American Indian & Alaska Native Commissioned Officers Advisory Committee Newsletter Winter 2019





PROTECT. PROMOTE. ADVANCE.

What Is The AIANCOAC?

The function of the AIANCOAC is to provide advice and consultation to the Surgeon General on issues related to professional practice and activities of American Indian and Alaskan Native personnel (Commissioned Corps or Civil Service). The AIANCOAC provides similar advisory assistance to the Minority Officers Liaison Council (MOLC) and, upon request, to Agency and/or Program Heads of the Public Health Service (PHS) and to non-PHS programs that routinely use PHS personnel.

The mission of the U.S. Public Health Service Commissioned Corps is to protect, promote, and advance the health and safety of our Nation. As America's uniformed service of public health professionals, the Commisioned Corps achieves its mission through rapid and effective response to public health needs, leadership and excellence in public health practices, and advancement of public health science.

Mission Of AIANCOAC

The American Indian/Alaska Native Commissioned Officers Advisory Committee (AIANCOAC) was created by the Surgeon General and the Public Health Service (PHS) through the Minority Officers Liaison Council (MOLC) and is to advise and serve on issues relating to the professional practice and the personnel activities, Civil Service (CS) and Commissioned Corps (CC), of the American Indian and Alaska Native professional. Working in collaboration with the MOLC, the AIANCOAC provides similar advisory assistance, upon request, to the Operating Divisions (OPDIVs) or Staffing Divisions (STAFFDIVs) of the Public Health Service, and to non-PHS programs that routinely use PHS personnel.

The MOLC is comprised of the four Core Minority Advisory Groups (CMAGs): American Indian/Alaska Native Commissioned Officers Advisory Committee (AIANCOAC), Black Commissioned Officers Advisory Group (BCOAG), Asian Pacific American Officers Committee (APAOC) and Hispanic Officers Advisory Committee

Editor's Note

LCDR Verdaleen Denetdale, Diné, (Navajo)

Hello AIANCOAC!



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We are excited to showcase the Fall/Winter 2019 AIANCOAC Newsletter. The workgroup and contributors have successfully provided six editions since 2017. The newsletter is an opportunity to showcase our American Indian and Alaska Native officers in their health professional careers and highlight their many accomplishments. The individuals from many different American Indian tribes are serving within the United States Public Health Service.

Native American Heritage Month occurs in November every year and we are paying tribute to the ancestry and traditions of all American Indians in Indian Country. It is with the strong heritage of our ancestors that we continue to strive for our highest potential to succeed in the activities that we do. As American Indians, both our resilience and traditional values have enabled us to persevere in our local communities. Our tribal identify, language, traditions, stories and spirituality allow us to demonstrate our strengths in our everyday accomplishments. In this

edition, we are able to showcase the work of American Indian/Alaskan Native officers and highlight the achievement of their projects.

The newsletter also showcases the recently promoted AI/AN officers. Congratulations to all the USPHS Officers who were promoted in 2019! Your hard work and achievements are well recognized.

newsletter has demonstrated that If you have any questions, comments or would like to submit photos or articles, please feel free to email me at verdaleen.denetdale@ihs.gov.



A Message From The Chair

CDR Dodson Frank (Seminole/Creek)

Hesci (Hello)

been blessed to serve as your Chair. I have had the privilege of observing the men and women said, "Great things are done by a who truly make our CMAG and series of small things brought tobeloved Corps great. You are the secret to the Corps' success by filling much needed clinical positions It has been an honor to serve as and essential public health leader- your AIAN ship roles with numerous agengreat confidence that your ongoing service will continue to make our people and Nation proud.

with some of you. I have always come away impressed by the flex- season. ibility and tremendous capability you possess to accomplish the In Officio Salutis, Mission, no matter what the chal- CDR Dodson Frank lenge. If we continue to adhere Seminole/Creek

to our Core Values, Leadership, Service, Integrity, and Excellence, Over the past two years, I have the Corps will not only survive but prosper in the years to come. As the artist Vincent Van Gogh once gether."

cies across the country. I have COAC Chair. I thank you for your service to our Nation, particularly for your service to the underserved population that includes my family and friends. Lastly, I ask During my tenure, I have been you to keep our fellow servicemen fortunate to have met and spoken and women standing watch in your thoughts during this holiday

Weight Loss Support Group Success

Submitted by LCDR Casey Cavanaugh (Western Shoshone from Duck Valley Indian Reservation in Owyhee, NV)

The Weight Loss Support Group is a program at Phoenix Indian Medical Center, designed to help patients who are struggling with weight loss and who want support as they travel through their weight loss journey. The group is facilitated by CDR Marilyn Sale, Registered Nurse, and Kimberly Barry, Registered Nurse from Diabetes Center of Excellence (DCOE) and LCDR Casey Cavanaugh, Registered Dietitian from Nutrition Services. The group originally started in 2014 with only a behavioral health specialist, registered nurse, and registered dietitian.

The Weight Loss Support Group meets every Thursday from 8:30AM -10:30AM in the Library Conference Room. Once a month (1st Thursday of the Month) there is an evening group that meets from 6PM-8PM. The participants are first weighed on a Tanita body composition scale that provides information about fat mass, fat percentage, fat free mass, total body water, etc. Then, they engage in 30-45 minutes of low intensity chair exercises, followed by a 10-20 minute mindfulness meditation, and then a sharing circle ensues. In the sharing circle, a dozen patients participated in the participants share stories and experiences related to personal struggles combined weight loss of 275lbs!







they've have during their weight loss journey. Lastly, a health or nutrition lesson is provided by the facilitators and participants learn about strategies or evidenced-based tips for their continued weight loss. Most recently, the facilitators have sought approval from the VA to utilize the MOVE Curriculum which is an evidence-based self-management program focusing on health and wellness. Patients and employees alike enjoy coming to the weekly classes. Every participant has a success story to tell. Last year, over daily support classes and they had a



Celebrating American Indian and Alaska Native Heritage Month

Submitted by CDR Geri Tagliaferri (Ojibwe Nation)

The first record of celebration on American Indian Day dates all the way back to May of 1916 in New

York. A member of the Blackfoot Nation, Red Fox James, rode horseback from state to state to get endorsements from 24 state governments to establish a day of honor for Native Americans. Further recognition was created in 1990, when President George H.W. Bush signed a joint congressional resolution designating November as "National American Indian Heritage Month." In 1994, following additional proclamations, this celebration was revised and renamed to American Indian and Alaska Native Heritage Month.

Observing American Indian and Alaska Native Heritage Month means celebrating the many contributions of the Native Americans, some of which many people are not even aware of. For example, lacrosse was an indigenous stick ball game that Native Americans played hundreds of years ago! We also celebrate foods, such as wild rice and fry bread, that are native to this country and whose origins came from the native people. This is a time to celebrate the diverse languages among the Native American and Alaska Natives in our country. As a tribal member of the Ojibwe Na- celebrate the Native American and tion, I have seen the decline of native Alaskan Native Commissioned Corps speakers. I always seek opportunities to teach family members words the USPHS mission every day.

from my native language, just as I have been taught by my relatives. For example, the Ojibwe word for blueberry pie is one of the longest words in our language: "miini-baashkiminasigani-biitoosijigani-bakwezhigan" - that word is a real mouthful, but well deserved for blueberry pie.

Please take a moment this month to say "miigwech"—"thank you" in my language-to the Native Americans and Alaskan Natives for their contributions that make this nation what it is today. I would also like to acknowledge and Officers who serve and contribute to

- L to R: RADM Sylvia Trent-Adams, LCDR Angela Battese (Comanche/ Prairie Band Potawatomi CDR Joseph Jones
- CDR Joseph Jones (Kaw and Otoe-Missouria) 2.
- L to R: Erica Lalo, LCDR Kay L. Andrews (Hopi)
- L to R: Daughters of LT Kernell: Kaycee Kernell Raylen Kernell, LT Sara Kernell, Muscogee (Creek) and Seminole
- 5. L to R: CDR Robin Goodwin (Comanche), Family of CDR Goodwin: Kyleigh Davidson, Linda Smith
- L to R: CDR Loretta Haven, Sonsiila Begaye, 6. Jayven Begaye, Jay Begaye
- Demi Haven (niece), Noelle Woody (nephew's 7 daughter), CDR Loretta Haven
- 8 L to R: LT Jamie Liao (Navajo), LT Charisse Holiday, (Navajo), LCDR Casey Cavanaugh, Newe (Shoshone), LT Sandra McCabe (Navajo)
- CDR Joyce Oberly, (Osage/Comanche)











Native Heritage Month Photos +





















Special Assignment Service Award

Submitted by CDR Robin Goodwin (Comanche)

All elected members of a Professional Advisory Committee can qualify to receive a Special Assignment Service Award based on service of 30 consecutive or non-consecutive days on a detail, as set forth in CCPM Subchapter CC23.5, INST 5,6,7, or 8, to a special program initiative of other Federal or State agency.

AI/ANCOAC Voting Members Awardees for Special Assignment Ribbons



CDR Velliyah Craig-Beauvais Agency: Indian Health Service Duty Station: Phoenix Indian Medical Center, Phoenix, AZ **Category:** Pharmacy **Tribe:** Diné (Navajo)



CDR Dodson Frank Agency: Indian Health Service Duty Station: Oklahoma City Area Office, Oklahoma City, OK Category: HSO Tribe: Seminole/Creek)



CAPT James Warner, MD Agency: United States Coast Guard Duty Station: Air Station Clearwater, FL Category: Medical Tribe: Ho-Chunk Nation



CDR Robin Goodwin Agency: Indian Health Service Duty Station: Lawton Indian Hospital, Lawton, OK **Category:** Health Services Tribe: Comanche



CDR Lynette Wasson Agency: Indian Health Service Duty Station: Santa Fe Service Unit, Santa Fe, NM Category: Pharmacy Tribe: Diné (Navajo)



LCDR Melissa Schossow Agency: Indian Health Service Duty Station: Winslow Indian Health Care Center, Winslow, AZ Category: Therapy Tribe: Diné (Navajo)



LCDR Samantha Smith Agency: Indian Health Service Duty Station: Pinon Health Center, Pinon, AZ Category: Dietitian Tribe: Diné (Navajo)

A Good Day for a Run at **Northern Navajo**

Submitted by LCDR Robbin Tanner (Navajo)

On May 7, 2019, 18 local participants joined in the Surgeon General's 5K and Virtual Walk/Run at Northern Navajo Medical Center (NNMC) in Shiprock, New Mexico. These participants contributed their time and commitment to being physically active. They included U.S. Public Health Service Commissioned Officers, NNMC staff, and members of the community. Setting up this event locally was a great way to virtually involve the community in conjunction with the annual USPHS symposium. Registration brought in a few more people who decided to join this event for a quick morning run before their afternoon workout at the Partners for Wellness Center. Each participant

received a USPHS button to wear. A short welcoming address was shared as a reminder to bring awareness to our country's affliction with Addiction, Mental Health, and Obesity. Running or walking for one of these causes gives motivation in moving towards a healthy goal to

strive for, as well as, focus on a cause to which one might have significant ties. This annual event held "virtually" was great for actively involving our local community in a national event to promote better health and fitness. One elder participant mentioned how committed she is to being active and joining this local event was a fun way to start her morning! Another one of our last minute entries came in first place. It was a perfect morning for this event and a great participant turnout!

















2019 USPHS Promotion Ceremony **Photos**





Killer Whale COA Adopts a Highway Submitted by LCDR Adele Davis

(Choctaw Nation of Oklahoma)

One misty evening in Juneau, Alaska, five dedicated officers walked a mile of the North Douglas Highway improving the environment by picking up trash. This act of service was part of the Adopt-A-Highway event sponsored by the Killer Whale Commissioned Officers Association (COA).

In attendance were Indian Health Service (IHS) Officers from 3 regional areas (Juneau, Anchorage, and White River, Arizona) and 2 categories (Pharmacy & Dental). Adopting a highway is a great public service activity that incorporates social interaction, good exercise, and beautification of our roadways and towns. The Department of Transportation (DOT) reports that 51.2 billion pieces of trash is left on US roadways equating to 6,729 pieces of liter per mile.

The Killer Whale COA with its small core of dedicated officers has been maintaining this stretch of highway since 2014 and sponsors clean up events at least 3 times a year.

The Killer Whale COA encourages all officers and COA branches to give back to our earth by adopting their The Killer Whale COA tips and tricks for highway cleanown stretch of highway! If interested in this type of serup: vice activity, contact your local DOT to see what opportunities are available! Dress for the weather (layers and comfortable

shoes)

Upcoming Meetings/Trainings for Health Professionals

Submitted by LCDR Lindsay Edwards, PharmD, BCPS (Eastern Band of Cherokee Indians)

Feburary 18-21, 2020 6th International Meeting of Indiginous Women's Health Albuquerque, NM

May 17-19, 2020 11th Annual NIHB National Tribal Health Summit Omaha, NE

April 14-16, 2020 Native Women and Men's Wellness and Diabetes Prevention Conference San Diego, CA



- Ensure highway safety with road cleanup signs and bright safety apparel (often provided by your local DOT)
- Gather your supplies: Trash bags, gloves, hand sanitizer, grab it claw (optional but recommend-
- Park your cars in safe areas and always be prepared for emergency situations (First Aid Kit, Narcan, etc.)
- Be aware of local dangerous wildlife and be prepared (i.e. Bear spray in Alaska! We did get attacked by a wild dog...)
- Bring a sense of Fun and good Cheer and take lots of pictures!!

June 15-16, 2020 11th Annual Native American Healthcare Conference Temecula, CA

June 15-18, 2020 55th USPHS Scientific & Training Symposium Glendale, AZ



June 29 - July 1, 2020 **3rd Annual National Native Research Training** <mark>Conference</mark> Temecula, CA

Back to School Submitted by LT Bobi D. Tallman, Written by Matthew Budder

As the summer ends, local schools are preparing for another year of great classroom teaching. Kenwood Public School, located on the Mayes/Delaware County line in Oklahoma, is one school we'd like to highlight. Kenwood is a small school district providing education to grades K-8, averaging about 90 enrolled students. The Kenwood School student demographic consists of approximately 98% Native American students, most being Cherokee.

LT Bobi Tallman, Claremore Indian Hospital Nurse and Care Manager, was a guest at Kenwood's annual Open House. The event provides students, parents and grandparents the opportunity to meet staff, teachers, and school administration. Prior to the school tour, a cookout-style meal was provided to approximately 95 students, families, staff and guests.

LT Bobi Tallman gave a speech to inspire students and parents. She shared personal background information, triumphs and hurdles she conquered to get where she is today. She also provided information on a few of our health programs available, where she, personally, works with patients and anyone who is interested. Other guests at the open house were the Boys and Girls Club of Delaware County and Cherokee Nation "SoonerCare" (state Medicaid program) employees.



LT Tallman performing presentation to Kenwood, OK students.

A mission group from Missouri provided 100 backpacks full of school supplies for the students. In addition, the nurses at Pryor Hillcrest Hospital provided disinfectant wipes, hand sanitizer, and additional school supplies to the students. It was an overall enjoyable event.



Greetings AIANCOAC! If you are interested in learning more about Public Health, and even more specifically, Public Health in American Indian/Alaska Native (Al/AN) communities, the Johns Hopkins Public Health Training Certificate for American Indian Health Professionals (PHTC) Program through the Center for American Indian Health (CAIH) is an excellent program to consider. My Public Health journey with Johns Hopkins started in 2017. I applied for the program, received a scholarship from CAIH, and was awarded to take one public health course in Baltimore, MD at the Johns Hopkins Bloomberg School of Public Health. After my first course, I was 100% engaged and committed to completing all the courses to receive my Certificate of Public Health. Being a part of the Hopkins CAIH family has been so rewarding both personally and professionally. Over the 2 year program, I met so many influential and motivating AI/AN students from all over the country and have learned so much from incredible Johns Hopkins faculty. The program creates a space where students are able to freely share their Indigenous perspective as it relates to healthcare in our Native communities. The program fosters interdisciplinary approaches to public health through a range of class group discussions, presentations, article readings, and engaging lectures from Indigenous faculty members from the United States and Canada. I'm thankful for the opportunity to be a part of such an amazing program and hope you find this information insightful and helpful.

The Johns Hopkins Center for American Indian Health for-credit Certificate is made up of three core courses plus five electives, totaling 18 credits. If you enter a degree program at the School of Public Health, those credits, once successfully completed, can be applied and many times students can transfer those credits to graduate programs at other universities. The courses are held at the Johns Hopkins Bloomberg School of Public Health in Baltimore during the Summer and Winter Institute. There is a list of all their courses, with descriptions, and when they're offered, which can be viewed here: http://caih.jhu.edu/training/course-offerings/. Any questions? Please contact Olivia Trujillo at 410-955-6931 or otrujil2@jh.edu (Baltimore office).

AIANCOAC Supports One Another Submitted by CDR Velliyah Craig-Beauvais, Diné (Navajo)

It's not uncommon to encounter documents. In addition, junior offi-American Indian or Alaska Native cers may seek to be matched with a officers who have not heard of the mentor if needed, which also gives AIANCOAC. It's important to meet senior officers the opportunity to be readiness. If you have documents with these individuals as we invite mentors. We recently held a roundeveryone to join in our conversation, table consisting of officers sharing do not hesitate to inquire with our as we need each other to grow. We their stories of their unique journeys subgroup to help you. It's always best gather each month to share stories as officers and individual values they and ideas, to support each other's obtained. This gave many people in- er than later so the person looking at efforts and strengthen officership. sights on the advantages of mobility The Mentoring and Career Devel- and participation. If you are interest- to review and provide quality input. opment Subcommittee provides ed in getting a mentor, or want to be monthly guidance on professional and non-professional activities, mo- as possible. bility, and keeping up with important

one, please inquire with us as soon

We have many senior officers available in all categories willing to assist you in order to prepare for promotion that you could use help with, please to seek out our services sooner rathyour documents can have ample time We will soon provide a Promotion presentation (date to be announced). Together, as AIANCOAC, we can learn, grown and achieve.



Dr. Naomi Lee, Dr. Joshua Allison-Burbank, Dr. Timian Goddfrey, Dr. Shannon Saltclah, and Dr. Kyle Hill. All received their Training Certificate for American Indian Health Professionals at Johns Hopkins Bloomberg School of Public Health in July 2019.

Dr. Shannon Saltclah in attendance for the American Indian Health Professionals at Johns Hopkins Bloomberg School of Public Health in July 2019.











LT Perry L to R: LT Perry, RADM. Taylor, LT Chapman L to R: LT Perry, LT Chapman

OBC-113 Submitted by LT Arrol Perry (Navajo)

Yá'át'ééh! My name is Arrol Perry. Currently, I am completing my PGY-1 residency with Indian Health Service (IHS) at the Santa Fe Indian Hospital. I was confined to the southwest re-I am from St Michaels, Arizona located on the Navajo Nation. This past spring, I graduated from Midwestern Navajo reservation and completed University in Glendale, Arizona with my Doctor of Pharmacy degree or-PharmD. I am very passionate and excited to start my career as a licensed pharmacist especially serving my American Indian/Alaskan native communities with IHS.

Recently, I attended and graduated from officer basic course (OBC) in OBC class 113. This was an amazing and life changing opportunity for me. It feels very rewarding to finally be part of the United States Public 3, were very honored to receive the Health Service (USPHS) Commissioned Corps. All the dedication, determination, and time has finally paid

off, now I am proudly in uniform as an officer.

gion of the United States (US) for most of my life, as I grew up on the all of my post-secondary education in Arizona. This opportunity allowed me for the first time to be on the east coast of the US. I was able to experience the DC metropolitan area, and visit various memorials and art exhibits.

At OBC training, I was able to network with fellow officers in various agencies like the CDC, IHS, and FDA. It was so great to build relationships and make connections. My squad, Squad award for Honor Squad! This experi- Corps. ence also brought all of the IHS Commissioned Officer residents closer

together. My experience led me to set high expectations for me to challenge myself in order to become a successful Commissioned Corps Officer. I ultimately want to make an impact on our native communities.

A big highlight of the OBC was when RADM Brandon L. Taylor pinned LT Chapman and me during our pinning ceremony. We embodied and represented our American Indian communities. It was also very nice to meet LT Chapman from Kayenta, AZ. In pharmacy school, I was the only American Indian in the college of pharmacy, so it was nice to meet another Diné community member! To this day, I reflect back on these experiences and remember how grateful I am to be part of the USPHS Commissioned



Keeping Tobacco Sacred Submitted by CDR Vellivah Craig-Beauvais (Navajo)

At this year's Diabetes in Indian Country conference in Oklahoma City, Oklahoma, AIANCOAC member CDR Vellivah Craig-Beauvais presented "Take Control by Eliminating the #1 Self-Limiting Health Risk Factor: Commercial Tobacco". This is one of many presentations that she has given to promote keeping traditional tobacco sacred and eliminate commercial nicotine abuse. Her messages consisted of education about the differences between traditional and commercial tobacco, the behavioral and physical components of commercial nicotine dependency, as well as basic descriptions of brief though intensive tobacco interventions. In these presentations, she typically talks about how both nicotine replacement medication and counseling can enhance successful rates of quitting. Com-

mercial tobacco use is the number one self-eliminating health risk factor negatively impacting our American Indian/Alaska Native adolescent and adult patients today.

Currently, CDR Craig-Beauvais is the Clinical Director of the Nicotine Cessation clinic at Phoenix Indian Medical Center (PIMC), the largest Indian Health Service facility in the United States. She supervises 16 Nicotine Cessation Pharmacy Experts who provide intensive medically proven intervention practices. These providers surpass the National Quit Rate of 19-23%, helping many patients quit at PIMC (58% quit rate), as well as the Yavapai Apache Healthcare Center (72% quit rate), 100 miles north of metropolitan Phoenix.

With the AI/AN population being the highest ethnic population affected by commercial tobacco, she is very active to do her part in eliminating this dependency to improve overall wellness. As a result, she is a certified Nicotine Cessation instructor for providers, Marketing Chair of the Nicotine Cessation Services Workgroup (NCSAW) Training Resources Recognition Program (TRiP) and Advisory Committee Member on the Arizonans Concerned About Smoking (ACAS) workgroup. Her goal is to take every opportunity to eliminate the #1 self-eliminating health risk factor adversely affecting our patients and peers.

Changing Winds: Public Health and Indian Country

Submitted by CAPT Carmen Clelland, (Cheyenne and Arapaho), Wendy F. Holmes, and Louise E. Shaw

> "Today we are again evaluating the changing winds. May we be strong in spirit and equal to our father of another day in reading the signs accurately and interpreting them wisely." The National Congress of American Indians, 1960s

On September 21, 2019, the David J. Sencer CDC Museum at the Centers for Disease Control and Prevention in Atlanta welcomed more than 1,000 visitors to the opening day of the Changing Winds: Public Health and Indian Country exhibit. Three years in the making, Changing Winds celebrates the contributions of American Indians and Alaska Natives (Al/AN) to public health. Aligning good health and wellness with the traditional

ways of knowing is at the forefront of culture, language, and practices across AI/AN communities—both rural and urban.

The spark of the idea for the Changing Winds exhibit came from a Navajo woman, who suggested that CDC spotlight American Indians in public health. That simple suggestion started CDC's endeavor of collecting firsthand stories that align good health

and wellness with AI/AN traditions. Beginning in 2017, CDC solicited stories, carefully reviewed each one, visited Indian Country where the stories took place, talked to members of AI/AN communities, and listened to their stories about the impact of Native culture and traditional practices on health. CDC then wove the stories. artifacts, and documents into this compelling Changing Winds exhibit.



The storytelling in Changing Winds is especially poignant, given the fundamental role storytelling has in Al/AN communities, and how it is helping to maintain their good health and wellness. The exhibition features these five stories:

- "Sin Nombre Hantavirus and the Navajo Nation—1993 and Today" is an examination of the historic 1993 "mystery disease" investigation that brought together Navajo public health leaders, traditional medicine, CDC, and other federal and state public health professionals to identify a previously unknown hantavirus. Today, Navajo Nation is working closely with CDC on Hantavirus pulmonary syndrome prevention and control strategies.
- "Making a Difference: The Čaŋlí Coalition and Smoke-Free Policies on the Cheyenne River Reservation" chronicles the heroic efforts of multi-generational activists to pass comprehensive smoking policies on the Cheyenne River Reservation in South Dakota, and the Coalition's



continuing efforts to reclaim the use of sacred tobacco, such as čanšášá (pronounced cha-SHAHshah) used by Lakota people in tribal ceremonial practices.

"Children Are Sacred: Family Spirit Home Visiting Program" presents the culturally informed home visiting program designed for, by, and with American Indian families. Developed in the mid-1990s at the Johns Hopkins Center for American Indian Health in partnership with Navajo Nation, as well as the White Mountain and San Carlos Apache tribes, the program now reaches more than 125 rural and urban tribal communities and three non-tribal communities across 20 US states. This story is complemented by an installation of cradleboards representing various tribal traditions.

"Thunder Valley Community Development Corporation: Creating Ecosystems of Opportunity" presents the inspiring story of a group of young people on the Pine Ridge Reservation in

South Dakota. Twelve years ago, they envisioned a new type of tribal community that addressed issues of housing, education, poverty, food equity, and reclamation of Lakota arts and culture. Now Thunder Valley is realizing its vision.

"Powwow Sweat" is a series of videos produced by the Coeur D'Alene tribe in Idaho. The fun videos encourage people to exercise by moving to traditional steps led by tribal members.

The health and wellness of Al/AN people is a complex challenge. With cultural practices, traditional teachings, and modern solutions, however, the future is bright for AI/AN communities and their continuing story in our nation's history. Learning from our elders and applying their wisdom is essential to "reading the signs accurately and interpreting them wisely."

Changing Winds: Public Health and Indian Country is open to the public through May 1, 2020.

The Strength of Diné Women

Submitted by CDR Janet Hayes, Diné (Navajo)

In the Diné (Navajo) way of life, women nurture, support and provide guidance in order to create a harmonious balance in the family structure. Traditionally, Diné women bring forth ideas and hold a variety of leadership roles. These roles occur in the home, with extended families or within the community. Diné women have always been at the core of social and economic control in their family and lead a strong position. Diné culture is traditionally a matrilineal society, meaning that one's clan identity is originated from the female. In an introduction, a Diné person will first introduce him/herself by naming the maternal clan first, followed by the paternal clan. Changing Woman, the ultimate deity of the Navajo traditional religion, represents the many roles a woman takes on in her lifetime. Changing Woman also created the first Navajo clans and guidelines for living and created the matrilineal clan system.



In celebration of Native American & Alaska Native Heritage Month, some of the Diné women officers of the USPHS Commissioned Corps at Northern Navajo Medical Center, Shiprock, NM gathered to display their native Diné traditional attire. As they wear many hats as an officer and as health professionals (or as a mother), at the end of the day, they are reminded as Diné women their work is never done.

AhéHee' (Thank You!)

L to R: LCDR Shealyn Lucero (Navajo), CDR Janet Hayes (Navajo), CDR Kari Wato (Navajo), LTJG Melendy Caboni (Navajo), LCDR Robbin Tanner (Navajo

2019 USPHS Promotion List

Submitted by CDR Janet Hayes, (Navajo)

Congratulations to the new promoted officers for 2019!

RADM Brandon Taylor

Agency and Duty Station: Indian Health Service, Headquarters, Rockville, MD Category: Pharmacy Tribe: Seneca Cayuga Nation

CAPT Michael Bartholomew

Agency and Duty Station: Administration for Children and Families, Office of Refugee Resettlement, Washington, DC Category: Physician Tribe: Kiowa

CAPT Jennifer Giroux

Agency and Duty Station: Indian Health Service, Great Plains Area Office, Aberdeen, SD Category: Physician Tribe: Rosebud Sioux

CAPT Dana Hayworth

Agency and Duty Station: Indian Health Service, Clinton Indian Health Clinic, Clinton, OK Category: Nurse Tribe: Eastern Shawnee Tribe of Oklahoma/Cherokee Nation

CAPT James Warner

Agency and Duty Station: United States Coast Guard, Air Station Clearwater Medical Clinic, Clearwater, FL Category: Physician Tribe: Ho-Chunk Nation, Wisconsin Winnebago *EPP

CDR Dodson Frank

Agency and Duty Station: Indian Health Service, DCPS, Oklahoma City, OK Category: HSO Tribe: Seminole/Creek

CDR Rolanda Frank

Agency and Duty Station: Indian Health Service, Gallup Indian Medical Center, Gallup, NM Category: Engineer Tribe: Diné (Navajo)

CDR Rachelle Green

Agency and Duty Station: Indian Health Service, Fort Yuma Health Center, Winterhaven, CA Category: Pharmacy Tribe: Choctaw

CDR Janet Hayes

Agency and Duty Station: Indian Health Service, Northern Navajo Medical Center, Shiprock, NM Category: HSO Tribe: Diné (Navajo)

CDR Seneca Smith

Agency and Duty Station: Indian Health Service, Pawnee - Indian Health Center, Pawnee, OK Category: HSO Tribe: Muscogee (Creek) Nation and Alabama-Quassarte (Tribal Town)

CDR Shannon Lowe

Agency and Duty Station: Indian Health Service, Haskell Indian Health Center, Lawrence, KS Categaory: Pharmacy Tribe: Chickasaw

LCDR Verdaleen Denetdale

Agency and Duty Station: Indian Health Service, Northern Navajo Medical Center, Shiprock, NM Category: Dietitian Tribe: Diné (Navajo)

LCDR Kenneth Stearns

Agency and Duty Station: Indian Health Service, Western r Oregon Service Unit, Salem, OR Category: Pharmacy Tribe: Chickasaw Nation

LCDR Robbin Tanner

Agency and Duty Station: Indian Health Service, Northern Navajo Medical Center, Shiprock, NM Category: Nurse Tribe: Diné (Navajo)

LT Sara Kernell

Agency and Duty Station: Indian Health Service, Lawton Service Unit, Lawton, OK Category: Nurse Tribe: Muscogee (Creek) and Seminole

AIANCOAC Website:

https://dcp.psc.gov/osg/aiancoac/

AIANCOAC Leadership

Chair | CDR Dodson Frank Seminole

Vice Chair | LCDR Shannon Saltclah Diné (Navajo)

Secretary | LCDR Kenneth Stearns Chickasaw Nation

Treasurer | LCDR Karsten Smith Cherokee & Creek

Senior Advisor | CAPT Dana Hayworth Cherokee Nation and Eastern Shawnee Tribe

AIANCOAC VOTING MEMBERS

CAPT	Warner, James	2017-2019	CDR	Craig-Beauvais, Velliyah	2019-2021
CDR	Goodwin, Robin	2017-2019	CDR	Hayes, Janet	2019-2021
LCDR	Davis, Adele	2017-2019	CDR	Henson, Mike	2019-2021
LCDR	Lucero Karly	2017-2019	CDR	Frank, Dodson	2019-2021
LCDR	Saltclah, Shannon	2017-2019	CDR	Wasson, Lynette	2019-2021
LCDR	Smith, Samantha	2017-2019	CDR	Wato, Kari	2019-2021
LCDR	Stearns, Kenneth	2017-2019	LCDR	Beardslee, Amber	2019-2021
CDR	Cummins, Carol	2018-2020	LCDR	Denetdale, Verdaleen	2019-2021
CDR	Freiberg, William	2018-2020	LCDR	Junes-Harvey, Juliane	2019-2021
LCDR	Smith, Karsten	2018-2020	LCDR	Schossow, Melissa	2019-2021

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CDRBartholomew, Michael2017-2019CDRTagliaferri, Geri2017-2019LCDRDele, Lessina2017-2019LCDRWeise, Karla2017-2019CAPTGiroux, Jennifer2018-2020
LCDRDele, Lessina2017-2019LCDRWeise, Karla2017-2019
LCDR Weise, Karla 2017-2019
CAPT Giroux, Jennifer 2018-2020
CDR Lowe, Shannon 2018-2020
CDR Maxon, Jeff 2018-2020
CDR Meredith, Maury 2018-2020
LCDR Battese, Angela 2018-2020
LCDR Lucio, MacArthur 2018-2020
LCDR Sampson, Docia 2018-2020
LCDR Smith, Seneca 2018-2020
LCDR Uttchin, Venus 2018-2020

LT	Holiday, Charisse	2018-2020
LT	Kernell, Sara	2018-2020
LT	LaMere, Jennifer	2018-2020
CAPT	Hayworth, Dana	2019-2021
CDR	Nichols, Cara	2019-2021
CDR	Ruano-Rossil, Jorge	2019-2021
CDR	Sampson, Lindsay	2019-2021
CDR	Smith, Jonathan	2019-2021
LCDR	Edwards, Linsdsay	2019-2021
LCDR	Johnson, Kristi	2019-2021
LCDR	Standing Soldier, Tasha	2019-2021
LT	Valdez ,Brian	2019-2021

CAPT Carmen Clelland CDR Velliyah Craig-Beauvais CDR Carol Cummins CDR Dodson Frank CDR Janet Hayes CDR Robin Goodwin CDR Geri Tagliaferri LCDR Casey Cavanaugh LCDR Adele Davis LCDR Lindsay Edwards LCDR Shannon Saltclah LCDR Robbin Tanner LT Arrol Perry LT Bobi Tallman Wendy F. Holmes (Agency: Center for Disease Control) Louise E. Shaw (Agency: Center for Disease Control)

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