



# *The* American Indian GRADUATE

Spring 2012

## *Inside this Issue:*

- President's Message
- A Message from the Director
- Loss of a Great Historian
- The Rainer Scholarship
- Bridging the Healthcare Gap – A.T. Still University
- The Importance of Education
- The Burial of Elouise Cobell
- Fostering Native Youth
- Navajo Code Talkers

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## In Memory of Dr. Joe S. Sando 1923 - 2011



*Dr. Joe S. Sando*

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- 5 **Message from the President**  
**A Season of Change**  
*by David Mahooty, President, Board of Directors*
- 6 **Message from the Director**  
**A Year of Changes**  
*by Sam Deloria*
- 8 **The Loss of a Great Historian**  
**A Cherished Pueblo Teacher Journeys Home**  
*by Regis Pecos*
- 10 **Admission Possible**  
**Removing Educational Barriers for Native American  
Citizens of Federally-Recognized Tribes**  
*by Bridget Neconie, Admission & Recruitment Specialist  
University of California - Berkeley*
- 15 **Press Release**  
**ABA Adopts Policy to Curb Box-Checking**
- 16 **The Rainer Scholarship**  
**Christine Nelson and Jake Roberts Named as 2011-2012  
Rainer Fellowship Recipients**
- 18 **Forty Years of Friendship**  
**Helen Maynor Scheirbeck — Lumbee Extraordinary**  
*by W. J. Strickland*
- 20 **Bridging the Healthcare Gap**  
**A.T. Still University of Health Sciences Leads the Way  
Recruiting and Training American Indian Health Professionals**  
*by Dr. Carol Grant, Director, A.T. Still University's National Center for  
American Indian Health Professions*

Continued on page 4

# A.T. Still University of Health Sciences Leads the Way

## Recruiting and Training American Indian Health Professionals

*by Dr. Carol Grant, Director*

*A.T. Still University's National Center for American Indian Health Professions*

Launched in 2007, A.T. Still University's National Center for American Indian Health Professions was created to address the healthcare gap between Native communities and the general population. It is the only graduate healthcare university program of its kind.

The Center was a natural outgrowth of A.T. Still University's mission to serve the underserved and a natural fit with the large Native population in Arizona and its neighboring states. Founded in 1892, the university prepares students for careers in 14 different healthcare specialties, including medicine, dentistry and physical and occupational therapy. The university encourages and prepares future graduates to work with communities in need, including those whose populations have little or no healthcare insurance or access to healthcare services.

The Center's Arizona location is ideal. The state is home to 21 federally-recognized tribes, whose 250,000 members live in tribal communities or on tribal lands, comprising 25% of the state's territory. Another 282,000 Natives live in Utah, Colorado and New Mexico.

Native communities suffer from severe healthcare problems and acute provider shortages. Indian Health Services (IHS), the federal government's comprehensive healthcare system for indigenous people, can serve only 40% (1.9 million of 4.6 million) of American Indians and Native Alaskans. Its current vacancy rate for essential positions is 12%. The result of these shortages is predictable. American Indians and Alaska Natives have a life expectancy that is five years shorter than their Caucasian counterparts and some of the nation's highest incidences of chronic illnesses. They are 60% more likely to have a stroke than Caucasian Americans, a 17% higher rate of diabetes and a 20% higher rate of heart

disease than any other racial or ethnic group. They are also more likely than non-Hispanic whites to lose an infant to SIDS (200%), low birth weight or complications from congenital malformations (30%).

The obvious solution would seem to be to increase the number of healthcare providers working in these communities. According to a 2011 article in the *New England Journal of Medicine*, physicians who are members of minority groups are more likely to practice in underserved communities because they are intricately woven into the social fabric of those communities. Native healthcare providers have greater success in these communities than non-Native providers because the former are "able to deliver care that is needed, while offering cultural familiarity that Native American patients will find comforting."

Unfortunately, American Indian and Alaska Native populations face enormous obstacles to pursuing healthcare careers. In 2004, only 98 Native students graduated from the country's 125 accredited medical schools and, at 0.3%, the number of Native students enrolled in medical school is well below the number of African Americans and Hispanic Americans.

Clearly, something is impeding Native students' success in this arena. The task is to find out what it is and develop systematic strategies for leveling the playing field in graduate healthcare education.

One of the biggest obstacles to success is the 50% average high-school dropout rate for Native students (Faircloth & Tippeconnic, 2010). Convincing more Native students to finish high school and attend college is a prerequisite for encouraging them to pursue graduate education in healthcare. Unfortunately, to date, the few outreach efforts that exist through minority-



focused, medical school summer-enrichment programs have failed to recruit Native students (Faircloth & Tippeconnic, 2010).

The few Native students who do graduate high school and move on to college often feel overwhelmed and isolated by the behavioral norms of the non-Native student populations at their schools. According to the latest data from the Association of American Medical Colleges (2007), Native medical students have a 4.3% attrition rate. In 2004, only nine U.S. medical schools graduated more than two Native students (NEJM, 2011).

A.T. Still University (ATSU) is the exception to the rule. With 49 students, representing 22 tribes, the school has the largest number of Native students enrolled at any U.S. graduate healthcare university. Another 20-40 students are at some stage of the recruiting or application process at any given time. Of the 112 U.S. Native physician assistants (American Academy of Physician Assistants, 2009), 20% have degrees from ATSU. Roughly 30% of all Native dental students are enrolled at the university and all 12 of the dental graduates work in Native communities, including such remote locations as Barrow, AK, and Montana's Crow Reservation.

In 2011, ATSU graduated 16 Native students – eight physicians, three physician assistants, one audiologist, two physical therapists, one doctor of health sciences and one health administrator.

In 2007, A.T. Still University centralized its efforts to bridge the gap into graduate school for Native students in the National Center for American Indian Health Professions. Since then, the Center has taken the lead in recruiting American Indian and Alaska Native students and working with those already enrolled. The work has been made possible by \$500,000 in grants from Arizona's Gila River Indian Community (GRIC), with which ATSU has a longstanding relationship and a commitment to eliminating the healthcare disparity between Native and non-Native communities.

An initial GRIC grant of \$300,000 funded the hiring of a full-time director for the Center and the launch of its first program, *Bridging the Gap*. The program supports (and, subsequently, follows) Native applicants during and after the application process by:

- Providing scholarships for graduate-entrance-exam prep courses, when needed.
- Advocating for students whose GPAs or histories may not accurately reflect their academic potential.
- Offering, through Talking Circles and one-on-one conversations, support and opportunities for cultural connection for students feeling the pressure of "walking in two worlds."

- Creating opportunities for Native students in different ATSU graduate healthcare programs to develop the kind of informal networks essential for ongoing personal and professional support.

In 2011, the National Center for American Indian Health Professions applied for and received a second GRIC grant, for \$200,000, to fund the design and implementation of a second program, *Native Early Acceptance Team (NEAT)*. The name is an allusion to early acceptance at ATSU, which Native candidates will be encouraged to pursue.

A kind of "sequel" to *Bridging the Gap*, NEAT will enable the Center to identify potential ATSU candidates, as early as high school, and connect them to whatever academic and tribal support they may need to graduate. Making sure to preserve the students' strong connection to their family and tribal roots, the Center will help them move on to college, graduate healthcare education at ATSU and, ultimately, careers as healers in Native communities.

Through NEAT, the National Center for American Indian Health Professions will:

- Create partnerships among Arizona's tribal leaders, tribal educators and local, state and regional higher-education and healthcare organizations (to date, partners include the Arizona Commission on Indian Affairs, Gateway Community College, Pathways into Health, the Phoenix Indian Medical Center, the Greater Valley Area Health Education Center, the Northern Arizona Area Health Education Center and Health Occupations Students of America).
- Work with Native communities to identify prospective ATSU students, as early as high school, and enroll them in NEAT.
- Advise NEAT students on academic performance, college and graduate school prerequisites and prep courses and financial aid and scholarships.
- Connect NEAT students with support services that will help them prepare for the academic rigors of graduate school and the differences among Western and traditional learning styles and social norms.
- Establish family-to-family relationships between students' home and university communities, by facilitating mandatory visits to both ATSU and partner organizations.
- Arrange mandatory pre-enrollment visits to ATSU and pipeline partner organizations – building family-to-family relationships

*Continued on page 36*

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## The Burial of Elouise Cobell

Continued from page 25

Blackfeet Reservation in the mid and late 19th century. But Col. Eugene Baker and the U.S. Army responded by entering a Blackfeet winter camp in bottomlands of the Marias River on a 30-below January morning in 1870. After the Baker Massacre, the Blackfeet were pushed to a smaller reservation, and for years, many refused to speak of the massacre or the defeat of the great tribe of the northern plains.

Growing up, Cobell learned about Marias River and Starvation Ridge from her family. Those stories stayed with her. "My mother used to say, 'I didn't raise any weak women, I only raised strong women.' And so we remembered not to run away and say, 'Poor me, poor me.' We were standing up and being strong."

Now, with Cobell gone, the legal settlement may be in trouble due to new appeals and federal government budget cuts.

A relative of Cobell's died of cancer the same day she passed. James Mad Dog Kennely made and sold beaded bracelets to supplement his Social Security checks. Due to the mess of the Indian Trust system, he got an \$89 annual royalty check for \$6,000 worth of oil pumped from his land. For years, he waited for the small amount of money the settlement would bring.

In Cobell's office, I saw a small piece of paper taped to the back of her computer monitor. I glanced at it frequently during the half hour I was there. I knew it was there for me — and anyone else sitting in that chair — to read and think about.

It read:

*First they ignore you,  
then they laugh at you,  
then they fight you,  
then you win.* ♦

Mark Ratledge is a writer and information technology consultant in Montana. This story originally appeared in the Nov. 28, 2011 issue of High Country News ([hcn.org](http://hcn.org)).

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## Accenture Scholarship

Continued from page 34

- Adam C. Parker (Navajo Nation) received his Bachelor's degree in Finance, from Arizona State University, and is moving toward her Master's degree in Business Administration at ASU.

Congratulations to the AIGC 2011-12 Accenture American Indian Scholarship recipients! For more information on the Accenture program, please visit [www.aigcs.org](http://www.aigcs.org). ♦

*(About Accenture - Accenture is a global management consulting, technology services and outsourcing company, with approximately 236,000 people serving clients in more than 120 countries. Combining unparalleled experience, comprehensive capabilities across all industries and business functions, and extensive research on the world's most successful companies, Accenture collaborates with clients to help them become high-performance businesses and governments. Through its Skills to Succeed corporate citizenship focus, by 2015, Accenture will equip 250,000 people, around the world, with the skills to get a job or build a business. The company generated net revenues of \$25.5 billion for the fiscal year ended Aug. 31, 2011. Its home page is [www.accenture.com](http://www.accenture.com).)*

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## A.T. Still University Health Sciences

Continued from page 21

In building a pathway that will guide Native students through graduate-level healthcare education at ATSU and, ultimately, full circle back to Native communities, A.T. Still University's National Center for American Indian Health Professions is creating more than a pipeline of American Indian and Alaska Native healthcare providers. It is creating a *circular* pipeline of *culturally adept Native healers*, who will help close the healthcare gap between Native communities and the rest of America. In so doing, the Center exemplifies ATSU's founding mission to serve those in need. ♦

*(To learn more about A.T. Still University's National Center for American Indian Health Professions (ATSU-NCAIHP,) contact Dr. Carol Grant at the address below, at [cgrant@atsu.edu](mailto:cgrant@atsu.edu) or visit <http://blogs.atyu.edu/ncaihp/>.)*

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