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As a citizen of the Oneida Nation and a descendant of the Stockbridge-Munsee Band of the Mohicans, I strive to conduct American Indian (AI) health research that is tribally responsive, community centered, and interdisciplinary. The cross-cutting theme of my research is addressing AI health inequities through examining historical and contemporary stressors within a sociopolitical context. In future research, I plan to assess cultural factors and resiliency building in relation to AI health and wellbeing outcomes. Life course and stress process frameworks guide my qualitative and quantitative research.

The onset and severity of several chronic disorders (e.g. type two diabetes, substance misuse) can be at least partially explained by differential exposure to stressors such as discrimination, child maltreatment, and inability to meet basic needs [1][2][3]. Mechanisms by which poor health proliferates in Indigenous communities has been heavily theorized; however, minimal empirical validation has been conducted.

As Native health researchers, we must continue to evaluate the incidence, prevalence, and magnitude of stressor exposures, the resulting health outcomes, and moderators and mediators that influence this relationship [4]. This has implications for interdisciplinary teams. Multiple disciplines including social welfare, sociology, AI studies, public health, medicine, and public policy are needed to address the complex nature of AI health disparities. My research agenda involves working transdisciplinary to develop measurement tools that are specific to AI populations. It is through culturally-specific measures that we can begin to accurately assess the true role that stressors have on health and wellbeing outcomes for Native peoples.

Research Experience

As a doctoral student at the University of Washington (UW), I have been engaged in several projects that have advanced my development as a researcher. One example is that I completed a two-year research fellowship training program with the Indigenous Wellness Research Institute. This exposed me to research substance use-related projects being conducted across Indian Country. In this program, I was matched with a mentor whose research aligns with my research interests. Dr. Melissa Walls is a sociologist housed in a school of medicine and continues to mentor me. Through this relationship, I have gained qualitative and quantitative data for which I have completed one manuscript and am using for my dissertation. With the qualitative data, I analyzed focus group transcripts from five tribal communities, presented findings from these analyses to the tribal communities from which they came, and presented findings at two major conferences. Currently, we are wrapping up an article titled: *Sources of Stress among Midwest American Indian Adults with Type Two Diabetes*. Another published paper I am the lead author on is titled, *"I'm in this world for a reason": Resilience and Recovery among American Indian and Alaska Native Two-Spirit Women*. I led the conceptualization, analysis, and writing for this document. Methods included examining themes of abilities, processes, and resources involved in resilience building among lesbian, gay, and bisexual (two-spirit) Native

women. Results also included a theoretical model for analyzing future Indigenous resilience research. In another project, I modified an adverse childhood experiences questionnaire to be included in a large psychiatric epidemiology study. I am currently working on an article examining the relationship between child abuse and suicide attempt among two-spirits. This is salient because this highly vulnerable population has yet to be represented in the suicide literature and is written in response to community need. Each of these projects was guided by community-based participatory research (CBPR) principles. To gain additional experience in CBPR, I completed an intensive one-week training at the University of Michigan with a community research partner from my tribe. This acted as a “kick off” to us spearheading a tribal IRB development project in order to lay infrastructure for future tribally-driven research. This project is in align with my long-term research goals of working with my own tribe on health research.

Dissertation

My dissertation focuses on examining clusters of childhood stressors (e.g. child maltreatment) among AIs who have a diagnosis of diabetes and who reside in the Midwest. I am conducting a latent class analysis and will assess whether specific patterns of childhood stressors are more predictive of substance use, mental health, and diabetes self-care outcomes.

Future Plans

My post-doctoral research will naturally expand into measurement development, measuring Native-specific stressors, and understanding how stressors accumulate, proliferate, and influence health and well-being. I will also study resilience and post-traumatic growth.

I plan on applying for at least two research career development grants and a National Institute of Health/ Indian Health Service Native American Research Centers for Health (NARCH) grant within a year after I graduate. The first, is the NIH K-award. The other is the William T. Grant Scholars Program which is a development award designed to enable promising early-career researchers to expand their expertise. This highly prestigious award is similar to the NIH K-award in terms of time protection and research career advancement. The NACRH grant is an outcome of a collaboration between the National Institutes and Centers with the Indian Health Service to support partnerships between tribes or tribally-based organizations and institutions that conduct academic research. NARCH provides opportunities for conducting research, research training, and faculty development to meet the needs of AI communities. This research mechanism aims to reduce health disparities, increase the capacity of both AI tribes and organizations, and research institutions.

Conclusion

Ultimately, I aim to conduct research that improves the wellbeing of AI individuals, families, and communities. I intend to provide data to tribes so that they can advocate for themselves and inform culturally responsive interventions. My research activities will be tribally-driven.
