



BETTER CHOICES
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 GOOD & HEALTHY SOUTH DAKOTA COMMUNITIES



Breakout Session I
Chronic Disease Partners Meeting
 Mitchell, SD

Cultural Consideration for BCBH-SD in SD Tribal Communities

10.12.22

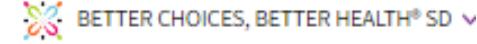
Come Together.
WORKSHOPS
 by BETTER CHOICES, **better health**[®]



BCBH-SD Come Together Workshops Website



ABOUT ▾ RESOURCES ▾ EVENTS ▾ FUNDING ▾ KEY DATA ▾



Adapt for Native Culture

As a community advocate you already realize the importance of empowering communities to make decisions that promote personal health and well-being. Incorporating culture can enhance the experience and improve results of BCBH-SD workshops. We encourage the use of cultural practices alongside workshop curricula.

Following are some ideas on how to tailor your workshop to fit your community. If you have ideas, questions, or need technical assistance please [contact us](#).

Explore traditions & beliefs by customizing workshops



In Native culture, health is defined as a balance of physical, mental, spiritual, and emotional aspects. We encourage you to **Find Wicozani**. Ceremonies and kinship practices are important aspects of Lakota/Dakota culture. These elements can weave together with the BCBH-SD workshop curriculum for a more robust and satisfying learning experience.

Each BCBH-SD workshop group can customize the activities that speak to them. Some ideas to consider include:

Location

- Choose a traditional or historical site for workshops
- Make sure the site is azilya friendly for sage or sweetgrass
- Make sure the room is large enough to accommodate prayer or learning circles

Supplies

- Make traditional gifts available or consider incorporating crafting, beading, or creating artwork before, during, or after the workshop
- Prepare or supply traditional foods

Blessings & Prayer

Incorporate traditional blessings such as:

- Smudging—Burning sage/sweetgrass, pulling the smoke over you as you pray
- Caŋŋnuŋŋpa—Prayer with traditional pipe and tobacco practices including caŋŋsasa
- Use traditional names

Activities for Self-Management Education Workshops

Traditional language introductions and greetings include answers to questions like: Where are you from? Who is your Family? What tribe are you from? Or the meaning of your name. These can be spoken or written on cards. Also recognize that Tiyospayes (families) from other tribes may introduce themselves with their clan or band.

Mind/body connection/distraction—use a traditional activity, like the rock and fist game, for distraction before, during,



Workshops

Register for a Workshop

- Self-Management
- Physical Activity

Adapt Workshops

Native Culture

About Workshops

- Workshop FAQs
- Lead a Workshop

BCBH SD

- About Us
- Our Program
- Contact Us

BCBH-SD Come Together Workshops Brochure



With respect and in partnership with tribal leaders and representatives statewide, Better Choices, Better Health® SD, SDSU Extension, Great Plains Tribal Chairmen's Health Board, and the South Dakota Department of Health encourage the use of cultural practices alongside BCBH®SD workshop curriculum. Incorporating culture can enhance the experience and improve results.



BCBHSD workshops are FREE and designed for adults living with chronic health conditions who want to:

- Better manage symptoms
- Improve quality of life
- Boost overall mood & health

Our 6-week small group sessions are available in-person and online and can help participants (and their caregivers) build confidence, find community, learn new skills, and positively address a wide range of health conditions including:

- Arthritis
- High blood pressure
- Cancer
- Depression/anxiety
- Diabetes
- Breathing problems
- Heart disease
- Weight concerns

Explore traditions & beliefs

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- Use traditional names



Activities

Traditional language introductions and greetings include answers to questions like: *Where are you from? Who is your family? What tribe are you from? Or the meaning of your name.* These can be spoken or written on cards.

Mind/body connection/distraction—use a traditional activity, like the rock and fist game, for distraction before, during or after the workshop. Use a plum or chokecherry for mind/body connection.

Action planning can be introduced by encouraging cultural activities such as researching your lineage or chief, learning a new traditional phrase, prayer, song, game, or activity. These can be incorporated into the workshop itself or as challenge done outside of the sessions and reported back to the group.

Physical activity—learning or rekindling your connection to traditional exercise such as dance, traditional lacrosse, double ball, horseback riding, hunting, harvest, canoeing, or archery can improve physical and emotional health and help keep you balanced.

Good night's sleep—At the end of the workshop, drink hot soup or tea to help with sleep. Listen to flute music, traditional song or sing a prayer song.

Choose your workshop & register today!

SELF-MANAGEMENT EDUCATION

Chronic Conditions

Designed to help adults manage their health and improve their quality of life

Diabetes

For adults with pre-diabetes, type-2 diabetes, a family history of diabetes

Pain

For adults living with everyday pain that impacts daily living

Cancer

For adults living with a cancer diagnosis, newly diagnosed, in recovery or remission

PHYSICAL ACTIVITY

Walk With Ease

A community-based walking program designed to encourage participants to maintain a successful walking program. Workshops include health education, stretching, and group or self-guided walking.

Fit & Strong!

A community-led evidence-based fall prevention program designed to help participants exercise safely, improve daily function, and manage joint pain and stiffness. Workshops include a multi-component approach, with flexibility, strength training, aerobics, health education, and group discussions.

For the Better Choices, Better Health® South Dakota program, we adhere to AAEPD guidelines in offering educational programs and services. Better Choices, Better Health®SD is used with permission as a licensed and trademarked program from Self-Management Resource Center.

BCBHSD workshops provide a proven framework and curriculum, but workshop leaders and participants can choose the format and the skills or activities the group feels will best help them be healthier.

Here are a few personal reflections from some who have attended our workshops:

Steve
DIABETES WORKSHOP
"I lost a daughter to diabetes recently, so I share the diabetes information, like the plate method. I am so impressed with the program and the book. I have shared with community members too."

Dawn
CANCER WORKSHOP
"Five-week action plan: making a ribbon skirt for my niece's graduation."

DeAnna
CANCER WORKSHOP
"I really enjoyed the class, it was very fun and very knowledgeable."

Come Together. WORKSHOPS

by BETTER CHOICES, better health®

Real Results from Indian Country

- 80% of Diabetes workshop participants reported better quality of life.
- 80% reported they are encouraging healthy habits and sharing information with family and friends.
- 100% reported implementing learned skills:
 - MORE PHYSICAL ACTIVITY
 - FEELING LESS STRESS
 - BETTER MANAGEMENT OF DIABETES

Register for a workshop today!
1-888-484-3800
goodandhealthysd.org/bcbh/register

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GOOD & HEALTHY SOUTH DAKOTA COMMUNITIES

Find Wicozani
In Native culture, health is defined as a balance of physical, mental, spiritual, and emotional aspects.



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Adapt Evidence-Based Interventions to Fit a Population

Evidence-Based Decision Making



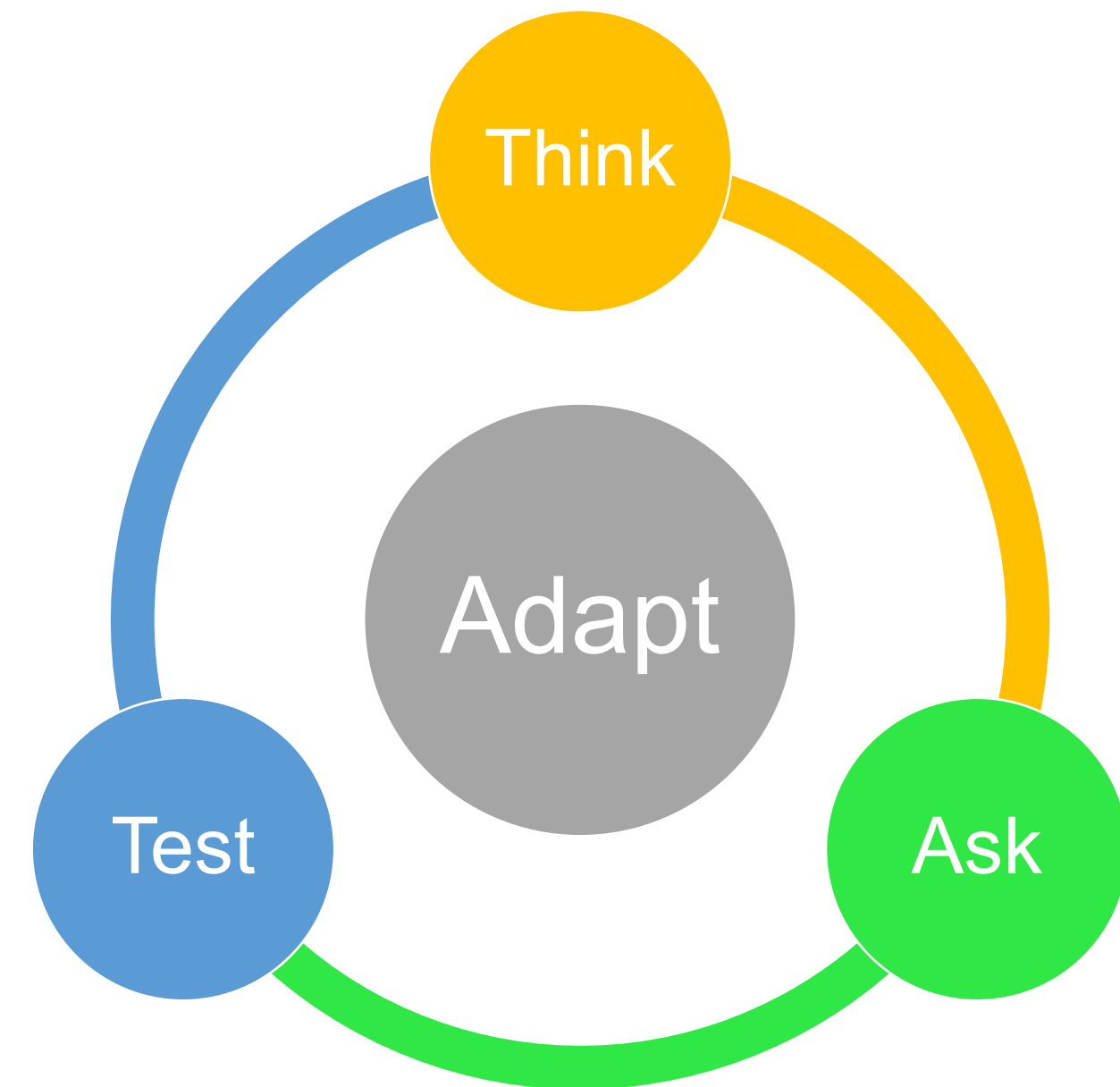
“A process for making decisions about a program, practice, or policy that is grounded in the best available research evidence and informed by experiential evidence from the field and relevant contextual evidence.”

Centers for Disease Control & Prevention

Adaptation


“The process of making changes, additions, deletions, or substitutions to an evidence-based intervention to make it more suitable for a particular population or an organization’s capacity.”

- Rolleri et al., 2014



Key Terms

Core Components: elements of an approach or program (E.g., Program structure, content, and delivery) that fundamentally define its nature and are most likely to account for its main effects (from theory, logic models, empirical evidence).



Program Fidelity: closeness between the developed and defined components of a program and its actual implementation in each setting.



Program Fit: the degree to which a program has been adapted to incorporate setting and audience characteristics in planning.



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Adaption Process

Preliminary Considerations

Goals for intervention/program.

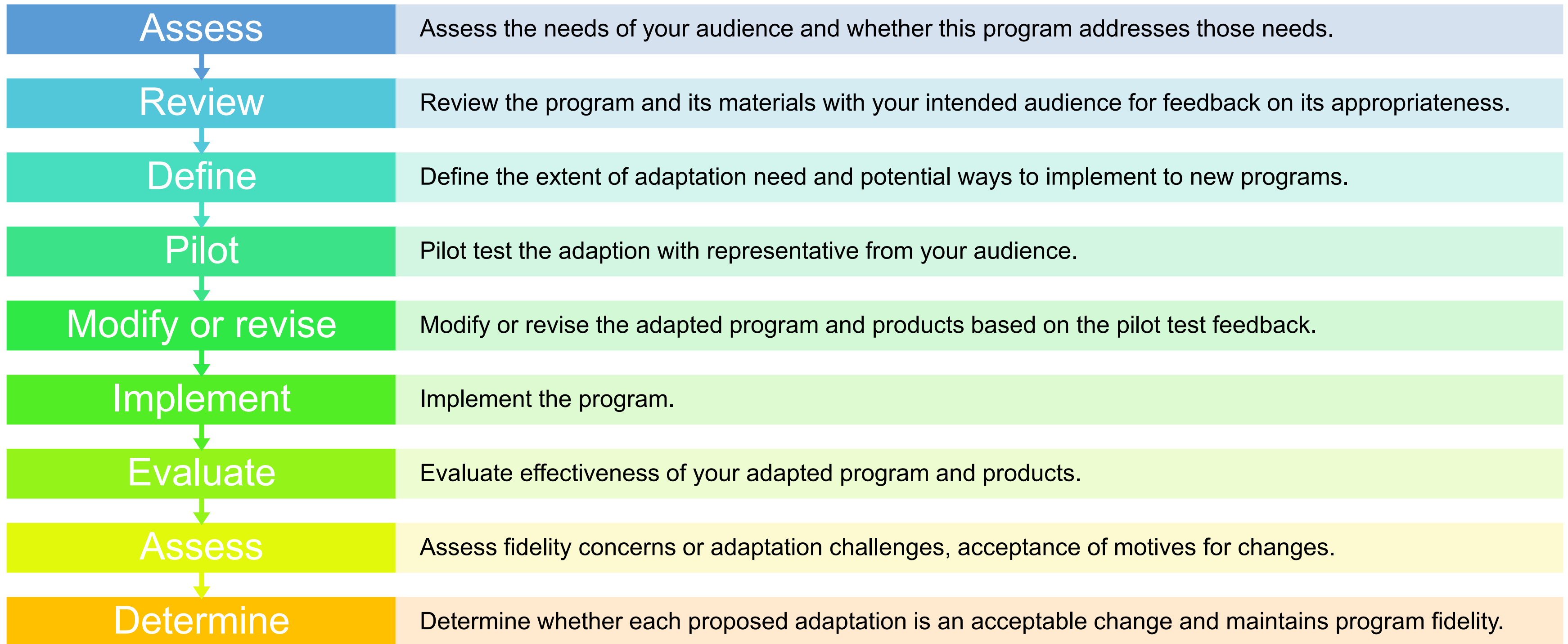
Objectives for intervention/program.

Target audience for intervention/program.

Characteristics of the organization or setting in which the intervention/ program is or will be delivered.

Organizational Readiness

Adaptation Checklist



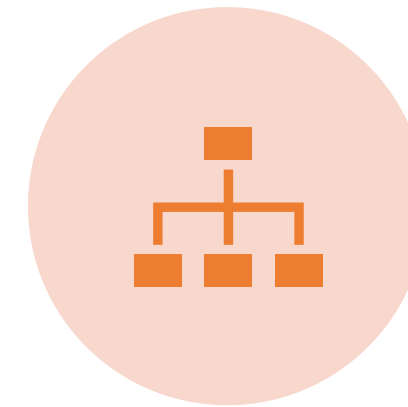
Select an Intervention



INTERVENTION



AUDIENCE



ORGANIZATION



COMMUNITY

Green Light – Safe & Encouraged Changes



- Names of health care centers or systems
- Pictures of people and places and quotes
- Hard-to-read words that affect reading level
- Ways to reach your audience
- Incentives for participation
- Timeline
- Cultural indicators based on population

Yellow Light – Proceed with Caution



- Substituting activities.
- Adding activities to address other risk factors or behaviors.
- Changing the order of the curriculum or steps (sequence).
- Lowering the level of participant engagement.
- Reducing the number and length of sessions.
- Eliminating key messages or skills learned.
- Removing topics.
- Using staff or volunteers who are not adequately trained or qualified.
- Using fewer staff members than recommended.

Red Light – Cannot be Changed



- The health topic.
- Deleting core components or whole sections of the program.
- Putting in more strategies.
- The health communication model or theory.



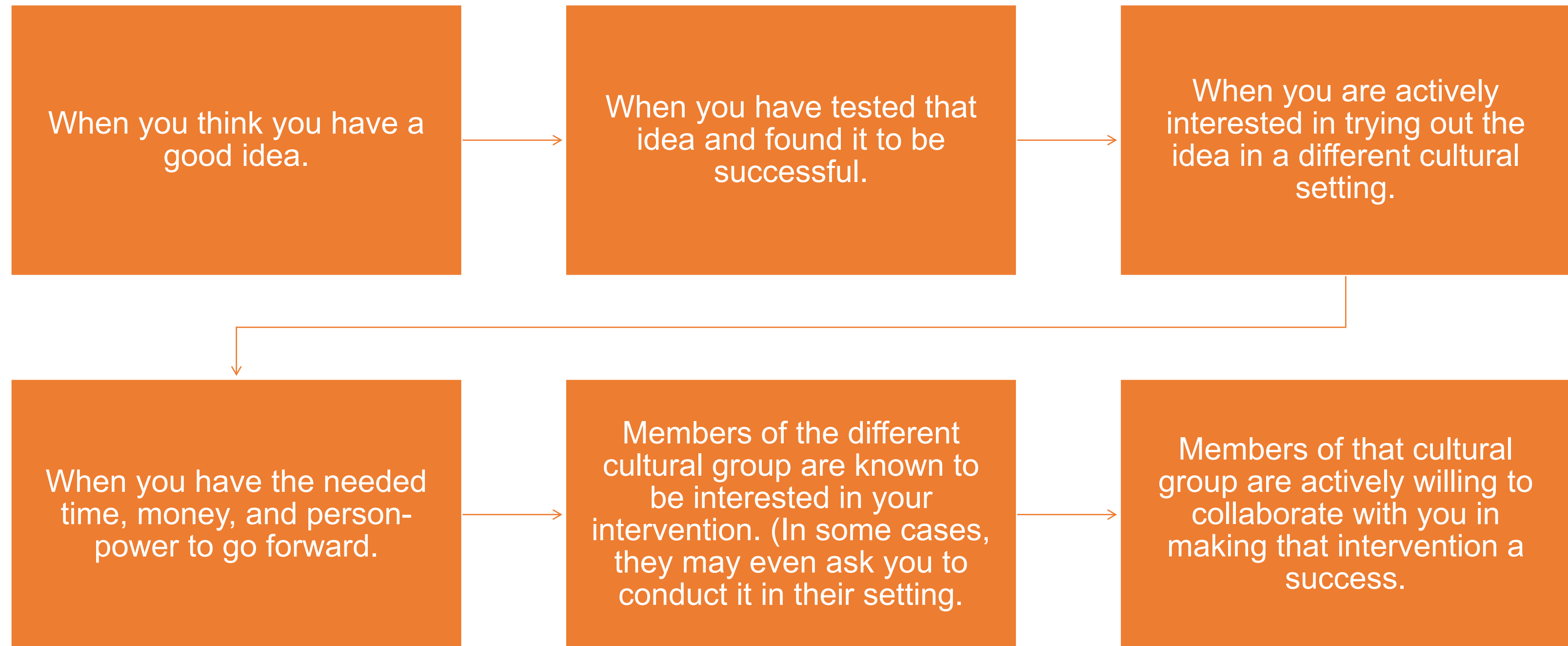
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Cultural Adaptation

When Should you Adapt Interventions to Fit Cultural Traditions?



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How Should you Adapt Cultural Interventions?



- Decide that it is worth adapting.
- You want to do the adaptation.
- Decide if it is your role to direct the adaptation.
- Check your readiness.
- Check the readiness of your target group.
- Make the commitment.
- Set specific objectives.
- Do some research.
- Talk to people.
- Spend some time in the cultural setting.
- Propose your intervention.
- Ask for (and use) feedback.
- Find people in the cultural community who will work together with you.
- Plan and execute your intervention.



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Culturally Tailored BCBH South Dakota Programs for South Dakota Tribal Communities

Collaborative Partners



**SOUTH DAKOTA STATE
UNIVERSITY EXTENSION**



SLM Consulting



Cultural Considerations

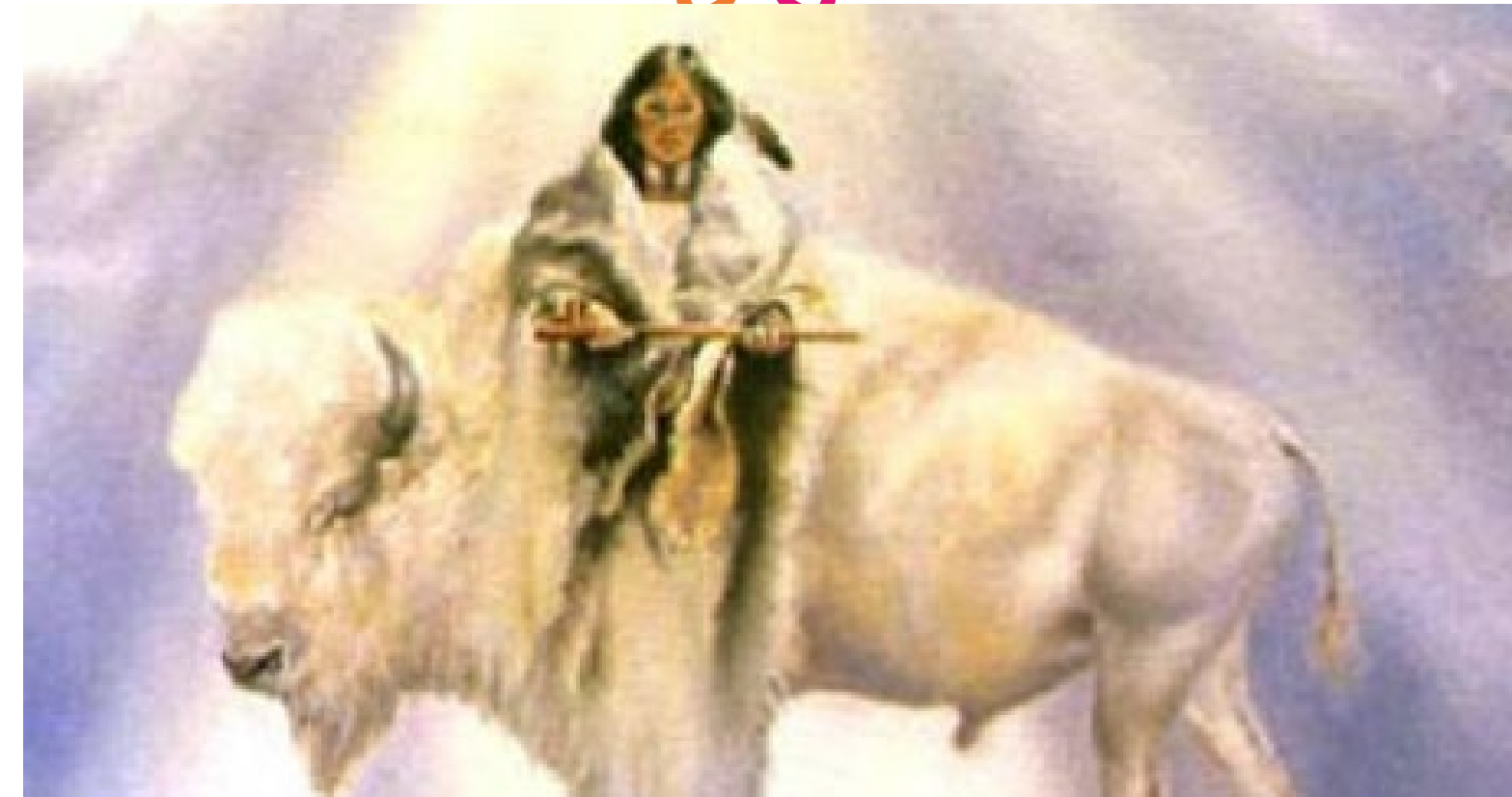


- History: Dignity represents courage, perseverance, & wisdom of Lakota and Dakota culture in SD
- Tribal Pilot



Lakota/Dakota Beliefs/Traditions

- **Wičhozaŋi:** Health defined as a balance of physical, mental, spiritual, and emotional aspects
- **Smudging:** Burning sage/ sweetgrass pulling the smoke over you as you pray
- **Chaŋnupa:** Prayer with traditional pipe and tobacco practices
- **Chaŋšaša:** Traditional Tobacco
- **Ceremonies**
- **Kinship practices, roles and support**



#1 Pilot Workshop - Diabetes



1st Workshop BCBH-SD Tribal Pilot

Diabetes Self Management Program
workshop

May 11, 2020 – June 15, 2020

Tribal Participation included

Crow Creek, Oglala Lakota, & Santee Sioux
Tribal Communities

Impact

- 11 participants registered
- 7 completers (attended 4+ sessions)
- 4 attendees (attended less than 4 sessions)

#2 Pilot Workshop - Cancer



2nd Workshop BCBH-SD Tribal Pilot

Cancer: Thriving & Surviving workshop
April 8, 2021 - May 13, 2021

Tribal Community Participation

Crow Creek, Oglala Lakota, & Cheyenne River Sioux Tribal Communities

Impact

- 9 Participants registered
- 6 Completers (attended 4+ sessions)
- 2 Attendees (+ 1 no show)



Culturally Tailored BCBH-SD CDSME Guide

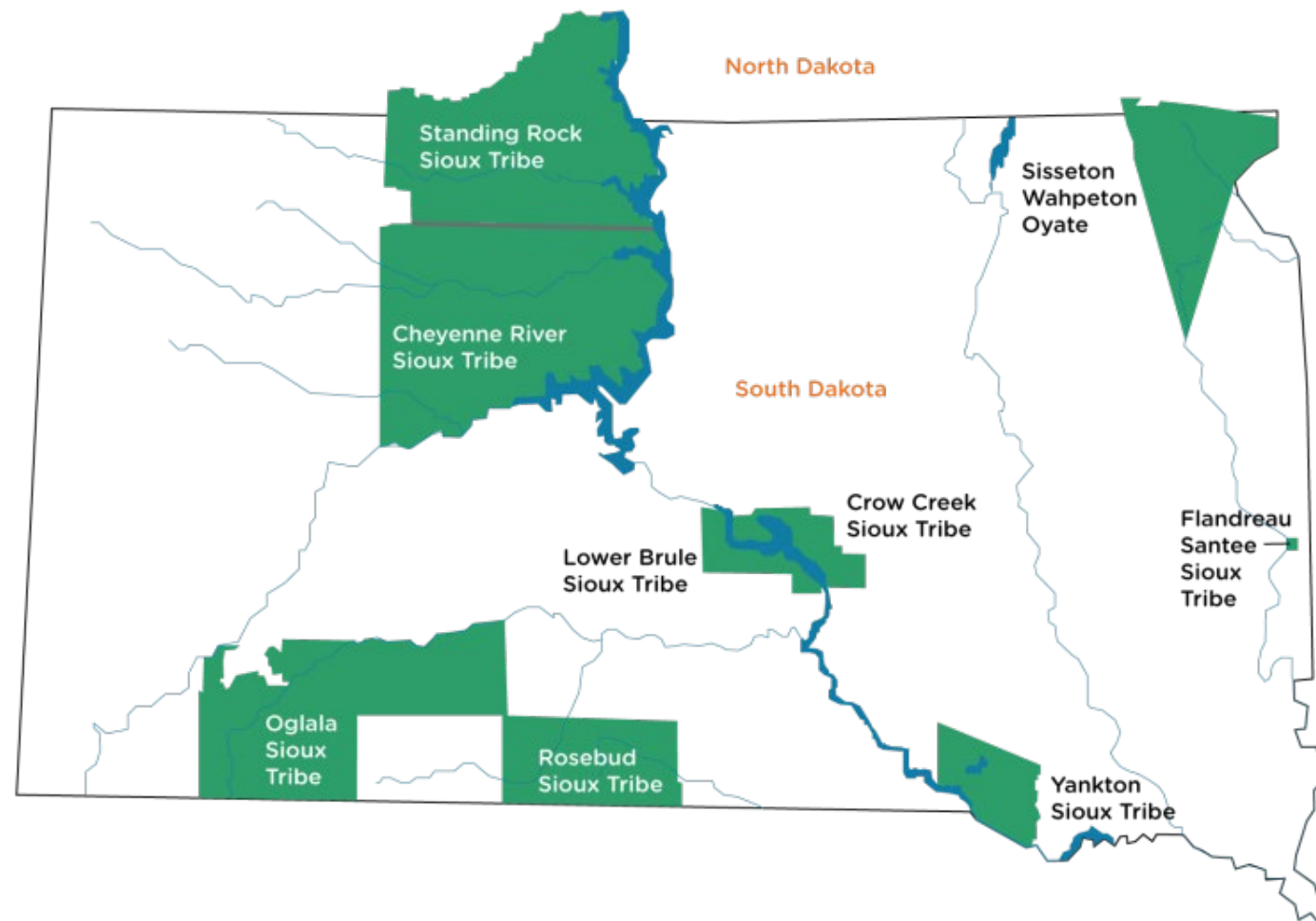


Culturally Tailored



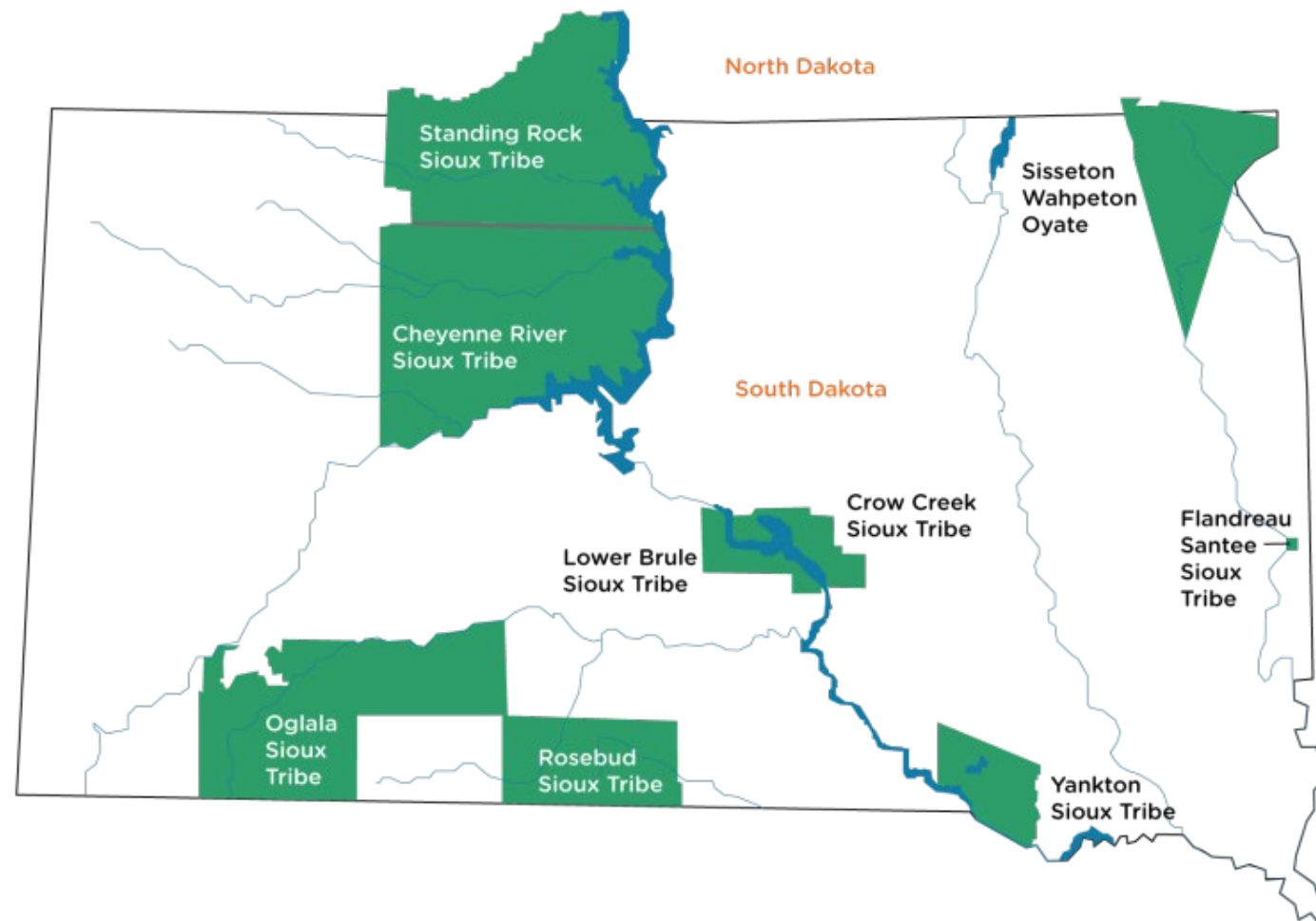
“The adaption of the study design, materials, and other components of the intervention to reflect cultural needs and preferences at the population level.”

Key Components



- Historical context of South Dakota tribal communities
- Overview of BCBH-SD
- Purpose and value of culturally tailored self-management education programs to engage SD tribal communities

Key Components



- Strategies for success
- Recommendations for culturally tailored BCBH-SD CDSME workshop components
- Experience from a pilot of culturally tailored BCBH-SD CDSME workshops
- Case Study - Wisdom Warrior Program

Foundation of Culturally Tailored Guide



Community-Based Participatory Research (CBPR) Approaches:

“Systematic inquiry, with the participation of those affected by an issue for the purpose of education and action or effecting social change” (Green & Mercer, 2011, p. 1927)

CBPR in health:

“A collaborative approach to research that equitably involves all partners in the research process and recognizes the unique strengths that each brings. CBPR begins with a research topic of importance to the community with the aim of combining knowledge and action for social change to improve community health and eliminate health disparities” (Israel, Schulz, Parker, & Becker, 1998, p. 173).

Culturally Tailored BCBH-SD CDSME Workshop Components



1. Content
2. Pedagogy or teaching methods, strategies, and activities that contribute to the effectiveness of the BCBH-SD CSME workshops, and
3. Implementation or logistics involved in the implementation of the workshops:
 1. Program setting
 2. Number of participants
 3. Number and length of sessions
 4. Sequence of sessions.

Green Light Examples



Safe and encouraged changes to BCBH-SD offered CDSME workshops to fit the characteristics, culture, and context of tribal participants served.

Green		
Component	Description	Culturally Tailored Consideration
Updating and/or customizing statistics and tribal health information.	Health statistics, services, and needs change, including evidence-based interventions. Tribal communities should have the most up-to-date, relevant data to make informed decisions about tribal health.	Identify publicly available data (e.g., Indian Health Service, state health department, or state aging reports, etc.) regarding the prevalence of chronic diseases and contributing factors within the tribe/county.
Making activities more interactive, appealing to different learning styles	Activities included in BCBH-SD CDSME workshops can be modified if the information remains accurate and is inclusive of everything covered in workshops. Because individuals learn in different ways, including a variety of activities will reinforce learning for tribal members.	<ul style="list-style-type: none"> • Conduct workshops in a traditional “talking circle” format. • Use interactive teaching strategies, such as health food demonstrations and providing an opportunity for participants to learn from each other (e.g., share recipes).

Yellow Light Examples

Changes to BCBH-SD offered CSME workshops should be made with caution, so core components are adhered to, and other issues do not arise. Consult other tools or BCBH-SD program staff before making changes.

Yellow		
Component	Description	Culturally Tailored Consideration
Content or Methods		
Changing the order of sessions or sequence of activities.	<ul style="list-style-type: none"> The components of the workshops are presented in order, with each session building on the other. Changing the order of sessions could decrease participants' ability to understand and master the information presented. 	<ul style="list-style-type: none"> Add a BCBH-SD Introductory Session to assist with the completion of forms, including one-on-one support to complete consent and registration forms and questionnaires. Add a 6-month reunion for graduates to check in on progress and encourage peer support. Add opportunities to explain terms and clarify concepts using local examples.

Red Light Examples

These changes should not be considered. These changes alter key components of BCBH-SD CDSME workshops and compromise the effectiveness of the program as designed.

Red	
Component	Description
Shortening the program.	Reducing the number or length of workshop sessions may hurt participant outcomes.
Changing health topic/behavior addressed.	BCBH-SD CDSME workshops are designed to promote chronic disease self-management and focused on helping participants learn how to manage their chronic diseases, e.g., diabetes, heart disease, cancer, and arthritis. Any change in the topic of the workshop that does not focus on chronic disease self-management eliminates the purpose of the program.
Contradicting, competing with, or diluting the original program goals.	The BCBH-SD CDSME workshops are designed to address specific goals to support the management of chronic diseases. Adding in additional goals that compete with the original intent of the BCBH-SD workshops could contradict the program's goals.

Tools and Resources



- [IM-Adapt](#) - online program that helps you find and adapt effective cancer control interventions, practices, and policies to fit your needs.
- [Adapting Rural programs](#), Rural Health Information Hub
- Tomioka, M., Braun, K. L., Compton, M., & Tanoue, L. (2012). Adapting Stanford's Chronic Disease Self-Management Program to Hawaii's multicultural population. *The Gerontologist*, 52(1), 121–132. <https://doi.org/10.1093/geront/gnr054>
- Jernigan V. B. (2010). Community-based participatory research with Native American communities: the Chronic Disease Self-Management Program. *Health promotion practice*, 11(6), 888–899. <https://doi.org/10.1177/1524839909333374>

Program Practice, or Policy Fit and Adaptations



Strategy Criteria



Adaptation Guidance Tool



Program, Practice, or Policy Fit & Adaptation Assessment

Consider information about your organization in the first column. In the **Fit** column, indicate if the program fits with each factor within the categories. In the last two columns, consider how you can **increase fit** and whether the program or program materials can be **changed or adapted** for each factor while maintaining fidelity to the original evidence-based program.

Does the chosen program, practice or policy...	...fit your group?			How can you increase fit?	Can this factor be changed?		
	Yes	Partially	No		Yes	No	Maybe
Program, Practice or Policy							
Health behaviors/topics							
Goals							
Type of program strategies							
Time span							
Program materials available							
Setting							

Strategy Comparison Tool

Directions: 1) Column 1 – enter information related to priority area, e.g. health topic. 2) Complete information for Options 1 and 2. 3) Compare the fit of each Option with your priority area answers. Which fits better?

Strategy Criteria	Health Priority	Option 1	Does Option 1 fit your priority?			Option 2	Does Option 2 fit your priority?		
			Yes	Some	No		Yes	Some	No
Topic									
Type of Strategy									
Where evidence found (e.g. Community Guide)									
Outcomes									
Resources needed to use strategy (e.g. cost, partnerships)									
Setting(s) (Community, School, Worksite)									
Audiences (e.g. target audience, intermediaries)									
Community priorities and values									

Adapted from: Foundation for a Healthy Kentucky: Putting Prevention into Practice

Putting Public Health Evidence in Action



Adaptation Guidance Tool

In choosing an evidence-based intervention you may have to make changes to increase fit or compatibility with your audience and/or community. Here is general guidance in terms of things that can and cannot be changed from the original intervention. Remember to refer to any adaptation suggestions from the original developer(s) in making these adaptation decisions.

Adaptation Guidance

Green

Things that CAN be changed:

- Names of health care centers or systems
- Pictures of people and places and quotes
- Hard-to-read words that affect reading level
- Wording to be appropriate to audience
- Cultural indicators based on population
- Ways to reach and recruit your audience
- Incentives for participation
- Timeline (based on adaptation guides)

Yellow

Things that can be changed with caution:

- Substituting activities and/or adding new activities
- Changing the order of the curriculum or steps (sequence)
- Altering the length of program activities
- Shifting or expanding the primary audience
- Varying delivery format/process steps
- Modifying who delivers the program
- Adding activities to address other risk factors or behaviors

Red

Thank you!

Speaker Evaluation:



<https://www.surveymonkey.com/r/Megan-Richard-Sandra>

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mail:

U.S. Department of Agriculture
Office of the Assistant Secretary for Civil Rights
1400 Independence Avenue, SW
Washington, D.C. 20250-9410; or

fax:

(833) 256-1665 or (202) 690-7442;

email:

program.intake@usda.gov.

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correo postal:
U.S. Department of Agriculture
Office of the Assistant Secretary for Civil Rights
1400 Independence Avenue, SW
Washington, D.C. 20250-9410; o´

fax:
(833) 256-1665 o´ (202) 690-7442;

correo electrónico:
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