs, Indian Health Services, SAMHSA, and the Department of Justice. He has comprehensive knowledge and experience in community mobilization, strategic visioning, Indian education, organizational development, youth leadership, prevention, wellness/healing, team-trust building, cultural competency, and creating positive change. He conducts training and facilitation nationally and internationally. His programs offer leadership and hope for American Indian, Alaska Native, and First Nations people.

Sydney Smith, LPC, PADC, CPGC-S ICGC-II holds a Master's Degree in Clinical Psychology and Psychometrics, is licensed as a Nevada Certified Gambling Counselor Supervisor, Licensed Professional Counselor, Licensed Alcohol and Drug Counselor, and Internationally Certified Gambling Counselor. Sydney has spent her career working with co-occurring and addictive disorders in inpatient and outpatient settings. Practicing in diverse cultural setting from small-town Oklahoma to western metropolitan areas of California and Nevada, She brings a depth perspective and Jungian approach to psychotherapy and treatment. Having worked as a behavioral researcher with the Desert Research Institute in Las Vegas, Nevada and the UCLA Psychiatry Department, Sydney is dedicated to continued engagement in tribal communities in the area of problem gambling through surveys, education, awareness, prevention, and treatment throughout Nevada and Indian Country. Sydney is the Founder of RISE Center for Recovery in Las Vegas, NV; her expertise resides in the treatment of problem gamblers and their families.

Michelle Smoke is an Akwesasne Mohawk woman from the Territory of Akwesasne. Her Mohawk name is Kawennake which translates to "on the words". She attended the Clarkson School which was a bridging program at Clarkson University and graduated from Clarkson University with a Bachelor's of Science in Psychology and a minor in Business. Michelle has two Masters. She obtained her Masters of Education in Counseling and Human Development and a Certificate of Advanced Studies in Counseling and Human Development at St. Lawrence University. Michelle also has a Master's Degree in Mental Health Counseling from St. Lawrence University. She currently holds a limited permit as a mental health therapist and is currently working on hours to obtain full licensure. Prior to working as a therapist, Michelle has 15 years of work experience across a variety of settings including education, where she worked in early childhood and provided programming for grades K-12. She worked in the social services field as a youth worker in an urban and rural setting and as a preventive/foster care caseworker. She also worked in the criminal justice field advocating for indigenous people and victims of crimes, facilitating restorative justice circles, and providing support for preventive programming. During these work experiences she learned more about implementing trauma informed care and strived to make more of an impact on her community. Michelle's

approach emphasizes the integration of culture and the therapeutic approach. Services include individual, couples, family and group therapy across the lifespan. Michelle is trained in Trauma Focused Cognitive Behavioral Therapy, Restorative Justice Facilitation, and Crisis Intervention.

Claradina Soto (Navajo/Jemez Pueblo) is a full-time Assistant Clinical Professor at the University of Southern California Keck School Of Medicine in the Institute for Health Promotion and Disease Prevention Research. With over 20 years working with American Indian and Alaska Native (AI/AN) populations in public health, she has projects collaborating with urban and Tribal communities in CA to reduce and prevent mental health disparities, commercial tobacco use, and substance use disorders. She collaborates on several research projects funded by NIH/FDA, Tobacco Related Disease Research Program (TRDRP), Department of Health Care Services, California Tobacco Control Programs and the Office of Health Equity. She teaches courses in the Master of Public Health and Health Promotion programs at USC and mentors undergraduate and graduate students. Dr. Soto is a longtime advocate for the AI/AN communities and other priority populations to advance health equity and reduce health disparities.

Rufus Spear is the Community Health Specialist for the Cottonwood Connections youth suicide prevention program. His interest has been in the preservation of Cheyenne history and was highly influenced by both his paternal and maternal grandparents. His experience over the past 28 years visiting and interviewing Cheyenne members, researching the preservation efforts of past generations, reviewing non-Cheyenne authored records, and work with other programs servicing the Northern Cheyenne community led him to develop the Cheyenne Curriculum, its presentations, prevention protocol, and the Cheyenne Connectedness Survey. Conversations with community members, school officials, Societies members, Chiefs, law enforcement, and youth have all had a significant role in guiding and shaping the efforts of the Cottonwood Connections program.

Sue Steward, BSHA, CHP is a citizen of the Cow Creek Band of Umpqua Tribe of Indians and grew up in Southern Oregon, she currently lives in Vancouver, WA with her husband of 38 years. Sue, her husband and 2 sons moved to Seward, AK in 1998 where she became educated and worked as a Community Health Practitioner, and completed her BS in Health Administration. In 2008 she became a CHAP Director and intimately involved in CHAP leadership throughout the state. Sue has envisioned CHAP expansion for the Northwest Tribes for many decades. She is pleased to now be a member of the Tribal Community Health Provider Project of NPAIHB in the position of CHAP Project Director serving the 43 Tribes of the Portland Area. Sue is committed to efforts to develop Tribal providers of all disciplines to increase access to culturally competent care for all American Indians and Alaska Natives. Sue enjoys a large family who hike, explore and often engage in Tribal and cultural events to sustain our ceremonies, language and history.

Joleen Tapaha, MPH has worked in multi-agencies like the Courts, Youth Corrections, Behavioral Health, Educational Institutes and other federal programs. She is currently with Chinle Service Unit, Chinle Health Promotion under the Methamphetamine Suicide Prevention Initiative (MSPI) - Nahat'ah Bee'anooséé: Growing Leaders Project. She successfully administered the Arrowhead Business Group (ABG) Youth Entrepreneurship Program in collaboration with Johns Hopkins University, Center for American Indian Health. She enjoys working with the general public to address public health

issues. She has her Master's Degree in Public Health from Grand Canyon University, Phoenix, Arizona.

Jolene Firmin Telford is a Special Projects Coordinator for the Alaska Native Tribal Health Consortium Behavioral Health Aide training program. Jolene received her BA in Psychology from the University of Alaska Anchorage with a Community Mental Health emphasis. She has worked in various capacities supporting family service workers, parent educators, early childhood educators, and Behavioral Health Aides throughout rural Alaska. She is a member of the Gwichyaa Zhee Gwich'in Tribe from Fort Yukon, Alaska.

Rachell Tenorio is an enrolled member of Santo Domingo Pueblo (Kewa) and a proud mother of two wonderful boys, Nathaniel and Dominic. Dr. Tenorio received a Master's in Social Work from New Mexico Highlands University with a concentration in government non-profit management in 2012. Thereafter obtained a PhD in Justice Studies from Arizona State University in 2018 focused on deconstructing trauma in Pueblo communities. Dr. Tenorio is currently employed at the Albuquerque Area Indian Health Board as a Native American Research Center for Health Program Manager and a Program Director to address suicide prevention and underage drinking in Native communities.

Lauren Tingey, PhD, MPH, MSW is an Associate Director at the Johns Hopkins Center for American Indian Health, and Associate Scientist in the Department of International Health at the Johns Hopkins Bloomberg School of Public Health. Her research and service portfolio focuses on the development and evaluation of public health interventions to address behavioral and mental health disparities among Native American youth and families. Projects to date have spanned suicide, depression, and substance abuse prevention, as well as sexual and reproductive health promotion, with a focus on combining community-based participatory research with strength-based approaches to promote positive youth development.

Taslim van Hattum, LCSW, MPH is a Director of Practice Improvement at the National Council for Behavioral Health (National Council.) She serves as the Program Director on various CDC-funded initiatives including the National Behavioral Health Network for Tobacco & Cancer Control and the Office for State, Tribal and Territorial Support's Capacity Building Assistance for Public Health Professionals cooperative agreement. She previously served as the Director of Family Health Portfolio at the Louisiana Public Health Institute, and the Director of Behavioral Health at the Louisiana Public Health Institute, overseeing a portfolio of programs that focused on increasing access to and quality of primary care, reproductive health and behavioral health services in the greater New Orleans area, across Louisiana and the Gulf Coast. Taslim brings over a decade of experience to her work including leading behavioral health integration with community-based health care providers to implement innovative and evidence-based models of primary health care, behavioral health care, reproductive health and social services integration.

Maria Vega is a 21 year old, full-time nursing student at Montana State University-Bozeman and a part-time Certified Nurse's Aid. She is a founding member of the Fort Peck Tribes Nakona and Dakota Oyate Youth Council and a member of the Suicide Reduction Committee with the state of Montana. Maria also founded the first ever Miss and Junior Miss Fort Peck Scholarship pageant. Besides her passion for volunteerism, Maria is signed with a modeling and acting agency.

Marjorie Werito, MPH, CHES is currently serving as the Director for the Public Health Division for the Crownpoint Service Unit on the Navajo Nation in Crownpoint, NM. She has over 30 years of experience in Public Health and has been involved in major health initiatives in NM. She graduated from the University of Oklahoma. She has three children and 6 grandchildren with another one on the way. She has provided the administrative support needed for her staff to plan and implement programs like the Peer Helpers Program. She fully supports the MSPI Program efforts for the Crownpoint Service Unit and with her guidance and direction, many best practice programs have been implemented and evaluated.

Jeremy Willie is currently the Methamphetamine/Suicide Prevention Initiative (MSPI) Program Coordinator for the Division of Public Health at the Crownpoint Healthcare Facility in Crownpoint, NM. He has worked with the Crownpoint Division of Public Health for three years. He is responsible for the full oversight and implementation of the MSPI program goals and objectives to promote positive youth development and family engagement through the implementation of early intervention strategies to reduce risk factors for methamphetamine/substance abuse and suicidal behaviors among Native youth up to age 24. He graduated from the University of Nevada-Las Vegas with a Bachelor of Science Degree and has 13 years of experience working in the Public Health field with the Navajo Nation and Indian Health Services.

Autumn Drags Wolf, LCSW is an enrolled member of the Mandan, Hidatsta and Arikara Nation. She is also Itazipco from the Cheyenne River reservation, one of the seven Lakota Tribes. Autumn graduated with a Master of Social Work Degree from New Mexico Highlands University and holds her license in New Mexico as a Licensed Clinical Social Worker. Autumn currently holds the position as Clinical Supervisor with the Pueblo of Acoma Behavioral Health Services. Autumn is passionate about cultivating healing to people whose lives have been affected by challenges, changes, chaos, confusion and trauma. Autumn has been in the helping profession for over 10 years. She strives to create an environment where personal development is actualized, and healthy collaborative relationships are built.

Sierra Wolcott has worked in the helping field for six years, and been an advocate for those with mental health and other different abilities in education and health systems for many more years. She uses her AAS in Accounting to support programs with budgets and data reporting, and uses her experience as a person healing from trauma to help others find their resiliency.

CDR Micah Woodard has extensive leadership experience over the last 20 years that includes serving as an Executive Director, extensive school-based services program development, and is a board certified diplomat in clinical social work. He has served as the Behavioral Health Director at the Western Oregon Service Unit since 2010, where he has received numerous awards and recognition for innovative service delivery design that has positively contributed to both the USPHS and IHS mission.

NIHB BOARD BIOGRAPHIES

Kitcheyan, Victoria (Winnebago Tribe of Nebraska)
NIHB Chairperson, Great Plains Area Representative
Council Member, Winnebago Tribe of Nebraska

Ms. Victoria Kitcheyan is an enrolled member of the Winnebago Tribe of Nebraska currently serving the Winnebago Tribal Council. She graduated from Haskell Indian Nations University in 2006 with a Bachelor of Science in Business Administration. Previous to Ms. Kitcheyan's Tribal Council tenure, she served as the Internal Auditor for the Winnebago Tribe. Most recently, her work has been focused on advocating for systematic changes to the Indian Health Service and overall improved health care outcomes for Tribal nations. Ms. Kitcheyan takes great pride in her Tribal advocacy work and will continue to carry the sacred message of all Native people.

Smith, William (Valdez Native Tribe)
NIHB Vice Chairperson, Alaska Area Representative
Chief, Valdez Native Tribe

William F Smith, a son, father, and grandfather. He was born in Cordova Alaska September of 1952, to Chief Marie Smith-Jones the last full blooded speaker of the Eyak language and a fisherman. When Bill was 17 he went into the Army as a heavy duty mechanic and a recovery specialist. Shortly after going into the service he went on his first tour to Augsburg Germany with the 1/36 field artillery, after returning his next tour was in Long Binh Vietnam from 1971 to 1972. Returning to the states he was transferred to Fort Huachuca Arizona where he was then again shipped overseas to Germany with the 5/68 armor tank outfit. Bill retired from the service in August of 1977, he then moved to Valdez Alaska to work on boats. In 1981 he stopped working on boats and started working for Alyeska Pipeline Service Company in the Marine Department. After 36 year in 2017 he retired from Alyeska and is still enjoying his retirement by hunting, fishing and spending time with his loving family. He is the vice president of the Valdez Native Tribe. He also sits on the board of the Alaska Native Health Board and the National Indian Health Board helping as many Alaskan Native and American Indians as possible. Bill is one of the local Tribal Veterans Representatives working for his brothers and sisters with their veteran issues.

Moose, Sam (Mille Lacs Band of Ojibwe)
NIHB Treasurer and Bemidji Area Representative
Director of Human Services, Fond du Lac Band of Lake Superior Chippewa

Mr. Sam Moose currently serves as the Director of Human Services at Fond du Lac Band of Lake Superior Chippewa. Previously, Mr. Moose was the appointed Commissioner of Health and Human Services for the Mille Lacs Band. In this role, Mr. Moose oversaw the Band's three clinic locations and other services in the areas of public health, behavioral health, family services, and community support services.

Moose previously served as Commissioner of Community Development and was in charge of the Mille Lacs Band's public works and facilities departments and housing development initiatives. He has also served as the Band's director of housing. Mr. Moose is active in traditional activities within his community. He grew up near East Lake and graduated from McGregor High School. He has a bachelor of applied science degree in community health with a minor in Indian Studies from the University of Minnesota Duluth and a master's degree in tribal administration and governance from the University of Minnesota Duluth.

Elgin, Lisa (Manchester Band of Pomo Indians)
NIHB Secretary and California Area Representative
Chairperson, California Rural Indian Health Board
Tribal Administrator, Manchester Pt. Arena Band of Pomo Indians

Ms. Lisa Elgin is the Tribal Administrator for her Tribe and was hired to the position in May 2014. She is an enrolled member of the Manchester-Pt. Arena Band of Pomo Indians which is located in Mendocino County, CA. She is a board member for Sonoma County Indian Health Project and has served in that capacity since 1999. She is a delegate to the California Rural Indian Health Board (CRIHB) for the past eight years and in October 2014 was nominated as Chair for that Board. Her profession is a legal assistant/legal secretary and she has worked in the legal field for over 25 years. She has worked with a wide array of lawyers who specialize in Federal Indian law. She is an active community member and participates and coordinates events for the health clinic as well as her Tribe.

Joseph Jr., Andrew (Confederated Tribes of the Colville Reservation)
NIHB Member at Large, Portland Area Representative
Chairman, Northwest Portland Area Indian Health Board
Vice Chairman, Confederated Tribes of the Colville Reservation Tribal Council

Mr. Andrew Joseph, Jr. has served on the Colville Tribal Council for five terms. He is a Nespelem district representative, serving on the following Colville committees: Executive Committee, Veterans Committee as Chair, Health & Human Services Committee as 1st Vice, Tribal Government Committee as 1st Vice, and Culture Committee as 1st Vice. Mr. Joseph is also a voting delegate of the Affiliated Tribes of Northwest Indians (ATNI) and the National Congress of American Indians (NCAI). In July 2007, he was elected Vice Chairman of the Indian Health Service (IHS) Direct Services Tribes Advisory Committee. On January 22, 2009 he was appointed the Chairman of Northwest Portland Area Indian Health Board (NPAIHB) and in April 2011 he was elected Chairman. In March 2013 he was elected the Member- At- Large for the National Indian Health Board.

Garcia, Donnie (Jicarilla Apache Nation)
NIHB Albuquerque Area Representative
Council Member, Jicarilla Apache Nation

Mr. Donnie Garcia is a member of the Jicarilla Apache Nation and currently serves his Tribe as a Council Member. Mr. Garcia also serves on the Board of Directors for the Albuquerque Area Indian Health Board and is 2017 Vice-Chair for the Direct Service Tribes Advisory Committee.

Wallette, Kaci (Fort Peck Assiniboiné and Sioux Tribes)
NIHB Billings Area Representative
Councilwoman, Fort Peck Assiniboiné and Sioux Tribes

Kaci Wallette is an enrolled member of the Ft. Peck Assiniboiné & Sioux Tribes in Montana. She is currently serving her first term on the Tribal Executive Board. She is also a Registered Nurse and obtained her degree from Montana State University-Northern. Kaci is very passionate about the healthcare of all indigenous people and improving policies, procedures and outcomes on the local, state and national level.

Cook, Beverly (Saint Regis Mohawk Tribe)
NIHB Nashville Area Representative
Tribal Chief, Saint Regis Mohawk Tribe

Ms. Beverly *Kiohawiton* Cook is serving her second term as elected Chief on the Saint Regis Mohawk Tribal Council. For 40 years, Chief Cook has advocated for the rights of Native people in her community of Akwesasne. Chief Cook, a Family Nurse Practitioner, is a prominent voice in the mind-body medicine approach to restoring wellness, reproductive health and environmental justice for Mohawk people. She has presented her signature lecture, "Resilience from our Roots: You are Creation," to hundreds of community members as well as national and international audiences. The lecture weaves together Haudenosaunee traditions and beliefs with basic reproductive physiology, encouraging understanding of the responsibilities of men and women and exploration of how trauma can be passed down through the generations.

Nez, Jonathan (Navajo Nation)
NIHB Navajo Area Representative
President, Navajo Nation

Jonathan Nez currently serves as the President of the Navajo Nation. He was born on the Navajo reservation in Tuba City, Arizona and raised in Shonto, Arizona. President Nez is married to Phefelia Herbert-Nez and they have two children, Christopher and Alexander. In regards to his Navajo clans, President Nez is of the Áshjį́hí Clan (Salt People) and born for the Ta'neesahnii Clan (Tangle clan). President Nez began his Navajo political career after being elected as Shonto Chapter Vice President. He was later elected to serve three terms as a Navajo Nation Council Delegate. President Nez was also elected as a Navajo County Board of Supervisor for District 1 and served two terms. After that he served for four years as Vice President of the Navajo Nation. He is an alumnus of Northland Pioneer College and Northern Arizona University (NAU). He holds a Bachelor of Science degree in Political Science and

a Masters of Public Administration both from NAU. He is currently a doctoral student in political science. President Nez is an avid runner and advocate for healthy living. He enjoys training and competing in long-distance events and has competed in multiple marathons.

Wafford, Marty (Chickasaw Nation)
NIHB Oklahoma City Area Representative
Chairperson, Southern Plains Tribal Health Board
Under Secretary of Support and Programs, Chickasaw Nation Department of Health

Marty Wafford serves as the Under Secretary of Support and Programs in the Chickasaw Nation Department of Health. Ms. Wafford has over 25 years of experience working in healthcare administration and support. She obtained her accounting degree from Southeastern Oklahoma State University in Durant, Oklahoma. She is a Fellow of the Healthcare Financial Management Association and a Certified Healthcare Financial Professional by the HFMA Board of Examiners. She, her husband Michael, son Cash, and daughter Lainee live on a small farm in the Southeastern Oklahoma Area.

VACANT
Phoenix Area Representative

Ortega, Sandra (Tohono O'odham Nation)
NIHB Tucson Area Representative
Council Member, Tohono O'odham Nation

Ms. Sandra Ortega is a member of the Tohono O'odham Nation of Arizona. She has been involved with the Direct Service Tribes (DST) Advisory Committee since 2007. Ms. Ortega currently serves as a Tohono O'odham Legislative Council Representative. Ms. Ortega is Chairwoman for the Health and Human Services Committee which provides oversight to the Tohono O'odham Tribe's Health Programs and the Indian Health Service facilities. She is also Chairwoman for the Human Resources Development Committee which provides oversight to the education department and schools on the Tohono O'odham Nation.

INDIAN HEALTH SERVICE

NATIONAL TRIBAL ADVISORY COMMITTEE ON BEHAVIORAL HEALTH (NTAC) MEMBERSHIP ROSTER

The National Tribal Advisory Committee (NTAC) on Behavioral Health acts as an advisory body to the Division of Behavioral Health and to the Director of the Indian Health Service, with the aim of providing guidance and recommendations on programmatic issues that affect the delivery of behavioral health care for American Indian and Alaska Natives.

The NTAC consists of one primary and one alternate representative from each of the 12 IHS areas. Members are nominated by IHS Area Directors, in consultation with Tribal leaders. All nominees must be elected Tribal leaders or a designee selected by Tribal leaders.



Back row L-R: Ms. Cassandra Sellards Reck (Portland Area), Ms. Adrienne Tiller (Tucson Area), Ms. Jennifer Showalter Yeoman (Alaska Area), Ms. Ophelia Watahomigie-Corliss (Phoenix Area), Mr. Jay Keel (Oklahoma Area), Mr. Roman Durant (Albuquerque Area). Front row L-R: Mr. Benjamin Smith (Deputy Director for Intergovernmental Affairs, Indian Health Service), Ms. Miranda Carman (Former Acting Director Division of Behavioral Health, Indian Health Service, Federal Co-Chair), Ms. Theresa Galvan (Tribal Co-Chair, Navajo Area), Ms. Cheryl Frye-Cromwell (Nashville Area)

NTAC LEADERSHIP

Tribal Co-Chair

Ms. Theresa Galvan, Health Services Administrator
Department of Behavioral Health Services, Navajo
Nation Department of Health Services

Federal Co-Chair

Tamara James, PhD, Acting Director Division of
Behavioral Health Indian Health Service
5600 Fishers Lane, Mail Stop: 08N34A
Rockville, MD 20857

ALASKA AREA

Representative

Ms. Jennifer Showalter Yeoman, Chairperson Kenaitze
Indian Tribe

Alternate

Ms. Tara Ford, Community Health Services Regional
Administrator
Aleutian Pribilof Islands Association, Inc.

ALBUQUERQUE AREA

Vacant

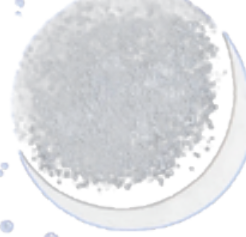
BEMIDJI AREA

Representative

Ms. Lana Causley, Tribal Representative Sault Ste.
Marie Tribe

Alternate

Ms. Alice Soulier, Tribal Council Member Lac du
Flambeau Band of Lake Superior Chippewa Indians



BILLINGS AREA

Representative

Mr. Tim Davis, Blackfeet Tribal Business Council
Chair, Health, Education, and Social Services
Subcommittee

Alternate

Ms. Brandi King, Fort Belknap Tribal Community Fort
Belknap Indian Community Council

Alternate

Ms. Jodi McAdams, Eastern Shoshone Tribe Eastern
Shoshone Business Council
Administrative Assistant: Phoebe Wilson

CALIFORNIA AREA

Representative

Mr. Robert Super, Vice Chairman Karuk Tribe
Assistant: MaraLei Allec

Alternate

Ms. Elaine Bethel Fink, Vice Chairperson North Folk
Rancheria of Mono Indians of California

GREAT PLAINS AREA

Representative

Mr. Roger Trudell, Tribal Chairman Santee Sioux Tribe

Alternate

Mr. Sidney Tuttle, Vice Chairman Santee Sioux Tribe

NASHVILLE AREA

Representative

Ms. Cheryl Frye-Cromwell, Tribal Council Mashpee
Wampanoag Tribe

Alternate

Ms. Dolly Barnes, Director of Child and Family Services
Passamaquoddy Tribe

NAVAJO AREA

Representative

Mr. Jonathan Nez, President Navajo Nation

Alternate

Mr. Jonathan Hale, Honorable Delegate 23rd Navajo
Nation Council

OKLAHOMA AREA

Representative

Mr. Jay Keel, Administrator, Secretary, Department of
Family Services
Chickasaw Nation
Assistant: Nina Blair

Alternate

Ms. Cassandra McGilbray, Senior Advisor to the
Secretary of Family Services
Chickasaw Nation

PHOENIX AREA

Point of Contact

Ms. Ophelia Watahomigie-Corliss Havasupai Tribal
Councilwoman

PORTLAND AREA

Representative

Ms. Cassandra Sellards Reck, Tribal Council Member
Cowlitz Tribe

Alternate

Ms. Cheryl Sanders, Business Council Member
Lummi Nation

TUCSON AREA

Representative

Ms. Adrienne Tiller, Tohono O'odham Legislative Council
Sells District Representative

Alternate

Mr. Anthony Francisco Jr., Tohono O'odham Legislative
Council Schuk Toak District Representative



THE 2019 HOPE & HEALING BEHAVIORAL HEALTH AWARD

The Hope & Healing Behavioral Health Award was created to honor individuals, Tribes, organizations, and programs that have enriched and improved American Indian and Alaska Native behavioral health. NIHB recognizes that behavioral health is important to Native health and wellness, and that Tribes have led the way in creating and implementing behavioral health programming and services that align not only with contemporary needs, but with cultural beliefs as well. This award highlights the work and vision of an individual, organization, Tribe or program that has worked to improve behavioral health status, implement new programming, address long standing health disparities, and/or increase the visibility of behavioral health concerns.

TRIBE CATEGORY

FOREST COUNTY POTAWATOMI

Forest County Potawatomi youth and families brought their voices to the FCP Executive Council about the suffering and need for action due to the opioid epidemic. Out of this compassionate and courageous action the “Not One More” campaign was born. The FCP community has come together with the Forest County Sheriff’s Department to create a layered media and awareness campaign (billboards, website with resources, videos) with an impactful, conceptually-strong program that benefits FCP members and non-members alike. As an example, please go to: <https://www.youtube.com/watch?v=C3R81JeTcxU> (first news spot) to see their commercial that is emotionally moving to all who see it on TV and on social media sites. The campaign is powerfully impacting all who are suffering, and educating all who need to understand this suffering. It is a bright ray of hope and a true testament to the resilience of the Forest County Potawatomi Community. They are truly “Keepers of the Fire” in every sense.

From the FCP website at <https://www.fcpotawatomi.com/>: “The Forest County Potawatomi (FCP) have lived in Forest County, Wisconsin, since the late 1800s. [The elders] have done much for the younger generation, and it is because of the elders that the younger generations are who they are today. By pursuing a diverse set of business models, the Forest County Potawatomi of today are the largest employer in Forest County. With revenues from various tribal enterprises, the Potawatomi have invested in the health, wellness, education, environment and future of its people. The FCP have also worked hard to preserve its culture and honor its past. The Cultural Center, Library and Museum provide an important link to the past and serves to facilitate important ceremonies.

You will find a thriving Native American culture that is proud of its past and eager for the future.



PROGRAM CATEGORY

LOWER BRULE SIOUX TRIBE PARTNERSHIPS FOR SUCCESS

The Lower Brule Sioux Tribe Partnership for Success (PFS) strategically integrates traditional Lakota knowledge, language, history, spirituality and an overall worldview into interventions. Lower Brule youth and families believe that “culture is medicine” and “culture is prevention.” In addition to culturally adapting evidence-based interventions, staff integrate Lakota best practices such as traditional medicine teachings, oral histories and language, traditional concepts of unity through medicine wheel teachings and Lakota four life stages roles and responsibilities. Through PFS programming, youth and families have been involved in the annual “Welcoming back the Thunder Beings” ceremony, the “Honoring the Spirit: Anniversary of the Signing of the 1868 Ft. Laramie Treaty” gathering and the International Treaty Council.

The Natural Helper program in the schools trains youth to be able to identify peers at risk and then refer them to professionals as needed. Several trainings have been completed in the community such as Mental Health First Aid, ASIST, Crisis Response, Debriefing and Trauma Informed Care. PFS also has an active partnership with Boys and Girls Club.

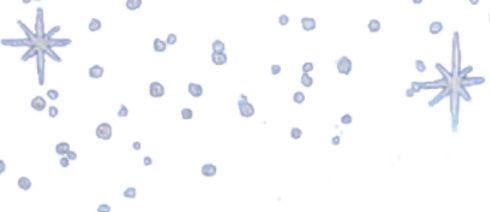


INDIVIDUAL CATEGORY

DEDRA TSOSIE

Mrs. Tsosie is the only School-Based Mental Health Counselor in the Fort Defiance Agency on the Navajo Nation. She is Navajo-Hopi and her clans are Naaneesht'ezhi Tachii'nii, Naakai Dine'e, Honaghaahnii, and Kiisani. Mrs. Tsosie is assigned to the Window Rock Unified School District which has 1,920 enrolled students, at 5 different school sites. Since the start of this School-Based Mental Health Program in November 2017, she has scheduled over 350 sessions which includes intakes, counseling, consults, crisis interventions, parental follow-ups, and other related services. Mrs. Tsosie has also provided numerous prevention services to a total of 1,860 students on topics that include mental health, bullying, suicide, safety, and substance use. She is only scratching the surface, but it is a good start. She strives to provide superior and compassionate healthcare to our community by raising the level of health, Hózhó and quality of life.





EXHIBITORS & VENDORS

TALKING LEAVES

DUKE & DAISY BEADWORK

DEBBIE DESJARLAIS DESIGN

MARTINEZ INDIAN ART

CANYON ARTS

MOQUINO INDIAN JEWELRY

GOOD MEDICINE JEWELRY

ELECTROMEDICAL PRODUCTS INTERNATIONAL, INC;

REGROUP, INC.

NATIONAL NATIVE CHILDREN'S TRAUMA CENTER

AMITY FOUNDATION CIRCLE TREE RANCH

NATIONAL CONGRESS OF AMERICAN INDIANS POLICY RESEARCH CENTER

OFFICE OF MINORITY HEALTH AND HEALTH EQUITY

SWINOMISH DIDGWALIC WELLNESS CENTER

ALKERMES, INC

NATIONAL AMERICAN INDIAN AND ALASKA NATIVE MENTAL HEALTH
TECHNOLOGY TRANSFER CENTER

COMMUNITY ANTI-DRUG COALITIONS OF AMERICA (CADCA)

ECKERD CONNECTS

NATIONAL INDIAN HEALTH BOARD

DESJARLAIS PUBLISHING

DESIGNS BY PIE

CONFERENCE INFORMATION

REGISTRATION



The registration desks are located in between the main lobby.

The registration desk will be staffed daily but will be closed for 1 hour daily for lunch. For registration desk hours, please see each day's agenda beginning on page 6 or refer to the conference app (app instructions on page 4).

EVALUATIONS – NEW THIS YEAR!



In order to better serve the environment, NIHB is changing the

way we conduct session evaluations. Paper evaluations will no longer be available and all evaluations be conducted using the conference app. See page 4 for instructions on using the app on your mobile devices.

AGENDA CHANGES



Should any last minute changes occur in the agenda, NIHB

will notify participants as soon as possible through the conference app (see page 4 for instructions on using the app on your mobile devices) as well as posted daily by the registration desk.

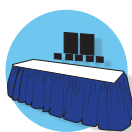
CODE OF CONDUCT



The National Indian Health Board is dedicated to providing

a positive and healthy environment for our conference attendees. The National Indian Health Board AI/AN National Behavioral Health Conference maintains a policy of being drug and alcohol free during all Summit-related events, meetings, plenary sessions and breakout sessions. The Board of Directors of the National Indian Health Board and staff respectfully request that all participants, exhibitors, vendors, guests, friends and family members please conduct themselves in a respectful, courteous and appropriate manner at all times to make the Conference experience enjoyable for everyone.

EXHIBIT HALL & MARKETPLACE



The exhibit hall and marketplace featuring

booths from public health programs and entities as well as talented Native artisans is located in the La Sala Lobby. The hours for the exhibit hall can be found in each day's agenda beginning on page 8.

PRIZES



There are 2 ways to win prizes during the Conference

1. Attend the fitness event on Thursday morning and you will be entered into a raffle drawing to win one of five prizes! Winners will be chosen immediately after the event.
2. Fill out session evaluations in the Conference app and you will be entered into a random drawing to win one of six prizes for each evaluation you complete! Winners will be chosen at the Closing Plenary.

CONFERENCE BADGES



Official National Indian Health Board American

Indian & Alaska Native National Behavioral Health Conference name badges will be issued to each participant upon registration. Please be sure to wear your conference name badge at all times as it is your passport to enter all conference activities, plenary sessions, workshops and scheduled events. NIHB staff will be spot-checking for badges throughout the Conference and may ask to view your name badge if it is not readily visible. Inquire at the registration desk if you lose your name badge.

LOST AND FOUND



The lost and found for the Conference will be

housed at the Registration Desk. All unclaimed items in the lost and found still remaining at the end of the Conference will be donated.

CONTINUING EDUCATION

2019

NATIONAL INDIAN HEALTH BOARD

American Indian and Alaska Native
National Behavioral Health Conference

MAY 15-17, 2019 >>> ALBUQUERQUE NEW MEXICO

Preserving Wisdom > Promoting Innovation

VERIFICATION OF ATTENDANCE FOR CONTINUING EDUCATION CREDITS

Continuing Education Credits are available from American Psychological Association (APA) and National Board for Certified Counselors (NBCC). Please **PRINT** your name and email address **LEGIBLY**, and keep track of the sessions you attend. For each session attended, **the entire row must be completely filled** in to claim credits. No Partial Credits will be awarded. Submit this verification of attendance form to the registration desk and an email with further instructions will be sent to you. We encourage you to take a photo of this form with your mobile device before submitting it for your records.

First Name: _____ Middle Initial: _____ Last Name: _____

Email Address: _____

SESSION	CE HOURS AWARDED	TIME IN	PRE-CODE	SIGNATURE	TIME OUT	POST-CODE	SIGNATURE
Wednesday, May 15, 2019 – 8:00 AM							
Dialectical Behavioral Therapy (DBT) Training	5.0						
Thursday, May 16, 2019 – 1:30 PM							
Successes and Challenges Implementing Infant and Early Childhood Mental Health Consultation	1.5						
Documenting Traditional Elder Knowledge: Indigenizing Prevention and Health Promotion	1.5						
Zero Suicide in Oklahoma - Tribal Healthcare System Implementation	1.5						
Thursday, May 16, 2019 – 4:30 PM							
Strengthening our Nets	1.0						
Indian Health Manual: Chapter 34 Suicide Prevention and Care Program Policy	1.0						
Clinicians Lived Experiences with Culturally Adapting Empirically Supported Treatments for American Indian and Alaska Native Populations	1.0						
People of a Place: Comparing Indigenous evaluation approaches with Western frameworks	1.0						
Cultural Connections and the Northern Cheyenne Tribal Board of Health's Cheyenne Connectedness Survey Results	1.0						

I certify that I attended the sessions indicated above for the entirety of the presentation.

SIGNATURE OF ATTENDEE

DATE

CONTINUING EDUCATION

2019

NATIONAL INDIAN HEALTH BOARD

American Indian and Alaska Native
National Behavioral Health Conference

MAY 15-17, 2019 >>> ALBUQUERQUE NEW MEXICO

Preserving Wisdom > Promoting Innovation

First Name: _____ Middle Initial: _____ Last Name: _____

Email Address: _____

SESSION	CE HOURS AWARDED	TIME IN	PRE-CODE	SIGNATURE	TIME OUT	POST- CODE	SIGNATURE
Friday, May 17, 2019 – 8:30 AM							
Healing the Healers: Lessons from the Good Road of Life Training for Mental Health Professionals	1.5						
Friday, May 17, 2019 – 10:15 AM							
The Lasting Effects of Lateral Violence in Native Communities	1.5						
“Sa’ah naaghei bik’eh gozhoo” - Apache Path to Wellness	1.5						
Advancing Indigenous School-Based Health Services: Wholeness and Healing by Design	1.5						
Growing Our Own: A Grassroots Approach to Increasing Behavioral Health Access for American Indian and Alaska Native People	1.5						
Friday, May 17, 2019 – 12:45 PM							
Top line findings and recommendations of Alaska’s opioids needs assessment	1.0						
Suicide Screening: Screening Evidence, Clinical Pathways and Treatment Priorities.	1.0						
A public health-research partnership to promote adolescent sexual and reproductive health on the Navajo Nation	1.0						
Incorporating the Recovery Wheel in a Therapeutic Village of Care Treatment Model	1.0						
It All Begins with A Story: Community-Based Participatory Research, Traditional Foods, Place-Making, and Storytelling for Positive Comprehensive Health Outcomes	1.0						
Problem Gambling in Tribal Communities: Storytelling and Conversations on a Hidden Public Health Issue	1.0						

I certify that I attended the sessions indicated above for the entirety of the presentation.

SIGNATURE OF ATTENDEE

DATE

ALBUQUERQUE CONVENTION CENTER FLOORPLAN

NATIONAL INDIAN HEALTH BOARD

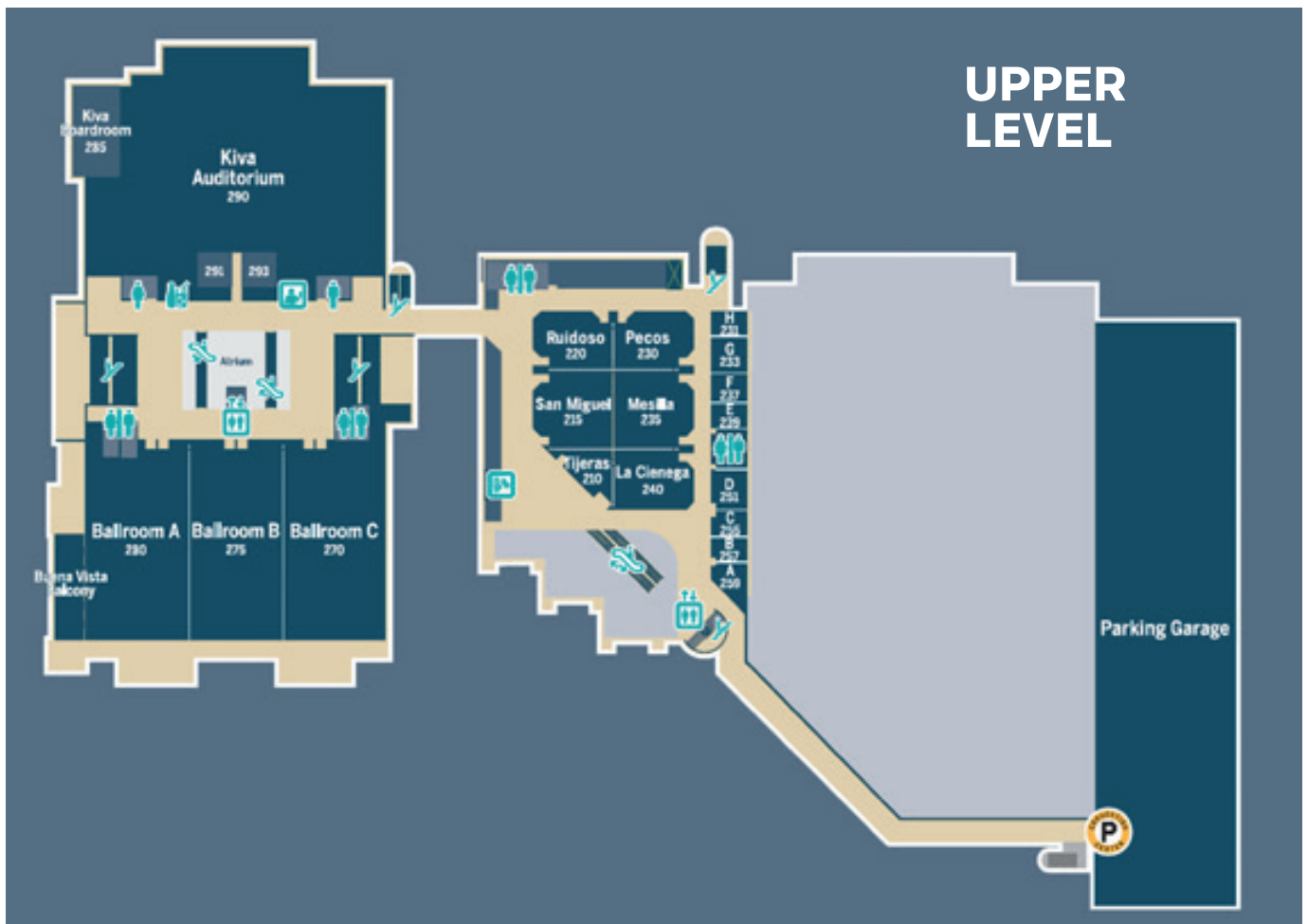
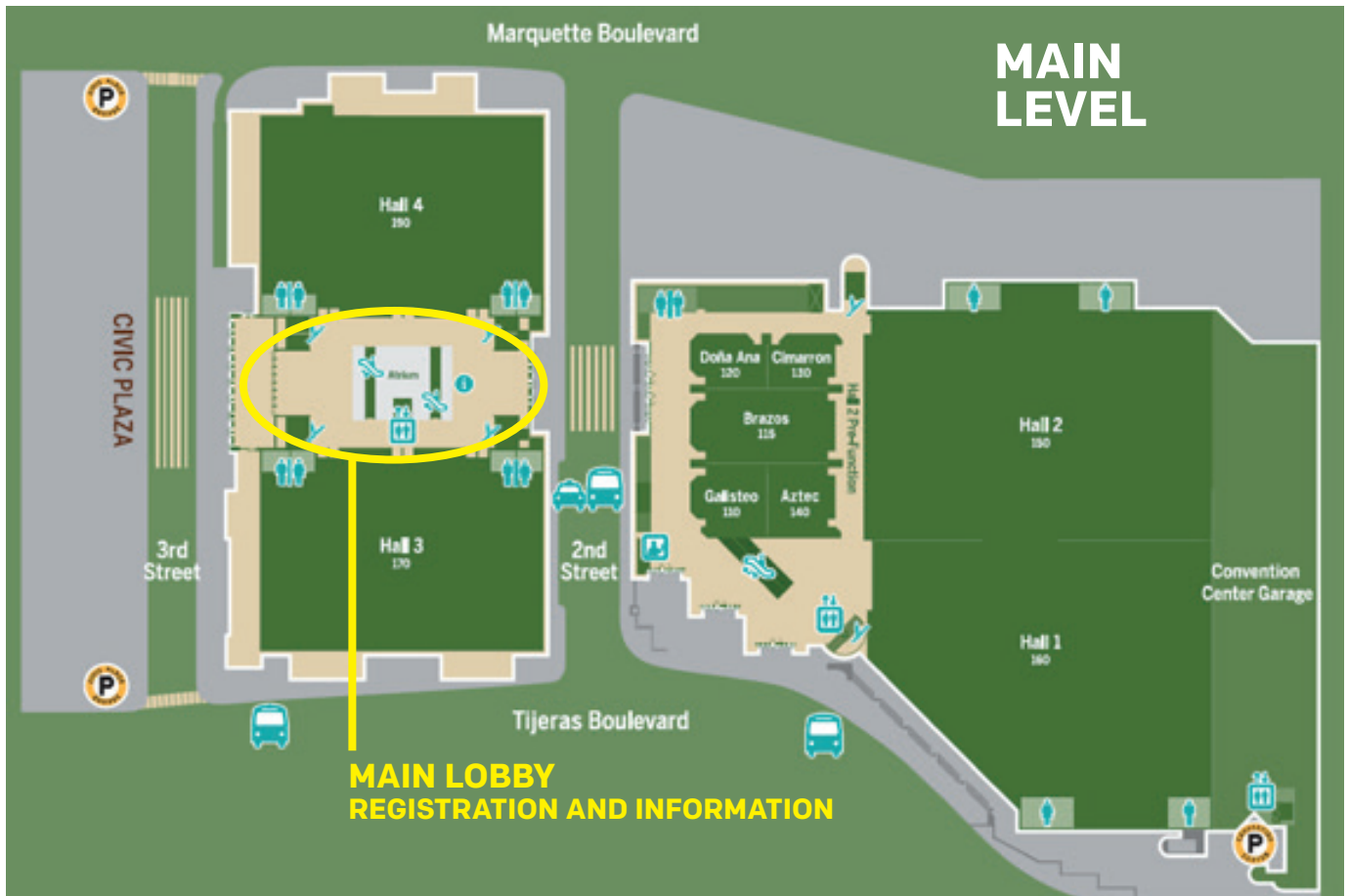


2019 American Indian
and Alaska Native
National Behavioral
Health Conference

MAY 15-17, 2019 >>> **ALBUQUERQUE
NEW MEXICO**

**LOWER
LEVEL**





CONTINUING EDUCATION INFORMATION

TARGET AUDIENCE

Educators, Health & Educational Administrators, Nurses, Nurse Practitioners, Counselors, Pharmacists, Pharmacy Technicians, Psychologists, Dentists, Physicians, Physicians Assistants, Social Workers, Allied Health Professionals, Psychiatrists.

NOTE: Per APA guidelines partial credit will not be given, you must attend the entire session in order to receive credits.

Assistance/Questions Obtaining APA or NBCC

ALB_AO.esupport@ihs.gov

Continuing Education Disclaimers

Behavioral health, 1.0 or 1.25 or 1.5 CE or 1.0 or 1.25 or 1.5 NBCC hours



UNM CBH is approved by the NBCC as an Approved Continuing Education Provider, ACEP No.6740. Programs that do not qualify for NBCC credit are clearly identified. UNM CBH is solely responsible for all aspects of the programs.



The University of New Mexico Department of Psychiatry Behavioral Sciences, Division of Community Behavioral Health is approved by the American Psychological Association to sponsor continuing educations for psychologists.

The University of New Mexico Department of Psychiatry Behavioral Sciences, Division of Community Behavioral Health maintains responsibility for this program and content.

CE Provider

UNM Dept. of Psychiatry & Behavioral Health, Division of Community Behavioral Health (CBH)

MSC09 5030, 1 UNM, Albuquerque, NM 87131-0001

505-272-6238

TeleBH@salud.unm.edu

For further information please go to our website.

<http://psychiatry.unm.edu/divisions-centers/crcbh/telebehavioral/continuingedbh/index.html>

OBTAINING CONTINUING EDUCATION UNITS INSTRUCTIONS

Continuing Education Credits are available from American Psychological Association (APA) and National Board for Certified Counselors (NBCC). Please **PRINT** your name and email address **LEGIBLY**, and keep track of the sessions you attend. For each session attended, the entire row must be completely filled in to claim credits. No Partial Credits will be awarded. Submit this verification of attendance form to the registration desk and an email with further instructions will be sent to you. We encourage you to take a photo of this form with your mobile device before submitting it for your records.

Please note that not all sessions at the 2019 AI/AN National Behavioral Health Conference will be offering CEUs. Please refer to both the online and program book agenda to assess whether or not a session offers CEUs.

2019 National Behavioral Health Conference



FITNESS EVENT



Walk/Run Event

Thursday, May 16

6:30 - 7:30 AM

Meet at Registration Desk

For Additional Information:
Wendee Gardner
202-548-7297 wgardner@nihb.org



National Indian
Health Board



See Waiver on Reverse

American Indian & Alaska Native 2019 National Behavioral Health Conference Walk/Run Fitness Event Participant Waiver



***WAIVER:** I understand that there is a risk of personal injury to me associated with personal exercise, training activities, walking, running, and hiking. I voluntarily assume all risks of injury associated with participating in this event, and in no way hold the coordinators or their representatives responsible or liable for any such injuries.*

PARTICIPANT'S NAME (Print): _____

PARTICIPANT'S SIGNATURE: _____

PARTICIPANT'S Contact Information:

Street Address: _____

City, State, Zip Code: _____

Phone Number: _____



Join Us

Clinical Scholars Information Reception

HOSTED BY: ROBERT WOOD JOHNSON FOUNDATION



AI/AN National Behavioral Health Conference attendees,

Want to know how you can receive program funds, executive coaching, and leadership training to improve health in your community?

Join us on Thursday, May 16th to hear about the Clinical Scholars Program and how you can apply:

Current participants working with the Mandan, Hidatsa, Arikara Nation and Elbowoods Memorial Health Center, New Town, North Dakota will be present to discuss this and other leadership and funding opportunities for community leaders, researchers, and doctoral students:

- Kelly McGrady, RN
- Leolani Ah Quin, LCSW, DBH
- Anita Martin, MD

RECEPTION DETAILS:

May 16th from 5:30-6:30 pm MST

Albuquerque Convention Center La Sala Lobby

Please RSVP by May 9th at <http://clinicalscholarsnli.org/RSVP/>

SHARE THIS INVITATION WITH OTHERS COMMITTED TO IMPROVING HEALTH IN THE COMMUNITY.

NOTES



Thank you

*For helping make the
2019 AI/AN National
Behavioral Health
Conference a Success!*

National Indian
Health Board



National Indian
Health Board



Save the Date

SEPTEMBER 16-20, 2019



NATIONAL INDIAN HEALTH BOARD'S 36TH ANNUAL
National Tribal Health Conference

PECHANGA RESORT  TEMECULA, CALIFORNIA