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It seems like only yesterday that I agreed to put forth my name for President and was elected by the general AAIP membership to serve as AAIP President for 2013-2014. I have served on the AAIP Executive Board in a number of leadership roles and have some experience being part of the AAIP Executive Board team. I would like to thank Dr. Nicole Stern for her hard work as AAIP President for 2012-2013. She has set the bar very high and I hope to carry on her four key focus areas that she established at the beginning of the year. The four key areas of focus are Financial Stability, Membership, Scholarship and Education. With the continuity and experience of the new Executive Board, I hope to move these key areas forward.

The Board of Directors for this year, whom I am privileged to work with are: Andrew Haputa; Walt Hollow; LeeAnna Muzquiz; Shanda Lohse; Stacey Jolly; and Nicole Stern. These AAIP members are a group of experienced and motivated health care professionals that are dedicated to AAIP and improving the health status of American Indian/Alaska Native communities. I look forward to a very productive and successful year for AAIP.

We hope to continue to carry out the collaborations and partnerships that were established in the past year with AAMC, 4 Corners Alliance, NB3, Nike N7 and the University of Minnesota. We will work toward establishing other collaborations and partnerships with other schools and major Native organizations with the same goal in mind to recruit and retain American Indian/Alaska Native students into health professions.

Fund raising is key to achieving financial stability for AAIP and I will continue to focus on this task. There are so many ways to assist AAIP in this effort by making small donations through the AAIP website. Referring potential donors to the AAIP website is something that you can do to help the organization. The AAIP is also a CFC agency that can generate donations through federal work sites. Some good news is that AAIP recently received a 5-year cooperative agreement from Centers of Disease Control and Prevention that certainly is helpful to bringing more jobs and funding to AAIP.

Next year’s annual meeting will be held in Denver, Colorado from July 22 thru 27, 2014. More information can be found at www.aaip.org. Hope to see you in the Rocky Mountains this summer.
At the recent AAIP Annual Meeting, Dr. Andrew Haputa was elected President Elect and will assume leadership of AAIP in August 2014. Dr. Haputa is an enrolled member of Cherokee Nation. He completed his undergraduate work at Lenoir-Rhyne College in 1996, where he graduated Magna Cum Laude in Biology. Prior to completing his undergraduate work, Dr. Haputa served as a Petty Officer in the United States Navy. He graduated from the University of North Carolina, Chapel Hill School of Medicine in 2000. In 2005, he completed his residency at the University of Washington School of Medicine. During medical school, Dr. Haputa received many distinguished awards, such as the Edwards Hobgood Distinguished Scholarship, a four-year academic merit scholarship; The Michiko Kuno Outstanding Research Award, and the Merck Award for Outstanding Student Contributions to the Medical School. He was published in The Journal of the North Carolina Academy of Sciences in 1997 and in The Medical Journal of the University of North Carolina in 1998. Dr. Haputa received his license in 2004 and now practices in Burien, Washington. as a general surgeon. He is a member of the American College of Surgeons and The Harkins Surgical Society of the University of Washington. Dr. Haputa is committed to helping others enter the health profession and serves as an advisor and mentor at the University of Washington’s Medicine Wheel Society.

Dr. Andrew Haputa, President Elect

Dr. Adriann Begay, AAIP President, extends a special invitation to AAIP members, partners, students, tribes, government agencies, state health departments, Native health programs and anyone interested in Indian health issues. This year’s meeting will feature speakers on a number of health topics and issues. The conference will focus on recruitment and retention of American Indian/Alaska Native students into health professions. Exhibitors and sponsorship opportunities will be available plus, a women and men’s retreat, Pow Wow and cultural night. The conference dates are July 22-27, 2014, and will be held at the Hyatt Regency Denver Tech Center, 7800 East Tufts Ave., Denver, Colo. The Hyatt Regency Denver Tech Center, is located 24 miles from the Denver International Airport (DIA), has extended a special room rate of $135 per night for single/double occupancy. The hotel is located at the corner of I-25 and 225 highway, a short walk to the Light Rail that takes you right to the heart of downtown Denver and near many of Denver’s attractions. For more information visit www.aaip.org.

AAIP’S INCOMING PRESIDENT FOR 2014-2015

At the recent AAIP Annual Meeting, Dr. Andrew Haputa was elected President Elect and will assume leadership of AAIP in August 2014.

Dr. Haputa is an enrolled member of Cherokee Nation. He completed his undergraduate work at Lenoir-Rhyne College in 1996, where he graduated Magna Cum Laude in Biology. Prior to completing his undergraduate work, Dr. Haputa served as a Petty Officer in the United States Navy. He graduated from the University of North Carolina, Chapel Hill School of Medicine in 2000. In 2005, he completed his residency at the University of Washington School of Medicine. During medical school, Dr. Haputa received many distinguished awards, such as the Edwards Hobgood Distinguished Scholarship, a four-year academic merit scholarship; The Michiko Kuno Outstanding Research Award, and the Merck Award for Outstanding Student Contributions to the Medical School. He was published in The Journal of the North Carolina Academy of Sciences in 1997 and in The Medical Journal of the University of North Carolina in 1998. Dr. Haputa received his license in 2004 and now practices in Burien, Washington. as a general surgeon. He is a member of the American College of Surgeons and The Harkins Surgical Society of the University of Washington. Dr. Haputa is committed to helping others enter the health profession and serves as an advisor and mentor at the University of Washington’s Medicine Wheel Society.
AAIP members elected to serve on the Executive Board for 2013-2014 include: Shanda Lohse, MD, (Standing Rock Lakota) Secretary; LeeAnna Muzquiz, MD, (Salish/Kootenai) Treasurer; and Walt Hollow, MD, (Sioux/Assiniboine), Member At Large. These members bring with them a wealth of experience and knowledge and we welcome them back. Nicole Stern, MD (Mescalero Apache) remains on the board as the Immediate Past President.

Dr. Stacey Jolly has been elected to serve on the AAIP Executive Board as a Member At Large. Dr. Jolly received her undergraduate degree from California Polytechnic State University in San Luis Obispo, California and her medical degree from Stanford University School of Medicine. She completed her residency in Internal Medicine at the University of California San Francisco (UCSF), San Francisco General Hospital Primary Care Program and an academic medicine research fellowship at UCSF. She is currently on faculty at Cleveland Clinic Lerner College of Medicine and a Staff Physician in General Internal Medicine with the Cleveland Clinic in Cleveland, OH. During medical school, Dr. Jolly served on the Association of Native American Medical Students Executive Board as Secretary and helped publish a quarterly newsletter to the ANAMS membership. Dr. Jolly was also active in a number of organizations and community service projects during her medical school years. Dr. Jolly has been active since her acceptance into AAIP by participating in student activities and presenting at pre-admissions workshops and sessions during the annual meeting. Her goal is to assist and support other American Indian/Alaska Native students in entering the field of medicine.
AAIP was recently awarded a 5-year cooperative agreement from the Centers of Disease Control and Prevention, Office for State, Tribal, Local and Territorial Support (OSTLTS). The grant is in regard to **Building Capacity of the Public Health System to Improve Population Health through National, Nonprofit Organizations**. The purpose of the program is to ensure the provision of Capacity Building Assistance to optimize the quality and performance of public health systems, the public health workforce, public health data and information systems, public health practice and services, public health partnerships, and public health resources.

AAIP will provide capacity-building assistance, working toward sustaining and improving the performance of the public health system in Indian Country. Capacity-building assistance refers to methods for sharing knowledge, developing skills, and creating institutional systems and capacity. These methods may include training, technical consultation and services, information packaging and dissemination, and technology transfer activities.

AAIP will be working with a number of organizations and consultants regarding ten projects that address various health areas such as colorectal cancer screenings, grant writing training, capacity building for tribal health departments, Native public health course for schools of medicine, STD prevention, and intervention success stories in Indian Country.

For more information on this and other AAIP programs please visit the AAIP website: www.aaip.org.

**Patty Iron Cloud National Native Youth Initiative Sparks Australian Aboriginal Health Pathways Program**

One of the international partner organizations in the Pacific Region Indigenous Doctors’ Congress (PRIDOC) is the Australian Indigenous Doctors’ Association (AIDA). They held their annual symposium October 2-6 in Canberra, Australian Capital Territory. AAIP member Dr. Terry Maresca was one of their overseas guests. As with the AAIP annual meeting, the AIDA symposium brought together Aboriginal and Torres Strait Islander physicians, medical students, and community partners to discuss issues relevant to Indigenous health.

Dr. Kali Hayward and Ms. Jasmin Hunter gave a talk about AIDA's inaugural **Murra Mullangari Pathways** program for high school students considering a career in health professions. This program had over 200 applicants for the 25 slots available. It was directly inspired from AAIP's own National Native American Youth Initiative (NNAYI), which was publicly acknowledged during the talk. Back in June 2011, Dr. Hayward, AIDA President Peter O'Mara, and AIDA's chief executive officer Mr. Romlie Mokak came to Washington, D.C. to participate in NNAYI activities. They met with AAIP staff and members to discuss program logistics, and returned home with a plan to create a program built upon their own cultural strengths and community partnerships.

There is a pressing need to increase the Aboriginal and Torres Strait Islander health workforce in Australia, as health disparities for Indigenous people there far exceed the challenges we face today in Indian Country. We at AAIP are honored to help support the efforts of our relatives and colleagues across the ocean to achieve their dream of a healthier nation.
The National Program to Eliminate Diabetes-Related Health Disparities in Vulnerable Populations project seeks to reduce morbidity and premature mortality by working with community-based coalitions to reduce the risk factors that influence the burden of diabetes. One way of achieving our goal is to strengthen our partner communities by equipping them with the knowledge of general diabetes information, understanding the complications of diabetes, and steps that can be taken to live a full, healthy life.

We have the pleasure of working with the Kickapoo Tribe in Kansas, United Houma Nation in Louisiana, and the urban Native population in Southeast Michigan. Our Community Outreach Specialist in each location has utilized various National Diabetes Education Program (NDEP) publications at community-wide events. Those include the following:

- Take Care of Your Heart. Manage Your Diabetes.
- Ten Ways American Indians Can Prevent Type 2 Diabetes
- The Diabetes Epidemic Among American Indians and Alaska Natives
- Tasty Recipes for People with Diabetes and Their Families
- American Indian/Alaska Native Fat & Calorie Counter
- Diabetes, You Could Be At Risk (online self test)
- 4 Steps to Manage Your Diabetes for Life
- Help a Loved One with Diabetes
- Tips to Help You Stay Healthy
- Know Your Blood Sugar Numbers
- The Power to Control Diabetes is in Your Hands
- Take Care of Your Feet for a Lifetime
- We have the power to prevent diabetes
- Small Steps. Big Rewards. Your GAME PLAN to Prevent Type 2 Diabetes

In an effort to continue our support of NDEP, we included the “Know Your Risk. Small Steps. Big Rewards” tagline on various incentive items that have been distributed within our partner communities, Annual Meeting & Health Conference, CFC campaign events, as well as other conferences and events sponsored by other AAIP partners. As a part of the American Indian/Alaska Native NDEP workgroup, AAIP has been able to provide input into the newly released “Living a Balanced Life with Diabetes: A Toolkit Addressing Psychosocial Issues for American Indian and Alaska Native Peoples”. Several of our member physicians requested this resource at our 42nd Annual Meeting, and a survey will soon be shared to gather feedback on their use of this toolkit. If you are interested in exploring any of the resources listed above and other offerings by NDEP, please visit the website at [http://ndep.nih.gov/publications/index.aspx](http://ndep.nih.gov/publications/index.aspx).

For questions or more information contact: Heather Levi or Jamie McDaniel at AAIP #405-946-7072.
The beautiful Bay Area of California and ancestral homelands of the Muwekma Ohlone Tribe was the setting for AAIP’s 42nd Annual Meeting and National Health Conference which was held on July 29 - August 4th, 2013 at the Hyatt in Santa Clara, CA. Over 250 people were in attendance to hear a wide range of presentations and speakers from various parts of the United States and Canada. AAIP President Dr. Nicole Stern chose the conference theme based on her personal and professional goals of expanding fitness and sports programs across Indian Country to focus on the importance of physical fitness and a healthy lifestyle.

The first two days of the conference were heavily student focused with a Pre-Admissions Workshop (PAW) for undergraduate and graduate students regarding the admissions process to medical school. Through a partnership with AAIP, the University of Minnesota, Duluth and the Center of American Indian and Minority Health PAW is an effort to increase the number of American Indian/Alaska Natives (AI/AN) to medical school or health professional school. AI/AN students were selected from throughout the United States to receive a scholarship to come to the Pre-Admissions Workshop and also to attend the annual meeting and national health conference.

The second day provided a new pilot one-day student seminar Accessing Health Professional Careers and was co-sponsored by the University of Nevada. Students that were invited to attend this one-day event were those students who have an interest in health careers but are undecided. The seminar was well attended with 27 students who heard presentations over various topics related to medical and health profession schooling opportunities which included the Four Directions Summer Research Program, Summer Medical and Dental Education Program (SMDEP), and post baccalaureate program and research opportunities available through the National Institutes of Health.

Thursday, August 1, 2013
Thursday morning activities were jam packed with a number of events starting out with a Women’ Retreat held at the beautiful Hakone Gardens located in Saratoga Hills that is made up of a variety of waterfalls, hillside and strolling gardens, koi ponds and other elements of Japanese culture. Jeri Brunoe facilitated this event and the women who attended were treated to a tranquil environment and peaceful serenity. In keeping with the conference theme, alternative retreats were available to other conference participants that included a Golf Clinic with Native American professional golfer Alexandra Shulte and a Tennis Clinic led by Craig Pasqua, a United States Tennis Association certified tennis instructor. The alternative retreats were well attended and everyone enjoyed the events.

"Promoting Wellness in Native American Communities Through Exercise, Disease Prevention, and Traditional Healing"
The morning activities were followed by an Open-
ing Luncheon with a Blessing provided by the lead-
ers of the Muwekma Ohlone Tribe and Welcome
Address by AAIP President Nicole Stern. The pre-
sentation of the AAIP Physician of the Year Award
to Dr. DeeAnn DeRoin was one of the highlights of
the luncheon, recognizing Dr. DeRoin’s many contri-
butions to AAIP and community health. The second
highlight was the recognition and celebration of
Margaret Knight’s 25 years of service to AAIP that
included a slide presentation and presentations by
AAIP members Dr. Theresa Maresca and Dr. Gerald
Hill. Dr. Eric Brodt sang a special honor song for
Margaret at the conclusion of the luncheon.

Following the luncheon, the afternoon plenary ses-
sessions were convened with a special presentation
by Rosemary Nelson (Pit River Tribe), Tribal Lead-
ers Diabetes Committee Member for the California
Area regarding the Survival of the Special Diabetes
Program for Indians, A Call to Action for American
Indian Physicians. Evan Adams, MD, MPH, Deputy
Provincial Health Officer for Aboriginal Health, pro-
vided a keynote presentation, *Health Governance in
British Columbia – A Tripartite Agreement with First
Nations at the Fore*. Dr. Adams is a Canadian actor,
playwright and medical doctor, best known for his
role in *Smoke Signals* as Thomas Builds-the-Fire
and several other movies and TV roles.

Thursday was completed by the Presidential Recep-
tion honoring Dr. Nicole Stern’s year as President of
AAIP. Food, a silent auction and entertainment was
the highlight of the evening and featured MATOU
for an indigenous music experience.

**Friday, August 2, 2013**
The Morning Fitness Activity: Cardio-Sculpt Class,
lead by Maile Jachowski, MD (Native Hawaiian)
started out the day’s activities.

A poster session and competition was held during
the conference with 12 posters that were displayed
for the judging with topics ranging from Energy
Drinks and Kids, Protecting Our Youth Through
Policy & Perseverance, and Natural Helping In a
Personal Social Network.

The morning keynote addresses by Darlene Kitty,
MD, (Cree) President of the Indigenous Physicians
Association of Canada and Dr. Yvette Roubideaux,
MD, MPH, (Rosebud Sioux Tribe) started the day’s
activities. The afternoon session included both
plenary and concurrent sessions on topics related
to Child Health Disparities, Obesity and Chronic
Disease Prevention, Native Behavioral Health and
Diabetes. Friday’s activities concluded with a Cul-
tural Night that included a wonderful look at the
culture and dances of the Pomo Dancers of Sonoma
County lead by Joe Salinas who is a Pomo Kashia
tribal member. They were very excited and happy
to share their dancing with conference participants.
The Traditional Apache Social Singing and Dancing
concluded the evening’s activities with conference
attendees joining in the dancing. AAIP President
Dr. Nicole Stern’s family ended the night with a
traditional Apache “throw out” with goodies being
thrown to the audience.

**Saturday, August 3, 2013**
The morning began with the conference 5K Run
and 1 Mile Walk for all conference attendees. Nike
N7 Ambassador Alvina Begay lead the 5K Run and Gina Marie Scarpa, CEO of the NABI Foundation leading the 1-mile walk. After the run, attendees celebrated their accomplishments with the post Run/Walk breakfast and awards ceremony.

After breakfast, attendees were asked to proceed quickly to hear the first keynote presentation by Mr. Billy Mills (Oglala Lakota), Olympic Gold Medalist in the 10K race in Tokyo, Japan in 1964. Mr. Mills showed a video of his winning the 10K race and followed it with his presentation *Controlling Diabetes: It’s the Journey, Not the Destination*. It was the consensus that even though many of the attendees have seen the video and heard Mr. Mills speak before, it was still an overwhelming and powerful message. Plenary and concurrent sessions were part of the morning and afternoon schedules on topics such as Native Health Research, Special Diabetes Program for Indians, Native Communities in Academic Medicine, Weight Loss & Fad Diets, Mammography Screening among AI/AN Women, Emergency Preparedness, and Holistic Diversity.

Luncheons on Friday featured a Physician/Student networking lunch and a presentation by ACP Physicians from UC Davis School of Medicine. ACP, Stoklos and Marshall Foundations were the sponsors for this luncheon. A more casual setting with a Box Lunch sponsored by the American Diabetes Association, Awakening the Spirit, Kelly Concho-Hayes, MEd and Eternity Health Care was provided to conference attendees.

The annual AAIP Gourd Dance and Pow wow ended the day’s activities and events. The event was open to the public and over 300 – 400 people came for the evening dance and competition.

**Sunday, August 4, 2013**

To continue with morning fitness activities for conference attendees was a Hawaiian Yoga Class conducted by Maile Jachowski, MD (Native Hawaiian).

The conference schedule for Sunday morning was plenary sessions on topics such as the role of culture in medicine, building resiliency, healing properties of native communities, using community-based participatory research and finally a closing luncheon featuring Judith Kaur, MD (Choctaw/Cherokee) speaking on the *Potential for the Affordable Care Act and the Indian Health Care Improvement Act to Reduce Cancer Health Disparities*.

The overall conference goal was to provide an innovative conference setting that would stimulate discussion, sharing and learning of scientific knowledge, research on minority health and health disparities, American Indian and Alaska Native cultural wisdom, and Native driven models of health and wellness that will inform health policy, chronic disease treatment and prevention, and health programs designed to promote exercise, health and wellness of AI/AN people. Additionally the conference promotes and supports AI/AN people entering medical and health research fields and practicing in AI/AN communities. By all reports and conference evaluations, the conference goal was achieved and it was a great success.
The tribe is small but highly organized. Mashantucket Pequot Tribal Nation has propelled itself from the depths of poverty to its current position since federal recognition was restored in 1983. Honoring cultural tradition along with the integration of modern American society, the Mashantucket Pequot continue to embrace opportunities to give back to the community and promote the ethical and cultural values central to the Tribe. The Tribe’s efforts are centered on organizations that echo tribal values and those which embrace and promote the social stability and economic growth both locally, and on the state and national levels.

The Mashantucket Pequot Tribe of Connecticut is located on approximately 1250 acres in New London County in Southeast Connecticut. The Mashantucket Pequot Tribe is a small but industrious tribe that has around 300 of its enrolled 800 members living on the reservation. The Tribe, which had federal recognition restored in 1983, has become one of the most economically stable tribes in the country. The tribe has long been focused on the health of all Native Americans living in Connecticut. Since 1984, the Mashantucket Pequot Tribal Nation (MPTN) Tribal Health Services has operated the only health clinic for Native Americans in Connecticut that provides primary medical and outreach services that include traditional and culturally appropriate services.

PUBLIC HEALTH PROBLEM

Mark Samos has been involved with the health and cancer program with the Mashantucket Pequot Tribal Nation since 2001. He recalls the beginning quite vividly. An Eastern Pequot Leader (and 2 time cancer survivor) began calling and asking for exploration, analysis and action on what she thought was a big issue, cancer. She was persistent and her calls were weekly. Mark quickly realized that there was no Native American cancer programming; even outside cancer resources for Native Americans in Connecticut were scarce to non-existent and there were no culturally appropriate educational materials. Further, there was no Native American specific cancer survivorship education program in the Northeast. With the cancer rate reported as the second leading cause of death for Native Americans, the Mashantucket Tribe undertook to create a program that would meet the needs of tribal members and Native Americans in Connecticut.

DEVELOPING THE PROGRAM

Through a series of community meetings in 2005, Samos’ office realized that the community was interested in developing a coherent, culturally appropriate cancer information and support network. They received a planning grant from the Spirit of Eagles in 2006 and immediately got to work with the community on developing a strategy, and in 2006 the Northeast Tribal Cancer Advisory Board was established.
To get the program running, the tribe sought out and partnered with regional cancer boards such as Connecticut Cancer Partnership and the New England Division of the American Cancer Society. The tribe has since achieved partnerships with Komen for the Cure Connecticut and Boston University. Both the program and the Mashantucket community highly value establishing partnerships, and therefore, work very closely with their partners to expand and develop the project into a successful venture.

**PROGRAM DESCRIPTION**

The Mashantucket Pequot Wellness and Cancer Program works to coordinate cancer control efforts of the Tribal Nations in the Southern New England states of Connecticut, Massachusetts and Rhode Island with plans to expand the project throughout New England. The program provides the tribal populations with culturally-relevant cancer survivorship education materials, while helping them to foster connections between Native cancer survivors and the broader community through the “Families Together” project.

Working with the Connecticut Cancer Partnership and the American Cancer Society the program has developed and implemented the “Cancer Wellness and Prevention Circles” for Connecticut Native Americans. They worked with existing cancer informational and educational tools, did surveys and held focus groups to adapt the materials and create culturally specific materials. Cancer survivor stories were recorded digitally to create an archive for future generations, also available to researchers. Their goal was to have thoroughly documented records of cancer survivors in an archive that was easily accessible.

The program provides an intergenerational learning site where individuals can share stories of cancer survivorship, health, illness and related behaviors, with current and future generations. They have activities designed to reduce gaps in health outcomes and ease the burden of cancer on individuals and their families. They provide the communities with events that focus on cancer awareness and screening for Native Americans in the Northeast, and educate on the correlation between early detection, treatment and survivorship.

**OVERCOMING STUMBLING BLOCKS**

The program start-up was not without its obstacles. When the program started they encountered problems with the lack of data on Native Americans and cancer. Once they started the cancer survivor archive they were faced with time constraints, and project team members ended up working longer hours than anticipated. They sought out expertise in archiving and were able to secure a small grant to continue with their collecting and depositing stories in the archive.

Funding has been the biggest challenge for the tribe. Many philanthropic organizations do not understand how tribal systems work, particularly when it comes to tribal sovereignty and funding. With persistence, perseverance and hard work, the tribe was able to secure grants and partnerships to finally overcome the problems with funding.

Geography was also an issue for the program. Many of the communities were geographically dispersed and getting them together proved difficult. Initially, the program was designed as a Mashantucket Pequot Tribe center-based model but it needed to be modified to enable access by other rural tribes interested in the program. They tackled this problem by taking meetings, events and activities out to various groups and communities throughout New England.

**ACCOMPLISHMENTS AND IMPACT**

- Tribal Nations in the New England states have a heightened awareness of cancer prevention, screening, treatment options available and undergo screening and testing.
- By providing culturally-relevant cancer survi-
worship education materials and events to the tribal population and fostering connections between Native cancer survivors and the broader community, individuals have increased knowledge of cancer survivorship needs, resources and access to resources. Tribal members are able to seek out and access resources.

- Participants reported lower levels of stress and anxiety and a feeling of “positive supportive relationships [that] help with all aspects of healing”.
- Through surveying and working with providers, they have raised cultural awareness and sensitivity and providers are more open to special needs of Native Americans seeking care.

Mark Samos stated five things that make it work:
- Community driven, ongoing involvement and oversight
- Supportive Tribal Council
- Dedicated manager with a strategic vision
- Early partnership with state government, funders and cancer focused organizations
- Staff willing to put in extra effort to realize the project

CONCLUSIONS/LESSONS LEARNED

In terms of advice to others, Mark Samos advises on:
- The importance of a flexible and inclusive process that has community buy-in and tribal council support.
- The importance of understanding the tribe-specific health behaviors and learning needs of participants. Knowing the culture of community organizations is important.
- The value and importance of establishing early partnerships and networking with state, regional, federal and local programs.
- Essential to have a highly committed team to work with.

“Don’t be discouraged,” Mark stated, “even if one participant shows up, carry on. One person can outreach and help to educate more.” He went on, “This has truly been a partnership, any tribe that tries to do it on its own, will be surprised, it won’t fly. You really need the communities.”

Contact:
Markos Samos, MA, LPC
markwsamos@gmail.com

Written by Dr. Doris Cook

Dr. Cook has 35 years experience with American Indian and Alaskan Native communities. Her focus is on Indigenous policy development; program and organizational management; program evaluation; public health planning and research ethics.

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Dr. DeRoin has been involved with AAIP since she was a member of ANAMS (Association of Native American Medical Students). As an AAIP member she has made presentations on behalf of AAIP and represented the organization at PRIDOC, the Pacific Region Indigenous Doctors’ Congress.

Dr. DeRoin has 20-plus years of family medicine experience. She earned her Master’s degree in public health education from the University of California at Berkeley and received her medical degree from Stanford University. After completing her residency in family medicine, she served as Clinical Director at Haskell Indian Nations University Health Center (then Haskell Indian Junior College). Dr. DeRoin spent 8 years at the University of Kansas Watkins Student Health Center as staff physician before returning to the Indian Health Service at Haskell in 1998. As of fall 2008, she is providing weekly family medicine and women’s health services for the Kickapoo Tribe in Kansas.

Since 2001, Dr. DeRoin has been a consultant in community health to states, tribes, American Indian organizations, such as the National Indian Women’s Health Resource Center, Native American Cancer Research, and private foundations, including the Prevent Cancer Foundation. She works primarily in the areas of diabetes, cancer, HIV, women’s health and cultural competence.

In addition to her family medicine and community health work she is the clinical editor of Relay Health’s “Adult Health Advisor.”

Most recently Dr. DeRoin was asked to be the community health consultant for the AAIP’s new CDC Vulnerable Populations grant to work with 3 American Indian communities to improve management of type 2 diabetes. The project is working with coalitions in each of three communities with the goal of creating policy and/or environmental changes designed to change behaviors and improve care in order to prevent diabetes complications.

Dr. DeRoin is presently working with the Kansas Department of Health and Environment to improve cancer data information flow between the four reservation tribes of Kansas and the Kansas Cancer Registry.

Dr. DeRoin is a member of the Ioway Tribe of Kansas. She was a founding member and first president of the Four Tribes Women’s Wellness Coalition, serving the Ioway, Kickapoo, Prairie Band Potawatomi and Sac and Fox Tribes, the four reservation tribes of Kansas.

As a family physician and health educator Dr. DeRoin is a member of the Association of American Indian Physicians, the American Academy of Family Practice and is board-certified in family medicine by the American Board of Family Medicine.

In November, 2010 Governor Parkinson appointed Dr. DeRoin to the Kansas Health Information Exchange Corporation, established to link all medical providers in Kansas electronically by 2014.

In 1997 Dr. DeRoin was named the William I. Koch Outstanding Kansas Woman of the Year. In October, 2008 she was recognized as a “Woman Who Makes A Difference” by the International Women’s Forum.
UPCOMING AAIP EVENTS 2014

AAIP/FOUR CORNERS ALLIANCE PRE-ADMISSION WORKSHOP
April 10-12, 2014
Hosted by the University of Utah, Salt Lake City, Utah.
The two-day workshop for pre-health students that focuses upon skills necessary for successful application and admittance to a health profession school.

22nd ANNUAL CROSS CULTURAL MEDICINE WORKSHOP
April 25th - 26th, 2014
Hotel Santa Fe
Santa Fe, New Mexico
Check with www.aaip.org for application information.

DATA INTO ACTION WORKSHOP
April 24, 2014
8:00 a.m. – 5:00 p.m.
Hotel Santa Fe
Santa Fe, New Mexico
AAIP and its partners will provide a one-day training that will focus on using data to conduct community needs assessments in AI/AN communities. The free workshop will be held in conjunction with the Cross Cultural Medicine Workshop April 25-26, 2014 in Santa Fe, NM.

NATIONAL NATIVE AMERICAN YOUTH INITIATIVE (NNAYI)
June 21st - 29th, 2014
Washington D.C.
Check with www.aaip.org for application information.

43rd ANNUAL AAIP MEETING & NATIONAL HEALTH CONFERENCE
July 22-27, 2014
Hyatt Regency Denver Tech Center
7800 East Tufts Ave.
Denver, CO
Hotel information
https://resweb.passkey.com/go/AAIP2014