Building Foundations to Health with Tribal Communities-A Culturally Competent, Integrated Workforce and Organizational Development Strategy

Type of Activity and Name of Agency

The Southwest Public Health Leadership Institute (SWPHLI), hosted by the **Mel and Enid Zuckerman Arizona College of Public Health (MEZACOPH)**, has a mandate to serve American Indian tribes of the Southwest in order to fulfill its mission and **reduce health disparities** within the region. Increasingly tribes in the Southwest are assuming full control over the delivery of community and public health services through factors that allow for greater self-determination, such as P.L.93-638 and increased access to resources generated through Indian gaming. With the devolution of the Indian Health Service, resources available to tribes for leadership development, training and technical assistance are limited and often focus at the executive level. Tribes must now seek additional resources and collaborate with community partners.

The Tohono O'odham Nation, (TON) the second largest tribe in Arizona and second largest tribal nation in Arizona by landmass, approached the SWPHLI to lead a public health workforce development initiative. Rather than continuing with the model that has presently evolved, largely borne out of the traditional Public Health Service biomedical model, an **Area Team** adopting a public health approach was chosen to deliver services provided by their **Department of Human Services**, comprised of over 70 discrete programs and two hundred employees.

Description of Project, Its Development and Outcomes

Solving the complex health concerns that native nations face, the risk factors for which are largely based in behavior, requires the application of an ecological public health model that is better able to address the social and economic determinants. Health priorities, previously determined by tribal leaders presented to our group were Diabetes, Alcohol/Substance Abuse and Injury Prevention. The SWPHLI has partnered with the Tohono O'odham Department of Health and Human Services to:

Strengthen their public health infrastructure using a culturally competent, integrated workforce and organizational development strategy encompassing:

- **Leadership development; including traditional practices**
- **Identification of tribal specific essential public health services**
- **Skill development in community health assessment and health priorities**
- **Public health education and training**
- **Capacity building and technical assistance**
- **Strengths and assets identification**

Over the past six months, three daylong workshops were conducted reaching **370 Tohono O'odham DHS employees and tribal members, with a core group of 53 community health workers.** All sessions were jointly planned and implemented between faculty and tribal representatives. Key stakeholder collaboration was employed from the outset through multiple planning processes, including tribal leadership, IHS representatives, SWPHLI and AzCOPH faculty. Both **process and impact evaluation** techniques were conducted. Since the first workshop was conducted an 80 percent acceptance rate of the concept of the Area Team model for public health service delivery has evolved. In addition, the majority of participants stated that they have changed their work practices since the first workshop. Of these:

- 88 percent said they have increased ***sharing of resources with other workers***
- 86 percent of participants stated that they have increased ***working closely with workers in their program area***,
- 86 percent said they have increased ***Communication with another worker in another program/agency about a client/issue*** and
- 84 percent stated that they have increased ***working across departments/programs***.

Future sessions are being planned and ongoing training needs identified.

Successes, Difficulties and The Unexpected and Benefit to the Agency and Community Served.

Of the three workshops conducted there has been positive feedback about the value of participation in the workshop. In the most recent session 92.5% of participants found the workshop overall to be helpful to very helpful. In addition a strong bond has been formed between the faculty and the community members through sharing this process of engagement to finding solutions to their community health concerns. The extent of the commitment of tribal employees to this mission was unexpected, as a ground swell of support and ownership of community based solutions to public health concerns emerged. As we move to the implementation phase of the Area Team the challenge lies in sustaining this groundswell. Ongoing resources will need to be found to sustain our commitment to this mission. The potential health benefits for the community are clear and present. The unforeseen gains for the Arizona College of Public Health are in being the students of a powerful, proud and resourceful community, the privilege of being involved and the honor of gaining the trust of our partners.

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