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## From the Director: Another Outstanding Pow Wow!

Our 2013 pow wow was a huge success! We were able to provide nearly 1500 health screenings to people free of charge! Our main purpose for our pow wow is providing these health screenings so that people can take charge of their health. If you participated in our screenings, we may have told you that we will

be contacting you, depending on your results. Expect someone from our team to contact you this summer if you're one of those people. We will be calling to see if we can be of assistance to help you get the medical care you need. Always feel free to call us to ask us for help finding low cost medical care or to help you navigate the health system. We are here to help with that!



**Men's Golden Age**

- 1st: Wayne Pushetonequa
- 2nd: Sidney Keanna
- 3rd: Tim Robinson

**Women's Golden Age**

- 1st: Annamae Pushetonequa
- 2nd: Carmen Clairmont
- 3rd: Karen Wahwasuck



# Our 2013 Pow Wow was a huge success!



Drum contest - 1st: Meskawki Nation



Drum contest  
2nd: Omaha Standing Eagle



Drum contest  
3rd: Urban Crew



Women's Buckskin  
1st: Charish Toehay  
2nd: Denise Tiger-Haury  
3rd: Jamie Jon Whiteshirt



Women's Cloth  
1st: Darryl Monteau  
2nd: Erica Moore  
3rd: Denise Lawrence



The 7th Annual AIHREA   
**ONE POWWOW**  Our Nations Energies  
 Health and Wellness



**Women's Fancy Shawl**  
 1st: Bobbi Lynn Frederick  
 2nd: Nahmi Lasley  
 3rd: Naomi Nevaquaya



**Men's Northern Traditional**  
 1st: BJ Haury  
 2nd: Shanan LeRoy  
 3rd: Tribly Wahwasuck

**Men's Grass**  
 1st: Freddy Gipp  
 2nd: Tokeya Richardson



**Women's Jingle**  
 1st: Ryanna White  
 2nd: Winona Kingbird  
 3rd: Kelly Walker



**Men's Fancy**

- 1st: Canku One Star
- 2nd: Tyler Laslay
- 3rd: David Tyndall

**Men's Chicken**

- 1st: CC Whitewolf
- 2nd: Isaiah Stewart
- 3rd: Brady Tapedo



**Men's Southern Straight**

- 1st: Eagleboy Whiteshield
- 2nd: BJ Moses
- 3rd: Robert McClellan, Jr.



**Junior Girls' Buckskin and Cloth**

- 1st: Latesha Robertson
- 2nd: Xochitlh Vargas
- 3rd: Jamie Colvin

**Junior Girls' Fancy Shawl and Jingle**

- 1st: Alicia Scholfield
- 2nd: Star Her Many Horses
- 3rd: Shaundeen Smith





The 7th Annual AIHREA **ONE** POWWOW

Our Nations Energies  
Health and Wellness

**Hand Drum**

**1 Person Hand Drum**

- 1st: Jason Kingbird
- 2nd: Tyler Lasley
- 3rd: Sonny Boy Downing

**Hand Drum**

**2 Person Hand Drum**

- 1st: Mikey Sioux & Sofie Teller
- 2nd: Butch & Rone
- 3rd: Rob & Chico

**Junior Boys' Traditional and Straight**

- 1st: Tristan Lasley
- 2nd: Brycen Whiteshirt
- 3rd: Misan Clairmont



**Junior Boys' Grass and Fancy**

- 1st: Tyrin Lasley
- 2nd: Sonny Boy Downing
- 3rd: Daniel Scholfield



Drum contest Group Picture: Meskawki Nation, Omaha Standing Eagle and Urban Crew.

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# AIHREA Partner News

## Center for American Indian Studies

This winter gave us plenty of snow days; campus closed a little more than usual. Now that it is spring, the trees are budding and the flowers are blooming. The change of season also signals a change of projects. Final edits to the Codetalker video are being completed. It should be available for purchase by

the end of the summer. The summer newsletter will have information on how to obtain a copy. And, planning for our community garden is underway!

Start your vegetable seeds at home and when they sprout, grow them in the AIHREA community garden, located

on the Johnson County Community College (JCCC) campus. JCCC has given us a small patch of land to have a garden on campus. Contact Ed Smith at [edsmith@jccc.edu](mailto:edsmith@jccc.edu) or 913-469-8500, ex. 4570, if you are interested in participating.



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## Cultural Health through Language: “Family”

**Cherokee:** sidanelvhi ႳႬႬႬႬ

**Dakota:** Tiwahe (immediate family) or Tiospaye (extended family)

**Lakota:** t'iwa'he or Tiospaye

**Umonhoniye (Omaha):** ti uzhi

**Ojibway:** Inodewisiwin

**Osage:** tsi-wa-zhu

**Quechua:** Ayllu



# Healthy Living: Healthy Things to Do as a Family

Healthy living encompasses several different areas of health: nutrition, physical activity, emotional and social health, and adequate sleep. In today's fast-paced society, attending to these areas can be challenging for busy families. However, it is necessary for us to manage our schedules and make time for healthy activities that can be done as a family so that we can raise healthy families.

### *Healthy activities for nutrition:*

Children of all ages love to help and to create. Children love the idea that they are "cooking", and one way to get them to eat more fruits and vegetables is to have them help prepare meals. Small children can be given the job of cleaning fruits and vegetables by running water over them in a colander, and pulling leaves and stems off soft fruit or vegetables, or pulling leafy greens into smaller sections. They are also good at adding cut-up ingredients to salads or bowls, or putting the toppings and shredded cheese on homemade pizza.

Children learning how to handle cutlery can use a toddler knife to dice soft fruit or vegetables. And let children use their creativity to come up with their own healthy concoctions. Making smoothies with children and letting them pick the fruits and vegetables that will go in the blender not only will get them used to consuming fresh or frozen produce, but will give them exposure to eating fruits and vegetables in several different and very appetizing ways.

### *Healthy activities for physical activity:*

The current recommendation for children and adolescents is 60 minutes per day of playing/physical activity and for adults 50 minutes per day of

moderate activity.

During the spring season, finding a local nature center or walking trail is a wonderful thing for kids and adults. Children love to explore any new area, and being with your kids in a scenic area won't feel like exercise to adults.

Bike riding together, swimming at an indoor or outdoor aquatic center, or just going to a playground and playing with your kids are wonderful ways to be active together. Kids love to run, and if you are a runner then running with your children is a very rewarding experience (keeping in mind that a child's running pattern is typically run for a short distance, then walk and explore, then run another short distance, etc.). When weather keeps us indoors, video games that encourage physical activity such as a Wii Fit®, or Kinect®, are fun to do as a family. Just Dance® and the different sports themed games can be done as a group and are fun for both children and adults. If you attend and dance at powwows, putting on powwow music and dancing with your kids can be a great workout and a lot of fun.

*Healthy activities for social and emotional health:* Eating dinner as a family at the table has been shown to increase communication and facilitate healthy eating behaviors among family members. Establishing a nightly routine



prior to bedtime for all family members can improve the length and the quality of sleep for children and adults. Lack of sleep can cause an increase in hunger during the day, lower energy levels, reduced ability to concentrate, and lower ability to manage stress in both adults and children. Eating as a family and establishing a nightly routine will help parents stay engaged emotionally and socially with their children, which is vital to the health of the family.

As with any changes, pick one or two ideas to implement and learn how to fit it into your busy schedule. The rewards of managing the health of your family far outweigh the challenges of time management.

## Spotlight: AIHREA Member

### Myrietta Talawyma



Myrietta is Hopi and Ioway and grew up in Lincoln, Nebraska. She has been married for 14 years. Myrietta and her husband have one son and many nieces and nephews. Her family enjoys spending time together. As the youngest member of a large family, she understands the importance of family and community.

Myrietta is a Research Associate and the Resource Manager at the Center for

American Indian Community Health. Myrietta's passion for her community is evidenced in the work she does at CAICH. She advances the community's knowledge of the harmful effects of recreational smoking through community education sessions. Myrietta's enthusiasm for serving her community can be seen at many CAICH community events. In addition to her work in the community, Myrietta served as the Facilitator Trainer for the quit smoking program: All Nations Breath of Life (ANBL).

Myrietta cultivates relationships with members of the Native community and encourages participation in public health research. She educates the community about research and the research projects currently being conducted at CAICH, which are focused on improving the quality of health care and development of healthier lifestyles for Native people.

Myrietta brings her culture and principles of respect and honor to CAICH. She shares her experiences with the

team with the hopes of helping others develop understanding and lasting relationships with the Native community. She wants people to recognize that Natives are an important asset to the community and their input is invaluable to our programs.

Her parents taught her that high expectations will result in the setting of strong goals and the achievement of those goals will result in the successful fulfillment of her expectations. Myrietta's parents always encouraged her and her siblings to set their own expectations and not to let society or anyone else dictate them.

In her free time, she enjoys traveling throughout the United States singing and dancing. The best part of being at the drum or a dance is that the clock stops and she can take time to relax and enjoy being with Native people. For her, singing is true enjoyment.

## Spotlight: Youth Ambassador

### Curt Pahmahmie

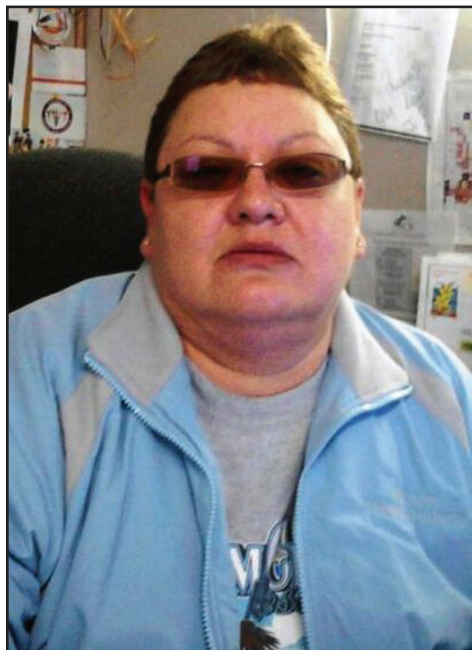


Curt Pahmahmie is a member of the Citizen Band Potawatomi Nation. His tribal name is Che-Jah-Kose "Little Crane", which originated from his grandfather Peter Pahmahmie in the year 1855. He was born in Topeka, KS, and has 3 sisters and 1 brother. Curt's daughter is Kennedy Pahmahmie and his wife is Renee. He is a Haskell graduate and he obtained his Bachelor of Science with a major in Business

Administration. He is currently in the MBA program at University of St. Mary's. Curt aspires to be the Vice Chairman of his tribe after graduation. He hopes that his siblings attend Haskell so that they too can learn the heritage and culture of our ancestors.

# Spotlight: ECAB Member

## Bobbi Darnell



Bobbi Darnell is a Kickapoo Tribe in Kansas tribal member. She is the Treasurer on the Kickapoo Tribal Council and the liaison for the Kickapoo Nation Health Center, Law Enforcement, Four Tribes Cancer Project, Head Start Program, and the Kickapoo Fire Department.

She graduated from Northeast Kansas Technical College in Atchison, Kansas, with her LPN. She attended Highland Community College and received her AA degree in Accounting. She graduated from the University of Kansas with her Early Childhood Development degree. She is currently attending the University of Kansas for Public Administration.

Not only is Bobbi an Executive Community Advisory Board member, but she also is a member of the Executive Steering Committee for the Unity 54 project.

When Bobbi is not working, she enjoys spending time with her husband, Robert, and her children, Dylan and Devyn. She loves reading, music, and going to concerts.



*To partner and collaborate with American Indian peoples, nations, communities, and organizations to improve the physical, mental, emotional, and spiritual well-being of American Indians throughout the U.S. through quality participatory research and educational programs.*

## Upcoming Events

Friday, July 19, 2013 - Sunday, July 21, 2013:

Kickapoo Tribe in Kansas Pow Wow at the Kickapoo Pow Wow Grounds in Horton, KS.

Grand Entry: Friday 7:00 pm, Saturday 1:00 pm & 7:00 pm; Sunday 1:00 pm.

Admission is only \$5 for ages 12 and up. Show your Kickapoo Tribal ID and get in FREE! For more information, please contact Sharon Doxtator and Kathy Wewenis at 785-486-2131.

If you would like us to attend your event, please contact our Community Outreach Manager, Angel Cully at [acully@kumc.edu](mailto:acully@kumc.edu) or 855-552-2424 ext. 1191.

**Please check our website for Upcoming Events:  
[www.aihrea.org](http://www.aihrea.org)**

# Research Results: Barriers to Colon Cancer Screening among American Indian Men Age 50 and Over

## Colon Cancer At-A-Glance\*



Colon cancer is the second leading cause of cancer-related death in the U.S.



On average, your risk is about 1 in 20, although this varies widely according to individual risk factors.

50+

90% of new cases occur in people 50 or older.



People with a first-degree relative (parent, sibling or offspring) who has colon cancer have two to three times the risk of developing the disease.



There are currently more than one million colon cancer survivors in the U.S.

\*Source: American Cancer Society

American Indian men have some of the highest rates of colorectal cancer in the US and have some of the lowest screening rates for colon cancer.

American Indians are often diagnosed at later stages of colon cancer, which is less treatable. There may be cultural factors that influence why screening rates are so low among American Indians. For example, American Indian men and women have reported barriers to healthcare that include a lack of Native clinicians and few elders who can serve as role models for screening. Our goal was to identify reasons why American Indian men were not getting screened for colon cancer so that we could develop a culturally appropriate program to increase screening rates.

We conducted five focus groups with 29 American Indian men age 50 and over.

What we found:

- Most men had general knowledge about colon cancer learned mostly from television, community events, print materials, and family.
- Barriers to screening varied.
- Negative perceptions of doctors and the health care system affected willingness to get screened.
- Colon cancer was mostly discussed with doctors.
- Men believed that traditional perspectives must be acknowledged.

Privacy and embarrassment were discussed a lot. Some participants suggested that screening messages would be more acceptable if they acknowledged traditional practices. Most of the participants used the Indian Health Service (IHS) for at least some type of healthcare even if they had other forms of health insurance. Many IHS clinics rely on “contract health” to provide special-

ty services (including colonoscopy) at other facilities. This system provides access to advanced services not otherwise available. However, the process can be complex and having to navigate an additional system may deter someone from getting screened.

Many men in our study were supportive of colon cancer screening and early detection. Participants stated that generic messages may not be effective for American Indians. They wanted screening programs that were delivered by American Indians, at culturally accessible venues, and addressed barriers found in American Indian communities.

We are working with our community partners to develop interventions in response to these concerns.

# Understanding Research:

## What are focus groups and why do we do them?

You may have seen us advertise a project where we ask for focus group participants. What are focus groups anyway? Focus groups are just one technique that we use to get people's thoughts and opinions about a particular subject. Focus groups provide group consensus on a topic. This is different than an interview because an interview explores an individual's opinion. It is important to know the views of community members that may not be captured otherwise; surveys do not allow for explanation.

Also, researchers can see how people react and respond to what other people say in a group setting. The interaction among participants is important for understanding the topic being discussed. This allows researchers to see how people feel and talk about a particular topic. The interactions among participants also allow other focus group participants to exchange ideas with one another. The discussion that may occur during a focus group could lead to different ideas. This would not be possible in an interview. Lastly, a focus group may create an environment where people are more comfortable talking about things in a group. Depending on the topic, some participants may feel more at ease in a group setting versus meeting with a researcher to do a one-on-one interview.

How do researchers prepare for a focus group? What is the process? Several steps are needed for a successful focus group:

1. *Design a sampling frame.* This means that researchers think about how to group individuals based on the question they are trying to answer (i.e., female smokers, female non-smokers, male smokers, male non-smokers). Usually, researchers look at demographic factors (like age or gender) they want represented in the groups.
2. *Develop a moderator's guide.* A moderator's guide is a list of topics or questions that will be asked during the focus group. The moderator's role is to guide the dis-



cussion and the participants take the lead in interacting with one another over a given topic. Usually, there will be three or four topics discussed in a typical 60-minute focus group.

3. *Find a moderator.* A moderator is someone who is familiar with the research topic and trained to conduct focus groups. Moderators will meet with the research team to make sure they are on the same page and everyone knows what they are doing.
4. *Plan, plan, plan.* A lot of planning goes into a focus group. For example, a place needs to be arranged and approved, food needs to be ordered (if part of the event), who will run the group needs to be determined, and what materials will be needed must be planned.
5. *Recruit participants.* Researchers use a variety of ways to advertise, e.g., word-of-mouth, posters and flyers, e-mail listservs, community advisory boards, etc.
6. *Conduct the group.* The goal is to have six to ten people participate in the group. Researchers want this number of participants because less than six limits the range of opinions and responses and more than ten can make it hard to have a good discussion. Often, there will be an assistant moderator who takes notes, runs the equipment, meets with participants who arrive after the group has begun, and helps with other tasks.

# Would you like to participate in our research?

**Tell us what Native identity means to you:** Native 24/7 is a research project in which we are currently looking for people to participate. In Native 24/7 we conduct interviews over the phone with participants from around the country in an effort to understand the diversity of Native identity. Participants in these interviews must be 18 years of age or older and must self-identify as American Indian or Alaska Native. Participants will receive a Native 24/7 hooded sweatshirt for their time. For more information about participating in these interviews, contact the Center for American Indian Studies at (913) 469-8500, ext. 4823 or sign up online at [www.native247.org](http://www.native247.org).



**Native Touch to Screen:** The Native Touch to Screen Project is a National Institutes of Health (NIH) funded grant that aims to improve colon cancer screening rates among American Indians. We are looking for self-identified American Indian men and women who are between the ages of 50 and 75 and are not currently up-to-date on their colon cancer screening. This means you have not had a colonoscopy in the last 10 years or a fecal occult blood test (FOBT) or blood stool test in the last year. As part of the study, participants will be given information about colon cancer screening and their screening options using a computer education program. All participants will be offered the screening test of their choice, free of charge. Participants will also receive a \$20 gift card for completing the session. About 90 days after participants complete the computer education, they will be asked to complete a short telephone survey (15-20 minutes). They will receive another \$20 gift card via mail for completing the survey.



For more information, contact Angela Watson at 913-945-6675 or [awatson@kumc.edu](mailto:awatson@kumc.edu).

# Would you like to participate in our service programs?

**Healthy Homes:** Would you like to know if there is anything in your home that can harm you? As a service to the Native community, we provide FREE Healthy Homes inspections. We will send our trained staff to your home to show you things that may be harmful and what you can do to correct any problems. If we find major problems, we can help you get into programs that will correct the problems at low or no cost. If you are interested, please go to our website to sign up: [www.caich.org/greenation](http://www.caich.org/greenation) or call us at 1-855-55CAICH, ext. 1212.

**Traveling Screening Clinic:** Would you like us to provide health screenings or tests at your event? Since 2007, we have provided thousands of free tests for several highly preventable or treatable conditions. We travel to events at your invitation and we offer a range of health screenings specifically designed to address the health needs of the American Indian community. Some of the tests we provide include diabetes screenings (blood sugar and Hemoglobin A1C), foot checks for diabetics, fitness assessments (body mass index, body composition, etc.), heart health assessments (cholesterol, blood pressure, etc.), lung health, child and young adult physicals, screening for Alzheimer's Disease, and more! We also bring physicians with us to answer any questions you may have. We are always looking for new screenings to offer. Suggestions are very welcome! To schedule a screening event, please contact Angel Cully at [acully@kumc.edu](mailto:acully@kumc.edu) or 913-945-7049.



*AIHREA members working at our screening clinic.*