

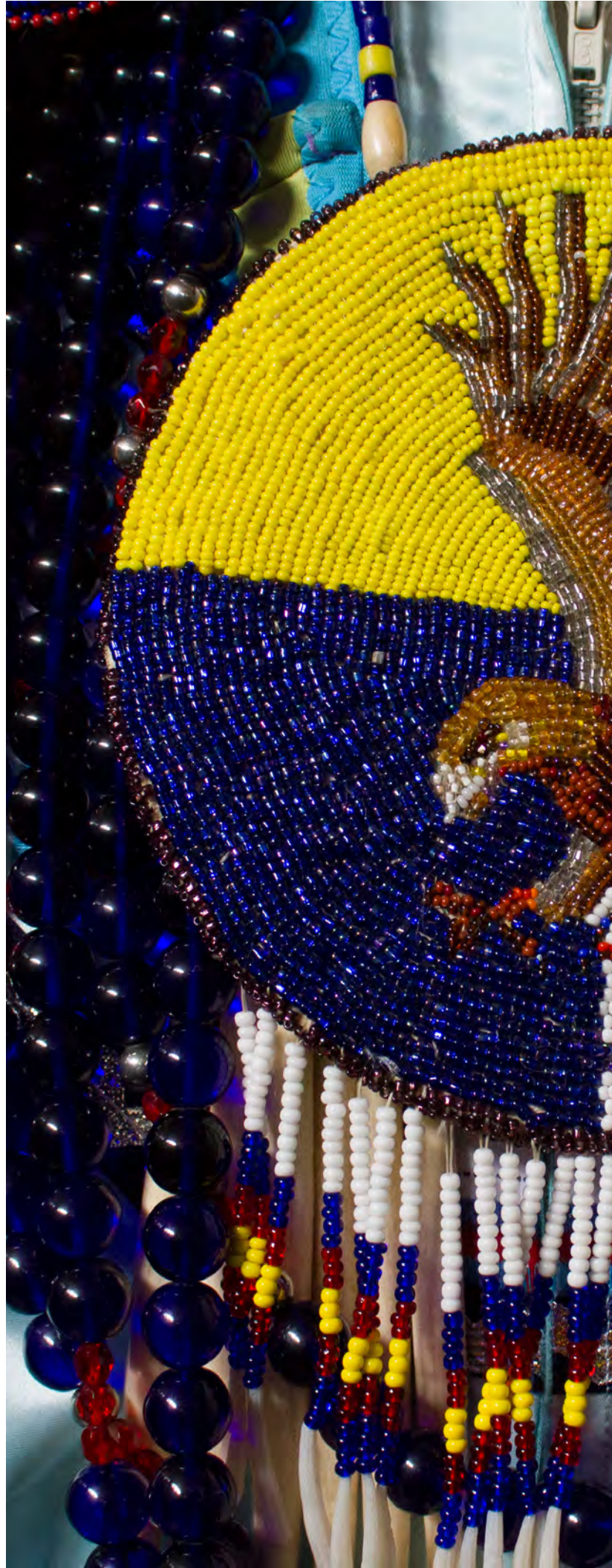


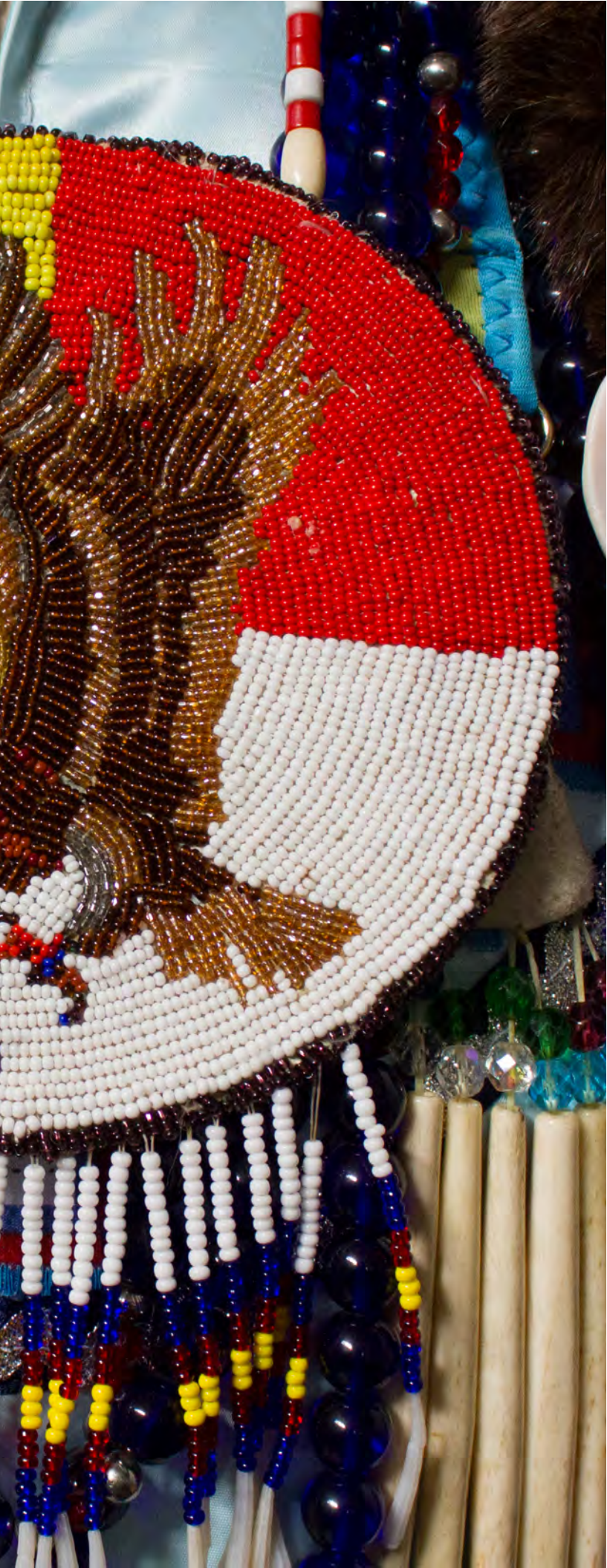
2019

ANNUAL REPORT

Partnerships *for* Native Health

Our mission is to improve the health and well-being of American Indians and Alaska Natives – women and men, old and young, rural and urban, now and in the future.





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Message From the Director

Partnerships for Native Health celebrates the rich and diverse cultures of American Indian and Alaska Native (AI/AN) peoples. Their traditions and histories vitally inform the work we do. Their communities form the foundation of our approach to research. Local perspectives and practices become the cornerstone of designing and implementing culturally respectful interventions and programs. This community-based orientation turns our investigators into learners and members of our partnering communities into academic advisors.

We recognize an urgent and compelling need to reduce and eliminate health disparities in AI/AN communities across the nation. It is simply not enough to measure, monitor, and describe disparities, it is imperative to understand them and to intervene. In keeping with our focus on high-quality, impactful science, we particularly want to expand opportunities for conducting cutting-edge research now – not decades later as is too often the case with AI/AN populations. We believe that using all tools available to us that are acceptable to our partners, including tailored therapies, personalized medicine, and health economics, should be harnessed in the fight against health disparities. Our research, as you will read in this report, embodies this perspective.

One of the most important things we can do to understand, mitigate and eliminate health disparities is to promote diversity in the scientific workforce as well as in the people who participate in research. We also need to be seriously engaged in health promotion activities. Every day, our faculty and staff strive to raise awareness of the importance of good physical, mental, and spiritual health in Native communities to improve their long-term health outcomes. We also showcase Native faculty in all of our research and host several highly successful career development programs.

Sadly, the ultimate marker of the continuing legacy of health disparities – AI/AN life expectancy – still lags behind members of the dominant society in the U.S. AI/ANs die earlier at higher rates than other Americans due to many health conditions, including chronic liver disease and cirrhosis, diabetes mellitus, unintentional injuries, assault and homicide, suicide, and chronic respiratory diseases. The good news is that by working together to address health disparities, we can help communities become healthier.

Finally, treatments work and progress is palpable. Research has shown that simple, yet powerful programs have reduced kidney disease by more than 50% among AI/ANs with diabetes. Paying attention to differences in biological treatment responses and to feasibility and acceptability of interventions in specific racial and ethnic groups can help make our treatments work better. As our group at Partnerships for Native Health expands in number and our research addresses an ever-expanding spectrum of health conditions and health care problems, we remain committed “to challenge – and change – the status quo.”



Dedra Buchwald

Founding Director, Partnerships for Native Health
Washington State University



Dedra Buchwald
Founding Director

Dr. Buchwald, MD, is a Professor in the Elson S. Floyd College of Medicine at Washington State University, where she directs the Institute for Research and Education to Advance Community Health (IREACH). She is also the Founding Director of Partnerships for Native Health (P4NH).



Lonnie Nelson
(Eastern Band Cherokee)
Co-director

Dr. Nelson, PhD, is a licensed clinical psychologist and an Associate Professor in the College of Nursing at Washington State University. He also serves as Co-director of P4NH.



Ka'imi Sinclair
(Cherokee Nation)
Co-director

Dr. Sinclair, PhD, MPH, is an Associate Professor in the College of Nursing and the Co-director of P4NH at Washington State University.

Because our organization serves diverse communities, we value diversity in our staff and leadership. P4NH employs 15 faculty and 52 staff. Our faculty serve as principal investigators and co-investigators on research projects, while our staff provide program support. More than half our staff, and almost half our faculty, are members of racial, ethnic, or cultural minorities.

Five of our 15 faculty members are American Indians or members of Canadian First Nations. They represent the Choctaw Nation, the Cowichan Tribes, the Eastern Band of Cherokee Indians, the Cherokee Nation of Oklahoma, and the Dane-zaa Métis. Our 52 staff members include 18 American Indians and Alaska Natives whose tribal representation includes the Tlingit, Diné, Makah, Colville, Nez Perce, Oglala Sioux, and Standing Rock Sioux.

About Us

Partnerships for Native Health (P4NH) is a research program that aims to improve the health of Native communities across the United States. The program was originally established in 2009 at the University of Washington under the leadership of Dr. Dedra Buchwald and is one of the largest research programs dedicated to the health of Native populations in the world.

In 2015, P4NH was reconfigured to join Washington State University's newly founded Elson S. Floyd College of Medicine as the flagship research program of the Institute for Research and Education to Advance Community Health (IREACH). Formerly known as an initiative, IREACH was granted Institute status in April 2019.



2019 Initiatives Accomplished

In 2019, P4NH introduced several new initiatives while maintaining its existing projects and partnerships. One of the initiatives, the Northwest Health Education and Research Outcomes Network (NW HERON), was launched in collaboration with the Washington State University Spokane Health Sciences campus, the Elson S. Floyd College of Medicine, and the Health Equity Research Center in the College of Arts and Sciences (page 11). The network will serve rural communities with a focus on Central and Eastern Washington. We also established the Native Alzheimer's Disease Resource Center for Minority Aging Research (NAD RCMAR), a National Institutes of Health-funded research center (page 12).

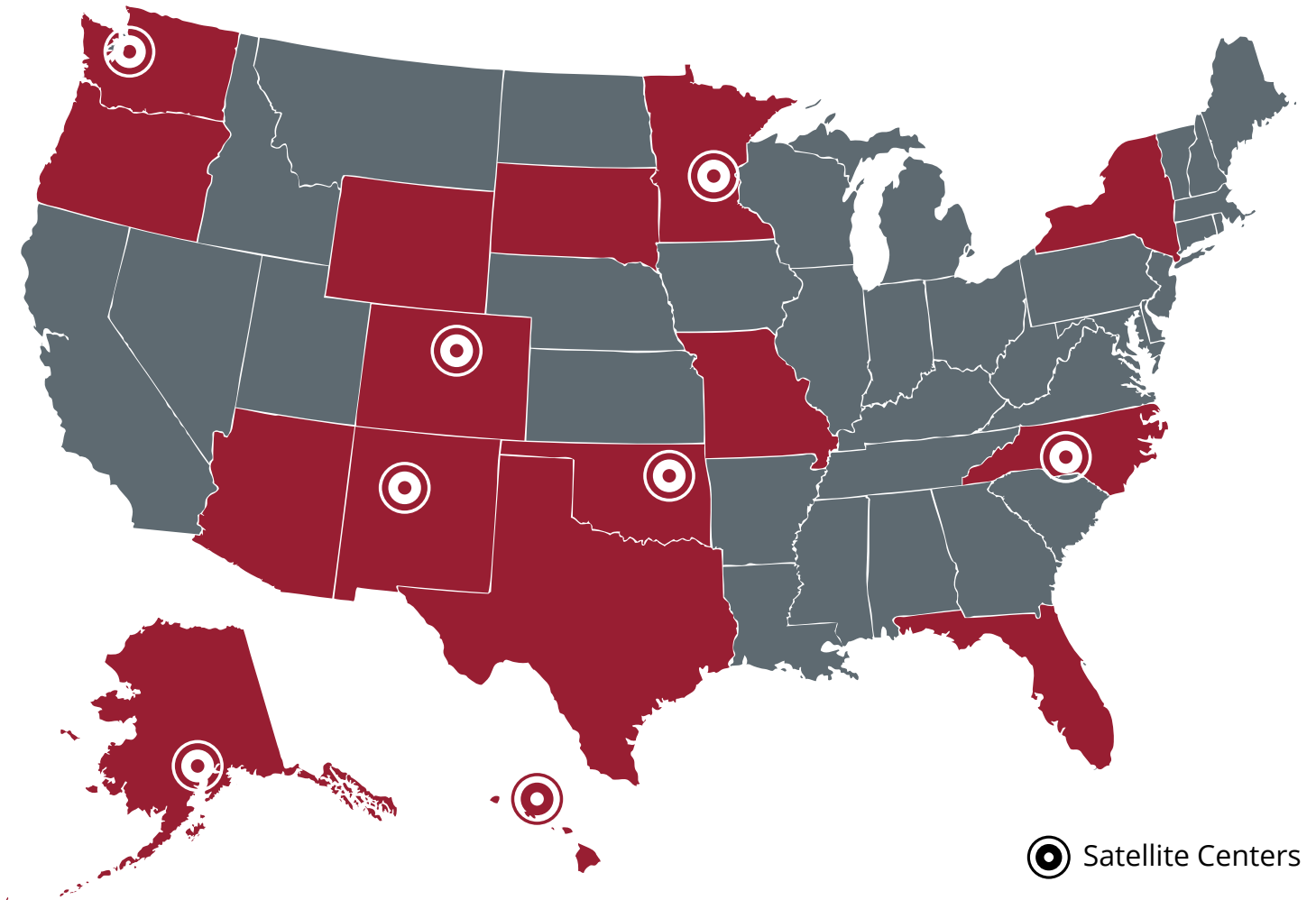
Our Reach

Each community has unique needs and concerns. To better understand the health priorities of the populations we serve, P4NH collaborates with community partners, organizations, faculty, staff, and universities across the country on our research projects.

Our network of eight Satellite Centers represents a diverse cross-section of academic and community partners. Supported by six National Institutes of Health initiatives, the centers extend our impact to build and sustain

a successful national research agenda on Native Health.

Each Satellite Center is led by local American Indian, Alaska Native, or Native Hawaiian scholars who are well-connected regionally and lead research programs. The centers are established “research-ready” sites for external Native research, thereby benefiting many more Native communities than our research projects alone.

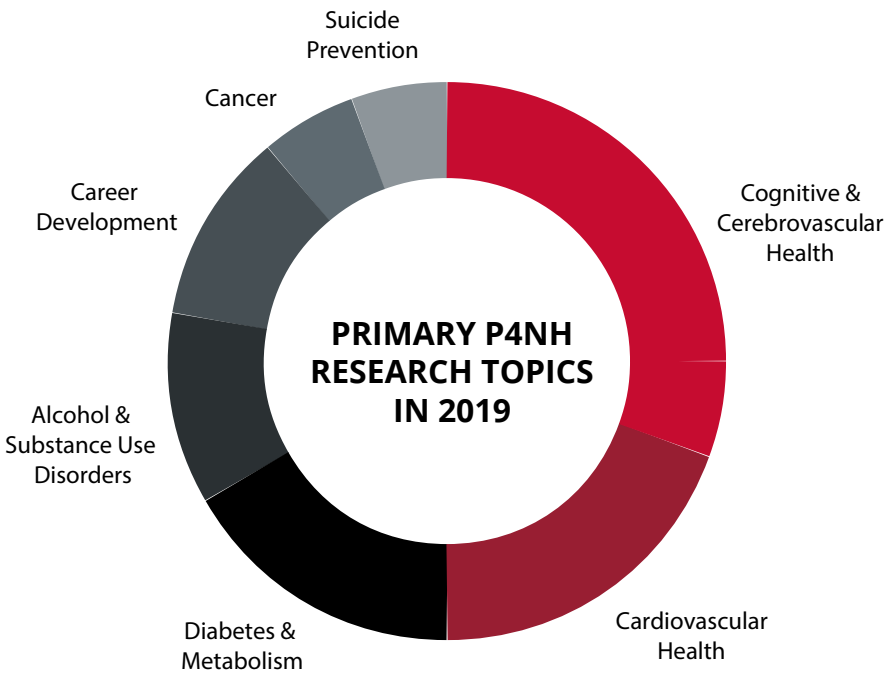


“We are passionate about improving the health and well-being of Native communities.”

Research Portfolio

In 2019, P4NH was engaged in 43 individual research projects and housed three large research centers. The program also led research projects that were a part of three additional research centers housed at other universities. The aggregated funding award for our projects totaled \$49 million.

Our research projects cover a range of issues. In 2019, we intensively engaged in research on cardiovascular health and cognitive health among Native elders. Other major efforts addressed diabetes, alcohol use disorders, and career development.

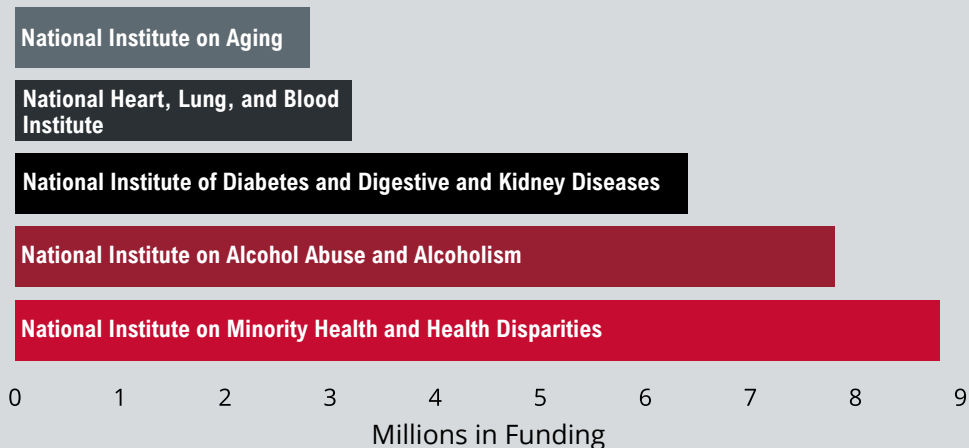


\$49 million in funding

43 research projects

3 research centers

OUR TOP FIVE FUNDERS COLLECTIVELY PROVIDED APPROXIMATELY 70% OF THE TOTAL PROJECT FUNDING IN 2019.



RESEARCH CENTER SUMMARIES

Native-CHART Native-Controlling Hypertension And Risk Through Technology	NCARE Native Center for Alcohol Research and Education	NAD RCMAR Native Alzheimer's Disease Resource Center for Minority Aging Research
Native-CHART aims to improve control of blood pressure and other risk factors for cardiovascular disease in American Indians, Alaska Natives, Native Hawaiians, and Pacific Islanders with diagnosed hypertension.	NCARE aims to optimize alcohol intervention research for public health and our Native community partners by collaborating with research project and pilot project teams to conduct research that yields high-quality data while simultaneously meeting the unique needs of our partners.	NAD RCMAR aims to better understand, intervene in, and mitigate the Alzheimer's disease health disparities experienced by American Indians, Alaska Natives, Native Hawaiians, and Pacific Islanders.
Research Projects: Blood Pressure-Improving Control among Alaska Native People (BP-ICAN) Chickasaw Healthy Eating Environments Research Study (CHEERS) Engaging Native Hawaiians & Pacific Islanders and Activating Communities to Take Steps (ENACTS)	Research Projects: Changing High-risk Alcohol Use and Increasing Contraception Effectiveness Study (Native CHOICES) Harm Reduction Talking Circles (HaRTC) Transition to Recovery (TTR)	Pilot Projects (2019 Cohort): Economic Evaluation of Ola Hou ¹ Patient Safety Among Native Hawaiian, Pacific Islander, and White inpatients with Alzheimer's Disease and Related Dementias The Prevalence of Dementia in American Indians in the Southwest Sex Differences in the Relationship Between Psychological Health and Cognitive Impairment in American Indian Adults
Cores Administrative Core Consortium Core Dissemination Core Methodology Core	Cores Administrative Core Information Dissemination Core Pilot Project Core Research Methods Core	Cores Administrative Core Analysis Core Research and Education Core
Funder National Institute on Minority Health and Health Disparities Grant Number U54MD011240	Funder National Institute on Alcohol Abuse and Alcoholism Award Number P60AA026112	Funder National Institute on Aging Award Number P30AG059295

¹ "Restoring Health," a hula-based study on hypertension management.

Selected Research Center Highlights

Native-CHART

In 2019, Native-CHART entered into the center's fourth year, with all three research projects actively recruiting participants and implementing their programs in their priority communities.

The Native-CHART Satellite Centers continue to conduct symposia and health needs assessments in their communities on health issues related to cardiovascular disease and heart health. These assessments will be used to inform our directions for future research topics and projects.

CHEERS examines the effect of the food environment on blood pressure among the citizens of the Chickasaw Nation. The main study site is Ada, Oklahoma, the principal town on the lands of the Chickasaw Nation. The team is collecting six-month follow-up surveys from the first cohort and preparing to launch the second cohort

this spring.

BP-ICAN studies the influence of measuring blood pressure at home and working with pharmacists at Southcentral Foundation, a large health care provider in Anchorage, Alaska. The team sent out over 5,000 letters to enrollees who meet eligibility criteria and also started recruitment at several clinics outside of Anchorage.

ENACTS, a project based in Washington state, is helping Native Hawaiians and Pacific Islanders eat healthier foods and improve their blood pressure. The project expanded from sites throughout the Puget Sound, Tacoma, White Center, and Everett to new sites in Spokane. Along with the expansion, the team recently hired new study staff who are building relationships with communities and recruiting and screening potential participants.

NCARE

In March, **Native CHOICES**, which targets the prevention of alcohol-exposed pregnancy in Native women, was launched. Site staff received training in the delivery of the intervention and finalized the data collection system. They also obtained approvals of the study protocol from

institutional and tribal review boards.

HaRTC, which uses harm reduction talking circles to promote safer drinking behaviors, completed the first and second phases of the project. This included conducting interviews and focus groups to assist in the design of the study's protocol. Study researchers then worked with the project's newly formed Community Advisory Board to draft and review the protocol. HaRTC is set to launch its clinical trial in 2020.

In June, we also launched **Transition to Recovery**, which hopes to help Alaska Native people in their successful transition from detoxification to long-term alcohol treatment. We hired and trained study staff in Fairbanks, Alaska, who finalized an operations manual and obtained all necessary approvals. Researchers also conducted secondary analysis of data from a partnering detoxification program, Gateway to Recovery.

As part of its goal to provide mentorship to junior investigators, NCARE's Pilot Project Core also selected and funded three new projects that are now in progress. The Pilot Project Core distributed a second call for Pilot Projects in the fall of 2019. Final



The Native-CHART team gathered for the annual meeting in Seattle, WA.

funding decisions will be made in spring 2020.

NAD RCMAR

In 2019, the first group of pilot project investigators in the NAD RCMAR (page 11) launched their pilot projects. The pilot projects are expected to be completed in the spring of 2020 and the junior investigators will turn their focus to learning how to write grants for the final six months of their training.

Over the course of 2019, the pilot project investigators gathered in Seattle, Washington, to meet with and update mentors on their progress. Mentors also provided feedback on the pilot projects at the meetings. Researchers from two other P4NH-affiliated centers funded by the National Institute on Aging and the National Institute on Minority Health and Health Disparities joined these meetings to increase collaboration and learning across all of our programs. Each meeting provided consultation time with mentorship teams and relationship building among junior investigators.

In early 2020, Drs. Robert Freishtat, Dedra Buchwald, and Spero Manson facilitated a grant-writing workshop in Seattle. The workshop was also open to IREACH faculty and postdoctoral fellows, and the University of Washington Alzheimer's Disease Research Center junior investigators. The NAD RCMAR program is currently selecting a new group of pilot project investigators who will start in September 2020.



NW HERON

a practice-based research network

In 2019, the Northwest Health Education and Research Outcomes Network (NW HERON) was launched. NW HERON is a practice-based research network with a focus on primary care clinics that offer health care to rural, tribal, and urban medically underserved communities. Its mission is to enhance the health and health care of residents of these communities in Washington and the region.

This network is a transdisciplinary and cross-departmental partnership at Washington State University comprises the Institute for Research and Education to Advance Community Health (IREACH), the Spokane Health Sciences campus, the Elson S. Floyd College of Medicine, and the Health Equity Research Center in the College of Arts and Sciences. NW HERON is focusing on collaborating with rural, tribal, and urban primary care practices to build an extensive and active practice-based network.

Over the past year we have established a diverse leadership team, disseminated a clinic-based survey to understand the most pressing issues in health care, and visited with leadership from clinics across Washington state. Other work included creating a profile for each county in the state and linking it to community needs. Much of this work was carried out by graduate and medical students who were participating in internships and completing their scholarly projects.

For more information about NW HERON, please contact nw.heron@wsu.edu.

The Native Center for Alcohol Research and Education

Pilot Project Program

The Native Center for Alcohol Research and Education (NCARE) Pilot Project Grant Program funds and fosters innovative research projects that focus on reducing the burden of alcohol use disorders (AUDs) in American Indian and Alaska Native communities. The secondary intent of the Pilot Project Grant Program is to support and provide mentorship to investigators during the development of their novel approaches to improving the lives of American Indian and Alaska Native people. Each year, the program provides funding for one or more proposals. The 2019 cohort of funded projects included *Pathways to Recovery Among Urban Alaska Native and American Indian People with Long-term Abstinence from Alcohol*, led by Dr. Kate Lillie (Athabascan); *Exploring Alcohol Use and Pregnancy among American Indian and Alaska Native Women*, led by Dr. Lucy Hebert; and *Real-time Breathalyzer Monitoring and Contingency Management for Alcohol Use in American Indian Women*, led by Dr. Ekaterina Burduli. To learn more about funded pilot projects or to apply, visit our website ireach.wsu.edu/ncare.

Pathways to Recovery Among Urban Alaska Native and American Indian People with Long-term Abstinence from Alcohol

An NCARE Pilot Project

Native people experience dramatic alcohol-related health disparities compared to the general U.S. population, yet at the same time have some of the highest rates of abstinence in the nation. Understanding how American Indian and Alaska Natives with a history of AUD achieved abstinence could inform development of culturally appropriate and effective interventions. However, data are sparse on AUD recovery in Native populations.

Principal investigator Dr. Kate Lillie will examine the experiences of American Indian and Alaska Natives recovering

from AUD with at least three years of alcohol abstinence in Anchorage, Alaska. As Alaska's most populous city with a large Native community representing all 229 Alaska Native tribes and many American Indian tribes, Anchorage is an ideal setting. The study will describe how American Indian and Alaska Native adults with AUD achieved recovery in the urban setting.

Dr. Lillie plans to conduct semi-structured, in-depth interviews with 20 American Indian and Alaska Native individuals to collect narratives of abstinence and recovery from AUD. The study will enroll participants across a wide range of tribes, genders, and ages.

She will also identify common patterns of experience, events, and resources that enabled urban Native adults with AUD to attain abstinence.

The study will result in an in-depth description of the range of strategies and supports that participants recount

in their recovery narratives, as well as themes of how urban participants attained meaningful and sustained AUD recovery.

The pilot project will result in important new knowledge about the AUD recovery process among urban Native people. The next stage of this research will be to use the pilot study findings to either culturally adapt an extant intervention or to develop a new one if none exist to address the needs identified in Dr. Lillie's project.



Dr. Kate Lillie

Dr. Lillie is a researcher at Southcentral Foundation in Anchorage, Alaska.

The Native Alzheimer's Disease Resource Center for Minority Aging Research

Over the next 25 years, it's projected that 35% of American Indians and Alaska Natives will develop dementia. To better understand the prevalence of Alzheimer's disease and related dementias in Native communities and address its impacts, P4NH established the Native Alzheimer's Disease Resource Center for Minority Aging Research (NAD RCMAR) with support from the National Institute on Aging. Our goals are to better understand how commonly Alzheimer's disease and related dementias occur, and to address the impact of these devastating conditions in urban and rural Native communities across the country.

There is limited information available on Alzheimer's disease and related dementias in American Indian, Alaska Native, Native Hawaiian and Pacific Islander people. In addition, life expectancies for Native populations have improved over the past few decades by as much as 30 years, which has resulted in a tripling of the Native population aged 65 and older. This confluence of perceived need, high risk, and limited data motivates the research conducted through the NAD RCMAR.

The center promotes advances in research and increases the number of independent underrepresented minority researchers, with an emphasis on Native faculty who can address the health and well-being needs of Native elders and improve health disparities.

The NAD RCMAR funds social and behavioral pilot studies that advance the field through its Research Education Program, which provides early- to mid-career investigators the skills and mentorship to further Alzheimer's disease research. The program is an 18-month research training program in which investigators complete both a pilot study and a grant proposal. The goals of the pilot studies are to encourage junior investigators and those new to the field to pursue research on Alzheimer's and related dementias and health disparities.

For a full description of the program, funding eligibility, grant activities, currently funded projects, and to apply for funding, visit ireach.wsu.edu/nad-rcmar or contact nadrcmar.ireach@wsu.edu.

Outreach and Community Impact

In 2019, P4NH conducted hundreds of Community Health Needs Assessments at community events.

Community Outreach

Each year, the P4NH Outreach Team attends three major community events: one state, one region, and one nation-wide. In 2019, the Outreach Team traveled to New Mexico, California, and throughout Washington state to attend community events and conduct health needs assessments that will be used to inform future research topics. At each event, P4NH staff also provided materials to attendees with information about Native health topics and our research.

In April 2019, P4NH staff attended the largest powwow in North America, **Gathering of Nations**, in Albuquerque, New Mexico. In October, the P4NH Outreach Team traveled to Newhall, California, to attend the regional event, **Hart of the West**.

In our home community of Seattle, Washington, outreach staff attended the **Seafair Powwow**. P4NH has attended this event and hosted an information booth for several years. We look forward to continue connecting with community members at the annual event.

Co-director Dr. Ka'imi Sinclair also attended the **Affiliated Tribes of Northwest Indians Health Conference** in Spokane, Washington, to

share the work being done at P4NH.

Throughout 2019, outreach staff traveled to numerous events in communities across Washington state including the Muckleshoot Indian Relay Races in June and the Omak Stampede in August.

P4NH Events

In collaboration with the University of Washington's Alzheimer's Disease Research Center, the Art of Alzheimer's, and Seattle's Department of Neighborhoods, P4NH hosted a storytelling event, **Wisdom from Our Elders**, on August 8, 2019, with Jamestown S'Klallam elder Elaine Grinnell. Ms. Grinnell shared stories about Indigenous Aging, a topic at the center of our research.

In 2019, center grants funded through P4NH began offering webinars on topics relevant to Native health with experts in the field. Each event is free and open to the public. Recordings of past webinars are available on the P4NH YouTube channel and website.

Our Outreach Team also facilitates workshops about Native health. If you are interested in scheduling a workshop for your organization, please contact p4nh.info@wsu.edu.

Selected 2019 Publications

Native Hawaiian and Pacific Islander Health

- McElfish PA, Rowland B, Riklon S, et al. **Development and Evaluation of a Blood Glucose Monitoring YouTube Video for Marshallese Patients Using a Community-Based Participatory Research Approach.** Policy, Politics, & Nursing Practice. 2019;20(4):205-215.
- McElfish P, Purvis A, Esquivel R, et al. **Diabetes Disparities and Promising Interventions to Address Diabetes in Native Hawaiian and Pacific Islander Populations.** Current Diabetes Reports. 2019;19(5):1-9.
- Sinclair KA, Pritchard D, McElfish PA. **An Intersectional Mixed Methods Approach to Native Hawaiian and Pacific Islander Men's Health.** Asian American Journal of Psychology. 2019;10(3):268-281.
- American Indian and Alaska Native Health**
- Hirschak KA, Herron J, Murphy SM, et al. **Assessing the Interest and Cultural Congruence of Contingency Management as an Intervention for Alcohol Misuse Among Younger American Indian Adults.** American Indian and Alaska native mental health research (Online). 2019;26(3):38-57.
- Shibata D, Suchy-Dicey A, Carty CL, et al. **Lifestyle Risk Factors and Findings on Brain Magnetic Resonance Imaging of Older Adult American Indians: The Strong Heart Study.** Neuroepidemiology. 2019;53(3-4):162-168.
- Zamora-Kapoor A, Sinclair K, Nelson L, Lee H, Buchwald D. **Obesity risk factors in American Indians and Alaska Natives: A systematic review.** Public Health. 2019;174:85-96.

The Strong Heart Study

- Cholerton B, Omidpanah A, Verney SP, et al. **Type 2 diabetes and later cognitive function in older American Indians: The Strong Heart**

Study. International Journal of Geriatric Psychiatry. 2019;34(7):1050-1057.

- Muller CJ, Alonso A, Forster J, et al. **Stroke Incidence and Survival in American Indians, Blacks, and Whites: The Strong Heart Study and Atherosclerosis Risk in Communities Study.** Journal of the American Heart Association. 2019;8(12):e010229-e010229.
- Muller CJ, Noonan CJ, MacLehose RF, et al. **Trends in Cardiovascular Disease Morbidity and Mortality in American Indians over 25 Years: The Strong Heart Study.** Journal of the American Heart Association. 2019;8(21):e012289-e012289.
- Shibata D, Suchy-Dicey A, Carty CL, et al. **Vascular Risk Factors and Findings on Brain MRI of Elderly Adult American Indians: The Strong Heart Study.** Neuroepidemiology. 2019;52(3-4):173-180.
- Shibata D, Suchy-Dicey A, Carty CL, et al. **Lifestyle Risk Factors and Findings on Brain Magnetic Resonance Imaging of Older Adult American Indians: The Strong Heart Study.** Neuroepidemiology. 2019;53(3-4):162-168.
- Suchy-Dicey A, Shibata D, Cholerton B, et al. **Cognitive Correlates of MRI-defined Cerebral Vascular Injury and Atrophy in Elderly American Indians: The Strong Heart Study.** Journal of the International Neuropsychological Society: JINS. 2019:1-13.
- Verney SP, Suchy-Dicey AM, Cholerton B, et al. **The Associations Among Sociocultural Factors and Neuropsychological Functioning in Older American Indians: The Strong Heart Study.** Neuropsychology. 2019;33(8):1078-1088.

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