HEALING FROM WITHIN: THE WELLNESS TEAM CONCEPT

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HEALING FROM WITHIN: THE WELLNESS TEAM CONCEPT

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By

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Abstract

This project was created to chronicle one community’s effort to stem the tide of alcohol abuse and address issues of trauma that had plagued the community for many years despite services provided by the State. It is the story of a group of people who came together despite differences to form a team of service providers that would begin a journey of healing for themselves and the community. The results are coming slowly, but indicate less drinking, less tolerance for any form of abuse, and a healthier lifestyle. Although the journey has not ended, there are many more indicators showing that the community is taking responsibility for their problems. The team members as well choose a healthier lifestyle maintaining sobriety, eating healthier, and exercising regularly.
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The author wishes to acknowledge the amount of cooperation it took to write this piece of work. It is the result of many years of tears, laughter, and healing through a collaboration of local service providers in the community of Kaltag as we struggled to help ourselves even as we were helping others through difficult times. It would be easy to take sole credit for putting this together but it has been a cooperative effort from the inception to the final draft. I first would like to thank all of the Kaltag City Council members through the years for their guidance (especially in the early years). It is with the knowledge and wisdom that I received from them that led to gaining insight into what I would like to see happen in terms of positive and healthy service providers for the community of Kaltag. I would also like to acknowledge all the people who continue to struggle with alcohol and are reaching out for answers. They have given me a glimpse of the struggles they have endured and so what is contained in this thesis is also the indirect result of their contributions.

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1. Introduction

"True and lasting inner peace can never be found in external things. It can only be found within. And then, once we find and nurture it within ourselves, it radiates outward."
~Anonymous

When I first thought of the idea of writing about the wellness team and how it came to be, I wanted to not only describe the process but also to write about the adventures and misadventures of not only being a counselor in your own community but being an Athabascan women, wife, mother, friend, and community member as well. It has been an incredible experience from the time I began working in the field of social services again in 1990 for the Athabascan village of Kaltag...home for most of my life. To me, the definition of a small town is really a very large family. It has the same dynamics; the squabbles we have with each other, the love we have for each other despite all the petty family fights, the care and compassion that we sometimes forget but shows when it is needed the most, and the competitiveness we have with each other for the best jobs, best schools, best kids, or the most successful. It is not for the faint of heart, thin skinned, or judgmental person. You cannot take yourself too seriously, others with a grain of salt, and always have your sense of humor ready. I got that from my dad who with his quiet wisdom instilled in us a very powerful sense of family and community. He always reminded us that as individuals we are important, but that the more important thing is what we give back to the community. The challenge of going back to the work I loved was too great an opportunity to pass up and when the job became available through the City of Galena, I immediately applied. I had also matured and learned from failure the first time I worked fresh from college armed with a B.A. in social work. I had first worked in the field of social work as an outreach worker for the State of Alaska in 1978 to 1980 in the community of Kaltag and had just graduated with my degree in Social Work. I worked for two years with children who were placed in custody and never with the family unit. I felt that if we were to make any difference, the family unit should be involved in any intervention service. After two years, I was so burned out and emotionally exhausted that
I resigned. The exhaustion came from my own misguided beliefs, and the community at that time was not ready to deal with any issues regarding substance abuse and how it related to families. It was devastating at the time but so valuable a lesson to learn and it prepared me for what was to come although I did not realize it for ten years. Following that experience I worked as a teacher aide which helped me to “lick my wounds”, so to speak. I did not have to think and the teacher I worked with had the responsibility of the students, so I felt no pressure or stress. It was safe and gave me time to reflect on my mistakes, gain perspective, and get re-energized. By the time the position for the village-based counselor for the City of Galena came open I was anxious to get back into the field but this time with a whole new perspective and none of my arrogant beliefs.

1.1 Lessons Learned

The first important lesson I learned was that if I were to work in the field that I loved but failed miserably the first time, I would need help. My first attempt was a misguided belief that with my degree I had all the answers and required no help. I was the expert! In my arrogance I assumed (wrongly, of course) that like a broken piece of machinery, I could “fix” people. Well, since when it comes to machines I know next to nothing I was doomed to fail before I even started. But that did not stop me from trying and I thought that by just letting people know what was plaguing them they would thank me and miraculously move on in their newfound healthy lives...end of therapy! Of course at that time I would not have dreamed of admitting I could use help because it showed that I was vulnerable and to me, it was a sign of weakness.

The second lesson was that I was not the teacher with clients as my students. I learned quickly that I was just as much a student as my clients. They had so much to offer and opening my mind allowed me to learn so much about myself just as they learned about themselves in the therapeutic process. I finally realized that the closest I would get to being a teacher was as a guide. It is a humbling experience to have someone who trusts you enough that they can share their pain and to allow you to help guide for a while. I cannot thank enough all those who have placed their confidence and trust in me over the years and because of them, I have
learned to let go of my own fears and have the courage to walk this road with them just as vulnerable as they are.

Another valuable lesson was from my dad who always told me to “shut up and listen”. Of course, I didn’t until later. In an effort to cover up my own insecurities I felt that I had to fill every empty space with senseless chatter. Well, at least some of it was insecurity. Spending my high school and college years away from home taught me (falsely) that if I spent all my time talking, others would see the intelligent person I was and not the insecure one. I now realize that I don’t have to talk all the time and that listening was really more important. It gave me the opportunity to reflect and really hear what others were saying and that I really didn’t have all the answers and that was okay, too.

As a Native person I had always heard people introduce themselves by saying their name followed by who their parents were. My dad always reminded us to say who we were, where we were from, who our parents were, and I never quite got the significance until later. This concept became clearer as I reflected on something I would do differently if I were to work in the area of social service again. I had to see the whole person and not just a set of behaviors. When people introduce themselves by their family, you know who they are because we are all connected in the Athabascan way. That is, you “see” their family and their history and by seeing all of them I learned to be more empathetic and effective by working with systems rather than the individual. That is, people lead complex lives filled with the dynamics of many different relationships and experiences that influence one another in different ways. This includes the trauma and pain that they have endured and as Native people you are said to “know” and understand who they are and what they have been through.

Finally, by listening I got to hear what others were saying and realized how much I needed their help in planning and not only that, that others had genuine concern, and waiting for the opportunity for me to open up my eyes and ears. I knew I had to not only “hear” their stories but they had to hear mine as well and that I could trust them. It was such a liberating feeling
to be able to lay open my whole self and finally be able to speak the truth. It opened up a whole new outlook on life and the possibilities for growth.

My life as a village-based counselor is still just as challenging with my duties expanding as I continue with my education. It is what I expect and have come to accept through the years that there will be times when I will feel alone and isolated, that even when I am trying to socialize, there will always be someone who wants to “talk” no matter the social setting, and that I really never leave my office in a small community. But it is what I choose to do and there are things that I do which helps me to do my job and be a wife, mother, and friend.
1. Getting Started

"Through the formation of the team, more people became involved as volunteers, mentors, and support staff for caregivers with the program. We began the process through community development and community awareness of issues that we experienced while working."

~Anne Esmailka, Wellness Team member

This thesis describes an account of the process of forming a team, maintaining it, and what the future holds for them. It is about the struggle to maintain cultural identity and integrity while providing services in an ever-changing environment. This story is also about how we came together to provide an integrated model of service delivery that did not fit any best practice or the traditional western medical model but instead developed our own based on cultural values and principles. It was our way of taking some control over changes, our way of stopping the crippling effects of dependency, our way of building a local support system, and our way of creating an atmosphere of community empowerment. It is a story that chronicles the personal struggles and growth of the team members as they attempt to help others help themselves. Finally, it is one community’s struggle and although it can be generalized to other communities, it is important to note that this community’s historical perspective was the basis for this particular model. Therefore this story begins with a historical overview of the residents and community.

2.1. Community Profile

The community of Kaltag is located 90 miles southwest of Galena (the sub-regional hub) and 350 miles northwest of Fairbanks. It is located on the west bank of the Yukon River at the foot of the Nulato Hills and west of the Northern Innoko National Refuge. This is important to note because our history is directly tied to the abundant game that is located in the Kaiyuh flats which is located in the National Refuge and the number of wild fish stock located at this juncture of the Yukon River. Under the Alaska Native Settlement Act, Doyon Limited is the
regional for profit Native Corporation and Gana-A Yoo Limited is the village corporation that represents the Kaltag Tribe.

2.2 Culture of Community

The community’s culture has its foundation in the activities of their subsistence way of life. Subsistence activities include trapping, hunting, berry picking, fishing, and arts and crafts; however I should make it clear that subsistence is a way of life in the village and is not defined just by what we eat or how we obtained the food. As opposed to the historical definition, subsistence provides a way today of subsidizing our cash-based economy. Historically, the people of the community relied solely on food that was obtained from the land; they hunted and gathered when it was needed because there was no way of preserving their catch so it was essential not to get too much at one time. Today, the hunting and gathering of food is a way of supplementing the food that is obtained from the stores and to help defray some of the costs associated with the diet of beef, chicken, and other foods from them. Employment comes from the local governments, schools, stores, and various other social entities. In addition, seasonal employment such as firefighting, commercial/subsistence fishing, and construction projects provide an additional source of income. The village’s cultural functions reflect their historical reliance on subsistence and their way of taking care of each other as a community.

The cultural functions include washtub dances, canvas toss, traditional potlatches, and stickdance. The washtub dances are performed to help families share food and to wish good luck in future endeavors. This particular cultural event is borrowed from the Eskimos along the Norton Sound coast. The canvas toss is held annually on New Year’s Day. This cultural event has its historical roots during times of starvation. A group of people would go to each home singing with a canvas tarp and the homeowners would toss food into it. The food would then be taken to the community hall and distributed in the evening helping those that needed it the most. Finally, the stickdance is a week long cultural event that signifies the end of the public grieving cycle. The event actually begins with the death of an individual at which
time the family begin preparing for the memorial stickdance or potlatch (as it is referred in other communities). It is an elaborate process that helps families and communities come to terms with a death until families are emotionally willing to “let go” of their loved ones and to show appreciation for those who had helped in the process of grieving. It is at this time the decision to have the stickdance that year is made. This is important to note because as we become more assimilated into the larger culture, there is a growing tendency to try and hurry the process and there has been so many deaths due to alcohol and suicides that also affect when the stickdance is to be held. The suicides and alcohol-related accidental deaths have adversely affected when to have the stickdance because of the guilt and shame associated with the deaths that have not been worked through adequately by the affected families.

2.3. Community History

The residents of Kaltag were historically nomadic people, following the seasonal game that was abundant in the area until 1920 when the residents moved to its present site to escape flooding and a store had been built at the existing site. In terms of years, the community is relatively young and within a few short years the people went from living a strictly subsistence lifestyle to a cash-based economy; from struggling daily for survival to being assured of tomorrow’s survival. This had a major impact on the familial roles that had been clearly defined. In 1931 a flu epidemic hit the community and by the time it was over, many had succumbed to its effects, especially the young and the elderly. As one elder eloquently put it, “There were so many people dying, after a while, you just quit crying because who do you cry for?” Just as the community was recovering from the epidemic, another blow was administered to the village in the form of tuberculosis. Many families were again separated with those who contracted the disease sent to sanitariums hundreds of miles from the familiarity and culture of their families and village. Finally, in what was the beginning of a trend that threatened the unity of families, residents (in most cases, males) were placed in missionary schools away from the community as young students and returned home adults. As they returned home, those that were away came back and married. However, the parenting styles modeled to these individuals was the nuns and priests of the mission schools. This is
also significant because today parents are very confused about the difference between
discipline and punishment. This creates problems as they raise their own children and
particularly as their children reach their adolescent years. In addition with employment
opportunities nonexistent in the community, many men left their families and villages to work
in seasonal jobs at the fish canneries in the Bristol Bay area. They sometimes were gone for at
least five to six months. With alcohol becoming a factor, adjusting back into the community
and their families was stressful and created considerable conflict within families.

The impact of one traumatic event has the potential of severely impacting an individual’s
functioning at different levels. In this case, it was not just a single event, not just an individual;
but many horrific events without any intervention and an entire community that was impacted.
It is not inconceivable then, to understand how and why alcohol or other drugs became such a
problem as well as other social issues such as suicide, domestic abuse, physical or sexual abuse,
or neglect. The development of the Kaltag Wellness Team came out of desperation to create
change in one community and offer more effective, consistent services through a local
program that would also be liaison to other agencies. It is not an official model for anything
nor is it a best practice, but it is an example of what can happen when caring and
compassionate individuals come together and find commonality to make a difference for
ourselves, our children, our families, and our community. This thesis was also written to
create understanding and in no way written to lay blame. When people gain understanding
and knowledge, it makes the problems seem less foreign and more manageable.
3. Social Services History

"The Kaltag Wellness Team was in place, active, and well organized when I arrived in Kaltag in 1994. They had the best interest of the community at heart so I considered it a privilege to be asked to join them."
~Fr. Joseph Hemmer, O.F.M., Kaltag Wellness Team member

3.1. Community-Based Suicide Prevention Program

In 1985 the City of Kaltag applied for and received their first community-based suicide prevention grant. The City Council decided at that time to hire three part-time employees rather than one. In this way employees would not get too stressed and leave, leaving the council without anyone and having to train a new person. At this point there were three completed suicides from 1979-1990 just in the community of Kaltag. It was not so much that the number suicides that occurred but rather that the community was not talking about them. The community was not able to deal with the deaths because there was so much guilt and shame associated with them. We did not know how to talk about them or help those that wanted to talk, so it was easier to not mention them at all. To add to this confusion and unspoken feelings the community had also experienced twelve (12) deaths due to accidents with alcohol involved in that same time period. The suicides were all males between the ages of 25-35 as were the accidental deaths. At that time, alcohol was blamed for the deaths and continued to be until recently. The Council decided at that time that the most effective way to address these sensitive issues was to employ more than one individual. In this way the workload can be shared and the plan provided a source of support for each other. The job description included working with students through class presentations, positive after school activities, and working with adult groups. There were three individuals hired at this time to begin working on alcohol issues.
3.2. Mental Health Services

It was at this time that I began working for Yukon-Koyukuk Mental Health Program (YKMHP) as the village-based counselor for Kaltag. I was one of six counselors hired, one for each of the communities in the YKMHP’s catchment area as a result of the Rural Human Services (RHS) Program. Upon graduating from the Program, village-based counselor’s job description included providing preventive activities, facilitating support groups, providing basic counseling, making and receiving referrals, providing aftercare and coordinating outpatient services, and providing liaison services for the counselors and other professionals. One of the class requirements was a 100 hour practicum course in which students were required to develop a project for their own community. As a former social service worker in my own community who recognized some flaws of the system, I saw the opportunity for the community to try and make a change. The project would be to put together a collection of service providers in the community in a collaborative venture to begin addressing those issues that were plaguing our community and were not being resolved but were continuing to worsen. Having an idea of what I wanted, I had to do one thing that if left unattended would sabotage the project before it even got started and that was putting my own life in order.

Living in a small, rural community has many advantages and of course, disadvantages. One of the challenges include having the feeling that your life is not your own and especially if you are a service field employee. You need to recognize your biases on issues that affect your clients; suicidal ideation, domestic violence, sexual or physical abuse, child neglect and alcohol use or abuse. You want to be able to help your clients, their families, and the community. You cannot do that unless you have helped yourself. In addition, there are other issues unique to rural Alaska such as the challenging but interesting dynamics that influence our everyday lives. These include family relationships, politics, family feuds, and “outside” influences that affect the community. So in conjunction with establishing clear boundaries for myself, I also took a training class in conflict resolution and a technical writing course that would eventually help me with writing a manual for the City and collaborated with co-workers in writing one for the State’s Suicide Prevention Program. The manuals were how-to guidelines in dealing with crisis
situations; criteria that would help the council evaluate employees, and warning signs for suicide. I also agreed to serve on a National Youth Suicide Prevention team that met yearly for training, kept track of statistics involving suicide in Native American communities, researching information on suicide, and the team eventually coordinated a national conference on suicide prevention in San Diego. All these experiences helped me to focus my energies into being perceived as objective to pull together individuals with varied backgrounds and who had never worked together. With all of the above in place, a series of meetings were held among all those invited to participate to look at the advantages of joining together as a team and to find a common thread that held us together.

3.3. Why Collaborate?

As we worked through our reasons for working together the group came up with a list that helped to begin building a framework.

A major hardship, as stated by most service providers, was the fact that they felt alone and isolated when performing their duties. One good reason for collaborating was to spread the workload out while each person performed within the framework of his or her own job descriptions. In this way one person was not responsible for everything. This also gave each of us a chance to work within our own area of interest and group of our choice. It provided flexibility which was important in terms of confidence and putting the expertise and strength where it was needed the most.

A second reason for collaborating was that as we found time to have “fun” despite the seriousness of the issues, it became apparent that ideas and creativity flowed effortlessly. As I did the research, it was evident that the more we found how alike we were, the more the group was able to develop a trusting relationship.

Historically the residents did not have a choice in who they sought help from. Through the development of the team, people were able to see that they could have options. The team was
more interested in creating awareness at the individual as well as community level. It was not so important to get “counseling” but to relieve tension before a crisis erupted and as residents recognized their own need for help, a referral could be made.

Through collaboration we found that it not only fostered trust within our group, but that it also fostered trust in the community. Residents saw that we were there to stay, services were consistent, and we didn’t ignore their problems which gave impetus to trust.

A huge plus that was provided through collaborating was the professional growth of team members. By teaming up with other agencies we were able to cross-train from itinerants coming to the community in areas of interest. For example, Headstart graciously provided a lot of training in the area of parenting, characteristics of abuse victims, developmental issues, and other issues which was the itinerant’s area of interest or expertise.

Finally, as agents of change for our community we could empower ourselves through the pooling of resources. Alone resources were limited but together we were able to provide more for group work or workshops. It was further proof that through collaboration we had the strength and confidence to make a difference.

It was at this point that I realized how much fun I was having even when we were struggling to fit different personalities to make a cohesive unit. At the same time I was also struggling professionally as the only clients I was seeing were court ordered and resistant to any type of treatment. The group as a whole had worked hard to come up with extremely viable reasons for working together. Our next step was find the one issue that all of us agreed to that would keep us together despite differences in opinions and personalities. As we got closer to finishing our reasons for collaborating, we found that we all were concerned for our children and their future and realized that was the glue that would hold us together.
As we became more familiar with each other, our meetings became more regular which took the relationship to the next level. We needed to be able to determine how serious we were, what were our unresolved issues and how could we deal with them as a group, and continue to build trust with each other? To describe the process appears simple, but was in fact a five year process.
4. The Early Years

"I feel that the program has been effective in my own life. Had it not been for my involvement on the wellness team I would not have stayed sober for this long. I feel that I have grown with the program through the years that I have been on it. Being a part of a small group of people has given me the strength to remain sober and listen to other people's own life stories."

~Beverly Madros, Headstart Lead Educator, Kaltag Wellness Team member

This same sentiment is echoed by those that were involved in the establishment of the team from inception. The fact is that for the first three to five years, we focused our energies on getting to know one another, cross-train with each other, and were basically functioning as a therapeutic group. We met the first week of each month to pick a theme for the month and set a schedule of activities reflecting the theme. Sometimes the themes followed State prevention themes and other times, it was something that we found was needed here in the community. Other times the teachers expressed concerns over a specific issue and we helped by focusing and offering help to families and the community. Finally, each agency gave a brief report on their program and who, if any, itinerants were scheduled to make a visit that month and if so, what their area of interest were. The activities for the month included:

- Group activities for each grade level from kindergarten through 12th grade and we usually did just one high school activity that included all the high school students. The activity was usually a group discussion on an issue reflecting the theme and then time was set aside for fun and games. These activities lasted for an hour after school and were facilitated by one of the team members specializing in that age group. Our interest was just in giving factual information regarding each issue and we made a conscious effort to keep our opinions to ourselves.

- We scheduled a training reflecting the theme for the month for the team members. The training would include facts about the theme, how did it affect the community, how would it be addressed in groups, and how each member felt about it. The training was facilitated by the person who knew the most about it and we each monitored
other member’s feelings regarding that particular issue. This was our way of helping each other come to terms with any unresolved issues that might jeopardize and bias their work in other groups. The training was also done by itinerants specializing in that particular area and was scheduled to make a visit to Kaltag. This activity stressed the importance of confidentiality among group members.

- In addition to the training we also scheduled one social gathering for the team. We felt it was important given the serious nature of our work, to be able to get together in fun and laughter. The gatherings were usually held in one of the team member’s home and each person contributed something to share.

- We also scheduled one community event where families and their children were invited. Again, this was a time to engage in fun activities where the community could see that it was okay to laugh and “be crazy” without any use of substances. The activity followed the others in sticking to the theme for the month. The only rule was that there was to be no alcohol allowed in the activity.

- It was during this time as we prepared to work in the community, we did a collaborative project with Interior-Aleutians Campus and some elders of the community. We wanted to find out as much about Kaltag besides what we heard through our parents. We came up with the idea of having a local history course taught by elders of the community to establish a clearer picture of the community. Our elders always remind us that to know where we are going we need to know where we have been.

- Finally, in 1997 a group of us began stress management sessions each Friday. The session began as an organizational requirement but we found that the sessions were so popular and extremely helpful that we continued. The sessions usually lasted from one to two hours depending on how each individual’s week went. If the week was extremely emotional, I usually used guided visual imagery as well as talking through the stress, and then relaxation techniques to close the sessions. The sessions continued each week for eight years. The members of the group and I are extremely close and found that although we have not participated together in stress management sessions since 2005, we rely on each other through extremely stressful and hard times.
We felt that we each had built up a good coping skill base for ourselves and if at any time one of us needed extra help, we could always call each other.

The early years of the team were actually spent building rapport and fostering trust among the members of the team. At this point the agencies participating were mental health, the tribe’s Tribal and Family Youth Specialist (TFYS), a health aide, school staff, Headstart staff, Suicide Prevention Program staff, male volunteers, and church staff. Although we began working with groups at this time, the focus was more to create awareness of what it would be like to have good, old fashioned fun. We wanted to not only build trust within our group, but with the community as well. We did not want to scare people with too emotionally charged topics until we were ready as a team to offer support. As expected, there were a lot of tears shed as each of us dealt with our own demons. What stood out in my mind during those emotionally trying times was what a friend told me. She said, “Vi, trust the process” and after five years, I understood what she meant. We had to go through the pain that each of us in our own way tried to go around for so long. What also surprised me was that confidentiality did not once become a problem. It surprised me not because it was kept, but because there were a lot of individuals involved and we lived in such a small community. It showed me the level of commitment that each of us was willing to put into this team effort. It made us stronger and as a result was able to finally take our work to the community level.
5. Taking it to the Community

"Through this process we are more capable of dealing with crisis and intervention services and are able to rely on team members for support. The core group has become more intimate and personal through the years and can call upon each other for support."

~Anne Esmailka, Kaltag Wellness Team Member

After five years of working to help each other come to terms with our own issues, we felt confident enough as a group to begin looking at the community. What stood out as a problem, at least on the surface, was the drinking. But before we could begin addressing issues we needed to come up with goals to keep us focused and not become distracted or overwhelmed by doing too much. To that end we set upon holding a series of meetings to develop a mission statement and broad goals. The other task was to cement even further the cohesiveness of the group by coming up with a set of principles that would guide and justify the need for a more local program with local input and control. The latter was extremely important so that we could have community buy-in and more importantly, leadership buy-in. The result of those meetings was the development of a mission statement:

The Kaltag Wellness Program envisions
A community where we have youth as well as adults with high self-esteem, are self-motivated, self-determined, and proud of their cultural heritage.

By developing the mission statement we were able to come up with a set of goals that were broad enough in scope so activities could be flexible but still fall within the framework. The goals encompassed both youth and adult groups. The goals for the youth were:

1. Raise self-esteem of our youth.
2. Enhance pride in cultural heritage.
3. Learn what healthy choices are.
4. Promote and enhance communication between elders and youth.
5. Strengthen positive communication skills.

The goals for the adults were:
2. Provide information about career opportunities.
3. Learn about conflict resolution/problem solving skills.
4. Learn about healthy and unhealthy families.
5. Learn to budget so that individuals don’t spend beyond means.

The establishment of these goals and the mission statement helped to pave the way for us as a team to be more creative and open to new ideas about what we envisioned for the community. As we explored options for proceeding, we developed a set of principles that was based on what we knew about existing services and what we can do to change them. Some of these principles were based on values and beliefs that we held as Athabascan Indians. Alone they added to us being together, but collectively they proved to be an important and powerful set of guiding principles. They are in no particular order but each was important in making our group cohesive and each was an important reason for staying together.

- As individuals we all were conscious of the fact that despite the dollars spent to provide services to the residents of our community, we still were experiencing many social problems. On the contrary we felt that we were becoming more and more dependent and crisis-oriented. The inconsistent and fragmented services often came when clients were in crisis. The itinerants arrived in time to deal with the crisis, left for a few months, and came back in time to deal with another crisis. Services that provided social and life skills were nonexistent. As a result clients were becoming not only crisis oriented but dependent on someone else taking care of them giving them no opportunity to learn to be accountable for their lives. Whatever we came up with in terms of services, we wanted to be able to teach responsibility and accountability.
• An important principle for us was that we knew if any healing was to take place it would have to happen from the inside out. There was no one "fix" us or our issues and we had to find a way to break the wall of denial we had built up around ourselves and the community. With that realization, we knew this alone was a massive undertaking and would need time.

• We had never believed that we were capable of helping ourselves, I am not sure that this was told to us or we just assumed. In either case, we always relied on "outside" resources and recognizing ourselves as resources was a new experience. Those of us on the team had not thought of ourselves as experts in any sense of the word, but we did know that another value and great strength in our culture was cooperation. Each of us brought to the group some source of strength that through collaboration, combined to become a great source of energy.

• The next principle was the realization that what the team envisioned was a process. By definition, we knew that it would take time, patience, and a long term commitment. As one of the facilitators I recognized this and tried to impart the significance to the group. For individuals, healing is sometimes a long term process and we were attempting to bring the community through this process but at a different level. My thoughts were that if we could create enough awareness through patience, caring, in a safe and non-threatening environment, and have the support base for individuals disclosing, we would be able to prevent the constant crisis people were in and provide the opportunity for individuals who self-referred for therapy rather than being mandated by the courts. A daunting task to say the least, but at the time we felt if we were to make a difference, a necessary one and one we felt we were ready to undertake.

• As Athabascan people we had so many beliefs as a way of living our lives and a way of helping ourselves during times of struggle. Our way of life changed so much in just a short period of time that it overwhelmed everyone. My uncle once said that "people say we lost our culture, but I think that it is here, we just forgot to put it to use for a while". One of those was utilizing the strengths that we traditionally relied upon. We
falsely believed that we were helpless and needed someone to come and take care of us. It was easier at that time to list what was wrong with us than what assets we had. It was time to peel away the layers of hopelessness and helplessness to find them and build upon them. Some of those strengths that we knew we could draw from included; a wonderful sense of humor, respect for nature and others, a deep love for children and elders, and for many of us on the team, a deep sense of community. For many of us this was our home and would be for a while, a place where we wanted to raise our children and so we had a lot invested in making it a healthier and a safer place to be.

- As well as services being fragmented, we also received services that we felt were inadequate because it did not take into consideration the uniqueness of our community. That like individuals, communities were also unique. We did not feel we were better than other communities experiencing problems, but that we just did things in a different way and solutions could not be a “cookie cutter” approach but needed a variety of options to be more effective.

- The saying, “people are going to do what you do and not what you say” became our mantra during this stage of development. It not only applied to us as a group but also to the leadership in the community. We needed to have the support of the governing bodies for the community so that we not only took ownership of our problems but residents usually follow what the leadership supports. I decided at that time to run for City Council as a way of educating and keep the council abreast of our progress. The community was fortunate that at that time because the community was satisfied with the members and we rarely had a turnover which helped to provide stability and an ally in our cause.

- From experience we knew one thing for certain and that change was inevitable. We wanted to be more proactive and at least have some control over changes that were to come. Through the collaborative process we had realized we had choices and we had a voice that was no longer silent. We can be empowered as individuals and therefore we could also be as a community, empowered. We suspected that with the rapid
cultural changes that had taken place a lot of the roles we knew were no longer clear, were reversed, or no longer needed. The men of the community suffered the most through loss of significant roles they previously held that gave them purpose and pride. This did not diminish the importance of the roles that the women suffered as well. These roles not only provided status, purpose, and pride but in many cases they also defined important rites of passage.

• At the time we started the team we were certain of only one thing and that was there was a lot of drinking going on. I would venture to guess at that time approximately 85% of the community drank. Alcohol was blamed for many of the problems but we suspected that substance use was more a symptom of past traumas than alcoholism. We suspected this after taking the local history class and heard the stories of trauma after trauma that the residents were exposed to. Again, it was a somber reminder that what we were undertaking was going to require great patience and a lot of time.

• Having gone through a period of healing ourselves, the group recognized that if we wanted to sustain individuals going through the healing process there had to be a supportive environment. The community environment had to be able to help those wanting to change and in an effort to meet that need we needed any education to be systems-based. This concept was new to us all and actually became the catalyst for my decision to go back to school and get my Masters in Community Psychology. The idea was complex and multi-layered if we were to meet individual, family, and community needs. We were attempting to do preventive as well as therapeutic work in the community and we felt like pioneers!

• Finally, we had for years talked about our problems with no one taking the lead in doing something about those problems. If we started we had to say focused on solutions and not spend any more time on talk. We all knew what our problems were and now it was time to put our words into action. The challenge was to be creative, gent but firm, patient, and persistent in coming up with solutions that would create awareness slowly.
Once we established guidelines from which to work from we had to develop a program that would create awareness in all domains within our community. That was the next challenge for us a team.
6. Community Model

"I definitely feel that a model such as this one would be most beneficial in a small community. To have all the caregivers sitting around a table discussing their community and the events that are occurring is the highlight of the wellness team."

~Beverly Madros, Headstart Lead Educator, Kaltag Wellness Team member

After holding another round of meetings we came up with a pendulum type of model that would represent what we were to do. The following diagram represents what the model would look like and how it would flow:

Figure 1. Kaltag Wellness Team Model
The model is similar to that of a pendulum in its movement in that it continually swings. The pendulum represents the group even as we are part of the community; we also are the agents of change. The **Facilitator** is actually the person that is aware of their own issues and can take care of self, is knowledgeable about the change process, and is usually the one that will begin the process of building a support base for all team members. The **Core Group** domain work with each other in building trust and rapport, is consistent with meetings, help each other by bouncing ideas off each other, responsible for developing and administering needs assessment, based on the assessment, develop goals and objectives for self and the community, and is responsible for the community education to create awareness. The domain of **Leadership** is important in this process and their support is needed and vital. The core group will also include the local governments in their education on awareness, especially regarding implementing personnel policies regarding mental health and social service needs. Finally the domain of **Community** is where the majority of presentations, group activities, meetings, workshops, and gatherings will happen as we educate and build awareness of issues. The pendulum swings to each domain of the community and each group is given the same education on a particular subject. We have had to work through walls of denial over the years and we still continue to struggle with particular issues that we try to work through using different strategies. Since the team was formed we have dealt with suicide and domestic violence and alcohol is always addressed no matter what subject we are dealing with. The facilitator's domain was established early in the process and the rest followed as we worked through our own issues. So the pendulum continually swings but at a very slow pace and at times would move fast but we continuously gauged how ready the community was at each level. As each domain gained awareness we would go to the next level. When, as a group, we felt people were comfortable and trusted us enough, we added resources outside the community to conduct a workshop. As much as we felt people trusted us, we also were aware that we were not totally considered the “experts” and if other resources could validate our knowledge, we were willing to bring in those resources. However, we made it clear that we
would introduce the issues, educate through activities, and made sure we were ready to deal with any disclosures.

This model works well for us because we try to continually introduce new issues and we also try to recruit individuals interested in joining the team. It is in constant motion and through the years has stopped during times the team has struggled as we tried to regroup and re-energize ourselves.

As expected since inception it has been increasingly difficult to maintain the enthusiasm and commitment enjoyed in the early years. We each have worked extremely hard through our own journey and have seen significant gains in the community. It is hard to keep up that level of energy and we constantly struggle to recruit new people to the team. Finally, as the model came to life we felt completely ready to begin addressing those issues that we felt contributed to the drinking in the community. We agreed that we would simultaneously address alcohol abuse in all groups.

Once we established the model, we felt that it was time to begin the real work in the community. Our first step was to have a needs assessment done of the community. Although we guessed at what we felt the problems were, we wanted to know what the residents thought were problems. We also knew that they would not be completely honest with us as change agents. So we worked with the junior/senior vocational education teacher in teaching the students how to conduct surveys. We then developed a survey and the students did the first complete interviews with each household in the community. Not surprisingly the results indicated that the majority of the residents felt that alcohol was the worst problem with not enough discipline in the school as the second problem. Also not surprising was that no one wanted to talk about alcohol.

We followed the same format as when the team first got started in creating awareness through education and in groups. The format was the same but the content was more specific and the
first few years were spent on alcohol and suicide. By the time we had the next suicide in 1993 the team felt comfortable enough to speak with the family and have them identify the death as a suicide publicly. It was difficult for them and for us but they agreed. It was then we broke into groups and addressed the death at each grade level and developmentally appropriate to each age. For the elementary level we addressed the death through the use of puppets. We put together a “how to” paper on grieving for each household in the community and included information not just for the adults but for children as well. The papers were specific for each household and members of the team delivered the papers to each home. It was the first time a completed suicide was publicly acknowledged and in a way gave the community permission to “talk” about it as such. It was such an enormous breakthrough and we are extremely grateful to the family for having the courage, despite their pain, to give us their permission. Since that time we have dealt with equally painful subjects in similar fashion. The next chapter deals with the subjects and the activities that took place over the next few years.
Grief, Fun, and Growth

“The Wellness Team takes a low profile, preferring to demonstrate by work and lifestyle the benefits of healthy living. And the Team has been effective. Suicides, addicts, abusers have taken note and are having second thoughts. These scourges of the community are not as rampant as they once were.”

~Fr. Joseph Hemmer, O.F.M., Kaltag Wellness Team member

This sentiment can be celebrated now upon reflection but at the time the activities began, it was time consuming, emotionally draining, and for ten years, consistent. It was a time of crying, laughing, and shouting with anger but through it all we gave each other support and encouragement. What follows are examples of what took place during this period.

For approximately five years we dealt with the issue of suicide through many different strategies. I had some training on the national level through the National Prevention of Youth Suicide team and learned a lot through that channel. It helped me to help others as they grieved lost family and friends. I also was trained as a gatekeeper through the QPR Institute and that allowed me to be trainer for suicide prevention groups. QPR stands for Question, Persuade, Refer and it is a suicide prevention model and intervention model to use in a crisis situation. It teaches how to ask if some is suicidal and the severity of risk, what to do to persuade them to seek help, offer hope, and who to refer to. It also helped to give additional reasons for people to talk about suicide in a safe, non-threatening environment. I was able to train our team, the school staff, and students in the area of suicide prevention. Again, this allowed another important breakthrough to happen. At the time the team was still responding largely to crises, usually at night and usually with individuals who were intoxicated. Many of the team members that were getting the calls were with the suicide prevention program which did not require employees to abide by the strict guidelines of reporting that those of us operated by. As a result they were burning out from getting so many calls on weekends. We dealt with that by having the team inform all individuals who were experiencing crisis that they...
would be referred to mental health that would follow-up the following day. We also began involving family members in the intervention. In time, the crisis calls became less and people began talking in an effort to prevent building up of stress. We went into the school and did presentations on QPR and educating the students on trusting others and who they could call on in times of stress for them. We also talked about the idea of suicide not being confidential in a way to get rid of the secrecy surrounding the issue. We also provided information on what healthy families were all about and what to do if they had no one to turn to. We did lock-ins with each grade level to show what it was like to have fun and laugh. It was the most interesting thing to see high school students who spent their days “being cool” to playing tag or hide-and-seek at the lock-ins. We had sledding parties with snacks and hot chocolate served after. We had alcohol-free dances for the youth and adults were free to participate. We had game nights at the community hall for families with the rule that parents came with their children. We had spirit camps with the men volunteers who taught survival skills and talked about subsistence use and what it meant to their parents. We had neighborhood parties where families invited members of the team to their homes to help with specific issues. The rules were that all family members needed to attend and they could invite who they wanted. This was an interactive activity and we tried to make it fun as well as educational. The Headstart staff had training in the BABES puppet play program and did some puppet play on various issues for the elementary grades. At times the teacher had issues with students and did not give names but wanted information or presentations in an effort to help them and peers to understand. We had scavenger hunts scheduled with the high school students and pizza parties. Each team member also got involved in many of the school sponsored activities, we facilitated and participated in talking circles, some of us were first responders and others were debriefers. We wrote articles in the City newsletter on different issues, put together a service directory for the community, gave updates on a monthly basis to the City Council, and participated in workshops when itinerants made a visit. We had Adult Children of Alcoholics (ACOA) and other support group meetings on a regular basis and slowly moved into having an outpatient class. We collaborated with the Alaska State Troopers on doing various safety classes like swimming and bike safety. We referred, we were advocates for our children and
needy families, we were liaisons for our clients and other agencies, and always on call. We established annual activities to create awareness like an annual sobriety walk, annual domestic abuse walk, and annual Red Ribbon Week.

At the end of the fifth year we began to collaborate with other agencies to schedule conferences on the issue of suicide, alcohol, men’s issues, this served to validate information we shared with the community. The conferences included a men's conference through collaborating with a friend I met through the RHS Program who had a lot of energy and experience working with men’s issues. We also invited Earl Polk at different times to do the same thing. We had conferences on domestic violence, on cultural awareness, we had an annual Wellness conference on mental and physical health, and we collaborated with the school on having an artist work with adults and families on grief work through art. The conference on domestic abuse was put together with the help of friends that were working as a couple for an Anchorage agency. We then followed that with another smaller workshop but had a talking circle format with another person from outside the community. Finally, we collaborated with the Headstart program itinerant to do a session that focused on healing the victims of domestic abuse.

It has been fifteen years since we began. Has it made a difference? We think it has, there are many more sober people, our hall (during dances) has at least half filled with people who are sober compared to all being intoxicated 15 years ago, we have personnel policies to help individuals with alcohol rather than do more damage, we have an awesome softball team that promotes healthy living, we have children who know how to access services, we have fewer accidents that are alcohol related, we have less teen pregnancies, and more individuals working. There are less crisis calls of intoxicated individuals with suicidal ideation, more reporting of domestic abuse and minor consuming which indicates there is less tolerance surrounding abuse, and not only did all members of the wellness team quit drinking but with the exception of one have all quit tobacco use. The City Council has adopted a zero-tolerance policy in their ordinances and their personnel policy includes trying to help those with substance abuse issues.
rather than terminate employees. As expressed by other team members, it has been a rewarding experience professionally and personally. The journey is far from over and we continue to struggle to maintain the group. However we choose to continue, it would have to be on a totally different level than when we started. A big part of the problem of recruiting has to do with the emotional journey we all have been on and shared with each other. It is hard to accept new people intruding into our circle and we have yet to find a way of reconciling ourselves to that. In addition to that, a lot of individuals who grew up with all these activities have families of their own and are moving to find better economic opportunities. These people were given the chance to grow and make healthier choices than the generation before them and they have taken the opportunity to do so. So, we end up with few prospects wanting to become part of the team and are trying to re-energize for the “second round” so to speak.
8. The Continuing Story

"It has been a wonderful experience for me. The collaborating has been the key for success in my work and life. I came to the village as a non-native who had lived in rural villages since 1983. The only way I felt I could be effective in the village was to get a feel for the local, already established programs and resources. The Wellness team provided that for me. It also brought the side effects of support and encouragement to try new things or old things in a new way."
~Ann Brantmeier, Headstart P-3 Educator, Kaltag Wellness Team member

As I reflect on the past sixteen years, I can’t help but feel a sense of accomplishment. We all have come so far in our personal and professional journeys and have learned to trust the process and speak the truth. The group acknowledges that healing can be a life-long process and we have learned to celebrate the small changes that have happened over the years. We learned again to appreciate the beauty of our environment that drew our ancestors to this spot, we take walks and feel their spirits, and we continue to pray for the strength to go on and other changes to happen. One subject we have not addressed is sexual abuse. We are grateful for those who have struggled in their lives because they have contributed as much to our own growth as their own. Our journey is not yet over and we feel confident that the seeds we began planting sixteen years ago will rise up and be willing to take our places. It will not be any easier because we have other stressors that continue to influence our lives. They are just as complicated and require a lot more creativity to work through them. But with support, continued education, commitment, caring, and experience we have the strength to get us through.

I continue to find and meet the challenges of what I do and most especially in providing mental health services in a small community. I have learned many lessons through this experience and continue to take time to learn (my dad is smiling down at me thinking...at last!) but I don’t presume to have all the answers. With the help of a strong group of special people
I have learned the value of asking for help and through it all I am blessed with the ability to provide a vision. I continuously struggle trying to find balance in two worlds but am learning to take the strengths from each and carve out my own way. And, as always the work I love also comes with personal sacrifices. My longevity in this field is due to my husband who has been my biggest supporter over the years. Even when he had to care for our children all the times I had to leave for some training, he did this without reservation or experience. My children took all this in stride and accepted having just one parent for long periods at a time. I have tried to compensate by making our time together filled with quality and special activities. Over the years we have had family sleepovers in the living room, have spent Saturday mornings watching cartoons (even all the DragonBall Z’s!), and lately more camping trips (despite the fear of bugs). My life as a village-based counselor is still just as challenging and as we progress as villages, those challenges are more daunting with so much influences on our villages. When we started the influences came from within and the past traumas, now we have cable TV which brings what happens around the world in our living rooms as it is happening. At other times I feel extreme pride in the community’s accomplishments and feel that the sacrifices are worth it. But I do know that we have made tremendous strides and as a result our community will be a much healthier place due to our efforts. My relationship with the team is based on trust, reciprocity, and integrity that continue to be nurtured today. It has helped to sustain us as we continue this journey and bring new people into our circle.
I became involved with the Suicide Prevention Project in 1989 which involved working with the community on intervention, prevention, and educating on issues such as alcohol abuse, drug abuse, and suicide. Through working with the program the Wellness Team was formed. Through the formation of the team, more people became involved as volunteers, mentors, and support staff for caregivers with the program. We began the process through community development and community awareness of issues that we experienced while working. In using this method we realized that we were able to inform the community on issues that we experienced more freely.

This method has been successful for Kaltag because the team has been the same for the past sixteen years with the director being Violet Burnham and team members never changing. We have added volunteers but the core group has remained the same.

Through this process we are more capable of dealing with crisis and intervention services and are able to rely on team members for support. The core group has become more intimate and personal through the years and can call upon each other for support. Being a part of the team has been a strong support for me and I realize that I am able to deal with my own personal issues through the support that I receive from team members.

~Anne Esmailka, 2000, Wellness Team Member
I have been a member of the Wellness Team since 1992 when I was working as family minister for the Catholic Church. I continued to be involved when I moved to the Suicide Prevention Program and now continue since 1995 as a Headstart home visitor.

It has been a wonderful experience for me. The collaborating has been the key for success in my work and life. I came to the village as a non-native who had lived in rural villages since 1983. The only way I felt I could be effective in the village was to get a feel for the local, already establish programs and resources. The Wellness team provided that for me. It also brought the side effects of support and encouragement to try new things or old things in a new way. Working together with other service providers helped us not to duplicate or counter others' attempts to provide needed help. When we were experiencing tragedies in abundance, the team gave us the strength to pull ourselves through in order to be there for others.

I believe my part on the team has been one of a person of hope and reality. My optimistic view of people and life brings a non-judgmental attitude and a sense that there is always a possibility for change. The reality is reminding us that change is slow and progressive. We, as a team, can be mentors for each others. When we get off track ourselves we can call each other on the truth and growth. The team has potential for making great things happen and already has if but one person in our village is living a healthier and happier lifestyle than yesterday.

~Ann Brantmeier, 2000, Wellness Team Member

I see my role on the wellness team as being an advocate for children and families that are in the community. Finding ways to involve them in the program. Also as a role model for other people in the community that are trying to stay sober. To be a shoulder to lean on when times are tough, and to learn from each other. To set up support group meetings for people who are trying to stay clean and sober for them and for myself.
I feel that the program has been effective in my own life. Had it not been for my involvement on the wellness team I could not have stayed sober for this long. I feel that I have grown with the program through the years that I have been on it. Being a part of a small group of people has given me the strength to remain sober and listen to other people's own life stories.

I definitely feel that model such as this one would be most beneficial in a small community. To have all the care givers sitting around a table discussing their community and all the events that are occurring is the highlight of the wellness team.

~Beverly Madros, 2000, Wellness Team Member

The Kaltag Wellness Team was in place, active, and well-organized when I arrived in Kaltag in 1994. They had the best interest of the community at hear so I considered it a privileged to be asked to join them.

The Team is concerned about all the social ills found in the community. Drugs and alcohol of course top the list. Then there is suicide, and abuse in all its forms.

Down through the years all these ills have been dealt with on a regular and continuing basis. The young children are gathered on a funtime basis and are made aware of addictive behavior and what abuse looks like. They are being taught how to respond when caught up in any of these situations. They are encouraged to talk among themselves and with a significant adult about any problem that weighs on their minds.

Adolescents, teens, and young adults are gathered and made quite aware of drug and alcohol problems, depression, suicide, abuse whether physical, mental, verbal, sexually, or of any other form.
The Wellness Team addresses all destructive habits and situations. Smoking and chewing are in their sights, as well as diabetes, obesity, convicted sexual offenders, sniffers, and other bad habits as well.

People in recovery from addictions are supported, meetings held, and workshops provided. Regular exercise is encouraged and an indoor exercise room is available.

Members of the Wellness Team are urged to prepare themselves to be of assistance in emergency situations. Some are qualified as First Responders.

The Wellness Team, made up of individuals from all the service entities in the community, is concerned to support its members as a strong base from which to reach out to others in the community. The team recognizes they must be healthy if they are to offer support to anyone else.

The Wellness Team takes a low profile, preferring to demonstrate by work and lifestyle the benefits of healthy living.

And the Team has been effective. Suicides, addicts, abusers have taken not and are having second thoughts. These scourges of the community are not as rampant as they once were.

~Fr. Joseph Hemmer, O.F.M., 2005, Wellness Team Member
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