

Mending the Hoop: A Community - University Challenge

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Abstract

The purpose of this paper is to describe a multi-agency, academic approach to American Indian persistence in higher education. By combining the American Indian cultural view, health needs, and the challenges of recruitment and retention of American Indian students, a model for success is presented. By offering the course, Promoting Wellness in the American Indian Community in an off campus, American Indian education center, we were able to establish a familiar safe setting to address the health related issues of AI students enrolled. Affordable college credits were provided as a "step to college" to possibly increase the enrollment of AI's at California State University Chico, (it's least represented population). Finally, the University was presented with the opportunity to enhance its relationship with the AI community, and a method by which to reverse the high dropout rate of AIs on its campus while maintaining high standards of academic excellence. This link between the University and a local American Indian education center is presented as an outreach model for other universities, faculty, and tribal communities.

Introduction

With the exception of some educational institutions located near reservations and the nation's 31 tribally controlled colleges (Matthews, 1999), American Indians (AIs) are almost invisible on most college campuses. Many researchers believe college campus recruiters do very little to enroll AI students and even less to retain them (O'Brien, 1991; Tierney, 1992).

Less than 40% of the AI students who graduate from high school enroll in college. Approximately 9% of those students complete four or more years of college compared to 20% of the total population (Bureau of the Census, 1998; Hodgkinson, Hamilton-Outtz & Obarakpor, 1990; Taylor, Denny, Freeman, 1999). The National Advisory Council on Indian Education reported to Congress that the programs and curriculum of non-Indian colleges and universities "...were not attuned to the special cultural needs of the Indian students." High dropout rates are attributed to the difficulty in adjusting to the college environment, cultural conflicts, financial struggles, and the lack of cultural role models. Other identified causes are racism, inadequate academic preparation, and social isolation (O'Brien, 1991).

Many AI students are rich in cultural heritage with unbreakable ties to their family and community. They tend to be quiet, less vocal, and may be unrecognized as Limited English Speakers. Dr. Rick St. Germaine, associate professor of education at the University of Wisconsin-Eau Claire, says, "Efforts are needed on the campus to ensure a welcoming climate for American

Indian students." (O'Brien, (1991). Women represent a greater percentage of AI students than their male counterparts: almost six of every ten AI students are women.

This creates a pressing need for the campus to address single parenting and childcare issues. There is a need to see these, not as conveniences, but as valid issues of necessity in order for the mother to pursue her educational goal (Evans, 1994). To often the mother's education is sacrificed to care for the needs of their children. If adequate childcare is not available, the mother invariably chooses to drop or stop out. Self-esteem issues for these women must be addressed in order for them to feel welcome and as included in campus life as other students. Also, time management concerns need to be addressed so that the mother can manage their time sufficiently to feel good about being away from their parental responsibility for the length of the school day and the time necessary to prepare for the next days work. Moreover, almost half of all Indian students attend college on a part time basis (O'Brien, 1991). Research shows that AIs who succeed in college are those who have a strong sense of cultural identity and goal, have the ability to interact effectively in both Indian and non-Indian communities, and can operate within the complexities of each (Benjamin, Chambers, & Reiterman, 1993; Evans, 1994).

Pavel (1992) asserts that achieving equity in AI participation and graduation from post-secondary institutions depends on maintaining continuity with the K-12 system. Moreover, parental involvement, belief in the relevance of education, relevant curriculum, appropriate teaching styles, promoting community

78 involvement, caring teachers and administrators, and
79 holistic early intervention programs have been
80 identified as contributing to the increase in *AI* high
81 school graduation rates. Higher education institutions
82 have been challenged to parallel these efforts (Evans,
83 1994; Pavel, 1992; Reyhner, 1992). This challenge
84 makes it necessary for colleges and universities to set
85 reasonable expectations for providing education to and
86 for the *AI* student.

87 The purpose of this paper is to describe a multi-
88 agency, academic approach to *AI* persistence in higher
89 education. Using an introductory health education
90 course offered in an off-campus American Indian
91 education center, a model for success in *AI* recruitment
92 and retention is presented. Northern California
93 demographics, previous outreach efforts, and the
94 challenges of providing familiar supportive educational
95 services to *AI* students are examined.

96 Assessment of Needs/Methods

97 California State University, Chico (CSUC), a
98 predominantly White, middle class institution serves a
99 vast geographical area covering most of Northern
100 California. The campus is located in the heart of Indian
101 country. The campus sits on land that is the former site
102 of a Mechoopda Maidu village and is surrounded by the
103 ancestral lands of the Maidu and Wintun people. There
104 are at least four Rancherias (American Indian federal
105 trust lands of 100 acres or less) within two hours of the
106 campus. Within the University's 12 county service area
107 are twenty-one Rancherias and 15,916 *AI*s (1990
108 Census). The population of Butte County is 202,140
109 with an *AI* population of 3,241 or 1.8 % of the county's
110 total. This is the second largest *AI* population in
111 Northern California. The median age of this population
112 is 24 years.

113 Further exacerbating the rural conditions of
114 distance and isolation is the economic and cultural
115 corollaries: a declining economic base and
116 comparatively few educational and cultural resources
117 compared to the rest of California. American Indian
118 families in Northern California are one of the lowest
119 socio-economic groups, have the highest school drop
120 out rates, and the poorest nutritional and health
121 conditions in the state. In California, more than 10
122 percent of all births are to *AI* teen mothers. These
123 health concerns are similar to other *AI*s in poor and
124 rural communities (U.S. Department of Health and
125 Human Services, 1997). The numbers of *AI*s with
126 diabetes, heart disease, excessive obesity, alcohol, and
127 drug related health problems and accidents leading to

128 death are abnormally high (U.S. Department of Health
129 and Human Services, 1997; Taylor, et. al., 1999). *AI*
130 youth 14 to 24 years old are among the highest risk
131 groups for fatal accidents, suicide, gang related activity,
132 alcohol and drug related deaths, teen pregnancies, and
133 tobacco abuse leading to cancer and other respiratory
134 diseases (Trujillo, 1996). According to Trujillo (1996),
135 the Director of the Indian Health Service, addressing
136 these compelling health needs requires new strategies,
137 partnerships, resources, and sources for funding.

138 While California is home to 310,000 *AI*s, the
139 largest number of Indians in any state, Indian health
140 programs only serve approximately 90,000 (Epstein &
141 Mader, 1996). There is also a great diversity among
142 Indian people even in California and the majority of
143 Northern California Indians are from unrecognized
144 tribes. Behavioral risk trends are difficult to track due
145 to small samples (Taylor, et. al., 1999), and not all *AI*s
146 use Indian health services or are eligible due to
147 terminated tribal status. Further limiting accurate
148 reporting, *AI* households without telephones make data
149 collection difficult and many Northern California
150 Indians are still wary of the government due to the
151 forced removal of Indian children to boarding schools.

152 At present, CSUC has no specific courses to
153 address the health needs of *AI* students; no retention
154 activities; and no assigned meeting rooms or any staff
155 assigned to work primarily with the *AI* students. The
156 lack of these vital services leaves the *AI* students at
157 CSUC vulnerable and at an inequitable disadvantage,
158 especially during their first year on campus. CSUC had
159 an *AI* recruiter, a financial aid officer, and a clinical
160 psychologist on staff at the time of this study. These
161 individuals, (although not primarily assigned to the
162 service of *AI* students), provided a valuable link to the
163 Indian community that resulted in higher enrollment
164 and improved retention of that group. However,
165 campus indifference to the needs of the *AI* student body
166 and the passage of California's Proposition 209, have
167 led to the abandonment of these positions. If
168 recruitment and retention are to be sustained, resources
169 are needed to develop and coordinate academic and
170 social services specifically for *AI* students. Many *AI*
171 students are unaware of or do not know how to access
172 the student services available for the general student
173 population. In the absence of specific *AI* services over
174 70% of *AI* students at CSUC flounder and exit via a
175 revolving door or drop out by their second semester.

176 The CSUC has an extremely long, non-productive
177 history relative to the recruitment of *AI* students and
178 faculty, admission, retention and graduation of the *AI*

179 population. In retrospect, the California Indian people
 180 are truly the invisible and largely forgotten segment of
 181 California's educable population. For example, in the
 182 100 plus year history of CSUC, less than 100 AI
 183 students from California's tribes have graduated. The
 184 pool of potential AI students is readily accessible to
 185 university outreach efforts and the proximity of the
 186 campus to their homes provides the familial and
 187 community support necessary for their success in
 188 college. The problem remains, however, that the AI
 189 community is not included in the university family or
 190 overall university recruitment and retention plan.

191 **Program Strategy**

192 While Butte County, California holds the second
 193 largest AI population in the North State, the formal
 194 educational system has made insignificant and sporadic
 195 progress in meeting the educational needs of the
 196 county's AI people. As members of a concerned group
 197 of faculty and staff, we struggle to find creative ways to
 198 serve AI students within the constraints of the CSU
 199 system or even have the system acknowledge this
 200 population.

201 Those in health education are trained to assess the
 202 needs of individuals and communities as a foundational
 203 responsibility of health educators. Traditional
 204 assessment typically focuses on problems, needs,
 205 barriers, and weaknesses and rarely on the strengths or
 206 assets of communities. According to Parks and Straker
 207 (1996), much of what we know about health education
 208 programming is based on communities' problems and
 209 little about its possibilities. This outreach model is
 210 built on values and traditions of this AI community and
 211 established community programs. This link between the
 212 AI community and University allowed traditional
 213 principles and foundations to be put into the classroom
 214 environment before the introduction of the rigors of
 215 academic study.

216 ***The sweat leader and doorman guide each
 217 round and tend to the needs of each
 218 participant. An exchange of trust and the
 219 ability to focus on the task at hand provides
 220 one with self-worth, value to the community,
 221 and the desire to accomplish the goal.***

222 By building a university based health education
 223 program in the AI community, students were recruited
 224 and retained by the University. This outreach program
 225 helped AI students, outside the university walls, gain
 226 access and also served as an entry point which allowed
 227 students to feel safe, accepted, and experience learning
 228 on their own terms. After months of planning and

231 finding ways to speed the admissions process through
 232 special admit status, we finally gained adequate support
 233 to develop and conduct an off-campus course
 234 'Promoting Wellness in the American Indian
 235 Community.'

236 ***This off-campus location became the
 237 sweatlodge and provided the sweat leader,
 238 door man, and fire tenders for its AI
 239 students.***

240 For the first time, capitalizing on AI community
 241 assets, the following goals were set:

- 2441) To enhance the health and academic preparation
 245 of AIs in the region;
- 2462) To recruit and retain AIs into CSUC by finding
 247 creative ways to enroll community members into
 248 higher education;
- 2493) To provide an opportunity for University staff
 250 and faculty to participate in an innovative
 251 community outreach program
- 2524) To help prepare students planning to work in AI
 253 communities by creating links with AI agencies.

254 ***The sweat leader begins to prepare the lodge
 255 long before the door opens to welcome those
 256 who come.***

257 **Promoting Wellness in the
 258 American Indian Community**

259 During the 1996 spring semester, a 3-unit, CSUC
 260 course was held for the first time at the Four Winds of
 261 Indian Education Center (Four Winds). Four Winds
 262 founded in 1989 and located in Chico, California, is a
 263 non-profit, incorporated, Indian education organization.
 264 The goal of Four Winds at the time of this study was to
 265 improve the academic achievement of Indian youth
 266 (preschool to grades K-12) as well as adult education.
 267 Additionally they strove to strengthen the bonds of the
 268 Indian community by providing an active participation
 269 program that embraced the whole family.

270 *Promoting Wellness* was selected as the first course
 271 offering because the professor who initiated the course
 272 had an expertise in AI health issues and was in the
 273 Department of Health and Community Services at
 274 CSUC. The course was also selected and revised based
 275 on the interest and need for the course in the AI
 276 community and it fulfilled a general education
 277 requirement for lifelong learning. Through additional
 278 lobbying, the adapted curriculum fulfilled an elective
 279 for the AI Studies minor thus benefiting the AI college
 280 student as well.

283 The curriculum for the course followed typical
284 wellness topics such as mental health, self-esteem, drug
285 misuse/abuse, chronic and communicable diseases, and
286 sexual health. With some research and background in
287 *AI* health, each lesson easily lent itself to integrating
288 contemporary *AI* health issues. This approach was
289 based on earlier work by Navarro, Wilson, Berger, and
290 Taylor (1997) which emphasized traditional values and
291 the role of history and spirituality as they related to the
292 health of Native peoples. For example, the conflict
293 between ceremonial and chronic uses of tobacco, the
294 myths surrounding alcohol abuse among *AI*, the impact
295 of reservation life and commodities on diet and
296 diabetes, and the legacy of boarding schools on the
297 breakdown of *AI* families and traditions were discussed.
298 American Indian specific morbidity and mortality
299 factors relating to each topic were included as well as
300 *AI* views of wellness. Projects for the course included
301 behavior change journals, alcohol critiques, reflective
302 papers, and creating traditional prevention messages
303 targeting *AI*s. These prevention messages were
304 displayed at Four Winds. Students sat in small groups
305 and the instructors of the course followed a
306 lecture/discussion format. Three surveys were
307 administered during the semester to determine chronic
308 and ceremonial tobacco use, sexual health risk, and
309 college curriculum interests/needs. The course was co-
310 led by a non-Indian professor (who developed
311 professional ties and sincere trust of the *AI* community)
312 and a local Maidu Indian. In addition to enhancing
313 cultural identification by inviting traditional healers and
314 spiritual leaders as guest presenters, *AI* community
315 leaders currently working in the health professions
316 (Indian Health Service, California Rural Indian Health
317 Board, etc.) were also invited to discuss real issues
318 facing Northern California Indians. Mayfield
319 Publishing generously donated 50 wellness texts and
320 study guides for this college course to maintain a
321 standard college experience. Limited funds were also
322 made available through Project FLINT (a family
323 literacy program) and a CSUC faculty development
324 grant for transportation, childcare and course
325 development.

326 *The Sweat Lodge Model*

327 The framework for this outreach effort comes from
328 an adaptation of the way the Wintu co-authors run their
329 family sweat lodge. First you must identify who is the
330 sweat leader, fire tender and doorman to run the sweat.
331 Basically there are four rounds each focusing on a
332 specific purpose. In this sweat lodge model it is

333 important to view the educational process and needs as
334 parts of a circle or cycle.

335 The first part of that cycle is the caring for one's
336 basic needs (e.g. Maslow). In order to learn and
337 become a part of a larger system and what that system
338 requires one must first have a safe place of belonging to
339 learn. Secondly, what needs that can be met
340 immediately and those areas that may need
341 improvement must be established. This first round
342 establishes a safe environment in which participants
343 feel free to speak up or participate. The safe
344 educational environment of this course included a
345 learning to mastery approach, combining Indian
346 students (grouping) in the same classes and providing
347 assistance as needed. In the sweat, in this first round
348 one prays for oneself. This is based on the belief that if
349 you are not well and able to help yourself "in balance"
350 you will not be able to help someone else. Therefore, if a
351 place of belonging is provided for *AI*s to learn the
352 "system" and that place is respected as valid by the
353 university community, retention and persistence rates
354 will undoubtedly rise.

355 The second phase of the program follows the cycle
356 to extend out to those family and friends closest to the
357 student in their support system. As *AI* students become
358 more comfortable within the university setting and
359 comfortable with the idea that they can survive in what,
360 for many, seems a racist, hostile environment,
361 additional classes outside the group can be set. This
362 becomes a viable option and a desired outcome. What
363 occurs, in effect, is an expansion and diversification of
364 the "Indian only" foundation by which they entered the
365 university. The second phase is further designed to
366 prepare the student for success in the university
367 environment. The students become better equipped to
368 thrive; they become a part of the larger university
369 environment and hopefully participate in a larger,
370 diverse society. In this way, as in the sweat lodge, the
371 students are able to take care of their own needs and
372 then the needs of others. This methodology does not
373 simply "cut the student loose to sink or swim," but
374 rather provides for a safe haven of entry and an area
375 where they know that they can find refuge.

376 The third phase then is the development of an
377 understanding of the student's place in the larger
378 society. During this stage, the students are provided the
379 opportunity to develop the skills necessary to be
380 responsible for their own education and their
381 acclimation (not acculturation) to the university setting.
382 The students are then ready to begin working within the
383 greater Indian community. The focus of this stage is in

384 relation to the successful interaction with people of the
 385 Indian community and *AI* institutions. In this way, like
 386 in the third round of the sweat lodge, we pray for the
 387 others who support us, the different nations: animal,
 388 four legged, winged, the swimmers and crawlers, all of
 389 the other groups who live with us. Again, this is tied to
 390 the idea that we cannot care for others until we can care
 391 for ourselves. Many university programs push students
 392 into community service without having the student
 393 capable of handling the responsibility that comes with
 394 the assignment. Through this method, the students are
 395 brought along gradually, introduced to the needs of the
 396 *AI* community, and placed so that their particular
 397 strengths and skills are highlighted.

398 The fourth stage is the closing round, the round in
 399 which we give thanks. The participant recognizes and
 400 benefits from their ability to stay all four rounds with
 401 those who entered the lodge with them. Now they will
 402 exit together knowing they are stronger and have the
 403 inner strength to make beneficial changes within
 404 themselves and their communities. Here in the sweat
 405 lodge model, the student graduates from the program.
 406 At this time, the community then comes forward and
 407 bestows back to the student what the student bestowed
 408 on the community.

409 *A World of Diversity*

410 After months of meeting recruitment and
 411 admission's standards, 48 *AI* students attended the first
 412 night class. The class was scheduled to meet once per
 413 week in the evenings. There was tremendous group
 414 diversity within in the class. Participants ranged in ages
 415 17-52 with a mean age of 26 years. Two-thirds of the
 416 class had children with a mean of 2.25 children and 70
 417 percent of the class was female. Over twenty different
 418 tribal groups were represented (Apache, Blackfoot,
 419 Cherokee, Choctaw, Chippewa, Chumash, Comanche,
 420 Hupa, Karuk, Klamath, Maidu, Mechoopda, Miwok,
 421 Navajo, Nez Perce, Nomalaki, Paiute, Pit River, Pomo,
 422 Wintu, and Wintun). Interestingly, there was an
 423 absentee rate of only 1.35 per student. Thirty-one
 424 students completed class (65% completion) and 27
 425 earned college credit. Many different factors
 426 contributed to attrition. Three women dropped due to
 427 pregnancy and one to miscarriage. Other conditions
 428 included fines owed to CSUC, unit deficiencies, no
 429 support or transportation, uncomfortable discussing
 430 sexuality issues, and family crises. Even so, the *AI* class
 431 completion rate is outstanding for a college class in the
 432 CSU system.

433 A 25-item tobacco use questionnaire and 32-item
 434 sexual risk questionnaire were administered to 32

435 students after approval from Human Subjects
 436 committee. General findings of the studies revealed:

- 437• 32 percent of the students smoked cigarettes and
- 438 the mean age of initiation was 10.3 years,
- 439• 65 percent had used tobacco as part of *AI*
- 440 ceremony and the mean age first used in ceremony
- 441 was 15.0 years,
- 442• average age for first intercourse was 15 years with
- 443 11 lifetime intercourse partners,
- 444• 72 percent were currently sexually active,
- 445• 53 percent were in a monogamous relationship,
- 446• 33 percent of the students had engaged anal
- 447 intercourse,
- 448• 75 percent had sex without a condom,
- 449• 53 percent had ever been HIV tested,
- 450• 47 percent had sex under the influence of alcohol
- 451 that they later regretted, and
- 452• 43 percent of the women had sexual intercourse
- 453 against their will.

454 This group is at risk for tobacco and sexuality
 455 related problems. Several of the students were
 456 uncomfortable discussing the sexual behavior survey
 457 results but by using these results, high-risk behaviors
 458 were made personal, relevant, and brought into the
 459 open. Concerning the issue of sexuality, *AI* people do
 460 not typically speak of sexual based issues in front of the
 461 opposite sex and rarely openly to same sex individuals
 462 outside of a particular family or clan. Yet in this
 463 particular class, a number of students did report they
 464 were sexually active and were given accurate
 465 information to maintain their sexual health.

466 Varieties of age groups as well as academic levels
 467 were represented. Four high school students, nine
 468 university students, ten community college students,
 469 four adult literacy/GED students and four "stopped out"
 470 students enrolled through Continuing Education.
 471 Another fascinating layer of the class dynamics was the
 472 inter-relationships of the class members, which
 473 included grandparents, aunts, brothers, sisters, marriage
 474 partners, cousins, in-laws, mothers/sons-daughters, and
 475 nursing mothers. There were 11 new mothers or
 476 pregnant woman in the class.

477 We attempted to find an innovative way to recruit
 478 *AI* GED and high school seniors into CSUC, retain *AI*
 479 students already enrolled, and re-enroll *AI* students into
 480 CSUC. One part of this recruitment effort was
 481 supported by the *Step to College* program. This
 482 important program removes a financial barrier by
 483 providing 3-6 college credits for \$7.00 for students
 484 currently in high school or completing a GED. The

485 *Step to College* program was designed for under
 486 represented ethnic high school students to be enrolled
 487 in a college course. We enrolled approximately 8 *AI*
 488 students who were either high school students or
 489 pursuing their GEDs. Many of the *Step to College*
 490 students do eventually attend CSUC.

491 Butte County and surrounding counties have a
 492 sizable *AI* population and promotion of this program
 493 allowed us to outreach to this untapped population as
 494 well as begin mending the hoop between our university
 495 and the community. While our current *AI* students were
 496 highly motivated to attend other courses at Four Winds,
 497 we unable find university support to offer other courses
 498 at the time. However, the local community college has
 499 since offered numerous courses at the Four Winds site.

500 Building a Bridge

501 Six agencies were involved with administering this
 502 project. They included the university offices of Talent
 503 Search for Education, Outreach, and the Department of
 504 Health and Community Services, Four Winds of Indian
 505 Education, Project FLINT (Title IX Indian Education
 506 program) and Butte Community College. We all
 507 personally and professionally committed to finding
 508 ways for building stronger connections between CSUC
 509 with the *AI* community.

510 We assessed the success of this program through
 511 student retention, course completion, course projects,
 512 new enrollments, and improved health of the students.

513 The most notable features of the program were:

- 514• all students were American Indian;
- 515• the program was offered at an Indian center;
- 516• extended family units were valued and recognized,
- 517 family members studied together and encouraged
- 518 healthy behaviors;
- 519• the teacher was perceived as caring and displayed
- 520 a sense of humor based on teaching evaluations by
- 521 the students;
- 522• students attending weekly study groups were the
- 523 most committed;
- 524• a collaborative effort was created by many
- 525 individuals as well as *AI* community programs;
- 526• team teaching with a non-Indian professor and a
- 527 local Maidu Indian to bridge the cultures was
- 528 effective, especially in the early weeks of the
- 529 course;
- 530• American Indian expertise in the health field was
- 531 presented by Terry Tafoya, and members from
- 532 local Indian health agencies;
- 533• American Indian community members were more
- 534 likely to take classes in a setting they identify as

- 535 their own;
- 536• many students needed transportation and childcare;
- 537• adult/child relationships were recognized; nursing
- 538 mothers and their babies were visible and accepted
- 539 members of the classroom environment;
- 540• students expressed interest in attending future
- 541 classes at the Center, such as: *AI* history, *AI*
- 542 literature, and child health;
- 543• students expressed interest in meeting more than
- 544 once per week to see each other more often;
- 545• group activities and individual opportunities for
- 546 community service and creativity were effective
- 547 (students created traditional health media for the
- 548 Center, such as pamphlets and posters);
- 549• a textbook company was willing to donate text and
- 550 study guides;
- 551• health is universal topic that students were able to
- 552 discuss, including personal matters in a safe setting
- 553 without feeling conspicuous and without betraying
- 554 the Indian community to a non-Native population.

555
 556 Comments offered by the students reflected the
 557 goals we had for the program. One woman addressed
 558 the importance of learning on American Indian terms:

559 *I never felt so comfortable in a classroom as*
 560 *I did in this class. Having the class held at*
 561 *Four Winds made it feel like home, and since*
 562 *it was all Indians, it felt like I was taking a*
 563 *class with my family. My friends were there*
 564 *and I would find myself not wanting to miss*
 565 *class since it gave me a chance to see*
 566 *everyone.*

567 Another young woman reflected on the relevance of the
 568 course material to her life:

569 *The course has been a tremendous help on my*
 570 *life. Over the past semester I have been*
 571 *overwhelmed with stress and depression. The*
 572 *material from the class was also very*
 573 *beneficial and could be applied right away to*
 574 *my life.*

575 Another student commented on the significance of
 576 relating to health from a contemporary *AI* perspective:

577 *I really learned from the class because it was*
 578 *put into a Native American perspective. I*
 579 *liked looking at better eating habits from this*
 580 *perspective since most Indians like fry bread*
 581 *and Pepsi. It was more comfortable looking at*
 582 *my bad eating habits with everyone else*
 583 *because we all seemed to have the same bad*
 584 *habits, except for the nutrition major Jesse.*

585 Students were able to apply classroom knowledge to
 586 their own behavior and many students were challenged
 587 by the behavior change project. Jason commented:

588 *This class helped me look at my own health*
 589 *behaviors more openly. I realized I had a*
 590 *problem with smoking and quit. Before*
 591 *smoking was a way of life for me. Some days*
 592 *I do have thoughts of having a cigarette, but*
 593 *my willingness to abstain is due to my*
 594 *traditional outlook on the use of tobacco for*
 595 *sacred purposes only. Due to this, I feel*
 596 *better mentally and enjoy feeling healthy. In*
 597 *place of smoking, I do my smudges and*
 598 *prayers everyday. On weekends, I participate*
 599 *in sweat lodge ceremonies.*

600 Louise commented on the importance of Four Winds as
 601 a safe place to discuss personal health topics:

602 *Since it were all Indians I felt comfortable*
 603 *talking about some of the issues presented*
 604 *such as sex, unhealthy relationships etc. I felt*
 605 *comfortable talking to people next to me since*
 606 *they were also Indian and could relate to the*
 607 *problems that Indians have on the reservation,*
 608 *off the reservation, and in school. I didn't feel*
 609 *like I was being judged because I had a*
 610 *dysfunctional family since most everyone else*
 611 *did too. I didn't feel like my family was being*
 612 *stereotyped as "savage Indians" just because*
 613 *we had problems.*

614 Rochanne also felt having a class at Four Winds
 615 contributed to her social support:

616 *Probably the best thing was just being able to*
 617 *discuss issues in a comfortable setting. I also*
 618 *felt like I became closer to some of the Indians*
 619 *in my class. Since we were sitting next to*
 620 *each other and talking about personal issues*
 621 *I felt like I have created a strong support*
 622 *system with people who better understood my*
 623 *situations. Talking about health and fitness*
 624 *were good. After class a bunch of us would*
 625 *go play basketball.*

626 Recruitment and retention of AI students was a goal for
 627 this course. Paul, a re-entry student now sees himself
 628 as part of the educational system and bestowed thanks
 629 as in the fourth round of the sweat:

630 *This class has given me the opportunity to*
 631 *move back into education in a way that is*
 632 *positive. I am now setting new goals that*
 633 *were unthinkable before. I look forward to*
 634 *many more healthy and safe years of living*
 635 *with the knowledge and insight I have gained*

636 *through the course. I thank you for allowing*
 637 *me this opportunity to express my gratitude*
 638 *and respect for you.*

639
 640
 641 *Now they will exit the lodge*
 642 *together knowing they are stronger*
 643 *and have the inner strength to make*
 644 *beneficial changes within*
 645 *themselves and their communities.*
 646 *Thus, the sweat lodge closes and*
 647 *preparations are made within the*
 648 *circle for another day.*
 649

650 By offering the *Promoting Wellness* course, we
 651 began to address the health of the AI students enrolled.
 652 Affordable college credits were provided as a step to
 653 college. Weekly tutoring sessions provided at both Four
 654 Winds and Berry Creek Rancheria were initiated.
 655 CSUC worked toward developing a better reputation
 656 with the AI community. Enrollment of AIs (the least
 657 represented population), increased at CSUC during this
 658 semester. An attempt was made to reverse the high
 659 dropout rate of AIs on the CSUC campus while
 660 maintaining standards of excellence. This link between
 661 the University and Four Winds serves as a model for
 662 other universities to adopt for increasing their visibility
 663 within other AI communities and local Indian education
 664 centers.

665 **Conclusion**

666 The mission of the many universities as well as
 667 CSUC is to attract students from underrepresented
 668 groups and to be involved in regional projects as well
 669 as collaborating with K-14 students and educators.
 670 Also developing culturally diverse teaching examples
 671 enhance the University's commitment to cultural
 672 diversity. This outreach example addresses all of these
 673 goals.

674 American Indian communities must band together,
 675 identify universities willing to provide an education,
 676 understand the rights given to Indian people, and make
 677 universities cognizant of barriers facing Indian people.
 678 Instead of defining the problems in terms of low
 679 achievement, high attrition, poor retention, and weak
 680 persistence, thus placing the need for adjustment on the
 681 students, the institutions themselves must be held
 682 accountable. Kirkness and Barnhardt (1991) challenge
 683 the higher educational system to respect AI students for
 684 who they are, that is relevant to their world view, that
 685 offers reciprocity in their relationships with others, and

686 that helps them exercise responsibility over their own
687 lives. Health education is a good place to start.

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