



FIRST THINGS FIRST



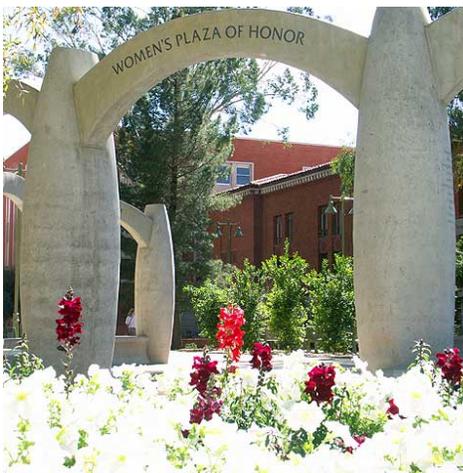
TRIBAL NOTES E-BULLETIN

May 2012

FTF Tribal Affairs (FTF news related to tribes and tribal communities)

T.E.A.C.H. Early Childhood® and Child Care WAGES® 2012 National Professional Development Symposium

This month, First Things First participated in a panel discussion to share information about T.E.A.C.H. in Arizona's tribal communities at the T.E.A.C.H. National Professional Development Symposium in Chapel Hill, NC. The panel also featured presentations from staff representing the National Center on Tribal Child Care Implementation and Innovation, Administration for Children and Families Child Care Bureau and the Association for Supportive Child Care (home of T.E.A.C.H. Early Childhood AZ). Discussion topics included the who, what, where and how of early childhood education in tribal communities; and, the governmental resources that support tribal child care (including how the money flows and how services are integrated); and how T.E.A.C.H. and higher education are collaborating to help make education available to tribal communities. First Things First was represented on this panel by Travis LeDuc, Regional Director of the Tohono O'odham Nation Regional Partnership Council. Travis was able to share information about how First Things First works with tribes to implement T.E.A.C.H.



Lucille Watahomigie (FTF Hualapai Regional Partnership Council Member) and Veronica Homer (FTF Colorado River Indian Tribes Regional Partnership Council Member) Honored by the University of Arizona

The University of Arizona honored the contributions of the women of tribal nations in Arizona on April 13th at the Women's Plaza of Honor on campus. The effort to recognize Native American women began in 2007 with the formation of a committee including women from several tribal nations. The committee contacted each tribe in Arizona to request that the tribal government identify women from their nation to honor on the arch. The Women's Plaza of Honor publicly and permanently celebrates women who have made significant contributions to the history of Arizona or have enriched the lives of others. Each of the 22 federally recognized tribes in Arizona wanted to be included, agreed to participate and nominated women or a woman from their tribe to honor. Honorees on the arch were chosen by each tribal government and reflect a wide range of women's contributions across many fields, including politics, public health, language and cultural preservation, traditional arts, education and family. The Hualapai Tribe chose to honor Lucille Watahomigie and the Colorado River Indian Tribes honored Veronica Homer for their many achievements and contributions to their communities.

Articles of Interest (local and national information/articles relating to early childhood development in tribal communities)

Indian Health Service (IHS) Programs Support Vulnerable Children

PREVENTION & RECOVERY: A Quarterly Newsletter for Indian Country, Spring 2012

According to the 2010 report on child maltreatment published by the Administration on Children, Youth and Families, American Indian and Alaska Native (AI/AN) children are victims of child abuse and neglect (CAAN) at a rate of 11.0 per 1,000, the third highest rate of victimization after African-American and mixed-race categories. Research suggests that child abuse is related to an increased risk for developing adverse physical and mental health outcomes in children. The Adverse Childhood Experiences (ACE) study shows a strong and graded relationship between adverse childhood experiences and adverse health outcomes in adulthood. The following further illustrates the importance of CAAN among AI/AN children:

- More than 3.6 million reports of suspected CAAN were received in 2010, averaging 10,000 reports per day
- Abused or neglected children in the age range of birth to one year had the highest rate of victimization at 20.6 per 1,000
- Reported cases were nearly equally represented by boys (48.5 %) and girls (51.2 %)
- Rate of fatalities from abuse and neglect was 2.07 per 100,000 children (1,560 children), averaging four deaths per day as a result of CAAN
- Victims of CAAN also were exposed to other risk factors in the home, including caregiver domestic violence (25.7% of cases), caregiver alcohol abuse (11%), and caregiver drug abuse (18%)
- More than 7,000 AI/AN cases of CAAN are reported annually, averaging 19 cases per day
- American Indians, Alaska Natives, and Pacific Islanders are overrepresented in the number of child victims of CAAN, accounting for 1.7% of total child fatalities from abuse and neglect

To effectively address this Indian Country public health problem, IHS professionals are working through agency initiatives, as well as in collaborating with law enforcement, social services, and other stakeholders at the community level, in the development of a coordinated prevention, early intervention, and treatment response to CAAN.

Domestic Violence Prevention Initiative (DVPI)

DVPI projects are utilizing the Strengthening Families curriculum, which teaches parenting skills, children's life skills, and family life skills. For example, elders have shared their knowledge and wisdom on how essential healthy relationships are to making strong families. The projects also are using the Safe Dates curriculum, which helps youth recognize the difference between caring supportive relationships and controlling, manipulative, or abusive dating relationships. In addition, DVPI projects collaborate with Child Advocacy Centers to provide advocacy, clinical services, and prevention education for children and families to deter child abuse.

IHS Child Maltreatment Policy

The IHS is developing a child maltreatment policy as a stand-alone chapter in the DHHS Indian Health Manual that will outline operating procedures and protocols for child victims of abuse and neglect. The policy will be a foundation for IHS-managed hospitals and clinics to develop standards of care for victims of child maltreatment.

Child Maltreatment Training – Child Adolescent Referral and Evaluation (CARE)

The IHS is sponsoring regional trainings in the CARE multidisciplinary team (MDT) model. This training will provide a foundation for collaborative efforts in the evaluation of alleged cases of child abuse. The unique benefits of a team-based approach will be presented from the perspective of medical, psychological, law enforcement, and victim services and social services perspectives. In addition to an overview of the CARE model, roles of specific team members will be discussed and case examples will be presented for instructional purposes. Breakout sessions will be held for medical, mental health, victim services and social services, and law enforcement MDT members of MDTs.

1 U.S. Department of Health and Human Services, Administration for Children and Families, Administration on Children, Youth and Families, Children's Bureau. (2010). *Child Maltreatment 2010*. Retrieved from <http://www.acf.hhs.gov/programs/cb/pubs/cm10/>.

2 Springer K. W., Sheridan J., Kuo D., Carnes M. (2003). *The long-term health outcomes of childhood abuse: an overview and call to action*. *J. Gen. Intern. Med.* 18, 864–870.

3 Felitti, V. J., & Anda, R. F. (1997.) *The Adverse Childhood Experiences (ACE) Study*. Centers for Disease Control and Prevention. Retrieved from <http://www.cdc.gov/ace/index.htm>.



New Native Language App Starts Small, With Animal Names in Four Tongues

By Leeanne Root-Indian Country Today Media Network-
April 23, 2012

A new American Indian language app hit the iTunes store January 20 that features translations of animal names from English to

Diné, Lakota, Mvskoke and Ponca. The menu screen offers a choice of four languages. Once a language is chosen, a short list of animals appears from which to choose. Clicking on the animal produces a photo of the animal, the English and Native language word for that animal and a button that allows the user to hear the word pronounced in the Native language.

But some users have responded negatively on iTunes reviews. One commentator, spec24, wrote on February 3: “14 animals and that’s your app? Come on, do these languages some justice.” There are 14 animals represented in the app in the Lakota language; 18 for Mvskoke, 19 for Ponca and 20 for Diné. Native American Public Telecommunications (NAPT) created the app and the group’s executive director, Shirley K. Sneve, Sicangu Lakota, responded to the negative comments saying the app is “a simple start.” “We chose to start the app with animals based off research of other apps that have had success with reaching a younger audience,” explained Eric Martin, NAPT interactive media specialist. He said this app was designed and launched the same way many apps are—with room for improvement. “The model for launching a new app is to start small, get feedback and improve the app for the next release.”

Other naysayers criticized the Lakota language section, which was recorded by Phyllis Stone, a descendant of Chief Iron Shell, a peace chief of the Rosebud Sioux. Some of those critiques were harsh. One reviewer said, “It would’ve been nice if they got someone who speaks Lakota to record the Lakota section... the Lakota is just wrong. Do not use this as a learning tool. It will only harm your language education.” Another wrote: “I grew up with my grandparents whose first language was Lakota, and the person speaking Lakota was...how should I say...BAD. Sorry, but you should get someone who actually speaks the language correctly.”

Stone, who is a lecturer with the Nebraska Humanities Council and a Sundancer, said she knew participating in this project would leave her open to criticism, but it’s nothing she can’t handle. She says she learned the language from her grandparents. Her Great Grandma Annie Kills Enemy Bordeaux was her first teacher since she would only speak Lakota. Stone also learned from her grandfather, who taught her when her parents refused to teach her their language. “They were feeling backlashes from being Indian and my mom did not want me to go through that,” Stone explains. Stone continued her Lakota language education at Sinte Gleska University, a tribal college in Mission, South Dakota. She understands how some may interpret her manner of speaking the language as incorrect. “Probably I mix the old way of speaking and the ‘classroom-and-book’ way of speaking. And then I tend to almost over-enunciate because as a teacher that’s what we do—enunciate,” she says. One of Stone’s teachers at Sinte Gleska in the 1990s was Albert White Hat Sr., who told her that “everyone speaks our language differently,” depending on dialects, nuances, colloquialisms and how they learned the language.

NAPT feels that could be the cause of the discontent from some Lakota users. “Our guess is that they might say that the Lakota sounds wrong because, as you know, the Lakota language is a diverse language with different groups of Lakota pronouncing words differently. We are working to find out their exact concerns and address them,” Martin says. Despite the negative comments, Stone still sees the positive attributes of offering this app on iTunes: “As Indian people we realize that our languages are not usually taught in schools or colleges, except some

of the tribal colleges, so those of us who can need to preserve the languages by speaking them and encouraging others—other Indian people hopefully.” Other users of the app also see what NAPT is trying to do. One says in an iTunes review that they “appreciate anything and everything positive that supports our Native tongues. This is a great app for us Native people to rally around. Let’s make it stronger and better together.” The same reviewer, in response to the negative reviews, said others should “go out and make apps for your respective tongues. It doesn’t matter what you do or how you do it, so long as it’s a step in the right direction.” And that’s just what this app is, a step, or a “gateway,” as Sneve calls it. “NAPT has the option to open-up the code of the app to tribes so that they may add to it and expand its content,” Sneve says. “First though, we need to gauge interest in the app. This app can be a gateway to Native languages but it is contingent upon funding.”

The app is free and can be found by searching “Native Language App” in the iTunes store.

<http://indiancountrytodaymedianetwork.com/2012/04/23/new-native-language-app-starts-small-with-animal-names-in-four-tonques-109623#ixzz1tASbKtau>

The Silent Ones: Indians and Hearing Loss

By Julianne Jennings –March 2012

From the earliest documented times in American history, there were reports of deafness among indigenous people. In 1618, the Jesuits in America wrote to church officials inquiring whether a “deaf-mute Indian” could be admitted to the church. In seeking clarification of the church’s stance on the ability of a deaf person to learn and to demonstrate acceptance of the word of God, the pioneer Jesuits must have believed there was such potential. Two decades later, Roger Williams, a church leader and founder of the colony of Rhode Island, noted that among the Wampanoag Native children, “some are born deaf and so dumb;” and deaf Native American, Black Coyote, was one of the first, if not the first, victims at Wounded Knee.

Otitis media (inflammation of the middle ear) is the leading cause of middle-ear disease in American Indian populations; with the majority of cases occurring in young children. Episodes of middle-ear disease are often accompanied by periods of mild-to-moderate conductive hearing loss. Recent studies indicate that the auditory and educational consequences of episodes of otitis media extend far beyond its diagnosis. Numerous perceptual, speech, language, spelling, grammar, cognitive, behavioral, emotional and poor educational performance has been identified. At the age of 6, I had suffered the consequences of otitis media leaving me with unilateral hearing loss that caused me to withdraw from many school social activities. Otitis media, is characterized by an accumulation of fluids in place of the air which normally occupies the middle ear (behind the ear drum), and/or negative pressure in the middle ear resulting from poor middle ear ventilation. Yet, its actual cause, and thus prevention, is not known. However, viral infections, upper respiratory diseases, allergy, lack of health care and eustachian tube dysfunction may play a part in the problem. Methods of treatment, including decongestants, antihistamines, antibiotics, allergy treatment and surgery focus on the relief of secondary symptoms, but by no means a cure.

While many children experience occasional episodes of acute otitis media, studies have identified certain groups of children that are at high risk for chronic middle ear disease. The estimated incidence of middle ear disease in the general childhood population is around five percent, but for poor children, the incidence rate has been found to be closer to 20 or 25 percent. American Indian children have even more middle ear disease than can be explained by their relatively low socioeconomic status. In a paper, Survey of Disorders of Speech and Hearing and Ear, Nose and Throat Pathology among Children of the South Dakota Indian Population (1996), revealed a failure rate of 27 percent. In studying a cohort of 378 Alaskan Eskimo children, The American Journal of Public Health, Otitis Media and Hearing Deficiency among Eskimo Children: A Cohort Study, found two-thirds of the children had otorrhea (draining ears) one or more times. By four years of age, thirty-one percent had a unilateral hearing loss of at least 25dB. Sixty-five percent of the children with otorrhea had the first episode by their first birthday; 89 by their second. In a 1973 study, Long Term Effects of Otitis Media: A Ten-Year Cohort Study of Alaska Eskimo, of 489 Alaskan Eskimo children, found that seventy-six percent had an ear infection during their first two years. The Indian Health Service reported that: "For the calendar year 1975, there were more than 56,000 reported new cases of otitis media among American Indians . . . 65% occurred in children under five years of age."

In a 1978 pilot study at an inner city public school complex in Minneapolis, children from kindergarten through third grade were randomly selected for screening by a certified audiologist with an impedance audiometer. Results indicated that about twenty percent of the non-Indian children and nearly 50 percent of the American Indian children had evidence of otitis media. The Journal of American Indian Education (1990) Effects of Recurrent Otitis Media on Language, Speech, and Educational Achievement in Menominee Indian Children, states Head Start programs continue to report that language and speech impairment is the leading category of disability, with otitis media suspected as a contributing factor (Harris, 1986). Moreover, within school-age children, the Bureau of Indian Affairs estimates that of the children who received special educational services within BIA schools during 1983-84, twenty-four percent were classified as language-speech impaired and fifty-three percent as learning disabled. Head Start programs, schools and most importantly, educators of Indian children need to be made aware that although social-economic and cultural factors may influence educational progress, early recurrent otitis media may place a child at additional risk for normal acquisition of communicative competence, and possibly leaving them to live in a world gone silent.

Julianne Jennings, E. Pequot-Nottoway, is a Ph.D. student at Arizona State University.

http://indiancountrytodaymedianetwork.com/ict_sbc/the-silent-ones-indians-and-hearing-loss#ixzz1tAZvurmt

Upcoming Events (meetings, events, conferences etc. related to tribal affairs)

❖ **June 6-8, 2012**

Department of Health and Human Services/Administration for Children and Families (ACF) in partnership with the Centers for Medicare and Medicaid Services (CMS) is hosting a: Tribal and Native American Grantee Meeting

Hilton Alexandria Mark Center
5000 Seminary Road
Alexandria, VA 22311

For Reservations call 877-783-8258 Mention: "ACF Grantee Meeting" and Dates: June 3-8, 2012

Theme: Integrating PRIDE* and Self Sufficiency in Tribal and Native American Communities

(* PRIDE: Professionalism, Respect, Integrity, Dedication, Excellence)

Please save the dates for an exciting opportunity to come together with ACF tribal/Native American grantees to express PRIDE* in the work that you do every day to improve the lives of children, youth, families, and communities. At this conference we plan to offer cross cutting workshops and sessions that will highlight what's working in Indian Country, promising practices, and results you've achieved in partnering with ACF. Details on registration and the agenda will follow.

❖ **June 13-14, 2012**

Statewide Tribal Leaders Oral Health Roundtable, Building a Coalition for the Advancement of Oral Health in Our Communities

Location: Black Canyon Conference Center

9440 North 25th Avenue, Phoenix, AZ 85021

Host Hotel: Courtyard by Marriot

9631 N. Black Canyon Highway, Phoenix, AZ 85021, (602) 944-7373

Online

Registration: [http://www.azda.org/CE/Register.asp?i=397&d=Statewide Tribal Leaders Oral Health Roundtable](http://www.azda.org/CE/Register.asp?i=397&d=Statewide_Tribal_Leaders_Oral_Health_Roundtable).

The Statewide Tribal Leaders Oral Health Roundtable will provide an opportunity for tribal leaders to come together and build a coalition, collaboratively, which will make significant strides toward:

- Improving the delivery of oral health literacy, prevention and treatment services among Arizona's Indian communities.
- Building strategic linkages among oral health and primary care providers, emphasizing strategic collaboration among Indian communities, practitioners, decision-makers and policy-makers.
- Facilitating communication and the dissemination of timely and relevant information, knowledge, tools and resources.
- Developing and leveraging resources to advance and sustain community and culturally responsive oral health literacy, prevention and treatment strategies.

❖ **June 27-29, 2012**

28th Annual Intertribal Circle of Caring & Sharing Training Conference – "Embracing Our Past to Build a Strong Foundation for Our Children"

Wild Horse Pass Hotel & Casino on the Gila River Indian Community

Please note the following important dates:

The Conference's Early Registration (\$125.00) ends on June 1, 2011; thereafter, registration will be \$150.00. Hotel Reservation deadline is May 27, 2012. Call 1-800-WIN-GILA (946-4452) and mention the "Inter Tribal Council of Arizona" to receive the group rate of \$69.00 plus 12% tax.

❖ **July 25-27, 2012**

National American Indian and Alaska Native Child Care Institute
Salt Lake City, Utah

❖ **July 13-14, 2012**

American Indian Teacher Education Conference: Honoring Our Heritage
Northern Arizona Univ., Flagstaff, AZ

❖ **August 2-4, 2012**

For All My Relations Conference for Indian Families.

Hilton Los Angeles/Universal City Hotel

Universal City, California

For more information go

to: http://gallery.mailchimp.com/fcf27858b524c94e746bc5dcf/files/2012_Brochure_Final.3.pdf

❖ **August 20 and 21, 2012**

FTF Early Childhood Summit 2012: Keys to School Readiness—Learn, Share, Grow
(Tribal Gathering will take place during the Summit on August 20)

Sheraton Phoenix Downtown Hotel

340 N. 3rd Street

Phoenix, AZ 85004

❖ **October 18-21, 2012**

National Indian Education Association Annual Convention, Oklahoma City, OK

Resources (opportunities for Tribal Regional Partnership Councils and regional staff)

Native Asset Building Initiative Grant Application Available

Native communities are asset rich in culture and community, though many Native community members are asset poor in economic assets. Poverty among Native Americans — including American Indians, Alaska Natives, Native Hawaiians, and other Native Pacific Islanders — is more than twice the overall U.S. rate.

Many Native organizations and communities are successfully using asset building strategies to improve the economic condition of their members and communities. Two of the most frequently identified challenges are the lack of funding for such programs and the lack of

funding for providing comprehensive asset building tools. To support this important work and address these challenges, the Office of Community Services (OCS) and the Administration for Native Americans (ANA) have partnered to increase access to and awareness of asset building opportunities in Native American communities through the Native Asset Building Initiative (NABI).

OCS and ANA will accept applications to establish and administer asset building projects with a focus on the AFI program. Applications are due on June 18, 2012. Grantees will provide an array of supports and services to enable low income individuals and families to become economically self-sufficient for the long-term. OCS will fund the IDA portion of the program through AFI. ANA funds may be used to pay for costs associated with the administration of the AFI-funded IDA project and to provide other asset building strategies, such as financial literacy education and coaching on money management and consumer issues. View the Native Asset Building Initiative grant announcement at <http://www.acf.hhs.gov/grants/open/foa/view/HHS-2012-ACF-ANA-NO-0322>.

Native American Scholarship Program Available for the 2012-2013 School Year

The scholarship is funded by the Freeport-McMoran Copper and Gold Foundation and administered by the Phoenix Indian Center, Inc. It is the goal of Freeport-McMoran to create strong relationships with the students funded by this scholarship who are becoming model employees of the future. For more information visit www.phxindcenter.org. Tribes that are funded:

- Hualapai
- San Carlos Apache
- White Mountain Apache

Priority primary degree programs for funding:

- Business or business-related majors (e.g., accounting, finance, economics)
- Engineering
- Geology
- Math
- Science or science-related majors (e.g., chemistry, biology)
- Sustainability
- Technology (e.g., computer science, programming, database)

Secondary degree programs for funding:

- Education (e.g., teaching)
- Health (e.g., nursing, public health)
- Safety (e.g., occupational safety)

An orientation session will be held at the Phoenix Indian Center on May 22, 2012 at 5:30PM. Watch the PIC webpage for further announcements or email fmscholarship@phxindcenter.org regarding orientation and webinar sessions.

FREE 2-Day Grant Writing Workshop Sponsored by the Arizona Developmental Disabilities Council (ADDPC)

The workshop will provide HANDS-ON instruction and individual/small group support, offered in a computer lab setting. All participants will receive a Grant Writing Manual and a flash drive containing program documents. The workshop will enable participants to develop knowledge and skills necessary to submit competitive applications to the ADDPC. The Workshop will focus on the following:

- Assessing if your organization is ready to apply for a grant
- Assembling a work plan for a grant proposal
- Writing a scope of work
- Crafting a budget to support a project
- Creating a staffing plan and project implementation ~Learning the methods of evaluation

There are 3 Workshops Available:

<p>Flagstaff May 14-15, 2012 9:00 a.m. – 5:00 p.m. The W.A. Franke College of Business 20 West McConnell Drive, Lab #333 Flagstaff, AZ 86011 www2.nau.edu/nau-map/</p>	<p>Tucson May 17-18, 2012 9:00 a.m. – 5:00 p.m. Pima Prevention Learning Center 1346 North Stone Avenue Tucson, AZ 85705</p>	<p>Phoenix May 21-22, 2012 9:30 a.m. – 5:30 p.m. Goodwill Industries 1980 West Baseline Road Phoenix AZ 85041</p>
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To register for the Grant Writing Workshop: please contact Barbara Aguilera with the Pima Prevention Partnership at (520) 791-2711, ext. 1118 or via e-mail at baguilera@thepartnership.us

Accommodations available upon request. Seating is limited! Reservations are required. www.azgovernor.gov/DDPC www.thepartnership.us

Items to Consider:

- Registered participants must commit to attending both days of training
- Up to three participants from the same agency may attend
- Computer workstations will be provided and participants should have a basic knowledge of Microsoft Office programs
- Workshops will begin promptly at 9:00 a.m. each day
- Lunch and beverages on your own. Eating establishments are within three blocks of each site
- Travel stipends available upon need

Did You Know? (Tribal Facts)

The Inter-Tribal Council of Arizona

The Inter Tribal Council of Arizona was established in 1952 to provide a united voice for tribal governments located in the State of Arizona to address common issues of concerns. On July 9, 1975, the council established a private, non-profit corporation, Inter Tribal Council of Arizona, Inc.(ITCA), under the laws of the State of Arizona to promote Indian self-reliance through public policy development. ITCA provides an independent capacity to obtain, analyze and disseminate information vital to Indian community self-development. The members of ITCA are the highest elected tribal officials: tribal chairpersons, presidents and governors. These representatives are in the best position to have a comprehensive view of the conditions and needs of the Indian communities they represent. As a group, the tribal leaders represent governments that have a shared historical experience. Consequently, the tribes have a common governmental status as well as similar relationships with federal and state governments. ITCA is governed by a Board of Directors composed of: Presidents, First Vice President, Second Vice President, and Secretary/Treasurer. The work of ITCA staff and consultants is carried out under the direction and supervision of John R. Lewis, Executive Director. ITCA operates more than 30 projects and employs a staff of 70 to provide on-going technical assistance and training to tribal governments in program planning and development, research and data collection, resource development, management and evaluation. In addition, the staff of ITCA organizes and conducts seminars, workshops, conferences and public hearings to facilitate participation of tribal leaders in the formulation of public policy at all levels. The goal of ITCA and its commitment to the member tribes is to ensure the self-determination of Indian tribal governments through their participation in the development of the policies and programs which affect their lives

Source: www.itcaonline.com

The FTF Tribal Technical Advisory Group (TTAG) is an internal advisory body, providing expertise on policies, guidelines, and programmatic issues affecting the delivery of First Things First funded early childhood development and health programs in partnership with Arizona Tribes.