

In This Issue

In summer 2020, amidst the COVID-19 pandemic, WSU Native American Health Sciences was still able to deliver its programs remotely, impacting the lives, minds, and hearts of many.

NAHS Program: By the Numbers
Native High School Youth & Na-ha-shnee STEAM Health Institute
Natives Applying to Medical School & Reimagine IndianS into MedicinE (RISE) Summer Academy
Natives Applying to Medical School & Wy'East Pathway Program
Rising Year-Two Medical Students & Summer Research Opportunity
Historic Agreement Opens New Doors in Indian Country for Health Sciences Students 20–21
In Their Own Words: Notes from Indian Country 22–23
9 Things to Know: Center for Native American Student Success Opens January 202124–25

Thank You to Our Partners

- WSU Colleges of Medicine, Nursing, and Pharmacy and Pharmaceutical Sciences, and WSU Native Programs and WSU IREACH
- Lonnie Nelson, WSU College of Nursing, Assoc. Professor
- Northwest Portland Area Indian Health Board
- Portland Area Indian Health Service
- OHSU School of Medicine Northwest Native Center of Excellence
- University of California Davis School of Medicine
- Affiliated Tribes of the Northwest Indians
- Association of American Indian Physicians
- University of North Dakota Indians Into Medicine Alumni
- Margo Hill, JD Spokane Tribe

A Letter from the Director



Allin p'unchay! Good day! I am Naomi M. Bender, Ph.D., an indigenous Quechua (Peru), and the director for the Washington State University Health Sciences Spokane (WSU Spokane) Native American Health Sciences program. In this edition, you'll

find updates and reflections based on progress we made over the summer including pathways expansion, community and campus initiatives, and the development of our new Center for Native American Student Success.

As 2020 has been a year of significant challenge due to the COVID-19 pandemic, forest fires, heightened acts of racism and violence, and continued struggles as a nation, it was more important than ever that our program continue its critical work. This means providing safe and meaningful educational experiences for students interested in health care careers who represent a variety of ages and backgrounds. If this year has reminded us of anything, it is that we as indigenous people are resilient and committed to the health and wellness of our people. Pandemics have afflicted our indigenous communities for centuries, and yet we have persisted, persevered, and found ways to carry on our legacy through the stories and wisdom of our elders, and the dreams and pathways of our youth and generations to come.

When the pandemic hit in early March, our team quickly gathered to discuss if, or how, we might hold summer pathway programs. We prayed and found strength through many of our tribal nations' responses to the pandemic in how they protected and advocated for our youth's education and safety. So, we turned the inevitable—forced closures of our campus, schools, and tribal communities—into virtual educational and impactful opportunities that positively changed the facets of our work. This summer, we countered the

pandemic to impact the lives, minds, and hearts of many, and I am thrilled we can share their stories with you. You will learn about how we combined the resources and donations of many tribes, a trust, non-profit organizations, and institutional partners, into a singular institute dedicated to health occupation and science, technology, engineering, arts, and math research for 26 tribal youth across our nation. You'll discover how we supplied these students with computers, microscopes, research kits, stethoscopes, blood pressure cuffs, and cultural tenets of support and exploration all through a virtual setting. And, see how students learned to not only take vitals of their own family members, but you'll follow their discovery of health care fields, the beauty of research and how it can impact and save lives, and so much more.

We'll share a reimagined way in which a much larger partnership formed between our program, several colleges, and the Northwest Portland Area Indian Health Board and solidified a grant award from the Indian Health Service, and how the grant provided 6-weeks of online learning for eight Native American pre-medicine students across our nation. You'll learn how this program provided online Kaplan MCAT preparatory learning, biomedical science instruction, and a newly developed Native American cultural tenet curriculum that was taught by over 20 Native American physicians, faculty and staff, and current medical students across the nation, to support pathways into medicine. Additionally, this grant supported two Wy'East scholars toward matriculation into the WSU Elson S. Floyd College of Medicine.

You'll hear about rising, year 2 medical students from the WSU Elson S. Floyd College of Medicine, who were sponsored by their college and our program as part of a Summer Research Opportunity, and how their views changed specific to Western and traditional forms of medicine. You'll experience the decolonization of these students as they learned the history and current health status of our tribal nations and communities, discovered the identity and sovereignty of our people, questioned federal acts and policies, and studied environment and climate change, and how all have impacted the ways in

which they view and respond to the work of becoming physicians in Washington state.

You will learn more about our Native American Health Sciences program and how we envision and mission our work through a recently signed Portland Area Indian Health Service Master Clinical Affiliation Agreement, the first of its kind for WSU Health Sciences.

I want our stakeholders to know that when I came to WSU Health Sciences two years ago, I came as an indigenous woman walking in the footsteps of tribal people who I pay tribute to before me. I also came here as a representative of my ancestors who once flourished and now continue to persevere among the mountainous and water regions of our Pachamama (mother earth). I work and live to be an impact agent for our people. To not only expand the number of Native American health care professionals in the workforce, but to enhance our indigenous peoples' health outcomes, to provide culturally embedded and sustainable education through culturally based practices, to impact health and wellness of our tribal communities where they see fit, and to enact promises that the land grant mission of WSU is meant to uphold upon the original homelands of our tribal nations.

Finally, I want to acknowledge and thank the support and generosity from each of our sponsors. Without your support, we would not be able to provide unique, meaningful, impactful, and sustainable pathways into health care career fields for our students.

I hope you enjoy this newsletter and I thank you for being part of the journey with us. We hope to continue walking alongside you.

Samincha sinchi (many blessings),

Naomi M. Bender

"We acknowledge the land on which we sit and occupy today as the traditional home of the Spokane tribal nation. We take this opportunity to thank the original caretakers of this land."





Naomi M. Bender, PhD, Director **1FTE**



Evanlene Melting Tallow, Outreach Coordinator **1FTE**



Breanne Ragle Program Asst. .5 Work-study

Lonnie Nelson, PhD, Asst. Dir. Special Projects .2 FTE



Wil James, MD, Asst. Dir. Mentoring & Student Success .2 FTE

Tashina Smith, Communications Asst. .5 Work-study

GOALS

- Expanding the number and type of educational program pathways
- Development of community tribal health-based initiatives
- Growth of WSU NAHS staff, outreach, partners, funding, and programs

NEEDS

- 3 additional FTE
- Pathway program funding
- Center for Native American Health ongoing support

Na-ha-shnee STEAM Health Institute

Despite Drawbacks of COVID-19, Native High School Youth Move Forward in Exploring Health Sciences Professions

Before there was a pandemic, there were inequities. Prior to coronavirus, access to health care was not equal for the underserved and in rural communities. Ahead of COVID-19, opportunities were not equal for Native youth and other youth of color who were interested in pursuing a health care profession. As one would guess, the pandemic has not improved these inequities.

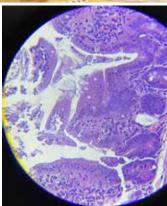
Coronavirus is drastically changing the landscape of the nation and world. It follows that there are profound impacts to many communities already historically marginalized by society. Confoundingly, programs meant to improve these conditions are additional victims of the pandemic as they experience barriers associated with working and learning from afar. Programs like WSU's Native American Health Sciences (NAHS) program are affected, which means their work to decrease Native health disparities by increasing access and support for Native students and bolster the overall number in health care and research is being impacted. This, at a time when it is more critical than ever that pathways are created for Native youth to access careers as nurses, pharmacists, doctors, and more.

Such was the case in spring 2019, when it was becoming increasingly obvious to NAHS faculty and staff that they would not be able to host, in-person, their first-ever Native STEAM Summer Research Institute, a three-week program for Native high school students interested in pursuing a career in science, technology, engineering, arts or mathematics, nor would they be able to hold their popular, annual Na-ha-shnee Summer Institute a 12-day free summer camp for Native high school students interested in health science careers. Rather than cancel either event, tireless and innovative NAHS faculty and staff pivoted to combine the two events and host them remotely. Native STEAM Director, Lonnie Nelson, took the additional bold step of redirecting some of his discretionary funds to support the effort and empower the next generation of Native researchers at WSU.











HIGHLIGHTS OF 2020 NA'HA'SHNEE STEAM HEALTH INSTITUTE

- Attendance included 26 students from 22 tribes and across 6 states.
- To enhance their remote learning, students were mailed a

Chromebook; microscope;

experiment supplies, including micropipettes, slides featuring different organ cells, goggles, and a STEAM binder full of all learning materials.

 Students learned about basic lab safety, microscopy and histology, online research with journal articles, growing bacteria, gel electrophoresis, and so much more.





 Students gained significant experience in all areas studied,
 i.e. gram staining, DNA and protein variances,
 blood acidity measurement,
 and much more.

At the end of the three weeks, the combined online institute proved to have positive impacts on the lives of participants. Despite a summer in isolation, these 26 youth were still able to interact with each other and gain exposure to the many opportunities available to them in the health sciences. A major step forward in empowering the next generation of healers.

Post Na-ha-shnee STEAM Health Institute Pre Na-ha-shnee STEAM Health Institute Have you ever used a micropipette? 90 Do you know what the shape term "bacillus" refers to? Could you confidently use a microscope? Have you heard of gram staining? Do you know what an 85 alkaline substance is? Do you know what differences there are between DNA and protiens? Do you know the pH of your blood? 65 Do you know what DNA is? 100 100% 80% 60% 40% 20% 20% 40% 60% 80% 100%

What are a couple of key takeaways from your experience at Na-Ha-Shnee STEAM Health Institute?

Alexxys: Some of my key takeaways are to try to learn as much as you can because you can't learn too much. Also that you have to dip your toes into different careers and asking people how they like their careers and how they got into it, is the best way to understand. Lastly and my most important is culture because it's very important to know where you come from.

and knowledge they have to share. Those are just some things I might have taken for granted more if not for the Na-ha-shnee STEAM Health Institute.



River: The WSU STEAM Institute has a dedicated staff that puts hours upon hours into making this program. To create something like this digitally and to work out all of the logistics must have been a real-life nightmare, and it's commendable that they

did this. Most of the presentations were easy to follow and internalize. However, the labs were too fast-paced at times, but that was only a handful of them (which is somewhat understandable since they have a tight schedule.) Additionally, I got almost 50 different items sent to me, including a Chromebook, and a



Chance: Key takeaways
I got from this were
the first aid course,
the presentations on
different Native cultures,
and the pH session. The
first aid course was very
helpful and was a reason

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I signed up for this program. The presentations on Native American cultures I loved because they were interactive with projects we did alongside them. Reviewing pH again was so fun and took me back in time to chemistry class.

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Aaliyah: Some of my key takeaways from the Na-ha-shnee program varied from both a cultural perspective and an academic perspective. On an academic level I've learned more about differences in careers in industry versus academia and how important it is to follow guidelines for

the safety of yourself and others. And on a cultural level this summer institute has fueled me to gain more knowledge about my history and traditions, and showed me the importance of connecting with my elders for all the wisdom

microscope! This wouldn't be possible without the sponsors' help, thanks, sponsors! Overall, I'd have to give the STEAM Institute an 8/10. I would recommend it to someone interested in the health field. You'll learn a lot about your interest.



Sophia: My key takeaway from Na-hashnee STEAM Health Institute is that it is easier to succeed when you have a community to support you. Through this program many mentors spoke to us and told us the importance of finding a community. The key to success is being able to reach out

for help when you need it. I am so thankful for all of the mentors I was given the opportunity to connect with and be able to grow my network of support.

How has your experience at Na-ha-shnee STEAM Health Institute changed or enhanced your interest in the health professions?



Gabe: My experience has enhanced my interest in the medical field in a very positive way. Because of the camp I now want to pursue a job in firefighting thanks to learning about first responders and EMTs. I'll never forget this camp and I'll always remember doing the camp while I'm pursuing my future career.



Gary: My experience at Na-ha-shnee STEAM Health has enhanced my interest in health professions, by showing me in more detail how a lot of health professions are more than what they seem, and also makes them engage you in their presentations, making them even more interesting!



Noah: Ever since I have been little, I have been interested in health care, as growing up I have had the opportunity to have a nurse for a mother. My mother used to work night shifts when I was a child, all day and then come home at night. My sister and I only used to see her on days

off and night time. Later on, she swapped to day shifts with fewer hours and easier hours with the side of extra shifts. With all of my exposure to health services and my mother's experiences, and especially because of COVID-19, I have become more aware of the need for health care. Ever since I started working with WSU as a student of the Na-ha-shnee STEAM Institute, the presenters' knowledge and care for everything has inspired me to pursue a health profession. When I first joined I was told it was all about exposure to different things, and I believe the exposure has really rubbed off on me.

Olivia: When first applying to Na-ha-shnee, I went in not knowing what I wanted to do after high school. I was thinking I could go into electrical because it sounded interesting and fun but I didn't know anything about it but then, I was recommended this summer camp and thought that it looked really interesting and fun and applied. I'm really glad I experienced everything I did while doing this and even though it was virtual, I really had fun doing our hands-on experiments. What really changed my mind, was talking to different people and what they did like nurses, EMTs, etc. it was really amazing hearing what they did and how much fun they had. And I thought I would really like to help my community/tribe because of how few health care workers there are and it sounds like it would really be fun to help others. Now having finished this camp, I am now interested in becoming a nurse at my IHS because learning and talking about health care and how little Native American health care workers there are it would greatly benefit my community and this program has opened up my eyes to something I have never thought of doing before and I feel it would be fun and amazing to work as a nurse.



Taya: My experience was good, the program had a mixture of everything in the medical field. I thought it was helpful to figure out what career and what other careers there are to do out there. The medical field is important and they're always looking for talent. I'm glad this program is encouraging

people to fall into the medical field and showing them what there is. This program helped me realize what I want to be, and I decided to become a dentist for sure after the presentation on it. It's an interesting career and showed me a glimpse and I thought it was cool. I would tell other Natives that there are cultural things and it opens a piece of yourself. You can learn a lot about yourself with this program, it's always good to try something new.









How do you see yourself as a mentor/leader in your community after your experience over the past three weeks at Na-ha-shnee STEAM Health?



Sky: After experiencing the Na-hashnee STEAM Institute, I feel that I am now obligated to share this opportunity with other youth, I have already recommended this opportunity to my friends, and have pushed my siblings to apply when they reach high school. Throughout

history, indigenous peoples have not been represented to the fullest in health professions, which is often due to the intimidating path to earn a degree. I feel that if others were aware of this program, and participated, the path to the health field would be less intimidating and would ultimately open many doors for the youth, and further our people.

What was your favorite class session and why?

Sky: Although they were all virtual, I was very impressed that Na-ha-shnee made the effort to create a system tailored to the virtual environment. For example, we were sent packages that had materials that were labeled specifically for each session, and we also received printed PowerPoints for each session. Furthermore, I felt that Zoom was the perfect system to use, and it indeed was used to the highest capability. Students were exposed to STEAM research that wasn't completely medical related, and I felt this was very beneficial for each individual. STEAM research looks great on applications for college and scholarships and gives students experience. I enjoyed this portion of the institute and am thankful it was incorporated.



Princess: My favorite class session was journaling with Emma Noyes. I have journaled a lot before so it was nice to have someone come in and talk about it. I started in 2018 and have gone through 2 journals since then. It helps keep track of things that are going on in my life and I loved the techniques that Emma showed us.

Q & A with Instructors from Na-ha-shnee STEAM



Katherine (Kat) Lynch
WSU College of Pharmacy and
Pharmaceutical Sciences,
Research Technologist

What was your role specific to Na'ha'shnee STEAM?

As a research technologist, I am used to an amorphous day, my role with Na'ha'shnee STEAM was similar. Outside of WSU, I host kids STEM activities at libraries and adult fact-finding seminars with my group "Science Speaks, Spokane." The summer of 2020 with Na'ha'shnee STEAM combined all my normal activities into one three-week event! I helped plan everything from shipping timelines, to ordering lists, to educational lesson plans. I even got to do the teaching, experimenting, and questioning with the students! The role I had this summer had no specific title, but I like to think of it as "I was a lab/STEM guide" for these students.

What stood out to you in terms of students' experiences this summer?

In summer 2020, these students did not get the opportunity to tour our lab, but we were able to send some lab experiments to them and showcase STEAM careers virtually. The biggest impact of this summer, to me, was seeing the students be inquisitive about their surroundings: one student swabbed their dog's mouth and fur to answer some hypotheses about cleanliness; another student tested household cleaning solutions to find out which killed bacteria the best! The second biggest achievement of this program, I believe, was the increase in confidence seen in the students. Na'ha'shnee STEAM allowed these students to interact with professionals in a wide variety of fields. Seeing the students transition from very few questions to many questions and interacting during the experiments confirmed they were gaining confidence throughout the summer. Teaching kids they can be and do anything will allow them to succeed, showing them this is what our program succeeded at!



Ken Porter
WSU College of Pharmacy and
Pharmaceutical Sciences,
Research Technologist

What was your role specific to Na-ha-shnee STEAM?

I helped in the development of the program mostly due to my efforts outside of WSU. I have been independently working with Kat Lynch to facilitate science outreach and education in our local community here in Spokane. The early stages of the program were during a more optimistic time in the year when a traditional face-to-face program was still assumed, and initial meetings involved most of the core lab staff and several faculty members. By the time the format changed to remote learning, the number of involved people had dropped drastically and as a result I was very involved in most aspects. I worked on the initial conceptualization and planning, the specific design and troubleshooting of the lab-based experiments, the preparation of the lab materials that we sent to the students, and the presentation of scientific concepts.

What stood out to you in terms of students' experiences this summer?

The students had a wide range of experience and knowledge of science but even with that in mind, the level of interest and excitement was consistent across the group. Their experiments utilized investigation of their surroundings, so what they were studying was immediately relevant to them, and they got to use their own creativity. It was nice seeing the students experience how fun it is to learn about the world around them. For instance, when an experiment called for surface swabbing their environment, students swabbed everything from their toilets, to their dogs, to their siblings.

Na-ha-shnee STEAM Counselor Perspective



Dr. Wil James: Our summer programs brought scholars together from many indigenous backgrounds and tribes along the spectrum of educational backgrounds from high school students all the way to current medical students. I was honored to have been able to interact with our scholars sharing

cultural perceptions and debriefing discussions on their personal experiences with lateral and historical trauma while identifying that legacy into the present reality of Indian Health Policy in the arena of persistently measured health disparities. Joy was found in sharing of cultural practices and shared experiences via Zoom with Evanlene's presentation of the stick game and doll making a favorite for many.

Each student presented their experience and communicated many deep positives that will feed their spirits on their scholarly journey. I witnessed academic deep collegial compassion and commitment to pursing academic excellence with an intention to serve our communities in the future. In a sense we are all healers charged with first becoming whole and then expanding our practice to influence others.



Alexa Fay: I had the immense honor of being the program assistant for Native American Health Sciences. I recently graduated with my bachelor of science in Nursing from WSU and am now working as a registered nurse in a psychiatric inpatient setting in Seattle, WA. I loved getting to work with our Na-ha-shnee

STEAM Health students, and am so proud of them for staying engaged and resilient through our online Institute, which is not an easy feat!



Breanne Ragle: I am one of the program assistants for Native American Health Sciences. I just graduated from WSU Spokane this past spring with my bachelor's in Speech and Hearing Sciences and with this I hope to go on to graduate school and become a speech therapist. Being a part of the Na-ha-

shnee STEAM Health Institute was an amazing honor and I am so glad that I had this opportunity.



Evanlene Melting Tallow,
Blackfeet/Blood (Kainai)
Native American Health Sciences
Outreach Coordinator
Na-ha-shnee Institute Coordinator
The challenge to merge the two
programs together and create a threeweek virtual camp came with many

learning curves. Yet, the Native American Health Sciences team, with support from WSU Health Sciences Spokane Information Technology Services team, developed a successful online learning opportunity for 26 Native American students this summer. Both programs packed the three weeks with lectures and hands-on experiences. Na-ha-shnee programing was based on WSU Health Sciences programs and Allied Health, and STEAM components were based on research. The participants had supplies, culture kits and science kits mailed to their home addresses. The overall experience for the NAHS team, staff, faculty, visiting faculty and 26 students was positive and we consider it a huge accomplishment. I personally enjoyed the Native high school students with their willingness to share their stories and participate in all the hands-on experiences virtually.

Reimagine IndianS into MedicinE (RISE) Summer Academy

Partnership Encourages Natives to Pursue Health Care Careers

Washington State University is one of three Northwest universities working with the Northwest Portland Area Indian Health Board to increase the number of Native Americans practicing health care to decrease health disparities and improve public health. The joint project, called Reimagine IndianS into MedicinE (RISE), stands to substantially increase the total number of Native medical and health science students nationwide.

This summer's RISE academy, a six-week, virtual enrichment program, provided undergraduate or recently graduated Native students wanting to attend medical school with support in biomedical sciences and MCAT exam preparation.

Oregon Health & Science University and University of California Davis School of Medicine are the other two universities working alongside WSU Health Sciences and its Elson S. Floyd College of Medicine. The collaboration is supported by a nearly \$1 million, five-year grant from IHS's Indians Into Medicine Program, as well as more than \$1 million in financial and in-kind contributions from project partners.

Only about 0.4% of all working U.S. physicians are Native American. Just 44 of the 21,863 enrolled medical students nationwide this year identified as Native American alone. If all 18 project students go on to study medicine, they could increase the total number of Natives enrolled in U.S. medical schools by about 40%.

Aspiring medical school students RISE to occasion

Over the summer, COVID dominated (and still continues to dominate) headlines. Yet on June 22, despite the pandemic, and amidst such chaos, leaders from WSU Native Health Sciences and the WSU Elson S. Floyd College of Medicine were able to persevere and launched the area's first-ever Reimagine IndianS into MedicinE (RISE) Summer Academy. For more details about the program, see previous article. In this article, we'll take the opportunity to rejoice, to revel in this slice of good news. And who better to celebrate this accomplishment with than the people responsible for the academy and the students who benefited? We asked students, organizers and instructors about their experiences leading up to RISE, about impacts of the six-week program, and why future investment in the program is vital.

Students



Michael Mudgett, Member of the Spirit Lake Tribe, North Dakota

After earning my master's, I worked for 10 years, more behind the scenes, in tribal epidemiology, but being in the communities, working with other physicians and scientists, researchers—it planted a seed in my head that maybe

I could do more if I was more boots on the ground in communities. Working with tribal populations, it reminded me of working with my own tribal community. The more I did it, the more I got the feeling that it's what I should do—be a doctor in my own community.

I began taking pre-med classes, but it caught up to me that I'd never taken a chemistry class in my life before that point. On top of that, along the way, I was continually confronted with, 'how am I going to do this'? 'how am I going to study for the MCAT'? 'how do you apply to med school'? I was lacking in resources and access and didn't have Native people around me who were doctors. These are the types of barriers that exist for American Indian and Alaska Native students across the country. It's a weight that I think a lot of us hold and don't realize we hold.

Dr. Bender, who has been a mentor to me for many years, led me to the RISE program. I got accepted and the program was great, especially having the comradery with so many students I could identify with. The MCAT prep was amazing too—there are no other programs with a focus on Natives like this one that I am aware of. We had cultural speakers and mentoring from doctors who are Native and connecting with us. Without programs like RISE, I wouldn't be where I am, these programs have changed my life.



Drisana Spratt, Member of the Turtle Mountain Band of Chippewa Indians Tribe

I was getting ready to graduate with my master's in clinical mental health counseling. I'd thought about going to medical school before, but didn't really think it was possible. Then I ran into

Evanlene Melting Tallow at a pow-wow at Rogers High School and she told me about RISE, and I took a leap of faith and got in.

I loved the cultural tenets, and it was amazing meeting other Native professionals. I also didn't realize how many people like me share my journey and how much support there is. Starting the program, and meeting other Native American scholars was one of those things that I never knew I needed. I am an urban Indian, meaning I didn't grow up on my reservation. I didn't realize how "white" I had been thinking and how much I had pushed down my own Native American culture. I had distanced myself based on what I'd been told about my own people. Once I got into this program, I realized a whole other side and the beauty of our culture and the support that is inherent to it. As soon as I started feeling the support of my people, it felt like home.

This program is a great example of the support that is out there. One of the things that is important as a tribal member is connection, and family, and RISE made me feel strongly that there is family out there to support me, even if it wasn't the one I grew up with. I left RISE, after having an incredible experience, and knew that being a doctor was the right path for me.



Marshand Vasquez, Member of the Wenatchi Band of Colville Tribe

I am a father of four, I've been married for 11 years—for 10 of those years I've been doing college. I heard about RISE through my tribe's higher education program. The fact that the program and its MCAT prep was tied to WSU's Native

American Health Sciences program really stood out to me. Programs like this are few and far between. I realized the program would get me where I need to be.

Right off the bat, first day, we had an elder that did an opening prayer and the elder was from my tribe. Before we even started, this was a sign to me that I was in the right place. The cultural tenets stood out to me too, Native doctors came in and we got to talk to them. How they tied culture into our journeys and having their support was incredible.

Growing up, I never saw a physician who was Native. I came across this dream of mine to pursue medicine, but not seeing anyone like me do it was defeating. It's lonely being on this journey, but through RISE, I've been able to find others and we stick together. The program introduced me to so many people like me, it was unbelievable. All these physicians that come from the same place - came from the rez—and they're practicing in tribal communities. The RISE program put them all on my screen!

We have a shortage of health care professionals back home; everything is referred to Spokane. The physicians we do have are rotating. Being able to pursue medicine and seeing the possible influence it could make in Indian Country and on the health care inequities we face—I know that pursing medicine, I'll be able to make an impact. Learning to be an indigenous healer, I'm bettering myself so I can better my community.

For those six weeks, I felt elevated, the energy we all had as students and then bringing in the faculty, bringing in the professional positions—the whole energy of it all was just up there on another level. I now know that if this is where my heart's at, to follow it and it'll make its way.

RISE Developers and Instructors



Naomi Bender, Director for WSU **Native American Health Sciences** program

Personally, I still am pinching myself. To see the culmination of the hard work of our teams, tribal partners, supporters, funders, educators—it was nothing short of fulfilling. I had

many emotional moments this summer, all the gratitude from students was overwhelming. This is work that I do for a living, but this summer elevated the work to a status of making good on promises—not only is our institution making good on its promises as a land-grant institution and its commitment to service, but a promise is being realized to our tribes and the health care that was promised to them by our country.

If we continue to see students uplifted in the matter they are, if NAHS has a part in expanding the workforce in Indian Country, if we're providing indigenous elements in our curriculum for both Native and non-Native students, and if that in turn improves health outcomes in tribal communities—that is pretty fantastic and makes me feel incredibly blessed.

Particularly the cultural tenets aspect of the RISE program and the ways we're expanding and teaching education. RISE was originally about MCAT preparation, additional support in sciences and mentorship from med students. Applying cultural tenets to the RISE curriculum provided a substantial piece about Native American health and health care—this is so important considering our students are interested in returning to their communities to serve. Along with their education, they now also have knowledge about their people, pre- and post-contact, from federal Indian policy and laws to environmental impacts, to cultural humility and traditional elements of healing. Students have a better understanding and respect for who they'll be working with, addressing the systemic and holistic needs of patients for healthier outcomes in Native communities.



David Garcia, WSU Elson S. Floyd College of Medicine, Assistant Dean for Equity and Inclusion

My areas of responsibility with the RISE Summer Academy were really the architecture of the program. We wanted to make sure that

everything we did centralized the Native participants' lived experiences and what they've come to know culturally. It's a paradigm shift from 'we're designing this program for all' to 'we're designing this with you in mind'.

We create these programs based on three pillars 1) identity development, in terms of a better understanding of who they are in relation to the environments they're in. 2) Community building—we know students who feel they belong within a setting, or developing a cadre of individuals as a collective, is supportive and allows for authenticity and the support students need along the journey. And then lastly, the focus on 3) system navigation—oftentimes within academia, there are unspoken rules. We are sharing the unspoken rules so individuals who are coming through the program have a better understanding of how to navigate the systems, but also to be able to access the resources that others may be already be aware of.

Investment in pathway programs is not only a good investment for the individual, but really, for the state of Washington and for the country.



Leila Harrison, WSU Elson S. Floyd College of Medicine, Senior Associate **Dean for Admissions & Student Affairs** It is so important that everyone in our country has the opportunity to see a physician who understands their culture, their language, their history. This lends

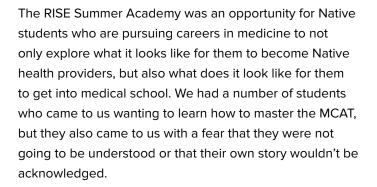
RISE open the door for these opportunities. There are so few Native physicians. The overall diversity needs to increase in medical schools.

One of the hard things, in general, for any population, but especially with disadvantaged populations, is

understanding what medical schools are looking for in admissions. Native populations often don't have resources or mentors to gain insight into the admissions process. My role this summer was really about demystifying the admissions process, to give the students insights about application procedures and strategies to help them stand out to medical schools.

Esteban Herevia WSU Elson S. Floyd College of Medicine, Pathway and Inclusion Coordinator

My role is helping underserved and underrepresented students see themselves in health sciences and also see themselves all the way into medical school.



My role is acknowledging the history of these students, help them to acknowledge it, but also to give students introductions to the basics, as well as connect them to resources. Not necessarily trying to ask them to fit what currently exists, but translating it. It's a lot of moving pieces around to make science make sense, re-shifting and reframing. We've been particularly successful with students coming out of programs saying that they feel more confident. Their MCAT practice test scores are reflecting they feel more prepared.

I have to say how much of an honor it is to know the influence RISE is having on their lives. We're literally shifting their outcomes. What we connected the students to, the type of knowledge we instilled in them, the type of skills and studying and preparing for medical school—it was something they never would have experienced.



Margo Hill, Member of the Spokane Tribe, Tribal Attorney and Tribal Court Judge

I believe that the WSU RISE program is not only a bootcamp for Native students who want to go to medical school, it is an opportunity to give them the history of our people and to

understand the health needs of Indian Country. It helps develop the passion and the purpose for Native students to go to medical school.

The cultural tenets of this program are also so crucial. These students' histories are important, where they come from matters. That was something that was very powerful about the RISE summer program. The cultural tenets helped the young Natives by validating their tribal cultural knowledge. The RISE program pays honor and respect to our tribal culture in a way that Native Americans do not hear about in schools.

I can't even begin to tell you how important it is to these students that agencies like Indian Health Service and Empire Health Foundation have provided funding for these opportunities. Often in tribal communities, we aren't exposed to all the possibilities. We don't have aunts and uncles, or parents, who have gone to medical school. We just need to see it in ourselves. When funders provide money for these Native students, they provide them with better exposure to biomedical research, they gain exposure to the chemistry skills that they need, they can prep with others who are like them for their MCATs—these are opportunities that young Natives don't get.

When funders give Native students the opportunity to come together and meet other students like them, with the same goals, it means the whole world. It says we believe in you. There are a lot of people that tell us a different story, that said, 'we don't believe in you' or 'you're just an Indian kid from the reservation'. We're told these things all the time. We're disciplined in our school districts. We're looked at differently. We're not given the same opportunities that mainstream America.

When funders provide these opportunities to Natives, we can rise to the challenge. Our young Native people are smart, they are diligent, they are disciplined, but they need the opportunity, they need programs like RISE and programs that support early exposure to STEM and they need pathways that help them achieve their goals.



Wil James, Member of the Swinomish Tribe, Tribal Medical Director

Native communities are built upon inclusion. No one is equal, but everybody is able to rise to the level of their ability. There is a place for everybody. Popular culture is more disposable. That is the fear these

Native students have, that they're not good enough. They know they don't quite fit into the system because it's so foreign to them. We're trying to provide students with a place to breathe, where they can interact with people like them.

The cultural tenets that are part of RISE are intentional. The intention is to let students be who they are and know they can make it in this world, by providing community. Community is at the heart of the Native mindset; we're taught to be active participants in our community, and we look to expand scholarly community into all areas of the education process.

The goal is to serve the people and in order to do that you have to take into account who the people are and acknowledge there's some differences in the population. Not acknowledging or allowing for differences is not serving the entire community. If the goal is to fund health sciences to train providers to take care of the people of Washington state, it makes sense to be all inclusive. Society deserves to train the next generation of healers.

Many natives have been cut off from a cultural experience and they're thirsty for it. Acknowledging that history lights a fire, it fuels passion. The reason I am at Washington State is because there are people at Washington State who get it and are willing to give Natives a chance.

RISE's Wy'East Pathway Program

Wy'east is the traditional Multnomah name for Mount Hood, a prominent feature of the Columbia River region. The Wy'east post-bac pathway is a component of the RISE program, built on the early success of Oregon Health & Science University's 10-month program that offers citizens of federally recognized tribes a pathway to improve their academic skills and be successful in the medical school admissions process.

This past summer, Wy'east was expanded to the WSU Elson S. Floyd College of Medicine, when the college selected two Al/AN aspiring physicians to attend. The college will continue to pick four students per year, over four years, to this program with the hope of having them matriculate to the WSU College of Medicine upon completion.

There are three major components to the pathway:

- academic preparation for medical school (including MCAT prep course)
- professional preparation for the rigor of medical school
- culturally-relevant experiential learning

Perspectives from Students



Alexandra Jones, WSU Elson S. Floyd College of Medicine Candidate

My name is Alexandra Jones. I grew up in the suburbs of Seattle and want to return to practice family medicine or pediatrics in the Pacific Northwest. I am

an enrolled member of the Standing Rock Sioux Tribe.

I have known for a long time that I wanted to work in health care determined that being a physician would be the best way for me to use my talents to give back to the communities that gave so much to me. I did my undergraduate education at Brigham Young University in Microbiology and Spanish.

During my time in Utah, I participated in a molecular biology lab researching a novel antibiotic. I also worked for a year as a cardiology scribe. I am currently in the Wy'east Post-baccalaureate Pathway with the opportunity to attend WSU Elson S. Floyd College of Medicine in 2021.

WSU ESFCOM's focus on educating Washingtonian physicians to serve WA's underserved and rural communities aligns with my personal goals as a future doctor, and I am excited to work with the wonderful faculty and staff in Spokane.



Mary Brewer, WSU Elson S. Floyd
College of Medicine Candidate
My name is Mary Brewer. I grew
up in Tacoma and I aspire to be a
physician who provides care to minority
populations and the underserved in
Washington state. I am an enrolled

member of the Nooksack Indian Tribe of Washington.

My path thus far includes an undergraduate degree in cell and molecular biology from the University of Washington, several years working for the Department of Veterans Affairs working with injured and disabled veterans, job shadowing at the Seattle Indian Health Board and with Dr. Frank James in Bellingham. I was also fortunate to participate this summer in the RISE program. I am currently in the Wy'east Post-baccalaureate Pathway with the opportunity to attend WSU Elson S. Floyd College of Medicine in 2021.

I like WSU's mission to serve the underserved in Washington state. I also like their community-based model and the fact they have training opportunities throughout the state of Washington. Five years from now, I truly believe I'll be in my residency program, learning as much as I can to better help my community.

Perspectives from a Wy'East Organizer



Leila Harrison
WSU Elson S. Floyd College of
Medicine Senior Associate Dean for
Admissions and Student Affairs
Wy'east has allowed us to reach
those American Indian Alaska Native
candidates who have attempted
getting into medical school but not

been successful. We have the opportunity to reach these aspiring doctors, provide curriculum through the OHSU Wy'east post-baccalaureate program, provide them with MCAT test preparation, mentoring, and support as they go through the 10-month program. Many of these aspects, if not all, would have otherwise been unavailable to the Wy'east Scholars. Our Wy'east Scholars are often non-traditional applicants to medical school; often they have their own families, have been in the workforce, and have not had traditional guidance to pursue medicine. They are determined, resilient, and compassionate—characteristics we would hope to see in future physicians serving Washingtonians.

Wy'east aligns with our Elson S. Floyd College of Medicine mission, vision, and goals which is to serve Washingtonians from across the state by providing opportunities for future physicians who will help us solve challenging health care problems in our diverse Washington communities. Wy'east Scholars come from these diverse communities and with their conditional acceptance to our medical school, they will bring insights and gifts that enable us to be thoughtful and intentional about serving their own communities. All of our communities, including our Native American communities, deserve compassionate, culturally competent, and high-quality care. Our Wy'east Scholars who eventually matriculate into our medical school will help us provide that care that their families deserve.

CURRENT MEDICAL STUDENTS







Spotlight on Summer **Research Opportunity**

Summer Research Opportunity is a sponsored summer research and learning opportunity for medical students who just finished year 1 and rising year-2 students. Sponsors lead the opportunities and are responsible for determining the hours (30-40 per week), timeframe (between 4-8 weeks), reimbursement, and what students will research, learn, or do.

This summer, Native American Health Sciences sponsored three students for four weeks. Although students are provided a small stipend, much of their time is voluntary. The SRO NAHS curriculum was based on work being done on a first-ever interprofessional indigenous healing curriculum and certification. Weekly, students were exposed to:

- The unique health educational pathways for NA students and foundation for why they are necessary, how they are developed and work, etc.
- The history of pre- and post-colonial contact, including pandemics and health disparities, epigenetics, and current health trends in Indian Country.

- Federal Indian policies, acts, laws, jurisdictional info, etc. as it pertains to forced removal, assimilation, cultural erasure, education, health, identity, and much more that affects health and provider awareness.
- The concepts of tribal sovereignty, identity, what blood quantum and membership means and who initiated it, federal recognition, treaties, and ceded lands.
- Tribal communities, governance, leadership, departments, youth, education, etc.
- Health care in Indian Country, both IHS and 638 contract clinics or tribal health centers
- The history of Western medicine and how it forced out traditional Native forms of medicine, current forms and views of healing.
- Environment, climate, water, and history with the U.S. government, states, and companies interfering or causing health hazards in these areas and its current effects on many tribes, in particular, in the Pacific Northwest, to include WSU MOU tribes
- Research in Indian Country

Students were assigned to read, review, and present literature in decolonizing ways and to review outcomes in frameworks that broke down historical, social, and cultural contexts within, or not mentioned in, referred journal articles or within media context. Students were also asked

Understanding Policy

- Indian law and policy specialist Margo Hill, JD
- Important to us as healthcare providers
 - We will see the impact of these policies
 - Water, health, resources, etc
- Tribal sovereignty
 Tribas have their own constitutions, laws, codes, and courts
- HOWEVER: US constitution gives congress the right to regulate commerce with tribal lands.
 - Additionally, only federal agents may negotiate cessions of Indian Land, with Indian Affairs exclusively under federal control
- Treaties manipulated in many ways
 - English
 - Wrong tribe representatives
 - Concept of land ownership often completely foreign

Josiah's reflections

- "Any physician will tell you that unless a dying patient has hope and emotional strength, the will to live, a doctor can do little to save him."(p.7)
- "By my sophomore year I understood what it meant to be invisible"(p.28)
- "'As a minority physician, you will be constantly challenged,' he said. "Your decisions will be questioned, your authority doubted. To be successful, you will have to have higher standards than everyone else. You will have to study harder, train longer, and know your materials backward and forward."(p.50)

to tutor and mentor RISE students as they prepared to apply to medical school. Additionally, students provided input into the cultural tenets curriculum of the RISE program.

How did you learn about SRO NAHS and how did you know that you wanted to participate?

Athena: This was the first time I'd ever really come in contact with Native culture and Native studies, which is astounding considering I've finished my first year of medical school and I've lived in America my whole life. I needed this valuable experience way earlier and it's not something you're going to find in a traditional classroom. It was basically a study abroad program from our bedrooms into Native culture and working with these populations.

Take us through your journey to becoming a doctor and how that aligned with this summer research opportunity?

Josiah: I was actually born and raised in Kenya and then moved to the United States in 2013. Growing up, we didn't have a lot of access to health care due to cost and accessibility. My family relied on a lot of home remedies and they weren't really effective. When I was 13, I got really sick and fainted at school and had to be rushed to the hospital. I ended up having typhoid and my family couldn't afford to pay for the bill. The doctor taking care of me was the one who decided to cover all the costs and I just remember thinking that I want to be someone like him, who can offer that kind of service to other people. That

got me geared toward a career in health care.

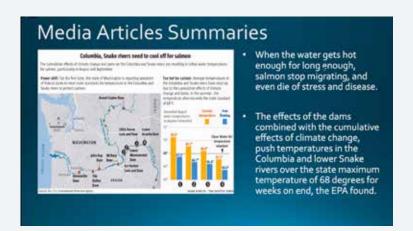
As I was exploring summer opportunities, it occurred to me that I knew some Native American history, but I did not know a lot about their culture. Much like my family's culture is relevant to the care we received, I hoped the program could help me to see how culture influences these patients.

Athena: I dabbled in a lot of other fields, including law, but I was continually struck by the purity of the medical mission. At the end of the day, you're helping people come to terms with diseases and impossible conditions and you can make incredible changes over a short period of time for these people. When I saw this SRO opportunity come up, I was really inspired in thinking about interacting with these populations and more proactively participating in whether they have a positive experience with health care.

What stood out to you in terms of how your future care could be improved, given Native American culture or beliefs?

Josiah: A great example is in how different cultures perceive time. In Native American cultures, they prefer to use stories as metaphors to explain things, including for illness. In terms of how I interact with a Native American patient, they may need more time to share their stories and I need to know that this is how they may describe their symptoms and transmission to me. Now I have a deeper understanding of this cultural way that people may use to communicate.

"We found great comfort in one another, for although we came from many different tribes, our experiences at Dartmouth were similar: We all felt disconnected from the mainstream student body." pg. 31 - Undergraduate experience - Life growing up in South Seattle



Tribal 638 Clinics Tribes have the option, through contracts, grants, or compacts, to assume some level of responsibility for their own health care programs Programs referred to as 638 programs and facilities Tribes can also be referred to as Title I tribes

Reflections of a medical student

- This was incredible
- Going from nothing to something
 - Body language/speaking norms
 - Cultural norm
 - History
 - Socioeconomic and medical problems
- Residency and medical school tips, meeting with researchers and physicians
- Bravery of the patients
- Spokane and Washington History



Can you talk more about decolonization and how this SRO addresses it?

Christian: Decolonization is a process where you apply a critical lens to more closely examine what Western society has taught us with history books and closely analyzing those concepts and information. Acknowledging that there are numerous different cultural lenses and really seeing history from another individual's perspective. And I think that really fits with medicine and trying to empathize with those who you serve. How can you best serve somebody if you don't really know where they're coming from?

After this SRO experience, what is your commitment moving forward?

Christian: This program has given me so many outlets and access to types of possible mentors. Dr. James and I have been able to still communicate with one another. And he continues to still give me great clinical pearls. This has also given me a chance to work with some of the Native Hawaiian and other Polynesian communities in the region and I want to continue that.

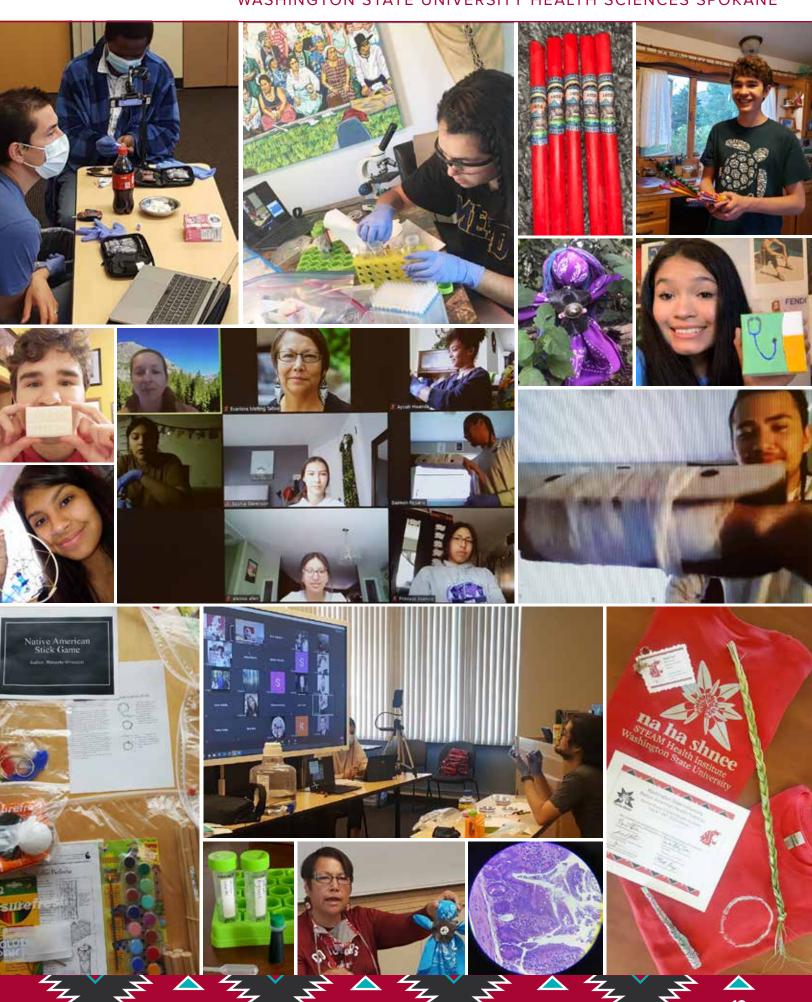
Josiah: There is absolutely more learning that I need to do in order to be able to effectively serve our communities. One of my biggest takeaways was, in order to properly work with any community, you need trust and to be trusted, you have to spend time in that community.

For people reading this, who are considering investing in this SRO opportunity, why would it be a wise investment for them?

Athena: We need more med students exposed to these populations in America - it's the difference between patients trusting their providers and having good outcomes or your patients mistrusting providers, getting mixed messages, and getting scared and lost in our health care system.

Josiah: Investment in this program is a good thing because the learning students do is more than what we get with a normal curriculum. You get to learn how to work with a community that's been historically underserved. And you get to learn more about yourself and the people that you're working with.

Christian: I think it's a remarkable investment. Especially as you look at our interactions with this summer's Reimagine IndianS into MedicinE (RISE) pathway program and helping Native participants who are planning to apply to medical school. With the disparities we learned at SRO, you have an entirely new appreciation for what these kids are coming through, you know, difficult circumstances. And we were able to provide a place for them to not only be motivated by each other, but their positive interactions with Native practitioners. It was as inspiring for them as it was inspiring for us.



CURRENT HEALTH SCIENCES STUDENTS

Historic Agreement OpensNew Doors for HealthSciences Students

When Washington State University (WSU) Native American Health Sciences (NAHS) Director, Naomi Bender, flew to Portland in fall 2019 to meet with Portland Area Indian Health Service (IHS) leaders, she hoped that, at a minimum, she could open a few more doors for health sciences students to train in Indian Country.

Little did she know her meeting would result in something historic for the University—a first-ever master agreement securing six new student training locations in Native communities in Washington, Idaho and Oregon.

"Their interim Chief Medical Officer, Thomas Weiser, took time away from his vacation that day to dig deeply with me and really invest himself in discussing our initiatives and where we could partner," Bender said. "I am still in shock and awe over everything we've accomplished since."

Not only did Weiser corroborate on a shared vision for partnership between WSU's NAHS program and Portland Area IHS, including more upper-level students rotating through IHS health care settings, also referred to as clinical rotations, but he relayed the importance of ongoing collaboration when permanent Chief Medical Officer, Andrew Terranella, MD, was appointed to the full-time position.

"Next thing I know, Dr. Terranella is an advocate alongside me and the master agreement starts taking shape," Bender said.

The agreement, in effect as of the 2020 – 2021 academic year, generates opportunities for both Native and non-Native students to rotate and work in Indian Country. This is important given that many of these lands are rural and attracting health care workers is often difficult.

Students from multiple WSU health sciences programs—medicine, nursing, pharmacy, nutrition and exercise physiology or speech and hearing sciences—will be able to complete clinical rotations in six outlying IHS service areas across the Pacific Northwest. The areas include Colville, Wash., Fort Hall, Idaho; Warm Springs, Ore., Wellpinit, Wash., Salem, Ore.; and Toppenish, Wash.

The agreement not only helps students who will soon enter the workforce, but there are potential major long-term benefits to Indian Country—sending students to native communities could inspire students to work in these locations after graduation.

"These rotations can help to grow the local and Native workforce," Terranella said. "In addition to recruiting these students to ultimately work in these areas, these health sciences students, especially those who are Native, can act as role models for our communities and inspire the next generation."

"We need more culturally knowledgeable and skilled health care workers in our tribal communities," Bender said.

Terranella echoed that sentiment.

"IHS rotations are one of the best ways to recruit students to work in Native, rural health," he said. "As more practitioners join this field, we are able to expand health care access for Native communities and families."

Non-Native students will get an experience they may not get in a classroom or at health care facility in non-Native communities.

"Health and healing in tribal communities is holistic in nature and not always based on the Western medicine model," Bender said. "It's important that our students have the opportunity to learn that patient care doesn't happen in a vacuum or revolve around what they learned in a classroom." Portland Area IHS has entered into agreements in the past with universities, but typically the agreement was only for a specific service unit and a specific school, Terranella said. The agreement with WSU Health Sciences encompasses all six service units and all WSU Health Sciences programs.

"It is our hope that through these broader agreements, we can establish a regular pipeline to educate the next generation of health care workers who will serve rural and Native communities into the future." Terranella said.

Said Bender, "The enthusiasm Dr. Weiser conveyed during the initial meeting in fall of 2019 put this into motion. Dr. Terranella completed it, and I also want to acknowledge Sam Schirer in WSU's contracts office, who was helpful in co-writing and editing the document in legal terms and vetting it with the Federal government."

Concluded Bender, "To say I feel blessed this happened the way it did is an understatement."

WHAT IS A CLINICAL ROTATION?

Clinical rotations are experiences health sciences students gain in the ladder years of their education. Students are present in health care facilities and shadow health care workers to gain valuable hands-on experience. They have access to patients, with physicians and students acting as their professors as they solve complex medical dilemmas.



In Her Words: Notes from Indian Country

Leslie Randall, RN, PhD, MPH
Member of the Willewah Band of the
Nez Perce Tribe

WSU Tribal Advisory Board Member

Utilizing storytelling to transmit educational messages is a traditional method practiced by many American Indian tribes. The stories often



illustrate consequences of behaviors and invite listeners to come to their own conclusions after personal reflection. When asked about her journey to becoming a nurse and her thoughts on the health of Indian Country and how we can get more Native youth practicing health care, Nez Perce tribe member and nurse, Leslie Randall, shared the following story.

When I think about why I got into medicine, it goes back to looking down at my mother in her casket. I remember thinking, "Why did she have to die? She's so young and so beautiful." It's those questions I asked when I went to school, when I decided what to do my research on.

But, to tell you the answers to the questions you're asking, 'how I ended up being a nurse' and 'what does health currently look like in Indian Country' and 'how do we get more Native youth into health care', first, I need to tell you more about who I am. The best way to tell you about who I am is telling you where I came from, and it's been a long journey. I am an enrolled member of the Nez Perce Tribe and my family is mostly from the Willewah band in Oregon. I've known my family in Oregon since I was a baby, as we kept close ties. When my mother and father separated, I went to live with my grandmother. It was hard when we were growing up; we lived sustainably, where you had to go get your own food. My grandfather was a great hunter though, and kept us fed with elk, deer, and salmon.

With both grandparents on both sides, with both grandmothers, they taught me very traditional ways of doing things, and what foods to eat, and teas, and all sorts of stuff. This is one of the ways that we can teach children healthy lifestyles. We can take them out to gather these goods.

On my father's side, I am a descendent of Ollokot, who was war chief during the war we had with the government. He was in charge of the younger warriors, who were not as restrained, so he had to restrain a lot of them, but they still defended us quite well.

I grew up on a reservation until I was 15 and then got a scholarship to St. Edward's University in Austin, Texas. I didn't survive there because I was so lonely. And that's the story of a lot of our young people—they have family back on the reservation they are responsible for, they have family events they need to be there for, but the family can't afford to bring them back. I dropped out of college and didn't go back until I was in my 30s, when I was a single mother with two children under the age of 5, but still managed to get my nursing degree from Oregon Health & Science University. I could do the coursework, but I was so tired by the time I got to clinicals, I was just barely walking.

People wanted me to take the MCATs, but I kept thinking about what it would cost me to go to medical school and how far I would have to go—I had no support system there. My family was here and I could see them anytime I wanted to. Part of the problem with our students, it is difficult for them to be in college and maintain their connections to the reservation. They are expected to come back.

When we think about getting Native youth into college and into health professions, you have to look at who is willing to go. The ones who are willing, these are the ones who we can entice into education—into nursing, pharmacy, medicine, or public health. They're likely to stay if they're interested. But we have to get them interested when they're young.

After my bachelor's, I was able to get my master's in public health, but, according to IHS, I was "too educated," for any of their positions, so they offered me a research position with Dr. Tom Welty in Aberdeen. He was an incredible person. He raised a bunch of us. He taught us everything we know about being in the community, he showed us, he made us do it. He told us, "You have to meet with the community. You have to get their permission. You can't just go there and say this is what I'm going to do."

Mentoring is important. I have tried to be a mentor—encouraged students to go as far as they can, then they can call their own shots. I often tried to catch the students when they were going into nursing school. I would talk with students who were ready to give up because it was hard. I often say, "Whatever it is, just keep going. Don't stop getting your education."

People must acknowledge the barriers that are in the way of Native youth going into a health profession. There is institutional racism. It was there when I was in nursing school. I would watch the discrimination against those of us who were of color. I think about how difficult it was to even get a 'C' in my clinicals, I had to do 'A' work. The young white women, they would be giggling and laughing, distracting in classes—I watched them be singled out to go further, encouraged to get the better education, get the scholarships.

Whether they're Indian or not, as long as they are people of color, they need help. We need to increase the number of people of color in health care, increase their ability to get into school and stay there. We need young people in nursing, we need to get them into medical school, get into pharmacy. These professionals are desperately needed on any reservation.

I have to go off the reservation for most of my care, I don't get to see any Indian providers, but sometimes I do get to see people of color, and that makes a difference as far as I'm concerned. I keep telling my people, "Go out and get the experience, then come back. We need providers, we need someone that people can look at and say, 'oh, it is possible'."

Off the reservation, the problem with many of these providers, they assume, especially with the elders, that our people can make their own

appointments and navigate the online scheduling. But it is really easy to get lost in that system. Off the reservation, our people feel like they're not being treated well, that they're getting care that isn't as good. They want to see an Indian doctor, on our reservation.

Our tribe needs the ability to hire more health care professionals, offer them good wages. If necessary, offer them housing. That is one of our biggest problems, trying to find a place for our providers to live. If we want to hire from IHS, we have to go to a website, and download applications. If a tribe does not have internet access, which a fair amount of reservations don't, they can't apply for help. We need affordable internet access.

WSU Native American Health Sciences is doing great work. I think about Robbie Paul, who started much of this work. She basically had to do it on her own. She had to go after grants and funding by herself. She laid the foundation for current director, Naomi Bender, and I really respect what Dr. Bender is doing and that she is taking it further. She's managed to bring in funds and instructors that are good role models.

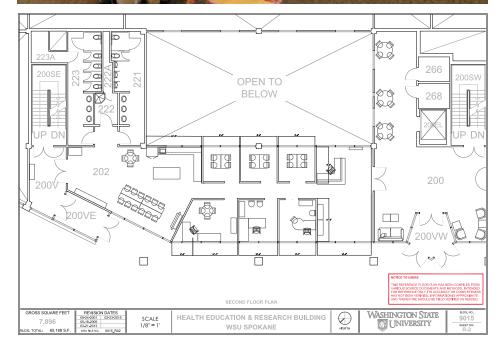
If anyone is going to invest in anything, it should be in Dr. Bender's work she's doing with the high school students and the undergraduate and graduate students. The work she is doing is essential. You have to be out there, and a lot of us can't be anymore. We're depending on her, we trust her, to continue the work she's doing.

Center for Native American Health Opens January 2021

- The Center for Native American
 Health is slated for completion
 on the WSU Health Sciences
 Spokane campus in January 2021
 with the hope for a grand opening
 late spring or late summer
 (August)
- The Center supports students
 who identify as American Indian
 or Alaska Native (Al/AN) or
 as First Nations indigenous,
 AND peers, faculty and staff
 colleagues, tribal partners, and
 community stakeholders are
 invited to visit and partake in
 enriched cultural and educational
 events.
- The Center is unique in that it offers:
- Its own Native Americandeveloped and culturally based clinical patient exam room with telehealth and educational opportunities from NA providers and clinicians, WSU faculty from across the three health science colleges, and IPE engagement between students and faculty. In the future, indigenous patients can use the space to share their views of clinical communication and exchange.
- Indoor and outdoor healing elements to meet the unique needs of indigenous students, staff, and faculty.
- Culturally based design elements representing health and healing







- (i.e. colors and balance of the medicine wheel, waterfall element, etc.)
- Multi-purpose space to spur student success
- 4. The Center will offer:
- 3 smart rooms with 55" monitors, computer/Wi-Fi access, OWL technology for Zoom and recording capacity
- 6 statin PC lab with free faxing, scanning, and printing
- Clinical skills patient exam room with telehealth/education capacity
- Mentorship from faculty and peers
- · Advisement by Center staff
- Research and scholarly project opportunities
- Scholarships & emergency Funds
- Experiential learning opportunities
- Shadowing opportunities
- Healing gardens in outdoor space
- Healing elements indoors (herbs, water and cultural elements)
- Kitchen with island, theatre-sized popcorn maker, coffee and drink station, fridge, sink, microwave, and other appliances
- Indoor gathering space with large TV monitor for meetings
- Additional seating and studying areas
- · Children's play area
- Cultural events, both traditional and educational
- Lockers for student storage, restrooms, filtered drinking station
- 5' digital screen providing event updates, news, etc as it pertains to NAHS and the Center
- Front desk student service support personnel
- The 2020 Empire Health
 Foundation InHealth grant helped
 make the Center possible with
 \$115k in contributions.

- 6. During COVID restrictions, the Center will still be able to:
- Provide tele-educational and experiential opportunities with providers from the patient exam room for students who need hours toward matriculation requirements of programs.
- Provide tele-educational and cultural opportunities from the Center kitchen with food and traditional meal preparation (on Zoom).
- Provide advisement, mentoring, and other student support access online.
- 7. The project lead on this Center project is WSU Health Sciences Spokane's Kendra Kurz, who is working with the NAHS team, including Director, Naomi Bender, to design the space and make every effort possible to meet the unique and cultural needs of students. Other key staff working on this project are Jon Schad, WSU Health Sciences Spokane Facilities and Operations, and Daren Noe, WSU Health Sciences Spokane Information Technology Services, who is helping design study and telehealth/education spaces. The Center is also supported by a cohort of tribal providers/clinicians/officials and faculty from the three colleges to help design the patient exam room.
- 8. The Center's Student Support
 Service Manager is Evanlene
 Melting Tallow, who will be in
 charge of the daily operations of
 the Center and students.
- 9. The Center plans to grow in year 2021, with a:
- Tribal-Community Partner Initiative

- arm that provides opportunities to work with tribal communities, partners, clinics, and other stakeholders to support tribal community health outcomes (whether that's in research, community projects, or even student-driven scholarly projects).
- With this extension is a request for space for tribal partners, to include faculty working on native health research initiatives and projects at WSU, to gather (with tele capacity) and work toward WSU's land grant mission of providing service and response to tribal communities.

Interested in investing in WSU Native American Health Sciences?

Contact Kelsie Lees, Dev. Coordinator, klees@wsu.edu or (509) 358-7504 or visit spokane.wsu.edu/about/supportnative-american-health-sciences





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