

QUARTERLY PERFORMANCE REPORT
COVER SHEET

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CDOE

- 1. Grant Number: 90-CA 1329
- 2. Project Title: Project Takoja
- 3. Grantee Name and Address: Rural America Initiatives, RR 1, Box 1845
Rapid City, SD 57702
- 4. Telephone Number: 605-348-9924
- 5. Period of Performance: FINAL REPORT FROM 9-1-87 to 2-28-90
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- 8. Principal Investigator's Name and Telephone Number: Anne Floden
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- 10. Date of Report: 5-25-90
- 11. Report Number: (Number sequentially beginning with 1) 11
- 12. Name of Federal Project Officer: Judy Coultier

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AND NEGLECT INFORMATION

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PROJECT TAKOJA

FINAL PROGRESS REPORT

September 1, 1987 -February 28, 1990

GRANT # 90-CA-1329

The goal of Project Takoja is to develop a replicable, comprehensive, Indian teen parent model that truly increases teen parent self-sufficiency and ability to parent, and reduces child abuse and neglect.

Objectives are:

1. To develop a community assessment instrument to identify existing types and levels of services provided to and accessed by Indian teen parents, including gaps, duplication, and fragmentation in services.

2. To develop a community assessment instrument to identify potential resources to provide Indian teen parent services.

3. To develop four six-hour volunteer training packages with components for adults and youth, including training in advocacy methods.

4. To develop a replicable model that increases services by 20% to Indian teen parents within three communities by:

a. Collaboration/coordination of agencies.

b. Training of service providers and volunteers.

c. Advocacy by community members that results in resources being increased and re-allocated to enhance teen parent programs.

d. Transfer of additional existing knowledge about successful/non-successful teen parent programs to the community level.

Overview-

Rural America Initiatives, through Project Takoja (the Lakota word for Grandchildren) established a new comprehensive teen parent program in the Native American community in Rapid City, South Dakota, and through advocacy, substantially increased services in that urban community.

Project Takoja worked with five Parent Child Centers of the Oglala Sioux Tribe on the Pine Ridge Reservation to change their program so that services focused on Native American pregnant and parenting teens and were appropriately delivered. The Parent Child Centers, at one time in danger of being closed out, recently were reviewed by a national review team and were found basically in compliance.

Project Takoja also attempted to establish teen parent services at Lower Brule, and later to link that program to a teen parent program Rural America Initiatives had already established at Red Horse Lodge on the Crow Creek Reservation sixteen miles away. The Lower Brule program did not succeed, but Rural America Initiatives was able to find on-going funding for the Crow Creek program and substantially influence the direction of services provided.

In the second year of the project, a new component (perinatal coaching), involving volunteers, was introduced into the project model. The component called "Welcome Baby" has been replicated/or begun to be replicated by several sites: Cheyenne River Reservation, Crow Creek Sioux Tribe Head Start, Wagner Service Unit of the Indian Health Service, serving the Yankton Sioux Tribe, and the Oglala Sioux Tribe Early Childhood Component.

A substantial number of products were produced during Project Takoja including:

- A needs assessment instrument, designed to meet the needs of Native American communities. (Already submitted with previous reports).
- A volunteer training package. (Already submitted with previous reports).

- Research about "best practices" summarized in an easily understood summary.

(Already submitted with previous reports.)

- A program model that fits needs of Native American teen parents and meets the objectives of Project Takoja. (Summary of the model is enclosed.)

Through supplemental funding, Project Takoja has produced:

- Lakota Learning Activities, a culturally relevant supplement to the Lincoln Pre-School curriculum (used in a number of Head Start programs.) Lakota Learning Activities provides activities for both the Parent Child Centers and the Head Start programs of the Oglala Sioux Tribe. (Curriculum is enclosed.)

- Parenting curriculum for parents of all ages through Project Takoja. (The four hundred page facilitator's guide is available on request.)

I. MAJOR ACTIVITIES AND ACCOMPLISHMENTS DURING THE PROJECT (Categorized by objectives):

1. To develop a community assessment instrument to identify existing types and levels of services provided to and accessed by Indian teen parents, including gaps, duplication, and fragmentation in services.

2. To develop a community assessment instrument to identify potential resources to provide Indian teen parent services.

The instrument, previously submitted, was used in Rapid City, Pine Ridge, and Lower Brule to begin the process of establishing services. The instrument is based on other national models, but takes into account special conditions in Native American communities.

3. To develop four six-hour volunteer training packages with components for adults and youth, including training in advocacy methods.

Project Takoja developed two training packages. The first was designed to train volunteers to provide general services. The second was specifically designed to train volunteers to provide perinatal coaching services. The second model was based on perinatal coaching training provided nationwide, but was adapted to meet the needs of the Native American population in South Dakota. (Copies have already been submitted.)

4. To develop a replicable model that increases services by 20% to Indian teen parents within three communities by:

- a. Collaboration/coordination of agencies.
- b. Training of service providers and volunteers.
- c. Advocacy by community members that results in resources being increased and re-allocated to enhance teen parent programs.
- d. Transfer of additional existing knowledge about successful/non-successful teen parent programs to the community level.

The program services model developed through Project Takoja is described in the attachments.

The model as implemented in Rapid City resulted in a large number of additional resources being provided for teen parents, in addition to those provided directly through Project Takoja. For example,

- West River Community Health, as a direct result of the program, established a position called a Teen Parent Advocate, to be funded by the South Dakota Department of Health on a long-term basis.

- An occupational child care program has been established by the Western Dakota Vocational Technical Institute within the Rapid City School System to provide parenting training, for high school credit for seventy students, and to provide child care, through a lab for twenty babies of teen parents. The concept was originally rejected by the Rapid City School District. The Project Takoja director provided testimony at the Board meeting when the plan was approved.

- The Rapid City School Board has approved, in concept, the Rapid City Coalition for the Prevention of Dropouts Plan. The Project Takoja Director has participated in the Coalition since last June, and with one other person, presented the plan to the School Board. The plan includes the following recommendations that could assist teen parents:

- Alternative education, both out-of school, and in-school,
- Flexible scheduling that could allow teen parents to complete school even if it takes extra years,

- An early childhood intervention program beginning at pregnancy for all at-risk families.

- The Chamber of Commerce has sponsored a series of meetings to attempt to establish a Teen Parenting and Pregnancy Prevention Network in Rapid City. The Project Takoja Director has served as chair of the effort.

The Rapid City School District, including Western Dakota Vocational Technical Institute, and the South Dakota Job Service have participated two years in the Project Takoja summer program. The school district served both years as administrators of small grants from state offices to enhance the program, and Job Service worked intensively with Project Takoja staff to assure that teen parents received an opportunity to participate in the Summer Employment Program. This summer, the Rapid City School District will also coordinate with Rural America Initiatives to provide a summer school class specifically for teen parents titled "Career Decisions."

The South Dakota Departments of Labor, Education (through the Equal Educational Opportunities Office), Vocational Education, and Health have contributed either cash or resources to Native American teen parent services in Rapid City

The Robert Wood Johnson Foundation has made a preliminary commitment to fund the Rapid City Project Takoja in the fall. In the interim the program has been funded by the South Dakota Department of Education, Rural America Initiatives general fund, and the South Dakota Department of Vocational Education.

On the Pine Ridge Reservation, Project Takoja focused on utilizing existing resources of the Oglala Sioux Tribe Early Childhood Component to serve teen parents. This population was previously unserved. At this time, through the intervention of the National Indian Head Start program staff and with technical assistance from Rural America Initiatives, the Oglala Sioux Tribe Early Childhood Component provides appropriate services to one hundred teen parents per year.

On the Crow Creek Reservation, Project Takoja has assisted Red Horse Lodge to continue a teen parent program established by Rural America Initiatives in 1986. Rural America Initiatives, through Project Takoja accessed funds from the Bush Foundation to continue teen parent services as well as to develop culturally relevant Options Counseling curriculum.

Soon after the start of Project Takoja, staff realized that a major immediate need was for culturally relevant parenting curriculum. After a period of advocacy, Christian Children's Fund, an international service organization for children, funded Rural America Initiatives to develop culturally relevant parenting curriculum through Project Tetakuya and to train Christian Children's Fund programs regionally (South Dakota, Montana, and Nebraska) to provide parent classes. Recently, the Office of Substance Abuse Prevention has notified Rural America Initiatives that their review committee has voted (19-0) to fund an on-going parent project for the next five years and that an official grant award may be made in the next month.

II. PROBLEMS:

A major problem throughout the project has been understaffing, for a project with this scope.

III. SIGNIFICANT FINDINGS AND EVENTS:

Rural America Initiatives has discovered that a minimal teen parent service program to serve up to fifty families can be established in most Native America communities for as little as \$25,000 per year if personnel are truly dedicated to their jobs. Higher spending levels can improve services and are necessary if the community does not have a wide range of resources that can be accessed with the help of an advocate.

Rural America Initiatives ability to establish and maintain teen parent services in the Dakota's has been attributed to several factors:

- Effective use of funding, primarily federal, to develop and establish the initial program,
- Choosing coordinating organizations that have demonstrated commitment to provide services; whose organizational goals encompass the providing of services to this population,
- Choosing coordinating organizations that have established capabilities and resources including the ability to supervise program staff,
- Establishing the relationship between the coordinating organization and Rural America Initiatives through a written, negotiated contract,
- Working with the coordinating organization from the very beginning of program planning and assuring that the program meets their organizational and staff needs as well as service needs,
- Assuring that the program is based on real community needs and is designed carefully by the community, to address these needs,
- Assuring that the program meets community cultural needs,

- Transferring state of the art information and processes, as well as Rural America Initiatives expertise in program development to the community to use in designing and maintaining their own program,
- Expecting the coordinating organization to "invest" their own resources in the program, thus enhancing their feeling of ownership,
- Providing needed training to staff to assure that they have the skills to perpetuate the program,
- Gradually turning more and more responsibilities over to the coordinating agency,
- Making maximum use of resources from several sources, for example, Project Takoja's Teen Parent Camp was co-sponsored by two organizations, but utilized resources from four state agencies, two federal agencies, and numerous community organizations as well.
- Giving the coordinating agency full recognition and credit for program success.

An evaluation intensive project is needed to determine long-term effects of the model on teen families.

IV. DISSEMINATION ACTIVITIES The Project Takoja model has been disseminated through a number of statewide publications and conferences. The most significant have been:

- Children Today.
- The National Organization for Adolescent Pregnancy Prevention Newsletter.
- The Indian Youth 2000 Coalition Conference,
- City's Kids, a National Dissemination Conference.
- South Dakota Department of Education meetings.

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ATTACHMENTS

PROJECT TAKOJA PROGRAM MODEL

LAKOTA LEARNING ACTIVITIES

**(Because of the length one copy only is being submitted of this
attachment)**

PROJECT TAKOJA MODEL

(The following project model has been fully implemented in the Rapid City site. Other communities involved with Project Takoja have made community adaptations.)

Project Takoja is based on the four traditional Lakota values: generosity, respect, wisdom, and courage.

The program promotes generosity by giving of material goods to promote health such as baby items and baby carriers. Project Takoja volunteers and the Tiospaye (extended family) give of their time.

Project Takoja teaches respect to the entire family through the carrying out of traditional and contemporary practices to assure the health and well-being of mother and baby.

Project Takoja helps young families begin the path to wisdom by teaching appropriate health and parenting practices. Parents will learn from traditional elders as well as through educational classes.

Finally, the Takoja program teaches young families the courage to practice healthy life styles and to say no to elements that can harm the family.

Program goals are:

To prevent pregnancy until parents are prepared to care for all needs of their children,

To assure the delivery of healthy Native American babies.

To safeguard the health of the Native American mother during pregnancy and delivery.

To safeguard the health of Native American infants through the first year of life (a particularly vulnerable time.)

To gather data re: effectiveness, including cost-effectiveness of the Rural America Initiatives preventive program, in order to assure continuation of services through institutions that provide on-going services.

Yearly objectives include:

Ninety percent of Project Takoja Moms who enter the program by the second tri-semester of pregnancy will attend no less than six pre-natal appointments during pregnancy.

By their first birthday, no less than ninety percent of Project Takoja babies and their mothers will attend no less than three well-baby clinics/visits.

Babies who are born with birth defects or diseases will be identified and referred to specialized service earlier than control group babies.

Project Takoja babies will require less emergency care in the first year of birth than control group babies.

Ninety percent of Takoja babies will be immunized on schedule.

Ninety percent of Project Takoja mothers will demonstrate positive attitudes toward parenting their babies as documented by project modified assessment instruments.

Eighty percent of volunteers will demonstrate a 10% positive attitudinal change after initial training and increase their service provision skills by twenty percent as measured by pre- and post-tests and coordinator evaluation after training and internship.

Objectives for All Participants:

After completing training, 90% of participating pregnant mothers will demonstrate 80% competency to provide healthy infant care as well as to safeguard their own health, as demonstrated by performance on a final written test and the degree to which they keep regular pre-natal and post-natal health appointments.

After completing training, 90% of participating parents will demonstrate 80% competency to provide positive parenting, as demonstrated by performance on a final written test.

Description of Parent Services-Services for Both Young Males/Females:

The Project Takoja program will provide a prevention component to encourage young Native Americans to wait to have their babies until the time when they are prepared to meet the need of that baby. This educational component will be provided as a general educational forum for high school students, for parents who are referred to Project Takoja services but whose pregnancy tests are negative, and to parents who are not prepared for a second or future pregnancy. The educational component will provide contemporary information and will offer traditional practices through the assistance of community elders. For example, traditional Lakota women practiced a form of natural birth control using a beaded "calendar" through which they kept track of their "safe" and "unsafe" days. In addition, parents, as a natural form of birth control, slept with their infant between them, up until the child was semi-self-sufficient. A traditional Lakota rite called Ishna Ta Awi Cha Lowan (Preparing a Girl for Womanhood) included purification ceremonies as well as preparation for all the duties of motherhood and womanhood. Community elders will be available to help young people practice these kind of traditional ways and to serve as advocates for responsible parenthood;

Services for Pregnant Mothers and Parents:

Project Takoja volunteers will help identify possible pregnant first time mothers and refer them to IHS for free pregnancy testing. Volunteers will refer clients to Project Takoja services if clients do not make appointments for pregnancy tests within a week. Indian Health Services will help other clients and refer them into the Project Takoja system.

Mothers whose pregnancy tests are negative but who are at-risk of delivering an unhealthy baby or who are not prepared to meet needs of a baby will be provided an educational forum about the importance of choosing the appropriate and responsible time to become pregnant. (See prevention component above).

Mothers who test positive, will receive their first Project Takoja home visit to introduce the family to program services and to help them enter pre-natal care in their first trimester.

These services will be offered in the traditional spirit of the past in which extended family members, the Tiospaye, supported and guided young people in need.

The family will attend educational sessions to teach the importance of pre-natal care and abstinence from alcohol, drug, and tobacco use. Families will sign commitment cards pledging abstinence. At the appropriate times, they will be given photographs of the ultrasound of their baby and thus will have a graphic, visual reminder that they are responsible for protecting a little, real individual, with the mother's womb. Native American elders will be available to offer purification rites, including the sweat bath and to model the traditional value of respect for self.

The family will also attend educational sessions to help them prepare for birth and early infant care. Elders will help develop materials used for the sessions as well as to participate in the teaching. Information will be presented about the traditions pregnant mothers and their families carried out to safeguard their babies health up until delivery, about the significance of the traditional practices of breastfeeding and the naming ceremony, about the constant cuddling, singing and talking a baby received from birth on, about swaddling, and massage and about other traditional practices. In addition, first-time parents will be able to tour the hospital to prepare for delivery and will be given information about their option of "rooming in."

(O'Connor's work in Nashville demonstrates a very significant decrease in major breakdown in parent-child interaction (abuse, neglect, failure-to-thrive and abandonment) in approximately 130 women who cared for their babies in rooming-in after delivery compared to a similar group whose babies were cared for in the regular full-term nursery. Her studies reveal approximately 7% breakdown in nonrooming-in group and less than 1% in the rooming-in group. (Contact person is Dr. Susan O'Connor, Department of Pediatrics, Metropolitan Nashville General Hospital, 72, Hermitage Avenue, Nashville, TN 37210.)

Clients who attend educational sessions and keep regular pre-natal appointments will be rewarded through the Project Takoja incentive system. (The business community will offer small rewards like baby items and food items to parents presenting special coupons that they receive when they keep their appointments and attend sessions. Thus the entire community, including non-Indians will be encouraged to share in the traditional practice of generosity and to support the healthy birth of the wakan heja.)

The second Project Takoja home visit will take place the month prior to delivery. The purpose of this will be to continue to prepare the family for delivery, to provide individualized information about hospital procedures, help the family

make specific plan for baby care after delivery, and reinforce continued use of pre-natal care and abstinence from drugs/ alcohol and tobacco.

Volunteers will be available at birth if families need support during this time.

Project Takoja volunteers will make a third personal visit as soon after birth as possible-in the hospital. The purpose of the visit is to promote early parent child bonding, to demonstrate appropriate infant stimulation techniques, communication skills, and parenting skills, to help the parent plan for her return home, and to begin to assess on-going needs the family may have. Every mother will be given a traditional baby carrier to take home to promote on-going close contact and bonding.

The traditional naming ceremony was usually held four days after a child was born as a sign of respect for the child. Usually a respected elder, often a grandfather or grandmother, led the ceremony. After the ceremony, the family honored the child by giving away gifts and preparing a feast for the village. In our contemporary version, community elders will be available to help families hold a naming ceremony and the Project Takoja "family" of staff and parents will help celebrate the joyous occasion of the arrival of the wakan heja.

The fourth Project Takoja home visit will take place within ten days of birth, in the home. The purpose is to help the mother and other family members practice appropriate infant stimulation techniques and provide information about accessing needed family resources. In addition, the volunteer will provide support to the family in their provision of good infant health care and as appropriate support the practice of breastfeeding and use of the baby carrier. Volunteers will also encourage parents to keep regular post-natal health appointments for both mothers and babies as well as to get their babies immunized on schedule through use of the coupon system. Through regular access to health care, babies who do develop diseases or health problems, will be identified early so they can be referred to more intensive care.

On-going support groups and the Project Tetakuya parenting class will be held to provide a safe place for parents to share their joys and concerns. Parents will be taught basic parenting skills based on the four traditional Lakota values, and ways to identify health problems in infants if they occur and how to receive early help. Parents will also be encouraged to delay a second pregnancy until they can fully meet the needs of a larger family. (See prevention component above.)

The fifth Project Takoja home visit will occur within six weeks of birth. The purpose of the visit is to reinforce appropriate parenting practices and refer family to on-going services provided by other community agencies and organizations.

Additional visits will be made by volunteers as needed through the first year of life to assure the on-going health of the wakan heja.

The Project Takoja program will be conducted with the help of specially trained community volunteers, (mostly Native American). Training for these volunteers will be adapted from perinatal coaching models used nation-wide, but will be adapted to make the training more culturally relevant. Supplemental materials will be developed to address problems unique to the Native American community.

Examples of unique problem areas to be addressed in volunteer training include:

- Fetal Alcohol Syndrome, and other problems caused by the use by a pregnant mother of drugs and alcohol, (Indian substance abuse rates are higher than those for the general population.)

- Problems caused by co-dependency or the alcohol/drug use of family members.
- Potential for anemia in the mother, because of poor eating habits, or poor diet caused by poverty.
- Other poverty-caused problems such as homeless conditions, lack of access to substitute child care, lack of knowledge of positive parenting, and general poor living conditions. (The number of Indian families who exist at or below the poverty level is substantially higher than the general population.)
- Extended Family Issues-Recognition that extended family members often are primary caretakers of infants-thus services often need to be directed toward these persons instead of the mother/father.
- Knowledge of resources specific to Indian communities.

If non-Indian volunteers are recruited, as anticipated, cross-cultural training may be needed to better facilitate volunteer-client relationships.

A special summer component is held each year and includes the following activities:

1. Nine week employment program through the cooperation of the Job Training Partnership Act Summer Youth Employment Program to help teens explore potential career choices in-depth as well as to develop job skills.

2. Career Decisions, a one-half credit class offered in conjunction with the employment program. (The class is an established part of the Rapid City School curriculum that is usually offered during the school year.)

"This course will take students through the eighteen competencies of the STEP curriculum. These competencies are designed to help students acquire and keep a job." (Rapid City School District course descriptions.)

3. Life management class for two weeks in July. This class will utilize culturally relevant curriculum, developed by Rural America Initiatives to teach planning, goal-setting, decision-making, nutrition, health, budget, and homemaking skills.

4. Activities to promote exploration of non-traditional careers, including field trips, special resource role models, experiential activities and classroom experience during the month of August.

Teen parents will meet weekly for no less than three hours per week (12 hours total) to explore, through the use of selected portions of the Choices and Challenges, curriculum and will develop a career/life plan. Additional special events will include:

Week One-Presentation by panel of Non-Traditional Role models/Equity workshop.

Weeks Two/Three-Teens will interview/shadow role models in non-traditional careers from the community.

Week Four-Teens will go to Western Dakota Vocational Technical Institute to learn about vocational training that can result in non-traditional careers and that promote self-sufficiency (for example the proposed Occupational Child Care course).

Throughout the entire month of August individual counseling and services will be provided to encourage every teen parent to explore non-traditional careers and to participate in the educational system in the fall. Limited child care and transportation will be provided to support teen parents participation in the project.

Individualized services and referrals will be provided throughout the entire summer to:

Prepare each teen parent for return to school, for entry into vo-tech/or special child care program at Central or other educational services.

Develop individualized career/life plans that maximize their opportunities as Native American single parents.