

RESOLUTION OF THE
WHITE MOUNTAIN APACHE TRIBE OF THE
FORT APACHE INDIAN RESERVATION

- WHEREAS, Joanne C. O'Connell, Ph.D, of the Institute for Human Development of Northern Arizona University has made a presentation to the Tribal Council in regards to providing services to disabled children on the Fort Apache Indian Reservation, and
- WHEREAS, Dr. O'Connell requests that the Tribal Council approve an early infant project for the reservation, and
- WHEREAS, the purpose for this federally supported, early intervention demonstration project, according to Dr. O'Connell is to develop a program of services for handicapped Apache infants and their families, and
- WHEREAS, the service component will consist of establishing services to the handicapped infants at the time they are identified as handicapped, and
- WHEREAS, an Apache paraprofessional will be trained by the project staff to initiate services to families while still in the hospital, and
- WHEREAS, the Tribal Council recognizes the problems and disabilities suffered by handicapped children and their families and would like to address this problem with the assistance of the Institute for Human Development, and
- WHEREAS, the Tribal Council, after considerable discussion with Dr. O'Connell approves the proposal that she has presented to the Tribal Council, but has suggested to Dr. O'Connell who has agreed, that the Tribal Health Authority should participate in the project so that the Tribe has the benefit of direct participation and contact with the Institute of Human Development and its activities on the reservation.
- BE IT RESOLVED by the Tribal Council of the White Mountain Apache Tribe that it hereby approves the early intervention demonstration project proposed by Dr. Joanne O'Connell with the understanding that the Institute for Human Development and Dr. O'Connell establish a liaison with the Tribal Health Authority Director, Ralph Bologna, so that the Tribal Council can be kept informed of the progress being made by the demonstration project and its impact on the Tribe's handicapped infants and their families.
- BE IT FURTHER RESOLVED by the Tribal Council that its approval of the foregoing proposal is based upon the information presented to it by Dr. O'Connell, the attached abstract, and the statement of the problem attached to this resolution and incorporated by reference herein.
- BE IT FURTHER RESOLVED by the Tribal Council that it wishes to extend its gratitude to Dr. O'Connell for her fine presentation to the Tribal Council and for bringing this worthy and much needed project to the White Mountain Apache people.

The foregoing resolution was on March 08, 1984 duly adopted by a vote of 10 for and 0 against by the Tribal Council of the White Mountain Apache Tribe, pursuant to authority vested in it by Article V, Section 1 (i) of the Amended Constitution and By-Laws of the Tribe, ratified by the Tribe June 27, 1958 and approved by the Secretary of the Interior on May 29, 1958, pursuant to Section 16 of the Act of June 18, 1934 (48 Stat. 984).


Chairman of the Tribal Council


Secretary of the Tribal Council

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TERRITORY OF ARIZONA
WHITE MOUNTAIN APACHE



Northern Arizona University · FLAGSTAFF, ARIZONA 86011

INSTITUTE FOR HUMAN DEVELOPMENT

C.U. BOX 5630
(602) 774-2181
(602) 523-4791

A B S T R A C T

The primary purpose of this project is to address the early intervention needs of a target population of handicapped and at-risk Apache Indian infants who are currently unserved. A thorough review of nationally existing programs for on-reservation handicapped Indian infants indicated a severe lack of a culturally-sensitive early infant program model for Native American families. This project will develop a model that focuses on three major program components: (1) a model component will be delineated for initiating and providing cooperative interdisciplinary services emphasizing education, health, and social services across several governmental levels -- community, tribal, county, state, and federal; (2) a model component focused on programs for parents with varying family circumstances and needs, as exemplified by the rural, reservation Indian family will address the issues of family and child intervention with Indian families whose cultural influences affect their understanding of their child's disability; and (3) a modification or revision of current, existing infant assessment, curricula and parent instructional techniques so that they are culturally sensitive to Native American tradition and beliefs while retaining necessary educational structure will be conducted.

The proposed model will be validated utilizing methodology appropriate for applied settings and recognized by the Joint Accreditation Commission. Longitudinal records of the developmental progress of each target infant will be maintained, comprehensive parent/caregiver interaction data will be recorded, and assessment/curricula will be validated by an Apache advisory committee of professional educators. The evaluated model will be packaged into disseminable materials for other reservation Indian groups and it is anticipated that the process of intervention that the model delineates will be replicable by other tribal entities.

The Problem:

The Institute for Human Development at Northern Arizona University has been providing services to disabled children and adults in northern Arizona for about twenty years. As a part of our experience in working with the Native American populations in northern Arizona, we have been frustrated with the insensitivity of available educational models for serving handicapped individuals. This is especially true for our services to handicapped infants and preschoolers and their families. The current available educational assessment tools and curricula do not provide for an intervention program that incorporates the traditions and influences of the Native American culture. We would like to address this problem and develop an early intervention model that is effective for interacting with Indian handicapped infants and their families.

The Objectives:

The purpose of our submission for a federally supported early intervention demonstration project is to develop a program of services to handicapped Apache infants and their families. The service component will consist of establishing services to the handicapped infants at the time they are identified as handicapped, preferably at birth, or to prevent severe delays to those infants who are identified at birth as "at-risk" for developing delays in development in the future.

An Apache paraprofessional will be trained by the project staff to initiate services to families while still in the hospital. The nature of the intervention services will be developed as a major component of the project with primary emphasis on developing intervention strategies that are sensitive to the cultural traditions of the Apache Tribe. Three major model components will be addressed by the project personnel:

1. Successful interagency delivery of services will be addressed by identifying how best to utilize resources across appropriate agencies for providing the optimum program, working with the Apache Tribe,

Developmental Disabilities, and Indian Health Service.

2. Strategies for working with Indian families in assisting them with understanding the nature of the handicapping condition of their infant, the need for early intervention to optimize the child's growth, and soliciting their participation in the infant's early intervention program will be addressed. It is intended that the input of the Indian families themselves and professional Indian service providers will be vital in outlining an effective strategy. The project staff will then systematically evaluate its effectiveness for model validation.

3. Current available infant assessment tools and curricula will be reviewed and modified to reflect vocabulary, materials, and cultural traditions in child-rearing, so that a culturally-sensitive handicapped infant intervention package can be developed and used by Apache service providers. The project staff will validate the effectiveness of this package and provide training to Apache service providers.

Project Director: Joanne C. O'Connell, Ph.D

C.U. Box 5630

Institute for Human Development

Northern Arizona University

Flagstaff, Arizona 86001