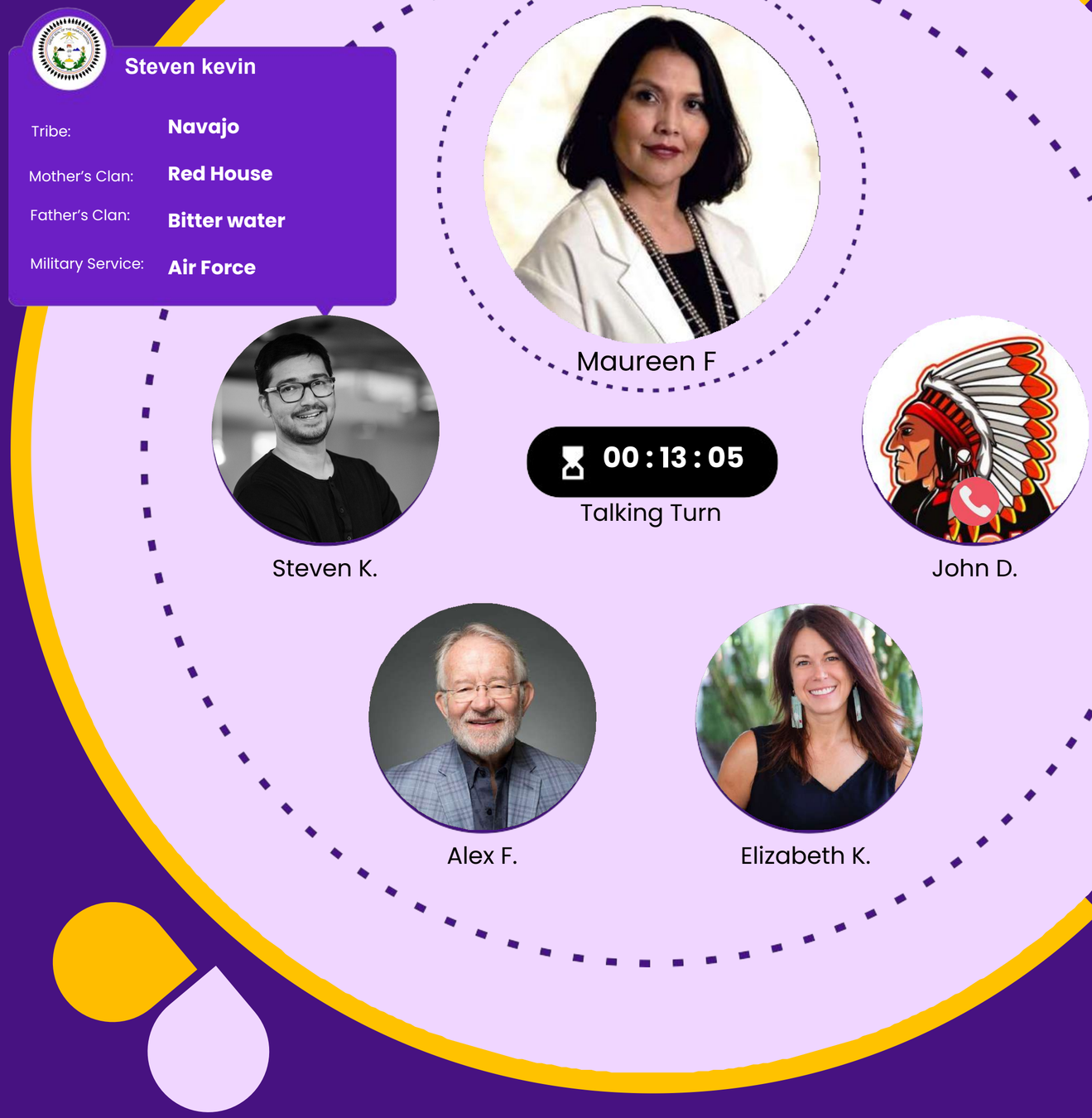
televëda

PROJECT HOZHO:

VIRTUAL TALKING CIRCLE AND STORYTELLING INTERVENTIONS

FOR NATIVE VETERAN POPULATIONS

Team Televeda



Problem Statement

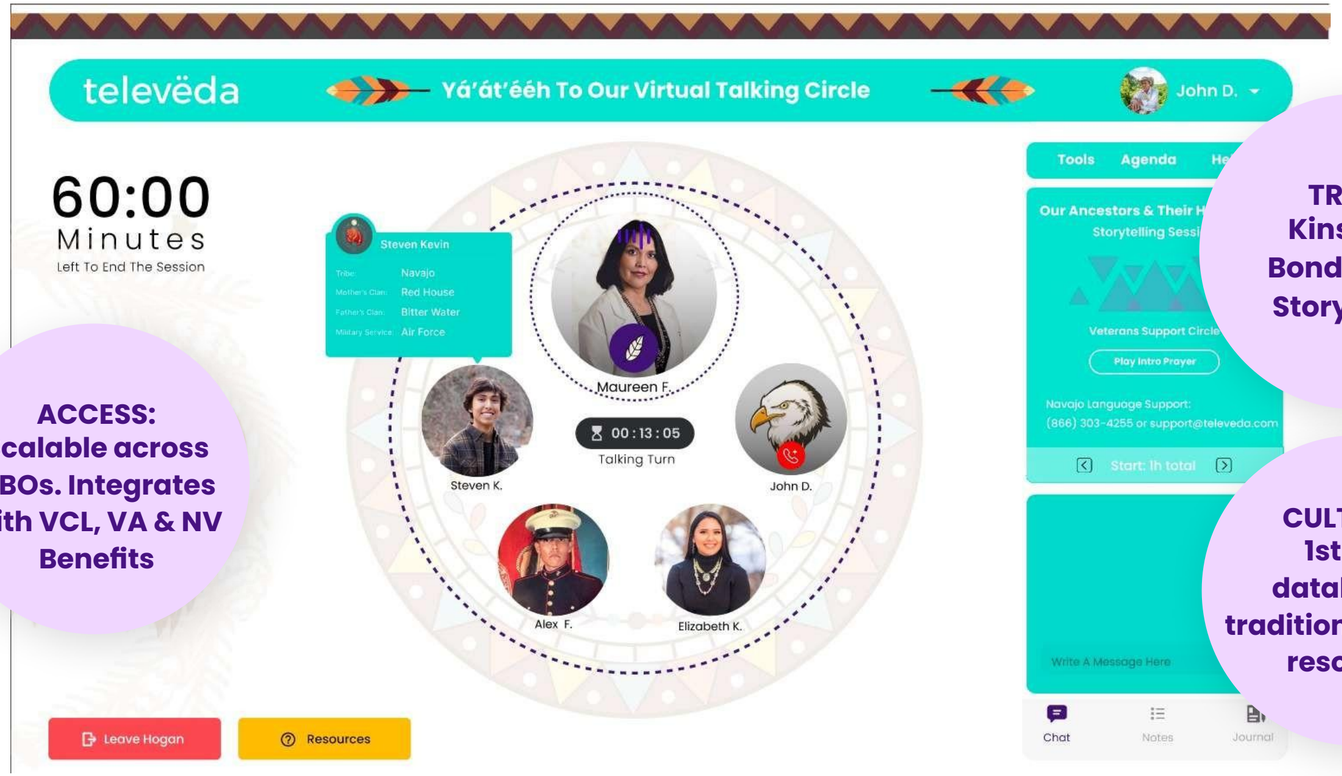
- AIANs serve in the Armed Forces 5X higher than national average.
  - In every conflict since World War 1 for over 200 years
  - 1.7% identified as AIAN in Military, but highest PTSD
  - Higher concentration of women than other groups
  - Estimated 338,000 AIAN veterans
- AIANs have a unique history, background & culture which provides a greater mental-health challenge
- No existing solution incorporates their traditional mental health practices, which are valid and preferred methods of treatment.

Native Veterans also have to deal with

Value Proposition

Prevent suicide amongst Navajo Veterans by promoting social connectedness & community healing in a culturally sensitive manner.

Improves Trust, Access & Traditional Practices

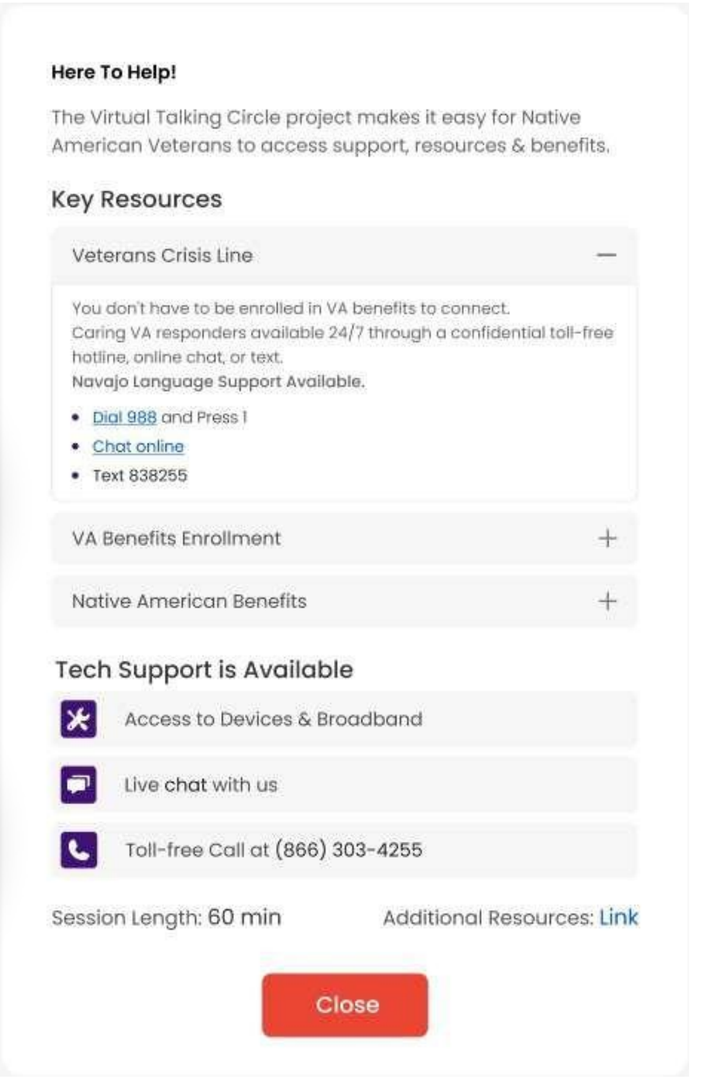


ACCESS: Scalable across CBOs. Integrates with VCL, VA & NV Benefits

TRUST: Kinship & Bonding via Storytelling

CULTURAL: 1st ever database of traditional healing resources

Virtual Talking Circle & Storytelling Interventions

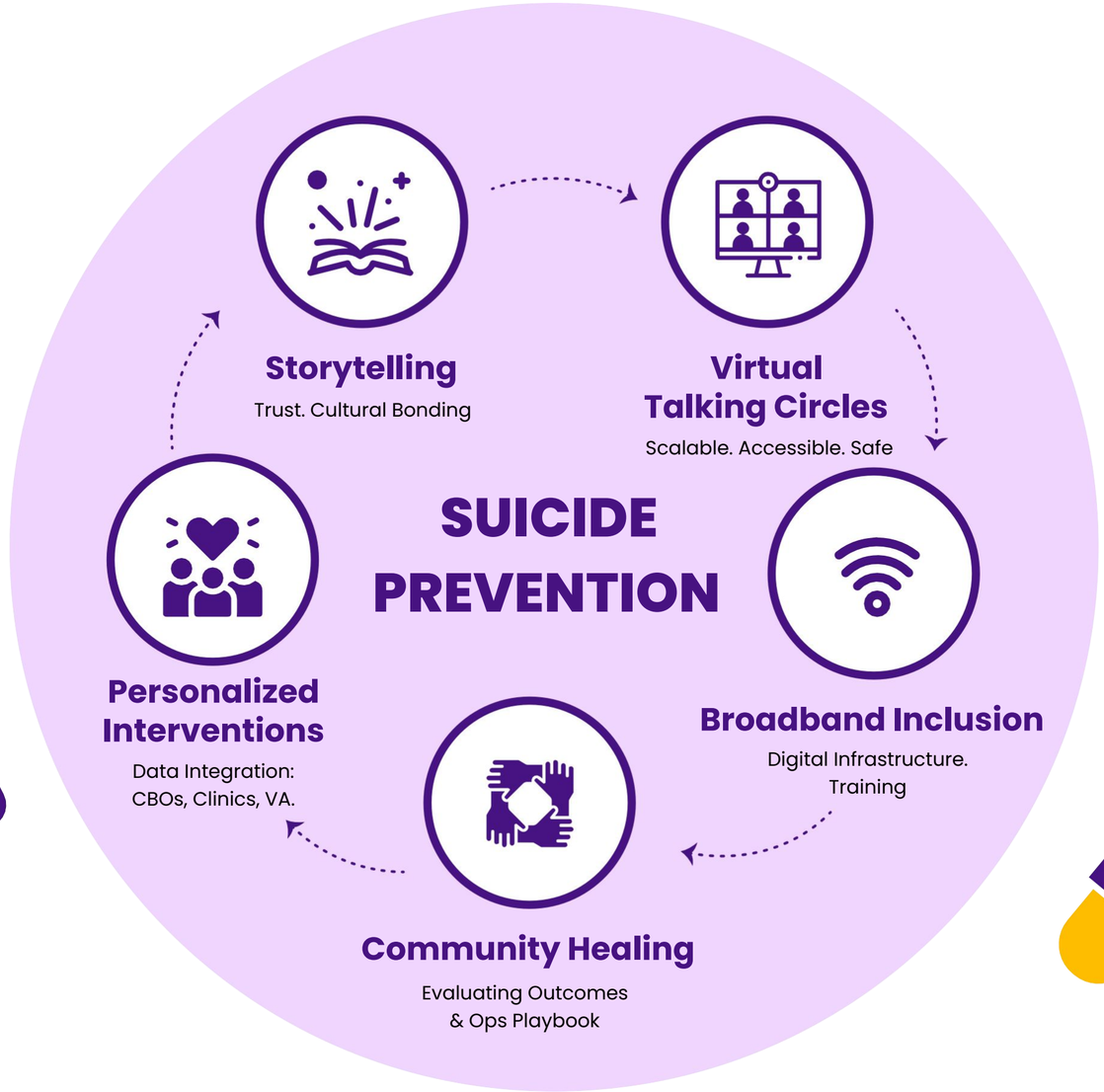


Solution Overview

PRODUCT

PLAYBOOK

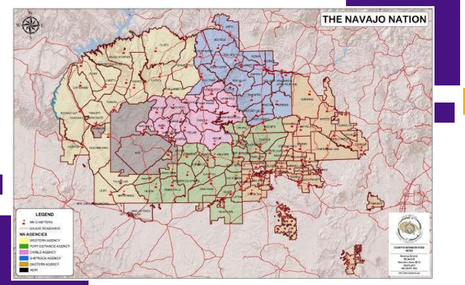
DATABASE



Target Veteran Population(s) Design

Navajo Veterans & Native Americans	• Historically marginalized. Trust must be earned. Immense pride in culture. Suffer in Silence. • Solution: Trusted-messengers (Vets & Elders) to lead the traditional Storytelling sessions. Phased roll-out.
Limited Access to Resources	• Many must travel over 100 miles to reach VA clinic. Many are not registered • Solution: Telecare is the only accessible option. Circles will spread information about VCL & Benefits. Facilitators trained for emergency interventions.
Social Isolation & Trusted Messengers	• Boredom is lethal on the Reservation. Vets prefer animal therapy vs. dealing with people. • Solution: Structured activities & socialization. Hyperlocal interventions by CBOs. No AI or data recording in Phase 1.
Accessible Technology	• Complex reasons that have prevented digital access • Solution: CBO partners lending programs via AT&T. Digital literacy training. Tech Support. Low-tech audio access (Landline, Radio partners & Podcasts). Translation services.
Inadequate Mental Health Data	• Limited data at the Tribal level which is a barrier to public-health interventions. AIANs diverse populations, not a monolith- and all data is generalized. • Solution: Product tracks utilization & engagement. Playbook serves as a system for diverse CBOs to digitize practices. Database interoperable & will integrate with relevant systems.

Televeda conducting several user-research sessions with Navajo Veterans



NN is 15% of the total NA population, covers 3 states. Phased roll-out with 10 Chapter Houses in Southwest region

Innovation from Current State

Storytelling can help reduce suicides for AIAN

IMPACT:

- Current services have failed to address disparities experienced by AIANs.
- Our research, published studies & recommendations by professionals repeatedly stress for using Traditional Practices for this population.
- Team: Dr. Madrigal has published research on healing effects of Storytelling & tested online sessions during the pandemic.

SOLUTION:

1st known opportunity for VA-ORD to research the efficacy of this type of intervention

Re-imagining Group Therapy Model

IMPACT:

- Talking-Circles not structurally different from Group Therapy (evidence-based)
- With social-care worker shortages, the group model is more scalable & sustainable
- Narrative Medicine is a new field of research. VA My Life My Story Project has seen success with social connectedness.
- Empathy driven suicide interventions (TrevorProject for LGBTQ) have seen better adoption rates.

SOLUTION:

This would be the first ever design implementation for Native Americans

Validating Community Evidence

IMPACT:

- Community-defined evidence has been used to yield positive results but may not have been measured empirically. Such evidence is particularly important among AIAN communities, and should be researched.
- One well known suicide-factor for this population has been "Historical Trauma". Yet this term is still not indexed in the Diagnostic and Statistical Manual of Mental Disorders, the authoritative guide used by professionals to diagnose mental disorders.

SOLUTION:

We have developed a thorough development plan with a rigorous testing framework.

Ethical Considerations

- **Trust**

  Working with trusted-messengers Native Veterans & Elders to facilitate Talking Circles.
  Diverse team of Veterans, Mental-Health & Native American Cultural Experts part of the project to evaluate appropriateness of Stories & Practices

- **Privacy**

  Not collecting any HIPAA info. Televeda has cleared security & privacy checks for other gov & healthcare systems.

- **Racially equitable**

  New AIAN info available to make other datasets more racially equitable

- **Culturally sensitive**

  Centralized repository will belong to the Tribes

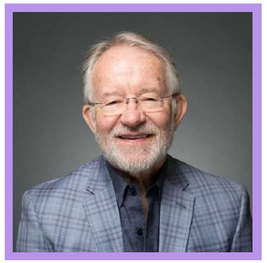
Team

Top Core Team

Shruti Gurudanti (JD, UoA)- Project Manager
Mayank Mishra (Aspen Institute)- Product R&D

Black Hills Center

Dr. Patricia Nez Henderson (Yale)- Operations & Research
Herschel (ASU)- Operations



Wayne Tormala

Veteran, Compassion Fatigue, Emmy Award-Winner

Dr. Renda Madrigal

Native American.
Instructional Design & Content

Dr. Roger Walker

Veteran, Native American.
OneSkyCenter

Broadband Projects:

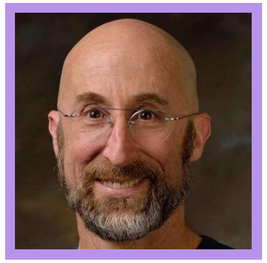
AT&T, AZ DHS (Contracted), AZ VA (Pilot)

Mental Health & HealthCare:

Winslow IHS Medical Center
CHR Team of Veterans- Paulette Yazzie, Ben Nez, Mato Henderson

Outreach &Recruitment (VSO Partners):

Southwest Navajo Veterans Organization.
Chapter President for Dilcon & Teesto Veterans Association.



Data & AI:

Prof Lyle Ungar (MIT, Stanford)- Prof at UPenn NLP work in suicide ideation.

Data & AI:

Health Verity (VA Vendor)- De-identification of Data
InData Labs (AI Consultant)- Recommendation Engine development

Development

		Year-1 Product R&D. Roll-out in Navajo Nation.	Year-2 Other tribes	Year 3-4 Data Applications
Product R&D	Integrating within Televeda. (Onboarding, Talking Circles, Data Reporting, Surveys) 8 months			
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Broadband Infrastructure Rollout:	Digital Literacy Training Lending programs with CBOs			
	Evaluation & Modifications			
	Scaling with other tribes			
	Evaluation & Modifications			
	Directory R&D			
	AI development for Recommendation Engine			
	Data Integration with EHR and Clinics			
	VA Integration			

NAVAJO NATION TRIBE → **HAPI TRIBE** → **APACHE TRIBE** → **LAKOTA WEST TRIBE**

Use of Prize Money

PHASE 1 :

(R&D):

- Product design & development of web - application.
- Integration with audio-options for data-reporting: landlines, radio, podcasts

(OPERATIONS):

- Procurement of Tablets & Broadband
- Digital Literacy training & tech-support operations
- Marketing (Recruitment & Outreach) with Veteran Service Organizations,
- Paying local instructors
- Budget for Incentives to attend

(EVALUATION):

- Budget of health and mental - health screenings & reports

PHASE 2 :

(Repeat Phase 1-Operations):

- Budget for new tribes, iterating based on each Tribe's unique culture

PHASE 3 :

- Data & AI R&D integration with VA, EHR.
- AI Applications include: Recommendation Engine. NLP.