

# The Rural Human Services Systems Project: From Need to Reality

A Preliminary History of the Program

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August 2003

## Dedication

*This report is dedicated to the memory of beloved elders Nina and Pete Olson who helped guide the program founders. Nina, passionate about Aleut language and culture, was an active member of the AFN Sobriety Movement. Pete provided eloquent testimony to the UA Board of Regents when they were deciding to adopt RHS as an academic program. Both believed strongly that RHS offered a new approach to building healthier families and communities.*

## Preface

This history of the RHS program was developed with the immense help of many people who have been involved in RHS at various stages of its development. The participants were incredibly generous with their time and energy – sharing memories, ideas, and archival materials that have helped me to reconstruct the very early years of the RHS program.

I consider this history merely a beginning. RHS owes its existence to the efforts of a huge number of people. A complete history of the program should include the memories of each and every person who has had a say in the development of the program. However, the constraints of time and geography have not made such a comprehensive process possible. My hope in writing this history is that those people who do not see their memories and experiences represented here will be inspired to write them down and add them to this document. I hope that this will be a living document that will act to help the founders and participants in RHS to write their own history.

The process of writing this preliminary history has been wonderful for me. Many thanks to all of the people who shared their stories with me. I have been incredibly moved by the commitment of everyone involved with RHS – from the students who got involved with human service work because of their commitment to making a difference in their communities to the University professionals who dedicated themselves to developing a program that could make real change in a system they recognized as inappropriate to serve the people with whom they had been living and working for many years.

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The Rural Human Services Systems Project (RHS) began its life in 1989 as an idea germinated at a conference of rural human service providers, trainers, and university instructors. Almost everyone involved in mental health treatment in rural Alaska had, by the late 1980s, become all too familiar with the inability of the system, as it then functioned, to meet the cultural, treatment, and geographic needs of rural Alaska Native peoples. The old system relied on well credentialed, but most often non-Native, and itinerant treatment providers who had huge geographic areas to serve. The providers working in Native communities very often did not have the cultural knowledge to work with the village people effectively. And the itinerant nature of their jobs meant not only were they not often there during a crisis, they also never had the chance to spend enough time in a community to gain the necessary culture knowledge. The turnover rate for these non-Native professionals was incredibly high – adding to the lack of connection between providers and the people whom they were trying to help through difficult time and sensitive issues. It was a system that was not effective in retaining providers or in meeting the needs of rural Alaska Native people working through issues of suicide, alcoholism, drug abuse, and the many other mental health issues all communities face.

As of 2000 the program had graduated 136 trained rural human service providers who work in 88 communities around the state of Alaska (Schichnes p.7). RHS has also succeeded in changing the entire rural human services system in the state simply by flooding the system with graduates of the certificate program who are grounded in their Native cultures, well-educated in

Western treatment methods, and know how to combine the two system to best meet the needs of their communities.

The Rural Human Services Systems Project owes its existence to vision and determination of many people in the Alaska rural human services community. The program continues to thrive because the vision and determination shown by the founders has continued through all those involved with the program. The themes of group work, vision, and dedication run through the entire history of the program from its beginnings at a conference in 1989 to its present state as a well-established and respected program at the University of Alaska's College of Rural Alaska - Interior Aleutians campus.

As with many great ideas, the concept of the RHS cannot be credited to any one person at any one time. The ideas embedded in RHS were discussed among providers, university faculty, and the wider Alaska Native community for many years prior to its creation. RHS grew out of the frustration many people felt about the state of human services in rural Alaska and their acknowledgement that the system needed to change in order to become effective for the people it was meant to help. RHS was an attempt to remedy a variety of systemic problems in human service delivery in Alaska.

### **Early Efforts for Change**

A 1988 Pulitzer Prize-winning series, "A People in Peril," in the Anchorage Daily News chronicled the state of mental health in rural Alaska. Through both stark statistics and personal stories the series drove home, for many Alaskans, the painfully high cost of alcohol, drug abuse, suicide, and violence to rural Native villages. But, the stories and statistics presented in the series were not news to those who lived and worked in rural Alaska – especially those who worked in the human services field.

Two of the articles specifically mention the need for changes in the way training for human service providers was done in the state. In "Solutions must be found at local level," written by then Alaska Federation of Natives president Janie Leask, she notes that one of the important steps in reversing alcoholism and suicide in villages would be to "provide funding for personal and academic counseling programs for rural students." In an editorial piece by one of the Daily News journalists, "Help is needed for those on road to sobriety," the author again calls for a counseling program designed for rural communities: "Relatives and community members need access to basic, village-oriented counseling programs – programs for those with drinking problems, and programs for potential leaders who could develop counseling skills."

While the People in Peril series brought the issues of alcoholism and suicide and the need for improved counseling programs to the forefront of public thought, many people who had been working in the field were already well-aware of the issues and had been formulating their own responses to them for many years. Larry Roberts, who spent several years training counselors to work in their villages and was involved in the early planning for RHS, remembers what it was like for the counselors he worked with in the early 1980's. "They were trying to do something good. They were burning out, getting blamed for things in the villages, and they didn't have the appropriate training." In addition, many of the counselors got involved in human services because of their own recovery experiences – this personal history increased their need for personal growth and support.

In 1982 a group of directors of rural mental health centers wrote a position paper outlining the reasons that the current service model was not working. This group of directors included Nettie Scott, who was one of the authors of the original RHS grant; Susan Soule who, through her position at the DMHDD was able to secure funding for the RHS grants and program; and several other people who lent their experience and expertise to the founding of the RHSCP.

Laurie Marum, the first faculty member of the RHSCP, recalled her frustration with the ineffectiveness of the training programs available for counselors when she was a Village Alcohol Counselor Trainer in Bethel from 1983-1987. Along with her co-workers in Bethel Louie Andre, Fred Peete, Alice Abraham, and Adolph Lewis and, very importantly, many elders in the Bethel region, Laurie began to revise the curriculum and style of teaching used to train village alcohol counselors.

Susan Soule and Barbara Minton used a grant from the Human Resources Development department to take a closer look at what mental health meant to rural Alaska Native people. They conducted an assessment of mental health strengths and weakness in two Eskimo villages. Their hope was that, with more information about these strengths, weakness, and perceptions of mental health among rural Alaska Native people, better mental health provider training and programs could be created.

### **Rural Mental Health Training Conference – Anchorage 1989**

To conclude their research, Susan and Barb held the Rural Mental Health Training Conference in Anchorage in March 1989. The focus of the conference was the need to develop mental health human services at the village level and to respond to the training needs of rural human service providers in an integrated way. It is this meeting that is widely acknowledged as the place at which the idea for RHSCP was born.

The conference gave rural human service providers an opportunity to talk about their work – both the professional and personal pressures they faced, what they felt they needed from the State to better do their jobs, and the kind of training they thought would most benefit them and their communities. By including people from the entire system of human services – village providers, university personnel, trainers, state or federal employees, and treatment providers – participants

were able to examine and discuss the entire system and develop solutions that would address systemic issues rather than just changing one small part of the system.

The kinds of discussions the participants were having made it clear that a program like RHSCP was much-needed and that people had been thinking hard about these issues for some time. Participant discussions were divided into three sections: Village needs and issues, Training needs of rural human service providers, and issues within the system as a whole.

Participants' comments about the ability to build a human service system at the village level were very positive. They had specific suggestions for how such a system should be designed for village Alaska. First, the needs of individual villages needed to be assessed and the cultural background, spiritual beliefs, and traditional values of each village considered. Participants also stressed the importance of emphasizing community development and wellness by providing non-threatening healing activities. Other points raised included the need for community leaders to set good examples by "helping themselves, their families and their community become healthy and proud again" (Soule, Minton, and DeMars p.4). Participants stressed that the village assessments must be done at the village level using trained village healers (ibid p.4).

Training for rural human services providers was a very important topic of conversation. Although participants might not have realized it at the time, their comments and suggestions formed the basis for the RHSCP. Participants stressed that village workers should be educated by trainers who resided in their region. This would assure the attention to cultural values and community history stressed above. Specific topics should include basic counseling, diagnosis, assessment of major mental disorders, and suicide risk (Soule, Minton, DeMars p.5). Based on the many suggestions offered by participants, it is clear that participants in this discussion were very familiar with the roles village human service providers played in villages and the kinds of training that would help them to do their jobs better.

Another key set of suggestions was that the training for human service providers must be part of a career track and must offer credentials to students. During a panel devoted to rural mental health professionals, a key suggestion for human services training was made to model the new program on the already successful Community Health Aide program [*the role of the CHA program in the development of RHS will be discussed later*] (Soule, Minton, DeMars p.5).

Another panel, made up of University and other trainers, were able to provide conference participants with many examples of training programs they had tried in their communities. Suggestions for possible models for the new training program included the State Office of Alcohol and Drug Abuse training program; a program used by SEARHC that used video and audio conferencing as well as on site instruction to train their human service providers; and a model following the McGlaughlin Certificate Program which provides training in basic skills of human services and was being used by UA. Other panelists discussed the successes they had with distance-delivery courses and the difficulty of getting a flexible program through the UA system (Soule, Minton, DeMars p.7).

The Director of the Interior Campus in the College of Rural Alaska (at UAF) said she saw enthusiasm from many players in the Interior and stated that she needed the assistance of the mental health workers to develop and implement training programs. Her enthusiasm and positive outlook on the potential for this new program was very much appreciated when, eventually, RHS was placed under her department at UAF (Soule, Minton, DeMars p.7).

The second day of the conference saw the participants starting to solidify their visions. Participants were divided into three groups. One group discussed the necessary curriculum for a new rural human services training program. Another group focused on how they could go about developing this new training program. A third group discussed systemic problems within the current system and how providers and the State could remedy those problems.

The Curriculum group outlined 10 courses they felt should be required in a human services training program:

1. Introduction to Social Welfare and Public Entitlement
2. Basic Communication Skills
3. Substance Abuse as a Contemporary Problem
4. Ethics and the Law
5. Case Management – Referral, Networking
6. Mental Illness – What is it?
7. Interpersonal Violence
8. Self Care
9. Community Development
10. Crisis Intervention

It is a testament to the level of discussion and cooperative planning eventually undertaken by the RHS developers that many of these same courses are part of the training program. Clearly, these are the issues of most concern to human service providers in rural Alaska.

The group discussing the development of the training program also came away with some concrete ideas about how best to design and develop such a program. They envisioned beginning the program as a series of workshops that would lead to a certificate or would provide continuing education credits to participants. Courses leading to an AA or BA degree were considered critical because people without appropriate credentialing cannot compete for jobs in rural Alaska. They envisioned these workshops as engaging potential workers at the community level and identifying those who wish to pursue advance education. They stressed that those who were committed to furthering their education should have the opportunity to do so. A key component to this training program was seen as cooperation between the University system and the State DMHDD and SOADA and coordination between the three branches of UA. In the end, the certificate program of RHS started without the preparatory workshops initially proposed. But, this chance for potential course developers and teachers to brainstorm about how they could put together a program that met the needs outlined at the conference gave the group the jumpstart necessary to start the full

program within 3 years of this initial discussion. The group went on to formulate a position statement and to recommend that the DMHDD commit funding to permit a working group to continue towards the goals outlined above.

Although the conference lasted only 2 days, the repercussions of the ideas formulated and plans laid out are still in evidence in the success of the RHS program. Laurie Marum recalls that there was “nothing new at the meeting – it just distilled what people knew was out there.” However, it seemed that the timing was just right. Susan Soule had moved to a position at the State Division of Mental Health and Developmental Disabilities (DMHDD). Her new job put her in a position to advocate for and work to secure funds for the new program that was forming.

### **RHS Emerges**

RHS actually works on the human services system in Alaska in two ways. First, through grant funding from the state Department of Health and Human Service – Division of Mental Health and Developmental Disabilities, rural human services agencies are able to hire more village-based counselors. And, also through the grant funds, those counselors are required to attend the training program that was developed to ensure that providers could meet the mental health, cultural, and community development needs of rural Alaska.

The challenge of developing this entirely new way of training rural human service providers seems to have been the most complex part of the development of RHS. At the Rural Mental Health Training Conference, a group of participants representing the University of Alaska’s three campuses agreed to take the lead in developing the fledgling training program. The group included Laurie Marum and Nettie Scott who were both instrumental in getting the training program off the ground. As non-Natives it was extremely important to those in the University committee to ensure that, in reality, it was the Native providers and other members of the Native community who took the lead in developing the content and structure of the program. The high priority placed on the

need for a training program that would lead to a certificate and further education opportunities made the dedicated work of the university committee – who could help navigate the bureaucracy of the UA system – extremely important.

After the meeting Laurie Marum, Nettie Scott, and Robert Heasely submitted a grant proposal to the DMHDD that would allow them to work with rural human services providers to design and develop a training program that would address the educational needs of rural human service providers and the treatment needs of their clients. The initial grant was written to provide the three authors the opportunity of a planning year during which they could go directly to the providers and design a training program that would address their needs.

The first struggle for the new program was to find a “home” within the University of Alaska system. Laurie Marum and Nettie Scott originally thought “it would be great to create a program that would be available throughout Alaska and that all three campuses could administer” (Marum) However, the reality of institutional life dictated that one campus be the sponsor of the program – the collaborative model of three campuses sharing the program just wasn’t realistic. Gerald Mohatt, then Dean of the College of Rural Alaska (CRA) was enthusiastic about the new program and agreed to house it in CRA. The CRA seemed like a good fit because of the college’s commitment to rural Alaska education programs.

### **Developing the Curriculum**

The challenge in developing a curriculum for the new program lay in the need to make it “acceptable to various parties, including rural human service providers, the State DMHDD, University curriculum committees, rural human service agencies, and Native corporations” (Hampton p.1). In fact, the whole program – from design and delivery to organization and management would also need to be acceptable to the same diverse groups. In order to ensure that as many requirements as possible were met, the University committee members involved in

development relied upon collaborative planning methods. The committee held a series of meetings to involve Native providers, potential consumers, the directors of rural mental health programs, and elders in the development of every aspect of the emerging RHS program.

### *The Coordinating Council*

In order to ensure that the systemic problems already embedded in the Western-based human service system were not repeated in the new RHS program, the first task undertaken by the University group and the newly hired Project Coordinator David West was to form a Coordinating Committee made up of Alaska Native rural human service providers. Laurie Marum sent letters to Native health agencies all over the state asking for nominees to sit on the Coordinating Committee. David West spent time traveling to various communities to speak directly to people at the regional Native health corporations to ensure their support for the program. David was very enthusiastic about the “healing” experience in rural Alaska and made it clear to potential participants that this program came “from the people.”

Based on responses from the regional health corporations, 10 members were chosen to sit on the coordinating council – one representative from each region. Each member was actively involved in rural human service work and committed to higher education. Members of the initial committee were:

Lydia Abbot – Kodiak  
Tiny Devlin – Anchorage  
Nikki Guthrie – Tanana  
Reggie Joule – Kotzebue  
Ole Lake – Marshall

Ida Oleman – Barrow  
Flora Paukan – St. Mary's  
Priscilla Peele – Sitka  
Ray Titus – Tok

The hope for the Coordinating committee was that they would oversee the program, advise faculty and staff on curriculum, instructional issues, and inclusion of elders, and “give vision to the process” (Scott). After several name changes, the original Coordinating Committee became known as the Coordinating Council.

It was a challenging process to solidify the role of the Council. Nettie Scott recalls that the council struggled with racism, white bureaucracy, and distrust of the Western-based university system. However, the group did pull the program together. Many people have expressed the sentiment, that “this committee has been an essential ingredient in the success of this Project. Each member has contributed wisdom, vision, and integrity to the mission of the Project” (Hampton p.2). These contributions that started with the first Council members have continued through each new Council member over the past 14 years.

The Coordinating Council met for the first time August 28-21, 1990 to begin to identify the training needs of rural human service workers. The Council also wrote the mission statement for RHS – a document that was to guide the Council and the University Committee as they worked to develop the curriculum. The mission statement developed by the Committee at this first meeting continues to guide the program today.

#### *RHSCP Mission Statement*

*The Rural Human Services Training Certificate Project will build on Native traditional values. This program will validate respective traditions to facilitate the healing of people in communities. The training will acknowledge strengths and natural talents of village human service providers. The curriculum will be holistic in nature to support building healthy families and communities. The curriculum will enhance self-awareness and personal development. This will be a consecutive educational series building on statewide certification and leading towards and AA degree integrating into a Bachelor's degree program.*

As part of the process to develop a vision of what RHS – as a Native culture-based program – could and should look like, Germaine and Lionel Kinunwa, consultants to the CRA, worked with the University and Coordinating Council groups. One of the key decisions to come out of that process and the discussions among the Council was that elders must be included in the training process and in the development and delivery of the curriculum. Because this was to be a state-wide program, it was decided that elders should be rotated in different sessions so that each

region would have their elders represented at some point. Another extremely important decision was that Native human service workers should be hired to teach the classes in conjunction with the university faculty. "If this was to be a village based or community based process it had to be delivered by village based workers," recalls Laurie Marum.

### *Consulting with Stakeholders*

The next step in the development process was to hold a meeting to talk directly to those people most likely to take part in a program like RHS. The University committee brought together a group of potential consumers – people who were already working in human services in rural Alaska and would benefit from additional training. This group met at Meier Lake, Alaska from September 18-21, 1990. The development group (which by now included members of both the University Committee and the Coordinating Council) hoped to use the opinions and input of the consumer group to "identify training needs based on actual job-related duties" of rural human service providers (Hampton p.3). Members of the Coordinating Committee chose representatives from their respective regions based on four criteria:

1. Village-based direct service worker
2. Respected worker who can articulate what they do
3. Person committed to personal growth
4. Person committed to the training of village workers

Participants at this meeting included:

Irene Arnold – Tanacross  
Zita Chikigak – Alakanuk  
Flora Demoski – Galena  
Penny Ewan – Gakona  
Svetlana Silvestrov – Nome  
Samual Simmons – Barrow  
Ardyce Turner – Bethel

Sam Gosuk – Togiak  
Ella Jones – Kotzebue  
Lynn Kvamma – Aniak  
Tom Morrison – Hydaburg

During this meeting, the group put together three working documents to help guide the curriculum developers. The first document was a Scope of Practice for Rural Human Service Providers that listed the **actual** duties regularly performed by rural human service providers. Based on this list of actual duties, the group created a generic job description for a Rural Human Service worker. The group also identified 10 courses they believed were the most relevant for meeting the realistic training needs of potential consumers of the proposed certificate. Also key to this meeting were extensive discussions about the qualifications of instructors, the delivery of courses, and funding for students (Hampton p.3). Given the manner in which RHS was eventually structured – with it's emphasis on Alaska Native instructors, Alaska Native teaching and learning styles and full funding for those whose job required RHS training, it is clear that the suggestions of the Consumer group were taken very seriously.

A third meeting was held to present the proposed certification training program to Directors of human service agencies and to get input from those directors about what they would like to have included in such a training program. Twenty-two directors attended the Anchorage meeting although no travel funds were provided to them.

### ***Reviewing Past Programs***

In addition to hearing directly from many people who would be directly effected by the new training program, the development group carefully reviewed other training programs in Alaska, Canada, and the lower 48 that might help them to structure the program delivery and content. It was important to the development group that they not "re-invent the wheel" (Hampton p.5). To help them in this effort, they hired Alvina Fowler, a human service provider in the interior and a psychology major from UAF to review existing programs and curriculum that would help them develop the new program. Some of the programs reviewed included various community development handbooks, materials and training presented by the DMHDD, existing courses taught

at University of Alaska, personal growth curriculum developed by Laurie Marum, curriculum materials developed by Germaine and Lionel Kinunwa from Walks the Traditional Intervention Services.

An important model for the emerging RHSCP was the Family Systems Training. The development group discussed the overall success of Family Systems Training and the programs' particular success with including Native men in their training programs. With a good record of accomplishment of success, Family System Training was considered by the development group as an important model for the RHSCP.

The other highly successful program model was the Community Health Aide Program, which was already creating well-respected, well-trained physical health paraprofessionals in rural communities. While the RHS development discussions were taking place in and around the University of Alaska Fairbanks, Michael Graf of Tanana Chiefs Conference wrote a position paper advocating for a mental health training program designed around the CHA model (Marum, Graf). The structure of 3-week intensive sessions woven into time "one the job" at home that has become so successful for RHSCP, is almost identical to the CHA training program. That many people, from different organizations and with difference experience were all able to recognize the weaknesses of the old rural human service model and propose such similar changes speaks to not only the real need for change, but also that the proposed changes were heading in the right direction.

During an intensive two-week meeting that was held from January 4-20, 1991 the University Committee, the Project director, the Kinunwas of Walks the Nation, Tiny Devlin, and Susan Soule collaborated on formulating a plan for curriculum development.

The work of actually developing courses and delivery methods was left largely to the Coordinating Council with facilitation support from the University Committee. The Coordinating Council met regularly throughout the Spring of 1991. Although some members "felt they had no

experience in curriculum development since this had always been done for them," through the process of re-defining an appropriate curriculum for rural Alaska "it soon became clear that their knowledge and wisdom was vast." (Hampton p.64). Based on the suggestions of the stake-holders compiled at the many planning meetings as well as the knowledge and experience of the Coordinating Committee, ten core topics were selected to form the basis of the first RHSCP courses. Mary Hampton's initial evaluation of the RHSCP development process concluded that the curriculum for the first RHSCP session was "developed from the hearts and minds of the Native people who [would] be its teachers and students." (Hampton p.64). The courses would provide students with 21 credits and were:

1. Alaska Native Family Systems
2. Issues of Personal Development in Human Service Delivery
3. Development of Cross-Cultural Bridging Skills
4. Process of Community Change
5. Traditional Native Counseling I
6. Alaska Native Principles and Values
7. Understanding Addictive Processes
8. Networking, Negotiations, and Conflict Resolution
9. Traditional Native Counseling II
10. Rural Human Service Practicum

The curriculum development committee had several key philosophies from which they did not swerve in the development of these courses. Mary Hampton's report on the activities of the first planning year details some of the thought processes that went into the careful development of appropriate courses and course delivery. The RHSCP curriculum was based on a set of specific rationale developed to ensure that the program always met the needs of those it was designed to serve. The five components of the rationale are as follows:

#### Reliance on Native Traditions

- Elders are included as key instructors in order to teach proper and respectful attitudes for human service workers.
- Courses will be adapted to be region-specific and these adaptations will be considered "supplemental curriculum"

### Curriculum is Holistic

- Curriculum must address all four aspects of Native thought processes: spiritual, emotional, mental, and physical
- Curriculum is “heart-centered” in order to address the needs of the people

### Community Centered

- In rural areas, the fundamental unit is not the individual, it is the family and the community
- Training must address the inter-connections between people, between people and the environment, and ultimately with the spiritual realm

### Oral Tradition/Language Issues

- Traditional teaching method in Native communities is storytelling and oral history
- This resource will be included in this curriculum along with the textual readings

### Village-based Action Learning

- Curriculum is flexible
- Content areas will address the situations and people in need at the moment
- Teaching methods will be appropriate to the learning styles of the students
- Curriculum will continue to evolve as the needs of its students and the needs of the villages change

### **RHS in the communities**

While the university group and Coordinating Council worked hard to solidify a curriculum that met the needs of villages, providers, and the university, Susan Soule at the DMHDD sent out the Rural Human Services Systems Project Request for Proposals to rural mental health centers, substance abuse programs, and other rural programs whose basic task was to provide human services. If an agency received one of these RHS grants they would receive enough funds to hire a minimum of 3 village-based positions for at least ½ time each. And every new counselor was required to attend the RHSCP training sessions – for which travel and training costs were included in the grant. In order to ensure that these funds would go directly to ease the mental health crisis in rural communities, agencies from Anchorage, Fairbanks, Juneau, and the Matanuska-Susitna region were specifically excluded from the program.

In the first year of the program (fiscal year 1992) five agencies received funds to hire counselors for 40 villages. Forty-four students formed the first training cohort.

## Trying out the New Curriculum

Once the Council and the RHS staff and faculty had the curriculum, a three-week pilot session was held at the Tanana Chiefs Conference building in Fairbanks in early 1991. While this pilot session was designed as an opportunity to test the academic aspects of the new program, several key traditions emerged out of those three weeks.

Neal and Geraldine Charlie, elders from Minto were actively involved with the session. Their involvement in RHS continues through today and they have become an integral part of RHS – almost acting as grandparents for the entire program. Larry Roberts, who taught one of the courses in this pilot session remembers how Neal and Geraldine gently, but firmly, emphasized the importance of patience – especially among the instructors and brought an appreciation of prayer to group.

It was during this pilot session that the RHS tradition of talking circles first emerged. The talking circles allowed everyone in the group to share their thoughts and experiences at their own pace and their own time. This process was incredibly important to the participants who were learning a great deal about themselves through the new curriculum. Although the instructors had not intended talking circles to be a part of the curriculum or course delivery, it became apparent that they were crucial to helping the participants talk about whatever they needed to. This set the tone for the session – that the participants and the elders owned this program and “if they needed to talk about something they did it!” (Roberts)

One of the most popular RHS traditions also emerged during this pilot session – the Airplane Song. The Charlies sang the Airplane Song at the end of the session as a way of wishing everyone a safe journey home. This tradition has continued on through many RHS sessions and events.

Two key results came out of the pilot session that would set the tone for every RHS session to come. The participants emerged from the pilot session with a sense that a lot of important work had been completed, crucial issues had been discussed, and the group had bonded together. Anyone who has been through a later RHS session will most likely state that the bonding among the cohort is one of the most valuable experiences in the training program. The other important result was that, thanks to the work of the Charlies and the other elders participating in the instruction, the academic instructors finally had a model of how elders can and should be active participants in the academic curriculum.

### **RHSCP: Session One**

Before the first full RHSCP session the program underwent several staff changes. David West left his position as Project Director. Bryan MacLean was hired in October 1991 to be the new faculty coordinator. A state-wide director was in place to handle the non-academic aspects of the program, and an Administrative Assistant, Mary Jane Derendoff was working with the program. Mary Jane soon moved into the statewide program coordinator position in December of 1991 upon the resignation of the previous coordinator.

One of Bryan and Mary Jane's first major tasks was to plan and implement the first official training session. The first stumbling block was the RHSCP curriculum had yet to be approved by the University of Alaska. Due to differences of opinion among RHSCP faculty and the University of Alaska Faculty Senate Curriculum Review Committee about the completeness of the curriculum, the courses for the first training session had to be offered as special topic courses through the Department of Behavioral Sciences and Human Services. By all accounts, Bryan was instrumental in getting the RHSCP curriculum through the University bureaucracy and eventually approved by the University of Alaska Board of Regents. Mary Jane took on the enormous logistical and organizational challenges involved in the new understanding.

Formal course delivery began in February 1992 with 44 students representing 5 different regions of Alaska. Three courses were taught: Issues of Personal Development in the Delivery of Rural Human Services, Cross-Cultural Bridging Skills, and Alaska Native Family Systems. The first session was held at a lodge at Lake Louise near Glenallen, Alaska. As with all first attempts, there were a few wrinkles to be ironed out during that first session. Participants in the training program were all there because it was now a requirement of their employment. So, although all of them had a personal interest and commitment to being village-based counselors they wouldn't necessarily have chosen to do their training in a three-week intensive session at an isolated lodge away from their families. And the staff and faculty were also doing this kind of training for the first time. As several participants and staff members at that first session have commented, the isolated location and close quarters, while at first unappealing, turned out to be the best way to sort through all of the issues.

On the lighter side of the stress of the first session is a story related by Maudy Sam and Violet Burnham who were both students in the first cohort. They recalled seeing the rooms at the lodge for the first time and realizing that at least some of their group from Galena were going to have to sleep on the top bunks of bunk beds! Deciding that they did not trust the top bunks, they called Bryan MacLean into their room and insisted that he test out the top bunks and make sure they were safe for the women. Both women laughed out loud telling this story. They had never met Bryan before and were so impressed that he had gone along with their crazy suggestion.

Maudy and Violet seem to typify RHS participants. Both had a passion for counseling born from personal experience and the desire to help their communities. Violet had a background in social work, but Maudy had no formal counseling training prior to this RHS session. While several faculty members insist that the participants in the first cohort, including Maudy and Violet, had a lot of influence on the way in which RHS developed, neither woman would go that far in her own

responses. However, Violet thought their vocal input into the session “let other people [other participants] know that they had a voice. People had been used to having someone else tell them what to do.” Besides finally having a training program that recognized the real needs of Native mental health providers and their communities, the clear message that their voices and opinions were needed and respected in each and every training session has helped to contribute to the personal and professional growth of RHS participants.

The exhausted cohesion experienced by the participants in the TCC pilot training session certainly carried through into the Lake Louise session – with an emphasis on the cohesion. As mentioned above, the isolation and cramped quarters were probably not what the participants would have chosen themselves, but the conditions helped the first cohort to bond on many levels. They were able to help each other through tough personal issues and through the process of personal growth. “Their bond has helped them to keep working together and collaborating even though they are spread out over the state” (Burnham).

## **Conclusion**

The personal bonds created during RHSCP sessions and the way in which those bonds have helped current rural human service providers network, collaborate, and support each other is one of the important legacies RHSCP has left on rural human services in the state. RHSCP has taken human services in Alaska from a system built around a Western model that ignored Alaska Native culture and the needs of Alaska Native people and an isolating experience for providers who were itinerant and were never able to form a bond with a community and is making it into a system that in which providers are grounded in their Native culture, knowledgeable in Western mental health practices, are closely bonded with a community, and who have a statewide support system of friends and colleagues who can help them through tough times. The goal of changing the human services system in Alaska, articulated at the Rural Mental Health Training Conference

in March 1989 has been achieved. The question posed at that conference, "Can a rural mental health system be built at the village level, around a staff of village people?" has been answered with a resounding YES.

## References Cited

### *Documents:*

Graf, Michael: Why Village Counselors Fail (And One Thing That Can Be Done About It) (1989?)

Hampton, Mary: Rural Human Services Certificate Project: Summary Report Prepared for the Division of Mental Health and Developmental Disabilities (1991)

Schichnes, Janet: A Counselor in Every Village: A Report on the Progress of the Rural Human Services Program (2000)

Soule, Susan; Minton, Barbara; DeMars, Debbie: Rural Mental Health Training Conference (1989)

### *Interviews:*

Violet Burnham

Laurie Marum

Gerry Mohatt

Larry Roberts

Maudy Sam

Nettie Scott

Susan Soule

(Other early participants were contacted but unavailable for interviews.)