

FINAL REPORT: RECOMMENDATIONS FOR TRAINING CURRICULA FOR OLDER AMERICANS ACT TITLE VI NUTRITION PROGRAM PROFESSIONALS

INTRODUCTION

Based on discussions with and requests of Title VI Program Directors, the need for the development and implementation of programs to meet the training needs of Older Americans Act (OAA) Title VI nutrition and aging program professionals was raised to improve the administration, implementation, quality, efficiency, and effectiveness of the implementation of the OAA Title VI Nutrition Program. An environmental scan of available client needs assessments, program surveys, program evaluations, research, and studies by federal, non-governmental organizations and research institutions was conducted.

In the following sections of this report are a series of recommendations to serve as guidelines regarding the development and implementation of a standardized training programs to the staff of Tribal Title VI nutrition programs that meet the requirements of the Older Americans Act nutrition programs. These recommendations relied on studies, assessments, and program evaluations conducted by national organizations such as the National Association of Area Agencies on Aging (n4a), the National Resource Center on Native American Aging (NRCNAA), Administration on Community Living/Administration on Aging (ACL/AOA), the National Resource Center on Nutrition and Aging and others cited elsewhere in this report.

THE ENVIRONMENTAL SETTING

For clarification purposes, reference to “Indian Country” is used to denote all 573 federally recognized Indian tribes and Alaskan Native communities. Federally recognized tribes are those tribes having a unique government-to-government relationship with the federal government referred to as the “federal trust responsibility.” Title VI of the Older Americans Act is the programmatic and statutory manifestation of this relationship. This, however, was not always the case. Prior to the passage of Title VI of the Older Americans Act (OAA Title VI) in 1978, Title III and Title VII of the OAA funding targeted State Units on Aging (SUAs) and Area Agencies on Aging (AAAs). Tribes, if they had a working relationship with the AAAs in their area, were able to receive funding for their elderly programs. Unfortunately, many did not. Although the Title VI program was passed in 1978, it was not until 1980 that \$6 million was appropriated for the program. In the first year of the availability of Title VI funding, less than 30 tribes applied for and received funding under this title.

To fully appreciate the socio-economic status of Indian Country in which this report pertains to, the following information and data is presented and why the development and implementation of the recommendations is framed in the foregoing manner. The following data is presented on just four of the many social determinants of health:

- **Population:** According to the Administration for Community Living/Administration on Aging (ACL/AOA) there were almost 600,000 Americans age 65 and over who reported they were American Indian in combination with one or more races in the United States. Of this population, almost 260,000 reported being American Indian alone and over half (61%) reside in ten (10) states: Oklahoma (31,876), Arizona (25,539), California (23,058), New Mexico (17,983), North Carolina (14,233), Texas (12,406), Washington (9,800) Florida (8,792), New York (7,106), and Michigan (6,561). It is projected that this population will grow to almost 650,000 by 2060 – or almost 150%. This is the highest growth rate among all racial and ethnic groups.
- **Health:** American Indian and Alaska Natives have higher mortality rates than other Americans for a number of conditions including chronic liver disease and cirrhosis (368 percent higher), diabetes mellitus (177 percent higher), unintentional injuries (138 percent higher), and chronic lower respiratory diseases (59 percent higher (Indian Health Services 2014). The need for LTSS services based on health status of American Indians and Alaska Natives can best be demonstrated by the following: (a) Bathing – Twenty two percent of American Indians age 65 and over require assistance as compared with eleven percent of the general population. (b) Dressing – Fourteen percent of American Indians age 65 and over require assistance as compared with five percent of the general population. (c) Eating – Ten percent of American Indians age 65 and over require assistance as compared to three percent of the general population. (d) Getting In/Out of Bed – Fifteen percent of American Indians age 65 and over require assistance as compared with six percent of the general population. (d) Walking – Thirty two percent of American Indians age 65 and over require assistance as compared to ten percent of the general population.
- **Income Disparities:** American Indian and Alaska Native elders experience significant income disparities from the general population (AARP Research Report 2015-08); (a) Twice the percentage of Older American Indians and Alaska Natives live below poverty as compared to the general population; (b) Among American Indian and Alaska Natives ages 50 to 64, fifty four percent are employed as compared to sixty six percent of the general population. In the same age group forty percent are not in the labor force as compared to thirty percent of the general population and; (c) The mean total personal annual for American Indian and Alaska Native elders age 50 and above is approximately \$10,000 less than that of the same age general population which equates to twenty five percent lower income than the general population.
- **Caregivers:** In recent studies by AARP and the University of Washington, it is estimated that among the general population that 1 in 5 elderly are diagnosed with Alzheimer's Disease or some form of Dementia; among the Indian elderly in northern California,

research found that 1 in 3 Indians over the age of 45 would be diagnosed with Alzheimer's Disease or Dementia in the next 25 years. When extrapolated to the current 300,000 Indian population, it is estimated that 100,000 (*using the 1 in 3 finding*) are diagnosed with this disease; or using the 1 in 5 statistics, 60,000 Indian elderly diagnosed with this disease. This population will require intensive and specialized care as the disease progresses. Currently, caregivers are family members who are untrained to provide this level of care and undoubtedly will put a strain on the caregiver, the family and the community mentally, physically and financially. In a recent Centers for Disease Control (CDC) and Alzheimer's Association publication, *"The Healthy Brain Initiative Road Map for Indian Country"* (May 2019), a healthy diet was identified as a risk reduction activity-a program directly implicating the importance of Title VI nutrition programs.

CONNECTING THE DOTS

The development of any type of program or initiative necessitates understanding the social determinants of health of a given population. The American Indian population is no exception to this tenet. Without this proper understanding will inevitably result in superimposing inappropriate and insensitive processes, procedures, and programs onto a population that has experienced trauma in the past. Moreover, American Indian populations view health issues in a holistic perspective knowing that Food has a sacred and spiritual quality that affects the mental, physical, emotional and spiritual well-being of the person.

NATIONAL RESOURCE CENTER ON NUTRITION AND AGING (NRCNA)

Since 2011, Meals on Wheels America (MOWA) has hosted the NRCNA through a cooperative agreement with the Administration for Community Living (ACL). In 2018, the NRCNA received supplemental funding from ACL for the purposes of reviewing and synthesizing research and data pertaining to the technical assistance and training needs of Title VI Programs across the nation. To accomplish the NRCNA identified a set of activities that would address this objective including:

1. Developing one issue brief describing the synthesis and summary of key Title VI data sources (such as the annual survey data from the 2017 National Association of Area Agencies on Aging (n4a) Long-Term Services and Supports Survey, 2017 National Title VI Needs Assessment and preliminary evaluation data from the 2018 National Title VI Evaluation) and the issue brief's ability to be leveraged to address the training needs of nutrition and aging service providers.
2. Crafting a Title VI literature review leveraging available research to inform needs assessment for curriculum development.
3. Pilot testing a training needs assessment instrument at the five Title VI Program sites Indian Country to identify topics foundational to developing a basic nutrition and aging curriculum (Attached as **ATTACHMENT 1**).

4. Developing recommendations for a Title VI Program curriculum to be offered through Tribal Colleges. Tribal colleges were selected as training resources due to their familiarity with tribal customs, beliefs, and traditions of tribal communities. A brief description of these tribal colleges, their history, the role they play in the community and the academic achievements of their students are presented in the following section.

Going forward, upon completion of these activities, the NRCNA hopes to leverage the above products to develop a Title VI Program curriculum to be offered through Tribal Colleges. Tribal Colleges are ideal venues to support the training needs of Title VI nutrition program professionals due to their familiarity with tribal customs, beliefs, and traditions of tribal communities

INTRODUCTION TO TRIBAL COLLEGES

There are 35 Tribal Colleges and Universities in Indian Country. The oldest of these institutions is Dine College, which was founded by the Navajo Nation in 1969. Presently, there are 32 fully accredited Tribal Colleges and Universities (TCUs) in the United States, with one formal candidate for accreditation. Three are in Associate Status. These TCUs offer over 325 total programs from Certificate programs to master's degree programs. Some of these institutions are accredited by Higher Learning Commission (HLC) while others are accredited by the Northwest Commission on Colleges and Universities (NWCCU) - like all other institutions of higher learning in the country.

Most of these institutions are tribally created and located in regions with the most tribal nations. The institutions have enrollment of over 30,000 full- and part-time students. According to enrollment data from the 35 TCUs, AI/AN students composed 78 percent of the combined total enrollment in these institutions. The percentage of AI/AN students attending TCUs are increasing yearly and is expected to increase into the next few decades. TCUs play a role their communities by creating learning environments that reaffirms and strengthens American Indian culture, languages, and traditions. According to studies by the American Indian College Fund, 86% of students attending these TCUs complete their course of study compared to the 10% completion rate among students attending non-tribal institutions. It should be noted that the location of these institutions are in states with significant Indian populations – over 50% of the American Indian reservations are located west of the Mississippi River. The following chart indicates the state and number of tribal colleges in each state. (American Indian College Fund, 2019)

STATE	NO.	STATE	NO.
Alaska	1	Nebraska	2
Arizona	2	New Mexico	3
Kansas	1	Oklahoma	1
Michigan	3	South Dakota	3

Minnesota	4	Washington	1
Montana	7	Wisconsin	2
North Dakota	5		

Approaching one of these 35 TCUs for the next phase of the project would be a welcome approach. There are currently two institutions that have a culinary arts program that could serve as a model for the type of congregate cooking/nutrition curriculum the NRCNA is seeking to develop, and perhaps the basis for

PILOT NEED ASSESSMENT SURVEY RESULTS

ATTACHMENT 1 displays the result of the training needs assessment that was piloted in six Title VI nutrition sites in the western United States. The name of the tribe has deliberately been deleted to protect the confidentiality of the tribe – as this was the agreement. As a result of the pilot test, the instrument was modified to reduce confusion in responding to the questions. The changes that were made in the questions related to “TRIBE” and “TRIBAL MEMBER”. Specifically, the first question was worded “Tribe” and the second was worded “Tribal Member.” This caused confusion in the responses and was, upon revision, changed to “Tribe where you are enrolled.” This should provide more accurate information. The rationale for including this question related to how tribal members view non-tribal members working in “their” program. In interviews with the Director of the program, the Director commented that she was received with suspicion and at times passive aggressive behavior by the staff and the community. This, potentially, could affect the quality of the management of the program and the longevity of the leadership.

The sample size for this survey was 14 ($n=14$) and as a result, the data should not be interpreted as a comprehensive and nor a survey that adhered to rigorous survey methodologies. It does, however, provide surface view into the training needs of one specific tribal nutrition program. The project is currently transmitting the survey instrument to the 270 plus Tribal Title VI programs to ensure a more comprehensive and reliable study can be obtained. It should be noted, however, the results obtained from this one program reflects comments that have been made in multiple Title VI Training sessions nationally and regionally.

A cursory analysis of the data suggests that the staff of the program, educationally, ranged from 2-16 years of education with an average of 12.4 years. This corresponds to the age of the staff which ranged from 19-84 years with an average of age of 47. The level of education attainment has increased from late twentieth century to the last two decades suggesting that younger American Indians have more education opportunities. 57% of the staff of this program have worked 2 or more years; 43% have worked for one year or less. In other words, a significant

number are new to the program and would suggest the need for increased training opportunities. This number roughly corresponds to those indicating the need for additional training (27%).

Of the staff responding to the survey, 10 (71%) indicated they were cooks at each of the six nutrition sites. 3 (23%) were drivers and additional 2 also were caregivers. Like most tribal nutrition sites, staff have multiple duties due to lack of funds to hire additional staff. In interviews with the Director, the director indicated that at times, the director takes on some of these duties as well. Since a majority of the staff served as cooks at the nutrition site, a significant number (86%) indicated that they would be willing to take additional training related to the Older Americans Act Nutrition program. When queried regarding the subject matter that they would want to receive additional training, most were related to the preparation of food. Topics such as nutrition basics relating to general health (50%), Portion Sizing (50%), Quantity food preparation (50%), Food Safety and Sanitation (50%), Traditional Foods (57%) and Exercise Programs (50%). When asked if they were interested in other aspects of the program such as Personnel Management, Program Management, Financial or Fiscal, Food Preparation and Customer Service, over 72% indicated an interest in either Program Management (43%) or Food Preparation (29%). This is not surprising since a 71% of the respondents were cooks.

The responses to the training modality most preferred, an equal number (57%) preferred to receive training away from the workplace or having instructors onsite to provide hands-on training. The least preferred training was Webinar Classes (7%). An equal number (27%) preferred either Online Classes or Video Training. Those preferring the latter form of training might be related to the age of the respondents. For the most part in Indian Country (and other areas for that matter), the youth are more tech-savvy than their older counterparts and would reflect this preference.

TITLE VI NATIONAL TRAINING AND TECHNICAL ASSISTANCE CONFERENCE SURVEY

Upon the piloting phase of the training needs assessment survey on one Title VI nutrition program, the survey instrument was administered during the 2019 National Title VI Training and Technical Assistance Conference in Minneapolis, Minnesota. A total of 74 survey instruments were completed and is attached as (**ATTACHMENT 3**) to this Final Report. There were approximately 400 attendees at the conference and therefore the return rate is an estimated 18.5%. The difference in the administration of this instrument, compared to the pilot site, was that respondents included the directors or managers of the Title VI program and therefore a greater percentage than the pilot site (42.5% vs. 0%, respectively); whereas the pilot site included only line staff (mostly cooks, drivers, etc.). This likely affected the responses to the type of training needs that resulted in this survey compared to the pilot site. In this survey, more of the training needs were in the program management and financial/fiscal matters than the pilot site.

The respondents in this phase of the survey appear to be older than the pilot site with an average age of 50.5 years and a range of 21-72 years. Compared to the pilot site where the average age was 47 and a range of 19-84. With 42.5% of the respondents being either directors or managers, this could be reason for the higher average age of the respondents. Director and managers tend to stay in their positions for greater lengths of time and mostly began their work in the early stages of the program. The level of education attainment in this survey averaged 12.3 years compared to the pilot site where the education attainment was 12.4 years – an insignificant difference. Of those responding to the survey, 21.9% responded that they have worked for the program for one year or less compared to 43% at the pilot site. Further analysis could yield additional information on the reasons for this difference. When asked about their perception of the training they received to adequately do their job, 47.9% indicated they either did not receive adequate training or were unsure of its adequacy. This number is significant in that 42.5% were directors or managers and to find that 47.9% believe they either did not receive adequate training or felt unsure. It is not clear whether those responding were directors or line staff. If the former, it can and will affect the management of the program resulting in deficiencies, non-compliance and mismanagement. Responses to training needs compared to the pilot site were markedly different. The survey indicated a higher need for management-type training, i.e. personnel, fiscal/financial issues and program management among these respondents compared to the pilot study responses. This suggests the training needs responses might be the effect of including directors in this survey. Another perspective, however, by including directors and managers in these training sessions would also enable them to understand the complexity of being frontline staff and furthermore, in some programs directors oftentimes have to assume these positions due to inadequate funding.

Of those responding to the survey, 66.6% were from three federal regions: V, IX and X. Region V office is in Chicago and states in that region which have Indian populations are Michigan, Minnesota and Wisconsin. Region IX office is in San Francisco with states having Indian populations in that region are Arizona, California and Nevada. Region X office is in Seattle covering with states with Indian populations are Alaska, Idaho, Oregon and Washington. It is very likely that the training needs will vary from region to region, state to state and tribe to tribe. This has implications for the development of the Cooking & Nutrition curriculum and the need to adapt it to local training needs. This can be determined by further analysis of the results of this survey. The creation of a single curriculum will be too specific-tribal focus and tribes outside that area will find the course irrelevant (e.g. when the course being taught is “Traditional Foods”). Of those responding to the Food Preparation training needs, the topic most often mentioned was menu planning which included menu ideas, new recipes, etc. As part of this training and related to the issue of “Traditional Foods” was the topic of training that related to gardening utilizing indigenous plant/foods. Again, the identification of this topic is related to plant and foods that are familiar

and historically unique to that part of the country. For example, recipes utilizing prickly pears would not be applicable to Alaskan Native recipes as prickly pears are indigenous to the southwest desert.

When asked whether there would be an interest in additional training to increase their knowledge of their job responsibilities, 86.7% responded that they would be interested. This appears to validate the data related to their perception of whether they received adequate training to do their job responsibilities. Even among those who did not identify themselves as cooks, 78.4% indicated they would be interested in a course on cooking. Furthermore, when asked whether they would be interested in an Older Americans Act Title VI training program, 97.1% responded that they would be interested in taking such a course. In such a course, 62.1% responded that they would want to be trained on the requirements such as emergency planning, traditional foods, and fiscal management and reporting. Due to the high level of interest in a training program, respondents were asked what form of training would be preferred. Of those responding 52.9% preferred attending classes away from their worksite and 44.3% preferred instructors on-site at their worksite. Video training was the least preferred training modality of which only 15.7% prefer this training format. These preferences mirrored those of the pilot site respondents. As to the question about the preferred length of a certificate program, the most preferred length of the training was 3 months (64.4%) which were similar to those of the pilot site respondents (71%).

SUMMARY

The preceding sections identify and discuss the variable and status of tribal elderly programs in one specific location. However, it presents a generalized overview of the issues related to the provision of training to staff of tribal elderly nutrition programs. There is a need to explore and develop a curriculum that would provide training to improve the skills and knowledge of nutrition programs in Indian Country. Among the considerations in the development of this curriculum are the geographic location of these elderly nutrition programs, the education level of the staff needing the training, the subject matter of the training, the length of the training and the best way to provide the training. In the following section are recommendations to provide guidance to organizations and institutions undertaking this activity. The recommendations include process-related actions; training modalities, training results and curriculum elements.

RECOMMENDATIONS FOR THE DEVELOPMENT AND IMPLEMENTATION OF A TRAINING CURRICULUM

- **DEVELOP A CURRICULUM THAT IS CULTURALLY-APPROPRIATE.**

A training course to be developed and implemented should reflect the culture, traditions and customs of the tribal communities they serve. Research and studies of Indian students indicate that learning is best achieved when the educational materials recognizes and incorporate tribal knowledge into the learning setting. Researchers suggest that to reflect the cultures of Indian learners and their communities, educators must take into consideration three instructional elements: materials, instructional techniques, and learner characteristics (Butterfield, 1983). Other researchers have pointed out the importance of meaningful parental and community involvement (Trueba, 1988). The dates of these studies and their recommendation were being made in the late 1980's. The average age of both sets of respondents were in the late 40's and early 50's which would have about the time the typical Title VI worker in these surveys was born and most likely the recipient of the teaching methodologies being advocated by these researchers. To accomplish this, TCUs are in the best position to achieve this aspect of the recommendations.

- **IDENTIFY STAKEHOLDERS TO REVIEW AND APPROVE CURRICULUM.**

Title VI nutrition program staff and managers are the stakeholders in this effort and must be involved in the development of the curriculum. They are in the best position to know what type of training they need, what culturally relevant content needs to be included, and what should not be in the course. This recommendation is based on the author's personal experience in the development and implementation of a Behavioral Health Technician (BHT) certificate program at a TCU in New Mexico. The personal involvement of the stakeholders in the design of the curriculum also enabled the BHTs to be able to meet the employment requirements of the position and making them readily employable and a course that was culturally relevant.

- **PILOT THE CURRICULUM IN A TEST LOCATION.**

Upon the review and approval of the proposed curricula, it is recommended that the course be piloted at a TCU for outcome and evaluated for learning outcomes. By having this phase in the project, the curriculum outcomes (if poor) is localized and minimal. This phase will identify the strength, the weakness and relevance of the curriculum and will be evaluated by the students, instructors and appropriate academic staff. Based upon the evaluation of the curriculum, feedback from the students and instructors, the course will be modified (if necessary) and disseminated to the other TCUs for their consideration and possible implementation of the course for Title VI nutrition staff in other parts of Indian Country.

- **ESTABLISH A TRAINING CURRICULUM THAT IS LEARNING-LEVEL APPROPRIATE.**

Based on the data received at both survey sites, the average level of education attainment is 12 years or more suggesting that a high school level program would be commensurate with the education level of the training participants. Had the average education attainment level been lower, it would have been necessary to lower the teaching level to the appropriate level. Some researchers having studied Lev Vygotsky's Zone of Proximal Development (ZPD) as a teaching strategy to ensure that students, both young and old, can learn new concepts. The ZPD basically identifies learning occurs when students are assigned (1) tasks that the learner can do without assistance, (2) Tasks that the learner can do only with assistance and (3) Tasks that the learner cannot do even with assistance (Cain,

2010). The curriculum that is developed and implemented should be one that is based on a similar theoretical construct.

- **ESTABLISH A BASE LEVEL CURRICULUM THAT CAN BE EXPANDED TO UPPER LEVELS.**

The nutrition curriculum that is developed and implemented, to be most impactful and lasting, should be designed to be expandable. This could be done by establishing modules on different topics with increasing challenging materials. The initial base level curriculum is designed to provide basic information and training that will result in the awarding of a certificate. Depending on how the instruction is formatted, the opportunity to learn more about the topic should provide an avenue to access the next level of training that, theoretically, could lead to the development of an Associates program. The author's experience with the BHT program previously discussed began with a Certificate in Counseling; a year later, the certificate program graduated to an Associates level program and there is currently plans to establish Bachelor's program in counseling. The opportunity to increase the knowledge base of tribal Title VI nutrition program staff is a need. By providing these opportunities, rather than just accepting the position that they are currently in, it could increase the aspiration to move to higher positions in the program.

ATTACHMENT 1

NATIVE ELDER NUTRITION EDUCATION & TRAINING NEEDS ASSESSMENT

TITLE VI PROGRAM STAFF TRAINING NEEDS ASSESSMENT SURVEY

The survey that you are about to take is to find out what type and form of training you, as staff of the Title VI program, feel you need to do your job effectively and better.

Across the country among the Title VI programs and staff, many do their jobs without much training - and most do by "on the job training (OJT).

The National Resource Center on Nutrition and Aging, hosted by Meals on Wheels America with support the Administration for Community Living, is seeking to better understand the training and education needs of Title VI Nutrition Program staff like you.

There are no right or wrong answers to these questions and if you feel like a particular question does not apply to you or how you feel, feel free to write "N/A" in the space provided. This most likely would apply to QUESTIONS 7 thru QUESTION 11.

Upon completing the survey, please return the survey to your supervisor, manager, or director. They will be returning this survey to a Consultant for analysis. This will then be used to better understand and develop training here and other Title VI programs in the country.

We thank you in advance for your help and assistance in helping us understand the needs in your program.

NATIVE ELDER NUTRITION EDUCATION & TRAINING NEEDS ASSESSMENT

TITLE VI PROGRAM STAFF TRAINING NEEDS ASSESSMENT SURVEY

Organization:

There were no responses to this question.

Age:

AGE RANGE: 19 – 84

AVERAGE AGE: 47

MEDIAN AGE: 48.5

Tribe:

NON-NATION: 1

MEMBER NATION: 13

Tribal Member:

NON-MEMBER TRIBAL: 1

NATION MEMBER: 13

Years of Education:

RANGE IN YEARS: 2-16+ YEARS

AVERAGE YEARS: 12.4 YEARS

1. State where Tribe is located:

THE STATE: 14

OTHER: 0

2. Are you a member of the tribe where you are working?

YES: 9 (64%)

NO: 4 (29%)

NO RESPONSE: 1 (7%)

3. What is your position within the program? (Circle all that applies)

a. Director: *RESPONSE: 0*

b. Cook: *RESPONSES: 10 (71%)*

c. Driver: *RESPONSES: 3 (21%)*

d. Caregiver: *RESPONSES: 2 (14%)*

e. Volunteer: *RESPONSES: 2 (14%)*

f. Other: *RESPONSE: 1 (MAINTENANCE) (7%)*

4. Years worked for the program: (Circle one which applies)
 - a. 0-1: RESPONSES: 6 (43%)
 - b. 2-4: RESPONSES: 4 (29%)
 - c. 5-10: RESPONSES: 3 (21%)
 - d. 11 +: RESPONSES: 1 (7%)
5. Do believe you have received adequate training to do your job?(Circle one which applies)
 - a. Yes: RESPONSE: 10 (71%)
 - b. No: RESPONSE: 0
 - c. Not Sure: RESPONSE: 3 (21%)
 - d. Not Yet: RESPONSE: 1 (7%)
6. What area of training do you believe you need more of? (Circle all that applies)
 - a. Personnel Management (i.e. such as employee law, position responsibilities, conflict management, hiring/suspension/termination practices, etc.)

RESPONSE: 2 (14%)
 - b. Program Management((i.e. program requirements, program reporting such as # of people served, # of meals served, etc)

RESPONSE: 6 (43%)
 - c. Financial/fiscal (i.e. fiscal requirements, budgeting, costing, audits, reports to funding agency, communication with program management, etc.)

RESPONSE: 3 (21%)
 - d. Food Preparation:

RESPONSE: 4 (29%)
 - e. Other: Customer Service:

RESPONSE: 1 (7%)
7. If in the area of "Personnel Management", what would you want to know more about?

RESPONSE: Conflict Resolution: 1
8. If in the area of "Program Management", What would you want to know more about?
RESPONSE: Budget Reports: 1
RESPONSE: Monthly Reports: 1
RESPONSE: State Reports: 1
9. If in the area of "Financial/fiscal", what would you want to know more about?
RESPONSE: Budgeting: 3
RESPONSE: Costing: 1

RESPONSE: Audits: 1
RESPONSE: Personal Budgeting: 1
10. If in the area of "Food Preparation", what would you want to know more about?

RESPONSE: Safe Serving Certificate: 2
RESPONSE: Brand vs. Off Brand Foods
RESPONSE: Refresher Course: 2
RESPONSE: Food Varieties: 1
RESPONSE: Large group Cooking: 1

11. If you circled “Other”, what would want to know more about? *RESPONSE: 0*

12. If you are the Cook and a course was developed to help you learn more about your job, would you be interested in taking the course?

- a. Yes: *RESPONSE: 11 (79%)*
- b. No: *RESPONSE: 0*
- c. Not sure: *RESPONSE: 1 (7%)*
- d. Not Answered: *RESPONSE: 2 (14%)*

13. If a course was to be developed and made available on Older Americans Act Title VI Nutrition Program, would you be interested in taking the course?

- a. Yes: *RESPONSE: 12 (86%)*
- b. No: *RESPONSE: 0*
- c. Not sure: *RESPONSE: 1 (7%)*
- d. Not Answered: *RESPONSE: 1 (7%)*

14. In the Older Americans Act Title VI Nutrition Program course, what are some of the subjects that you want to learn more about? (Circle all that applies)

- a. Older Americans Act requirements:
RESPONSE: 5 (36%)
- b. Nutrition basics (general health, chronic disease, and nutrition information)
RESPONSE: 7 (50%)
- c. Nutrition services basics
RESPONSE: 6 (43%)
- d. Portion sizing (Amount of food to prepare for each meal)
RESPONSE: 7 (50%)
- e. Quantity Food Preparation (Cooking for a large number of people)
RESPONSE: 7 (50)
- f. Conversion (Understanding how to translate liters to quarts, etc.)
RESPONSE: 5 (36%)
- g. Menu Planning (Learning how to plan meals for the month)
RESPONSE: 6 (43%)
- h. Fiscal management and reporting (what is allowed, and how to report on programmatic activity). *RESPONSE: 3 (21%)*
- i. Basic food service (quantity production, inventory, portioning)
RESPONSE: 6 (43%)
- j. Inventory management

RESPONSE: 6 (43%)

k. Food safety and Sanitation

RESPONSE: 7 (50%)

l. Nutrition program management in emergency situations, emergency management

RESPONSE: 7 (50%)

m. Use and inclusion of traditional foods

RESPONSE: 8 (57%)

n. Customer service (dealing with difficult people, obtaining feedback from clients)

RESPONSE: 5 (36%)

o. Recipe development

RESPONSE: 4 (29%)

p. Kitchen facilities management (buying equipment, etc).

RESPONSE: 2 (14%)

q. Computer utilization

RESPONSE: 4 (29%)

r. Socialization Activities

RESPONSE: 6 (43%)

s. Exercise Program

RESPONSE: 7 (50%)

t. Videos (How to videos)

RESPONSE: 1 (7%)

u. Other:

RESPONSE: 0

**15. If classes were available and if you want to take these classes, would it be easier for you if:
(Circle one as your preference)**

a. Attend classes in person away from your worksite.

RESPONSE: 8 (57%)

b. Take classes online (Internet)

RESPONSE: 4 (29%)

c. Take Webinar classes

RESPONSE: 1 (7%)

d. Video training

RESPONSE: 4 (29%)

e. Instructors at worksite (Hands on training)

RESPONSE: 8 (57%)

f. Other:

RESPONSE: 0

g. Not Answered:

RESPONSE: 1 (7%)

16. If a Certificate course was offered, what length of time would you prefer to complete the course? (Circle one that applies)

a. 3 months:

RESPONSE: 10 (71%)

b. 6 months:

RESPONSE: 3 (21%)

c. 9 months:

RESPONSE: 1 (7%)

d. 12 months:

RESPONSE: 0

Not Answered: RESPONSE: 2 (14%)

17. In the position you currently hold, do you see a time when you will move to a higher position within the program or elsewhere?

a. Yes

RESPONSE: 1 (7%)

b. No

RESPONSE: 7 (50%)

c. Not Sure

RESPONSE: 6 (43%)

THANK YOU FOR COMPLETING THIS SURVEY!

For resources on nutrition and aging, please visit:

<https://nutritionandaging.org/nutrition-food-health/native-foods/>

ATTACHMENT 2

Requirements: 63 Credits

NAVAJO TECHNICAL UNIVERSITY	
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CULINARY ARTS

The A.A.S. Culinary Arts degree program is designed to provide graduates with the knowledge and skills necessary for employment in a number of food service industry settings. Students will obtain training in professional cooking and baking so they will understand the demands of product delivery. Students will also receive management training specific to a variety of demands in the industry such as food and beverage management, human resources management, and planning and management of both large and small scale catering and banquet events. Graduates will have gained a better understanding of their own interpersonal communication skills as they relate to both back-of-the-house and front-of-the-house communication demands.

A.A.S. - Culinary Arts Requirements: 63 Credits

GENERAL EDUCATION REQUIREMENTS		Credits
English/Communication:		6
	ENG 110	
	COM130 or COM 150	
Mathematics:		4
	MTH 121 or higher	
Dine Studies:		3-4
Natural or Physical Science:		4
Humanities/ Social Science:		3
Information Tech/Applied Computers:		3
	CMP 101 or higher	
CULINARY ARTS CORE REQUIREMENTS		
Semester ONE		Credits
CUL 103	Food Safety and Sanitation	3
CKG 101	Professional Cooking I	8
Semester TWO		Credits
CKG 111	Professional Cooking II	8
BKG 109	Professional Baking Basics	3
CKG 112	Professional Internship	3
Semester THREE		Credits
CUL 201	ServSafe Essentials	3
CUL 105	Nutrition	3
Semester FOUR		Credits
CUL 205	Food & Beverage Management	3
CUL 206	Banquets & Catering	3
CUL 207	Management and Supervision	3
TOTAL REQUIRED CREDIT HOURS		63

ATTACHMENT 3

The National Resource Center on Nutrition & Aging

Native Elder Nutrition Education & Training Needs Assessment Title VI Program Staff Training Needs Assessment Survey

Results

Survey responses for 74 surveys were entered and subsequently analyzed. For each of the variables discussed below, unless otherwise specified, missing responses were not included in any of the calculations. Similarly, in many cases, participants completed more than one response – in these cases, overall percentages will add up to greater than 100.0%. Frequencies and descriptives for each survey question are included below.

Organization (n = 67)

Participants were asked to report the name of their organization; a summary of their responses is shown below. Seven participants did not list their organization.

Tribe	Frequency	Percentage
Absentee Shawnee Tribe of Oklahoma	1	1.5%
Adult Protection Service	1	1.5%
Alabama-Coushatta Tribe of Texas Elder Program	1	1.5%
Aleutian Pribilof Islands Association	1	1.5%
Alu Like, Inc.	1	1.5%
Asa'carsarmiut Tribal Council	1	1.5%
Bad River Elderly (Meals on Wheels)	1	1.5%
Bay Mills Indian Community	1	1.5%
Catawba Senior Center	1	1.5%
Elder Services	1	1.5%
Elderly Center	1	1.5%
Grand Traverse Band of Ottawa and Chippewa Indians	3	4.5%
Great Lakes Inter-Tribal Council	1	1.5%
Hannahville Indian Community	1	1.5%
Ho-Chunk Nation Tribal Aging Unit	1	1.5%
Lac Courte Oreilles	2	3.0%
Liogue Senior Center/Pascua Yaqui	1	1.5%
Lummi Nation	1	1.5%
Mashpee Wampanoag Tribe	1	1.5%
Men Aging and LTC	1	1.5%
Menominee Indian Tribe of Wisconsin	2	3.0%

Muscogee Creek Nation Elderly Nutrition Program	1	1.5%
Non-Profit	1	1.5%
Nutrition	1	1.5%
Oneida Nation	1	1.5%
Orutsararmiut Native Council Senior Service	1	1.5%
Ponca Tribe of Nebraska	1	1.5%
Pyramid Lake Paiute Tribe	2	3.0%
Red Cliff Elderly Program	1	1.5%
Reno Sparks Indian Colony	1	1.5%

Sac and Fox Tribe of the Mississippi in Iowa	2	3.0%
Saint Regis Mohawk Tribe Office of the Aging	1	1.5%
Salt River Pima-Maricopa Indian Community	2	3.0%
Santa Clara Senior Center	1	1.5%
Santo Domingo Elderly Center	1	1.5%
Sault Tribe of Chippewa Indians	1	1.5%
Senior Nutrition	1	1.5%
Sho-Ban	1	1.5%
Sho-Pai Tribe	1	1.5%
Shoshone-Paiute Tribes Senior Center	1	1.5%
Snoqualmie Tribe Elder Care	1	1.5%
Social Services	1	1.5%
Spirit Lake Senior Service	2	3.0%
Spokane Tribe	3	4.5%
Standing Rock Title VI: Nutrition for the Elderly/Caregiver Support Program	1	1.5%
The Confederated Tribes of Warm Springs	1	1.5%
Three Affiliated Tribes - New Town Aging	1	1.5%
Title VI	2	3.0%
Tribal Administration	1	1.5%
United Keetoowah Band	1	1.5%
Walker River Paiute Tribe	2	3.0%
Washoe Tribe of NV/CA	2	3.0%
Winnebago Sr Center	2	3.0%

Tribe (n = 70)

A summary of the respondents from participating tribes is shown below. In addition to two responses that were missing, two respondents were excluded, as one individual wrote the word “Yes,” and another wrote “NA.”

Tribe	Frequency	Percentage
Alabama-Coushatta Tribe	1	1.4%
Asa'carsarmiut Tribe	2	2.9%
Bad River	1	1.4%
Bay Mills Indian Community	1	1.4%
Blackfeet	1	1.4%
Catawba	1	1.4%
Confederated Salish and Kootenai Tribe	2	2.9%
Confederated Tribes of Warm Springs	1	1.4%
Doyon	1	1.4%
Grand Traverse Band of Ottawa and Chippewa Indians	3	4.3%
Ho-Chunk Nation	1	1.4%
Hualapai	1	1.4%
Karuk	1	1.4%
Lac Courte Oreilles	3	4.3%
Lummi	1	1.4%

Maidy Berry Creek	1	1.4%
Menominee	2	2.9%
Meswaki Tribe	1	1.4%
Mille Lacs Band	2	2.9%
Muscogee Creek	2	2.9%
Navajo	1	1.4%
Ohkay Owingeh	1	1.4%
Oneida Nation	2	2.9%
Orutsarmiut Traditional Native Council	1	1.4%
Paiute	1	1.4%
Pascua Yaqui	3	4.3%
Pawnee	1	1.4%
Pueblo of Acoma	1	1.4%
Pyramid Lake Paiute	2	2.9%
Red Cliff	1	1.4%
Rosebud Sioux Tribe	1	1.4%
Sac and Fox Tribe of the Mississippi	1	1.4%
Saint Regis Mohawk	1	1.4%
Salt River Pima-Maricopa	1	1.4%
Santo Domingo	2	2.9%
Sault Tribe of Chippewa Indians	2	2.9%
Seminole	1	1.4%
Sho-Ban	1	1.4%
Sho-Pai Tribe	1	1.4%
Shoshone-Paiute Tribes	1	1.4%
Shosone-Bannock Tribes	1	1.4%
Spirit Lake Tribe	2	2.9%
Spokane	3	4.3%
Standing Rock Sioux Tribe	1	1.4%
Three Affiliated Tribes New Town	1	1.4%
Tohono O'odham Nation	1	1.4%
United Keetoowah Band of Cherokee Indians in Oklahoma	1	1.4%
Walker River Paiute Tribe	1	1.4%
Washoe	1	1.4%
White Earth Reservation	1	1.4%
Winnebago Tribe of NE	2	2.9%

Education (n = 63 total responses; 44 utilized in analysis)

Participants' total years of education were assessed, with the overall mean being 12.3 years (range of 2-21 years). However, due to the variety of responses received, this variable should be interpreted with caution. A number of respondents listed the degrees they had, or the title, rather than the years (e.g., "Some college," "BA," "College Culinary Associates degree," "12+ some courses college," or "12+"). As a result, only those who listed a specific numeric value were used to calculate the mean and range, however it should be noted that some participants listed "2," "4," "5," or "6" years of education – it is unclear if those values refer to years of education past high school. If those responses

are removed, the mean becomes 14.1, with a range of 12-21 years (among the remaining 36 participants).

Age (n = 70)

The average age of participants who completed the survey was 50.5 years (SD = 12.35), although individuals ranged from 21 to 72 years. Three participants did not answer the question; additionally, one individual reported an age of “3,” which was not included in the mean value listed above.

State (n = 75)

Participants were asked to list the state where their tribe was located. Most respondents indicated that they were from Wisconsin (n = 11, 14.7%), followed by Nevada (n = 9, 12.0%), Arizona (n = 6, 8.0%), Michigan (n = 5, 6.7%), and Washington (n = 5, 6.7%). While 73 participants answered the question, two respondents indicated that their tribe was from more than one state. As a result, the total here is greater than 74.

State	Frequency	Percentage
Wisconsin	11	14.7%
Nevada	9	12.0%
Arizona	6	8.0%
Michigan	5	6.7%
Washington	5	6.7%
Alaska	4	5.3%
New Mexico	4	5.3%
North Dakota	4	5.3%
Oklahoma	4	5.3%
Idaho	3	4.0%
Minnesota	3	4.0%
Montana	3	4.0%
California	2	2.7%
Iowa	2	2.7%
Nebraska	2	2.7%
South Dakota	2	2.7%
Hawaii	1	1.3%
Massachusetts	1	1.3%
New York	1	1.3%
Oregon	1	1.3%
South Carolina	1	1.3%
Total	75	100.0%

U.S. Department of Health & Human Services Regions (n = 75)

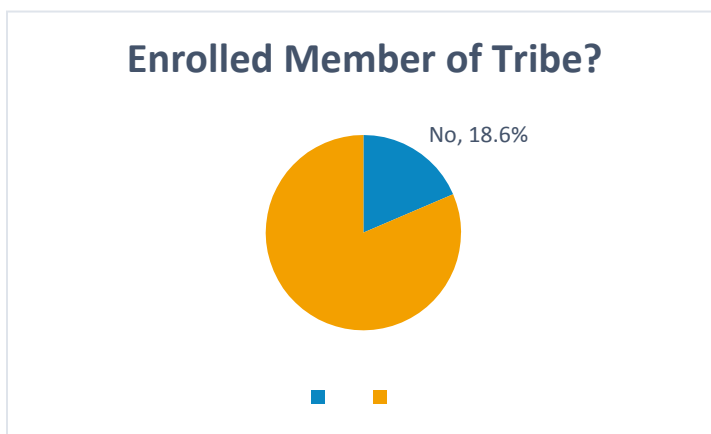
Based on participants’ reported states, their corresponding U.S. Department of Health and Human Service Region was calculated. Most respondents were from Region 5 (n = 19, 25.3%), Region 9 (n = 18, 24.0%), or Region 10 (n = 13, 17.3%). While 73 respondents answered the question, two respondents indicated that their tribe was from more than one state. In each case, each state (and

corresponding region) was split up and counted separately, even if they were in the same region.

Region	Frequency	Percentage
Region 1	1	1.3%
Region 2	1	1.3%
Region 3	0	0.0%
Region 4	1	1.3%
Region 5	19	25.3%
Region 6	9	12.0%
Region 7	4	5.3%
Region 8	9	12.0%
Region 9	18	24.0%
Region 10	13	17.3%
Total	75	100.0%

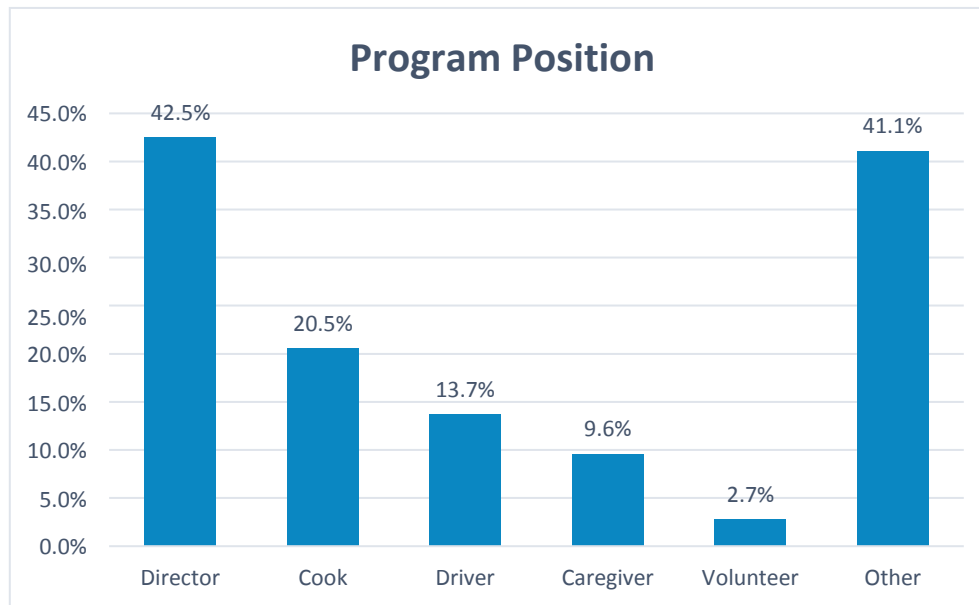
Enrolled Member of Tribe (n = 70)

Most participants reported being an enrolled member of the tribe where they were working (n = 57, 81.4%), compared to 13 respondents (18.6%) who were not.



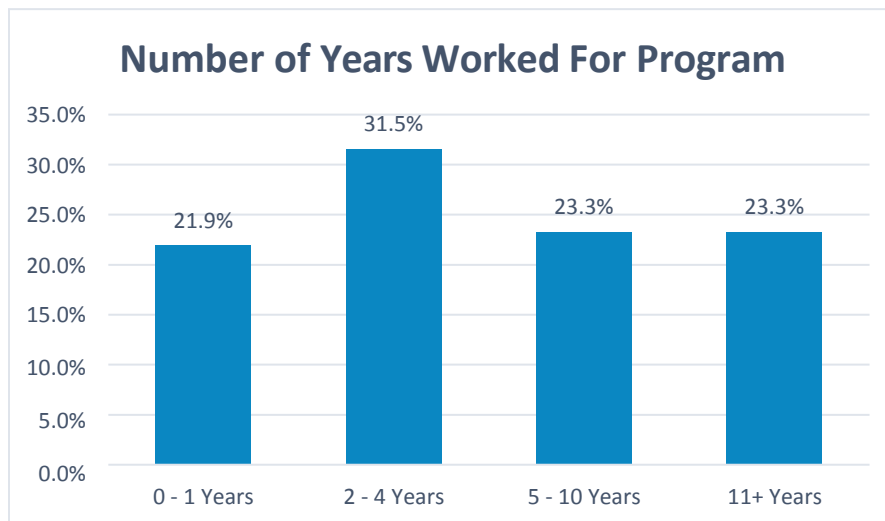
Position within the Program (n = 73)

Most respondents reported working as a director (n = 31, 42.5%), followed by cook (n = 15, 20.5%), and driver (n = 10, 13.7%). Fewer participants reported being a caregiver (n = 7, 9.6%) or a volunteer (n = 2, 2.7%). Many also reported holding positions in other categories (n = 30, 41.1%), which included a variety of positions, including administrative assistants, data clerks, adult protective services, business managers, grant writers and directors, and program assistants. Supervisors, community health workers, managers, outreach, and service specialist positions were also present. There were nine respondents who indicated that they held more than one respective position; as a result, the totals here will add up to greater than 100.0%.



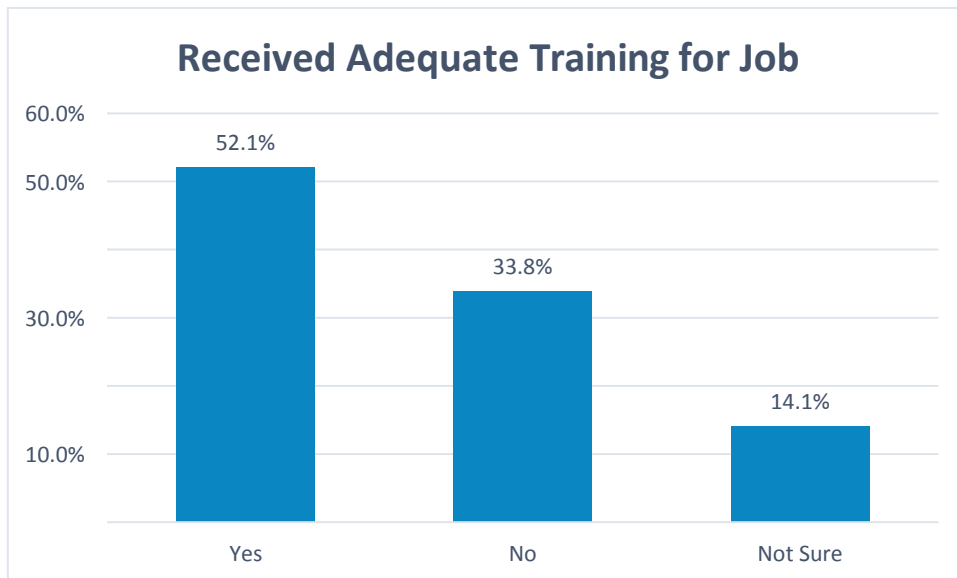
Years Worked for the Program (n = 73)

Participants had a great deal of variability in the number of years that they had worked for the program. Most had worked for the program between 2-4 years (n = 23, 31.5%). Many others had worked for the organization between 5-10 years, or 11 years or more (n = 17, 23.3% for both, respectively). There were 16 individuals (21.9%) who reported working for the program for one year or less.



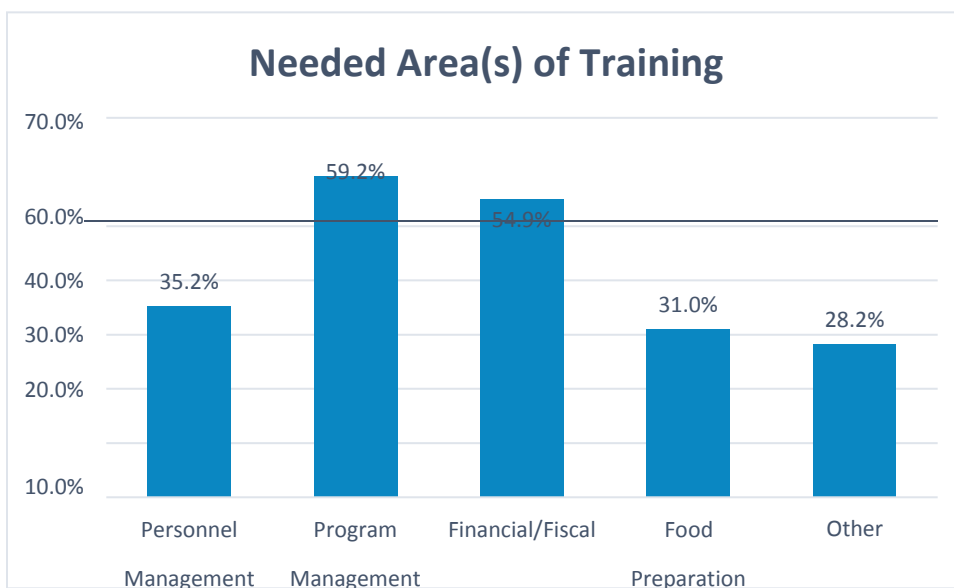
Adequate Training to Do Job (n = 71)

Slightly over half of participants believed that they had received adequate training to do their job (n = 37, 52.1%). There were 24 respondents (33.8%) who reported not receiving adequate training, and 10 (14.1%) who were unsure.



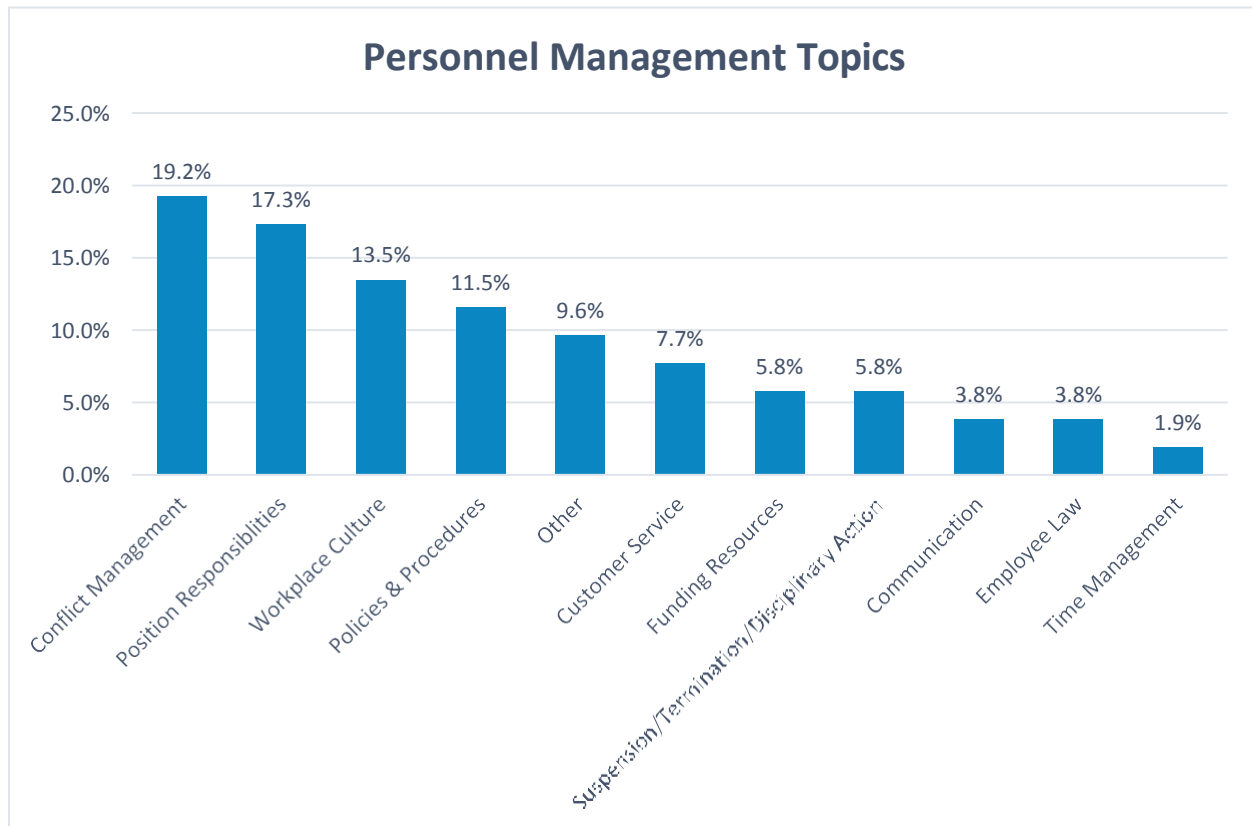
Areas of Training Needed (n = 71)

Respondents were asked which areas they believed they needed more training in. Most participants indicated that program management (n = 42, 59.2%) was most needed, followed by financial and fiscal matters (n = 39, 54.9%). Personnel management (n = 25, 35.2%) and food preparation (n = 22, 31.0%) were slightly less commonly indicated. There were 20 respondents (28.2%) who reported that they would like training in other areas. Write-in responses for other training areas varied widely, but included desired training in areas such as benefits, long-term care, transportation, collaborating, and caregiving. Funding, record-keeping, safety, Medicaid and Medicare billing, and nutrition were also listed, among others. Participants could choose more than one area in which they believed they needed more training; as a result, percentages will add up to more than 100.0%.



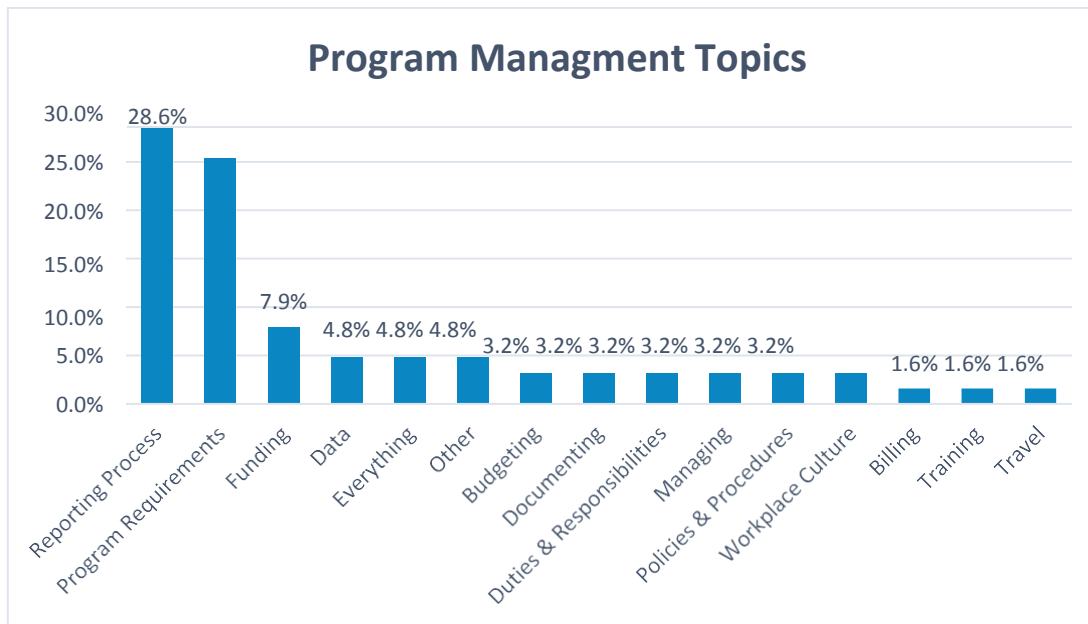
Interested in Learning More: Personnel Management (n = 39 participants; 52 topics)

Participants were asked what they would be interested in learning more about with regard to personnel management. Most individuals reported more than one area of learning – each of these responses was separated (e.g., 52 different topic areas) and organized into overarching themes. The most common theme listed across results was conflict management (n = 10, 19.2%), followed by position responsibilities (n = 9, 17.3%). Workplace-related factors (n = 7, 13.5%) such as dealing with different personalities, leadership, team-building, managing others, creating motivational programs, and preventing bullying and harassment was also commonly listed. Policies and procedures (n = 6, 11.5%) were also frequently discussed, incorporating topics such as learning more about grants and expectations and standard operating procedures.



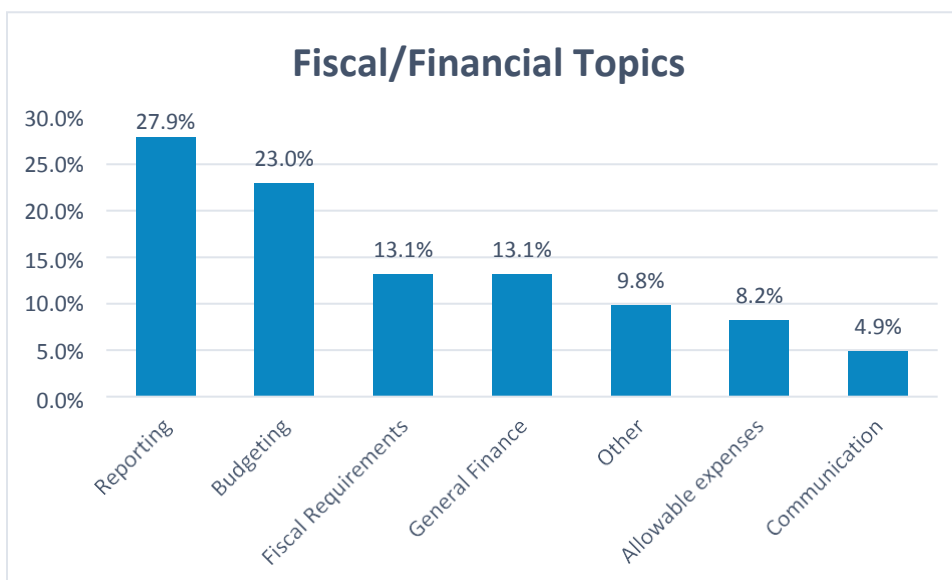
Interested in Learning More: Program Management (n = 45 participants; 63 topics)

Participants were asked what they would be interested in learning more about with regard to program management. Most individuals reported more than one area of learning – each of these responses was separated (e.g., 63 different topic areas) and organized into overarching themes. The two most common themes listed were learning about the reporting process (n = 18, 28.6%), followed by program requirements (n = 16, 25.4%). Funding was listed next (n = 5, 7.9%), which encompassed topics such as how and where to apply for funding, how to avoid overspending but not lose funds, and what can and cannot be done with program funding. Data (n = 3, 4.8%) was also listed – this topic included responses such as data entry, financial coding, and recording data in charts.



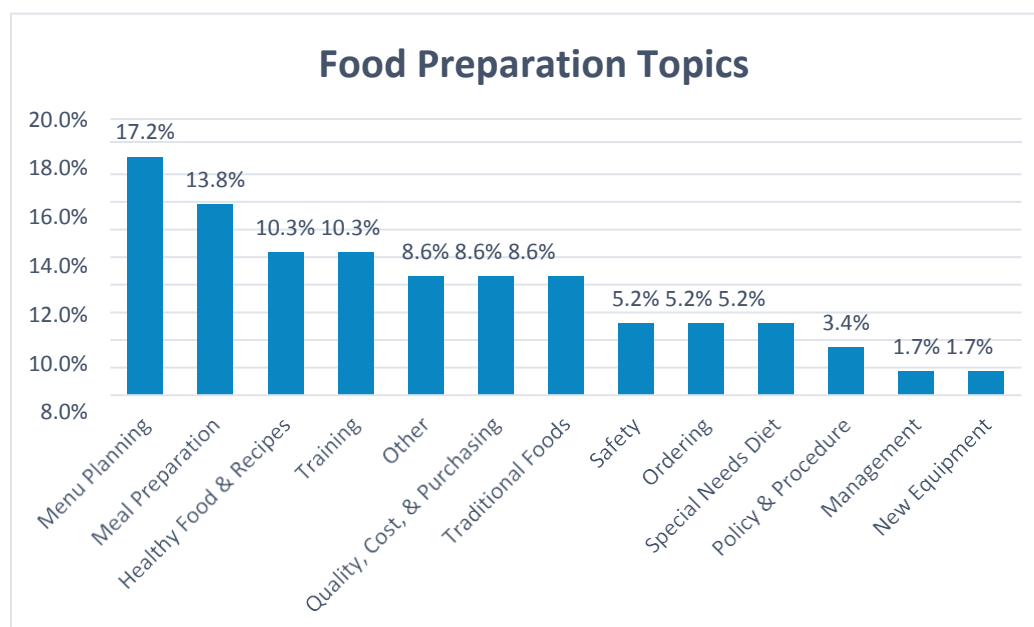
Interested in Learning More: Financial/Fiscal (n = 45 participants; 61 topics)

Participants were asked what they would be interested in learning more about with regard to financial/fiscal topics. Most individuals reported more than one area of learning – each of these responses was separated (e.g., 61 different topic areas) and organized into overarching themes. Reporting was the most common response (n = 17, 27.9%), which encompassed responses such as grant applications, entering and reporting data, hands-on exercises for reporting, and SF425 reporting. Budgeting was frequently listed (n = 14, 23.0%), including responses such as budgeting breakdowns, managing budgets, and updating updates. There were eight requests for fiscal requirements (13.1%) – among these were six individuals who specifically listed fiscal requirements, as well as finding help to coordinate financial requirements, and indirect costs.



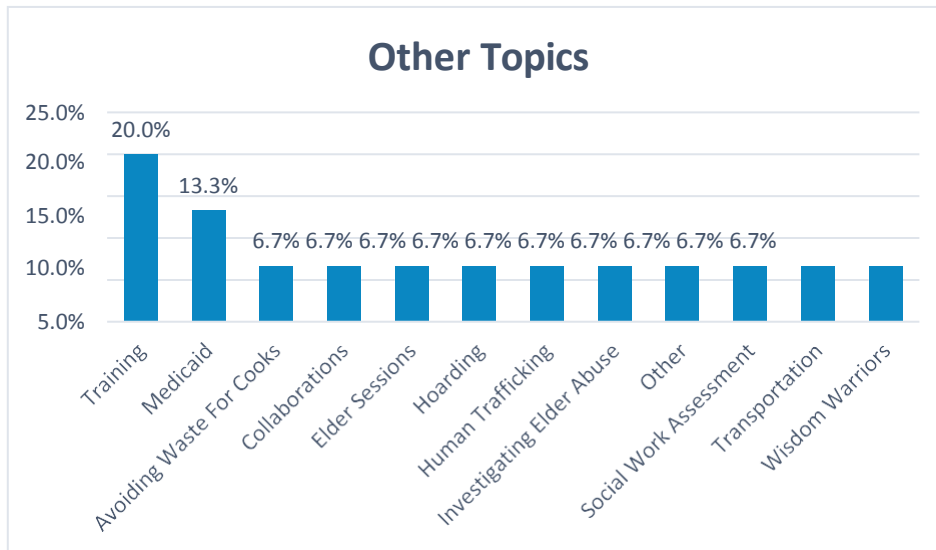
Interested in Learning More: Food Preparation (n = 37 participants; 58 topics)

Participants were asked what they would be interested in learning more about with regard to food preparation topics. Most individuals reported more than one area of learning – each of these responses was separated (e.g., 58 different topic areas) and organized into overarching themes. Menu planning was most commonly reported (n = 10, 17.2%) – this included responses such as menu ideas, planning meals, new recipes, and developing a meal plan. Meal preparation was next (n = 8, 13.8%), which was made up of responses such as preparing food, using leftovers, using spices, portion-sizing, and faster cooking of meals. Making food and recipes was also frequently mentioned (n = 6, 10.3%).



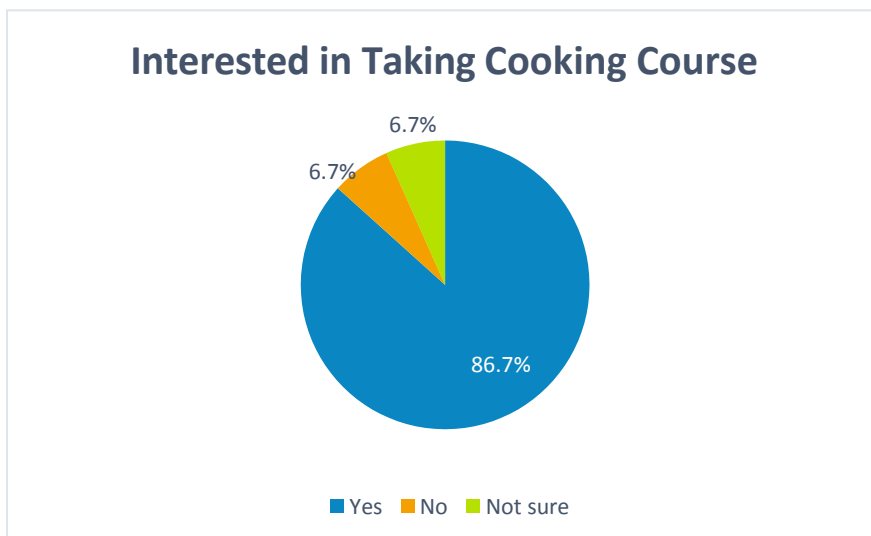
Interested in Learning More: Other (n = 5 participants; 15 topics)

In addition to the topics listed above, participants were also asked if there was anything else that they might be interested in learning. Most reported more than one area – each of these was separated (e.g., 15 different topic areas) and organized into overarching themes. Training was most common (n = 3, 20.0%) – this category included responses such as detailed information about training, its association with tribal leaders, and a training program on gardening using indigenous plants. Medicaid was listed next (n = 2, 13.3%) – this included how to enroll Elders, as well as utilizing Medicaid waivers, codes, and the billing process.



Cooking Course (n = 15)

Participants were also asked if, as a cook, they would be interested in taking a course to help them learn more about their job. Among the 15 individuals who indicated that they were a cook, most (n = 13, 86.7%) indicated that they would be interested. There was one individual who was not interested (6.7%) and another who was not sure (6.7%).

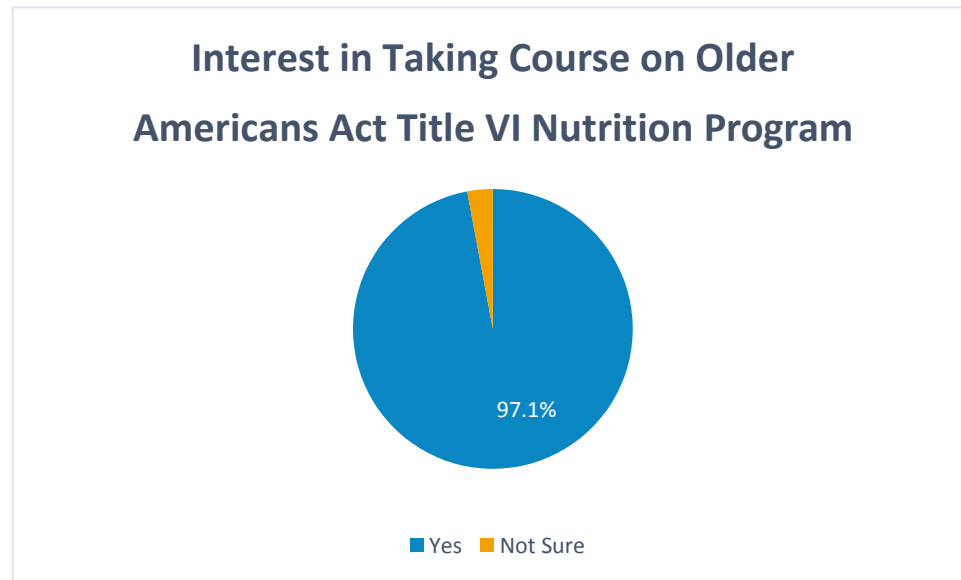


When looking across all participants, including those who did not identify as a cook, 40 (78.4%) said that they would be interested in taking a course in cooking. There were 4 (7.8%) who were not interested, and 7 (13.7%) who were unsure.

Older Americans Act Title VI Nutrition Program Course (n = 68)

Participants were asked to indicate their interest in taking a potential course on the Older Americans Act Title VI Nutrition Program. Nearly all respondents indicated that they would be interested in taking the course (n = 66, 97.1%). Only 2 individuals reported that they were not sure (2.9%). No

respondents indicated that they were not interested.



Potential Topics for Older Americans Act Title VI Nutrition Program Course (n = 72)

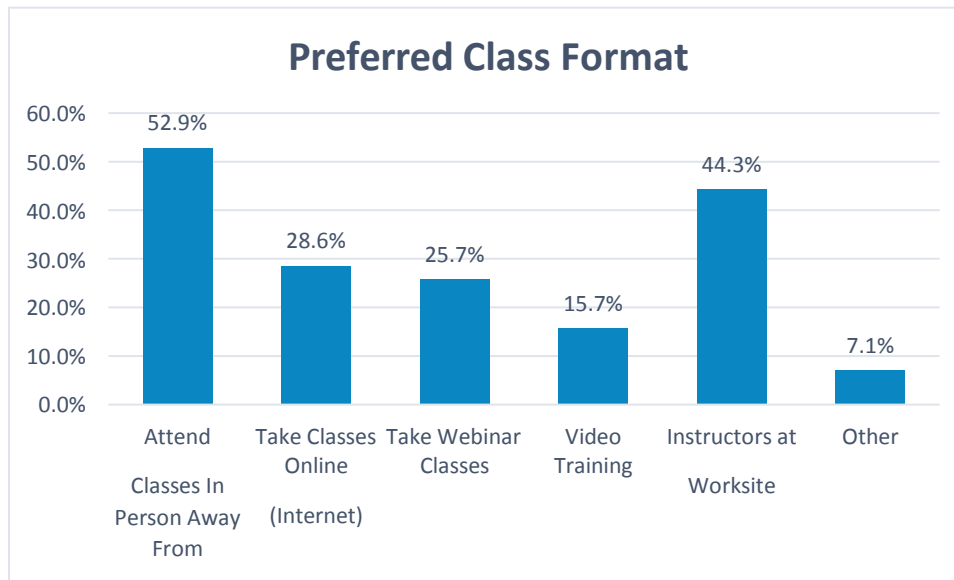
Participants were also surveyed regarding their potential interest in various course topics that could be incorporated into a course on the Older Americans Act Title VI Nutrition Program. Topics with the greatest amount of interest included Older Americans Act requirements (n = 45, 62.5%), nutrition program management in emergency situations (n = 44, 61.1%), use and inclusion of traditional foods (n = 43, 59.7%), and fiscal management and reporting (n = 42, 58.3%). Many participants indicated that they would be interested in more than one area; because of this, overall totals will be greater than 100.0%. Among those who indicated “other,” responses included course topics on hoarding, raising grandchildren, counseling, promotion, marketing, networking, and evidence-based health promotion funding.

Topics	Frequency	Percentage
Older Americans Act Requirements	45	62.5%
Nutrition Program Management in Emergency Situations	44	61.1%
Use and Inclusion of Traditional Foods	43	59.7%
Fiscal Management and Reporting	42	58.3%
Customer Service	40	55.6%
Menu Planning	38	52.8%
Socialization Activities	37	51.4%
Inventory Management	36	50.0%
Nutrition Basics	35	48.6%
Kitchen Facilities Management	32	44.4%
Quantity Food Preparation	30	41.7%
Exercise Program	30	41.7%
Nutrition Services Basics	27	37.5%

Portion Sizing	26	36.1%
Food Safety and Sanitation	26	36.1%
Recipe Development	26	36.1%
Computer Utilization	25	34.7%
Basic Food Service	24	33.3%
Videos	23	31.9%
Conversion	17	23.6%
Other	5	6.9%

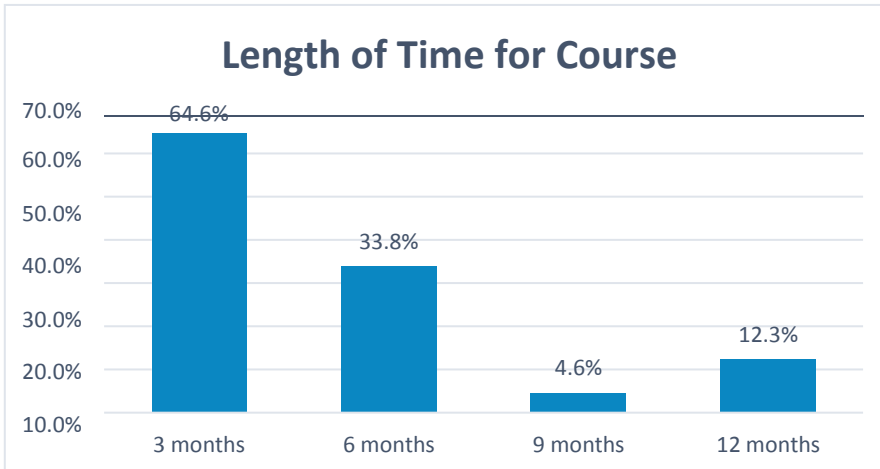
Class Format (n = 70)

Preferred class format was also assessed among participants. Most respondents indicated that they were interested in attending classes in person, away from their worksite (n = 37, 52.9%), followed by having instructors at their worksite, providing hands-on training (n = 31, 44.3%). Others preferred taking classes on the Internet (n = 20, 28.6%), utilizing webinars (n = 18, 25.7%), or video training (n = 11, 15.7%). Five individuals wrote in alternative options (n = 5, 7.1%). These included training in more remote areas, working to educate all staff, utilizing different formats such as visual teachings, or incorporating any type of training, among others. Some respondents indicated more than one preferred format. Because of this, overall totals will be greater than 100.0%.



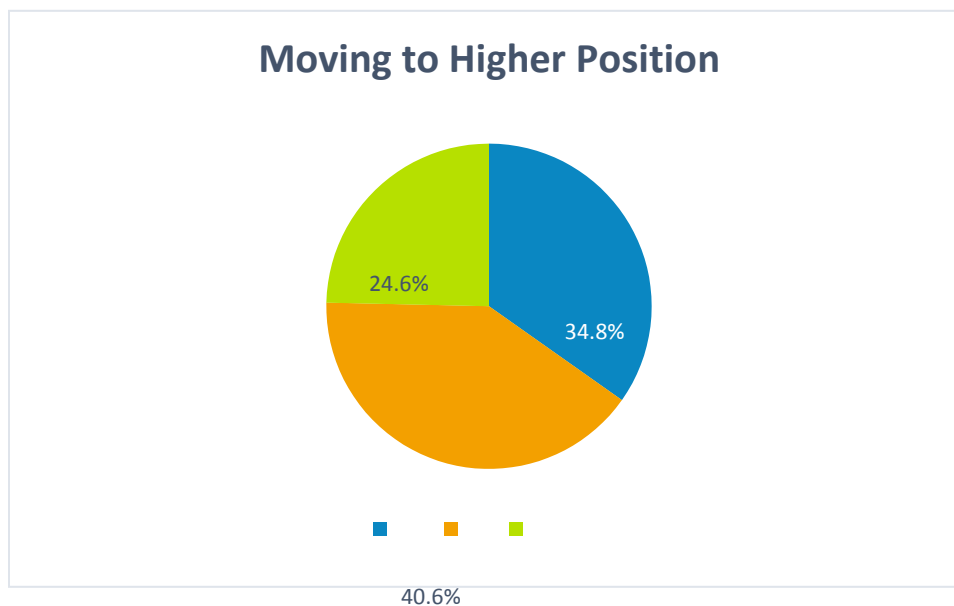
Length of Time for Course (n = 65)

Participants were asked to indicate their preferred length of time to complete a certificate course, if one were offered. Most respondents preferred completing a certificate course in 3 months (n = 42, 64.6%), followed by 6 months (n = 22, 33.8%). Courses that were 9 (n = 3, 4.6%) or 12 months long (n = 8, 12.3%) were less commonly selected. Some respondents indicated more than one preferred format. Because of this, overall totals will be greater than 100.0%.



Moving to a Higher Position (n = 69)

Based on the position that they currently held, participants were asked if they saw a time when they might move to a higher position within the program or elsewhere. Responses were mixed, with 28 (40.6%) indicating that they would not move to a higher position; 24 (34.8%) believed that they would, whereas 17 (24.6%) were unsure. Among those who said that they would not or were unsure, some said it was because they did not believe the opportunities were present, because they planned to retire, had been working in the program for a significant amount of time, were currently director, or because they loved their job.



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