



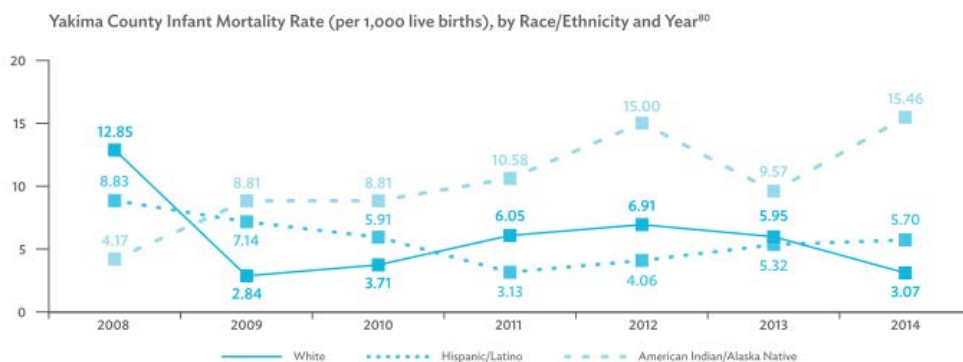
TtáwaꞤt Purpose

“Leading with our hearts”

Purpose, Mission & Vision: The purpose of the TtáwaꞤt Collaborative is to reduce infant mortality and promote healthy families within tribal communities through the implementation of community and evidence-based, wrap-around, pre- and post-natal care services that include: Centering Pregnancy®, breastfeeding education, tribal elder advisors, cultural teachings, post-partum depression services, Doula care, tele-health services for high-risk pregnancies, and a tribal-focused Nurse Family Partnership home visiting program for families on the Yakama Nation Reservation. Resiliency building programs, as well as emotional and health support strengthen maternal and infant health bonding and must be delivered in a culturally responsive way in order to improve the long-term health of women, prevent adverse birth outcomes, and reduce infant mortality. Strengthening support systems and inspiring people to build a stronger community benefits all families. The traditional family structure of tribal culture embraces family as a whole, which has dismantled structures of colonization. Tribal leaders throughout history have fought to keep their family systems intact over the course of colonization. TtáwaꞤt members work passionately and diligently to build upon the strengths and resiliency of tribal peoples, tribal cultural norms, tribal communication and tribal ways of life, bridging culture, health care and families to strengthen all Native generations. They work to disengage from historical colonial powers that can contribute to oppression, suffering, and prevent people from thriving and healing in their native manner. Families on the reservation are interconnected and intersect in many ways, especially when it comes to raising children. Together as we build strong foundations during the beginning of a child’s life through prenatal care, we help change the trajectory of the future of not only that child, but all tribal peoples for generations to come.

Fiscal Sponsor: The Yakima Valley Community Foundation, Memorial Foundation, and Virginia Mason Memorial Hospital act as the fiscal sponsor. In addition, many other organizations diligently collaborate to help support and fund the work of the TtáwaꞤt Collaborative. Collectively by listening to the voice of the community and working effectively together this work is made possible.

Other Funders Include: March of Dimes, Perigee Fund, Group Health Foundation, Private Donors, Margaret A. Cargill Philanthropies, and Centers for Disease Control & Prevention.



The Incredible Journey of Ttáwax̣t

Year 2012-2013 “No, that’s not what we need....please listen!”



The incredible journey of Ttáwax̣t began in 2013 when service providers in the Yakima community and a newly hired tribal member on staff at Virginia Mason Memorial Hospital (the only Native American at the time among more than 2,500 employees) came together to address concerns about tribal women who were pregnant and infants who were disproportionately passing away. The tribal infant mortality rate was more than twice the rate in Yakima County, higher than any other race, and more than twice the rate in Washington State. The Ttáwax̣t Collaborative started with conversations, observations, community member participation, and alarming data that indicated a health disparity that needed to be addressed. The service providers wanted to implement a Centering

Pregnancy® program right away. However the tribal member on staff, who is a trusted Native American woman in the community, urged a step back to examine the situation further, build relationships, and build capacity. There were no resources other than staff, so a search for funding began. Virginia Mason Memorial allowed their designated grant writer to begin searching and writing grants for funding. A dedicated obstetric physician at Community Health of Central Washington, had been serving the tribal population for about 15 years and noticeably recognized that tribal women were coming in late for prenatal care and struggling more than many of her other patients (data did show later that was the case). She was also on the Board of Directors for the March of Dimes and suggested we apply for funding from them to start a Centering Pregnancy® program. The tribal member at Virginia Mason Memorial did not think that was a good match and called the March of Dimes to talk about what was needed for support. They were told that Ttáwax̣t needed funding to build a collaborative team, build relationships, and collect data. The March of Dimes changed their request for proposals, Ttáwax̣t applied and received their first \$10,000 to hire a tribal member to facilitate and build communication norms, partnerships, and a foundation for the collaborative team. Ttáwax̣t current partners include: Our tribal women, Yakama Nation, Campbell Farm, Yakima Valley Community Foundation, Virginia Mason Memorial Hospital, Memorial Foundation, Community Health of Central Washington, Yakama Nation Indian Health Services, Yakama Nation WIC (Women, Infants & Children) Program, Heritage University, Astria Toppenish Hospital, and the Perigee Fund.

Knowledge Gained

- Invest in building community capacity first by recognizing the valued of lived experience and deep knowledge
- Hire staff who represent and understand the community
- Allow those staff to lead in decision making
- Support your staff in what they know is the best thing to do given their life experiences and knowledge of their own community
- Do not solely rely on data
- Funders should listen and be flexible; it took two years to spend \$10,000
- Find culturally appropriate leadership resources to support your diverse staff so they can become better leaders themselves to ensure program longevity, especially in places such as isolated rural areas that have capacity issues.

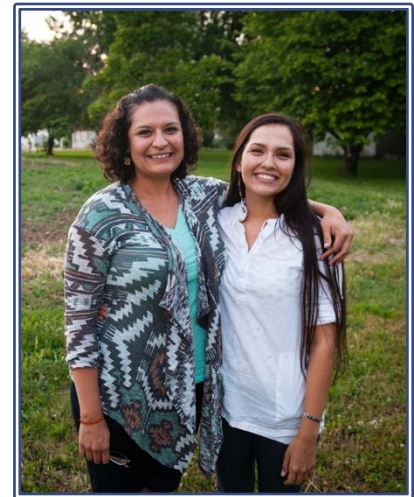


Year 2013-2014 “We are collecting data!! This is harder than we thought....”



In addition to funding from the March of Dimes, Ttáwax̄t received \$15,000 in funding from the Yakima Valley Community Foundation to launch a Community Needs Assessment study using a Community-Based Participatory Research Framework. Both grants were used for support and capacity to launch the study and for research assessment. Community members were hired and trained to collect data. Tribal women who participated in the study focus groups received incentives for their participation. The only research training that the hired tribal member from Virginia Mason Memorial had was from college and graduate school. Since there was no money to pay

researchers, no researchers were interested in participating. One PhD student did qualitative data analysis as part of her class and part of the funding was used to pay Group Health to analyze data for the group. The research project was approved through the Virginia Mason Memorial Institutional Review Board, which had experience with clinical research, but had no prior experience with community-based research, which posed many challenges due to the low-risk nature of the study. The community members who were recruited and hired were friends of the tribal member working at Virginia Mason Memorial. They were sisters who had no prior experience in research, no and were interested in making money. At that time, they did not have much interest in the project itself; however that would later change. The sisters and the tribal member from Virginia Mason Memorial collected 107 surveys and conducted 40 individual or group interviews. The community members became certified in Human Subjects Research, attended a qualitative training seminar at the University of Washington, and began diligently collecting data. It took about eight months to collect the data due to the lack of capacity, burnout, and often times the members did not have gas money up front to get to where they needed to go. This process was very difficult due to the sensitive nature of the questions asked and it caused hardship on the women collecting data. It was in those moments that bonds were formed between the community, those collecting data, and the Ttáwax̄t Collaborative service providers. Listening to the voice of the tribal community and understanding barriers to care was vital to improving health services for tribal women. Many tears were shed, and a fire was lit inside the women after hearing testimonies of tribal women, it was clear something must be done. A deeper understanding began to grow of the hardships of the women in the community. The data collected showed that 71% of women did not plan their pregnancy, more than half of women traveled 20 miles or more for prenatal care and some from rural outlying areas drove over 70 miles roundtrip, 41% lacked money for gas, 36% lacked access to a vehicle to get to medical appointments, and 17% were homeless during pregnancy. The greatest and most powerful finding of the study was that those women who had a tribal elder in their lives had no infant mortality. The sisters began to understand the importance and depth of need among our women, children, and families. Semone is still a dedicated Ttáwax̄t member and her sister Cristy will graduate from college in 2018 with a degree in environmental science. These are the sisters who collected the data and are loved by many.



Knowledge Gained

- Work to educate the Tribal Council and obtain Tribal Resolutions
- Funders need to be patient with their grantees and need to build a relationship with them to understand their struggles and needs in order to be successful.
- Provide **culturally appropriate** technical assistance and leadership for those trying to build foundations with data collection and analysis. Data collection has been imperative in gaining funding support. Not having support to do this work from an indigenous perspective was extremely difficult.
- Do not discount community members because they do not have credentials or certifications; give them the tools they need and pay them well.
- Give people the time and space they need to really develop relationships: it is not always a 9-5 job and not always supported by professional organizations (how do you put a sweat lodge ceremony on a time sheet?).

Year 2015-2016 “We are getting more people...this is great!”



We slowly started to build a name in the community due to collecting data and sharing it with as many people and partners as we could. We attended several conferences, and offered a Continuing Medical Education (CME) credit at Virginia Mason Memorial. Our team grew when a well-known elder in the community, Carman, talked about her interest in becoming a Doula. She had been in conversation with Semone when we asked to use Campbell Farm as a meeting place for Ttáwax̣t and for Centering Pregnancy® classes. Although the tribal staff member at Virginia Mason Memorial knew Carman and even lived at Campbell Farm at one time, she did not know of her dream to become a Doula. Carman was approached and offered free Doula training and was taught more about the hopes and dreams of the Ttáwax̣t

Collaborative. Semone and Carman ended up going to Doula training together. During this time, a pair of sisters, Natalie and Leslie, who were close to Semone, became interested and wanted to get involved in Ttáwax̣t. Leslie was a survey participant in 2013 and had a good experience with Ttáwax̣t and believed in the mission. Together as sisters they wanted to become Doulas and could see themselves in the community among women and children helping to solve the complexities of infant mortality. Carman, Semone, Natalie, and Leslie all delivered the first Ttáwax̣t CME credit class at Virginia Mason Memorial Hospital. They also all became certified to deliver Centering Pregnancy®. The true reason for growth was due to gaining the trust of the Native American women in the community who decided to get involved with Ttáwax̣t. We learned that trusted members of the community (in this case, members of the Yakama tribe) were able to establish a “chain of trust” where a known and trusted educated, tribal woman was able to educate and engage other tribal women and convince them of the need for comprehensive, wrap-around, culturally competent prenatal care services. Loving, cherishing, and respecting them fully with nothing but good intention was imperative. They can fully be who they are. As previously stated, tribal families all intersect and building passion among the people is the foundation for real growth.



Technical skills now exist among Ttáwax̣t team members that help with data collection, evaluation, continuous quality improvement, implementation plans, grant writing, technical writing, and planning. However, the most important jewel of all is our tribal women, their passion, drive, and willingness to serve their people knowing it will impact generations to come. Combining and valuing all skills equally, and empowering and valuing our tribal women first and foremost addresses systematic inequities, bridges two conflicting cultures, and strengthens the foundation for all tribal nations.

Knowledge Gained

- Value the community
- Truly let the community lead the way; do not micro-manage or pretend you are allowing them to lead
- As a leader your first job is to care for and elevate the people not yourself, make sure you do that to avoid falling into power structure pits.
- Be transparent, honest, loving, and supportive
- Have the difficult and uncomfortable conversations
- Be teachable and flexible
- Make sure there is someone to help with technical pieces who has cultural humility or is a community member themselves



Years 2017-2018 “Finally! The beauty is shining through the darkness.”



The community members who are now the backbone of all decision making and service delivery are still growing and finding their roles and passion for what they want to do and how they want to do it. Each member from the community has gone through tremendous personal loss, grieving and stress, and continues to do so. However, a new community was formed among each other which is a community of understanding, love, support, safety, passion, and most of all, a common mission to serve their people by providing early and continuous prenatal and postnatal care to reduce infant deaths. The team has grown into a family, and supports each other in any way possible. Ttáwax̄t has maintained its core service provider members since 2012, and now has five tribal women delivering services to the community. A full-time Nurse Family Partnership registered nurse

position was posted to provide services to tribal families on the reservation, four tribal women are delivering Centering Pregnancy® in three locations, 23 participants have now been through the Centering program, 14 healthy babies have been born, two women are in training to become Doulas, countless presentations have been given across the state and nation, and our Ttáwax̄t team inspires and contributes to the healing and education of both the tribal community and health care service providers. Their fire has been seen and heard. One community member has been inspired to become a nurse while her sister wants to becoming a nurse practitioner to ensure proper care of our women and families. Semone dreams of becoming a naturopathic doctor to provide the bodies of our families natural ways of healing. The most recent addition to the team is a tribal woman, Shannon, who moved here from California and is a certified and practicing Doula in her tribal community. She will receive childbirth, Centering Pregnancy®, and breastfeeding education. A budget of \$1.2 million dollars was estimated to be needed over three years, and all but \$166,000 has been fulfilled, so the team is just beginning on their new journey with resources in place for the first time. In May of 2018 our Ttáwax̄t community members submitted their first invoices to be paid - a pivotal moment after years of volunteering their services. The passion and diligence to educate and care for young pregnant women and reduce the infant mortality rate has never failed, even without the resources needed to provide the services that our people deserve. The time spent educating, advocating, crying, laughing, and praying is finally paying off. The dream of a Family and Birth Justice Center is at the forefront of the Ttáwax̄t dream along with a scholarship program to pay for those tribal members who want to provide medical and support services. Support from all of our community partners is imperative. Together we are making a difference.

Knowledge Gained

- Private philanthropy is where it's at!
- The solutions are in the hearts and hands of the community
- Pay your community members to do what they are already doing
- Be willing to try new things
- Find partners who have the ability to be humble and learn
- Make sure there is funding to get your community members out nationally, statewide, and locally to build awareness and advocacy
- Make sure there are training dollars available at all times
- Only use Memorandums of Understanding when you have to; trust and flexibility are equally as important
- Do not let the big organizations take over community initiatives; they will try
- Provide scholarships and pathways to those who are inspired to go back to college
- Do not wait so long to support work that is innovative; our tribal community is already tired and worn out and does not need to prove itself over and over again.
- Native Women are powerful, beautiful, and are going to change the world!



