When the Montana University System Board of Regents officially recognized CAIRHE as a state research center earlier this fall (see page 5), it put a seal of approval on our center’s name, which we ourselves had been using for the better part of a year, albeit unofficially. So much of our mission is wrapped up in those eight words—Center for American Indian and Rural Health Equity—that it’s worth taking a closer look at the individual parts.

First, the middle: American Indian and Rural. It’s so important that our two kinds of partner communities, both tribal and rural nontribal, be part of our name. While it’s true that “rural” could easily apply to the vast majority of the state—including its seven American Indian reservations, home to some of the most remote lands—in our tribal partners’ eyes “rural” is not an adequate description of their communities and the unique health challenges they face. We agree.

Next, Health Equity. Our mission is to reduce “health disparities” in Montana, so why not have those words in our name? The best answer is found in the opening lines of a 2014 paper by Shobha Srinivasan and Shanita Williams, in which they write, “Health disparities are real. The evidence base is large and irrefutable. As such, the time is now to shift the research emphasis away from solely documenting the pervasiveness of the health disparities problem and begin focusing on health equity, the highest level of health possible.” We are part of that national movement.

And what about Center? The health equity challenges in Montana are too pervasive for any one entity to tackle them alone. We do want to be among the leaders in that effort, though—coordinating and partnering with communities, other researchers, and organizations of all types in the “center” of the action. In time we also want to become a central resource to which anyone can turn as a first step in joining the effort.

Finally, for. It’s a seemingly simple word, but also one with powerful connotations of advocacy and direction. We don’t just want to study problems of health equity; we want to implement solutions and actually achieve health equity.

It’s no coincidence that we pronounce our acronym, CAIRHE, as “care.” We really do want to make our corner of the world a better place. We hope you’ll join with us.

Alexandra Adams, M.D., Ph.D.
Director and Principal Investigator
Before she directed research centers devoted to health equity—both CAIRHE and, until 2015, the Collaborative Center for Health Equity at the University of Wisconsin—Alex Adams developed a national reputation as a health equity researcher in her own right.

That work continues, and with her relocation to Bozeman in July, much of the direction of Adams’s national research agenda is slowly moving westward from Madison, Wis., her former home.

“I still have great staff there and will continue to, since we work closely with tribes in Wisconsin,” Adams said. “But I also hope to hire a second postdoctoral researcher and other staff in Montana.”

As a family medicine physician and nutritional scientist, Adams collaborates with American Indian communities on healthy lifestyle interventions for families with young children, as well as community-wide interventions to prevent chronic disease. Her research began with Wisconsin tribes, including work with the Bad River, Menominee, Lac Du Flambeau, and Oneida Nations for more than 12 years.

More recently she has expanded her Healthy Children, Strong Families research to the Seneca Nation (N.Y.), the White Earth Nation (Minn.), the First Nations Health Clinic in Albuquerque, N.M., and the Blackfeet Nation (Mont.). Her UW postdoctoral researcher, Vernon Grant, is based in Missoula, Mont.

“Although each of our partner communities is unique, many of the problems we’re examining, such as childhood obesity, are very common,” Adams said. “Successful interventions for one community may be adaptable to serve families in other parts of the country. We had so many requests for this work from communities nationally.”

Adams receives no research support from CAIRHE’s National Institutes of Health grant, but instead manages multiple sources of state and federal grant funding for her individual research, including an NIH R01 grant from the National Heart, Lung, and Blood Institute.

Her research continues to work on a variety of topics in collaboration with American Indian communities, including:

• studies of childhood obesity with assessments of cardiovascular risk markers such as lipids;
• work with community engagement groups on community supports and barriers to health; and
• a randomized clinical trial of a healthy lifestyles intervention designed to prevent obesity for children ages 2 to 5 in cooperation with their primary caregivers.

Adams credits her youth in inner-city New York and travel overseas with her British mother for showing her how differences across communities can result in vastly different health outcomes. Her work with the Rosebud Sioux Tribe of South Dakota during medical school ignited her interest in American Indian health.

“On the reservation you could plainly see the connection between bad policies, like shipping in poor-quality food and removing traditional food systems, and bad health outcomes,” Adams said. “That’s when I knew I didn’t just want to treat symptoms. I wanted to change fundamental causes.”

Now, through her own research and that of CAIRHE, the center she directs, she gets to do just that.
Here’s the latest activity among CAIRHE’s faculty investigators.

**Elizabeth Kinion**, Ed.D., MSN (*Increasing Access to Oral Health Care*), and her team will begin data collection in January in collaboration with the Fort Belknap Head Start Program. In September Kinion presented at the Montana Public Health Association annual conference in Billings, Mont., and in November she was an invited participant at the 2016 Dental Action Summit for Health in Helena, Mont., sponsored by the Montana Department of Public Health and Human Services (DPHHS). Last spring she submitted an NIH R01 grant proposal as co–principal investigator of a childhood oral health research study.

Beginning this fall, Kinion is also PI of a subaward from the Oral Health Program of the DPHHS that will integrate oral health content into the MSU College of Nursing’s Doctor of Nursing Practice degree program.

**Elizabeth Rink**, Ph.D., MSW (*The Fort Peck Sexual Health Project*), and her project partners have implemented a survey for 15- to 18-year-old adolescents in five high schools across the Fort Peck Reservation.

**Vanessa Simonds**, Sc.D. (*Guardians of the Living Water*), and project staff completed their second summer camp on the Crow Reservation in June (*photo at right*).

In May, **Monica Skewes**, Ph.D. (*The Fort Peck Substance Abuse and Resilience Project*), and her project collaborators presented findings from their key informant interviews to more than 140 community members at a local gathering on the Fort Peck Reservation. The event also included a healing ceremony for a local family who had recently lost a child in a tragic death linked to adult methamphetamine use. In July, Skewes and her co-authors Scott Gardner, Emily Salois, and Paula FireMoon made multiple presentations at the American Psychological Association’s Division 45 (Psychological Study of Culture, Ethnicity, and Race) biannual meeting in Palo Alto, Calif. In October, Skewes discussed Montana’s addiction challenges as a guest on the Montana Television Network program *Face the State*, appearing alongside Mike McGrath, chief justice of the Montana Supreme Court.

In early November Skewes made two presentations with her co-authors at the American Public Health Association Annual Meeting in Denver.

**Kelly Knight**, Ph.D., and **Colter Ellis**, Ph.D. (*Rural Montana Victim Needs Assessment*), have continued interviewing participants as part of their statewide victim needs assessment. They are currently developing an intervention response for secondary trauma among American Indian victim-service providers, and this fall they are implementing a similar intervention in Bozeman. They presented a poster about their CAIRHE research in June at the National IDEA Symposium of Biomedical Research Excellence (NISBRE) in Washington, D.C., and presented in November at a national conference hosted by the American Society of Criminology.

**Rebecca Brooker**, Ph.D. (*Maternal Mental Health ...*), and her team have achieved enrollment of about 90 mothers in their Montana Minds of Mothers study and are near the end of the recruitment phase. Brooker presented at the annual meeting of the Association for Psychological Science in May, while graduate and undergraduate students who have received support from her CAIRHE project presented at the Society for Psychophysiological Research annual meeting in September. Brooker submitted an NIH R01 proposal in October that uses preliminary data from her CAIRHE project.

In July, **Kaylin Greene**, Ph.D. (*Substance Use and Driving Among Rural Young Adults*), finished the last of her 11 focus groups with young adults in Montana, spanning eight counties. She is currently working on two papers using these focus group data. In August, Greene began a new survey of young adults in rural areas across four states (Idaho, Oregon, Montana, and Washington) that examines alcohol and drug use, with a particular focus on driving after substance use.

In November, **Cody Warner**, Ph.D. (*The Montana Prisoner Reentry and Recidivism Project*), led a panel presentation at the American Society of Criminology annual meeting.
CAIRHE welcomes two new investigators last summer as Selena Ahmed, Ph.D., and Carmen Byker Shanks, Ph.D., used center support to disseminate results gathered during their three years of collaborative research focused on food environments in Montana.

Ahmed and Byker Shanks, both assistant professors in MSU’s Department of Health and Human Development and leaders of MSU’s Food and Health Lab, have assessed food environments, food choices, and dietary quality in rural and urban environments in Montana, including on the Flathead Indian Reservation. With funding from the Montana INBRE program, they have worked in collaboration with Mike Tryon and Dawn Thomas at Salish Kootenai College and a community advisory board of local stakeholders to understand and enhance dietary quality on the reservation.

“Numerous studies have shown that many diet-related chronic diseases are preventable over time with healthy food environments that include access to nutrient-rich foods, appropriate food choices, and regular physical activity,” Ahmed said. But rural and tribal communities, she added, are particularly vulnerable to such diseases due to a lack of access to healthy and affordable foods.

Over the course of their study, the team evaluated local food environments using validated measurement tools; conducted interviews about local dietary choices; analyzed the quality of offerings from the Food Distribution Program on Indian Reservations, a federal program that serves low-income households; and developed outreach programs such as nutrition education and chefs’ training.

Their summer project for CAIRHE, titled Towards Healthy Food Environments and Healthy Communities: Disseminating Research Results and Building Research Capacity at the Flathead Indian Reservation of Montana, created culturally appropriate materials to disseminate research findings to local, statewide, and scientific communities. As part of this initiative, Montana artists have created illustrations that support research findings. The illustrations (example at right) will be part of a community brochure and posters to be distributed through outreach events and study materials.

“The artists translated our research findings about Montana food environments to create compelling images that resonate with local communities,” Byker Shanks said.

This fall Byker Shanks and Ahmed are working on a new Montana INBRE project led by Mike Tryon at Salish Kootenai College. Together, the research team is leading a food and nutrition intervention with participants of the Food Distribution Program on Indian Reservations involving cooking classes, nutrition education, and distribution of fresh produce. This work continues the team’s efforts to build research capacity on the Flathead Reservation in the area of food environments by involving students, using validated methods, and designing sustainable programming to increase dietary quality.

Although CAIRHE funding for their dissemination effort ended September 1, Ahmed and Byker Shanks will continue to collaborate with the Center.

“Selena and Carmen’s work is so important for advancing the understanding of dietary quality in rural and tribal areas,” said Director Alex Adams, also a nutrition scientist. “We believe this is only the first step in our work together.”
CAIRHE RECEIVES CENTER DESIGNATION FROM BOARD OF REGENTS

The Montana University System Board of Regents has designated CAIRHE as an official state research center.

Capping a months-long review process, the Regents approved the proposal at its September 14-15 meeting in Billings following the recommendation of the Academic, Research, and Student Affairs Committee. The Committee had introduced the proposal at its May meeting in Havre.

“All of us at CAIRHE are delighted to receive this recognition, but it’s really just a first step,” said Alex Adams, CAIRHE’s director and principal investigator. “We hope it will open doors for us around the state as we work with other researchers, communities, and organizations of all types in the pursuit of our important mission.”

Established by a 2014 Institutional Development Award from the National Institute of General Medical Sciences of the National Institutes of Health, CAIRHE works to reduce significant health disparities in Montana's tribal and nontribal rural communities. The Center’s interdisciplinary researchers, currently located in three MSU departments and the College of Nursing, use community-based participatory research methods that are considerate of and consistent with their host communities’ cultural beliefs.

CAIRHE ACROSS MONTANA

The process for official recognition by the Regents began in February, shortly after Adams assumed her position as director of CAIRHE. Prior to its review by the Regents, CAIRHE’s proposal for center status received review and approval from MSU’s Vice President for Research and Economic Development, Renee Reijo Pera; then-Provost Martha Potvin; and the Faculty Senate.

A special meeting in July among officials and faculty from MSU and the University of Montana discussed ways that CAIRHE hopes to collaborate with colleagues in Missoula who are already well-established in many areas of community-based public health research.

“The public health challenges we face in Montana’s rural areas are too widespread and deeply ingrained for any one entity to tackle them,” Adams said. “We have to leverage the great strengths of our individual communities and our reservations, and CAIRHE has to join with partners all over the state so that collectively we can make a lasting difference.”

CAIRHE is the only NIH Center of Biomedical Research Excellence (COBRE) grant in the United States dedicated to community-based participatory research with American Indian communities.
BROOKER AND COLLEAGUES WIN MAJOR GRANT, BEGIN WORK

Rebecca Brooker, Ph.D., an investigator for CAIRHE and an assistant professor in MSU’s Department of Psychology, is part of a team that has received a three-year, half-million-dollar research grant from the Genetics and Human Agency initiative at the University of Virginia.

Brooker has partnered in the new project with colleagues Matthew Vess, Ph.D., of Montana State University; Jenae Neiderhiser, Ph.D., of The Pennsylvania State University; and Matt Stichter, Ph.D., of Washington State University.

The study will examine how parents’ beliefs about heritability, regardless of how well they accord with scientific understanding, may affect the ways in which parents interact with children and how children develop. “One of the really exciting aspects of this project is that it pairs psychologists with a philosopher, so it’s poised to extend both theory and empirical research,” Brooker said.

The interdisciplinary project involves a social psychologist (Vess), a philosopher (Stichter), a behavioral geneticist (Neiderhiser), and a developmental psychologist (Brooker). Brooker’s contribution will examine how parent and child characteristics may influence parent-child interactions and child outcomes.

“CAIRHE investigators are involved in a wide range of research activity, even beyond the health equity focus of our center, and we’re proud to encourage Rebecca in her latest work,” said CAIRHE Director Alex Adams. “Part of our mission is helping young faculty become independent, self-sustaining researchers, and she is well on her way.”

The Genetics and Human Agency initiative, led by Dr. Erik Turkheimer, supports research in the application of modern genomics to complex human behavior related to values and character development. It receives funding from the John Templeton Foundation, based in West Conshohocken, Pa., which “serves as a philanthropic catalyst for discoveries relating to the big questions of human purpose and ultimate reality,” according to its website. The $523,485 award to Brooker and her colleagues was made earlier this fall.

Brooker’s separate CAIRHE project, Maternal Mental Health, Child Temperament, and Biological Markers of Changes in Emotion in New Mothers, entered its third year this fall.

KAYLIN GReene AWARDED NIH GRANT

Kaylin Greene, Ph.D., an investigator for CAIRHE and an assistant professor in MSU’s Department of Sociology and Anthropology, has been awarded a two-year research grant from the National Institutes of Health to continue her study of alcohol use among young adults.

Greene received the Notice of Award in July from the NIH’s National Institute on Alcohol Abuse and Alcoholism. The prestigious R03 grant will fund her project titled Immigrant College Students’ Alcohol Use Across Days, Semesters, and Generations—the next step in her research agenda in alcohol use that began in graduate school and continued during her time as a postdoctoral researcher at MSU.

Greene’s ongoing CAIRHE project, Substance Use and Driving Among Rural Young Adults, examines the reasons for alcohol use and driving after drinking among young adults (aged 18-25) in Montana. That project entered its third year this fall.

“CAIRHE is pleased that Kaylin has made this big step toward a successful career as an independently funded investigator,” said Director Alex Adams. “We look forward to her work in this and other projects as she pursues some very important research questions affecting public health in Montana and beyond.”

Greene’s new project began August 1.

ELIZABETH KInion RECEIVES RURAL HEALTH LEADERSHIP HONOR

Elizabeth Kinion, Ed.D., MSN, a project leader at CAIRHE and professor in MSU’s College of Nursing, received the 2016 Frank Newman Rural Clinician Leadership Award from the Montana Office of Rural Health and Area Health Education Center (AHEC).

Kinion received the award at the Montana Center to Advance Health Through Nursing (CAHN) Nursing Education and Practice Summit in Helena, Mont., on June 6. Kristin Juliari, director of the Montana Office of Rural Health/AHEC at MSU, presented the award.

The honor recognizes Kinion for her culturally sensitive research in oral health and health disparities in Montana, including her CAIRHE research, as well as her mentoring of undergraduate and graduate students. The award is named for Dr. Frank Newman, a rural health pioneer and innovator in Montana who served rural communities for nearly 50 years until his death in 2011.

“Although I never worked with Dr. Newman, I have seen his contributions to the health of rural Montana communities, and they are life-changing,” Kinion said in accepting the award. “It is indeed an honor to be the recipient of this prestigious award, and I will do my best to follow in his footsteps. Thank you to my colleagues who nominated me and to the communities I work with.”

Kinion was nominated for the award by Jane Scharff, Bozeman campus director for the MSU College of Nursing, and Teresa Seright, Ph.D., RN, associate dean of undergraduate programs at the College.

“Dr. Kinion is a clinician who has a special ability to navigate the waters of participatory research,” they wrote in their nomination. “One reason for her ability to do this is her clinician’s lens through which she views the world. She is able to fully grasp the continuum that excellent care is based on rigorous research, which is based on clinical problems, and she can translate the continuum for the population of study as well as for other clinical researchers.”

Kinion has worked with communities on the Fort Belknap Reservation in eastern Montana since 2006. Her ongoing CAIRHE project, Increasing Access to Oral Health Care: Evaluating the Outcomes of a Community Health Specialist Program, entered its third year this fall.
MAYA BRONSTON JOINS CAIRHE TEAM

CAIRHE welcomed Maya Bronston as the latest member of its Administrative Core in November, when Bronston accepted the newly created position of grants management specialist.

As the Center’s financial officer, Bronston will oversee the budgets for the center and its many projects, including subawards to Montana’s tribal communities, as well as assist investigators with pre- and post-award budget management. She will report to Director Alex Adams and play an important role in developing funding sources for CAIRHE.

“We are delighted to have someone of Maya’s abilities and experience to lead us into the next growth phase of our center,” Adams said. “She will be a leader and advocate for our faculty investigators in all fiscal matters and an important advisor in maintaining our compliance with MSU and NIH regulations.”

Prior to her new position, Bronston served as fiscal manager for the Center for Native Health Partnerships at MSU, an NIH-funded center run by CAIRHE mentor Dr. Suzanne Held until 2012. More recently, Bronston served as fiscal manager and assistant to the dean in MSU’s Graduate School.

“I am so excited to join the CAIRHE team,” Bronston said, “and I’m looking forward to the opportunity to work with projects addressing health disparities in tribal and rural communities in Montana. I’m eager to be back working with and for Native communities. My heart belongs there.”

Bronston is from the Crow, Blackfeet, and Navajo Nations and grew up in Bozeman. She will receive her B.A. in Liberal Studies from MSU next spring.

CAIRHE PROFILE: DR. DENNIS DONOVAN

Name: Dennis Donovan, Ph.D.
Home: Suquamish, Wash.
Position: Member of the CAIRHE External Advisory Committee (EAC). At the University of Washington, director of the Alcohol and Drug Abuse Institute and professor of Psychiatry and Behavioral Sciences.

What areas of public health are you most passionate about?

My primary focus is on substance use disorders as they affect the individual, family, and community. Alcohol and drug use and misuse have a profound effect on each of these levels, with respect to level of function, quality of life, and economic impact. Another area I’m passionate about is work addressing the overlap between substance use and HIV risk and medication adherence, both domestically and in sub-Saharan Africa.

What are some of the most pressing addiction challenges that you see in tribal and nontribal rural communities?

I see three main current areas of concern. First, alcohol continues to be an issue in tribal communities. It is of note that American Indian and Alaska Native individuals actually have among the highest rates of alcohol abstinence; however, among those who drink, there are high rates of heavy episodic binge drinking that contribute to high rates of morbidity and early mortality. The second area is the continued presence in some communities of methamphetamine use and dependence. The third area is the more recent emergence of opiate misuse, dependence, and overdose. Many individuals, in both tribal and nontribal communities, begin using prescription opioid medications but over time often migrate to heroin.

You recently met with all of CAIRHE’s project leaders as part of an EAC meeting in Bozeman. What are we doing right as a center?

I think you’re doing a lot of things right. First, there is excellent leadership and great organizational support. Second, you have a very talented group of investigators, all of whom are very dedicated to their individual areas of research but also committed to the mission of the center as a whole. Their work provides an array of very diverse projects, but all are consistent with the theme of working with American Indian tribes or in the context of rural settings. It’s clear that a considerable amount of time and effort have gone into the process of community engagement, which is crucial for viable community-university partnerships.

Health equity can be a troubling field in which to work sometimes, especially when faced with the often overwhelming human impact of addiction. Where do you find hope and inspiration in your work?

My first job after receiving my master’s degree was as a staff member at a new inpatient alcohol treatment program at the Seattle Veterans Administration Medical Center. One of the first patients whose care I coordinated was an Alaska Native man from Kotzebue. He had been unemployed and homeless for a very long time and had major alcohol-related problems. Not only did he complete the inpatient program, but he also was part of a continuing care group that I led for program completers. He got into an abstinence-oriented halfway house and started attending weekly AA meetings held at the hospital. About a year after he completed the continuing care program, he came to visit me. Not only had he remained continuously sober, but he also had gotten a job on the state’s ferry system, had gotten married, and now had a house. His journey into his recovery has always been an inspiration to me. And I have seen many others like him in the years since.

(Read the complete profile on our website.)

Dennis Donovan (center) poses with training participants in the Healing of the Canoe project, a collaborative effort between the Suquamish Tribe, the Port Gamble S’Klallam Tribe, and the Alcohol and Drug Abuse Institute at the University of Washington.
CAIRHE LAUNCHES WEEKLY BLOG

As part of its plans to increase visibility of health equity issues statewide and nationally, CAIRHE introduced a new blog by Director Alex Adams on its website in October. The blog first appeared on October 17 and has run weekly since.

The blog, titled simply Health Equity, features Adams and occasional guest authors, including CAIRHE investigators, in a weekly discussion of health equity topics. The column also will offer a venue for the center’s advocacy for American Indian and rural health needs.

“Our investigators are authorities in their areas of research, and this is one way that we can share that knowledge with the wider world,” Adams said. “It’s our hope that the blog may be the first introduction to CAIRHE for many future collaborators.”

The blog appears on the CAIRHE website at http://www.montana.edu/cairhe/blog/, with promotion and reader discussion on Facebook.

Early essays have addressed health equity as a concept, water and health, mentoring, and research sustainability.

HOW TO REACH CAIRHE

CAIRHE will spend the next year building coalitions across the state and welcoming research partners of all types. Want to learn more?

Find us online at www.montana.edu/cairhe. You can like us on Facebook and follow us on Twitter too!

As of July 2016, CAIRHE has a new home on the Montana State University campus:

Center for American Indian and Rural Health Equity (CAIRHE)
103 AJM Johnson Hall
P.O. Box 173485
Montana State University
Bozeman, MT 59717-3485

For more information, please visit the Contact Us page on our website.