



# Tribal Home Visitation

A Pathway to Long-term Health and Wellbeing for  
American Indian and Alaska Native Families

Myra Parker, PhD, Evaluator, Ina Maka Family Program

Katie Hess, MPH, Manager, Ina Maka Family Program

Lynnette Jordan, Director, Operations, UIATF

# Overview: Tribal MIECHV

- Federal program funded through the Administration for Children and Families (ACF), under the U.S. Department of Health and Human Services (DHHS)
- The Tribal program is funded through a 3% set-aside from the larger Maternal, Infant, and Early Childhood Home Visiting (MIECHV) Program.
- \$21 million has been awarded to 25 Tribes, Tribal Consortia, Tribal Organizations, and Urban Indian Organizations.



# Background

United Indians of All Tribes Foundation (UIATF),  
Seattle / King County Urban Indian Organization

- UIATF has over 40-years of community service experience
- UIATF has long emphasized social determinants of health as a target for ensuring AIAN equity
- Primary focus is to culturally adapt an evidence-based home visiting curriculum for a diverse urban Indian community.



Lynnette Jordan, Director, Family Services

Katherine Hess, MPH, Program Manager, IMFP

Myra Parker, PhD, Evaluator

# Background

## Ina Maka Family Program – Service Population

- Mother's average age at enrollment is 30 years old
- 16% of mothers are under 22 years old at enrollment
- 32% of mothers enroll while pregnant or when their child is less than 3 months old.
- Average household income of current clients is \$22,068/year
- 53% of households are under the 200% Federal Poverty Level at enrollment.
- At enrollment, 18% of mothers do not have a high school diploma or GED
- 37% of families have had experience with Child Protective Services or the Child Welfare System
- 24% have a history of substance abuse
- 42% are stay-at-home moms, 16% work full-time, and 13% work part-time.



# Background

## Culturally-Informed Approach

- Home visiting program grounded in the Native community
- AIAN home visitors and kias (grandmothers)
- Culturally-adapted curriculum
- Scientific and Community Advisory Board
- Regular community meetings to share reports and findings
- Use of community focus groups to assess acceptability of program



# Objectives

## Home Visitation Curriculum – Adaptation and Evaluation

- In-depth literature review of AIAN risk and protective factors and parenting and child development
- Review by expert panel and CAB
  - Revisions
- Home visitor and elder focus group review
  - Revisions

**PARENT** handout

### Visit 9 - When Stress Takes Over



**What is Stress?**  
Stress is mental or emotional strain resulting from demanding circumstances. Being a parent can sometimes be very stressful. Many American Indians and Alaska Natives have grown up away from their families and home communities. As a result, they may not have learned how to deal with stress from parenting or daily life.

A calm environment is important for children's development. Yelling or slamming things makes children stressed. High levels of stress can cause children to have problems developing relationships with others and concentrating on tasks.

Maintaining a calm approach is challenging, but with practice, it is possible to develop and learn ways to handle stress and maintain a calm environment.

**What Are Some Ways to Cope?**  
Way to cope with stress can be positive or negative. Negative ways of coping may help you feel better right away, but can be harmful. For example, using food as a source of comfort might help a person feel better for a few hours, but using that to cope for months or years can result in obesity, diabetes, or heart disease.

Positive ways to cope help a person find a calm attitude, help release good brain chemicals that soothe and promote happiness, and help people address complex issues in ways that address the underlying stress. For example, deep breathing relaxes tight muscles and reduces stress chemicals in your body, allowing you to focus on problem solving.



**Other Ways to Relieve Stress**  
**Take a break** – Even one minute will help you refocus by stepping outside of the situation and taking a moment to relax.  
**Take a deep breath** – Inhaling and exhaling slowly for a few minutes changes the chemistry in your body to help calm and refocus.  
**Try to think positively** – Negative thoughts like, "She's crying and I'm not sure why, I must be a bad parent" add to your stress. Practice thoughts with a positive spin: "She only cried a few times today, I'm learning how to understand her needs and she's learning to stay calm!" can help your state of mind.

**Take a walk** – Walking for a few minutes helps to reduce stress chemicals in your body in the long term. Making exercise a daily practice will allow you to relax and refocus.

**Choose an activity that you enjoy** – Gardening, walking in the park, practicing Native spirituality, or spending time with family help you relax. Stay away from activities that reduce your activity level (both physical and mental), such as watching TV or texting on your cell.

**Get enough sleep** – Lack of sleep increases stress chemicals in your body. It can cause you to turn to frustration and anger, rather than problem solving skills.

**Eat a healthy, balanced diet** – Vegetables, fruits, lean proteins, and complex carbohydrates help you maintain steady blood glucose levels and have antioxidants that promote health. Stay away from processed food, like fast food, white bread, or high sugar foods.





### Trauma

Domestic violence, sexual abuse, physical threats and injuries are types of trauma that occur in all communities and in many different families. When a parent is exposed to these traumas, it can take a serious toll. Physical injury and pain can be a result. Anxiety, depression, and post-traumatic stress syndrome are long term issues that can occur from experiencing trauma. This stress also harms our children. They can develop the same mental health issues, and may also have problems concentrating in school and following directions.



### Why Is It Important to Get Help?

Strong emotions, including grief, shame, guilt, and anger may all be involved in the aftermath of experiencing trauma. These complex feelings can impact your daily life, and the way you approach problem solving and parenting. Finding a way toward healing and wellness can take time and assistance. Getting help means wellbeing for you, your child or children, and your family.

### How Do I Deal with Trauma?

Meeting with counselors who use techniques like **Cognitive Behavioral Therapy (CBT)** and/or **Motivational Interviewing (MI)** can help you address trauma you may have experienced. It is possible to get ideas about how to parent from counseling sessions. This gives you and your children ways to handle the trauma and heal.



### When Will I Be "Back to Normal?"

As with many other life experiences, healing takes time, patience, and practice. Talking with a counselor can help identify the supports you and your family need to move forward that is comfortable to you.

### Your Home Visitor Can Help

We all need guidance and support at some time in our lives. Your home visitor can help find resources in your community and AIAN counselors who want to help and who share Indigenous perspectives of healing and wellness.

### Resources Who Can Help

[Cowlitz Tribal Health Seattle](#)  
Mental Health & Chemical Dependency  
15455 65th Avenue South  
Tukwila, WA 98188  
206-721-5170

[Seattle Indian Health Board](#)  
Primary Care & Domestic Violence  
611 12th Avenue South  
Seattle, WA 98144  
(206) 324-9360

[Thunderbird Treatment Center](#)  
Chemical Dependency  
9236 Renton Avenue South  
Seattle, WA 98118  
(206) 722-7152

[Chief Seattle Club](#)  
Housing Insecurity & Job Skills  
410 2nd Avenue Extension S  
Seattle, WA 98104  
(206) 292-6214

[Suicide Prevention](#)  
1-800-273-TALK (8255)  
TTY Users 1-800-799-4TTY (4889)

[24-hour Crisis Counseling and Referrals](#)  
1-866-789-1511

[Teen Link](#)  
Confidential/teen-answered help line  
Every evening 6-10 PM  
1-866-833-6546  
[866teenlink.org](http://866teenlink.org)  
[teenlink@crisiscolink.org](mailto:teenlink@crisiscolink.org)

[Native Women In Need](#)  
Gas cards & Referrals  
(206) 715-7514  
[www.nativewomen.net](http://www.nativewomen.net)  
[info@nativewomen.net](mailto:info@nativewomen.net)



### Multigenerational Trauma

Government policies, like requiring American Indian and Alaska Native families to send their children to boarding schools, reducing traditional lands, and prohibiting Native languages and spirituality, are types of trauma that continue to impact Native families today. In addition, historically, Native communities experienced devastating diseases that they had never seen before, such as smallpox.



These events harmed generations, and contribute in many ways to stress in our communities. The Federal assimilation policies caused major family disruption. Loss of language, loss of spirituality and traditional ways of coping with stress, and the deliberate and systematic break-up of family relationships has had major impacts on parents and their children over more than one generation. Mental health issues are one result, and even our genetic code can be changed due to major stress over many generations.

### Discrimination and Microaggressions

Even with the elimination of the Federal assimilation policies, Indian people today still face barriers to achieving educational and professional goals, along with a healthy, balanced life. Discrimination still occurs in many of the social institutions AIAN people must access, including the school system, the legal system, and social services.

The poor treatment based on race, and the stereotypes that are perpetuated about AIAN are called "microaggressions." It is helpful to understand that these hurtful and frustrating experiences mean less about us and our communities, than it does about the person using these types of practices to demean and undermine our children and family members. Talking with our children about discrimination can help them process their own feelings of frustration, anger, and hurt if they witness it or experience it for themselves.



### AIAN Strength and Healing

Our communities have survived over 500 years of trauma. We are still here, and that speaks to our strength and the ability of our families and communities to not only survive, but heal and prosper.

Sometimes we face challenges, and reaching our goals of education, building a career, and moving our family forward can feel difficult. At these times, it is important to remember all of the possibilities that exist in life for both you and your child. Keeping your goals in mind can help you and your family weather any difficulties.

Your home visitor can help you find community-based resources that will help address many of the issues you may experience. By seeking out support from our families and communities, we can build our resiliency and handle stressors with greater ease.



# Objectives cont.

## Ina Maka Evaluation – Evaluation Question and Hypotheses

### Evaluation Question:

<b>P</b>	<i>Do urban American Indian / Alaska Native (AI/AN) parents/caregivers</i>
<b>I</b>	<i>who receive the culturally adapted IMFP home visitation services (referred to as PAT + DS) for 12 months</i>
<b>C</b>	<i>Compared to parents/caregivers who receive the non-adapted IMFP home visitation services (referred to as PAT + SE)</i>
<b>O</b>	<i>demonstrate greater change in parenting outcomes</i>

# Methods

## Study Design and Intervention



- Quasi-experimental, mixed methods design with random assignment to the culturally enhanced PAT program (PAT + DS) versus the original PAT program (PAT + SE)
- PAT + DS delivery followed a similar format to that of PAT + SE for the first 8 required visits
  - Surface Level Differences – AIAN organization delivering services
  - Deep Structure Differences – elder visits, and group connections and referrals included tribally-specific content and providers, and visits 9-16 included the 8 culturally-adapted materials

# Data and Methods

## Mixed Methods Rigorous Evaluation

- Quantitative – 2-group comparison on four outcomes: (1) parenting confidence; (2) program retention; (3) program engagement; (4) parent satisfaction
- Qualitative – focus groups and interviews with parents, home visitors, and elders to discuss relevance of culturally-adapted content, home visit “fit” and relationships between elders, home visitors, parents, and children



# Mixed Methods Approach



# Mixed Methods Approach cont.

## **Benefits**

- Enabled evaluation and program team members to triangulate and contextualize results
- Enhanced needs assessment, cultural adaptation, and evaluation quality and overall process

## **Challenges**

- Resource intensive given funding
- Time intensive

## **Community Perception**

- Overall positive – appreciative of community process
- Community provided important, constructive feedback

# Results

- Quantitative
  - No significant differences between the two groups on retention (96.2% vs. 100%), program engagement (75% vs. 72%), or satisfaction (avg. score of 112.6 vs. 108.5)
  - Both groups had higher retention rates than those reported in comparable programs in the research literature. (about 98% vs. 40%)
- Qualitative
  - Strong program buy-in for cultural adaptations by parents
  - Confirmation across providers and parents that relationships between home visitors and parents and children were key
  - Home visitor challenges rested in paperwork and data entry

# Results cont.

*[The Ina Maka Family Program]...helped me, to not just be...a passive parent.*

*If he's not crying, if he doesn't need anything right now, or doesn't really need me, I'm more aware that my son has other needs, but he's not able to tell me.*

*So I try to talk to him more, read more books, and be more interactive with him.*

*I think that [the program] helped me to be more thoughtful with my son.*

# Results cont.

*I remember the sleep and tantrum [handout]. I keep them in a notebook. There's times where, a couple months back we talked about something that I'm dealing with now, and I'm able to go back and look at it again. Just brings back, oh, maybe I should try some of these things...it was just helpful to have something always to go back to.*

# Results cont.

*I feel like to our Native people as whole, this is... a value that...Natives have. [B]e true to yourself, think positive... and see all the possibilities.*

*I know when I was growing up, my grandma and my aunts were like, “You shouldn’t think negative about other people.” [The culturally-adapted sessions were] really nice, to have that reminder about different values we have as Native people, like with being healthy, and historical trauma, and we never really had fry bread before...*

*[I]t’s nice to pass on to our children that “We’re Native people, we don’t eat fry bread. We have a healthy meal system that we had before we had lard, and flour, and coffee beans.” Yeah, it’s just nice to instill those values.*

*And to be able to know which values to instill. Because if you don’t know, it’s important to learn.*

# Applications for Evaluation

- Multiple levels of mixed methods
  - Feedback across stakeholder groups and participants in home visiting process
  - Multiple quantitative data sources to ensure comprehensive understanding of problems and outcomes
- Importance of meaningful community input and letting community members know sharing their experience is valued
  - Use of CBPR and community-driven evaluation
- Focus on values community members identify that promote resilience and healing
  - Critical for communities and individuals experiencing historical trauma and personal trauma

Please contact us  
for more information:

**Katie Hess, MPH**

Program Manager

Ina Maka Family Program

United Indians of All Tribes Foundation

T. 206-285-4425

**Myra Parker**

Center for the Study of Health and Risk Behaviors

Assistant Professor

Dept. of Psychiatry and Behavioral Sciences

University of Washington

T. 206-258-1132

