**IL-NET T&TA Center Presents**

**Being Invited in: Understanding and Respecting Native Disability Culture**

**November 29, 2022**

Let's get started, everyone! Hello, my name is jenny Sichel, I am the operations director at the National Council on Disability. National counsel on independent living I help coordinate logistics for these events, and I wanted to welcome you-all, to our, latest webinar, Being Invited in: Understanding and Respecting Native Disability Culture. My pronouns are she/her, and I'm a white female that is, currently sitting in a white sweater with an orange scarf on, and I have my hair pulled back into a bun. And, (a pause), Now, I wanted to let you know, today's presentation, is, brought to you by the Administration for Community Living at the U.S. Department of Health and Human Services in conjunction, with the IL-NET, operated by ILRU, and, in collaboration with NCIL, APRL, and the University of Montana. So, to go over a few housekeeping details, captions are available on this webinar. You can click "show subtitle", in your Zoom menu bar to turn them on. We also have captions running at AI-media. The URL is too long to read, but we will share it in the chat box. AI-media will allow you to enlarge the font and change the color and contrast of the captioning. And we just shared that with everyone in the chat box, for your use, (shared by Sandra Breitengross Bitter), ASL interpreters are also present today and should always be visible as we are presenting in gallery view. Please let me know, if you cannot see the interpreters and you can do that, through the chat, or submitting a Q&A, in the question-and-answer box. You do not need to be on Zoom, to access this webinar. We will read all slide content, and all questions, out loud, so that everything will be available to individuals calling in on the phone, or who cannot see visual content. Public chat is turned off, but you will still be able to send chat messages to the Host and panelists, which I've seen a couple gotten a couple from people already. That is fine. And -- but we do ask that you reserve the chat for requests for technical support only. Please do not use the panelist chat to submit content questions for the Presenters. Speaking of questions: We will be answering all questions, as time permits. You are welcome to submit your questions, throughout the webinar, but please note that they will be held until the end of the webinar, to be answered during the Q&A portion. There are a number of easy, and accessible ways to submit content questions, to the Presenters. if you're on Zoom, you can simply type your question in the Zoom Q&A tab. You're also welcome to e-mail your questions to me, at jenny@NCIL.org. I'll provide me e-mail address in the chat box, too, before the Q&A break. Finally, if you're on the telephone today, you may press star 9 to indicate that you have a question, I will, then, unmute you and we ask that if you are speaking a question, you limit the question to no more than 30 seconds. (Pause) at the end of the webinar towards the end of the webinar, we will have an evaluation link that you will see, and we will also post in the chat section. We ask you, to complete our evaluation. And (a pause), because we take the evaluation very seriously, (sound of laughter) and we learn what we use from you to improver our future training, the evaluation will also open after the webinar closes on your screen. And, again, we would just be so grateful, if you take a few moments, to complete the evaluation. So, to get us going, please help me to welcome our moderator, for the webinar, Kimball Gray, Kimball is a program analyst for the Administration for Community Living, at the U.S. Department of Health and Human Services, Kimball take it for Community Living, U.S. Department of Health & Human Services : Thank you, thank you, and thank everybody for joining us today, we are -- in conjunction with the Native American Heritage Month which is November, We wanted to share with you, something we've been doing over the past five years, which is, we've had a Native American Independent Living Demonstration project Grants that were going to five different centers around the country. Alaska, California, Wisconsin, Michigan, and New York. And four of them were able to attend with us today. And I don't know that there are many, attendees that are not familiar with Centers for Independent Living, so I'm going to give you a very brief overview. Centers for independent living which are approximately 350 feed grants and going to around 270CILs, or centers for independent living, around the Nation. They are private nonprofit organizations; they provide services to assist individuals with disabilities. To become as independent as they choose. And to live where they want to. But one of the most important aspects of them, being successful, and what they do, is that they are required to be run by a majority of people, with disabilities. And that's both at the Director level; the staff level; and the Board level. So, we put a lot of value in having individuals with disabilitiesworking with other individuals as part of their -- achieving their goals.

>> KIMBALL GRAY: And with that, I want to, go to our first Presenter, who -- Hoskie Benally, who is a community and government liaison, with the Native American Disability Law Center, and he has recently been appointed, to be a member of the National Council on Disability. Hoskie, take it away!

>> Hoskie Benally: Hello, can you hear me? (A pause),

>> KIMBALL GRAY: Yes

>> Hoskie Benally: (A pause),

>>KIMBALL GRAY: There you go, I can hear you

>> Hoskie Benally: I unmuted myself. Good afternoon, okay, thank you, good afternoon, Hoskie Benally. I'm from the Navajo nation, legally blind. Retinized pigmentosa and currently employed with the Native American Disability Law Center. In Farmington, New Mexico, and so, I just want to give a brief overview of what American Indian disability looks like. It's really hard to get statistics, on Native Americans with disabilities, so, some of this information, I have is, like, from 2000 census but it gives you an idea of -- of what exists out there. There is about 550,000, Native Americans with disabilities, and -- and other Native Americans, there's about, 2 POIT .5 Native Americans who claim to have, Native blood, and, and then, 4.5 million who have native, and other ethnic groups and out of that, 22%, have, one or more disabilities. And we experience on -- Indian Country, People with disabilities, 26%, -- live in poverty. compared, to 13% in the general public and 10%, in the Caucasian. There are 560 recognized tribes from the Federal Government.

>> Hoskie Benally: Now, the one thing that you need to be aware of is that, in some tribes, like where I'm at with the Navajo Nation, and I work closely with the Navajo Nation, ADA does not apply, because of its sovereign immunity. Treaty with the United States government. So, based on that, the only ones that will apply to is, those programs, those native programs within the Indian tribes, that -- that receive federal dollars. An example: Housing. A lot of tribes receive housing, funds from HUD; so, they're -- to follow federal guidelines regarding disability housing. And another one is vocational rehabilitation programs, because they receive funds from Health and human services. So be aware that in some cases, ADA will not apply. And what we have done with the Navajo Nation, is that we passed the civil rights disabilities act in 2018, and we've basically, pretty much followed ADA standards, and Guidelines. And so that's how we are able to at least, have some sense of guidelines, and standards to apply for towards the disability population. (A pause),

>> Hoskie Benally: We get our services from IHS Indian health center, which is under health and human services, And... but we're experiencing, and we have a long history of IHS being underfunded. And so, that means that, at the local level, IHS hospitals, be ration out what services they think could be there, and so it does impact Native Americans with disabilities in receiving services. Especially -- specialty services. And we know that people with disabilities have to have certain specialty services. In some cases, you might get at your local IHS facility, but in most cases, you would be sent off -- like, where I'm at -- we're probably about three hours from Albuquerque. And then, we're about five hours from Phoenix, And probably six hours from Denver. And about another five hours to Salt Lake, well, a lot of the times, those are unique, specialty services that will be sent to those facilities; and, what -- IHS will pay for the services, and, as well as transportation there, but in some cases, it's a one-way ticket. Family members end up going out there and getting their family member back home.

>> Hoskie Benally: (After a pause), IHS does use -- they can be certified for Medicare Medicaid, and services so they offset some of that cost, if they have somebody that's employed, with the -- has a job, and they have insurance with their employer, IHS, will take that, insurance, and when you -- a person like myself, goes for services, they will offset that cost, with my insurance also.

>> Jenny: I just want to give you a heads-up, you have 30 seconds to a minute to go

>> Hoskie Benally: Okay. And so, these are some of the areas, biggest -- another big one is housing. We really are short on housing, a lot of our Native Americans end up in nursing homes or residential programs, so we do have a severe shortage in services, service gaps, here, in Indian Country. So, I just want you to be aware of that. Thank you.

>> KIMBALL GRAY: I now want to go, to disability Services legal center, with Adam Brown. And Madonna Feather. But I first want to just quickly mention: The Grant, that NAILD grant I spoke of earlier, was first, for these centers to find best ways, practices, to work within Indian country. And culture came up as -- CILs needed to know more about that. So, I just wanted to share that with you, and Adam, if you can go ahead.

>> ADAM BROWN: Good afternoon, everyone. And I'm here, with Madonna Feather, who, was our Project Director on this -- on our Native American Independent living demonstration project. This was the third community -- community-organizing project that we've done over the last 25 years; with the goal of expanding services to our area natives with disabilities. Just as a form of context: In our area, which is, all within Northern California, we have 25 reservations, and rancherias, just within our specific Catchman area, four counties, so it's a lot of -- a lot of individual groups that we're working with, as opposed to some of the other projects around the country, where, we have much larger tribal entities.

>> ADAM BROWN: This was, by far, the most successful of the projects that we've done, and, you know, again, like so many of these projects, it comes down to personnel; and, really, in our case, that was Madonna, who really took a very different approach. When we have -- when we had done these projects in the past, you know, we had known, going in that, no project was going to go anywhere, without Native Staff; but -- but I think our -- our staff, and prior projects, had really take- -- had taken much more of a measured approach. Sort of very, you know, were very slow to sort of, you know, request any sort of inclusion, would participate in tribal events, would -- would, you know, do outreach, but -- on a much -- much slower pace. (Pause), And then, we have Madonna, which is -- who was really the complete opposite, who basically, forced us in the door, where, in many cases, the Agency had never been. Basically, getting us, you know, prepandemic, I -- it was at least -- at least one event a week. We were -- we had -- we had a booth, or we had a tent, or we were doing -- it could be a health fair. Any virtually, any tribal event, there was disability services, and legal center. And that -- that proved to be, you know, enormously successful, It -- again, it takes, the right person, because Madonna was able to do that, where -- where many others simply were not. (Pause), one of the other keys, I believe, to sort of the success of this project, in getting us more -- more referrals, more interaction with the individual tribal entities, was, the selection and formation of our tribal advisory group. So, we had an advisory board for the entire length of our project, Made up, primarily, of either tribal board members, Tribal -- tribal health providers. as well as tribal educators. And I think it was this -- you know, this combo very much helped because not only is it giving your project more credibility; but it's simply opening doors to -- to things, you know, that -- we -- we wouldn't have considered, or events that we wouldn't have otherwise known about, had it not been for this Collaboration. And that has continued; we've actually -- that's something where, even when the funding ran out for this project, every member of our advisory board, agreed to stay on in that -- in their capacity, as an Advisory Board Member, on Native issues, which, you know, of course, of tremendous benefit to us.

>> ADAM BROWN: (After a pause), with regards to what we had learned: You know, -- you know, a lot of the -- a lot of the conclusions were not -- were very much what we thought they would be. I think, the issues of -- we -- we knew, going in, that -- that many Natives would never be comfortable receiving services from Nonnatives. And with our -- our, you know, over a thousand surveys that were completed, By Participants, Both by Natives -- we -- we surveyed both Natives with Disabilities as well as Tribal Providers, whether that's social-service providers or health providers. Separately. And, overwhelmingly, among the Natives with Disabilities, the response was, they would not be comfortable receiving services from a nonnative individual. (A pause), and, you know, while -- while we sort of knew that it's what we expected. I think, the survey really drove that home, that, you know, how much of a barrier there is there. And how much trust remains a huge barrier, you know, for nonnative providers.

>> ADAM BROWN: Does that mean that -- that we didn't -- we don't -- that our nonnative staff do not provide services? No, not at all. In fact, I think through this project, we were able to have our native staff really coordinate services with our nonnative staff providers to get those going, and we continue to get a large number of referrals, in there. Which, I think, has, you know, -- we see our referrals go up every year. So, something's working. And -- but it's definitely a process.

>> ADAM BROWN: I think in terms of some of the challenges: Beyond that, is sort of working within the traditional IL definition of "disabilities", and working that into our Native Communities because, you know, if we're out -- and we're asking people to identify as, you know, with -- you know, different types of.... Different diagnoses, or asking people, if they identify with, you know, depression or, schizoaffective conditions or traumatic brain injury, you know, we're not getting responses on disability. It's really about the services, and I -- I would say, this is similar to our work, in the senior communities. You know, very few people we're identifying necessarily as -- as being "a person with a disability", But when it came down to a description of services, we got a lot of people identifying as having a need for those services.

>> Madonna Feather: I just want to hop in before our time is over, Adam

>> ADAM BROWN: Sure

>> Madonna Feather: So, yeah, there were two surveys, yes, so, No. 6 on the survey for the person who identified as Native American -- the question is would you feel comfortable receiving services? So, the answer is no. And I'm one of those people. I'm considered a city Indian, I lived in Napa, for many, many years, I live in Santa Rosa. Even when I lived there, I would still come to my Indian Health Center. And, in what I want to tell, all of the ILCs is, you have to hire Native, you know, Governor Gavin Newsom, has a Native American liaison who is enrolled in the Dry Creek Tribe, and you all should be following suit in hiring, a Native American. Who's going to be involved in, actually, out there doing the work, going to the Tribes getting on tribal council agendas to tell the tops of their tribe this is the services that we have to offer, we're not serving you, but we want to. Having that Native Voice, that's what we are going to go and -- and hear from. And it's very important to just stop the stigma on disabilities with Native Americans. And they're not going to feel comfortable telling a nonnative that. It's -- I have data to prove that. And (pause), the best way to do that: You have to hire Native. This year, in June, I was asked to come speak at the first Annual California Native Disability Symposium, finishing up at an Indian child welfare concert, they were all from California. The (pause), Regional centers, and guess what? They're not serving Natives and guess what they don't have any Natives on their staff. So, there's a huge issue there; so, if anybody, you know, Directors here -- you have to hire Native. So, that's it. You have to hire Native. (Concludes remarks),

>> KIMBALL GRAY: All right, I appreciate it, Madonna, and Adam. Good information, and I believe that's something we're going to hear throughout. The presentation, and now I would like to go to Joan O'Keefe, and Janelle Friday from the disability -- I mean, the South -- Southeast Alaska Independent Living Center! Take it away, Joan!

>> Joan O'Keefe: Yeah, thank you, and good morning, and, yes, it's still morning in Alaska. We have a few slides that we want to share. We titled our three-year demonstration project independent living services, to Alaska Natives with Disabilities. Or IL stand. I'm Joan O'Keefe, and my pronouns are she and her, I -- white woman in my 60s. With red increasingly gray hair, Pulled back in a ponytail. With me today is Janelle Friday, and she'll join us in just a -- a -- speak up here just in a couple of minutes, she's just finishing five years at SAIL, she's been our village independent living coordinator, and just recently took a new big job, as a tribal administrator for the cooperative association on prince of Wales island, the next slide is a map of Alaska and northwest Canada, the U.S. government recognizes, 574 tribes in the United States, and 228 or 40% are in Alaska. The various colors on the map show the lands of the Indigenous Peoples and languages of Alaska. The IL stand project activities happened in SAIL's region of responsibility, the southeast portion of the state, In gold on the map, is the traditional home of the clingt people the green on the map is traditional home of the Shims Haiyan and purple on the map is the home of the Hida people whose range extends south off the map, and along, much of the coastline of the Pacific northwest. The next slide, is, a page from SAIL's FY '22 Annual Report and shows a map of southeast Alaska. With the English and traditional names of the communities in SAIL region. The landmass of our -- responsibility is approximately that of the state of Maine. It's a narrow band of coastline clinging to Canada along with, literally, hundreds of islands. With a few exceptions, communities are not connected by road, and the text of the slide here, in our Annual Report includes a land acknowledgment. Next slide.

>> Joan O'Keefe: (After a pause), IL stand was designed on the premise and the prior -- speakers spoke a little bit to this, that independent living services are best delivered by trusted local community members. For an outsider to come in, and effectively provide all five core services, Like Advocacy, peer support, Is not very likely. So, in our model, we had 6 villages, we either shared staff with local tribes, or directly hired part-time local staff. And IL stand was a little overly ambitious, however, we maintain a presence in three of the 6 villages, as well as developed some very key relationships, In this slide -- slide is a collage of some various Southeast Alaskan images. On the right, are some Black and white images, courtesy of the national historic park, in the top center picture the sign above the establishment says, "All white help." It's a mere glimpse of the discrimination, and historical trauma that white people brought to the native peoples of our region. Along with diseases, boarding schools, bombardmens, and so much more, and boat plane and ferry, they are essential to working in southeast Alaska and government cuts to the ferry, and inaccessible, and very expensive small planes, are definitely a barrier that are -- our partners tell us and remind us about, And it's a barrier to providing services, as well.

>> Joan O'Keefe: So, yes, I'm a white gal from Juneau, the largest community in southeast Alaska, I'm not the right person to address some of our -- four questions for today's presentation, so, I asked our longtime partners from the organize village where we shared staff of five years to weigh in and I asked Janelle Friday if she would speak. Janelle?

>> JANELLE FRIDAY: On mute

>> JANELLE FRIDAY: Sorry about that; so, yeah, I did work with SAIL for about five years, some of the key issues, tribal communities faced, around disability were the lack of funding, and resources, for supplies, shipping or labor costs. To make it reasonable, to do work in rural communities, to keep -- or make homes accessible. Some of the key issues, also in the rural communities that they were no trained professionals, to help, with any type of disability paperwork. A lot of the citizens would reply, and they would -- they will -- and will terminate their efforts once they receive an automatic denial. For example: On Prince Wales Island where I'm from, there's about a population of 4,000, we have about 8 different communities, there was only one trained person for any kind of disability paperwork. And a lot of people depended on that income to get by. Some of the barriers that we faced in the smaller communities, (Pause), could be a wide range of things from no cell phone service, Internet service or just lack of time to address these issues, travel is a huge thing on the islands, the ferry system is almost nonexistent in some of the smaller communities. Making it harder for people, with disabilities, to travel comfortably, or even get to a doctor's appointment, The ability for employees or supervisors, to obtain training, or identify the best way to serve people, different type of disabilities, There's a lack of workforce, and turnover in providers. Which also, makes it -- a lack of specialists in small communities, it could take anywhere from 3 to six months to see a specialist or receive any assessment for disabilities, including mental health. Knowing who to call for assistance, and what they're ---and what available resources are out there. I'm going to turn it back to Joan for some of our best practices, and strengths.

>> Joan O'Keefe: Okay, I see -- thank you, Janelle, two-minute warning so I'll hurry here

>> JANELLE FRIDAY: Oh, shoot!

>> Joan O'Keefe: A few things we're doing at SAIL. We are making time and budgeting resources intentionality to build relationships and to betterunderstand the culture of our native communities and consumers. We have included a line item in our budget for diversity, equity, and inclusion, the line item is for staff training, on Native culture and DEI work, we start every staff meeting and board meeting with a land acknowledgment. Monthly staff meetings include a word or phrase of the day, we have a DEI committee, the radical inclusion committee and all staff are encouraged to participate. They meet twice a month. The radical inclusion committee recommended changing recognized holiday and board approved them, including recognizing Indigenous People's Day, we try to make offices welcoming and inviting with native artwork and display posters with native people nearly 40% of our consumers identify as Alaska native we strive for a board and staff who look like who we serve, we begun looking for our recruitment, looking at our recruitment and hiring practices And hired a consultant to help us with our employee manual through a DEI lens and starting to move the needle but it's a journey, and we have we have a long ways to go, if you want to close, Janelle

>> Janelle Friday: Yeah I'm just going to skip over, Joan, the seven tips. We partnered with the organized village of Cake and tribal administrators stated this, partnerships are very important, and blessed to have a partnership with SAIL, enabling local staff to not only learn more of what's available but stretches a small tribal budget when they work with SAIL for services for people with disabilities. Barriers have -- recently had been -- Staff turnover with both entities in a worldwide pandemic, no one planned it was great to have a SAIL employee visit cake, inspire local staff on a regular basis prior to the pandemic. The impacts of SAIL's community led efforts here in southeast Alaska are more culturally based services. Ultimately this means, more people with disabilities, are receiving independent living services, and can live in their homes, In their home -- in their homes and home communities, more independently. Thank you, I tried to wrap that up as fast as possible. (In native language)

 >> KIMBALL GRAY: You're doing a great job; we appreciate giving a lot of information in a small amount of time. And now I'm going to go to the superior alliance, for independent living: Julie Shaw was not able to make it today, speaking -- for Superior.

>> Tanya from Superior Alliance for Independent Living: Hello, everybody. So, we are Superior Alliance for Independent Living. We're located in the upper peninsula of Michigan. We are located centrally in the UP. We've worked with the five tribes up here and we cover 15 counties which is about 16,000 square miles. So, some visits with consumers can take up to six hours round trip. So, some of the issues, that we've faced were remoteness. A lot of rural areas, Lower income, we work with a lot of lower income individuals, so, we've had barriers to transportation, because even if it might be available, individuals may not have been able to afford it. Also, there is a lack of public transportation up here. There are a few counties, a few of the larger counties, which have -- do a good transit system, but we don't have trains or anything like that. We just have littleole buses. Lack of phones can be an issue, too, Lack of phones and Internet. So, trying to reach individuals you might have to call a friend or family member, and wait for them to get in touch with the individual to schedule an appointment. Internet: Can be very hard up here. It's spotty. Same with cell phone service. You might be able to get affordable Internet with the Affordable Connectivity Program, but you might not be able to find a provider to work with. That's a huge issue, we have up here. We just have, a few providers. Lack of affordable housing, I know, others have mentioned, this as well. It's very hard to find housing up here in the UP right now. A lot of our affordable housing units have, you know, one to two-year wait lists. And also, barrier-free housing is very hard to come by. Typically, the complexes only have maybe three, four, barrier-free units available. And, once someone's in there, they're usually in there for quite a while. So, trying to find barrier-free housing is a huge, issue, up here. Someone else mentioned lack of -- I -- I feel like we mirror the other SAIL, too, lack of specialists, you know, we're so remote that we might get a specialist up here. They might only last for a year or two, because they can't handle the harsh winters, they go back down south or, you know, somewhere where it's warmer. There's not, you know, -- 300 inches of snow, so, that can create long waits for appointments. So people get frustrated. They don't want to wait for those long APPOINTMENTS. They give up on -- wait for those long appointments, they give up on the medical medical. You might find a person, to work with, and all of a sudden, they're gone, they may have been offered an opportunity, so trying to, work with someone, you know, they try to find new staff, it's been hard, staffing up here. People have found that they can work remotely so they might like that. It's been a real struggle up here. Let's see. We -- working together with some of the tribes, we have conducted workshops, together, we did one, with tribal youth, on budgeting that was very successful. We did that with one of the schools, we also hosted smart 911 workshops, and emergency contact workshops. With Elders that was, very successful. We are hosting office hours, at two tribal locations still, with -- with two of the tribes. We did have going with four of them, we were doing office hours, but, I know, we were hosting office hours towards the end of the grant, but we do still host two of the tribes because we felt it was important to continue our work. We don't want to be the one who goes in, and starts doing the good work, and then left, so, we do still continue working. We started working at -- with other agencies up in S. St. Marie, and created a Native American coalition, but due to COVID that was disbanded. Some other issues that we've had: I don't know, I feel like, ours are kind of similar with everyone else's, you know, it's that remoteness, lack of transportation. Housing, Technology. (Pause), and follow-through has been a huge thing, too. You know, you might start working with an individual, think you're going to be able to help them, and, then they kind of drop-off the face of the earth. Whether, you know, they had a phone, and now they can't afford minutes, it's not working, or, you know, they end up moving for some reason. It's just been really hard, but we have had quite a few successes. So that's a positive. We had -- let's see -- five total advocates that worked within the Tribes. One of them, was nonnative, but his family -- he comes from, you know, -- not immediate family, but Family that they married into were Native and he was actually accepted very well into the two Tribes that he worked with. There was even one powwow that he worked at, and he was invited out onto the parade grounds to speak. And invited to dinners afterwards, with the tribal Elders; so, we were really impressed that he was able to make such good end roads. Back to you, Kimball.

>> KIMBALL GRAY: All right, thank you, and now I'm going to take it to Indigo, and that's Sunshine and Jillian.

 >> JILL: Thank you, Kimball, I'm Jill, the Executive Director here with Indigo, a woman in my 50s with short white hair, wearing a green sweater, and I am here with our staffer, Sunshine. Who was with our program here at Indigo, we serve eight counties in northwest Wisconsin. We serve a very rural area, and we face some of the same challenges as Julie, as Adam, and as Madonna have shared, earlier today in surveying all of our communities. And I actually was not here when the demonstration project was in process, sunshine was here at that point in time, and she served as the program coordinator for our program. And so, I will let Sunshine tell you more about our program experiences

>> Sunshine: Hello. I am a river tribal member from Wisconsin, and battle river was one of the tribes we did serve, I am a woman in my late 40s, with, dark hair, and a purple shirt. So, yes, so we started our program in 2016, I came on board, in January of 2017 and I would like to say, I would agree with Madonna wholeheartedly, it's all about Staff; so our director at the time was insistent and stuck -- to his decision about just hiring Native American staff, specifically, Native American staff that lived in the communities that we were serving. So, in our eight-county service area, we have -- four tribes so we served all four tribes. I was the coordinator for the program, and we hired two independent living staff, to serve the two tribes, and they lived in the communities that they had served. I think, we were also similar, where to Madonna's program, where we just went in, and immediately started doing outreach. I felt like that was the quickest and easiest way to get in. Luckily, I had come from a previous position, where the same four tribes that we serve here, then and currently, I had already spent 12 years doing outreach to, so they were familiar with me. And it may transition pretty easy for our program and quick, once we hired other Native American staff. We did establish, an all-Native American board of -- service providers, Native Americans. Educators, current board staff that we had at the center that were Native American as well and got them to -- you know -- work within their own communities as well. To come up with additional outreach, and programs, and how we should operate our program. So, we were able to very quickly get up and running, because, you know, I felt and the people who we hired felt that it was just quicker to get in and start doing outreach. So, we did outreach at the Health Centers, at powwows at other community events, they went in, And did one-on-one meetings with other service providers in our four tribal communities. And just introduce ourselves to them, and we just immediately started there, which frankly it wouldn't have gone so well, if they weren't -- if we weren't all tribal members already familiar with the services. So, yes, yes, you absolutely have to hire Native American staff. It makes it easier; people are more comfortable talking to you. Knowing that you share a similar background. -- so, I think that was No. 1. One of the things that we also discovered is, especially regarding the definition of "disability", and how family structure worked with that. So, we found that a lot of tribal members, didn't always identify themselves as having a disability. For them it was just a matter of, this is -- who I am, and this is, you know, -- how I live. And, I wouldn't say it was a "disability." You know, I just -- you know, making do and getting by, and I figured out how to make this work for me. So, it wasn't -- The word of a disability was a little bit different for them. And the -- the word "disability culture" wasn't always something that they were familiar with. So, similar to the other programs, once we defined the services that we provided, it was -- (pause) they were a little bit more willing to talk with us, and share with us, and come to solutions, with what they were struggling with us. And more open. If we didn't necessarily use that word, "disability." What else we discovered is that at least in our four communities, there was a lot of services, already for Elders. That wasn't as much as a need, as services, for youth with disability, and transition services. So, what we decided to focus on after that first year, was, providing services to Youth. So, for two summers we had a Youth Empowerment Conference, where we invited Tribal Youth from all over to come, meet each other. Learn about transition services. We also developed some curriculum to go into one of the tribal schools that they have here. And we had a staff provide... like, budgeting, And just basic life skills, And.... Empowerment things for them as well. As the Youth and they met over a semester during their free hour. And the staff did a program with them, and then, later on, after then, they had kind of a little Graduation; and we did some other things with them. So that's what we had found up here, just because of our -- how our services are laid out in our four tribes that those services for Elders, were already there, so we really did focus on Youth. We also did develop our own specific outreach materials for our tribal communities, instead of just using our agency outreach, so we did that as well, which was helpful in -- doing outreach so it just wasn't a brochure of.... Non-native people, and it was more geared to kind of what our vision was, as a program. After our program was over, we did -- we were able to keep on... one of the independent living staff that we hired for a while, is -- while we had funds for her -- and she did stay on. I think, what ended up happening was -- is, the communities got used to us being in the community already. Our center being in the community. So, we continued to do that. With our regular staff. And they are still invited into the communities, and they still do outreach that way. I think it certainly gave.... Our center more exposure into the communities in our service area, so that they continue to be there. But like I said, most important thing was, to hire Native American Staff. If you want to do outreach in those communities, you have to hire somebody that looks like the people that you're trying to reach. I think it's no different than the concept that the centers need to hire people with disabilities. If you want to do outreach in Native American communities, you have to hire people that look like them. As well. (A pause), I kind of think that was sort of our take-away from all of that. You just... I think once you do have people that are Native going out into the Community it makes it so much easier. Similar to, I think, what one of the other centers said is we didn't want them to think that we were coming in and going away. It was a common -- comment. Are you just going to come? And then you're going to provide us services and then you're going to go away? And we said no, you know, we're still going to be here, you know, our program will still be here. We're just trying to introduce services to you in a -- in a culturally competent way so that you get familiar with us. And even if the program does end, you're still welcome and feel comfortable coming back to our Center for assistance, as well -- and many of them do. You know, they have stayed with us over the years, came back to us for different services, you know, referred family members, The experience has been good. So, they continue to come back, and refer other community members to us, as well. (A pause), KIMBALL GRAY: All right, I appreciate that. Great -- this has been great information. Coming from the Centers, And I -- I am beginning to see a theme. Hire Natives to work with Native Individuals which kind of makes sense, when we are -- as CILs, we put a lot of power, in the peer, in other words, people with disabilities working with people with disabilities. It seems that also applies to culture, in this instance. And now I would like to take it back to Hoskie, to give us a few thoughts from what he's heard and what he would like to say about what he's heard. Hoskie?

>> Hoskie Benally: Yes, am I muted?

>> KIMBALL GRAY: You're good, go ahead.

>> Hoskie Benally: Hello, yes, and it's real true of hiring Natives to serve their own people. Here with our Law Center a large portion of our staff is native. Those advocates who go out in the communities and not only being Native but being able to speak the language. Especially with the Elders. One of the things that, we did here, and with Hopi is we put out a resource guide, and that resource guide was a list of some of the services that were available out there, that they provided. So that somebody has an idea of where they can go and seek certain services. Facebook is another thing that we use, to get information out. We have a list of disability organizations, here across -- the Navajo Nation, others in Arizona, New Mexico and Utah because we had -- in those three areas and it's a good way to get information out and to share that information, and asking them, to share that information. As well as some of the workshops that are -- that we get here, with their Law Center, and then sharing that with those out there. (After a pause), one of the things that, I -- I strongly-advocate for, if it's possible, somehow, what we -- what we did here with the Navajo Nation, is, the Navajo Nation Council passed Legislation where, they established within the government, a Disability Group, which is Navajo Nation council on disabilities, and what their job is to make sure that policies, or, regulations, legislation within the tribe, does not create barriers or does not discriminate against those with disabilities, and then, also, to identify service gaps that exist out there. And begin to address them. And in that way, you're not looking kind of, like, from outside into the government; you're in the government, and so, you can move forward Resolutions, or -- Ordinances through your Tribal Council, and be recognized, in that manner; and it carries a lot of weight in doing that. I know it's very difficult to do that. But that's something, that you might think about doing. But it looks like everybody's doing good work, I know it's very challenging. I sometimes get frustrated. And I -- we put out things out there, but sometimes, nobody shows up. Sometimes maybe two or three will show up. But it's just the nature of who we are, I guess, but we continue to move things forward. So, I just want to thank everybody for helping our relatives out there that are Native Americans, and in the best way that they can. And we just have to keep plugging away at it. So, it's good information. I'm going to use some of the information, when I go, and be that Voice on our National Council on Disabilities so some of the information I was looking for also, so thank you very much. (Concludes remarks), KIMBALL GRAY: All right, thank you, Hoskie. And all the presenters. Are we going to -- Jenny, do we want to move to the Q&A piece now?

>> Jenny Sichel: Yes, I would love to move to the Q&A piece right now. Thank you, Kimball, and thank you, so much, to all of the Presenters. This was really interesting. I'm sure, for everyone. So, I think this question, was brought up at the beginning of the webinar, and, Hoskie, I believe this was sort of directed at something you were saying, but, Jason asks, why wouldn't your nation recognize all of what ADA offers? And I know that was touched upon, and Hoskie, would you be able to sort of speak to that a little bit?

>> Hoskie Benally: Sure. Because of the treaty between the government, here, at Navajo Nation, and the U.S. government and other tribes, they have what they call a sovereign immunity. So, the tribes have their own government within the United States government. So, therefore, Federal Law, in some cases will not.... Be recognized within a tribe. And here, ADA is one of those things that they don't recognize. It's just a way that the treaties are set up with the United States Government in certain tribes, and there are other tribes, which have the ADA be used, and like I said with ours, we just -- we don't call it ADA. We put forth legislation of our own, that covers accessibility, housing and employment, even incarcerated people. So, a lot of ways this follows the ADA.

>> Jenny: Thank you. And so, for our next question, Joan, I know that you had mentioned a few people, were asking questions, of you and Janelle in the chat. Would you be able to sort of repeat those questions and answer them for me? I will have you come on. Joan O'Keefe: Yeah, some -- a number of people asked about the seven tips, and Janelle didn't quite get to. So, Janelle, if you would share those, that would be great.

>> Jenny: You are on mute, Janelle. Maybe, we will come back to you guys, Joan, will that work, oh, there she is! Okay, Janelle is here

>> JANELLE FRIDAY: Sorry, it wouldn't come off mute. These were just seven of the tips that came from our native regional health consortium search -- I don't know if anybody is familiar with that. So, the 7 tips for building cultural communication were remember that establishing good communication is the first part of building any relationship -- any relationship. Place yourself in the other person's shoes, 3) acceptance of a person's cultural values do not lessen your own, 4), position yourself with the understanding that our communication is never entirely successful no matter the format of the cultural perspective; 5), never assume. 6) seek ways to become involved and educate yourselves on local culture; and 7), if you do hurt someone with something you say, take responsibility and reach out to that person, to apologize, and repair the situation. That was the -- it was 7 tips from our local Native -- native regional health consortium search.

>> Jenny: Great, thank you, Janelle, and -- actually, if you or Joan are able to put into the chat, where people might be able to find those, that would actually be great.

 >> JANELLE FRIDAY: I did answer it on one of them, just so you know, so it was –

>> Jenny Sichel: Okay, did you put that in the Q&A section or in the chat section?

>> JANELLE FRIDAY: It was the Q&A.

>> Jenny: Okay, so if you can put it in the chat section, and I will open it up, so that you can send chats to everyone. And then, just put that into the chat, if you're -- if possible, so that everybody can see it. -- (pause), There we go, perfect, love it. Okay, so, our next QUESTION: Comes to us, from Peter. And Peter asks, how do you set the wages for people you hire, to deliver services to tribes? And I will kind of open that up to anyone that would like to answer something like that. (A pause), or if you have more questions for Peter.

>> Tanya from Superior Alliance for Independent Living: We paid our Native American disability service advocates the same as our regular peer support advocates. Because they did provide the same services.

>> KIMBALL GRAY: This is Kimball coming back in for a second, I think, first of all, when CILs heard they're going to have to hire new staff so most of them just cringe. Just because of the money. They have now tried to keep staff on. But I also believe and -- am pretty sure, when you're doing a -- a tightly-focused program, on Indian country issues that there are -- there will open up more funding sources that you can seek out, because they'll be targeted for that population. So that might be another source of funding, if you are looking to hire Native Americans to work in Indian country.

>> Jenny: Great, thank you, both for that information and knowledge, so the next question comes to us -- I'm going to totally mispronounce, the person's name, shajira [phonetic], this is for jill and sunshine, if the term disability wasn't welcomed, were there other terms as well?

>> Sunshine: Hi, this is Sunshine, so it wasn't that it wasn't welcomed, in so much as -- it was considered, maybe, not a preferred term, I -- I found myself saying a lot, you know, it's not a bad thing, and then, having to share with people, this -- this world of disability culture to be honest. I also became familiar with -- when I came to work at the Center here. It -- it was a whole new world for me as well. Being from the Native American Community because it felt like we always just made it work. I mean, we've always had hard times, and came from, you know, different backgrounds, than a lot of people; so... and different home and different cultures and different ways of growing up, that I can see why that term wasn't used. We just figured it out. And people helped each other. And, you know, we were a close community, so I can see why, that term wasn't used. So, I don't want -- I'm not saying that it was frowned upon, it just wasn't something that they were used to. Which is why, for us, because of that use of term of "disability" which is why it's important for us, to introduce our tribal youth to this disability culture. We brought some of them to APRL, the national conference to introduce them something they hadn't seen before and then introduced them to each other and other youth in their community, to start to have them own that word, like, it's done on the National Level that perhaps you're not familiar with until you work at a Center or you become familiar with disability culture.

>> JENNY SICHEL: Thank you, for that. So next question comes from Rosalie, and they ask, do you -- do any of the panelists have suggestions, of how to advertise, and promote available positions to Native American Indian community? Are there places and spaces to consider, or did you do relationship-building with community first, to, then, hire? And I will let whoever can speak to that chime in.

>> Sunshine: Hi, this is Sunshine again, so I was here for the hiring process of our independent living specialists, and for us, it was real word-of-mouth. So because I was familiar with a lot of the communities already, I shared a lot of that with people in tribal communities, who I know urb about who work in the health centers or who I know, that was a lot of it. We also have voc rehab program, one tribe has one in our service area, they operate by themselves, and another one it's more kind of, like, a consortia, so we also would share those positions with them, because, of course, we wanted to hire Native Americans but we also wanted to hire Native Americans with disabilities; so, those were kind of the focuses for us, just word-of-mouth, and community members, within the tribal communities, and then, there voc rehab offices. Jenny: Any other panelists that sort of want to chime in on that question? (A pause), Janelle, I saw you unmute

>> JANELLE FRIDAY: No, I was hired that way. As Sunshine spoke, but mine was also, the person who hired me, she, actually, went to the tribes, and, talked to people about who is a good worker around here. Type of thing. So that was really helpful, I feel like, and when we hired, in other smaller rural communities it was a lot of talking to their Leaders in that community. (A pause), Jenny: Great, thank you, and I just want to remind our Audience, our attendees -- to make sure you fill out our evaluation link so that we can improve our services and see what we did well, for the next upcoming webinars. So, we're going to go on -- we have a couple of more questions here that we can answer, we have a little bit more time. (Pause), but this one, is, for -- I believe it is, Jill and Sunshine again, you guys are already spotlighted, pinned but can you speak to your four tribes that you had mentioned in Wisconsin? Which tribes were those?

>> Yes, thanks jenny so we serve St. Croix red cliff, bad river, and Lacoutearay

>> JENNY SICHEL: Great, thank you, and, in that same area, Tanya, are you able to say which two tribes, you work with? Tanya from Superior Alliance for Independent Living:

 >> JENNY SICHEL: You are muted,

>> Tanya, Superior Alliance for Independent Living: I'm sorry, could you repeat the question, I didn't quite hear it?

>> Jenny Sichel: Yeah, are you able to mention which two tribes you work with?

>> Tanya: One is the -- we're still continuing to work with and host office hours are the Sioux tribe in Bay Mills, so we did have office hours, with hanovile, and Kbic, but that staff member that we have working with those, three tribes, he, actually, got hired on, to work with, Hanville, before our grant ended so he went there, and, the other gentleman stayed on, we were able to keep him on with other funding so that was great.

>> Jenny Sichel: Great, and then, so our next question comes from Susan, and they ask has partnership with Native communities changed your thinking about independent living and disability in any way? And I will let anyone who is able to answer that, kind of, speak out. Any takers? Any questions? And I do know this is a little bit more intricate question, so maybe what we'll do, if we don't have any takers right now, we can potentially address this in e-mail after. (After a pause), okay, so let's go on to our next question then.

>> JENNY SICHEL: So our next question is: Well, first, let me just say that, we have posted in the chat, where, you can find the recording of this session, and we will also add contact information, for the individuals that are not listed on the current slide screen so that will be available on the ILRU Website as well. So, next question comes to us from Carol: And they want to know, some best tips, for people, working with Native individuals in areas that have just a few Native individuals, are there any good tips that you guys can give? for that type of situation?

>> JENNY SICHEL: Any thoughts on that question? And we can always come back to it, too, to give you guys a little time to think on that. We will come back to that question, I think. So, no worries there. Next question, Is, from Wesley. Are native staff being kept on long-term? How can CILs avoid using Native people for their connections without truly building a partnership? And having Native staff be a part of the CIL, and maybe some of you can sort of speak to your experiences on that. A little bit. Or

>> Madonna Feather: This is Madonna, I can

>> Jenny: Go ahead.

>> Madonna Feather: So, one of my advisory members, you know, had said, are we just going to be put on the shelf once this is -- this data is collected? And, you know, I -- I am not employed anymore with DSLC. So, that's a hard one. I -- I am now on the Board for DSLC, but I am not -- I don't have a job there after, you know, this amazing work that I did, I'm not employed. And so that's the frustration, where, you know, my -- my community, my Native community, is frustrated. Because we do all this work, and then, the grant money ends. (Pause), Madonna Feather: So that's my part on that.

>> Jenny Sichel: Thank you for that Madonna, any other insight, I heard someone

>> Jenny if I can add on the –

>> Jenny: Yeah.

>> ADAM BROWN: That's frustrating on both -- on all of these sort of demonstration projects, It is so finite; and, yeah, it is a -- it's -- you know, when we -- when you hire -- when you're bringing people on, especially, when it's -- when it's a three-year, like, this was a three-year project, You know, we, you know, we were able to get a -- you know, a one-year extension, but that was it. And it's very specific. So, I think that is a challenge, because, on one hand, you're recruiting someone to do a specific, you know, -- to take on the specific role; and then, yeah, there's -- there's not necessarily funding out there. There's not a lot of, you know, -- we've, I think, from Year 1, we were looking at other ways to continue the funding on this. And... you know, we looked at -- we looked at Foundations, we looked at other public funding. We looked at fund -- direct-fundraising and nothing was able -- was able to meet the finance -- the staffing component, which was left -- that had been covered by this project.

Jenny Sichel: Thank you, for that Adam, and unfortunately, I don't think we have anymore time to answer anymore questions, Kimball, you want to close us out here?

>> KIMBALL GRAY: Yes, I do, and I want to appreciate -- I mean, I appreciate all of the individuals that, I hope learned something today. That signed on and participated. And I really appreciate and value all of the presenters, and the work they have done, and Hoskie, I'm looking forward to seeing you do great things on NCD. And, maybe, elevate the importance of what need to be done in Indian country. And for that, I would say, thanks, everybody. And have a great day.