

AMERICAN INDIAN *Living*

REST.

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*For
That?*

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Get Out of the

Fast Lane

Letter from the Publisher

Welcome to *American Indian Living*. This publication is the result of active working relationships with several American Indian associations of tribes and national tribal organizations.

It is very important to understand the relationships and priorities that have brought us together. The Seventh-day Adventist Church has a health message that has proven effective against diabetes and many other health issues. Researchers outside the church membership have documented the longer life span of the average Seventh-day Adventist and the value of the church's health message.

American Indians who are Seventh-day Adventist church members began sharing the health message through Native Ministries. Youth diabetes camps were started, and screening programs, nutrition programs, suicide prevention programs, and American Indian tribal leaders were given permission to copy the protocol of the Lifestyle Center of America in their war on diabetes. This magazine demonstrates a commitment to share health principles which can bring healing to Nations. We want to save feet, lives, and cut healthcare costs for tribal communities. Several years ago it became a choice for me to raise funds for more dialysis machines or so that fewer people would need the machines. I decided to work with tribes to lower health care costs and save feet and lives.

A major ongoing concern for all of us is the spiritual heart of this healthy working relationship. American Indians are very spiritual people. In fact, things I love the most about our culture are the common belief that the Creator gave us a beautiful and bountiful earth and then put us in charge of taking care of it; that land is not for ownership; and that while we are great warriors, we have hearts of friendship, compassion and integrity. Every tribal meeting I attend, large or small, begins with prayer. So how does a Christian organization work with Tribal Nations? We have many common beliefs. Seventh-day Adventist doctrine is non-compromising with the written word, the Bible. When clearly read, the similarities to original tribal beliefs and diet are amazing. Loma Linda University Medical Center, the Seventh-day Adventist international hospital in Loma Linda, California, has a wing built for American Indians by American Indians.

Seventh-Day Adventists believe Jesus is the Son of God and the Creator (John 1:1). His life on earth was one of meeting people where they were in life and bringing health and healing to the body and spirit. American Indian Seventh-day Adventists strive to practice the same heart. Having said all this, please know that this working relationship is not an endorsement by tribal leaders or associations for evangelism by the church.

It is not the intent of the magazine to persuade Indian Country to become Seventh-day Adventist church members. The intent is to learn from tribal leadership the most impacting health struggles in Indian Country and to work with the tribal health officers and council members, promoting the best practices and lifestyles to bring about healthier Indian communities. This includes winning the war against suicide, drugs, and destructive forces which destroy families and create lives of depression. These things destroying our communities are not our history; they are not our legacy as a people; and they should not be our future. We agree, it is not what the Creator wants for us as a people or individuals.

We began this magazine with Creation Health, a healthy lifestyle tool created for Disney by the Seventh-day Adventist Health System and Florida Hospital, the primary Seventh-day Adventist hospital in Florida. In future issues we want to feature success programs Nations, and health ideas for youth, veterans, and many other sectors in Indian Country.

We hope you will support this united effort to better our communities by sharing this magazine and listening to *American Indian Living* on a radio station near you.

ne' sgeñ-noñ' naesaihiyosdik goñdahgwiñ



Robert Burnette
Executive Publisher

American Indian Living magazine is a bi-annual publication whose content is designed to enhance the health and wholeness of the indigenous populations of North America. It is published by the Health Ministries Department of the Southwestern Union Conference of Seventh-day Adventists in collaboration with the Assembly of First Nations and the National Congress of American Indians.

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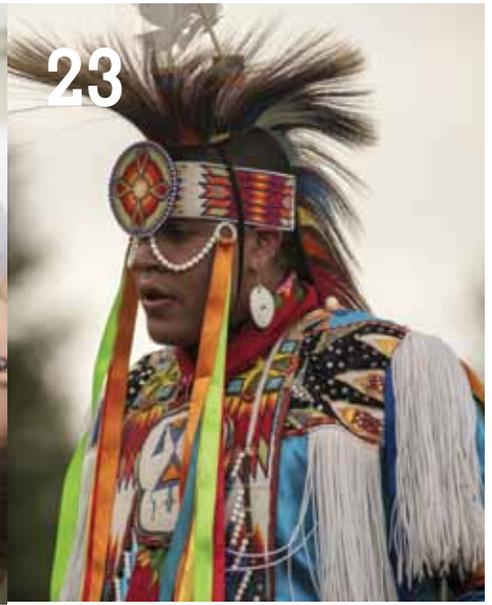
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Get Out of the FAST LANE

We Live with
Stress, But
We Don't
Have to Die
From It

BY DES CUMMINGS, JR., PH.D.

Doctor, the helicopter is landing. We're ready to transport Mrs. Young."
"But I'm not having a heart attack," Vanessa protested. "I can't be having a heart attack. There's no history of heart disease in my family."

The doctor's calm response downplayed the anxiety that stalked his mind. "We're just going to fly you down to the main hospital and run some tests to make sure." Faith Flight One—Florida Hospital's emergency cardiac transport helicopter—rose from the pad for the ten-minute flight for life. Vanessa had no idea of the gravity of her situation.

She was a high-energy executive for a national public relations firm with responsibilities for sales in the southeastern US. She didn't have time for this unnecessary diversion from critical work. She considered herself to be health-gifted with the right genes, right health habits—OK, *mostly*. She had grown up practicing the following health habits of people who have been scientifically proven to live the longest, and who are sometimes referred to as the All-Stars of Longevity.

Nutrition—she was a vegetarian for the most part

Excercise—as much as a traveling professional can work into a busy schedule

Environment—she had lived a smoke-free, drug-free life

Her family had a history of living into their nineties, and she intended to do the same. “I can’t be having a heart attack,” she stated emphatically, trying to make her point to the medical flight team even as the helicopter lifted off the pad.

The denial process continued until the tests revealed that “Van,” as her friends called her, had experienced a heart attack. Her physicians identified at least one significant culprit—not genes, not diet, not lack of exercise or smoking—but STRESS!

Rest-Oration

Van’s return to heart health would require replacing unhealthy stress with healthy rest of the spirit, mind, and body. In a word, she needed restoration.

Her plan began by renewing her commitment to experience a weekly day of rest, the Bible where it describes the seventh day of creation. This is a strategy that world-renowned longevity researcher Dan Buettner identified as the number one health secret you can learn from the All-Stars of Longevity. In his bestselling book *The Blue Zones*, he gives the following advice about taking a break once a week or observing a weekly Sabbath, as the seventh day of the week is referred to by Seventh-day Adventist Christians.

“Create a sanctuary in time, a weekly break from the rigors of daily life. The 24-hour Sabbath provides a time to focus on family, God, camaraderie, and nature. Adventists claim this relieves their stress, strengthens social networks, and provides consistent exercise.”⁵

If there was only one health habit that I could emphasize, it would be to create your own sanctuary in time, a weekly vacation from life’s daily stresses, a time to relax and grow in love with your family.

Modern Living Requires A “Sanctuary In Time”

Stress is a normal part of everyday

living. Throughout our lives, all of us have varying degrees of stress. Stress can affect every part of us. There are healthy and unhealthy ways to deal with stress. Healthy ways of dealing with stress help us function efficiently and effectively. They help us think wisely and react quickly when the need arises, at home, at school, on the job, in traffic, and so forth.

Dealing with stress in unhealthy ways can result in non-productive anxiety, and it can lead to chronic stress. It can shorten our lives. Our modern generation is faced with numerous challenges and uncertainties more complex than any other generation. According to a recent survey taken by the Department of Labor, 75 percent of all Americans are constantly plagued by stress. Stress can express itself in the following ways:

Fear and Worry:

Following the September 11, 2001, attacks on the World Trade Center, Jonathan Steinberg, chief of cardiology at New York’s St. Luke’s-Roosevelt Hospital Center, led a study on New York City’s heart patients. He found that they suffered twice the usual rate of life-threatening heart arrhythmias in the months following the attacks. Steinberg observed, “These patients experienced potentially fatal events, even though many of them had trouble identifying themselves as unduly fearful.”

Threat Level:

In the present day global world, Americans have been at a high threat level for so long that perhaps in order to function, we have repressed our anxiety, but whether it is hidden or not, it affects us! The fact that we are experiencing a concurrent epidemic of stress and cardiovascular disease in America is not a coincidence! Dr. Carol Scott wrote:

The heart blood vessels are particularly sensitive to acute and

chronic stress. With every beat, the heart not only pumps blood, but transmits complex patterns of neurological, hormonal, pressure, and electromagnetic information to the brain and throughout the body. The heart is uniquely positioned as a powerful communication hub that connects the body, mind, emotions, and spirit. There is an elaborate feedback network of hormones, chemicals, and nerves that exist among the brain, the heart, and centers of thoughts and emotions. The heart sends the brain messages that affect our perceptions, our mental processing and our feelings. It’s no surprise, then, that there is a strong connection between stress and cardiovascular health.

Financial:

During the years 2008-2010 the recession had a great impact. According to an Associated Press poll, 46 percent of the people surveyed said they were suffering from debt-related stress.

Sleepless in America:

Americans are chronically ill with sleep disorders. Sales of prescription sleep aids have jumped 60 percent since 2000 (with a startling increase among people aged 18-24). The average American is functioning with 90 minutes less sleep than they need for healthy living.

Lack of sleep can do more than make you cranky; it can shorten your lifespan.

Research scientists from the UK’s University of Warwick recently reported their study of 470,000 people from eight countries and found that the demands of the modern workplace and family are taking a toll. The risk of heart disease can increase as much as 48 percent and the risk of stroke by 15 percent when a person regularly does not get at least six hours of sleep. The researchers found that chronic sleep shortages

produce hormones and chemicals in the body that increase the risk of cardiovascular disease.

Always “On” Multitasking: You were not made for a “24/7 always on” multitasking environment. MIT Professor Sherry Turkle studies the impact of technology on our daily lives. “Technology promises to let us do anything from anywhere with anyone. But it also drains us as we try to do everything everywhere. We begin to feel overwhelmed and depleted by the lives technology makes possible.”⁹

“We must ruthlessly eliminate hurry from our lives,” was the advice that John Ortberg got from a wise friend. Hurry makes you skim life instead of really living it. You never go deep into any experience; a moment of reflection is interrupted by a text message or a schedule alert. Multitasking means you are living several experiences at the same time, under the illusion that more is better as you exchange peace for pace.



Seven Ways To Find The

1 MEDITATE—

Worry and anxiety often stand between us and real rest and health. Instead of becoming upset while waiting in traffic, talk with your Creator and meditate on positive thoughts. One paraphrase of Philippians 4:6–7 says: “There are some great things to think about, even though the world around us is so evil. Things that are true and good, lovely and honest, just and pure—these are the kind of thoughts that deserve your focus. Dwelling on these thoughts will produce mental and spiritual health and overall well-being in your life.”

2 SLEEP—

Develop a regular sleep pattern. If you are sleeping less than seven to eight hours nightly, you are cheating yourself. Trying to catch up on sleep doesn’t help. Here’s how to get those restful “ZZZ’s”: exercise daily; reduce caffeine intake, especially late in the day; reduce alcohol consumption; avoid eating large meals late in the day; and adopt a relaxing bedtime routine, something that prepares you for sleep, such as devotional reading or listening to soft music.

3 BREATHE WELL—

Proper breathing can help you relax. Try this: start from the very bottom of your lungs and breathe in slowly through your nose. Count slowly to five while inhaling. Then exhale through tight lips twice as long as you inhaled. Allow your head to drop toward your chest as you exhale, relaxing the back of your neck. Repeat this exercise four or five times until you notice your breathing is slowing down.

4

IMAGINE—

Take twenty-second (or longer!) mental vacations. Imagine yourself wandering through Yosemite National Park, walking along a white-sand Hawaiian beach, or browsing antique shops in Pennsylvania. By taking time “away” you will “resettle” or “re-sync” your mind and be able to face your day with renewed energy.



You are spurred on by the fear that you may be missing something. The moments of pause when you could relax and refresh are replaced by the compulsive urge to check your messages, text someone, or make a call. The frenetic pace of technology has not released you but enslaved you to living heads-down looking at a screen versus heads-up looking to the sky, the mountains, the soaring of the birds, and the refreshing of your spirit. Even your time of reflection becomes rushed. The problem is that rest is not instant like coffee; it takes time to settle down and live. You wonder why you feel like you have skimmed life; reacting to many things superficially with shorthand living and living few things with all your being. I invite you to assess your rest. It could change your life. It certainly did for my wife and I.” ■

This article was excerpted from 8 Secrets of a Healthy 100 (pages 41-45) by Des Cummings, Jr., Ph.D.

Rest You Need

5

TAKE A VACATION—The average American worker feels that his workload doesn’t allow for the luxury of a vacation. It is no wonder that we are living unhealthy, unbalanced lives because a balanced, healthy life includes regular time off. No, not just an occasional day here and there—even though those are helpful—but the “I went fishing in the Keys for two weeks” kind of vacations. Studies show that our bodies need several days to unwind from the stress of everyday life. Then we need several days after that for true rest to occur. Start planning your next vacation, a real one, without cell phones, computers, and other work. Get away. Play. Rest.



7

REST WEEKLY

The word “Sabbath” comes from the Hebrew word transliterated shābath (to cease or to rest). When we leave behind our normal routine and spend a full day with the Creator and with family and friends, it’s amazing how ready we are to tackle another week. Spend portions of this day reading the Bible and praying, enjoying nature, visiting a nursing home, and going to church. Keep some devotional books handy and learn to journal. Rest your body, your mind, and your soul.

6

LAUGH—The Old Testament book of Proverbs says that a cheerful heart is good medicine, but a crushed spirit dries up the bones. Another way of saying this is that laughter is the best medicine. When we laugh—especially those laughs that start in our toes and don’t stop until they reach the top of our head—our blood pressure goes down, our muscles relax, and our brain releases chemicals (endorphins) that make us feel better.



Rating Your Rest Habits

A SELF-SURVEY

Do you find that you regularly have to jump-start your brain in the morning or afternoon with any of these stimulants?

- Caffeine (*coffee, tea, soda, other*)
- Sugar (*doughnuts, candy, chocolate, etc.*)
- Medication

Do you lose concentration often? If so, how do you refocus?

- Take a nap
- Take a brisk walk
- Just live with it

Do you experience any of the following symptoms of fear daily?

- Worry
- Anxiety (*general sense of stress*)
- Panic

What “hurry disease” symptoms do you experience daily?

- Multitasking (*driving, eating, talking on phone—all at same time*)
- Over committing yourself (*trying to cram too many things into a day*)
- Being crisis-driven (*other people running your life; it is out of control*)
- Being emotional (*overreacting to small things*)

What is your sleep pattern?

- I don't get enough sleep
- I don't sleep deeply
- I can't sleep

Does your life follow a pattern of overwork?

- I work 60 or more hours a week
- I feel guilty for neglecting my family
- Others tell me that my life is out of balance

Take a separate sheet of paper and honestly answer the following questions:

- » *How many hours of sleep do you believe you need?*
- » *How are you going to reshape your priorities to achieve this goal?*
- » *How much time each day do you want to spend with your family?*
- » *How are you going to reshape your priorities to achieve this goal?*
- » *How much time each day do you want to spend with God?*
- » *How are you going to reshape your priorities to achieve this goal?*
- » *How do you want to respond to God's invitation for a full day of rest each week?*
- » *How are you going to reshape your priorities to achieve this goal?*

This survey is adapted from CREATION Health Discovery (Orlando, Florida: Florida Hospital Publishing, 2008). Used by permission. All rights reserved.



REST.

Is There An App for That?

BY ED DUNN, PH.D., M.P.H.

I've put together some items you can “click” on and then apply them to your life. Hopefully, they will result in an improved restful experience for you and your family. Our Creator made us and put us on the earth where we have light from the sun, which we call day. He also made the moon and stars to watch over the night. The Creator put into our bodies the ability to be in sync with the day and night cycles. During the day our bodies want to be up and active and enjoying life, while at night we get drowsy and begin thinking about a place to rest. During

the night while sleeping our bodies repair and rejuvenate for the next day's activities.

As an Elder, I like to tell stories of the past. I was raised on a farm in Northern Canada and I learned to work hard, but during the summer when the work was done we would take a break and go swimming. That was a refreshing change, which was a rest, and an enjoyable one at that. You see, rest can come in many forms.

Role of Language & Culture in Achievement and Wellness

Tribal leaders have consistently emphasized the importance of Native languages and culture in supporting healthy citizens and communities. The National Native Youth Cabinet has also identified this as a priority. While there is research evidence that culture has a significant and important impact on achievement and wellness, there is more research needed to demonstrate the value of Native languages and cultures in school achievement and on health outcomes.

Source: NCAI Policy Research Center

Another example of a rest is when it rained on the farm and we couldn't bale the hay, so we would travel two hours up to Grandpa's tourist camp, called "Indian Lodge". My Grandpa would be so glad to see us. He would say, "Do you want some ice cream? I have the ice, if you have the cream." We always brought cream from our farm and Grandpa would say, "Ok, run down to the ice house and bring some ice and I'll make ice cream for you." He had one of those hand-operated ice cream makers that you have to pack the ice and salt around so it freezes the cream. That was a real treat and also a welcome rest for us, an enjoyable break from daily routine.

I like to sleep when I am sleepy, but the problem is, I'm not always sleepy at the right time. Do you know what I mean? Learning to take seriously our need to rest is a real challenge in this busy society that we live in. Listed below are some things that may affect our ability to rest.

1. Mental Health: We must take time to care for our bodies *and* our minds. As we cooperate with the day and night cycles, such as going to sleep at 9:30 p.m. in the evening and waking up about 6:00 a.m. in the morning, we will feel more refreshed and mentally alert. According to researchers, we need between 7-8 hours of sleep. Things like staying up late at night watching screens (TV, computer, cell phone, etc.) can stimulate our brains to be

overactive at a time when we should be slowing down. This disturbs our sleep quality. Another way to rest our mind is to go for a walk in nature when the busy multi-tasking, caring for children, studying, etc. becomes too stressful. You will be surprised by how good you feel after taking a short walk. Your short-term memory will also work better when you get the proper amount and quality of sleep.

2. Naps: Napping at the wrong time of day can disturb our nighttime sleep. For you older adults, if you must nap, take your nap before lunch; then it won't interfere with your night's sleep.

3. Physical Health: Our Creator made us for action, and if we occupy the couch in front of the TV for very long it will affect us. You should get plenty of exercise—at least 30 minutes a day. Your body's immune systems will be 3-5 times stronger when you get adequate sleep. A little time in the sunshine every day will help give you a restful attitude.

4. Foods: Kiwifruit have been shown by researchers to improve sleep onset, duration, and quality. Eating a lighter meal in the evening can result in more restful sleep at night. Moving toward a plant-based diet can also improve your over-all health. Some have found that a different kind of rest is beneficial, such as fasting for one meal or one day per week or per month. Do your best to stay away from fast foods.

5. Spirituality: Rest for your soul is a good thing. We should take time to read and meditate on our Creator and how we are cooperating with Him in life. Listening to calming music will also help give us a peaceful and refreshing spirit.





6. Social Health: Take a break and show someone else that you care. It will make you feel rewarded and refreshed. Depressing, negative, and suicidal thoughts can be more easily resisted if we take time to visit and care for each other. You could do a community service project and enjoy making a difference helping others.

7. Community Health: Talk to your friends about volunteering and develop a project that will benefit your

community. It doesn't have to be a big expensive project, but one that will involve community members doing uplifting things for your community. You will be rewarded with a wonderful sense of accomplishment.

8. Restoring our Culture: Explore ways to restore our Native heritage and identity, and it will make our future generations proud. This can be a powerful means of accomplishing a rest and security.

I remember one of our restful traditions during the later part of

the summer was when our family would travel into the bush to pick blueberries. We always really looked forward to these restful times when we could be out in the bush with the animals and nature to pick the food that our Creator provided. However, after the first day of picking berries, it too, began to feel like work.

Take time to relax and rest. Reward yourself; you deserve it. ■

Ed Dunn is an Elder of the Mississauga Ojibwa First Nation in Ontario, Canada. He has a Ph.D. and M.P.H.



How to Help

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Get More Rest

BY WALT LARIMORE, M.D., AND SHERRI FLYNT, M.P.H., L.D.

In order to grow healthy and strong, most kids require at least nine hours of sleep a night. Whatever you have to do to reach this goal, do it. You're the parent. You're the family's healthcare quarterback. Make a plan that works, and use it. You might find the following suggestions helpful.

First Kids 1st:

Every Child Is Sacred

The health and well-being of our communities is dependent upon the health and well-being of our children. First Kids 1st will guide NCAI and our partners, the National Indian Child Welfare Association, National Indian Health Board, and National Indian Education Association, in our ongoing efforts to improve the well-being of our children and families.

The First Kids 1st areas of focus are: Healthy Lifestyles, Safe and Supportive Environments, Successful Students, and Stable Communities. We have a collective responsibility to advocate for policy change and services that facilitate these outcomes for our children. We each also have an individual responsibility to be caring and supportive adults in the lives of the children we know.

This shared vision is for all children, but focuses on young adults, those youth who have struggles, and those who have some successes, because for us *every child is sacred*. We are making the commitment to let Native youth know they are sacred to us. As we move the initiative forward NCAI and our partners will be sharing ways in which the tribes and Native citizens can get involved.

We can't do this alone. We all own this responsibility. Through First Kids 1st, NCAI, and our partners will be providing tools, trainings, and materials for individuals, tribes, communities, and national organizations to make a difference for our Native youth. An example of existing work in this area is our partnership with the Boys & Girls Clubs of America to implement the Native Youth Resiliency Project in 2013.

CUT OUT THE CAFFEINE

Did you know that caffeine can have a functional half-life of six hours in kids? In other words, half of the caffeine children ingest at 3:00 p.m. will still be circulating in their system at 9:00 p.m., and a quarter of the caffeine will still remain in their system at 3:00 a.m. the next morning! Caffeine keeps them awake, so if you want your kids in bed by nine o'clock, you've got to cut off the chocolate and sodas and cocoa (and anything else with caffeine in it) by 3-4:00 p.m.

PULL THE PLUG

One study recommended that TVs and computer monitors be turned off at least thirty minutes before a child goes to bed, because the type of light emitted by a TV screen or computer monitor stimulates the child's brain and prevents the child from getting ready for sleep. In addition, kids who play video games or watch television shows that feature extreme action scenarios right before bed have much more activated reticular systems; they're going to have a tougher time falling asleep. Just like you, a child needs time before bed to think, relax, and get ready for sleep.

SET AND ENFORCE BEDTIME AND WAKEUP HOURS

Children need to have regular bedtime and wakeup hours. Before bedtime, it's necessary to remind them periodically as it gets later that bedtime is coming. For example, if their bedtime is 10:00 p.m., you might start at 9:15. with, "It's 9:15. Lights out in 45 minutes," followed by a reminder at 9:30 and another at 9:45, if needed. This will work better than telling them at 9:59 p.m., "Hey, you have to be in bed in one minute!" Exceptions are allowed as needed, of course. But the routine itself is important and should be established with each child as early as possible.

What if your child isn't used to a bedtime or wakeup routine? Then it may be best to begin by employing little steps. Consider wakeup time, for example. You might start by getting the child up at 7:30 a.m.; the next month, you get him up a half hour earlier, at 7:00 a.m.; and the next month you reach your target at 6:30 a.m. Set explicit, reasonable expectations, and then enforce them.



ESTABLISH A REGULAR FAMILY SCHEDULE

Beyond bedtime and wakeup times, a regular family schedule does wonders for a family's health. Children gain comfort and security from established routines and traditions. A consistent, healthy schedule tends to improve feelings of security and well-being. Also, a family schedule helps kids to eat better; they know the times to expect breakfast, lunch, snacks, and dinner. This is critical.

USE THE ANSWERING MACHINE

Modern life wouldn't be the same without the telephone—but during dinner or after a set time at night, don't answer it. Let the answering machine earn its keep. When your kids are growing up, we suggest you take no non-emergency phone calls after a certain time at night. As the children move into upper elementary and high school, establish a phone curfew that applies to everyone; for example, no non-emergency calls after a specific time of night. Apply this same rule to cell phones, texting, and e-mailing. If the phone rings during dinner or after that time, and it's not an emergency, let the answering machine get it. Give your children the message that they are more important to you than any call. Whatever it was, it can wait. ■

Adapted from SuperSized Kids, by Walter Larimore, M.D., and Sherri Flynt, M.P.H., L.D. (New York: Center Street / Warner Books, 2005). Used by permission. All rights reserved.

NCAI Youth Commission

Established in 1997, the NCAI Youth Commission provides a voice for Native youth on a national level. The Youth Commission empowers young Native leaders to make a difference in their communities and use their experiences to advocate and highlight the priorities of Native youth. The Youth Commission presents a unique opportunity to learn from tribal leaders, develop a deeper understanding of the work of NCAI, and get to know the governance systems of tribal nations. Most importantly, the Youth Commission is a mechanism for achieving a unified voice for all American Indian and Alaska Native youth.

The Youth Commission offers opportunities ranging from mentoring and leadership training to volunteer opportunities and appointments to engage with policymakers. The Youth Commission facilitated youth tracks at the Annual Convention, Executive Council Winter Session, and Mid-year Conference. During Annual, the Youth Commission outlined goals and focused on building internal capacity and leadership development throughout the year. Additionally, the Youth Commissioners and youth attendees heard from representatives of national Indian organizations, federal agencies, and the private sector. These meetings and trainings are interactive, informative, and educational. The youth especially enjoyed a training focused on successful tribal governance. These opportunities provide hands-on information for the youth to share with their own communities and youth councils.

Kristen Sally Dosela, Co-President - Gila River Indian Community

W. Alex Wesaw, Co-President - Pokagon Band of Potawatomi Indians

Jaymee Moore, Co-Vice President - Colorado River Indian Tribe

Chad Martinez, Co-Vice President - Tohono O'odham Nation

David Colbert, Treasurer - Muscogee (Creek) Nation

Jarred Winchester, Secretary - Pokagon Band of Potawatomi Indians

Skyler Bourdon, Member-at-Large - Ho-Chunk Nation

Alyssa Garcia, Member-at-Large - Ak-Chin Indian Community

Jared Massey, Member-at-Large - White Mountain Apache

The Rest

BY PATRICIA HUMPHREY

Wake up, Sleeping Beauty,” my husband said gently one morning as he attempted to nudge me into consciousness. “Um hmmm,” I responded, and then rolled over to savor my last few moments of precious sleep. I simply dreaded having to get up. While I don’t consider myself a night owl, I’m not

exactly a morning person either. Getting up during the “wee hours” just isn’t my favorite thing to do. And I don’t know how it is with you, but the days on which I am sleep deprived don’t go down in history as some of my better days. Not only do I yawn constantly, but my mood, my energy level, even my thought processes—

all are affected when I don’t get my full quota of Zzzs. I’ve always known intuitively that I need adequate sleep in order to function at my best, but lately I’ve made some surprising discoveries about the benefits of a good night’s rest and the serious health consequences of losing sleep.

Of The Story

Sleep—It's More Important Than You Think

In the National Sleep Foundation (NSF) 2011 Sleep in America poll it was suggested that the average adult needs 7.5 hours of sleep, but only 35 percent are getting what they need. The poll also revealed that 52 percent of participants admitted that they have driven a vehicle while drowsy. The study found that sleep-deprived Americans are coping by drinking three 12-ounce caffeinated drinks per day and taking regular naps.

Merriam-Webster's Collegiate Dictionary (11th edition) defines sleep as "the natural periodic suspension of consciousness during which the

powers of the body are restored." Sleep allows the body to recharge and rejuvenate. It is essential to good health and, without it, our bodies would not be able to function. Sleep also has other benefits. For example, getting more sleep helps improve your memory. According to an article in *US News & World Report*, a study at Massachusetts Institute of Technology (MIT) confirmed that sleep is essential for the storage of long-term memories.

"Our work demonstrates the molecular link between post-experience sleep and the establishment of long-term memory of that experience," study author Susumu Tonegawa, Picower Professor of Biology

and Neuroscience, said in an MIT news release. "Ours is the first study to demonstrate this link between memory replay and memory consolidation. The sleeping brain must replay experiences like video clips before they are transformed from short-term into long-term memories."



Sleep Deprivation Can Hurt You

But if that's not enough to convince you of the importance of a good night's rest, keep reading. Such conditions as heart disease and high blood pressure have been linked to a lack of sleep. A 2009 study published in the journal *SLEEP*, reported that sleep-deprived women are at greater risk for developing heart disease than men. Women who slept five hours or less displayed an increase in inflammatory markers known as high-sensitivity C-reactive proteins, which are commonly associated with cardiovascular disease. The study, which was conducted at Warwick Medical School in England, consisted of 4,600 participants, 73 percent of whom were men. Researchers determined volunteers' sleep duration using questionnaires and followed up with a general health screening exam. Michelle Miller, lead author of the study, said in a statement, "Short sleep is associated with an increase in cardiovascular risk and that association between sleep duration and cardiovascular risk factors is markedly different in men and women."

Other studies indicate that a lack of sleep affects not only the heart, but the mind as well. According to Mark Mahowald, a professor of neurology at the University of Minnesota Medical School, "One complete night of sleep deprivation is as impairing in simulated driving tests as a legally intoxicating blood-alcohol level." (Franklin Institute

Online at www.fi.edu/brain/sleep.htm.)

Other recent studies have shown that sleep helps sustain the functioning of the immune system, and that chronic loss of sleep causes damage to the immune system. The National Center for Biotechnology Information reported that severe sleep loss jolts the immune system into action in a way that is almost the exact same immediate response shown during exposure to stress. "Future research will reveal the molecular mechanisms behind this immediate stress response and clarify its role in the development of diseases associated with chronic sleep loss," said Katrin Ackermann, Ph.D., the study's lead author.

Now here's an interesting tidbit you possibly never considered: If you're struggling with a weight problem, your answer could be to change your sleeping habits. The American Heart Association's Epidemiology and Prevention/Nutrition, Physical Activity and Metabolism 2012 Scientific Sessions reported that if you don't get enough sleep you may eat too much and be more likely to become obese. The group in the study who slept one hour and 20 minutes less ate 549 more calories each day, and they did not burn those extra calories.

A recent study published in the journal *SLEEP* found that extreme sleep duration is related to the increase of abdominal fat in persons younger than 40 years old. Researchers found that persons who slept five hours or less at night gained more abdominal fat over a five year period, versus those

who slept more than six hours per night.

All this represents just a sampling of the more than 20,000 studies on sleep conducted by researchers over the years. Scientists are continually making new discoveries about the value of getting a good night's rest. Diabetes, insulin resistance, depression, impaired sexual functioning, and proneness to injuries, researchers say, are also some of the many conditions associated with a lack of sleep.

Rest Versus Sleep

But getting eight hours of shut-eye in the prone position is only one way of helping to restore our bodies. Remember the definition of sleep mentioned earlier? Though we often tend to equate one with the other, there is actually a difference between sleep and rest. Here's how Webster defines rest: "a bodily state characterized by minimal functional and metabolic activities. To cease from action or motion: refrain from labor or exertion. To be free from anxiety or disturbance." In other words, when we're resting, we're not necessarily unconscious, but we are taking time out for a change of pace, to slow down, and to take a break from the hustle and bustle and stress of our normal workday activities.

Think about it. Have you ever had one of those days when you were going nonstop from the moment you woke up until you literally collapsed into bed at night? I sure have. Imagine

GET A GOOD NIGHT'S REST

According to Milton Crane, M.D., and Barbara Crane, R.D., formerly of Weimar Institute, insomnia—having difficulty going to sleep—is the most common sleep disturbance today. Here’s what they suggest for dealing with mild insomnia:



▶ Go to bed and get up at the same time every day.



▶ Avoid caffeine.



▶ Don’t drink alcohol. It is not a good sedative despite what some recommend.



▶ Get regular exercise.



▶ Take a warm (not hot) bath or shower before bed.



▶ Keep your bedroom well ventilated.



▶ Spend time in quiet reflection and prayer.

if we were to carry on that way day after day. What do you think would be the result? We’d literally wear ourselves out, and eventually we’d become sick and die. One author compares that scenario to taking a battery-powered device and leaving it on until the battery is dead. He says that turning the device on for short periods and then turning it off for a while actually doubles the life of the battery. In the same way, rest lengthens our life span.

Some experts recommend taking a 20-minute daytime nap as a way of refreshing the brain and the body. A study of Japanese men found that a 20-minute nap improved their performance level and self-confidence. I once had a colleague at work who would actually close his office door for 30 minutes every day, stretch out on the floor, and take a snooze. At the time I thought the practice was rather strange, but in light of recent research, I believe he was actually a step ahead!

Rest: An Ancient Concept

Though research continues to shed light on the importance of rest, the idea is as old as time itself. The Bible, in both the

Old and the New Testaments, advocates the concept of rest. In Matthew 11:28 (NKJV) Jesus gave a refreshing invitation when He said, “Come unto me all you who labor and are heavy laden and I will give you rest.” And in Jeremiah 6:16 God promises that if we walk in the “old paths” we will find “rest for [our] souls.” Even as far back as the book of Genesis, the Bible says that “on the seventh day God ended His work which He had done, and He rested on the seventh day from all His work which He had done” (Genesis 2:2, NKJV). I’d like to think that God didn’t rest because He was tired, but to allow Himself time to reflect on and enjoy His handiwork! If it worked for Him, surely it can work for us!

The bottom line is, adequate sleep is essential to our health. If you’re still not convinced, try this little experiment: Start going to bed an hour earlier than usual, and, I guarantee, you’ll discover for yourself the rest of the story. I’m certainly up for the challenge. Are you? ■

Patricia Humphrey is editor of American Indian Living magazine, a certified wellness coach, and a frequent contributor to health magazines. This article was adapted from the March/April 2007 issue of Vibrant Life magazine.

THE CREATION HEALTH MODEL: 8 Principles for Healthy Living



Choice »

The first step toward improved health is making consistent healthy choices, which turn into habits and lead to lifestyle improvement.



Rest »

More than getting a good night's sleep, healing rest means making space in your day to relax, and taking a day once a week for restoration.



Environment »

We were made for a garden, but we live in a jungle. Environment is the space outside of us that affects what happens inside of us.



Activity »

There are three kinds of physical activity and three dimensions to physical activity. Combine them, and you're on your way to good health.



Trust »

Our faith, beliefs, and hopes affect our health. A trusting relationship with the Creator empowers and enriches every aspect of life.



Interpersonal Relationships »

Positive relationships contribute to good health, while toxic relationships can destroy it. So, seek to give and receive unconditional love.



Outlook »

Outlook not only colors how you look at life, but research suggests attitude can influence your health and even impact the progression of disease.



Nutrition »

Food is the fuel that drives your whole system. Eat for energy, eat for mental clearness, eat for long life. After all, your health is worth it.



NCAI Ensures Access to Quality Healthcare

Affordable Care Act

After years of advocating for reauthorization of the Indian Health Care Improvement Act, that Act was permanently reauthorized in 2010 as part of the Affordable Care Act (ACA). NCAI has continued to work with tribes and the Administration to ensure that implementation of the ACA is successful for tribes and tribal members. NCAI has worked with the administration and the Indian Health Service to implement the National Indian Health Outreach and Education (NIHOE) initiative. The NIHOE initiative was created to conduct outreach and provide education for tribes, tribal members, and tribal employers about the American Indian and Alaska Native benefits and protections under the ACA and the requirements and opportunities available to tribal employers. To further this goal, NCAI has conducted 18 ACA trainings and six webinars in the past year. ■

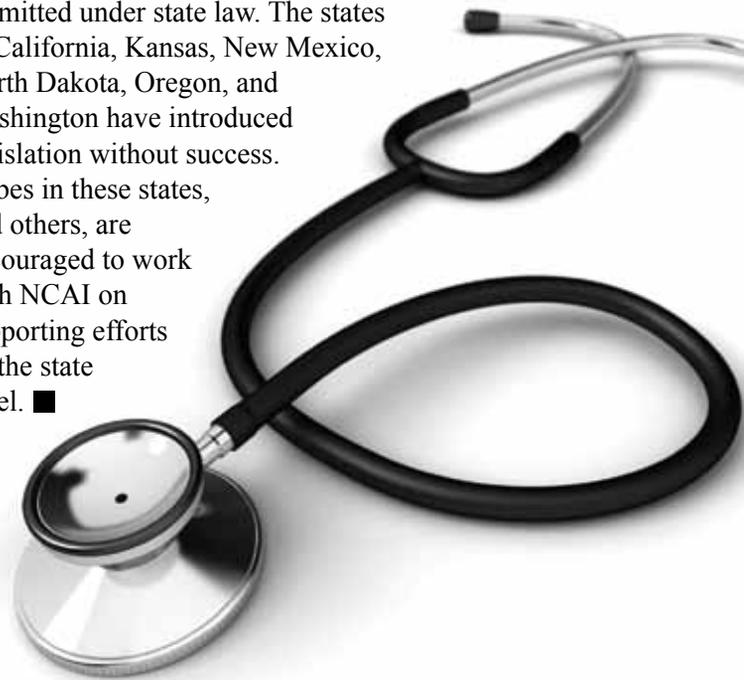
Special Diabetes Program for Indians

NCAI continues to advocate for five-year reauthorization of the Special Diabetes Program for Indians (SDPI). American Indians and Alaska Natives have the highest occurrence of diabetes at a rate of 2.3 times higher than the national average with diabetes-related deaths occurring at more than 1.6 times the national average.

The grant programs contained in the SDPI have provided grants to 404 tribal programs in 35 states. These programs have had a significant effect on education and prevention efforts in Indian Country by allowing tribal communities to design and implement programs that address their locally identified needs and priorities. Such programs address increased testing for diabetes and increased promotion of healthy lifestyle behaviors. ■

Dental Health Aide Therapist Initiative

NCAI is funded by the W.K. Kellogg Foundation to raise awareness to tribes on the Dental Health Aide Therapist (DHAT) model, provide information on DHAT, and identify and support tribes interested in the DHAT model. A DHAT is a mid-level provider, similar to a Physician's Assistant, who is formally trained to provide routine and preventative dental care services under the general supervision of a licensed dentist offsite. The DHAT model has been used worldwide for more than 90 years, and is permitted by state law in Alaska, Minnesota, and Maine. The Alaska Native Tribal Health Consortium adopted the model in 2003. The DHAT model builds community capacity and creates jobs by training community members to become DHATs. The model can be replicated in other areas and is a viable solution to addressing the oral health needs of AI/AN. The Indian Health Care Improvement Act requires that DHAT services, or mid-level dental health provider services, must be permitted under state law. The states of California, Kansas, New Mexico, North Dakota, Oregon, and Washington have introduced legislation without success. Tribes in these states, and others, are encouraged to work with NCAI on supporting efforts on the state level. ■



Native Graduate Health Fellowship

The Native Graduate Health Fellowship aims to build a pipeline of American Indian and Alaska Native health professionals and prepare them for leadership roles in developing health policies that address the unique health needs of Native people.

In its third year, the fellowship is available to full-time graduate students pursuing a graduate degree in a health-related field. Through a competitive application process and review, the finalists' application for 2014-15 were reviewed by a selection committee that identified the 2014-15 fellow and selected candidates to be invited to a four-day policy workshop in Washington, D.C.

The 2014 fellow is Michael Mudgett (Spirit Lake Dakota) who is completing a Masters of Public Health degree from the University of North Dakota. The other finalists who attended the week-long policy workshop included Ashleigh Coser (Muscogee Creek, Choctaw, and Chickasaw Tribes of Oklahoma), Rachael DeMarce (Little Shell Tribe of Chippewa Indians and Descendant of the Blackfeet Nation), and Samantha West (Muscogee Creek Nation).

The workshop included a range of sessions: an introduction to tribal sovereignty; welcome and conversation with IHS Director Dr. Yvette Roubideaux; presentations by staff of the National Indian Health Board, National Council on Urban Indian Health, and the National Institutes of Health; a session on the legislative process and a visit to Capitol Hill; a session by NCAI's policy research center; a visit to the American Public Health Association; and a closing session with NCAI's Executive Director, Jacqueline Pata.

The Native Graduate Health Fellowship is possible through the generous support of Robert Burnette, the Seventh-day Adventist Church, and a range of other donors. NCAI deeply appreciates these donors' essential role in establishing and sustaining the endowment that supports the fellowship.

The Wilma Mankiller Fellowship Program for Tribal Policy and Governance

For more than a decade, NCAI's fellowship program has provided the opportunity for bright young Native leaders to gain experience in public advocacy, applied research, program development, communications, and an array of other aspects of NCAI's work to make a difference in Indian Country. Throughout the 11-month program young Native professionals earn skills and develop subject matter expertise in various policy and research areas that assist NCAI membership in their advocacy and policy development.

Having influenced more than 50 young professionals over the life of the program, the 2013-2014 Wilma Mankiller Fellowship cohort continued the long legacy of commitment, excellence, and professional achievement. This year NCAI hosted six fellows working on various projects, teams, and legislative priorities. Together, the 2013-2014 cohort worked on legislative topics such as workforce development, immigration, Native language revitalization, and healthcare. Fellows also worked on issues ranging from financial literacy, Native Vote, and the implementation of the Affordable Care Act.

In summer 2014, NCAI welcomed the new cohort of fellows with three new fellows - Cheyenne Sanders (Yurok), Joel Chastain (Chickasaw), and Mari Hulbutta (Chickasaw, Seminole, and Muscogee (Creek)). These fellows join two existing fellows—Cesar Alvarez (Three Affiliated Tribes) and Mark Carter (Citizen Potawatomi).

Originally founded in response to tribal leaders' demands to build a pipeline of young professionals with extensive public policy, advocacy, and leadership skills, the Wilma Mankiller Fellowship Program has graduated many of today's leaders in Indian Country across the public, private, and civic sectors.

Cultural Participation & Advocacy

BY WHITNEY SAWNEY, CHEROKEE NATION, NCAI NNYC

With an increasing number of American Indian and Alaskan Native youth that are under the age of 25, it is important that our youth are a part of the conversation when addressing issues facing Native youth today. I was grateful when I was asked to be a National Congress of American Indians (NCAI) National Native Youth Cabinet Member representative for the Native Youth Resiliency Task Force during the 2014 NCAI Executive Winter Council Session. The most important thing that I gained is the encouragement I received from tribal leaders.

This was my first trip to Washington, D.C., my first time to the White House, my first time interacting and meeting with Senators, and having an experience like this left me feeling excited and motivated. During the NCAI banquet, they introduced a group of high school students that participated in a national competition where they worked to turn a profit in the stock market with their pretend budget. One of the students who went up to receive his award said that it was “his first award ever.” For me, that moment signified the importance of recognizing the accomplishments of our youth, and providing them



with opportunities to experience something new for the first time. If we continue to support these opportunities, allowing youth to learn and explore while encouraging their expression of culture, we give them something to be excited about and to share with their communities.

Experiences like this encourage me to celebrate culture. I've found

a passion for cultural participation through conferences such as this. Hearing my peers speak in their own languages, and seeing the pride they have is uplifting and inspiring. I had the privilege of hearing Mr. Terry Cross of the National Indian Welfare Association (NIWA) speak during our Native Youth Resiliency Task Force meeting, and something

he said struck a cord. He was told at one point to “be careful,” when openly advocating for Native people. I related to this, my own family having expressed their concerns. They worry that I will be persecuted for participating in a new era of cultural advocacy, and that my voice will go unappreciated and unheard. Therefore, it is important to me to move forward while respectfully remembering and honoring the challenges and struggles of those before me. I am appreciative of advocacy organizations, such as NCAI, for providing a platform for our youth to let their voices be heard, and for creating an encouraging learning environment so that we can continue their leadership work for future generations.

Here is my re-cap of the conference highlights:

Advocacy 101:

Advocacy continuation is important—we have to maintain the fight for tribal sovereignty. We are fighting “ignorance,” and must move past the historical influence on perceptions of American Indians. In today’s political environment, non-native political participants have little to no knowledge about Indian Affairs; therefore it is our responsibility to educate them on the significance of Native culture. If we continue to be depicted in a manner that equates us with cartoon images, our issues will not be properly addressed. It is important to recognize the major themes for Indian Country, which include land rights, child welfare, women’s rights, healthcare (Western diet is a major issue—there is a tremendous need for diabetes

prevention), education, and tribal sovereignty.

Process of advocacy:

- Build relationships.
- Be prepared and have a thorough understanding of the issues; it lends more credibility to what you are advocating.
 - Know exactly what you are asking for, and do research before you ask people for their assistance. Keep your request simple and be prepared to provide information in writing when needed.
 - Relate to others by sharing real-life human stories. Abstract arguments are always given greater life when enhanced by real-life human stories.
 - Know your audience. Know their political ideologies, what political environment they operate in. They are usually most responsive to their own constituents. Take a look at what committees they belong to; gather information about voting history.
 - Build alliances with other members of the tribal population.
 - Create public relations opportunities; writing a press release about meetings with Congressmen in the local community strengthens your argument, because it creates awareness and importance.
 - Political contributions provide a lot of access, attention, and effort.
 - Focus on who we are and what we represent: generosity, kindness, compassion, community, tradition, spirituality, and family. Present the message that it’s not okay to “pick and choose which promises are kept.” Our rights are not mere line items and there shouldn’t be a reduction in services that were promised to us.

Listening Session on ICWA:

The Indian Child Welfare Act (ICWA) gathered leaders and advocates to voice their opinions on problems their tribes are still facing. A few of the points made were:

- There is a need for better accommodation for tribes based on the structure of ICWA implementation.
 - Clarification is needed to determine what qualifies an “Indian” to present to state courts. Is it the state court that is the obstacle? State courts have an unrealistic expectation that the BIA has a “magical” list of every American Indian in the U.S. How do you apply that to children or persons who don’t know their tribal affiliation due to enrollment, etc.? There is not a huge level of investment from state courts.
 - ICWA policy evaluation is needed because there is not enough follow-up to see whether adoption is in the best of the child’s safety.
 - Place a higher priority on regulations. Guidelines are not binding, so courts don’t use them; they are seen as recommendations that don’t carry any weight. In some cases, there are problems with guidelines that were passed 30 years ago immediately after the passing of the ICWA. Problems occurred because there were not enough actual court cases used in the creation of guidelines.
 - The main issue is child safety. Implementation is different on a reservation than in an urban environment.
 - It’s important to create awareness and educate administration, and community and front-line workers.

Child safety curriculum should be developed with avenues to share that information with others. Some suggestions were to create online learning programs, creating opportunities to bring together tribal, state, and federal government members. Another suggestion was the need for training and resource centers on reservations to teach new and young parents how to be parents.

- There needs to be a greater call for accountability; there is no penalty for non-compliance.
- Make sure that funding appropriations are rightfully and fairly provided to ICWA for implementation. Tribes want to take over implementation of ICWA within their own community; however more funding is needed for education programs, etc.
- More data is needed on American Indian/Alaskan Native children.

Youth Meeting with Google Staff:

I met with Google's University recruitment team (Diversity for Google) to discuss how Google can build a stronger connection with Indian country, and start engaging more with Native students. We talked about what that process of engagement might look like. There are several opportunities available for Native youth students (and all diverse groups) to encourage development through mobility. I made sure to speak about the importance of creating awareness through social media utilizing organizations like NCAI as a central point to disseminate information to tribal communities.

Opportunities at Google include more than just computer

programming. They help youth with personal branding, and provide a course program that encourages leadership development and teaches business and networking skills. Being a part of this meeting allowed our youth leaders to share information about how to get more Native youth involved in these programs with Google, how to reach out to them, and how to encourage them to apply. An important point that was made during the meeting was the tribal investment in sending their youth to these programs to acquire experience and knowledge that they could bring back to the tribes.

(Contact: lgilligan@google.com)

Congresswoman Nancy Pelosi:

No matter what your political affiliation, having a representative from Congress recognize and bring attention to the work that our Native youth leaders have done is significant. I had the opportunity to hear Congresswoman Nancy Pelosi speak. I personally have a vested interest in the Washington football team mascot issue, and hearing her lend words of support in the movement to change the offensive name of the team meant a lot. Bringing national attention to the issue creates opportunities for us to educate those ignorantly arguing for the team name. Ms. Pelosi stated that the trademark office rejects offensive names, and they should do it now. She explained that the Washington football team makes a lot of money with their merchandise, but it objectifies and offends a population of American Indian people.

Native Vote Luncheon:

Native Vote is gaining a lot of momentum, and building

partnerships with other nonprofit organizations like Rock the Vote. These youth-oriented organizations make politics relevant in tribal communities. Involvement in popular culture is important to youth and can be used to create awareness. Examples: PSAs, celebrity promotions, partnerships with media, cultural and other organizations. Youth can learn to use voting as a way to express power and culture.

Efforts should be made to get more people involved online, and getting people to become registered voters through Native Vote online registration innovation lab. Native Vote provides as much information as possible so that youth are not discouraged but instead follow through with their initial inclination to vote. It has created partnerships with Google + Politics.

(Contact: Alexisfearon@google.com)

Lunch and Reception with Center for Native American Youth, Senator Dorgan, and Champions for Change:

Finally, the NCAI Executive Winter Council Session provided networking opportunities and the chance to celebrate the accomplishments of the Champions for Change youth and the commitment they have made to improve their communities. They are an inspirational group of young people who have accomplished a lot, and at a young age. Acknowledging the successes of our youth encourages participation from other youth. It was also a chance to create interconnectedness among our youth, so that we can build a network of support for one another. ■

Cultural Roles & Responsibilities

BY CANDICE YAZZIE (*Navajo Nation*), first year MSW scholar with a concentration in Social and Economic Development and interest in policy. Member of the NCAI National Native Youth Cabinet.

I am a first-year graduate student in the George Warren Brown School of Social Work at Washington University in St. Louis (WUSTL). When I was admitted to WUSTL, I was offered the Katheryn M. Buder for American Indian Studies scholarship. It was an opportunity I felt I could not turn down because it is rare for Native American (NA) students to receive a scholarship like this. In August 2013, I checked in as a full-time graduate student at WUSTL and moved into my first apartment.

WUSTL is a prestigious institution and considered the number-one social work program in the nation. As I began grad school, I knew I would be mentally and culturally challenged. Student expectations are high, such as meeting academic standards, high standardized testing scores, and proficient writing skills. Therefore, I had to find ways to achieve at the level expected of me. As a cultural person involved in other NA programs, I was expecting the same environment at WUSTL. However, what I've found is a contrast between what I expected and reality in a predominately non-Native, white student population.

As an NA person already struggling with issues most NA people do, I find it hard at times to identify with and become accustomed to the tenets of the dominant paradigm at WUSTL. Native American people struggle to maintain cultural identity amid the pressures of acculturation into mainstream society. I began to see myself culturally assimilating into mainstream society and neglecting my cultural role and

responsibilities. In doing so, I was favoring the non-Native culture over my own NA culture. I recognize the lack of opportunity in Native communities and seek Western education as a means of survival. At some point in my life I have accepted and adopted the practices of Western education as a means of survival and independence. Acculturation and assimilation into mainstream society by NA people is historical and traumatic and has existed for many years. In the past, Western education has been part of colonizing NA people.



A Native American woman living alongside the dominant society is not easy. It requires navigating two worlds, one rich in cultural values and the other potentially threatening and often adverse to your values. I take comfort knowing others before me have experienced the same and are successful today. In order for me to cope within this society, I am developing strategies and mechanisms to increase my chances of success in Western education. I rely on my Navajo culture system of spirituality, prayer, song, and ceremonies as ways to adjust and

adapt to the outside world. This non-verbal belief system has been in existence for the past century and passed down through generations. My goal is to ensure that my tribal identity remains intact and to include worldviews as part of obtaining a Master's degree. I truly believe that our identity is inherited from our ancestors and carried in the history of Native people. Our Native people fought for our existence in this country and we must follow in their footsteps. My cultural responsibility is to continue the legacy of our Navajo history and culture. ■

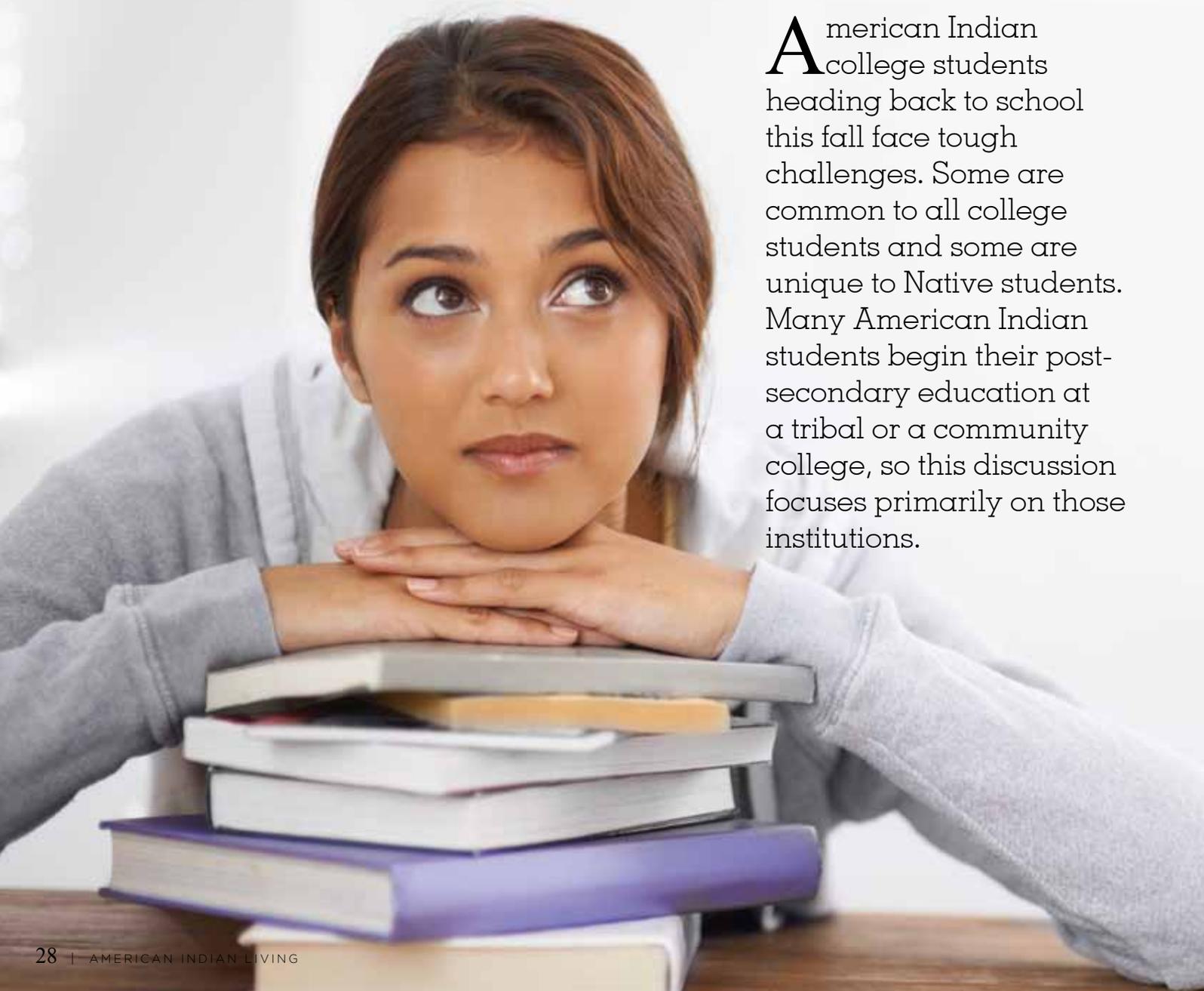


CANDICE YAZZIE

4 Challenges Facing Native Students Today

BY TANYA H. LEE

American Indian college students heading back to school this fall face tough challenges. Some are common to all college students and some are unique to Native students. Many American Indian students begin their post-secondary education at a tribal or a community college, so this discussion focuses primarily on those institutions.



Finances

Finding the money to pay for college is at the top of almost everyone's list. Financing can be especially challenging for American Indian students who have grown up and lived in poverty, says Carrie Billy, Navajo, president and CEO of the American Indian Higher Education Consortium.

"The average income for a tribal college student is \$5,262/year. The average tuition at a tribal college is less than \$3,000 a year, but the average cost of attending the college, including housing, transportation, food and other expenses is 3,800." Eighty percent of tribal college students get federal financial aid, mostly in the form of Pell grants, but, says Billy, the maximum Pell grant this year is only \$5,645.

"The federal government should make a commitment to the lowest-income families in this county to increase the maximum Pell grant. This would be a tremendous help to getting more American Indians through college. When our students are fully funded for their education, they will complete a two-year degree in two years and a four-year degree in four years," adds Billy.

Just a few tribal colleges participate in the federal student loan program, says Billy, "because loan repayment and the default rate policies of the federal government are so harsh." Some get scholarship funding through their tribes or through the Bureau of Indian Education, but many students still come up short.

Students at community colleges are generally eligible for federal student loans, but as Billy points out, without a national income-based repayment plan, paying those loans will be extremely difficult for people who live in low-income communities with low-paying jobs.

Poor Communication Between Tribes and Colleges

Alberto Olivas, Mexica (Aztec)/Huichol, director of the Center for Civic Participation at Maricopa Community Colleges, explains that each tribe has a different policy for funding scholarships and each college or university has its own payment schedule. There is

"Financing can be especially challenging for American Indian students who have grown up and lived in poverty"

-Carrie Billy

often a breakdown in communication between tribes and financial aid offices, which can result in delayed financial aid checks. "Students need to get their money on time to buy books, secure housing and pay their tuition so they won't be dropped from courses for non-payment," he says.

Lack of Financial Literacy

Many students are not prepared to manage their grant and scholarship money successfully. "Students get a big financial aid check which is supposed to last for the semester, but they often spend it down too fast and end up with no money available for rent or food at the end of the semester," says Olivas.

There is also the cultural expectation of sharing. "If you have a lot of money in your bank account, it's hard to say no if someone in your family or a friend needs help. And students don't have the mentors and guides they have in their home communities to go to for advice on such matters," Olivas says.

Too Few Hours in the Day

Many American Indian college students are adults, with jobs to go to and families to care for in addition to their coursework. Many commute long distances, sometimes as much as 100 miles each way. Students say time management and prioritizing are among their greatest challenges. Most tribal colleges have day care centers to help parents make time to attend class and study. ■



4 MORE Challenges Facing Native Students Today

BY TANYA H. LEE

American Indian college students heading back to school this fall face tough challenges. Some are common to all college students and some are unique to Native students. Many American Indian students begin their post-secondary education at a tribal or a community college, so this discussion focuses primarily on those institutions.

Isolation and Lack of Role Models and Mentors

“For American Indian students, probably the biggest challenge when they are attending mainstream universities is finding people who are similar to them and understand what they’re going through,” says Sarah EchoHawk, Pawnee, CEO of the American Indian Science and Engineering Society.

Most community college students, says Alberto Olivas, Mexica (Aztec)/Huichol, director of the Center for Civic Participation at Maricopa Community Colleges, live within six miles of the school they attend. American Indian students are the exception. “Other students have families and support services that Native American kids do not have so far from home. They don’t know what resources are there, don’t know the community, don’t know where to look for quality housing,” Olivas says.

Some colleges have American Indian student centers, clubs and other formal institutions to help students, but others do not.

“One of the really great things about tribal colleges is wrap-around support,” says Carrie Billy, Navajo, president and CEO of the American Indian Higher Education Consortium. “The college takes the place of a family in terms of supporting students through college, providing support like gas money, giving them a quiet place to study, teaching them study skills and providing day care for their kids. But probably the most important part is cultural and spiritual.”

EchoHawk says another part of feeling isolated is that American Indian students do not see faculty who are like them. An important service of AISES is providing advisors for Science, Technology, Engineering and Mathematics (STEM) students, but often the advisors are not Native American. The organization has just received a copy.5 million National Science Foundation grant to increase the number of AISES members who complete their undergraduate and graduate degrees and go on to pursue faculty positions in STEM disciplines at United States colleges and universities.

Inadequate Student Housing

Community colleges traditionally do not offer housing. “American Indian students end up in the college community without documentation or a credit history, so they can only access poor quality housing, often in blighted and dangerous neighborhoods. Housing can cause really significant problems that result in students dropping out of school,” says Olivas. Tribes and schools need to work out strategies, such as identifying good housing and neighborhoods for students, or even leasing blocks of apartments and renting them to students, to alleviate this problem, he says.

College Readiness

Many students are not college-ready, explains Cheryl Crazy Bull, Sicangu-Lakota, president of the American Indian College Fund. College readiness is knowing what college is like and what is expected of you. “We’ve encountered students who were coming to college and didn’t know they were going to be responsible for attending classes and asking for help if they needed help,” Crazy Bull says. “School is starting in a few weeks and we have students just now who are looking for funding. That’s an aspect of college readiness. You have to get ready for

college ahead of time.” Native students are often first generation, so they don’t have someone in their family to tell them what college is like, she says.

Insufficient Academic Readiness

Tribal and community colleges are open-door institutions of higher education: they accept all students who apply. Roughly 70 percent of their students need developmental education in at least one area. Developmental education classes present students with two problems: it is discouraging to have to take classes that will not count toward a degree, and those classes cost money.

“Traditionally students have to pay per-credit tuition for developmental education courses,” says Olivas. “New rules for financial aid mean students have to get through their developmental courses as soon as possible. We’re looking at ways to provide developmental education that either costs less or is cost free, so people can get up to speed without spending down all of their financial aid dollars.”

Billy says that one strategy that works is to focus on problem-based learning and to integrate developmental education into credit-bearing coursework. AIHEC has a grant from the NSF to promote problem-based learning in tribal colleges “because we know that students who engage in research and problem-based learning that’s relevant to their homes, their communities, their culture do much better than students who don’t have that kind of curriculum,” she says.

NDNSPARK

In late 2012, NCAI launched NDNSpark, an online community for Native youth to use as they develop into the next generation of leaders. The platform is designed to help youth set and achieve goals that will enhance their everyday life.

Visit WWW.NCAI.ORG/NATIVE-YOUTH to join NDNSpark

NCAI Broadcast

News & Updates for Indian Country

Supporting Our Native Boys & Young Men

In February 2014, President Obama announced the launch of the “My Brother’s Keeper” initiative, an interagency effort to improve measurably the expected educational and life outcomes for and address the persistent opportunity gaps faced by boys and young men of color. The National Congress of American Indians (NCAI) applauds this effort. A focus on Native boys does not necessarily take away from Native girls. If we see that a focus on Native boys can strengthen our families and communities, then another outcome should be improvements in their relationships with Native girls and women. As a group, Native boys graduate high school at a rate below White boys and Native girls, especially those in South Dakota, North Dakota, and Oregon. Native boys are also at a higher risk of death than White boys and Native girls, especially due to unintentional injury and suicide. However, Native men are leading the way in some arenas. Native men have the highest rate of custodial single fatherhood than other racial/ethnic groups. Native men are enlisting in the military at a high rate compared to other racial/ethnic groups, especially those ages 17-24. In Montana and New Mexico, young Native men (aged 18-24) are registered to vote at the highest rate of all groups of Native American registered voters.

Effective community programs to support Native boys and men:

- The United Tribes Technical College's Demand Workforce effort is new, but incredibly innovative in terms of developing initiatives that respond to realities facing Native men in their region using tools like humor and the Internet to engage young men.

- Sports programs like the World Eskimo and Indian Olympics in Alaska, the REZRIDERS extreme sports initiative in New Mexico, and the Ultimate Warrior triathlon featuring traditional activities in Montana

have been effective at engaging young men in healthy, community-based activities.

- The Aha Kane initiative in Hawaii, has expanded from being centered around intergenerational cultural activities to including health and jobs information for Native Hawaiian men.

Sources: Faircloth & Tippeconnic, 2010; National Center for Education Statistics, 2011; Office for Civil Rights, 2012; Ross, Kena, Rathbun, et al., 2012; National Center for Health Statistics, 2003; U.S. Census, 2006-2010 ACS; U.S. Department of Veterans Affairs, 2012.

Improving Adaptation & Dissemination of Promising Health Practices

There are great examples of health initiatives in place across Indian Country. Some of these, like the Special Diabetes Program for Indians were adapted from other models, namely the Diabetes Prevention Program; while others, like the Dental Health Aide Therapy program, began in a Native community. A great deal of the ongoing health challenges facing Native people are a result of not having health initiatives that fit Native communities and/or due to difficulties in disseminating best practices for community use. Emerging initiatives in telemedicine, training of rural health providers, and adapting successful programs for use with Native communities offer some promising impacts. If you would like to share information on existing research on this topic, please contact the NCAI Policy Research Center.

Source: <http://ehrintelligence.com/2014/05/08/alaska-legislature-passes-telemedicine-bill-to-expand-coverage>.

National Native Youth Cabinet

The National Native Youth Cabinet (NNYC) is made up of 19 youth between the ages of 15 and 24 from 17 different tribal nations. By providing the space for these youth to come together, NCAI aims to foster their awareness of public policy and to learn more about Native youth priorities that can inform our policy work. In addition, NCAI is working to provide the members of the NNYC with analytic, social media, and networking tools to assist them in strengthening regional Native youth leadership. Members of the NNYC convened at NCAI's Mid Year Conference in Anchorage, Alaska to learn about infographics and positive messaging around Native youth. Later in the summer, the youth gathered at the Embassy of Tribal Nations in Washington, D.C., to engage with policymakers about Native youth data. Cabinet members have identified a range of topics to develop projects around, including: creating guidelines for establishing a tribal youth council; generating resources to assist youth who feel alienated for various reasons; developing culture and language resources for Native youth; and expanding information on how to pay for higher education, among other projects.

Change the Mascot Campaign (Advocacy)

In 1968, NCAI initiated a campaign to end negative and harmful stereotypes of Native peoples in the media and popular culture. A primary focus of this campaign has centered on the use of "Indian" themed mascots, logos, and names, which have dehumanized and devalued the diverse heritages of Native peoples. Most of these mascots were chosen between the 1920's and 1950's—an era reminiscent of the "vanishing people" mentality of the general populace.

While these educational efforts have existed as a cornerstone to the foundation of NCAI, the "Indian" themed mascots issue has recently gained considerable national media attention. Due to social media and the

grassroots activism of Native and non-Native individuals across the country, this issue has gained an ever-increasing amount of visibility and discussion in the national spotlight. Witnessing the growing chorus of support to retire "Indian" mascots, logos, and names, the Oneida Indian Nation of New York created the Change the Mascot initiative in the beginning of 2013. Shortly thereafter, NCAI entered into an official partnership with the Oneida Indian Nation to educate the general public about these harmful stereotypes of Native peoples.

Since then, the Change the Mascot campaign has gained immense support from hundreds of tribes, tribal organizations, and the civil rights community to change the name and mascot of the Washington Redskins NFL team. President Barack Obama, members of Congress, state politicians, and current and former NFL athletes have also called upon the league to change the Washington, DC NFL team name. National, state, and local news outlets have also boycotted usage of the name in their sports reporting and broadcasting. Alongside our partners, NCAI will continue to advocate for the retirement of these derogatory names and mascots, while continuing education efforts about the true cultural heritage of Native peoples.

Role of Language & Culture in Achievement and Wellness

Tribal leaders have consistently emphasized the importance of Native languages and culture in supporting healthy citizens and communities. The National Native Youth Cabinet has also identified this as a priority. While there is research evidence that culture has a significant and important impact on achievement and wellness, there is more research needed to demonstrate the value of Native languages and cultures in school achievement and on health outcomes.

Source: NCAI Policy Research Center



NCAI Events

MAY 2015 - OCTOBER 2017

▶ **Tribal Interior Budget Council**

May 20, 2015 - May 21, 2015
Washington Plaza Hotel, 10 Thomas Circle, NW, Washington, D.C. 20005

▶ **RES (Reservation Economic Summit) D.C.**

Jun 15, 2015 - Jun 17, 2015
Washington, D.C.

▶ **2015 Mid Year Conference**

Jun 28, 2015 - Jul 1, 2015
St. Paul, MN

▶ **IHS Tribal Self-Governance Advisory Committee**

Jul 21, 2015 - Jul 22, 2015
Washington, D.C.

▶ **DOI Self-Governance Advisory Committee**

Jul 22, 2015 - Jul 23, 2015
Washington, D.C.

▶ **Tribal Interior Budget Council Meeting**

Aug 5, 2015 - Aug 6, 2015
Albuquerque, NM

▶ **UNITY Days**

Sep 16, 2015 - Sep 18, 2015
Washington, D.C.

▶ **72nd Annual Convention and Marketplace**

Oct 18, 2015 - Oct 23, 2015
San Diego, CA

▶ **Tribal Interior Budget Council Meeting**

Nov 18, 2015 - Nov 19, 2015
Washington, D.C.

▶ **2016 Executive Council Winter Session**

Feb 22, 2016 - Feb 24, 2016
Washington, D.C.

▶ **2016 Mid Year Conference & Marketplace**

Jun 25, 2016 - Jun 29, 2016
Spokane, WA

▶ **73rd Annual Convention & Marketplace**

Oct 8, 2016 - Oct 14, 2016
Phoenix, AZ

▶ **2017 Mid Year Conference**

Jun 25, 2017 - Jun 28, 2017
Uncasville, CT

▶ **74th Annual Convention & Marketplace**

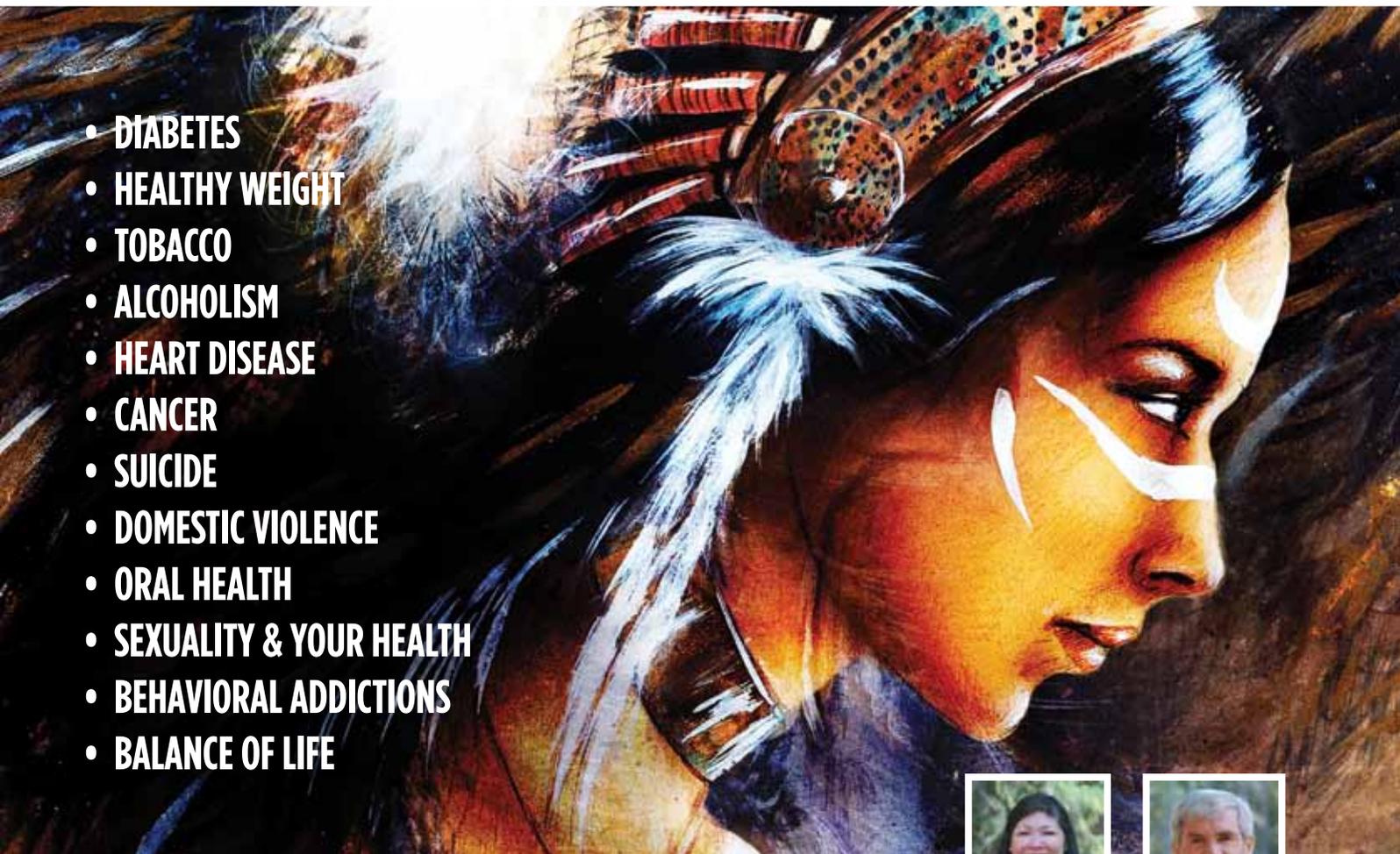
Oct 13, 2017 - Oct 21, 2017
Milwaukee, WI

Go to

<http://www.ncai.org>
for more event
information.

NATIVE *New* HEALTH

- DIABETES
- HEALTHY WEIGHT
- TOBACCO
- ALCOHOLISM
- HEART DISEASE
- CANCER
- SUICIDE
- DOMESTIC VIOLENCE
- ORAL HEALTH
- SEXUALITY & YOUR HEALTH
- BEHAVIORAL ADDICTIONS
- BALANCE OF LIFE



PROGRAMS ARE HOSTED BY GINA GUIBOCHE AND EDWARD DUNN

NATIVE *New* HEALTH is an innovative series of health programs designed for Native people by Native people. This series addresses a number of health topics of special concern to Native People: diabetes, heart disease, cancer, depression, suicide, tobacco, alcoholism, and drug abuse and more. Each episode has been designed to generate discussion, and to assist the viewer in making positive lifestyle choices.

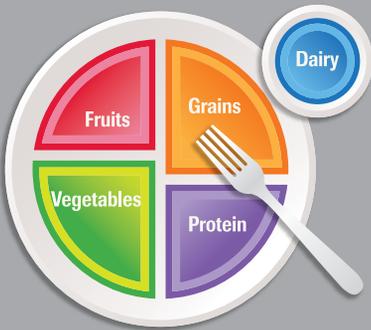
WWW.NATIVENEWHEALTH.CA



Take charge of your diabetes and feel better.

Together, we've got this.

Choose healthy foods



Eating well-balanced meals is an important part of taking better care of yourself and managing diabetes.

But having diabetes doesn't prevent you from enjoying a wide variety of great-tasting foods, including some of your favorites.

Be active



Exercise is one of the best things you can do if you have diabetes because your body uses blood sugar, also called glucose, for energy.

When you exercise moderately, like going for a half-hour hike, your muscles use much more glucose. This helps lower your blood sugar levels.

Test your blood sugar



Testing your blood sugar is important because diabetes is often a silent disease, with very few symptoms other than being thirsty, hungry, or tired when your blood sugar is too high or too low.

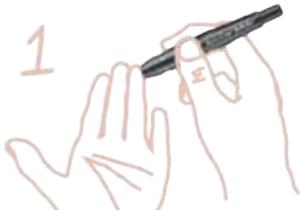
Testing regularly can show you that changes to your diet, exercise, or medication can also change the way you feel and help you control your diabetes.



Visit accu-chek.com for valuable resources to help take charge of your diabetes.

The ACCU-CHEK® Aviva Plus system makes testing your blood sugar easy.

Being told you have diabetes can feel overwhelming. But do you know that by simply eating healthier meals and being more active, you can lower your blood sugar and take charge of your health? Take the first step and test your blood sugar, as recommended by your healthcare provider, so you can see how the food you eat, medications you take, and your activity level can affect your results and how you feel.



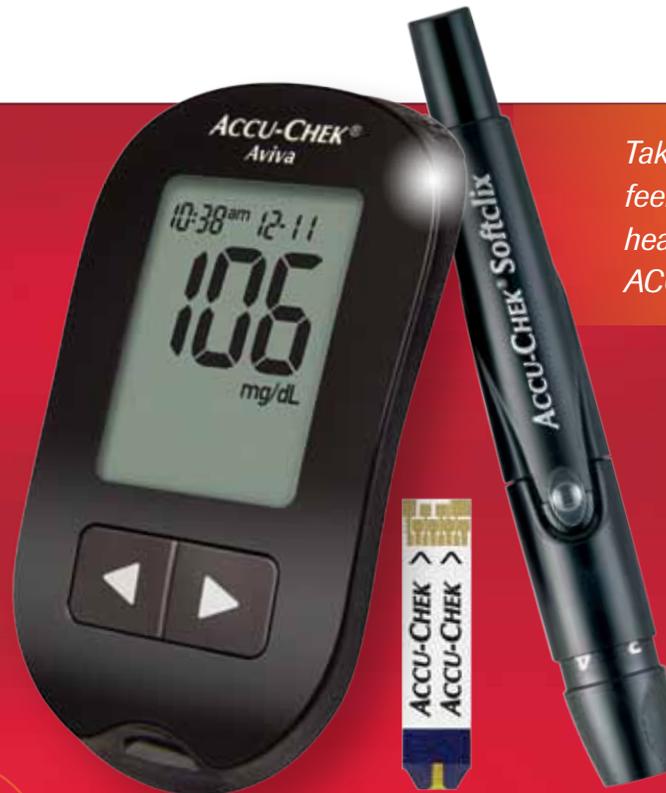
1 Use the ACCU-CHEK Softclix lancing device to gently prick the side of your finger.



2 A small blood drop will appear. Touch it to the edge at the end of the strip.



3 A result will appear in 5 seconds to let you know how you're doing.



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NAVIGATORS

Non Insured Health Benefits

WHO WE ARE

The objective of the NIHB Navigators is to improve access to the NIHB program (for clients) by working with community health workers, service providers, and a network of regional policy analysts. Navigators are mandated by their regional health organisation.

WHAT WE DO

Provide support & advocacy for community workers in their work assisting their clients accessing NIHB

Advocate with the federal government & health professionals on behalf of First Nations to resolve NIHB issues

Provide technical support through planning & research, assist in interpreting policies

Improve awareness of the NIHB Program & provide information on the eligible benefit areas

Address policy issues related to access to NIHB benefits through feedback to the national process

Work to strengthen relationships with health care providers, provincial & federal partners

Support leadership in the work of advocating for policy change within NIHB

This includes:

- ✓ Guidance in accessing these eligible benefits
- ✓ Linkages with provincial programs as well as other administrative issues surrounding the NIHB program
- ✓ Procedures to address denial and appeals

DID YOU KNOW

You have the right to appeal the decision when coverage for a benefit has been denied by the NIHB program. An appeals committee of professionals will review the case and will provide the recipient or parent/guardian with a written explanation of the decision taken.

First Nations NIHB Navigators

Yukon

1 (867) 393-9205

British Columbia

1 (800) 317-7878

Alberta

Treaty 6: 1 (780) 944-0334
Treaty 7: 1 (403) 539-0361
Treaty 8: 1 (780) 444-9366
or 1 (888) Treaty8

Saskatchewan

1 (306) 956-6940
Ext.256

Quebec

Any First Nations experiencing difficulties in accessing health services must contact their community health centre or nursing station. For any other information, you can contact the Health Care Liaison Agent at the First Nations of Quebec and Labrador Health and Social Services Commission. Phone: 1 (418) 842-1540 Ext. 236

Ontario

Northern Ontario: 1 (807) 626-9339
Southern Ontario: 1 (877) 517-6527

Atlantic

1 (877) 667-4007

APPEALS PROCESS

For a case to be reviewed as an appeal, a letter from the recipient or parent/guardian must be mailed to the NIHB Program along with supporting information from the provider or prescriber. This information includes:

- 1 The condition for which the benefit is being requested.
- 2 The diagnosis and prognosis, including what other alternatives have been tried.
- 3 Relevant diagnostic test results.
- 4 Justification for the proposed treatment and any additional supporting information.

*The envelope must be clearly marked "APPEALS-CONFIDENTIAL"

DRUG BENEFITS

DENTAL BENEFITS

ORTHODONTIC BENEFITS

MEDICAL SUPPLIES & EQUIPMENT, VISION, MENTAL HEALTH & MEDICAL TRANSPORTATION BENEFITS

LEVEL 1

Manager, Pharmacy Policy
Development Division
FNIHB, Health Canada
200 Eglantine Driveway, Jeanne
Mance Building
Postal Locator 1909A
Ottawa, Ontario K1A 0K9

Manager, Dental Policy Unit
FNIHB, Health Canada
200 Eglantine Driveway
Address Locator 1902D
Ottawa, Ontario K1A 0K9

Manager, Dental Policy Unit
FNIHB, Health Canada
200 Eglantine Driveway
Address Locator 1902C
Ottawa, Ontario K1A 0K9

Submit documentation to the
Health Canada regional office in
your province or territory and
address the envelope to:
NIHB Regional Manager,
APPEALS-CONFIDENTIAL

LEVEL 2

Director, Benefit Management
and Review Services Division
FNIHB, Health Canada
200 Eglantine Driveway, Jeanne
Mance Building
Postal Locator 1909A
Ottawa, Ontario K1A 0K9

Director, Benefit Management
& Review Services Division
FNIHB, Health Canada
200 Eglantine Driveway
Address Locator 1902D
Ottawa, Ontario K1A 0K9

Director, Benefit Management
& Review Services Division
FNIHB, Health Canada
200 Eglantine Driveway
Address Locator 1902C
Ottawa, Ontario K1A 0K9

Submit documentation to the
Health Canada regional office
in your province or territory
and address the envelope to
NIHB Regional Director,
APPEALS-CONFIDENTIAL

LEVEL 3

NIHB Director General
FNIHB, Health Canada
200 Eglantine Driveway Jeanne
Mance Building
Postal Locator 1909A
Ottawa, Ontario K1A 0K9

NIHB Director General
FNIHB, Health Canada
200 Eglantine Driveway
Address Locator 1902D
Ottawa, Ontario K1A 0K9

NIHB Director General
FNIHB, Health Canada
200 Eglantine Driveway
Address Locator 1902C
Ottawa, Ontario K1A 0K9

NIHB Director General
FNIHB, Health Canada
200 Eglantine Driveway
Ottawa, Ontario K1A 0K9

ORTHODONTIC APPEAL PROCESS

Appeals for orthodontic services, a Predetermination submission must be received by NIHB's Dental Predetermination Centre (orthodontic services) before the client's 18th birthday.

All three levels of the appeals must be accompanied by the supporting documentation provided by the dental practitioner.

The client will receive a written explanation of the decision within 30 business days.

Please note the appeal process may take longer in complex cases including orthodontic services. To find out about the status of your appeal contact your regional NIHB office or the NIHB Dental Predetermination Centre at:
Toll-Free Tele: 1-866-227-0943



ORTHODONTIC APPEAL CHECK-LIST

For the appeal for orthodontics coverage, the following information and diagnostic records must be provided:

1. Diagnostic Orthodontic Models- trimmed in centric occlusion. If photographs of models are submitted, the NIHB Program reserves the right to ask for the original stone models.
2. Cephalometric- radiograph and tracing.
3. Panoramic radiograph or Full-Mouth-Survey (FMS).
4. Photographs- three (3) intraoral and three (3) extraoral.
5. Treatment plan, estimated duration of active and retention phases of treatment and costs submitted either on a NIHB Orthodontic Summary Sheet, Canadian Association of Orthodontists (CAO) Standard Orthodontic Information Form or letter with the provider's letterhead.
6. Completed NIHB Dental Claim Form (Dent-29), CAO Standard Orthodontic Information Form, Standard Dental Claim Form, Association des chirurgiens dentistes du Québec (ACDQ) Dental Claim and Treatment Plan Form, or computer generated form.
7. Client/Parent/Legal guardian dated appeal letter with signature (must include client name, date of birth, band, and family number).

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and

Native Voice One *www.NV1.org*

For more information, email: *DrDeRose@CompassHealth.net*